

# Form B03

## Scheduled Maintenance Work Order



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

Work Order No.	PWO371727	Schedule Month	March 2018
Work Order Date	01/03/2018	Completed Date	08.03.2018
Clinic Name	Poliklinik Labuan	Clinic Code	WPL006
BE No.	WPL000473	Distict	LABUAN
BE Category	Radiographic/Fluoroscopic Systems	WO Assigned to	Ashmawi
Ownership	<input checked="" type="checkbox"/> Existing Equipment	<input type="checkbox"/> Purchase	<input type="checkbox"/> New
BE Condition	<input checked="" type="checkbox"/> Active	<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)	

Reschedule Date	
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### BE Third Party Calibration / Statutory Certification Details

Company Name	<i>~ / ~</i>	Cal / Cert Date	<i>~ / ~</i>
Contact Number		Cal / Cert Expiry Date	<i>~ / ~</i>

### Action Taken

- ppm service done. ok.
- cleaning of exterior & interior of the unit done. ok.
- Performance test done. ok.
- Unit is working in good condition & fit for use.

### Schedule Maintenance Execution Details

SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
083 0103	FELIX BAHAN RADIOLOGY SPECIALIST, QMS 019-2536325	08.03.18	12.30	14.00

### Customer Remarks

Engineer / Technician Signature Name <b>FELIX BAHAN</b> Date <b>RADIOLOGY SPECIALIST, QMS 019-2536325 08.03.18</b>	Customer Signature Name <i>[Signature]</i> Designation <b>IRDAWATY BONGSO</b> Date <b>8/3/18</b> Seal <b>Juru X-Ray U32</b> <b>Unit Pengimejan Diagnostik</b> <b>Klinik Kesihatan W. P. Labuan</b>
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For Internal Use

First Verification  
QMS Circle Incharge

**JULIUS LIAMSON**  
**BIOMEDICAL ENGINEER, QMS**  
**019-3620179**

Final Verification  
QMS State Incharge

*[Signature]*  
**DIAGNOSTIC LIFE**  
**GASAH STATE MANAGER**  
**QMS MEDICAL EQUIPMENT DIVISION**



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## Quantum Medical Solutions Sdn Bhd

BEMS Planned Preventive Maintenance Checklist  
Radiographic / Fluoroscopic Systems, General-Purpose  
BE CODE : 10-885

CHECKLIST NO: CL-119  
REV.000

### PART 1 ASSET DETAILS

WORK ORDER NO ▶ PWO 371727 ASSET NO ▶ WPL 000 473  
MANUFACTURER ▶ Shimadzu. MODEL ▶ UD150B-40  
FREQUENCY ▶ 3 MONTHLY ( ) 6 MONTHLY (✓) 12 MONTHLY ( ) PPM HOURS ▶ 15

### 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

Tick (✓) where appropriate

NO	ASSET NO	DESCRIPTION	SERIAL NO	CALIBRATION DUE ON
		ELECTRICAL SAFETY ANALYZER		
	TRESA 0401	KVP METER	3000 4222	04-02-19.
		mA METER		
		FOCAL SPOT TESTER		

### PART 4 QUALITATIVE TASKS

Tick (✓) where appropriate

	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	(✓)	( )	( )	24 Tube mounting clamps - verify integrity	(✓)	( )	( )
2 Mount/ Fasteners - verify physical integrity	(✓)	( )	( )	25 Tube rotation - Verify operation	(✓)	( )	( )
3 Casters/Brakes - if mounted, verify physical integrity	(✓)	( )	( )	26 Collimator mounts - verify integrity	(✓)	( )	( )
4 Power Cord - verify proper insulation and integrity	(✓)	( )	( )	27 Collimator rotation - verify operation	(✓)	( )	( )
5 Strain Relief - verify physical integrity at both ends of line cord	(✓)	( )	( )	28 Collimator transverse & longitudinal adjustment knobs - verify integrity and operation	(✓)	( )	( )
6 Electronic cabinet	(✓)	( )	( )	29 SID tape - Verify integrity and operation	(✓)	( )	( )
7 Circuit Breaker/ Fuse - verify integrity of external circuit breaker and/or rating of external fuse	(✓)	( )	( )	30 Light field activation switch - verify integrity & operation	(✓)	( )	( )
8 Fittings/ Connectors - check all fittings/connectors	(✓)	( )	( )	31 Cassette centering light - Verify operation	(✓)	( )	( )
9 Controls/ Switches/ Keypad - verify proper operation of controls	(✓)	( )	( )	<b>TABLE AND CHEST STAND</b>			
10 Indicators/ Displays - verify proper illumination and operation	(✓)	( )	( )	32 Table top movement - Verify integrity & operation	(✓)	( )	( )



