BFSLS 515 (Rev. 12/13)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGRICULTURE
BUREAU OF FOOD SAFETY AND LABORATORY SERVICES
LABORATORY DIVISION

Facility/Laboratory Name:_____ **Year**_____

THERMOMETER ACCURACY CHECK LOG

Date NIST Tested	NIST	Serial /ID Number	Range	Graduation Interval	Calibration points	Ice point result	Correction Factor[7] °C	Analyst

Date Tested	Test thermometer Location of use	Serial Number	Lab ID	Temp range of use °C	Temp of Test Thermometer °C	Temp and ID of NIST Reference Thermometer °C	Correction Factor °C	Analyst

1. **To be done before initial use and at least annually thereafter.**
2. **National Institute of Standards and Testing (NIST) Certified thermometer, or equivalent, with a certificate of calibration.**
3. **Range of test thermometers appropriate for designated use.**
4. **Accuracy of test thermometers checked against certified thermometer.**
5. **Accurate to ± 1.0°C when checked at temperature(s) of use.**
6. **Results recorded and thermometers tagged with the following information: Identification, date of check, temperature of check, correction factor(s) and analyst ID.**
7. **If NIST has a correction other than 0.0°C, use form BFSLS 515a.**