



# Cold Chain Management Checklist (Continuous) - Temperature monitoring of refrigerated medications

## Temperature Monitoring Equipment & Calibration

Ensures the accuracy and reliability of temperature monitoring devices.

**Temperature Monitoring Device Serial Number:**

**Last Calibration Date:**

**Next Calibration Date:**

**Calibration Accuracy ( $\pm$  °C/°F):**

### Device Type (e.g., Data Logger, Thermometer):

- ☐ Data Logger
- ☐ Digital Thermometer
- ☐ Max/Min Thermometer
- ☐ Other


### Details of Last Calibration (e.g., standards used, technician):

Write something...

### Calibration Standard Used:

- ☐ NIST traceable
- ☐ Manufacturer's Recommendation
- ☐ Other - Specify

### Calibration Certificate (if applicable):

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## Temperature Recording & Documentation

Details processes for recording temperatures and maintaining accurate records.

### Temperature Recording Time

### Temperature Reading (°C/°F)

Enter a number...

### Humidity Reading (if applicable) (%)

Enter a number...

### Temperature Status

- ☐ Within Range
- ☐ Outside Range - Minor
- ☐ Outside Range - Major

### Comments/Observations (e.g., unit noise, ice build-up)

Write something...

### Date of Recording

Enter date...

### Recorder Type

- ☐ Manual Log
- ☐ Digital Data Logger
- ☐ Remote Monitoring System

### Explanation for Out-of-Range Temperatures (if applicable)

Write something...

## Refrigeration Unit Performance

Focuses on the functionality and maintenance of the refrigeration unit itself.

**Refrigeration Unit Serial Number:**

Enter a number...

**Ambient Room Temperature (°C):**

Enter a number...

**Refrigeration Unit Temperature (°C):**

Enter a number...

**Temperature Set Point (°C):**

Enter a number...

**Time of Temperature Reading:**

**Unit Operating Status:**

- ☐ Normal Operation
- ☐ Audible Alarm Present
- ☐ Visual Alarm Present
- ☐ Unit Not Operating

**Notes/Observations (e.g., unusual noises, frost buildup):**

Write something...

### Defrost Cycle Status:

- ☐ Not Due
- ☐ In Progress
- ☐ Just Completed

### Last Maintenance Date:

Enter date...

## Medication Storage & Placement

Addresses proper medication storage practices within the refrigerated unit.

### Minimum Acceptable Temperature (degrees Fahrenheit)

Enter a number...

### Maximum Acceptable Temperature (degrees Fahrenheit)

Enter a number...

### Medications Stored at Appropriate Levels?

- ☐ Top Shelf
- ☐ Middle Shelf
- ☐ Bottom Shelf
- ☐ Door
- ☐ N/A – Not Applicable

### Medication Overcrowding?

☐ Yes

☐ No

### Notes on Medication Placement/Arrangement

Write something...

### Expiration Date Visibility?

☐ Yes

☐ No

### Medication Storage Containers?

☐ Original Packaging

☐ Dedicated Bins

☐ Other (Specify)

## Deviation Management & Corrective Actions

Outlines procedures for addressing out-of-range temperatures and preventing recurrence.

### Date of Temperature Deviation

Enter date...

### Time of Temperature Deviation

### Temperature Reading (High/Low)

Enter a number...

### Acceptable Temperature Range (Lower Limit)

Enter a number...

### Acceptable Temperature Range (Upper Limit)

Enter a number...

### Description of Deviation (What happened?)

Write something...

### Immediate Action Taken

- ☐ Adjusted Thermostat
- ☐ Notified Supervisor
- ☐ Moved Medications
- ☐ Checked Power Supply
- ☐ Other (Specify)

### Details of 'Other' Action (If selected above)

Write something...

### Root Cause Analysis

- ☐ Equipment Malfunction
- ☐ Power Outage
- ☐ Door Left Open
- ☐ Medication Overload
- ☐ Environmental Factors
- ☐ Unknown/Under Investigation

### Corrective Action Plan (Describe steps to prevent recurrence)

Write something...

## Staff Training & Competency

Confirms staff understanding of cold chain procedures and temperature monitoring responsibilities.

### Have you completed Cold Chain Management Training?

- ☐ Yes
- ☐ No

### Date of Last Cold Chain Training

Enter date...

### Training Score (if applicable)

Enter a number...



**Briefly describe your understanding of temperature excursion risks for refrigerated medications.**

Write something...

**Which of the following are key responsibilities regarding temperature monitoring?**

- ☐ Recording temperatures at scheduled intervals
- ☐ Identifying and reporting temperature excursions
- ☐ Maintaining accurate temperature logs
- ☐ Knowing who to contact in case of a deviation
- ☐ Performing equipment calibration checks

**Do you understand the procedures for responding to a high/low temperature alert?**

- ☐ Yes
- ☐ No

**Describe the steps you take if you observe a temperature outside the acceptable range.**

Write something...

## Emergency Procedures

Describes steps to take in the event of refrigeration unit failure or power outage.

**Describe the procedure to follow if the refrigeration unit alarm sounds.**

Write something...

**Record the temperature reading immediately upon alarm activation (in °C/°F).**

Enter a number...

**Record the time the alarm sounded.**

**Describe steps taken to stabilize the medications immediately (e.g., moving to backup refrigeration).**

Write something...

**What is the status of the power supply?**

- ☐ On
- ☐ Off
- ☐ Unstable

**Date of refrigeration unit failure or alarm event.**

Enter date...

**Describe any actions taken to contact the designated refrigeration repair technician.**

Write something...

**Upload photographic evidence of the situation (e.g., alarm display, unit temperature). (Optional)**

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