

DAILY HACCP TEMPERATURE LOG

SITE: _____ DATE: _____ 20____

Receiving Log – SOP #8

Instructions	Time	Vendor (or Other Source)	Product Name	Temp.	Corrective Action	Initials
Take and record the temperature of a sample of refrigerated, potentially hazardous foods (PHFs). Milk and shelled eggs must be 45°F or below and all other PHFs 41°F or below. Make sure that frozen products are solid to the touch. Check all products for quality and to be sure that the products ordered are the products received.	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____

Food Temperatures – SOP # 5, 12, 17

Menu Item	Process #	1-End of Cooking or Entering Holding Unit Time - Temp. - Initials	2-Exiting Holding or Entering Serving Unit Time - Temp. – Initials	3-End of Each Serving Period ^a Time - Temp. – Initials	4-End of Last Serving Period ^b Time - Temp. – Initials	Corrective Action
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

^a Only if required by your area KSDE Child Nutrition Consultant
^b If there are no leftovers, write “no leftovers” or “NL” to explain the absence of a temperature.

Refrigerator & Freezer Temperatures – SOP #13

R#1 _____ / _____ R#2 _____ / _____ R#3 _____ / _____ R#4 _____ / _____ R#5 _____ / _____ Corrective Action: _____
 Temperature / Initials Temperature / Initials Temperature / Initials Temperature / Initials Temperature / Initials

Walk-in Freezer _____ / _____ Deep Freeze _____ / _____ Milk Cooler _____ / _____

Temperature / Initials

Temperature / Initials

Temperature / Initials

Thermometer Calibration – SOP #5

Instructions: Check thermometers every 2 weeks by placing in an ice water bath. If a thermometer does not read 32°F, adjust it or discard and replace.

#1 _____ / _____	#2 _____ / _____	#3 _____ / _____	#4 _____ / _____	#5 _____ / _____	Corrective Action
Temperature / Initials	Temperature / Initials	Temperature / Initials	Temperature / Initials	Temperature / Initials	

Dishwashing – SOP #7

3 Compartment Sink: Wash Temp. ($\geq 110^{\circ}\text{F}$) Chemical Sanitizer (3^{rd} sink)
 Time – Temp – Initials Time - Concentration – Initials

Low Temperature Dish Machine

Wash Temperature _____ Initials _____
 Chemical Concentration _____ Initials _____

High Temperature Dish Machine

Rinse Temperature _____ Initials _____

1 st measurement	_____ - _____ - _____	_____ - _____ - _____
2 nd measurement	_____ - _____ - _____	_____ - _____ - _____
3 rd measurement	_____ - _____ - _____	_____ - _____ - _____

(The number of readings taken will depend on the length of time the sink is used.)

Corrective Action

Cooling Leftovers – SOP #19

Food Item	Check here if previously established SOP used	If a Cooling SOP has not been established in this kitchen, record cooling times & temps here			
		Time – Temp – Initials	Time – Temp – Initials	Time – Temp – Initials	Time – Temp – Initials
_____	_____	_____ - _____ - _____	_____ - _____ - _____	_____ - _____ - _____	_____ - _____ - _____
_____	_____	_____ - _____ - _____	_____ - _____ - _____	_____ - _____ - _____	_____ - _____ - _____
_____	_____	_____ - _____ - _____	_____ - _____ - _____	_____ - _____ - _____	_____ - _____ - _____

Damaged or Discarded Products – SOP #9 and Step 6 of HACCP Plan

Instructions: Record only food held, returned or discarded for major food safety reasons (e.g. contaminated, infestation, suspected foodborne illness, etc.), not all leftovers, poor quality food, etc.

Food Item	Quantity Discarded	Action Taken (hold, return, discard)	Reason	Initials
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Supervisor's Initials _____