scheduled Maintenance Work Order



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

Work Order No.	DWOOTIE			* 					
	PWO371731	Sched	dule Month	March 2018					
Work Order Date	01/03/2018	<u> </u>	leted Date	21/3/2018					
Clinic Name	Klinik Pergigian Sekolah Kebangsaan I	Clinic	Code	WPL002					
BE No.	WPL000077	Distict		LABUAN					
BE Category	Sterilizing Units, Steam	WO As	ssigned to	Ashmawi					
Ownership	✓ Existing Equipment		Purchase	New					
BE Condition	✓ Active		BER Proposed						
Work Order Type	Preventive Maintenance (PM)		Third Party Calibration (TPC)						
	Routine Inspection (RI)		Statutory Certificat	ion (SC)					
Reschedule Date									
BE Third Party Calibration	on / Statutory Certification Details								
Company Name	NA	Cal / C	ert Date						
Contact Number	NA Z		ert Expiry Date	NA					
Action Taken									
checked physical all ok. cle	ean body interior and exterior, tested run of	k and fix	to use, ppm complete	∍d.					
Schedule Maintenance E									
SI No	QMS Engineer / Techniclan Name	_	Date	Start Time	End Time				
	MOHD. ASHMAWI B MOHD HISHAM		21/3/2018	11-00 am	12-00pm				
	BIOMEDICAL TECHNICIAN, GMS			V					
	019-2634231		-						
		-	-						
Customer Remarks									
	. 1				and the second second				
Engineer / Technician Signa	ture	· · · ·	- 01		X PERGY Tingkat 1,				
lame	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Jastome Vame	r Signature	/ YK	Tingkat 1, nik Keslhatan				
oate MOHD, AS	URIANNI A MONE HISHAM	Designati	ion HERMAN	NOWII Per	Surat ROSAA 1 11				
	04L 7E0MMDAN, 4000 019-2834231 D	Date	Juruteknolog Klinik Pergigi	an Lahima Viel	4, W.P.Labuan *				
213/201	% ———	Seal	2014/18	" "	est 6033				
or Internal Use					·LABUT				

First Verification QMS Circle Incharge Julius Hansun Biomedical Engineer, QMG 019-3620179

Final Verification QMS State Incharge



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BEMS Planned Preventive Maintenance Checklist Sterlizing units, Steam BE CODE: 13-746

CHECKLIST NO; CL-148 REV.000

PART	ASSET DETAILS											
WORK	ORDER NO 🕨 YWU	371731			ASSET NO •	WP1000077						
MANUF	ACTURER >	114			MODEL	» NIA						
FREQUI	ENCY ► 3 MONT	HLY ()	6 MONTHLY ()	12 MONTHLY	() PPM HOURS	· 1.0						
PART 2	SPECIAL PRECAUTION				ota da chesta do proceso de objeto. Santago de de objeto							
If there is	s evidence of body fluid contai	mination, submit the	e device for cleaning	and decontamination	n before inspecting it.							
	propriate Personnel Protection		-		,							
	ounded electrostatic wristband the safety procedure for additi	-	·		nes.							
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						
	TELSA 00 85	ELECTRICAL SA	FETY ANALYZER		\$ 3227639	10/1/019						
	MA	PRESSURE MET	ER		NA	NA						
	NA	THERMOMETER			NA	NA						
	,											
PART 4	QUALITATIVE TASKS											
Tick (√)	where appropriate											
1 Ch	assis - verify physical integrity,	PASS	FAIL NA	0. Over propagato	out of column Movific physical	PASS FAIL NA						
	anliness and condition) () ()	integrity	cut of valve - Verify physical							
	ver Cord - verify proper insulat integrity	tion (🖊)	()()	10 Door lock - Ve	rify physical integrity	(/)()()						
	ain Relief - verify physical integ oth ends of line cord	grity (/)	()()	11 Door gasket V	erify physical integrity	(/)()()						
	ngs/ Connectors - check all ngs/connectors	(/)	() ()	12 Check water to	ank leak	(/)()()						
5 Cor ope	ntrols/Switches - verify proper ration of controls	(/)	() ()	13 Check drain va	alve -Physical integrity	(/) () ()						
	cators/ Displays - verify prope nination and operation	r (/)	() ()	14 Check label		() () ()						
7 Che	eck fuse, circuit breaker	(/)	()()	15 Calibration								
8 Hea	iter - verify physical Integrity	(/)	()()			•						
PART 5	PREVENTIVE MAINTENAN	IGE TASKS										
Tick ($$)	where appropriate		NOT									
		DONE	NOT DONE NA			NOT DONE DONE NA **						
	an exterior and interior of the ipment	(/))()()	4 Lubricate all m	oving parts	() () ()						
2 Che	eck / replace gasket ***)()()	Notes:								
3 Che	ck/ clean solenoids	(/))()()	** If you	Parts, NA is defined as NOT A have ticked 'NOT DONE', then se Whichever Applicable							



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BEMS Planned Preventive Maintenance Checklist Sterlizing units, Steam BE CODE: 13-746

