

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	PWO322198		Scheduled Month	February 2018	
Work Order Date	01/2/18		Completed Date	12/2/2018	
Clinic Name	KLINIK 1 MALAYSIA (Tmn Mutiara)		Clinic Code	WIFE W1016	
BE No	WPL000159		District	UP - KUBANG	
BE Category	SPHYGMOMANOMETERS, MERCURY		WO Assigned to	Mohd. Ashman	
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"/> 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	NA		Cal / Cert Date	NA	
Contact Number	NA		Cal / Cert Expiry Date	NA	
Action Taken					
<p>→ Do PM as Per Checklist.</p>					
Schedule Maintenance Execution Details					
SI No	QMS Engineer / Technician Name		Date	Start Time	End Time
	MOHD. ASHMAN MOHD NISHAM BIOMEDICAL TECHNICIAN, QMS		12/2/2018	10:00am	10:15am
Customer Remarks					
Engineer / Technician Signature			Customer Signature		
Name			Name		
Date			Designation		
MOHD. ASHMAN MOHD NISHAM BIOMEDICAL TECHNICIAN, QMS 019-3620179			HAIZZA MAIDIN		
12/2/2018			Penolong Pegawai Perubatan U29		

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First Verification
QMS Circle InchargeJULIUS MANSUN
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 Sphygmomanometers, Mercury ASSET NO	CHECKLIST NO: CL-143 REV.000		
PART 1 ASSET DETAILS				
WORK ORDER NO ▶ PW-372198		ASSET NO ▶ WFL000159		
MANUFACTURER ▶		MODEL ▶		
FREQUENCY ▶ 3 MONTHLY () 6 MONTHLY () 12 MONTHLY (/)		PPM HOURS ▶ 0.28		
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	NA	NON-INVASIVE BLOOD PRESSURE ANALYZER	NA	NA
PART 4 QUALITATIVE TASKS				
<i>Tick (✓) where appropriate</i>				
	PASS	FAIL	NA	
1 Chassis - verify physical integrity, cleanliness and condition	(/)	()	()	
2 Mount/ Fasteners - verify physical integrity	(/)	()	()	
3 Check cuff & hose verify physical integrity and cleanliness	(/)	()	()	
4 Check Bulb verify physical integrity and cleanliness	(/)	()	()	
5 Check air release valve	(/)	()	()	
6 Check mercury valve	(/)	()	()	
7 Check Glass tube leak	(/)	()	()	
PART 5 PREVENTIVE MAINTENANCE TASKS				
<i>Tick (✓) where appropriate</i>				
	DONE	NOT DONE	NA	
1 Clean exterior and interior of the equipment	(/)	()	()	
2 Clean mercury	()	()	(/)	
3 Clean mercury tank	()	()	(/)	
4 Clean glass tube	(/)	()	()	

 Quantum Medical Solutions sdn bhd <small>Corporation Berdaftar dengan Suruhanjaya Pendaftaran Perusahaan</small>	Quantum Medical Solutions Sdn Bhd BEMS Planned Preventive Maintenance Checklist Sphygmomanometers, Mercury ASSET NO	CHECKLIST NO: CL-143 REV.000
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WORK ORDER NO ▶ PMO332198

PART 6 QUANTITATIVE TASKS

Tick (✓) where appropriate

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
1.	<u>Lead test</u>	mmHg	200	191	± 16	✓		
1	Blood pressure accuracy	mmHg	40		38 - 42	()	()	(✓)
		mmHg	70		68 - 72	()	()	(✓)
		mmHg	100		98 - 102	()	()	(✓)
		mmHg	130		128 - 132	()	()	(✓)
		mmHg	160		158 - 162	()	()	(✓)
		mmHg	190		188 - 192	()	()	(✓)

PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

☐ PASS

☐ FAIL

☒ NA

PART 8 NOTES


HAIZZA MAIDIN
 Penolong Pegawai Perubatan U29

☐

CORRECTIVE MAINTENANCE REQUIRED

☒

FUNCTIONING

☐

NOT FUNCTIONING

WORK ORDER NO ▶ NA

NEXT PPM DATE ▶ 11/2/2019

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

COMPLETED BY:

MOND. ASHMAVA S NICHOL NISHAN
 BIOMEDICAL TECHNICIAN, GMS
 612-2034231

DATE:

12/2/2018