

Form B03

Scheduled Maintenance Work Order



Quantum Medical Solutions sdn bhd
transcending boundaries, transforming life

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

Work Order No.	PWO373393	Schedule Month	March 2018
Work Order Date	01/03/2018	Completed Date	22/3/2018
Clinic Name	Klinik Pergigian Di Klinik Kesihatan Labuan	Clinic Code	WPL001
BE No.	WPPLIP001	Distict	LABUAN
BE Category	Light Polymerisation Unit	WO Assigned to	Che Muhammad Atillah
Ownership	<input type="checkbox"/> Existing Equipment	<input checked="" type="checkbox"/> Purchase	<input checked="" 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	
-----------------	--

BE Third Party Calibration / Statutory Certification Details

Company Name		Cal / Cert Date	
Contact Number		Cal / Cert Expiry Date	

Action Taken

- PPM service done on
- checked physical all OK
- clean body interior and exterior
- performance test ok and fix to use unit working good condition.

Schedule Maintenance Execution Details

SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
	CHE MUHAMMAD ATILLAH BIOMEDICAL TECHNICIAN, QMS 019-2572640	22/3/2018	1130	1200

Customer Remarks

Engineer / Technician Signature Name Date 22/3/2018	Customer Signature Name Designation Date Seal	
--	---	--

For Internal Use

First Verification
QMS Circle Incharge

JULIUS LIANSUN
BIOMEDICAL ENGINEER, QMS
019-3620179

Final Verification
QMS State Incharge

DICKY LEE
RASAH STATE MANAGER
QUANTUM MEDICAL SOLUTIONS SDN BHD



Quantum Medical Solutions sdn bhd
transcending boundaries, transforming life

Quantum Medical Solutions Sdn Bhd

BEMS Planned Preventive Maintenance Checklist

Light Polymerisation Unit

BE CODE :DE-037

CHECKLIST NO: CL-184
REV.000

PART 1 ASSET DETAILS

WORK ORDER NO ▶ PWO 373392 ASSET NO ▶ WPPLIP 001
MANUFACTURER ▶ C14 MODEL ▶ C14
FREQUENCY ▶ 3 MONTHLY () 6 MONTHLY () 12 MONTHLY (/) PPM HOURS ▶ 0.50

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
1	TEC84 0085	ELECTRICAL SAFETY ANALYZER	3227039	10/1/2019
2				

PART 4 QUALITATIVE TASKS

Tick (✓) where appropriate

	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	(/)	()	()	9 Controls/Switches - verify proper operation of controls	(/)	()	()
2 Mount/ Fasteners - verify physical integrity	(/)	()	()	10 Indicators/ Displays - verify proper illumination and operation	(/)	()	()
3 Fittings/ Connectors - check all fittings/connectors	(/)	()	()	11 Alarms/ Interlocks - check all alarms available	(/)	()	()
4 AC Plug - verify integrity	(/)	()	()	12 Light intensity - verify operation	(/)	()	()
5 Power Cord - verify proper insulation and integrity	(/)	()	()	13 Label - verify physical integrity	(/)	()	()
6 Strain Relief - verify physical integrity at both ends of line cord	(/)	()	()	14 Timer - verify operation	(/)	()	()
7 Circuit Breaker/ Fuse - verify integrity of external circuit breaker and/or rating of external fuse	(/)	()	()				

PART 5 PREVENTIVE MAINTENANCE TASKS

Tick (✓) where appropriate

	DONE	NOT DONE	NA	Notes:
1 Inspect, Clean Interior and Exterior	(/)	()	()	* For all Parts, NA is defined as NOT APPLICABLE ** If you have ticked 'NOT DONE', then justify in Part 8 *** Choose Whichever Applicable
2 Lamp - check/ replace***	(/)	()	()	



BEMS Planned Preventive Maintenance Checklist

Light Polymerisation Unit

BE CODE : DE-037

CHECKLIST NO: CL-184
REV.000

WORK ORDER NO ▶ PW0 37339 3

PART 6 QUANTITATIVE TASKS

Tick (\checkmark) where appropriate

[illegible]

PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

☒ PASS☐ FAIL

	NA
--	----

PART 8 NOTES

Please indicate the part number, description of PPM Kit and any repair work to be carried out (if any) :

☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ 1210

NEXT PPM DATE ▶ 21/3/2019

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

COMPLETED BY:

ONE MURD. ATILLAN
BIOMEDICAL TECHNICIAN, QMS
019-2572649

DATE:

22/3/2018

Fluke Biomedical

Date 22/03/2018

Test Setup

Operator ID LBNBME
Calibration Tech
Calibration Date 10/01/2019
Firmware Version 2.08.01
Serial Number 3227038
Date & Time 22/03/2018 & 11:34
JOB Name

DUT Information

Equipment Number WPPLIP 001
Serial Number
Manufacturer
Model
Location KLINIK PERGIGIAN
Other

Template Information

Template Name LIGHTS, POLYMERISATION
Pause after Power ON NO
Power ON delay 2
Test Speed RAPID
Halt on Test Failure YES
Include Time YES
Insulation Resistance Voltage 250V
Multi Enclosure Test NO

Standard IEC62353-Differential
Pause before Power OFF NO
Power OFF delay 0
Test Mode AUTO
Multi PE Test NO
Multi Resstore WORST/LAST
Reverse Polarity YES
Classification I

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	0.19 Ohm	0.3	-	P
Insulation Resistance				P
Mains to Protective Earth	999 MOhm	-	-	P
Mains Voltage				P
Live to Neutral	241.2 V	-	-	P
Live to Earth	11.8 V	-	-	P
Neutral to Earth	240.4 V	-	-	P
Equipment Current	10.1 A	-	-	P
Differential Leakage				P
Normal Condition	41 uA	500	-	P
Normal Condition-Reversed mains	57 uA	500	-	P


Signature

QUEMERO ANILAN
RECEBIDO EM 22/03/2018
11:34