|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Site: |  |  |  |  |  |  |  |  |  |  |  |  |
| Serial Number: |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **JAN** | **FEB** | **MAR** | **APR** | **MAY** | **JUN** | **JUL** | **AUG** | **SEP** | **OCT** | **NOV** | **DEC** |
| **MONTHLY** - Run QC  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |
| **New Lot/Shipment Reagents** - Run QC |  |  |  |  |  |  |  |  |  |  |  |  |
|   |
| **6 MONTH** |  |  |  |  |  |  |  |  |  |  |  |  |
| Cal Ver (if used for routine patient results) |  |  |  |  |  |  |  |  |  |  |  |  |
| Method Comparison (if used for back-up) |  |  |  |  |  |  |  |  |  |  |  |  |
| External Electronic Simulator |  |  |  |  |  |  |  |  |  |  |  |  |
| *Record result: Pass or fail?* |  |  |  |  |  |  |  |  |  |  |  |  |
| Thermal Probe Check |  |  |  |  |  |  |  |  |  |  |  |  |
| *Record thermal probe check result \*\*acceptable is <= 0.1* |  |  |  |  |  |  |  |  |  |  |  |  |
| *Thermal probe result acceptable? Yes or No* |  |  |  |  |  |  |  |  |  |  |  |  |
| CLEW Update |  |  |  |  |  |  |  |  |  |  |  |  |
| *Record CLEW update version* |  |  |  |  |  |  |  |  |  |  |  |  |
|   |
| *\*\* Attach copies of the external electronic simulator & thermal probe to the back of this log* |
| Reviewed by: |  |  |  | Date: |  |  |  |  |  |  |