cpsa

ENDOSCOPE REPROCESSING TRACKING LOG

Disinfectant product name: _____ MEC test strip product name: _____

Date	Scope identification	Physician using scope	Patient identification	Reprocessing staff initials	Disinfectant lot #	Disinfectant expiry date	MEC test quality control result (if performed)	MEC test result (pass/fail)	Leak test result (pass/fail)	Total soak time	Temperature of disinfectant	Rinse occurred (yes/no)