Form B03 Scheduled Maintenance Work Order





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

Work Order No.	PWO365245	Schedu	ule Month	June 2018						
Work Order Date	01/06/2018	Comple	eted Date	24/6/18						
Clinic Name	Klinik Pergigian Di Klinik Kesihatan Bul	Clinic C	Code	JHR553						
BE No.	JHR003381	Distict		LEDANG						
BE Category	Sterilizing Units, Portable	WO Ass	signed to	Maken	7					
Ownership	✓ Existing Equipment		Purchase	New						
BE Condition	✓ Active		BER Proposed							
Work Order Type	Preventive Maintenance (PM)	Third Party Calibration (TPC)								
Welk Gradi Type	Routine Inspection (RI)		Statutory Certificat	ion (SC)						
Reschedule Date										
3E Third Party Calibration	/ Statutory Certification Details									
Company Name	Pio	Cal / Ce	ert Date		Nla					
Contact Number	NIT W (P	Cal / Ce	ert Expiry Date		of of					
PM / RI job done Corrective Main BE Sticker Avail Remarks:	ability: Yes / NA	od & read	ly to use.	Manufacturer: Modal: Sfaか Serial No: /(の	scicqui in rodat 309,60001					
Schedule Maintenance Ex	recution Details									
SI No	QMS Engineer / Technician Name		Date	Start Time	End Time					
	Rubeal		21/2/46	11-00	14.00					
Customer Remarks										
Quaritum Med Technical Se	AH BINTI AZMAN ical Solution Sdn., Brd., ervice Department 12,368005	Custome Name Designat Date Seal	DR. A	DIBAH IZZATY AL MDC: 7836 WAI PERGIGIAN U	ZIT					

First Verification

QMS Circle Incharge

BLA BIN SINIA Bion Cal Engineering Medical Solutions HP: 012-3967638 Final Verification

QMS State Incharge



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist Sterlizing units, Portable BE CODE : DE-031

CHECKLIST NO:CL-147-000 REV.001

PART 1 ASSET DETAILS									
WORK ORDER NO > My				ASSET NO	· 3HR 00338)				
MANUFACTURER > Gica	N			MODEL	· Station 2001				
FREQUENCY ► 3 MONT	THLY ()	6 MONTHLY (/) 12 MONTHLY	() PPM HOURS	► 1 HOUR				
PART 2 SPECIAL PRECAUTION									
If there is evidence of body fluid conta	mination, submit th	ne device for cleani	ng and decontaminati	on before inspecting it.					
Wear appropriate Personnel Protectio	n Equipment (PPE	E) during work.			6.				
Wear grounded electrostatic wristband	d when handling P	CB or electronic cor	mponents.						
Refer to the safety procedure for additional precautions and guidance as per manufacturer guidelines.									
Make sure the test equipment used ar	e duly calibrated.								
PART 3 TEST APPARATUS									
Tick (√) where appropriate									
NO ASSET NO		DESCRIPTION	<u> </u>	SERIAL NO	CALIBRATION DUE ON				
1) 168540025		RATURE PROBE		29520201WS	26/12/2018				
1) TEESA 0 33 7	DIGITAL PRESS	URE METER		H.315545	8/11/13				
			n						
PART 4 QUALITATIVE TASKS									
Tick ($\sqrt{\ }$) where appropriate									
Chassis - verify physical integrity,	PASS) 9 Over pressure	cut of valve - Verify physical	PASS FAIL NA				
cleanliness and condition	10		integrity		() () ()				
Power Cord - verify proper insulat and integrity	tion () () (10 Door lock - Ve	rify physical integrity	(/)()()				
Strain Relief - verify physical integ at both ends of line cord	grity (/) () () 11 Door gasket V	erify physical integrity	<u>(</u>)()()				
4 Fittings/ Connectors - check all fittings/connectors		S () (12 Check water to	ank leak					
5 Controls/Switches - verify proper operation of controls	(/) () (]	13 Check drain va	alve -Physical integrity	()()()				
6 Indicators/ Displays - verify proper illumination and operation) () (14 Check label		()()()				
7 Check fuse, circuit breaker	(/)) () ()		Resevoir/Bottle - clean & verify					
8 Heater - verify physical Integrity	(/)) () ()	integrity						
Chamber/Cassette - verify physical integrity (scalling, rusting, pitting of the control of)							
PART 5 PREVENTIVE MAINTENAN	CE TASKS								
Tick ($\sqrt{\ }$) where appropriate									
γ.	DONE	NOT DONE NA			NOT DONE DONE NA				
Clean exterior and interior of the equipment		> **)()()	4 Lubricate all m	oving parts	()()()				
2 Check replace gasket ***		Z)()	Notes:						
3 Check/ clean solenoids	()		* For all ** If you	Parts, NA is defined as NOT A have ticked 'NOT DONE', then e Whichever Applicable	APPLICABLE justify in Part 8				



