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| ***Insert Laboratory Specific Name Here*** |
| **NextSeq Equipment Maintenance Log** |

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| --- | --- | --- | --- |
| **Lab:** | **Building #:** | | **Room #:** |
| **Equipment: Illumina NextSeq** | | **Serial #:** | |
| **Log Start Date:** | | **Log End Date:** | |

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| --- | --- | --- | --- | --- | --- |
| **In Use Weekly Maintenance** | | | | **Idle Every 14 Day Maintenance** | |
| **Equipment Cleaning**  **Complete Date** | | **Initials** | | **Quick Wash Date** | **Initials** |
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| **Every 6 Month Maintenance** | | | | | |
| **Air Filter Replacement Complete Date** | **Initials** | | **Comments** | | |
|  |  | |  | | |

Approval Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_