Make/Model: _____

Serial Number: _____

Last Date of Service: _____

CONSOLIDATED STERILIZER SYSTEMS

Date	Time	User or Operator ID	Contents of Load	Cycle Type	Sterilization Temp	Sterilization Time	Dry Time	Alarms	Comments	Was a biological indicator used?	Did the chemical indicate pass or fail?	What was the max. temp. that was reached?

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