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist
Sterlizing units, Portable
BE CODE: DE-031

CHECKLIST NO:CL-147-000 REV.001

WORK Order No

- pW 0365245

PA	RT 6 SERVICE CHECKLIST															
No	Description	Checked	Serv	ice/ an	Repla	ced	Not Applicable	No	Description	Checked	Servi	ce/Cl	Repla	ced	No Applic	t able
1	Fuses	()	()	()	()	16	Chamber Guard Seal (if applicable)	(1)	()	()	()
2	Main Control Board	()	()	()	()	17	Solid State Relay (if applicable)	1)	()	()	()
3	Fan Running Rear & Side (if applicable)	()	()	()	(/)	18	Thermostat Assembly	(/)	()	()	(.)
4	Clean Water Resevoir	5/)	()	()	()	19	Thermal Printer (if applicable)	()	()	()	(/)
5	Electric Door Lock	(Ag)	()	()	()	20	Vacuum Pump (if applicable)	()	()	()	1)
6	Pressure Door Lock	()	()	()	(/)	21	Temperature Sensor		()	()	()
7	Discharge Door Lock	()	()	()	(/)	22	Filters water thank)	1	()	()	1)
8	Pressure Transducer	(1	()	()	()									
9	Pressure Gauge	(/)	()	()	()									
10	Safety Valve	()	()	()										
11	Air Valve/Steam Solenoid Valve (if applicable)	(/)	()	()	()									
12	Discharge Valve	(/)	()	()	()									
13	Feed Water Valve (if applicable)	(.)	()	()	X)									
14	Heating Element	()	()	()	(1)		,							
15	Door Gasket/Cessette Seal	(/)	()	()	()									
(v-04)																
PA	RT 7 Technician Remarks															110
											/					
										/						
								M								
								/01	7							
					/											
			/	/				*								
		4														
4																



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist
Sterlizing units, Portable
BE CODE: DE-031

CHECKLIST NO:CL-147-000 REV.001

WORK ORDER NO >

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAII	L	NA
1	Temperature reading	°C	1340	13500	134-137 121-124	(/	()	()
2	Pressure reading - non absolute pressure reading	bar	2-15	2.31	2.03-2.32 1.04-1.24	١٧)	()	()
3	Electrical Supply Voltage	V	NOV	refer to EST	Refer to Nameplate	1	()	()
4	Electrical Power/Consumption	kW		refer to EST	Refer to Nameplate	/	()	()
	0								
									
STATE OF THE PARTY OF	CAL SAFETY TEST, (attach report) (In accordance to IEC 60601) PASS FAIL	N	IA						
RT 10	NOTES								
				/					
		,	~ A						
WOR	CORRECTIVE MAINTENANCE REQUIRE K ORDER NO ▶			FUNCTIONIN	G	NOT FUNCTION NEXT PPM DATE		~	207°9
M has b	m/n	D /		intended purp				5	JUN 21

Test Setup

DUT Information

Serial Number:

Manufacturer:

Equipment Number: JHR003381

Operator ID:

Calibration Tech:

Nadia

Calibration Date:

25/8/2018

Firmware Version:

2.08.01

Serial Number:

JOB Name:

3246911

Date & Time:

24/06/2018 & 11:00am

Location: Other:

Model:

SCICAN

STATIM 2000E

110309K00018

KP BKT SERAMPANG

Template Information

Pause after Power ON: NO

Template Name:

62353-Alt.STRERILIZING UNITS

Standard: Pause before Power O NO

IEC62353-Direct

2

Power ON delay:

NORMAL

Halt on Test Failure:

Test Speed:

YES

Include Time:

YES

Insulation Resistance \ 500V Multi Enclosure Test: NO

Power OFF delay:

0 **AUTO**

Test Mode:

NO

Multi PE Test: Multi Resstore:

WORST/LAST

Reverse Polarity:

YES

Classification:

1

PLC Configuration-Applied part setup

AP Name

AP Type

AP Num

STRERILIZING

ESA615 Test Results

Test Name	Value	High Limits Low Limits	Status
Protective Earth Resistance	0.266 Ohr	r 0.3 -	Р
Insulation Resistance			Р
Mains to Protective Earth	79.7 MOh	1	Р
Mains Voltage			Р
Live to Neutral	239.7 V		Р
Neutral to Earth	7.0 V		Р
Live to Earth	240.3 V		Р
Equipment Current	0.3 A		Р
Direct Equipment Leakage			Р
Open Earth	39.6 uA	500 -	Р
Open Earth- Reversed Mains	57.1 uA	500 -	Р