

COLD FOOD RECORD The 'All-in-One' is an alternative to this record

MONTH:

Temperature of Refrigerator/Chill/Cold Display – RECOMMENDED TWICE PER DAY Function/Temperature of Freezer – RECOMMENDED ONCE PER DAY											Corrective Actions	Initials
UNIT												
DATE	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM		
1st												
2nd												
3rd												
4th												
5th												
6th												
7th												
8th												
9th												
10th												
11th												
12th												
13th												
14th												
15th												
16th												
17th												
18th												
19th												
20th												
21st												
22nd												
23rd												
24th												
25th												
26th												
27th												
28th												
29th												
30th												
31st												

Write your Critical Limits here :

	Critical Limit	Notes
Refrigerator(s)		
Chill(s)		
Cold Display(s)		
Freezer(s)		

Corrective Action Examples:

- Recheck temperature
- Consider if food is safe to use
- Dispose of food which may be contaminated
- Review staff training
- Call the engineer

Have the corrective actions been carried out?

Yes / No / Not Applicable (delete as applicable)

Date checked by Manager/Supervisor

.....

Initials

.....