Form B03 **Scheduled Maintenance Work Order**



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

Work Order No.	PWO371091	Sched	ule Month	June 2018						
Work Order Date	01/06/2018	Compl	eted Date	13-06-7018						
Clinic Name	Klinik Kesihatan Pesta / Kam	npung Ken Clinic (Code	JHR015						
BE No.	JHPSPL199	Distict		BATU PAHAT						
BE Category	Spirometers, Low	WO As	signed to	MUHD SHAZRUL.						
Ownership	Existing Equipment	V	Purchase	New						
BE Condition	✓ Active		BER Proposed							
Mark Order Tune	✓ Preventive Maintena	ance (PM)	Third Party Calibration (TPC)							
Work Order Type	Routine Inspection (RI)	Statutory Certification (SC)							
Reschedule Date										
BE Third Party Ca	ibration / Statutory Certification Det	ails								
Company Name	NA -	Cal / C	ert Date	NA _						
Contact Number		Cal / C	ert Expiry Date							
Action Taken			,							
PM/R	job done as per checklist. Unit tested fur	nctioning good & read	dy to use.	Manufacturer :						
Correct	ive Maintenance / Breakdown		Modal :							
BE Stic	ker Availability : Yes / N	A		Serial No :						
Remar										
Schedule Mainten	ance Execution Details									
SI No	QMS Engineer / Techniciar	n Name	Date	Start Time	End Time					
	MUHD SHADRUL		13-06-2018	13:02	14:05					
	HINGID SIMPLE				20 No. 100801					
	20 E									
Customer Remarks				ii.						
,	VA			\mathcal{A}						
Engineer / Technician Signature Name Name Date OUANTUM MEDICAL SOLUTION MUHAMMAD SHAZRUL BIN MOHD SAMSURI BICMEDICAL TECHNICIAN Customer Signature Name Designation Designation Nur Hazirah Negey Abdullah (No. Pendaftarah Penuh: 54451) Jugarawat U29 KK Kg. Kenangan Dato Onn Seal										
For Internal Use										

First Verification QMS Circle Incharge

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

Final Verification QMS State Incharge

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KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist Spirometers, Low

BE CODE : ME-020

CHECKLIST NO:CL-145-000 REV.000

PAR	T1 ASSET DET	TAILS															
WOR	K ORDER NO	>	6mo 3	710	91								AS	SET NO	>	JHPSPL 199	•
MANL	JFACTURER	•	carefus										МО	DEL	•	micro peak	
FREQ	UENCY	•	3 MONTHLY	()) 6	MON	THLY	(()	12 MO	NTHLY	(√)	PPI	M HOURS	>	1.00	
PAR	72 SPECIAL P	RECA	UTION														
If there	e is evidence of t	oody fl	uid contaminat	tion, su	bmit the	device	e for o	cleani	ng and	deconta	aminatio	n before	e inspectin	g it.			
Wear	appropriate Pers	onnel	Protection Equ	uipmen	t (PPE)	during	work	i.									
Wear	grounded electro	static	wristband whe	en hand	ling PC	3 or ele	ectror	nic co	mpone	nts.							
Refer	Refer to the safety procedure for additional precautions and guidance as per manufacturer guidelines.																
	sure the test equ			y calibra	ated.												
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2 A	djust/ align mech	nanical	components	(<u> /</u>)	() ()		511008						



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist Spirometers, Low BE CODE : ME-020 CHECKLIST NO : CL-145-000 REV.000

WORK ORDER NO ▶

PART 6	QUANTITATIVE	TASKS			111					
Tick (√)	where appropriate	P 60		1		г				
No		Description	1	Units /	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
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PART 7	ELECTRICAL S	AFETY TEST								
		TEST, (attach repo	ort)							
Tick (\v)	where appropria	ute								
Star	ndard use :						Result:			
	☐ IEC 600	601 🗆 1	EC 61010	IEC 62353			PASS \square	FAIL	NA	
PART 8	NOTES									
Carlot Market										
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		CORRECTIVE MAI	NTENANCE REQUIR	RED		FUNCTION	NG	NOT FUNCTION	NING	
WO	RK ORDER NO	NA.						NEXT PPM DA	F >	JUNE 19 .
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		in accordance to the c		oment is function	oning to the	e intended pui	rpose.			
COMPLE	TED BY: M	CAHS CHU	RUL.							
DATE :	12-06	810C-								
DAIL:	-0	10								