CHECKLIST NO: CL-148 REV.000

WORK Order No

4.00371731

PART 6 SERVICE CHECKLIST																	
No	Description	Checked	Servic Clear		Repla	aced		lot icable	No	Description	Checked	Servi ea		Repla	aced	No Applie	
1	Fuse 2A-Transformer	(/)	()	()	()	17	Pressure Transducer	(/)	()	()	()
2	Fuse 2A-PC Board	(/)	()	()	()	18	Pressure Gauge	(/)	()	()	()
3	Fuse 2A-Main Supply	(/)	()	()	()	19	Safety Valve		()	()	()
4	Fuse Relay Board 5A & 2A	(/)	()	()	()	20	Air Valve/Steam Solenoid Valve	(/)	()	()	()
5	Transformet	(<u>/</u>)	()	()	()	21	Discharge Valve	(/)	()	()	()
6	Printed Circuit Board	()	()	()	(/)	22	Infill Valve		()	()	()
7	Main Control Board	(/)	()	()	()	23	Heating Element	(/)	()	()	()
8	Control Board	(/)	()	()	()	24	Heat Exchanger	(/)	()	()	()
9	Fan Running Rear & Side	()	()	()	(/)	25	Vacuum Pump	(<u>/</u>)	() .	()	()
10	Battery Heater Dry Cycle	(/)	()	()	()	26	Door Gasket	(\mathcal{I})	()	()	()
11	Water Resevoir Float Switch	(/)	()	()	()	27	Silicone Washer	(y)	()	()	()
12	Water Level Sensor	()	()	()	()	28	O Ring	()	()	()	()
13	Water Resevoir	(/)	()	()	()	29	Chamber Guard Seal	(/)	()	()	()
14	Electric Door Lock	()	()	()	()	30	Solid State Relay	(/)	()	()	()
15	Pressure Door Lock	(7)	()	()	()	31	Thermostat Assembly	(/)	()	()	()
16	Discharge Door Lock	(/)	()	()	()	32	Water Filter	()	()	()	(1

16 Discharge Door Lock	() ()	()	32	Water Filter	 ()	()	()	
PART 7 Technician Remarks														

DATE: 21/3/2018

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Quantum Me	edical Solutions administrative and series tendered and series tendered and series for the series and series are series and series a	BEMS Planr	Sterilzing			klist			OI2	REV.000
WORK O	ORDER NO ►	Puo 371731								
PART 8	QUANTITATIVE T	ASKS			days A					
Tick (√) n	where appropriate		,							
No		Description	Units / UOM	Set Values	Measured Values	Limit/Tolera	nce	PASS	FAIL	NA
1	Temperature readir	ng	°C	,	N.	A		()	()	1/
				:						
2	Pressure reading		psi		N	-		()	()	·(/)
					, , ,				,	
	-									
						·				
PART 9	ELECTRICAL SAF	ETY TEST						i ana		
	CAL SAFETY TEST									
•	(In accordance to IEC 60	PASS FAIL		IA						
		rass rail	r	IA.						
D1 DT 40										
PART 10	NUIES	<u> in antidos antigos en la continua de la continua </u>								
	•									
		CORRECTIVE MAINTENANCE REQUIRED			FUNCTIONIN	NG [FUNCTIONIN		
							h (pm) / m		~	20/3/2019
WOR	RK ORDER NO .	N					NEX	PPWIDATE		() , = ()
		***					NEX I	PPWIDATE	<u>-</u>	
	been performed in a	accordance to the checklist and the equipment	t is function	ning to the	intended purp	pose.	NEX!	PPNIDATE		

Fluke Biomedical

Date 21/03/2018

Test Setup

Operator ID Calibration Tech

Calibration Date Firmware Version

Serial Number Date & Time JOB Name

LBNBME

10/01/2019 2.08.01 \$2270 3/ 21/03/2018 & 11:08

DUT Information

Equipment Number Serial Number Manufacturer Model Location Other

WPL 000077

KLINIK PERGIGIAN

Template Information

Template Name Pause after Power ON Power ON delay Test Speed Halt on Test Failure

Include Time YES Insulation Resistance Voltage 250V Multi Enclosure Test NO

STERILIZING UNITS

2 RAPID YES

Standard

Pause before Power OFF Power OFF delay Test Mode Multi PE Test Multi Resstore Reverse Polarity

Classification

IEC62353-Differential NO

AUTO NO WORST/LAST

YES

PLC Configuration-Applied part setup

AP Name

AP Type

AP Num

ESA615 Test Results

Test Name	Value	High Limits	Low Limits	Status
Protective Earth Resistance	0.21 Ohm	0.3	_	P
Insulation Resistance				P
Mains to Protective Earth	999 MOhm	•	-	Þ
Mains Voltage				P
Live to Neutral	241.4 V	_	-	P
Live to Earth	12,1 V	-	-	Р
Neutral to Earth	240.3 V	-	-	P
Equipment Current	10.2 A	_	-	P
Differential Leakage				Р
Normal Condition	46 uA	500	-	^ P
Normal Condition-Reversed mains	57 uA	500	- /	P

Signature MOHD, ASHMANT'S MOHD HISHAM BIOMEDICAL TECHNICIAN, GMS 019-2534231