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## Quantum Medical Solutions Sdn Bhd

BEMS Planned Preventive Maintenance Checklist  
Radiographic / Fluoroscopic Systems, General-Purpose

BE CODE : 18-885

CHECKLIST NO: CL-119  
REV.000

### PART 4 QUALITATIVE TASKS

Continues...


Tick (✓) where appropriate

	PASS	FAIL	NA		PASS	FAIL	NA
11 Over exposure safety contractor- Verify physical integrity	(✓)	( )	( )	33 Table/ Chest stand cassette trays – Verify integrity & operation	(✓)	( )	( )
12 Relays and contactors - Verify physical contactors	(✓)	( )	( )	34 Table / Chest stand grids – Verify integrity & operation	(✓)	( )	( )
13 PCB boards - verify physical integrity	(✓)	( )	( )	35 Table up/down movement – Verify operation	(✓)	( )	( )
14 HV generator –Verify integrity & oil level	(✓)	( )	( )	36 Table bucky movement – Verify operation	(✓)	( )	( )
15 High Voltage Cable harness – Verify Integrity	(✓)	( )	( )	37 Chest stand Bucky movement – Verify operation	(✓)	( )	( )
16 AEC Control - Verify operation	(✓)	( )	( )	38 Centering light - orientation	(✓)	( )	( )
<u>CEILING/FLOOR COLUMNS</u>				39 Cassette latches – Verify integrity & operation	(✓)	( )	( )
17 Up/Down movement – Verify integrity & operation	(✓)	( )	( )	40 Latch release switches - Verify integrity & operation	(✓)	( )	( )
18 Fittings and Bearings – Verify integrity & operation	(✓)	( )	( )	41 kVp, mAs, Sec, mA Selection – Verify operation	(✓)	( )	( )
19 Locks and Latches - Verify integrity & operation	(✓)	( )	( )	42 Exposure switch - Verify operation	(✓)	( )	( )
20 Counter weight balance – Verify integrity & operation	(✓)	( )	( )	43 Visual Exposure indicator – Verify operation	(✓)	( )	( )
21 Gas / hydraulic suspension – Verify integrity & operation	(✓)	( )	( )	44 Audible exposure signal– Verify operation	(✓)	( )	( )
22 Auto latches at center – Verify operation	(✓)	( )	( )	45 Tube movment - Verify integrity and Operation	(✓)	( )	( )
23 Breaks and clutches –Verify integrity & operation	(✓)	( )	( )	46 Calibration	( )	( )	(✓)

### PART 5 PREVENTIVE MAINTENANCE TASKS

Tick (✓) where appropriate

	DONE	NOT DONE **	NA		DONE	NOT DONE **	NA
1 Clean exterior and interior of the equipment	(✓)	( )	( )	4 Cleanliness of PWB - check and clean PWB of any dust of any dust.	(✓)	( )	( )
2 Clean Collimator glass	(✓)	( )	( )	5 Exhaust Fan - clean and check condition.	(✓)	( )	( )
3 Check/ align collimator bulb	(✓)	( )	( )	Notes: * For all parts, NA defined as NOT APPLICABLE ** If you have ticked 'NOT DONE', then justify in Part 8 *** Choose whichever applicable.			

 Quantum Medical Solutions sdn bhd <small>transcending boundaries, transforming life</small>	<b>Quantum Medical Solutions Sdn Bhd</b> BEMS Planned Preventive Maintenance Checklist <b>Radiographic / Fluoroscopic Systems, General-Purpose</b> <small>BE CODE : 16-885</small>	CHECKLIST NO: CL-118 REV.000
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WORK ORDER NO ▶ PW0871727

**PART 6 QUANTITATIVE TASKS**

Tick (✓) where appropriate

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
1	KV	KV	50	48	± 5kV	✓		
			70	67	"	✓		
			90	67	"	✓		
2	mA <i>mAs output linearity.</i>	mA		0.06	<i>col is within limit 0.1</i>	✓		
3	Time	Sec	0.01	0.01	± 10%	✓		
			0.14	0.04	"	✓		
			0.1	0.1	"	✓		

**PART 7 ELECTRICAL SAFETY TEST**

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

☐ PASS

☐ FAIL

☒ NA

**PART 8 NOTES**

*ppm service done. Unit working in good condition.*

☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ 216

NEXT PPM DATE ▶ 07/9/18

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

COMPLETED BY:

*Felix Bahan*  
 RADIOLOGY SPECIALIST, QMS  
 019-2536325

DATE:

*08-03-18*



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BE Number: WPL000473

**PLAN PREVENTIVE MAINTENANCE**  
**REPORT FOR**  
**RADIOGRAPHIC/FLUOROSCOPIC**  
**SYSTEMS, GENERAL-PURPOSE**

**(BE Code: 16-885)**

## GENERAL INFORMATION

### 1.0 X-Ray Equipment

#### Console

Manufacturer: Shimadzu

Model	Serial No.
UD150B-40	09373S01L

Remarks:

### 2.0 Generator Detail

Manufacturer : Shimadzu

Model	Serial No.	Min / Max kVp	Min/Max mA/mAs	Min/Max Time	Single Phase	<input type="checkbox"/>	Radiation Indication
UD150B-40	0662R74608	40/150	0.5-800 mA	0.02-1.25 (Sec)	Three Phase	<input checked="" type="checkbox"/>	Visual <input checked="" type="checkbox"/> Audio <input checked="" type="checkbox"/>

Remarks:

### 3.0 X-Ray Tube

Manufacturer : Shimadzu

Insert Model	Housing Model	Filtration	Date of Manufacture	Tube Focus	
0.6/1.2P324DK- 85	0.6/1.2P324DK- 85			Small	Large
Serial No. 532-24486	Serial No. 2XY0001961	1.5 mm, Al	Jun-10	0.6 mm	1.2 mm

Type : Floor to ceiling column stand ☐  
 : Ceiling suspended ☒  
 : Others ☐

Remarks:

### 4.0 Light Beam Diaphragm

Manufacturer : Shimadzu

Model	Serial No.	Filtration
R-20J	503-59600	1.0 mmAl

LBD Type : Manual ☒  
 Automatic ☐

Remarks:

## MEASUREMENT DATA

### 1 Performance Criteria

1.a Table No. 1: kVp Accuracy Data

(Per PPM Service)

Set Factor SDD=100cm		Measured Reading	Difference Between Set and Measured Reading	Deviation Between Set and Measured Reading	Remarks and Conclusion
kVp	mAs	kVp	(+/- kVp)	(%)	The deviation is within the limit of +/- 5kVp or 5%  <b>Pass</b>
50	10	48.00	2	4.00%	
60	10	58.50	1.5	2.50%	
70	10	67.00	3	4.29%	
80	10	77.00	3	3.75%	
90	10	87.00	3.00	3.33%	
100	10	97.00	3.00	3.00%	

Maximum Deviation:5% or +/-5kVp whichever is greater

Remarks:

1.b Table No. 2: Timer Accuracy

(Per PPM Service)

Set Factor SDD=100cm			Measured Time	Deviation Between Set and Measured Time	Remarks and Conclusion
kVp	Sec	mAs	Sec	(%)	The deviation is within 10% <b>Pass</b>
70	0.005	4.00	0.0050	0.00	
70	0.010	8.00	0.0100	0.00	
70	0.020	16.00	0.0200	0.00	
70	0.040	32.00	0.0400	0.00	
70	0.063	50.00	0.0630	0.00	
70	0.100	80.00	0.1000	0.00	

Maximum Deviation=10%

Remarks:

## 1.1c Relative Exposure Variation with kVp

(Per PPM Service)

