Monthly/Daily Weight Scale and Height Measuring Device Checklist

For use of this form, see USMEPCOM Regulation 40-1

Instructions: This log will be used as an official document and is utilized and maintained by the MEPS Medical Departments. It will establish a daily recording of an accuracy check of a digital weight scale by the utilization of an issued 25 pound weight. This form will also be used to determine if the digital scale and height measuring device was properly functioning and serviceable **prior** to a height and weight determination being applied to an applicant processing at the MEPS. A Medical Staff member will perform the checks on every MEPS processing day and will date and initial. If the digital scale and/or height measuring device is deemed unserviceable or does no pass an accuracy check **DO NOT** use in the assessment of applicants. The unserviceable device will be immediately reported to Tobyhanna Army Depot for replacement through the MEDSTEP program.

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Daily Weight Scale Calibration Performance Steps	Entry Information					
Record the month and year at the top of page two of this form. The daily checks start on the first processing day of the month and is deemed complete on the last processing day of the month. When the last daily check is done at the end of the completed month a new UMF 40-1-19 will be started for the next month.	Record the month and full year, it is acceptable to use the three letter abbreviation for the month Example – "JUN/2021"					
Record the day in the first column.	Record the calendar day the check was performed on Example – "1"					
Record the weight displayed on the digital weight scale in the second column. This is done by placing the 25 pound weight provided by Tobyhanna Supply Depot on the digital weight scale. Ensure the scale readout displays 0 before placing the weight on the scale. If the scale does not read 0 then press the ZERO on the display device. Note: The number 25(lbs) is the only acceptable readout for the MEPS scale to be used in applicant processing.	Record the weight displayed when the 25 pound weight is placed on the digital scale Example – "25"					
Record any discrepancies that would render the digital weight scale unserviceable IAW manufacturer's instructions in the third column. A short explanation should be entered in space provided. This entry will establish a timeline on when an unserviceable discrepancy was found and how long the digital scale has been offline. Example entry: "Power cord frayed"	Record a check-mark for a serviceable digital weight scale Example					
Record any discrepancies that would render the height measuring device unserviceable IAW manufacturer's instructions in the fourth column. A short explanation should be entered in space provided. This entry will establish a timeline on when an unserviceable discrepancy was found and how long the device has been offline. Example entry: "Head piece broken"	Record a check-mark for a serviceable height measuring device Example					
The medical staff member performing the checks will initial in the fifth column	Record initials either written or typed is acceptable Example – "JJE"					
The Medical Department NCOIC/SUP MT (or designee) will date and sign the bottom of page two and archive form for two years (electronically archiving this form is authorized).	Date in the YYYYMMDD format and sign (digitally signing is acceptable).					
NOTE: For all uncorrisonable height/weight equipment initiate the Medical Stand Dy Equipment Drogram (MEDSTED) evaluates						

NOTE: For all unserviceable height/weight equipment initiate the Medical Stand-By Equipment Program (MEDSTEP) exchange with Tobyhanna Army Depot by sending an e-mail citing MEPS name, type of equipment and reason for exchange to USARMY Tobyhanna AD USAMC mailbox USAMMATECH at: usarmy.tyad.usamc.mbx.usammatech@mail.mil and/or by telephone to (570) 615-8509. If necessary the Medical Department NCOIC/SUP MT or MEPS AST can contact the USMEPCOM J-4 Medical Logistics POC's for assistance with the MEDSTEP process or ordering replacement parts or any other equipment assistance.

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Page 2 of 2 Pages All entries on this form can be written or typed

MONTH/YEAR:						
DAY	SCALE DISPLAY IN POUNDS	DIGITAL SC	CALE REMARKS	HEIGHT MEASURING DEVICE REMARKS	INITIALS	
Medical NCOIC/SUP MT (or designee) review of the Weight Scale and Height Measuring Device Checklist						
Date (YYYMMDD)		Signature				