

Government of South Australia

Blood Fridge Maintenance Record - Intech



Fridge Identification	Hospital Name:							sset	No:					Month: Year:											•				
	n / Ju	ine /	Sept	/ De	ec						6 N	/lonth	onth Check Due (circle): March / Sep																
Daily maintenance checks (F	3	4	56	6 7	8	9	10	11	12	13	14 1	5 1	16 17	18	19	20	21	22	23	24 2	25	26 2	7 28	3 29	30 3				
Record blood fridge temp from digital display - Acceptable Range 2–6° C																													
Check EXPIRY. Return near expiry O Neg & unused matched blood to Lab																													
Initial of staff performing checks																													
Weekly maintenance checks (Refer to How to Guide)						1	2	2 3 4 5 SLS Criteria																					
Check this Maintenance Record sheet and Blood Registers for completion – follow up any missing entries														Corrective action MUST be taken – Log SLS Refer to Appendix 4 – SLS topic guide on Transfusion															
Initial of staff performing checks														Description									SLS No.						
Monthly maintenance checks (Refer to How to Guide)					Fai	✓	Date)		Ini	tials	5		Daily maintenance checks - not recorded 4 days per month															
Return unused bottled blood products with near expiry (<3 months) to Transfusion Lab														Daily maintenance checks - not recorded 2 consecutive days															
Check door seals and light function, any noise/vibrations, etc report to SA Pathology CTL															kly mair					· ·									
Clean inside blood fridge \rightarrow detergent \rightarrow 70% alcohol \rightarrow wipe with water															hly mai														
Check Alarm & Battery: Turn power off at main power switch. Ensure alarm light flashes, alarm sounds, remote alarm activates															nplete t		•												
3 Monthly maintenance checks (Refer to How to Guide) SEE ABOVE SCHEDULE															Ũ							d/maileo	d to	Lab					
Check INTECH Alarm – inform lab of test, insert INTECH PROBE into small container of															nthly m														
room temperature water for 2min. Confirm temperature outage with Lab High Alarm: Insert WHITE ALARM PROBE into a small container of room temperature water. Ensure alarm is activated as temp rises above 5.5°C															nthly m						•		to G	Guide)					
Low Alarm: Insert WHITE ALARM PROBE into a small container of ice water. Ensure alarm is activated as temp falls below 2.5°C														tify partner Lab & SA Pathology CTL. (Refer to How to Guide) . Pathology CTL Telephone no. 8222 3673 mb 040										01 1	20 8	07			
6 Monthly maintenance check (Refer to How to Guide) SEE ABOVE SCHEDULE Check Dual Temperature – compare upper and lower digital display temperatures. If														Problem Log i.e. Alarms and Temperature Use other side if required										ture	e Spikes				
difference is greater than 0.5 °C, notify Lab Paper Temperature Chart check: place a new chart into the recorder, ensure pen tip is in contact with			-										Date				quire			Prob	lem				Corre	ction A	ction		
aper, turn on chart recorder, run for 24 hours, nto ice slurry, confirm pen arm moves to 0 °C,	turn off mains power, observe if pen spikes. Place GREY PROB if not, report to Lab. Replace probe into aluminium block. Remov position plastic arm, send copy of chart to Lab.																												
/erification & sending docu	iments to partner Lab	\checkmark	✓ Name				Date	;		Initials			1																
Maintenance Check this Form fo	r incomplete actions. Log any SLSs																-			T 1817									
Or Quality Delegate Send* copy of this	form to partner Lab													VHEN TEMPERATURE CHART INSITU COMPLETE OCUMENTATION OVER PAGE (please turn over)															
NUM or Check if this form i	s complete & compliant. Check all SLS riteria' for all quality failures.																					ither Pa		,	ourie	er. Fax	or Fm		
Lab Staff Check if this Form per 'SLS Criteria' f	is complete & compliant. Check SLS logger or quality failures.														•••		•					chosen		•••					



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Blood Fridge Maintenance Record When Temperature Chart in Use



South Australian Public Hospitals Retention Disposal Schedule requires this form to be archived and stored for 20 years by the health unit Blood Fridge Maintenance Record BS41 B INTECH 2024

Fridge Ider		Asset No:											Month: Ye										Yea	Year:										
Daily mainte	nance checks (R	Refer to Blood & Blood Produ	ucts Manual)	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
Check ink pen i	s recording the temper	rature on the circular chart																																
Check & note reason/date of temp spike outside 2–6° C on chart. Log SLS																																		
Temperature chart in use please tick																																		
Initial of staff performing checks																																		
Weekly maintenance checks (Refer to Blood & Blood Products Manual)					<u> </u>	Week 1 2 3 4 5 Date SLS Criteria																												
Open recorder cover, remove chart, record end date/time/initial & check all is correct						(\checkmark) Corrective action MUST be take Refer to Appendix 4 – SLS topic guide																												
Write asset no, hosp, date/time inside stamp on new chart. Put ink pen in correct posit							(√)			_								Description										SLS No.						
Adjust to correct time if necessary. Ensure pen tip is touching chart. Close and lock co Initial of staff performing						(v)																												
														[]mi	Initials 2 Circular ch						Circular chart - not faxed/mailed to Lab													
Verification & Sending Documents to Partner Lab				\checkmark	INa	me				ale			1111	liais	5	3	3 Circular chart - lacks pen ink chart trace recording																	
Maintenance or Quality	Send* copy of this Fo	orm & all this month's circula	ar temperature														4	4 Circular chart – temperature spikes outside 2–6° C																
Delegate	charts on BSM02 to P	harts on BSM02 to Partner Lab					Notify partner Lab & SA Pathology CTL. (Refer to How SA Pathology CTL Telephone no. 8222 367															120	า รก	7										
NUM or EO/DON-M	Check all circular cha Check all SLS logged	arts & this form are complete d per 'SLS Criteria' for all qu	e & compliant. ality failures.																0,									OVE				/		
Lab Staff	Check all circular cha Check SLS logger pe	arts & this Form are comple ar 'SLS Criteria' for quality fa	e & compliant. illures.														P U: [rob se ot Date	len ther cop	n Lc side	og i if re	e. A quire and	lar ed	ms 	anc Pro	d Te	emp	era	either	Co		S Dn Ac		