## **Quarterly Test Sheet - Ultrasonic Cleaner (SHTM 01-05)**

To be filled in along with Daily/ Weekly Test Sheet (FAC414-092.01) to complete a quarterly test.

Tests to be carried out in accordance with SHTM 01-05 Part B.

#### Table 1 - Record details

Hospital/ Location	Week beginning	Week number	
Department	Ref number	Serial number	

#### **Verification of Calibration - Time Check**

# **Verification of Calibration - Temperature Check**

Table 2 - Verification of calibration - time check.

Table 3 - Verification of calibration - temperature check.

Set time	Indicated time	Measured time	set/	Variance set/ measured	Pass/ Fail		Measured temp (°C)	set/	Variance set/ measured (°C)	Pass/ Fail

#### **Test for Ultrasonic Activity (Foil Test)**

Table 4 - Test for ultrasonic activity (foil test)

	Strip 1	Strip 2	Strip 3	Strip 4	Strip 5	Strip 6	Strip 7	Strip 8	Strip 9
% Erosion									
Comments									

#### **Frequency/ Power Meter Readings**

Table 5 - Frequency/power meter readings. Calibrated meter should be used and manufacturer's instructions for use should be followed

	Position 1	Position 2	Position 3	Position 4	Position 5	Position 6	Position 7	Position 8	Position 9
Probe insertion depth									
Frequency (Hz)									
Power (%)									

## **Clean Efficacy Test by Residual Soil Detection**

Table 6 - Clean efficacy test by residual soil detection (follow manufacturer's instructions for use)

Type and batch	
number of test soil	
Soil detection	
method	
Test result	Pass/ Fail

### Foil Strip / Meter Positions

Table 7 - Foil strip/ meter positions

1	4	7
2	5	8
3	6	9

### **Test Outcome**

#### Table 8 - Table to record test outcome

Test result	Satisfactory/ Unsatisfactory	Cleaner fit for use?	Fit/ Unfit
Competent Person (Decontamination)		User	
(CP(D))			
Date		Date	