

Document Title:

Small Steam Sterilizer with
Type-B or S Cycles Logbook
Scottish Health Technical
Memorandum (SHTM) 01-05

Document Ref:

FAC414-051.01

Version:

V2

Logbook details

Hospital/ Location:	
Department:	
Make:	
Model:	
Serial Number:	
Reference Number:	
Logbook Start Date:	
Logbook End Date:	

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Autoclave Details

This logbook should only cover one year from the start date. Afterwards, it is to be retained for records and replaced with a new logbook.

Forms and Definitions

Table 1 - List of forms included in or associated with this logbook, their definitions, and reference number

Name of form	Form description	Form reference number
Plant Test History Record	A record of all routine testing for a year	FAC414-051.01
Plant History Record	A record of faults/ maintenance	FAC414-051.01
Production Log Sheet	A record of all production cycles	FAC414-051.01
Daily/ Weekly Test Sheet	Daily/ Weekly test sheet covering one week's tests	FAC414-051.02
Quarterly Test Sheet A	Competent Person Decontamination (CP(D)) Quarterly test sheet	FAC414-050.03
Quarterly Test Sheet B	CP(D) Quarterly test sheet	FAC414-050.04
Annual Test Sheet	CP(D) Annual test sheet	FAC414-050.05

Note 1: Tests to be carried out in accordance with SHTM 01-05 Part B.

Personnel

Table 2 - Personnel details

Role	Name/ Organisation	Tel No.
Management		
User		
Designated Person/ Decontamination Lead		
Operator(s)		
Authorising Engineer (Decontamination)		
Authorised Person (Decontamination)		
Competent Person(s) (Decontamination)		
Competent Person(s) (Decontamination)		
Competent Person (Pressure Systems)		
Infection Control Doctor/ Microbiologist (Decontamination)		

Note 2: The personnel named should have appropriate qualifications/ training/ registration as required for the role.

Pressure Vessel

Pressure Systems Safety Regulations 2000 and Pressure Equipment (Safety) Regulations 2016.

This section is to be filled in by the Competent Person (pressure systems).

Table 3 - Inspection results

Written scheme of inspection exists/ is suitable	
Date inspection carried out	
Date inspection expires	
Inspected by	
Result of examination/ comments	

Authorising Engineer (Decontamination) Review

Table 4 - Review details

Date	Comment on review	Signature



Plant Test History Record

Daily/ Weekly Test Record

Table 5 - Record of daily/ weekly tests

Week no.	Date of weekly test	Tester initials	Week no.	Date of weekly test	Tester initials	Week no.	Date of weekly test	Tester initials	Week no.	Date of weekly test	Tester initials
1			14			27			40		
2			15			28			41		
3			16			29			42		
4			17			30			43		
5			18			31			44		
6			19			32			45		
7			20			33			46		
8			21			34			47		
9			22			35			48		
10			23			36			49		
11			24			37			50		
12			25			38			51		
13			26			39			52		

Quarterly Test Record

Table 6 - Record of quarterly tests

Week no.	Quarterly test date	Tester initials		Week no.	Quarterly test date	Tester initials		Week no.	Quarterly test date	Tester initials

Annual Test Record

Table 7 - Record of annual test

Week no.	Annual test date	Tester initials		Week no.	Annual test date	Tester initials		Week no.	Annual test date	Tester initials



Plant History Record

Table 8 - Table to document any fault history and maintenance history associated with the machine (print extra sheets as required)

Date	Cycle no.	Fault no.	Details of fault (if applicable)	Fault reported by (if applicable)	Maintenance record (details of fault repair, Planned Preventative Maintenance (PPM), periodic test)	Date (fault repair)	Carried out by



Production Log Sheet

Table 9 - Production log sheet (print extra sheets as required)

Date	Cycle number	Batch number	Cycle selected	Description of load	Cycle pass?	Printout/ chart checked ok?	Comments and operator initials
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	
					Yes/ No	Yes/ No	