

# Blood Fridge Maintenance Record

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 BS41B Sept 2018

Fridge Identification		Hospital Name:							Asset No										Month					Year												
<b>Daily maintenance checks</b> (See procedure on right)		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				
Record blood fridge temperature from digital display (Acceptable Range 2–6° C)																																				
Check temperature recording chart operation and for out of range temps or spikes (✓) (Document any out of range temps in Problem Log below)																																				
Check fridge for <b>red blood cells</b> that can be returned to the Transfusion Service (✓)																																				
Initials of staff member performing check (initials)																																				
<b>Weekly maintenance checks</b> (See procedure on right)		Week	1	2	3	4	5	<b>BLOOD FRIDGE MAINTENANCE PROCEDURES</b> (See CHSALHN Blood and Blood Product Inventory Manual for full procedure)																												
Check fridge for <b>bottled blood products</b> that can be returned (✓)		Date						<b>TEMPERATURE CHART [ CHECK DAILY – REPLACE WEEKLY ]</b> Weekly temperature chart (circular type)- Open cover, remove old chart. Check chart for out of range temperatures or spikes date and sign. Date new chart, identify fridge/hospital, sign and place on recorder. Ensure that day and time are correct with pen recorder position. Adjust if necessary. Ensure pen tip is touching chart. Close and lock cover. Other types of temperature charts – Check chart operation and conformance daily and change as required.																												
Change and Check temperature chart (✓)								<b>ALARM TEST [ PERFORM WEEKLY ]</b> Audible: Push test button and ensure audible alarm (e.g. beep or siren) is functioning. Visible: Push test button and ensure visible alarm (e.g. flashing light) is functioning. Power loss: Turn power off at wall switch or main switch if accessible. Ensure alarms function. Remote alarm: Push test button and ensure remote alarm system(s) is functioning. Send copy of Temperature Chart to Partnering Transfusion Laboratory																												
Temperature chart copy sent to Partnering Transfusion Laboratory (✓)								<b>ALARM HIGH AND LOW TEMPERATURE ACTIVATION CHECKS [ PERFORM MONTHLY ]</b> High and low temperature alarm checks MUST be performed monthly. Please handle probes carefully for the following checks (once completed carefully replace probe) <ul style="list-style-type: none"> <li>High temperature alarm: Remove probe from container. Insert into a small container of room temperature water. Ensure alarm is activated as temperature rises above 5.5°C.</li> <li>Low temperature alarm: Remove probe from container. Insert into a small container of iced water. Ensure alarm is activated as temperature falls below 2.5°C.</li> </ul>																												
Test all alarms to ensure correct functioning		Audible (✓)						<b>BATTERY BACKUP CHECK – [ PERFORM MONTHLY ]</b> <ul style="list-style-type: none"> <li>Turn power to blood fridge off, alarm should light up and sound</li> <li>Any spike on temp chart coinciding with power off/on must be reported to SA Pathology Calibration and Testing Laboratory (see Blood and Blood Product Inventory Manual) (See manufacturer instructions for non Sanyo / Panasonic refrigerator testing methods)</li> </ul>																												
		Visible (✓)						CORRECTIVE ACTION MUST BE TAKEN IF ANY BLOOD FRIDGE MAINTENANCE TEST FAIL																												
		Power Loss (✓)							<b>VERIFICATION</b>																											
		Remote Alarm (✓)							Copy Sent to Partner Transfusion Laboratory (must be monthly) _____ Date _____																											
Initials of staff member performing check (Initials)								Name of site Quality Delegate _____ Contact No. _____																												
<b>Monthly maintenance checks</b> (See procedure on right)		Task		Date		Pass (✓) / Fail (✗)		By (Initials)																												
Battery backup check						Pass...../ Fail.....																														
High Alarm activation check						Pass...../ Fail.....																														
Low Alarm activation check						Pass...../ Fail.....																														
Check door seals						Performed																														
Cleaned internally						Performed																														
<b>Problem log</b> Record problems, dates and corrective actions taken (continue on reverse if required) / Note SLS number if logged.																																				
<p>Blood fridge maintenance procedures must be performed according to the schedule above. Quality delegate or responsible person at site must review compliance and follow up as required.</p>																																				