BIOQUELL HPV DECONTAMINATION RECORD

FACILITY _____

DATE of DECON	ROOM #	LOCATION	Check Racks	CHEMICAL INDICATOR	BIOLOGICAL INDICATOR			COMMENTS	REVIEWED BY
			Wheels, locks, etc.	Record Highest Log Achieved (e.g., 2, 4 or 6-log)	18 HOUR **T**urbid/**C**lear	7 DAY **T**urbid/**C**lear	Final Status **P**ass/**F**ail		

Indicate room number and all locations that the chemical and biological indicators have been placed. Any indicator failure (i.e., CI = < 6-log reduction or BI turbidity) must be reported promptly to the Facility Manager and the decontamination cycle reevaluated. Facility Manager, or designee must periodically review results to ensure compliance with SOPs.