


EVOLIS MAINTENANCE AND PE LOG

St. Joseph Medical Center Tacoma, WA
 St. Francis Hospital Federal Way, WA

St. Clare Hospital Lakewood, WA
 St. Anthony Hospital Gig Harbor, WA

St. Elizabeth Hospital Enumclaw, WA
 PSC

Month: _____ Year: _____	Serial Number: 916370039																														
DAILY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Instrument/PC Shutdown/Startup																															
Check/Refill Sys Liquid																															
Check/Empty Liquid Waste																															
Check for bubbles in Tubing																															
Check/Empty Tip Waste																															
Check for/Clean Liq Spills																															
Check Vacuum Trap Flask																															
Clean pipettor head																															
Tech ID																															
WEEKLY																															
MNTC Washer Clean. asy																															
Clean Internal Work Areas																															
Clean Instrument Surfaces																															
Disinfect all Racks																															
Disinfect Plate Carriers																															
Disinfect Plate Carriers																															
Tech ID																															
MONTHLY																															
Disinfect Syst. Liquid Cont.																															
MNTC Washer Disinfect. asy																															
MNTC Washer Clean. Asy																															
Clean Plt Transport/RT Inc																															
Inspect Pipettor System																															
Inspect Reagent Rack																															
PE PlateTransport check																															
PE Photometer verification																															
Fluidics PE Panel																															
Instrument/ PC Shutdown/Startup																															
Tech ID																															
AS NEEDED																															
Clean up large spills																															
Washer manifold maint.																															
Vacuum system maint.																															
Replace lamp assembly																															
Clean/replace optical filter																															
Tech ID																															

DOCUMENT APPROVAL Purpose of Document / Reason for Change:			
New Document			
<input type="checkbox"/> No significant change to process in above revision. Per CAP, this revision does not require further Medical Director approval.			
Committee Approval Date	<input type="checkbox"/> Date: <input type="checkbox"/> N/A – revision of department-specific document which is used at only one facility	Medical Director Approval (Electronic Signature)	 1/22/13