

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	PW0372640	Scheduled Month	FEBRUARY 2018
Work Order Date	1/2/18	Completed Date	13/2/2018
Clinic Name	CD BUKIT KALAM	Clinic Code	WPL0011
BE No	WPL0001987	District	W.P. Labuan
BE Category	HEART DETECTORS	WO Assigned to	Mohd. Asyhar
Ownership	<input 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 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	NA	Cal / Cert Date	NA
Contact Number	NA	Cal / Cert Expiry Date	NA

Action Taken

↳ Do PM as per Checklist.

Schedule Maintenance Execution Details


Sl No	QMS Engineer / Technician Name	Date	Start Time	End Time
	JURAINI AHMAD, QMS BIOMEDICAL TECHNICIAN, QMS 019-3620179	13/2/2018	10:15am	10:30am

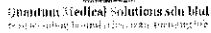
Customer Remarks

Engineer / Technician Signature	Customer Signature
Name	Name
Date	Designation
13/2/2018	JURAINI AHMAD
	KETUA JURURAHAT KESIHATAN USKUP
	Date 13.2.2018
	Stamp

For Internal Use only

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

 Quantum Medical Solutions sdn bhd <small>transcending boundaries, transforming life</small>	Quantum Medical Solutions Sdn Bhd BEMS Planned Preventive Maintenance Checklist Fetal Heart Detectos, Ultrasonic BE CODE : 11-698	CHECKLIST NO: 070 REV.000					
PART 1 ASSET DETAILS							
WORK ORDER NO ▶ <u>200372040</u>		ASSET NO ▶ <u>WPL 000197</u>					
MANUFACTURER ▶ <u>Huntleigh</u>		MODEL ▶ <u>N 1+</u>					
FREQUENCY ▶ 3 MONTHLY () 6 MONTHLY () 12 MONTHLY <input checked="" type="checkbox"/>		PPM HOURS ▶ <u>0.25</u>					
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							
Tick (✓) where appropriate							
NO	ASSET NO	DESCRIPTION	SERIAL NO	CALIBRATION DUE ON			
	NA	ELECTRICAL SAFETY TESTER	NA	NA			
PART 4 QUALITATIVE TASKS							
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	(✓)	()	()				
PART 5 PREVENTIVE MAINTENANCE TASKS							
Tick (✓) where appropriate							
	DONE	NOT DONE**	NA				
1 Cleaning the inside with a vacuum cleaner	(✓)	()	()	Notes: * For all Parts, NA is defined as NOT APPLICABLE ** If you have ticked 'NOT DONE', then justify in Part 8 *** Choose Whichever Applicable			
2 Clean Transducers/Cables	(✓)	()	()				
3 Check/Replace battery ***	(✓)	()	()				



BEMS Planned Preventive Maintenance Checklist

Fetal Heart Detectos,Ultrasonic

BE CODE : 11-696

CHECKLIST NO: CL-070
REV.000

PART 6 QUANTITATIVE TASKS

Tick (✓) where appropriate

[illegible]

PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

☐ PASS

☐ FAIL

☐ NA

PART 8 NOTES

↳ ~~It~~ EST not perform cause unit using Battery.

JURAINI AHMAD
KETUA JURURANGKAP KESIHATAN USKPM
LUM. 21423

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☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING 1/2

WORK ORDER NO. NA

NEXT PPM DATE ▶ 03/1/2019

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

COMPLETED BY:

DATE: 13/2/2018