

Reprocessing Transportation Inventory List

Sending Facility:	
Sending Date:	
Receiving Facility:	
Receiving Date:	

Load Sticker / Initials

Load Sticker/Initials

Return Date:_____

Sending Facility Section		Receiving Facility Section			Decontam Staff ID	
Cleaned & Disinfected	Quantity Sent	Initial	Sterile Items Returned	Quantity Returned	Initials	
						Assembly and Sterilization Staff ID
						Package Return Container Staff ID
						Total Number of Items Returned

Notes (missing or broken pieces):