

Carestream Health Mammography Quality Control Log

Initial or Check (✓) upon completion Unit _____ Processor _____ Month/Year _____

		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	
Quality Control Tests—Minimum Frequencies	Darkroom Cleanliness <i>Daily</i>																																
	Processor Quality Control <i>Daily</i>																																
	Screen Cleanliness <i>Weekly</i>																																
	Viewboxes & Viewing Conditions <i>Weekly</i>																																
	Phantom Images <i>Weekly</i>																																
	Equipment Visual Checklist <i>Monthly</i>																																
	Repeat Analysis <i>Quarterly</i>																																
	Analysis of Fixer Retention <i>Quarterly</i>																																
	Darkroom Fog <i>Semi-Annually</i>																																
	Screen-Film Contact <i>Semi-Annually</i>																																
	Compression <i>Semi-Annually</i>																																

Date	Remarks	Date	Remarks

Record additional remarks on the back of this sheet.

