Form B03





Format Ref: - QMS/TSD-022 Rev.01

		-					
Work Order No.	PWO365732	Schedu	ule Month	June 2018	ti.		
Work Order Date	01/06/2018	Comple	eted Date	19-06-3	1018		
Clinic Name	Klinik Kesihatan Pesta / Kampung Ken	Clinic C	Code	JHR015			
BE No.	JHR002014	Distict		BATU PAHAT			
BE Category	Sphygmomanometers, Mercury	WO Ass	signed to	MUHD SH	HAZRUL.		
Ownership	Existing Equipment		Purchase	New			
BE Condition	✓ Active		BER Proposed				
Work Order Type	Preventive Maintenance (PM)	Third Party Calibration (TPC)					
Work Order Type	✓ Routine Inspection (RI)		Statutory Certification (SC)				
Reschedule Date			2				
BE Third Party Calibration	on / Statutory Certification Details						
Company Name	NA	Cal / Ce	ert Date	NA			
Contact Number	NIT	Cal / Ce	ert Expiry Date		5		
Action Taken PM / RI job do Corrective Mai BE Sticker Ava Remarks:		od & read	ly to use.	Manufacturer : Modal : Serial No :			
Schedule Maintenance I	Execution Details						
SI No	QMS Engineer / Technician Name		Date	Start Time	End Time		
1	MUHD SHADRUL.		19-06-201	8 12:00	15:20.		
	-						
					_		
Customer Remarks							
Engineer / Technician Sign Name Date QUANTUN MUHAMMAD	ature 19 06 2018 IMEDICAL SOLUTION	Custome Name Designa Date Seal	er Signature	ROSEGALT 032 (841 00010) (148 014 21 6 1 8			
. S. Milomai Soo							
2	O PULA MIONANI						

First Verification

QMS Circle Incharge

RAZILA MISKAN
Biomedical Engineer (Circle In-Charge)
Quantum Medical Solutions Sdn. Bhd.

Final Verification

QMS State Incharge

Quantum Medical Solutions Sdn Bhd

BEMS Planned Preventive Maintenance Checklist Sphygmomanometers, Mercury

CHECKLIST NO: CL-143 REV.000

Quantum Medical Solutions shi bhd

									88	CODE	: 16-158						
PA	RT1	ASSET DE	TAILS			Mark											
wo	RK OF	RDER NO	•	Pwo	365	732	•						ASSET NO	► JH	tR	2020	4.
MAN	NUFAC	TURER	•	Acco	0500	Y							MODEL	► W	K.	2	
FRE	QUEN	ICY	•	3 MONT	HLY ()	6 M	JHTNC	Y ()	12 MONTHL	YU	PPM HOURS	•	20	min	
PA	RT 2	SPECIAL P	RECA	UTION		446				ar de							
If the	ere is e	vidence of	body fl	uid contar	mination,	submit t	he de	vice for	r clean	ing an	d decontamina	tion before	e inspecting it.				
1		opriate Pers						- 1 -									
Wea	r grou	nded electro	ostatic	wristband	when ha	andling P	CB or	r electr	onic co	ompon	ients.						
	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 (\checkmark) where appropriate																	
	Т						72					T	120211111111				
NO ASSET NO		DESCRIPTION							SERIAL NO			CALIBRATION DUE ON					
	1			NON-INVASIVE BLOOD PRESSURE ANALYZER						IALYZER							
		TEESA			Pre	2SSW	re	Go	sug.	e			1985		9/1	1/20	18.
		QUALITATI	经证据证据 中华	SKS													
Tick	(V) w/	here appropi	riate		10	PASS	; F	AIL	NA								
						, , , , ,		,									
1		sis - verify p iness and c				() ()	()							
2		/ Fasteners			integrity		5 ()	(
					,		, ,	3									
3 Check cuff & hose verify physical integrity (/) () () and cleanliness																	
4	Check cleanli	Bulb verif	y physi	cal integri	ty and	() ()	()							
5	Check	air release	valve			(/) ()	()			980				
6	Check	: mercury va	alve			() ()	()							
7	Check	Glass tube	leak			() ()	()							
PAF	₹ Т 5	REVENTIV	E MA	INTENAN	CE TASI	KS							Williams				
Tick ((√) wh	iere appropr	iate														
						DONE		OT	NA	No	tes:						
1	Clean	exterior and	d interi	or of the			5 () ((* For a	II Parts. N	NA is defined as NOT	APPI IC	CABLE	: **	
	equipn	nent				`_	6.3	fil 1	•		If you ha	ve ticked	'NOT DONE', then juster Applicable			***	
2	Clean	mercury				() () (()	Choose	4 4111C11CVE	or Applicable				
3	Clean	mercury tar	ık			(/) () (()							
4	Clean	glass tube				(/) () (()							



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist Sphygmomanometers, Mercury BE CODE : 16-158 CHECKLIST NO:CL-143-000 REV.000

WORK ORDER NO ▶

(V)	where appropriate							
No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
				76.4				
1	Blood pressure accuracy	mmHg	40	40	38 - 42		()	
		mmHg	70	70	68 - 72		()	
		mmHg	100	100	98 - 102	(/)	()	()
		mmHg	130	130	128 - 132	(/)	()	()
		mmHg	160	160	158 - 162	(/)	()	()
		mmHg	190	190	188 - 192	(/)	()	()
RT 7	ELECTRICAL SAFETY TEST							
	RICAL SAFETY TEST, (attach report)							
k (N) where appropriate Standard use :		Result:					
		62353	Troodic 1	PASS	FAIL	NA		
	NOTES	, 62333			LIAL			
		NI	A					
	CORRECTIVE MAINTENANCE REQUIRE	ED .		FUNCTIONIN	vG	NOT FUNCTION		
WC	CORRECTIVE MAINTENANCE REQUIRED IN A .	ED ,		FUNCTIONI	NG	NOT FUNCTION		uN 19