THIS FORM <u>MUST</u> BE FILLED OUT <u>EVERY</u> DAY THAT THIS LAB IS USED

| DATE | PRINTED NAME | EQUIPMENT USED ** if water maze, record temp ** | CLEANED ? | * SANITIZED ? | ROOM CLEANED ? | NOTES |
|------|-----------------|--|--------------|---------------|----------------------|-------|
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- After cleaning, spray with Quadracide
- Water maze: temp must be 65-75 F. Water must be drained and sanitize at the end of each week of testing.