

Title: ARMWG CPE Scoring Worksheet	Version No. 2	Page: 1 of 1
	Effective Date. November 7, 2001	

Reference ARMWG Infectious Titer SOP

Assay (A/B) _____ Plate number _____

Date/Time of Observations: _____

Observations made by: _____

	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>7</i>	<i>8</i>	<i>9</i>	<i>10</i>	<i>11</i>	<i>12</i>
<i>A</i>												
<i>B</i>												
<i>C</i>												
<i>D</i>												
<i>E</i>												
<i>F</i>												
<i>G</i>												
<i>H</i>												

Sample ID Row A: _____

No. of Positive Wells: _____

Sample ID Row B: _____

No. of Positive Wells: _____

Sample ID Row C: _____

No. of Positive Wells: _____

Sample ID Row D: _____

No. of Positive Wells: _____

Sample ID Row E: _____

No. of Positive Wells: _____

Sample ID Row F: _____

No. of Positive Wells: _____

Sample ID Row G: _____

No. of Positive Wells: _____

Sample ID Row H: _____

No. of Positive Wells: _____