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|  | |  |  |  |  | | --- | --- | --- | --- | | **BIOLOGICAL INDICATOR TEST RESULT LO** | | | **G** | | SOP | DATE | Version | PAGE | | 800.02 | [date] | 1 | 1 of 1 | |

Autoclave Location: Building/Room \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Autoclave Model & Make: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Responsible Person Name: Responsible Person Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Biological Indicator (BI) Type/Brand: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The purpose of this log is to maintain documentation of autoclave use

Original records, including test pack card, to be maintained by Responsible Individual.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Date | Operator Name | BI Lot Number | BI Expiration Date | Cycle Description | Incubation Time | Results Pass/Fail | Comments  Or  Corrective Action |
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