

STEM CELL LABORATORY (STCL)



DOCUMENT NUMBER: STCL-PROC-015 FRM7
DOCUMENT TITLE: CliniMACs Instrument Checklist FRM7
DOCUMENT NOTES:

Document Information

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Control Information

Author: WATER002 Owner: Barbara Waters-Pick (WATER002)

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STCL-PROC-015 FRM7 CliniMACS Instrument Checklist

<u>In</u>	Checklist Element strument Checklist testing must be completed within 72 hrs before each selection procedure	Check when	Did Task perform as expected?		
1.	Turn ON Device	Completed	✓one □Y □N		
2.	On the screen with the picture of the CliniMACS, press "5" to enter "service mode"		\square Y \square N		
3.	Press "3" for Instrument Check		\square Y \square N		
4.	Insert 11 pieces of tubing into the valves by manually pressing the valves in (using the tail		\square Y \square N		
	of a blood bag) The system will check each valve for 5 seconds.		$\Box Y \Box N$		
	All valves will be closed for 10 seconds.		$\Box Y \Box N$		
	All valves will open for 20 seconds.		\Box Y \Box N		
5.	Pump Check – The pump will rotate clockwise slow then fast for 10 seconds each The same action will occur but it will rotate counterclockwise each		□Y □N □Y □N		
6.	Magnet Check – The magnet will move forward for 20 seconds then back for 10 seconds		\square Y \square N		
7.	Liquid Sensor Check – Sensor is empty Insert a piece of tubing with liquid in it (water/buffer) – it should show the sensor as "full" Remove the piece of tubing and it should show as "empty"				
	Keyboard Check – Test each button following the screen		$\square Y \square N$		
9.	Exit "service mode" by pressing "4"		$\square Y \square N$		
	of this form to reflect retesting, actions taken and/or communication with Miltenyi Tec Support Hotline for assistance +1 800 367-6227 <u>Prompt 3</u> for technical support or <u>Prompt 3</u> for technical support emergency technical support Employee Name Performing Instrument Check: Print Employee's Name / Signa	<u>rompt 5</u> for	r		
	CliniMACs Instrument Serial #: (Check ONE)		_		
	Date Selection Procedure Performed:		_		
	CliniMACs Instrument Checks Successful: (Check ONE)				
Instrument \square approved or \square not approved for use by Lab Manager or Designee:					
	Print Name / Signature Da	te			
	STCL-PROC-015 FRM7 CliniMACs Instrument Checklist				

STCL-PROC-015 FRM7 CliniMACs Instrument Checklist Stem Cell Laboratory, DUMC Durham, NC

Signature Manifest

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All dates and times are in Eastern Time.

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Document Release

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