|  |
| --- |
| **Human Tissue in Research****Temperature Log Template** |

**Purpose**:

This template should be used by Swansea University staff or students if there is no automated temperature monitoring system in place for fridges/freezers storing human tissue considered relevant material under the HT Act.

When storing human tissue, it must remain stored within acceptable limits to ensure the integrity of the tissue and therefore the reliability of data. The temperature must be monitored daily to confirm it remains within these acceptable limits.

If this isn’t achieved through a temperature monitoring system researchers should use this template to monitor the fridge/freezer manually.

Some faculties may employ automated temperature monitoring systems for fridge and freezer storage, such as T-Scan. You should contact your Technical and Compliance Officer (TCO) to check if this can be arranged before resorting to manual records.

**Instructions:**

1. Remove this first cover page.
2. Tailor the text highlighted in yellow in header and footer.
3. Record the name and the laboratory location of the area/equipment that is being monitored.
4. Decide on and record the acceptable temperature limits for this area/equipment, add to your local SOP.
5. Decide on and record the frequency at which the temperature of this area/equipment is to be monitored, add to your local SOP.
6. Complete an entry on the form each time the temperature is monitored.
7. If monitoring is missed for any reason, indicate this on the records with a statement such as ‘not taken’ or ‘not carried out’ so that the record is not left blank.
8. If the temperature is out of the acceptable range record this information on the form and consider whether a reportable issue has occurred i.e. whether the storage unit has failed or is failing. If yes, action your contingency plan.
9. Store the temperature monitoring record in your Laboratory Study File throughout and archive it with the other study records upon closure.
10. Calibrate the equipment used to monitor temperature and document evidence of this, use supplier’s instructions.

**Fridge / Freezer unique identifier name/number:**

**Laboratory location:**

**Acceptable temperature limits:**

**Frequency of temperature monitoring:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date(dd-mm-yyyy) | Temp(°C) | Temps within range(y/n) | Full Name | Comments |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |