BD Veritor Influenza A-B Quality Control and Patient Record

Lot Number: _____________ Exp Date: __________

Controls to be run with each new lot	Key: Positive= “+” Negative= “—“ Invalid= “I”

Date	Last Name	First Name	ID #	Patient Results		Controls		Comments	Tech
				A	B	+	-		
	Control A								
	Control B								

Lab Director: ________________________________ Date: ___________________