

HEMOCUE QC LOG

HemoCue #				Month			Year
Day	Daily Clean Initials	Micro cuvette Lot #	Micro cuvette Exp date:	Daily Red Control Cuvette S/N:	Daily Liquid QC		Initials
				_____	Lot#	Lot#	
				Target Range	Exp:	Exp:	
				-	Target Range		
				QC Value	Level 1 (Low Value)	Level 3 (High Value)	
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DATE	QC COMMENTS

DATE	PROBLEM	CORRECTIVE ACTION	Initials

If not in use please put "NIU". Reviewed By: _____ Date: _____
Nurse Manager/Supervisor