Division of Comparative Medicine University of South Florida

Fixed Equipment Log Sheet Page #_____ of _____

) Tunnel Washer
733LS	East 733LS West GSS-R-6713ARB Bulk #1 Bulk #2 733LS-E 94	500 Rack Washer
	☐ 6000 Tunnel Washer ☐ 4600 Rack Washer ☐ IDRB ☐ LSS-590 [PCD
[733LS-E LSS 275 3700 Cabinet Washer	Atlantis EVO
MDD Atlantis EVO Rack Washer Arcadia Tunnel Washer Matachana SNA500 CPH 3700 Cabinet Washer		
Matachana Bulk Sterilizers #1 #2 Matachana SNA1000 Calypso CW LSS-590		
Tritones CLS System Standalone Active Blue		
Select facility and identify the fixed equipment (i.e., cage wash/autoclave) malfunction. Entries should state the problem, name of who identified it, Name of who called in and received confirmation #, the assigned service technician, and a narrative by the		
service technician of the correction action, and date problem resolved. Send all work requests to molivero@usf.edu		
Date		Name
	Problem (describe):	
	Service Request Confirmation # :	
	Service Technician:	
	Narrative of Correction:	
	Date Resolved:	
	Problem (describe):	
	Service Request Confirmation # :	
	Service Technician:	
	Narrative of Correction:	
	Date Resolved:	
	Problem (describe):	
	Service Request Confirmation # :	
	Service Technician:	
	Narrative of Correction:	
	Date Resolved:	
	Problem (describe):	
	Service Request Confirmation # :	
	Service Technician:	
	Narrative of Correction:	
	Date Resolved:	