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

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

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| **Weekly Maintenance** | | | | |
| **Equipment Cleaning**  **Complete Date** | **Initials** | | **Comments** | |
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| **Every 6 Month Maintenance** | | | | |
| **Air Filter Replacement Complete Date** | | **Initials** | | **Comments** |
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Approval Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_