

	QuXAT Quality Management System																				Document No:	QUXAT/F/26
	Title	Room Temperature & Humidity - Monitoring Form																				Page No:

Morning	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
Temperature																															
Humidity																															
Verify Sign																															
Evening	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
Temperature																															
Humidity																															
Verify Sign																															

Set Temperature	
Set Humidity	

Issue No: 1	Issue Date: 1.1.2026	Amend No:	Amend Date:	Copy No: 01
Prepared/Issued by:	Quality Manager	Approved by	Medical Director	