

Oklahoma VFC Monthly Refrigerator Temperature Log



Month/Year: _____/_____

Refrigerator Location/ID: _____

VFC Pin: _____

Clinic: _____

Day of the Month	Time	Staff Initials	≥36° Min	≤46° Max	*Take action immediately if temperature is too high or low! Alarm/Action Taken
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Instructions for completing the monthly temperature log.

1. Complete the top of the form with the month/year, refrigerator id/location, VFC Pin, and name of clinic.
2. Record min/max temperatures daily at opening of the clinic in Fahrenheit.
3. Clear min/max temperature daily after recording the temperatures on the temperature log.
4. Download data logger data regularly and save to computer file. (Temp logs and data logger information must be kept for 3 years.)
5. For out of range temperatures refer to the VSIR Decision Tree for guidance and action to take.

Name of person completing form: _____

Signature: _____

Date: _____

Oklahoma VFC Monthly Refrigerator Temperature Log



Month/Year: _____/_____

Refrigerator Location/ID: _____

VFC Pin: _____

Clinic: _____

Day of the Month	Time	Staff Initials	≥36° Min	≤46° Max	*Take action immediately if temperature is too high or low! Alarm/Action Taken
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					

Instructions for completing the monthly temperature log.

1. Complete the top of the form with the month/year, refrigerator id/location, VFC Pin, and name of clinic.
2. Record min/max temperatures daily at opening of the clinic in Fahrenheit.
3. Clear min/max temperature daily after recording the temperatures on the temperature log.
4. Download data logger data regularly and save to computer file. (Temp logs and data logger information must be kept for 3 years.)
5. For out of range temperatures refer to the VSIR Decision Tree for guidance and action to take.

Name of person completing form: _____

Signature: _____

Date: _____

Oklahoma VFC Monthly Freezer Temperature Log



Month/Year: _____/_____

Freezer Location/ID: _____

VFC Pin: _____

Clinic: _____

Day of the Month	Time	Staff Initials	Min	≤5° Max	*Take action immediately if temperature is too high or low! Alarm/Action Taken
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Instructions for completing the monthly temperature log.

1. Complete the top of the form with the month/year, freezer id/location, VFC Pin, and name of clinic.
2. Record min/max temperatures daily at opening of the clinic in Fahrenheit.
3. Clear min/max temperature daily after recording the temperatures on the temperature log.
4. Download data logger data regularly and save to computer file. (Temp logs and data logger information must be kept for 3 years.)
5. For out of range temperatures refer to the VSIR Decision Tree for guidance and action to take.

Name of person completing form: _____

Signature: _____

Date: _____

Oklahoma VFC Monthly Freezer Temperature Log



Month/Year: _____/_____

Freezer Location/ID: _____

VFC Pin: _____

Clinic: _____

Day of the Month	Time	Staff Initials	Min	≤5° Max	*Take action immediately if temperature is too high or low!
					Alarm/Action Taken
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					

Instructions for completing the monthly temperature log.

1. Complete the top of the form with the month/year, freezer id/location, VFC Pin, and name of clinic.
2. Record min/max temperatures daily at opening of the clinic in Fahrenheit.
3. Clear min/max temperature daily after recording the temperatures on the temperature log.
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Name of person completing form: _____

Signature: _____

Date: _____