## **REFRIGERATOR FAULT REPORT**

BASIC DETAILS	
Country	Date
Region	District
Name of Health Centre	
Contact person at Health Centre	
Phone number	
Email	
Refrigerator Model	
Refrigerator Serial Number	
Name of person completing this report	
Phone number	
Email	
SYMPTOMS	
Vaccine temperature	
Freezer temperature	
What is the reported problem?	
Is the fridge too cold?	
Is the fridge always too warm?	
Does the compressor run?	
Is it always like this, or only sometimes?	
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How long has it been like this?	
Has the routine maintenance been done?	
- if not, suggest it is done now.	

Ask for the refrigerator Fridge-Tag data, or a photo of Check to see if we have Vaccine Guard data.	the Fridge-Tag device.
ACTION PLAN	
If necessary, plan a site visit	
Make a list of checks to do and tools you need to take	
- remember the troubleshooting guide, tools and test	
	• •
Make a list of spare parts take	
RECORD OF SITE VISIT	
Name of technician	Date
Name of technician	
Carefully record your findings and take photographs	
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If you have repaired the refrigerator what work did yo	
What evidence do you have that the refrigerator is wo	orking correctly?
If you have not renaised the refrigerator what will you	udo novt?
If you have not repaired the refrigerator what will you	i do next?
If you have replaced the refrigerator, what is the seria	I number of the new refrigerator?
in you have replaced the reingerator, what is the sena	Thamsel of the new temperator.
SIGN-OFF	
Your signature	Date
Please provide a copy of this record and photographs	to Dulas: andrew.rowbottom@dulas.org.uk
Please keep a copy for future reference.	