



**Duke**Medicine

Division of Cellular Therapy

**DOCUMENT NUMBER:** ABMT-EQUIP-001 FRM9

**DOCUMENT TITLE:**

Equipment Maintenance and Repair Log FRM9

**DOCUMENT NOTES:**

**Document Information**

**Revision:** 02

**Vault:** ABMT-Equipment-rel

**Status:** Release

**Document Type:** Equipment

**Date Information**

**Creation Date:** 05 Oct 2015

**Release Date:** 10 Nov 2015

**Effective Date:** 10 Nov 2015

**Expiration Date:**

**Control Information**

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**Owner:** DRAGO001

**Previous Number:** ABMT-EQUIP-001 FRM9 Rev **Change Number:** ABMT-CCR-125



## INSTRUCTIONS

1. Input date activity in **Date** field.
2. Input type of activity in the **Type of Activity Needed (calibration, PM, repair)** field.
3. Input whether equipment taken out of service in **Taken Out of Service (Y/N)** field.
4. Input person or organization performing activity in **Activity Performed by** field.
5. Input date performed **Date Performed** field.
6. Input whether or not revalidation or recalibration required in the **Revalidation or PQ Required (Y/N)** field.
7. Input initial of supervisor who **Reviews Collections Since Last Service** following repair of equipment.
8. Input date placed back in service in the **Date Placed Back in Use** field.
9. Input initials or name of supervisor reviewing activity in **Supervisor Review** field.

**Signature Manifest**

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All dates and times are in Eastern Time.

**ABMT-EQUIP-001 FRM9 Equipment Maintenance and Repair Log FRM9**

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**Document Release**

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