

Form B03

## Scheduled Maintenance Work Order

Quantum Medical Solutions sdn bhd  
transcending boundaries, transforming life

Format Ref. - QMS/TSD-003 Rev. 00

Work Order No	PW032022	Scheduled Month	FEBRUARY 2018
Work Order Date	11/2/18	Completed Date	15/2/18
Clinic Name	KD BERUNTU.	Clinic Code	WPL008
BE No	WPL02443	District	K WP. LABUAN
BE Category	FETAL HEART DETECTOR	WO Assigned to	the machine
Ownership	<input checked="" type="checkbox"/> Existing Equipment	<input type="checkbox"/> New & Purchased Equipment	
BE Condition	<input type="checkbox"/> Under Warranty	<input type="checkbox"/> BER Proposed	
Work Order Type	<input checked="" type="checkbox"/> Preventive Maintenance (PM)	<input type="checkbox"/> Third Party Calibration (TPC)	
	<input type="checkbox"/> Routine Inspection (RI)	<input type="checkbox"/> Statutory Certification (SC)	

## BE Third Party Calibration / Statutory Certification Details

Company Name		Cal / Cert Date	NA
Contact Number	NA	Cal / Cert Expiry Date	NA

## Action Taken

↳ PM was carried out as per Checklist.

## Schedule Maintenance Execution Details


SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
		15/2/18	1415	1430

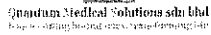
## Customer Remarks

Engineer / Technician Signature Name Date	Customer Signature Name Designation Date Stamp
[Signature]  15/2/18	[Signature] FAJARIA BINTI PETRUS JURURAWAT MASYARAKAT U19 NO LJM: 30367 15.2.2018

For Internal Use only

First Verification  
QMS Circle Incharge
 JULIUS LIANSUN  
 BIOMEDICAL ENGINEER, QMS  
 019-3620179
Final Verification  
QMS State Incharge
 [Signature]  
 DICKY LEE  
 SABAH STATE MANAGER  
 QUANTUM MEDICAL SOLUTIONS SDN BHD

 Quantum Medical Solutions sdn bhd Redefining Healthcare, Transforming Life	<b>Quantum Medical Solutions Sdn Bhd</b> BEMS Planned Preventive Maintenance Checklist <b>Fetal Heart Detector, Ultrasonic</b> BE CODE : 11-896	CHECKLIST NO: 070 REV.000					
<b>PART 1 ASSET DETAILS</b>							
WORK ORDER NO ▶ <u>PMO 372 022</u>		ASSET NO ▶ <u>WFL 024143</u>					
MANUFACTURER ▶ <u>Sonicare One</u>		MODEL ▶ <u>Sonicare One</u>					
FREQUENCY ▶ 3 MONTHLY ( ) 6 MONTHLY ( ) 12 MONTHLY <input checked="" type="checkbox"/>		PPM HOURS ▶ <u>0.25</u>					
<b>PART 2 SPECIAL PRECAUTION</b>							
If there is evidence of body fluid contamination, submit the device for cleaning and decontamination before inspecting it. Wear appropriate Personnel Protection Equipment (PPE) during work. Wear grounded electrostatic wristband when handling PCB or electronic components. Refer to the safety procedure for additional precautions and guidance as per manufacturer guidelines. Make sure the test equipment used are duly calibrated.							
<b>PART 3 TEST APPARATUS</b>							
Tick (✓) where appropriate							
NO	ASSET NO	DESCRIPTION	SERIAL NO	CALIBRATION DUE ON			
	NA	ELECTRICAL SAFETY TESTER	NA	NA			
<b>PART 4 QUALITATIVE TASKS</b>							
Tick (✓) where appropriate							
	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	(✓)	( )	( )	7 Circuit Breaker/ Fuse - verify integrity of external circuit breaker and/or rating of external fuse	(✓)	( )	( )
2 Mount/ Fasteners - verify physical integrity	(✓)	( )	( )	8 Fittings/ Connectors - check all fittings/connectors	(✓)	( )	( )
3 Casters/Brakes - if mounted, verify physical integrity	(✓)	( )	( )	9 Controls/ Switches/ Keypad - verify proper operation of controls	(✓)	( )	( )
4 Power Cord - verify proper insulation and integrity	(✓)	( )	( )	10 Indicators/ Displays - verify proper illumination and operation	(✓)	( )	( )
5 Strain Relief - verify physical integrity at both ends of line cord	(✓)	( )	( )	11 Alarm/ Audible Signal - verify operation	(✓)	( )	( )
6 Transducers/Cables - verify integrity and condition	(✓)	( )	( )				
<b>PART 5 PREVENTIVE MAINTENANCE TASKS</b>							
Tick (✓) where appropriate							
	DONE	NOT DONE**	NA				
1 Cleaning the inside with a vacuum cleaner	( )	( )	(✓)				
2 Clean Transducers/Cables	(✓)	( )	( )				
3 Check/Replace battery ***	(✓)	( )	( )				



### BEMS Planned Preventive Maintenance Checklist

**Fetal Heart Detectos,Ultrasonic**

BE CODE : 11-698

CHECKLIST NO: CL-070  
REV.000

WORK ORDER NO ▶ DW0372022

Tick (  $\checkmark$  ) where appropriate

[illegible]

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

☐ PASS☐ FAIL

☒ NA

~~Conf~~ was using

Qurt not perform BST cause using battery.

FAJARIA BINTI PETRUS  
JURURAWAT MASYARAKAT U19  
NO LJM: 30367

☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ NA

NEXT PPM DATE ▶ 10/2/99

PPM has been performed in accordance to the checklist and the equipment is functioning to the intended purpose.

COMPLETED BY:

DATE :

1512/18