



STEM CELL LABORATORY (STCL)



DOCUMENT NUMBER: STCL-FORM-005

DOCUMENT TITLE:

Fire Extinguisher Weekly Maintenance

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Control Information

Author: WATE02

Owner: WATE02

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Change Number: QSU-CCR-105

Equipment: _____
 SN _____
 Location: _____
 Stem Cell Laboratory

Year: _____

Fire Extinguisher Weekly Maintenance

Check the gauge reading. If the gauge is green, the pressure is about 100 lbs or greater.

√ = Function OK (gauge is green) Initial and Date NP = Not Performed

Month _____	Initials/Date	Function/Gauge
Wk 1		
Wk 2		
Wk 3		
Wk 4		
Wk 5		

Weekly Review (Date/Initial):

Wk1 _____ Wk2 _____ Wk3 _____ Wk4 _____ Wk5 _____

Monthly Review: _____
 (Date/Initial)

Month _____	Initials/Date	Function/Gauge
Wk 1		
Wk 2		
Wk 3		
Wk 4		
Wk 5		

Weekly Review (Date/Initial):

Wk1 _____ Wk2 _____ Wk3 _____ Wk4 _____ Wk5 _____

Monthly Review: _____
 (Date/Initial)

Equipment: ABC EXT. 0231

SN _____

Location: Processing

Stem Cell Laboratory

Year: 2010**Fire Extinguisher Weekly Maintenance (EXAMPLE)**

Check the gauge reading. If the gauge is green, the pressure is about 100 lbs or greater.

√ = Function OK (gauge is green) Initial and Date NP = Not Performed

Month <u>January</u>	Initials/Date	Function/Gauge
Wk 1	NP	
Wk 2	JC 01/05/2010	√
Wk 3		
Wk 4		
Wk 5		

Weekly Review (Date/Initial):

Wk1 _____ Wk2 _____ Wk3 _____ Wk4 _____ Wk5 _____

Monthly Review: _____
(Date/Initial)

Month _____	Initials/Date	Function/Gauge
Wk 1		
Wk 2		
Wk 3		
Wk 4		
Wk 5		

Weekly Review (Date/Initial):

Wk1 _____ Wk2 _____ Wk3 _____ Wk4 _____ Wk5 _____

Monthly Review: _____
(Date/Initial)

Signature Manifest**Document Number:** STCL-FORM-005**Revision:** 03**Title:** Fire Extinguisher Weekly Maintenance**STCL-FORM-005 Fire Extinguisher Weekly Maintenance****Rejection Collaboration**

Name/Signature	Title	Date	Meaning/Reason
Sharon Hartis (SH259)		11 Jun 2013, 08:56:55 AM	Complete
Barbara Waters-Pick (WATE02)			

Author Approval

Name/Signature	Title	Date	Meaning/Reason
Barbara Waters-Pick (WATE02)		14 Jun 2013, 06:55:31 PM	Approved

Medical Director Approval

Name/Signature	Title	Date	Meaning/Reason
Joanne Kurtzberg (KURTZ001)		14 Jun 2013, 07:47:09 PM	Approved

QA Approval

Name/Signature	Title	Date	Meaning/Reason
Linda Sledge (SLEDG006)		17 Jun 2013, 02:13:55 PM	Approved

Document Release

Name/Signature	Title	Date	Meaning/Reason
Linda Sledge (SLEDG006)		01 Jul 2013, 09:49:34 AM	Approved

Notification

Name/Signature	Title	Date	Meaning/Reason
Sharon Hartis (SH259)		01 Jul 2013, 09:49:35 AM	Email Sent