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| **QS002: INCUBATOR PREVENTATIVE MAINTENANCE RECORD** | | | | | | | |
| Building/Room: |  | | | | | | |
| Incubator Model/Name: |  | | | | | | |
| Installation Date |  | Manufacturers’ Inspection/Service Dates |  |  |  |  |  |

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| Date | Operator  (initial) | Water Level[[1]](#footnote-1) | Temp’  (C) | CO2/N2 (%) | UV Func’1 | **Inspection & Maintenance**   1. Any visible signs of damage, wear or contamination? (2) Any adverse Event or Alarm or Non-conformity? (3) Any routine maintenance/service required? | | **Cleaning/Disinfection[[2]](#footnote-2)** | |
| Y/N | **If Yes record details and/or corrective action** | Y/N | **If Yes record details/reason** |
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1. Tick if OK [↑](#footnote-ref-1)
2. As per SOP by Responsible Person [↑](#footnote-ref-2)