

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	pw 0371942	Scheduled Month	February 2018	
Work Order Date	1/2/18	Completed Date	15/2/18	
Clinic Name	LD. DEBULUH.	Clinic Code	WLC008	
BE No	WPLO2/111	District	WP. LABUAN	
BE Category	PITAL <del>HEP</del> HEART DETECTORS	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 checked="" type="checkbox"/> Preventive Maintenance (PM)	<input type="checkbox"/> Third Party Calibration (TPC)		
	<input type="checkbox"/> Routine Inspection (RI)	<input type="checkbox"/> Statutory Certification (SC)		
<b>BE Third Party Calibration / Statutory Certification Details</b>				
Company Name	NA		Cal / Cert Date	NA
Contact Number			Cal / Cert Expiry Date	
<b>Action Taken</b>				
LD PPM was carried out as per checklist.				
<b>Schedule Maintenance Execution Details</b>				
SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
		15/2/18	1400	1430 1/2
<b>Customer Remarks</b>				
<b>Engineer / Technician Signature</b>		<b>Customer Signature</b>		
Name		Name		
Date		Designation		
15/2/18		FAJARA BINTI PETRUS		
		JURURAWAT MASYARAKAT U19		
		NO LJM: 30367		
		Date		
		Stamp		
		15-2-2018		

For Internal Use only

First Verification  
QMS Circle InchargeJULIUS HANSUN  
BIOMEDICAL ENGINEER, QMS  
019-3630179Final Verification  
QMS State InchargeDICKY LEE  
SARAH STATE MANAGER  
QUANTUM MEDICAL SOLUTIONS SDN BHD

WORK ORDER NO ▶ pwo 371942

## PART 6 QUANTITATIVE TASKS

Tick (  $\checkmark$  ) where appropriate

[illegible]

## PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

11

PASS

11

FAIL



NA

## PART 8 NOTES

FAJARIA BINTI PETRUS  
JURURAWAT MACYAPAKAT U19  
NO LJM: 30367

1

CORRECTIVE MAINTENANCE REQUIRED



## FUNCTIONING

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NOT FUNCTIONING

WORK ORDER NO. NA

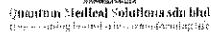
NEXT PPM DATE ▶ 14/2/17

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

COMPLETED BY:

DATE : \_\_\_\_\_

5/2/18



### BEMS Planned Preventive Maintenance Checklist

**Fetal Heart Detectos,Ultrasonic**

BE CODE : 11-896

CHECKLIST NO: CL-070  
REV.000

WORK ORDER NO ▶ pwo 371942

Tick (✓) where appropriate

## PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60801)

☐ PASS☐ FAIL☐ NA

## PART 8 NOTES

FAJARIA BINTI PETRUS  
JURURAWAT MENCARAKAT U19  
NO LUM: 30367

☐ CORRECTIVE MAINTENANCE REQUIRED

FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ NA

NEXT PPM DATE ➤ 14/2/17

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

COMPLETED BY:

DATE :