

Document Number: ANP019	Title: EQUIPMENT MAINTENANCE <i>CONFIDENTIAL INFORMATION</i> MOLECULAR MEDICINE RESEARCH INSTITUTE	Effective Date: MAY 2016
Section: Animal Research		Supersedes Date: JANUARY 2005
Subsection: Facility		Page: 1 of 4

1.0 OBJECTIVE

- 1.1 The objective of this procedure is to describe the procedures and necessary documentation required for maintenance of equipment.

2.0 SCOPE

- 2.1 This procedure applies to instruments within or pertaining to the Animal Research Facility.

3.0 POLICY

- 3.1 It is the policy of MMRI that this procedure be followed to ensure that all equipment that requires maintenance receive such services on a routine basis to assure the integrity of its function and test results.

4.0 RESPONSIBILITIES

- 4.1 It is the responsibility of Manager of Animal Research or designated alternate to implement this procedure and revise it when necessary.
- 4.2 Each operator is instructed to watch for damage to instruments or equipment, inoperative instruments, erratic readings or any other malfunctions that cannot be anticipated or provided for by a calibration maintenance schedule.

5.0 PROCEDURE

- 5.1 Manuals and instructions regarding the operation and maintenance of instruments and equipment are located in the animal resource facility filing cabinet in gowning area. Document all maintenance, and repair of instruments and equipment in the Equipment Maintenance and Repair Log (Appendix I). Document any modifications of operation or maintenance of instruments or equipment on the appropriate Standard Operating Procedure and Equipment Maintenance and Repair Log.
 - 5.1.1 Operate instruments and equipment according to the manufacturers instructions, or the appropriate Standard Operating Procedure.
 - 5.1.2 Perform maintenance as recommended by the manufacturer or as modified because of special laboratory use. The Supervisor is ultimately responsible for equipment maintenance, however the maintenance and repair may be delegated and performed by other qualified personnel.

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Section: Animal Research		Supersedes Date: JANUARY 2005
Subsection: Facility		Page: 3 of 4

APPENDIX I

EQUIPMENT MAINTENANCE AND REPAIR LOG

Equipment: _____

Problem: _____

Date: _____ Study Number: _____

Person Contacted: _____ Date: _____

Corrective Action Taken: _____

Repaired By: _____ Date: _____

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Subsection: Facility		Page: 4 of 4

APPENDIX 2

Equipments in Vivarium and their Retest/Calibration and Current/due status:			
<u>Equipment Category:</u>	<u>Retest due</u>	<u>Usage</u>	<u>Location</u>
Hoods:			
1. Laminar flow hood (04164)	11/30/12	In use	Animal / procedure rooms
2. Biosafety hood (00432)	11/30/12	not In use	Animal / procedure rooms
3. Fume hood (FH 29)	10/6/16	in use	Procedure rooms