## **Medication Room Temperature Log - Fahrenheit**

Month,	/Year:	Dav	s 1-15
	, i cai .	Duy.	J

## Clinic Name:

Completing this temperature log: Check the temperature in the medication room EACH WORKING DAY. Place an "X" in the box that corresponds with the temperature, the time of the temperature reading, and your initials. Once the month has ended, save each month's completed for 3 years.

If temperature is out of range, contact dispensing pharmacy or CBHS Pharmacy Services (415-255-3659) immediately at and document action taken on this form.

Staff Initials															
Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Exact Time															

<sup>\*</sup>Write any unacceptable temperatures (above 86°F or below 59°F)

in these boxes. Then take action!

	<del></del>														
		Danger! Ten	nperatures a	bove 86°F a	e too warm	! Write any u	ınacceptable	temperatur	es on the bo	xes above ar	nd call CBHS	Pharmacy Se	rvices imme	diately!	
	86°F														
	85°F														
	84°F														
	83°F														
	82°F														
	81°F														
	80°F														
res	79°F														
=	78°F														
ratuı	77°F														
ro i	76°F														
mpei	75°F														
Ξ	74°F														
Ter	73°F														
	72°F														
<u>е</u>	71°F														
ge	70°F														
ti	69°F														
Ь	68°F														
Ö	67°F														
Acceptable	66°F														
	65°F														
	64°F														
	63°F														
	62°F														
	61°F														
	60°F														
	59°F														
		Danger! Ter	mperatures	below 59°F a	re too cold!	Write any ur	nacceptable	temperature	s on the box	ces above and	d call CBHS P	harmacy Ser	vices immed	liately!	

## **Medication Room Temperature Log - Fahrenheit**

## Clinic Name:

Completing this temperature log: Check the temperature in the medication room EACH WORKING DAY. Place an "X" in the box that corresponds with the temperature, the time of the temperature reading, and your initials. Once the month has ended, save each month's completed for 3 years.

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Staff Initials																
Day of Month	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Exact Time																

<sup>\*</sup>Write any unacceptable temperatures (above 86°F or below 59°F)

in these boxes. Then take action!

	<del></del>															
		Danger! Te	emperatures	s above 86°I	Fare too wa	ı <mark>rm!</mark> Write a	any unaccep	table tempe	eratures on	the boxes al	bove and ca	II CBHS Pha	rmacy Servi	ces immedia	itely!	
	86°F															
	85°F															
	84°F															
	83°F															
	82°F															
	81°F															
	80°F															
es	79°F															
=	78°F															
Temperatures	77°F															
Į.	76°F															
) O	75°F															
Ľ	74°F															
er	73°F															
	72°F															
<u>е</u>	71°F															
q	70°F															
ta	69°F															
0	68°F															
	67°F															
Acceptable	66°F															
	65°F															
	64°F															
	63°F															
	62°F															
	61°F															
	60°F															
	59°F															
		Danger! T	emperature	es below 59°	F are too co	old! Write a	ny unaccept	able tempe	ratures on t	he boxes ab	ove and cal	CBHS Phar	macy Servic	es immedia	tely!	