# Sterilization Log

Sterile instruments and supplies should be stored in covered or closed cabinets. Dental instruments and supplies should not be stored under sinks or in other places where they might become wet. Wrapped packages of sterilized instruments should be inspected before opening and use to ensure that the packaging has not been compromised (i.e., wet, torn, or punctured) during storage. Storage practices for wrapped sterilized instruments can be either date- or event-related. Although some facilities continue to date every sterilized package and use shelf-life practices (first in, first out), other facilities have switched to event-related practices. This approach recognizes that the product should remain sterile until some event causes the item to become contaminated (e.g., a package becomes torn or wet). All packages containing sterile items should be inspected before use to verify that the package is not wet, torn, or damaged in any way. If it is, the instruments should be recleaned, packaged in new wrap, and resterilized.

Please use the following log and keep for 3 Consecutive Years
DATE – Date of load
TIME STARTED – Time that load was started
STERILIZER USED – Which sterilizer was used (if more then one you need to have them labeled (i.e., Autoclave A /Statim B) But laminated letters or numbers on machine to help identify
LOAD NUMBER – Which load number are you running for the day
NUMBER OF INSTRUMENTS – Document how many instruments are in the load
INITIALS WHO LOADED – Initials of who loaded the Sterilizer
INTEGRATOR PASSED OR FAILED – Put Pass or Fail if Integrator passed or Failed
TIME OF UNLOAD – Time that load was emptied
INITIALS WHO UNLOADED – Initials of who unloaded the Sterilizer
SPORE TEST DONE – Put Yes if that cycle contained a Spore test
COMMENTS– Any comments if errors or any issues arise

| DATE | TIME STARTED | STERILIZER USED | LOAD NUMBER | NUMBER OF INSTRUMENTS | INITIALS WHO LOADED | INTEGRATOR PASSED OR FAILED | TIME OF UNLOAD | INITIALS WHO UNLOADED | SPORE TEST DONE | COMMENTS |
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# Sterilization Log

| DATE | TIME STARTED | STERILIZER USED | LOAD NUMBER | NUMBER OF INSTRUMENTS | INITIALS WHO LOADED | INTEGRATOR PASSED OR FAILED | TIME OF UNLOAD | INITIALS WHO UNLOADED | SPORE TEST DONE | COMMENTS |
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