

Sample: Rapid HIV test (product name) Log

Kit Device Lot # _____ (Located on Device Pouch) Expiration Date _____

Positive HIV-1 Control Lot # _____ (on bottle) Expiration Date _____

Positive HIV-2 Control Lot # _____ (on bottle) Expiration Date _____

Negative Control Lot # _____ (on bottle) Expiration Date _____

Date mm/dd/yy	Time	Counselor Code	Positive Control (+)		Negative Control (-)	Site Location	Corrective Action/ Comments; If not routine, state reason control was conducted	Temperature
			HIV-1	HIV-2				

Instructions: Controls must be refrigerated for storage; they need to be brought to room temperature prior to use.
 Controls are to be conducted as per manufacturers requirements
 A new log sheet should be used when the lot number of controls or devices changes.
 When opening a new set of controls whose lot number matches previously used controls, please record
 on the next blank line on the grid the opening date and the last date the control can be used.
 Please follow manufacturers guidance for invalid test results/record invalid test results/actions taken

Reviewed by Supervisor on a weekly basis (place initials under the date)
 Date: _____ Date: _____ Date: _____ Date: _____ Date: _____

Initials: _____

Interpretation: (+) = Positive control observed; (-)=Negative control observed; (0) = No result observed