



# Cooling Temperatures



**operandio.com**

The #1 Operations Management Platform

The template provided here has been created as a general guide by Operandio and may need to be adapted to cover all regulatory requirements for your business.

We recommend consulting your local food safety authority for clarification and assistance with your specific record-keeping requirements.

# Cooling Temperatures



- ✔ Potentially hazardous food must be cooled **from 60°C (140°F) to 21°C (70°F) within 2 hours**, then cooled **from 21°C to 5°C (41°F) within the next 4 hours**
- ✔ Use a clean, sanitized probe thermometer to record temperatures
- ✔ Ensure food is thoroughly cooked to **≥75°C (167°F)** by checking the thickest part
- ✔ Some tips to rapidly cool food can include dividing big batches into smaller portions, using blast chillers, and using ice water baths



| Record date | Record the food being cooked | Start when the food temp is 60°C (140°F) | Record temp after 1 hour | Record temp after 2 hours | Check temp. If it is 21°C (70°F) or below within 2 hours, mark YES and continue cooling | Record temp after 3 hours | Record temp after 4 hours | Record temp after 5 hours | Record final temp at 6 hours | Check temp. If it is 5°C (41°F) or below within past 4 hours (6hrs after start), mark YES - food is safely cooled | If the food was not safely cooled, what action was taken? | Record your initials |
|-------------|------------------------------|--|--------------------------|---------------------------|---|---------------------------|---------------------------|---------------------------|------------------------------|---|---|----------------------|
| Date        | Food                         | Start time                               | Temp<br>Time             | Temp<br>Time              | 21°C in 2 hrs?  | Temp<br>Time              | Temp<br>Time              | Temp<br>Time              | Temp<br>Time                 | 5°C or below in 4hrs?   | Action  | Initials             |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |
|             |                              |  |                          |                           |   |                           |                           |                           |                              |   |   |                      |

Checked by:

Signature:

Date: