

## 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.	PWO365145	Schedule Month	June 2018
Work Order Date	01/06/2018	Completed Date	24/6/18
Clinic Name	Klinik Kesihatan Batu Pahat	Clinic Code	JHR003
BE No.	JHR000005	Distict	BATU PAHAT
BE Category	Analyzers, Laboratory, Urine, Semi	WO Assigned to	Fahar
Ownership	<input checked="" type="checkbox"/> Existing Equipment	<input type="checkbox"/> Purchase	<input type="checkbox"/> New
BE Condition	<input checked="" type="checkbox"/> Active	<input checked="" 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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<b>BE Third Party Calibration / Statutory Certification Details</b>			
Company Name		Cal / Cert Date	
Contact Number		Cal / Cert Expiry Date	
<b>Action Taken</b>			
<input type="checkbox"/> PM / RI job done as per checklist. Unit tested functioning good & ready to use.		Manufacturer : Roche	
<input type="checkbox"/> Corrective Maintenance / <input type="checkbox"/> Breakdown		Modal : Unisys 240	
BE Sticker Availability : <input type="checkbox"/> Yes / <input type="checkbox"/> NA		Serial No : 2104-012	
Remarks: Unit under BER			

<b>Schedule Maintenance Execution Details</b>				
SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
	Fahar	24/6/18	1130	1200

Customer Remarks
NA

<b>Engineer / Technician Signature</b>		<b>Customer Signature</b>	
Name	MOHD NAJIB FARHAN B. ISMAIL	Name	AFIZA BINTI ABD. AZIZ
Date	24/6/18	Designation	Juruteknologi Makmal Perubatan U32 (KUP)
	QUANTUM MEDICAL SOLUTIONS SDN. BHD.	Date	8/7/2018
		Seal	

For Internal Use

Quantum Medical Solutions  
RAZILA BINTI MISKAN  
BIOMEDICAL ENGINEER

First Verification  
QMS Circle Incharge

Final Verification  
QMS State Incharge





# KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist  
Analyzers, Laboratory, Urine, Semiautomated (High)  
BE CODE : ME-011

CHECKLIST NO:CL-018-000 REV.000

## PART 1 ASSET DETAILS

WORK ORDER NO ▶ PWO 365145 BE NO ▶ JH000005  
MANUFACTURER ▶ Roche MODEL ▶ Uniz 2400  
FREQUENCY ▶ 6 MONTHLY ( / ) 12 MONTHLY ( ) PPM HOURS ▶ 2.00

## 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		

## PART 4 QUALITATIVE TASKS

Tick (✓) where appropriate

	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	( )	( )	( )	9 Sample Probe -Verify Physical Integrity	( )	( )	( )
2 Mount/ Fasteners - verify physical integrity	( )	( )	( )	10 Fan / Motor/Pump / Compressor - Verify Physical Integrity and proper Operation	( )	( )	( )
3 AC Plug / Power Card - verify Physical Integrity and Proper Insulation	( )	( )	( )	11 Alarm / Audible Signal - Verify Operation	( )	( )	( )
4 Strain Relief - verify physical integrity at both ends of line cord	( )	( )	( )	12 Sensors - Verify Physical Integrity	( )	( )	( )
5 Circuit Breaker /Fuses- Verify integrity of external circuit breaker or rating of fuse	( )	( )	( )	13 Labeling - Verify Physical Integrity	( )	( )	( )
6 Fittings/ Connectors - check all fittings/connectors for Physical Integrity	( )	( )	( )				
7 Controls/Switches/Keypad - verify proper operation of controls	( )	( )	( )				
8 Indicators/Displays Verify Proper Operation	( )	( )	( )				

## PART 5 PREVENTIVE MAINTENANCE TASKS

Tick (✓) where appropriate

	DONE	NOT DONE **	NA		DONE	NOT DONE **	NA
1 Cleanliness-Clean Interior and Exterior of the Unit	( )	( )	( )	5 Clean printer assembly	( )	( )	( )
2 Battery - Check / Replace ***	( )	( )	( )	6 Carry out calibration as needed	( )	( )	( )
3 Clean and Inspect the Printer	( )	( )	( )				
4 Clean the test strip tray	( )	( )	( )				

\* For all Parts, NA is defined as NOT APPLICABLE  
\*\* If you have ticked 'NOT DONE', then justify in Part 8  
Notes: \*\*\* Choose Whichever Applicable



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ME-011

CHECKLIST NO:CL-018-000 REV.000

WORK ORDER NO ▶

## PART 6 QUANTITATIVE TASKS

Tick (✓) where appropriate

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
	Calibration Report (please attach)					( )	( )	( )
	QC Report (please attach)					( )	( )	( )

## PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

Tick (✓) where appropriate

Standard use :

☐ IEC 60601

☐ IEC 61010

☐ IEC 62353

Result :

☐ PASS

☐ FAIL

☐ NA

## PART 8 NOTES

BER Proposed

☐ CORRECTIVE MAINTENANCE REQUIRED

☐ FUNCTIONING

☒ NOT FUNCTIONING

WORK ORDER NO ▶ NA

NEXT PPM DATE ▶

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

COMPLETED BY:

Jahn  
28/6/19

DATE :