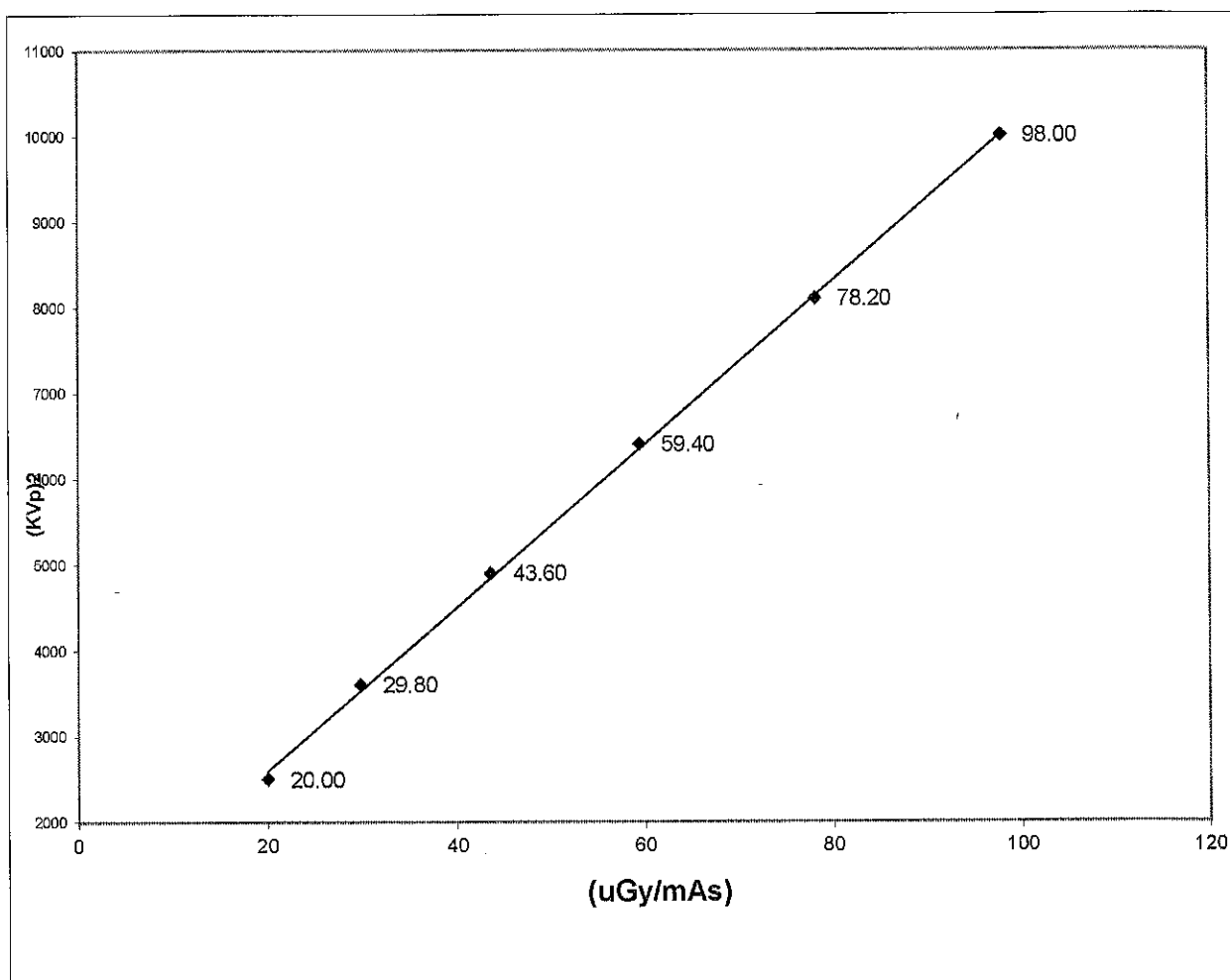
Set Factors SDD = 100cm		(kVp) <sup>2</sup>	Measured Dose (uGy)	( uGy / mAs )	Remarks and Conclusion
(kVp)	(mAs)				
50	10	2500	200	20.00	
60	10	3600	298	29.80	
70	10	4900	436	43.60	
80	10	6400	594	59.40	
90	10	8100	782	78.20	
100	10	10000	980	98.00	

\* Graph should be linear

\* Maximum Deviation : 10%

Remarks:


Graph for Relative Exposure Variation with kVp





**Technical Specialist / Engineer's Comments :**

The machine is working in good condition and it passed all the test.

Technical Specialist's Name & Signature	
1	<u>Felix Bahan</u>  FELIX BAHAN RADIOLOGY SPECIALIST, QMS
2	<u>019-2536325</u>
Date : 8-Mar-17	