Harvest Vessel Monitoring Record Form for Scombrotoxin control from Troll Operation (all fish landed live)

Vessel Name: _____ Trip start date: _____

Identify Storage condition (circle): BLAST FROZEN* BRINE FROZEN* ICE

Fishing Day	Time **First** fish in fishing interval landed	Time **Last** fish in interval placed in frozen or ice storage (<6 hrs)	Initials of recorder	Daily Storage Check (date/time/Initial) for all fish in hold completely and continuously surrounded by ice

Instructions: Fish are to be placed into chilling medium within 30 min or as soon as possible*. Segregate all fish not placed in frozen or ice storage within 6 h to avoid having entire load rejected for histamine.* Fish not stored frozen should be checked in morning and evening (about 12 hr intervals) for complete and continuous surrounding by ice. Record time storage is checked.

***Fish placed into frozen storage within a 6 hr time interval do not need to have Daily Storage Checks.**

Additional Comment on problems (include day):

Vessel Record Received by: initial _____ Date:_____ Time:_____

Vessel Record Acceptable and Critical Limits Met: Yes No Comment:

Record Review and Verification: Name: _____ Date: _____