

MICROSCOPE DAILY CLEANING CHECKLIST

CANTON CITY HEALTH DISTRICT

MONTH: _____

YEAR: _____

After each day of use, indicate cleaning performed by placing a check mark in the appropriate column and initialing at the bottom of the daily column. Only check items that were done, not all items will need to be done every day. NOTE: When cleaning be very conservative in the application of liquids to all surfaces since moisture could damage components.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Turn off light																															
Use lens cleaning fluid on lens tissue to wipe lenses of dust debris or oil.																															
If body fluids are suspected of contacting scope, use bactericidal disinfectant to decontaminate.																															
Replace Dust Cover																															
INITIALS																															

Comments: