Weekly cleaning and inspection record

Transducer

Facility	**Location**
Transducer model	**Manufacturer**
Serial	**Install date**

Weekly cleaning and inspection and cleaning Indicate Pass/Fail. Should be performed in addition to daily safety checks and infection control.

Date	QC performed by	Inspect and clean				Corrective action? (Y/N)
		Cable	Lens	Connector	Case	

Corrective action log File corrective action service reports under the designated tab.

Date	Comments

Download more forms at www.learningconnection.com/ultrasound-accreditation-assist.

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