## Form B03

## Scheduled Maintenance Work Order



Quantum Medical Solutions admibild transcreating boundaries, transforming life

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

	A.			+	1 - 2·W					
Work Order No	pw0371998	Sched	luled Month	TEDUAR	<i>A</i>					
Work Order Date	112/18	Completed Date 15/2/18		18						
Clinic Name	CO PERUCUH.	Clinic	Clinic Code WVC 008							
BE No	WPL 000 249	Distric	District WP. Labran							
BE Category	FETAL HEAFT DETEGRAL	WO A	ssigned to	the Muhermes						
Ownership	Existing Equipment	New & Purchased Equipment								
BE Condition	☐ Under Warranty	☐ BER Proposed								
	Preventive Maintenance (PM)		Third Party Calibratio	n (TPC)						
Work Order Type	Routine Inspection (RI)	Statutory Certification (SC)								
BE Third Party Calibration / Statutory Certification Details										
Company Name	pany Name		Cal / Cert Date							
Contact Number	NA	Cal / C	Cert Expiry Date	/ 101	SOUNAN A CONTINUE OF THE SOUNAND OF					
Action Taken										
Lo ppm was carried out as per CheekUst.										
, , ,	, ,									
Schedule Mainten	ance Execution Defails		in gran enve	eul Arbi-di						
SI No	QMS Engineer / Technician Name		Date	Start Time	End Time					
			15/2/18	165	1630					
			,							
			National Association of the Control							
Customer Remarks										
- Company of the Comp		iamieran Prysia niiogen			Name of the last o					
Engineer / Technician Signature			Customer Signature							
Name W. Name				full)						
Date Designation FAJARIA BINTI PETRUS										
		Date	Date JURURAWAT MASYANAKAT U19 NO LJM: 30367							
	. / / /	Stamp 15 2.3618								
	15/2/8/									
For Internal Use on	7									
	JULIUS LIANSUN									

First Verification

QMS Circle Incharge

HULTUS HANSUN
BIOMEDICAL ENGINEER, QMS
019-3610179

Final Verification QMS State Incharge

> DACKY LEE SABAH STATE MANAGER QUANTUM MEDICAL SOLUTIONS SON BHD



## Quantum Medical Solutions Sdn Bhd

BEMS Planned Preventive Maintenance Checklist Fetal Heart Detectos,Ultrasonic

BE CODE : 11-696

CHECKLIST NO: 070 REV.000

PART 1 ASSET DETAILS				ng dakasa k								
	00 33	199	5/		ASSET NO	- whoe	0249					
	M lts	. 12	-		MODEL	- M (*						
	HLY()	AOM 8	NTHLY ( )	12 MONTHLY	(/) PPM HOURS	· 0.28	`					
PART 2 SPECIAL PRECAUTION		3 (1.0)					化电影电影					
If there is evidence of body fluid contar	nination, sub	mit the devic	e for cleaning	and decontaminatio	on before inspecting it.							
Wear appropriate Personnel Protection Equipment (PPE) during work.												
Near 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	o outy callula											
Tick ( $\sqrt{\ }$ ) where appropriate												
NO ASSET NO		DESCRIPTION			SERIAL NO	CALIBRA	ATION DUE ON					
NA	ELECTRICA	AL SAFETY	TESTER		NA	٨	4					
				·								
PART 4 QUALITATIVE TASKS												
Tick ( √ ) where appropriate												
			AIL NA	7 Charlet Dan-lin	er/ Fuse - verify integrity of	PASS	FAIL NA					
Chassis - verify physical integrity cleanliness and condition	, (	/)(	) ( )	external circuit fuse	ernal	, , ( )						
2 Mount/ Fasteners - verify physica	al integrity (	/)(	) ( )		nectors - check all ctors	(/)	( ) ( )					
Casters/Brakes - if mounted, ver physical integrity	ify (	(Z) (	) ( )	9 Controls/ Swit	tches/ Keypad - verify proper controls	(/)	( ) ( )					
Power Cord - verify proper insulation an integrity		(/)(	) ( )	10 Indicators/ Dis	splays - verify proper illumina เ	ition ( /)	( ) (					
5 Strain Relief - verify physical integrity at ( ) ( ) ( ) 11 Alarm/ Audible Signal - verify of both ends of line cord				ole Signal - verify operation	(/)	( ) (						
6 Transducers/Cables - verify integrity and ( / ) ( ) ( ) condition												
PART 5 PREVENTIVE MAINTENA	NCE TASKS	<b>S</b>										
Tick ( √ ) where appropriate												
		DONE DO	OT ONE NA									
1 Cleaning the inside with a vacuu		( <b>)</b>	)(/	)								
2 Clean Transducers/Cables	) (	Notes:  * For a	* For all Parts, NA is defined as NOT APPLICABLE									
3 Check/Replace battery ***	) (		ose Whichever Applicable	•								
Ī												



## Quantum Medical Solutions Sdn Bhd

CHECKLIST NO: CL-070 REV.000 **BEMS Planned Preventive Maintenance Checklist** Fetal Heart Detectos, Ultrasonic BE CODE: 11-896 pw0371998 WORK ORDER NO ► PART 6 QUANTITATIVE TASKS Tick (  $\sqrt{\phantom{a}}$  ) where appropriate Set Measured NΑ PASS FAIL Limit/Tolerance Description No Values UOM Values PART 7 ELECTRICAL SAFETY TEST ELECTRICAL SAFETY TEST, (attach report) (in accordance to IEC 60801) NA NA FAIL PASS LDEST not perform cause FAJARIA BINTI PETRUS JURURAWAT MASYARAKAT U19 NO LuM: 30367 NOT FUNCTIONING FUNCTIONING CORRECTIVE MAINTENANCE REQUIRED NEXT PPM DATE > 141~/18 WORK ORDER NO ►\_ PPM has been performed in accordance to the checklist and the equipment is functioning to the intended purpose. COMPLETED BY:

ê5 /2/18

DATE: