

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	PW0371937	Scheduled Month	FEBRUARY 2018
Work Order Date	12/18	Completed Date	15/2/19
Clinic Name	KD BEPULUH	Clinic Code	WPL008
BE No	WPL024114	District	WP. LABUAN
BE Category	WHT, EXAMINATION	WO Assigned to	che Muhammed
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 type="checkbox"/> Preventive Maintenance (PM) <input checked="" 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	NA	Cal / Cert Expiry Date	NA

## Action Taken

↳ ppm was carried out as per Checklist.

## Schedule Maintenance Execution Details

SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
	CHE MUND. ATILLAN BIOMEDICAL TECHNICIAN, QMS 019-2572640	15/2/19	11:30	11:45


## Customer Remarks




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Engineer / Technician Signature Name <i>a.</i> Date CHE MUND. ATILLAN BIOMEDICAL TECHNICIAN, QMS 019-2572640 15/2/19	Customer Signature Name <i>FBP</i> Designation FAJARIA BINTI PETRUS Date JURURAWAT MASYARAKAT U19 NO LJM: 30367 Stamp 15.2.2019
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For Internal Use only

First Verification  
QMS Circle Incharge
 JULIUS HANSON  
 BIOMEDICAL ENGINEER, QMS  
 019-3621179
Final Verification  
QMS State Incharge
 LUCKY LEE  
 SARAH STATE MANAGER  
 QUANTUM MEDICAL SOLUTIONS SDN BHD

 Quantum Medical Solutions sdn bhd <i>transcending boundaries, redefining life</i>	<b>Quantum Medical Solutions Sdn Bhd</b> BEMS Planned Preventive Maintenance Checklist <b>Light, Examination</b> BE CODE : 12-276	CHECKLIST NO: CL-091 REV.000					
<b>PART 1 ASSET DETAILS</b>							
WORK ORDER NO ▶ <b>820371937</b>		ASSET NO ▶ <b>WPL02414</b>					
MANUFACTURER ▶ <b>ALC</b>		MODEL ▶ <b>ALC</b>					
FREQUENCY ▶ 3 MONTHLY ( )    6 MONTHLY ( )    12 MONTHLY ( / )		PPM HOURS ▶ <b>0-80</b>					
<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>							
<i>Tick (✓) where appropriate</i>							
NO	ASSET NO	DESCRIPTION	SERIAL NO	CALIBRATION DUE ON			
	<b>TRESC 0085</b>	ELECTRICAL SAFETY ANALYZER	<b>3227035</b>	<b>10/1/19</b>			
	<b>NA</b>	LUX METER	<b>NA</b>	<b>NA</b>			
<b>PART 4 QUALITATIVE TASKS</b>							
<i>Tick (✓) where appropriate</i>							
	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	( / )	( )	( )	7 Easy handling of all the articulation - verify performance	( / )	( )	( )
2 Fittings/Connectors - verify integrity	( / )	( )	( )	8 Maneuver stability - verify balance	( / )	( )	( )
3 Controls/Switches - verify proper operation of controls	( / )	( )	( )	9 Stand by power - verify operation	( )	( )	( / )
4 Indicators/ Displays - verify proper illumination and operation	( )	( )	( / )	10 Circular appearance of the light path - verify performance	( / )	( )	( )
5 Brightness Control - verify operation	( )	( )	( / )	11 Check light focus	( )	( )	( / )
6 Lighthouse - verify fixation	( / )	( )	( )	12 Suspension - verify fixation	( / )	( )	( )
<b>PART 5 PREVENTIVE MAINTENANCE TASKS</b>							
<i>Tick (✓) where appropriate</i>							
	DONE	NOT DONE**	NA		DONE	NOT DONE**	NA
1 Lenses/Heat Filter - Check and clean	( / )	( )	( )	4 Bulb holder - Check / replace***	( / )	( )	( )
2 Cleanliness - Clean the exterior and interior of the equipment	( / )	( )	( )	Notes:  * For all Parts, NA is defined as NOT APPLICABLE **If you have ticked 'NOT DONE', then justify in Part 8 *** Choose Whichever Applicable			
3 Bulb - Check / replace***	( / )	( )	( )				

 Quantum Medical Solutions Sdn Bhd <small>Research, setting, forward vision, breakthrough, quality life</small>	<b>Quantum Medical Solutions Sdn Bhd</b> BEMS Planned Preventive Maintenance Checklist <b>Light, Examination</b> BE CODE : 12-275	CHECKLIST NO: CL-091 REV.000						
WORK ORDER NO ▶ <u>PWD 371937</u>								
<b>PART 6 QUANTITATIVE TASKS</b>								
<i>Tick (✓) where appropriate</i>								
No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
	Light intensity at 1 m distance	Lux		NA		( )	( )	(✓)
	Not perform cause unit dint use LED bulb.							
<b>PART 7 ELECTRICAL SAFETY TEST</b>								
ELECTRICAL SAFETY TEST, (attach report) (In accordance to IEC 60601)								
<input checked="" type="checkbox"/> PASS <input type="checkbox"/> FAIL <input checked="" type="checkbox"/> NA								
<b>PART 8 NOTES</b>								
 <b>FAJARIA BINTI PETRUS</b> JURURAWAT MASYARAKAT U19 NO LJM: 30367								
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> CORRECTIVE MAINTENANCE REQUIRED         </div> <div> <input checked="" type="checkbox"/> FUNCTIONING         </div> <div> <input type="checkbox"/> NOT FUNCTIONING         </div> </div>								
WORK ORDER NO ▶ <u>NP</u>						NEXT PPM DATE ▶ <u>14/2/19</u>		
PPM has been performed in accordance to the checklist and the equipment is functioning to the intended purpose.								
COMPLETED BY:								
 CHEONG HUI ATILLAN SIGNATURE 18/2/2018 013 7612640								
DATE: <u>18/2/18</u>								

# Fluke Biomedical

Date 15/02/2018

## Test Setup

Operator ID LBNBME  
Calibration Tech  
Calibration Date 10/01/2019  
Firmware Version 2.08.01  
Serial Number 3227029  
Date & Time 15/02/2018 & 11:37  
JOB Name

## DUT Information

Equipment Number WPL 024114  
Serial Number  
Manufacturer  
Model  
Location KD BEBULUH  
Other

## Template Information

Template Name LIGHT, EXAMINATION  
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 I

## PLC Configuration-Applied part setup

AP Name AP Type AP Num

## ESA615 Test Results

Test Name	Value	High Limits	Low Limits	Status
Protective Earth Resistance	0.14 Ohm	0.3	-	P
Insulation Resistance				P
Mains to Protective Earth	999 MOhm	-	-	P
Mains Voltage				P
Live to Neutral	240.7 V	-	-	P
Live to Earth	11.7 V	-	-	P
Neutral to Earth	240.1 V	-	-	P
Equipment Current	9.1 A	-	-	P
Differential Leakage				P
Normal Condition	18 uA	500	-	P
Normal Condition-Reversed mains	26 uA	500	-	P

  
Signature