Monthly Fecal Coliform Verification Tests Logbook
SM 9222D

Month/Year:_____

Positive Verification

Date:	Sample ID:	Dilution:	Count (CFU)	Analyst:

Colony Description:

LTB S# | Instrument SN# | **Temperature: 35 ± 0.5°C**

Day One | Start Date/Time in: | 24h Read Date/Time:

Day Two | Start Date/Time in: | 48h Read Date/Time:

Tube Number	1	2	3	4	5	6	7	8	9	0
LTB **24 ± 2 hrs**										
LTB **48 ± 3 hrs**										

EC S# | Instrument SN# | **Temperature: 44.5 ± 0.2°C**

Day One | Start Date/Time in: | 24h Read Date/Time:

Tube Number	1	2	3	4	5	6	7	8	9	0
EC **24 ± 2 hrs**										

Final Verified Count

Negative Verification

Date:	Sample ID:	Dilution:	Count (CFU)	Analyst:

Colony Description:

LTB S# | Instrument SN# | **Temperature: 35 ± 0.5°C**

Day One | Start Date/Time in: | 24h Read Date/Time:

Day Two | Start Date/Time in: | 48h Read Date/Time:

Tube Number	1	2	3	4	5
LTB **24 ± 2 hrs**					
LTB **48 ± 3 hrs**					

EC S# | Instrument SN# | **Temperature: 44.5 ± 0.2°C**

Day One | Start Date/Time in: | 24h Read Date/Time:

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EC **24 ± 2 hrs**					

Final Verified Count

Incubate overnight before use and check for gas formation. All tubes must be clear and have no gas formation.	Result (Y/N)	GAS		TURBID		
		LTB	EC	LTB	EC	

Start Date/Time: | Read Date/Time:

*Formula: (number of verified positive colonies/total number of colonies subjected to verification) * total number of representative colonies. (See SOP MB-01.1)

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