



First Nations Health Programs Yukon Hospital Corporation



Quality Control Form Checklist (Processing/Packaging/Storage)

Wild game meat must be properly processed/packaged and stored at appropriate temperatures.

Animal type: _____ Date wild game delivered to butcher: _____

Name of butcher: _____

1. Were there any foul odors from the meat? Yes No
2. Was there any off-color discoloration on the meat? Yes No
3. Was there any bruising noticeable on the meat? Yes No
4. Were there any cysts or parasites on the meat? Yes No
5. At what temperature was the meat held during storage? _____ °C
6. At what temperature was the meat held during processing? _____ °C
7. At what temperature was the meat held after processing? _____ °C
8. Weight of meat delivered _____ 9. Weight of processed meat _____
10. Please ensure each package of meat contain the following information?
the date? Yes No
the types of meat? Yes No
the cut of meat? Yes No
the weight of the package? Yes No
11. Was meat processed according to instructions? Yes No

Reserved for office use

Donation number _ _ _

Approved by: _____

Meat approved for hospital use Yes No

If not approved, explain and describe actions taken:

Date meat ready to be picked up: _____ Date delivered to NFS: _____

Invoice number _____ Invoice paid: Y/N date: _____