



Use this form to document any deficiencies found during your self-inspection. Retain self-inspection documentation for the next on-site inspection team to review.

<b>Self-Inspection Date:</b>	<b>Laboratory name:</b>	<b>CAP or AU#:</b>	<b>Section/Department:</b>
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<b>Requirement ID</b>	<b>Phase</b>	<b>Corrective Actions</b>

Do not return to the CAP unless specifically requested.