附件1：

**实验室安全工作日志**

实验室及房间号： 安全责任人：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 日期 | 体温异常人员信息登记 | 消杀工作人员及时间 | 紫外设备负责人及时间 | 监督人 |
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