

**Jefferson Regional Medical Center**  
**TISSUE RECEIPT AND IMPLANT LOG**

64-045-1206

EXPIRATION DATE	RECEIVED DATE	INTEGRITY & TRANSPORT TEMP INDICATOR ACCEPTABLE	SOURCE FACILITY GRAFT BAR CODE LABEL	TISSUE TYPE	DATE & DISPOSITION (IMPLANTED, DISCARDED, RETURNED OR TRANSFERRED)	RECIPIENT NAME & MR#	SURGEON	IMPLANT RECORD RETURNED	SIGNATURE