

Form E03

Scheduled Maintenance Work Order

Quantum Medical Solutions sdn bhd
transcending boundaries, transcending life


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

Work Order No	PW0373421	Scheduled Month	FEBRUARY 2018
Work Order Date	1/2/18	Completed Date	27/2/2018
Clinic Name	KLINIK PERGIGIAN LABUAN	Clinic Code	WPL001
BE No	WPN/NB0001	District	W.P. Labuan
BE Category	In Cuckun Burner	WO Assigned to	MOHD. ASHMAW
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"/> Routine Inspection (RI)	<input type="checkbox"/> Third Party Calibration (TPC) <input type="checkbox"/> Statutory Certification (SC)	
BE Third Party Calibration / Statutory Certification Details			
Company Name		Cal / Cert Date	
Contact Number		Cal / Cert Expiry Date	
Action Taken Ppm carried out as per Checklist.			
Schedule Maintenance Execution Details			
SI No	QMS Engineer / Technician Name	Date	Start Time
	MOHD. ASHMAW B MOHD HISHAM BIOMEDICAL TECHNICIAN, QMS 019-2834231	27/2/2018	2.00pm
			2.30pm
Customer Remarks			
Engineer / Technician Signature MOHD. ASHMAW B MOHD HISHAM BIOMEDICAL TECHNICIAN, QMS 019-2834231 Date: 27/2/2018		Customer Signature HERMAN NOWI Juruteknologi Pergigian Klinik Pergigian Labuan Date: 27/2/18 Stamp:	



For Internal Use only

First Verification
QMS Circle InchargeJULIUS LAYSON
BIOMEDICAL ENGINEER, QMS
019-3620179Final Verification
QMS State InchargeDICKY LEE
SABAH STATE MANAGER
QUANTUM MEDICAL SOLUTIONS SDN BHD

 Quantum Medical Solutions sdn bhd <i>Transcending boundaries, transforming life</i>	Quantum Medical Solutions Sdn Bhd BEMS Planned Preventive Maintenance Checklist Induction Burner, Wax BE CODE :DE-036	CHECKLIST NO:CL-183 REV.000					
PART 1 ASSET DETAILS							
WORK ORDER NO ▶ PW0393421		ASSET NO ▶ WPN1W3001					
MANUFACTURER ▶		MODEL ▶					
FREQUENCY ▶ 3 MONTHLY () 6 MONTHLY () 12 MONTHLY (/)		PPM HOURS ▶ 0.5					
PART 2 SPECIAL PRECAUTION							
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.							
PART 3 TEST APPARATUS							
<i>Tick (/) where appropriate</i>							
NO	ASSET NO	DESCRIPTION	SERIAL NO	CALIBRATION DUE ON			
1	TEESA 0085	ELECTRICAL SAFETY ANALYZER	3227039	10 / 1 / 17			
PART 4 QUALITATIVE TASKS							
<i>Tick (/) where appropriate</i>							
	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	(/)	()	()	7 Fittings/ Connectors - check all fittings/connectors	(/)	()	()
2 Mount/ Fasteners - verify physical integrity	(/)	()	()	8 Controls/Switches - verify proper operation of controls	(/)	()	()
3 Alarms/ Interlocks - check all alarms available	(/)	()	()	9 Indicators/ Displays - verify proper illumination and operation	()	()	(/)
4 AC Plug - verify integrity	(/)	()	()	10 Label - verify physical integrity	(/)	()	()
5 Power Cord - verify proper insulation and integrity	(/)	()	()	11 Circuit Breaker/ Fuse - verify integrity of external circuit breaker	(/)	()	()
6 Strain Relief - verify physical integrity at both ends of line cord	(/)	()	()				
PART 5 PREVENTIVE MAINTENANCE TASKS							
<i>Tick (/) where appropriate</i>							
	DONE	NOT DONE **	NA				
1 Inspect , Clean Interior and Exterior	(/)	()	()				
2 Align/Adjust - Mechanical components	(/)	()	()				



Quantum Medical Solutions Sdn Bhd
Innovating boundaries, transforming life

Quantum Medical Solutions Sdn Bhd

BEMS Planned Preventive Maintenance Checklist

Induction Burner, Wax

BE CODE: DE-038

CHECKLIST NO: CL-183
REV.003

WORK ORDER NO ▶ PO 573 V21

PART 6 QUANTITATIVE TASKS

Tick (✓) where appropriate

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA

PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60801)

☒ PASS

☐ FAIL

☐ NA

PART 8 NOTES

EST Class II

☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ NA

NEXT PPM DATE ▶ 28/2/2019

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

COMPLETED BY:

MOHD. ASHMAWI B MOHD HISHAM
BIOMEDICAL TECHNICIAN, SMC
019-2634231

HERMAN NOWI
Juruteknologi Pergigian
Klinik Pergigian Labuan

DATE: 27/2/2018

23/3/18

Fluke Biomedical

Date 27/02/2018

Test Setup

Operator ID LBNBME
Calibration Tech
Calibration Date 10/01/2019
Firmware Version 2.08.01
Serial Number 3227035
Date & Time 27/02/2018 & 14:11
JOB Name

DUT Information

Equipment Number WPNINB 001
Serial Number
Manufacturer
Model
Location KLINIK PERGIGIAN
Other

Template Information

Template Name INDUCTION BURNER
Pause after Power ON NO
Power ON delay 2
Test Speed RAPID
Halt on Test Failure YES
Include Time YES
Insulation Resistance Voltage 250V
Multi Enclosure Test NO

Standard IEC62353-Differential
Pause before Power OFF NO
Power OFF delay 0
Test Mode AUTO
Multi PE Test NO
Multi Restore WORST/LAST
Reverse Polarity YES
Classification II

PLC Configuration-Applied part setup

AP Name AP Type AP Num

ESA615 Test Results

Test Name	Value	High Limits	Low Limits	Status
Mains Voltage				P
Live to Neutral	240.7 V	-	-	P
Equipment Current	0.0 A	-	-	P
Differential Leakage				P
Normal Condition	28 uA	100	-	P
Normal Condition-Reversed mains	41 uA	100	-	P

Signature

MOHD. ASHMANI B MOHD NISHAM
BIOMEDICAL TECHNICIAN
019-2534981