



Robert Wood Johnson
Medical School

Determine Temperature Log

New Jersey Rapid HIV Testing Support Program

Location

Somerset, NJ 08873

Fax: (732) 235-9012

Room Thermometer Expiration: _____

SITE NAME:

SITE:#

MONTH/YEAR:

DIVISION:

Refrigerator Thermometer Expiration: _____

DATE	TEST KITS	KIT CONTROL	Operator
	2°-30° C (36°-86° F) ROOM (Storage) (Min/Max)	2-8°C (36°-46° F) REFRIGERATOR (Min/Max)	
1.	/	/	
2.	/	/	
3.	/	/	
4.	/	/	
5.	/	/	
6.	/	/	
7.	/	/	
8.	/	/	
9.	/	/	
10.	/	/	
11.	/	/	
12.	/	/	
13.	/	/	
14.	/	/	
15.	/	/	
16.	/	/	
17.	/	/	
18.	/	/	
19.	/	/	
20.	/	/	
21.	/	/	
22.	/	/	
23.	/	/	
24.	/	/	
25.	/	/	
26.	/	/	
27.	/	/	
28.	/	/	
29.	/	/	
30.	/	/	
31.	/	/	

Please use a new sheet each month.

Please record the minimum → maximum temperatures recorded each day

SECTION 2.7.5