

Form B03

Scheduled Maintenance Work Order



Quantum Medical Solutions sdn bhd
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Format Ref: - QMS/TSD-022 Rev.01

Work Order No.	PWO366443	Schedule Month	July 2018
Work Order Date	01/07/2018	Completed Date	10/7/2018
Clinic Name	Klinik Kesihatan Sungai Rengit	Clinic Code	JHR047
BE No.	JHNMOP072	Distict	KOTA TINGGI
BE Category	Monitoring Systems, Physiologic	WO Assigned to	krgbme3
Ownership	<input type="checkbox"/> Existing Equipment	<input 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	MD
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BE Third Party Calibration / Statutory Certification Details			
Company Name	NA	Cal / Cert Date	NA
Contact Number	NA	Cal / Cert Expiry Date	NA
Action Taken			
<input checked="" type="checkbox"/> PM / RI Job done as per checklist. Unit tested functioning good & ready to use.		Manufacturer: MINDRAY	
<input type="checkbox"/> Corrective Maintenance / <input type="checkbox"/> Breakdown		Model: IPM10	
BE Sticker Availability: <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> NA		Serial No: FG-72033875	
Remarks:			

Schedule Maintenance Execution Details				
SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
MD	SAFWAN	10/7/18	14 ⁰⁰	14 ³⁰

Customer Remarks	MD
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Engineer / Technician Signature	Customer Signature
Name	Name
Date	Designation
MOHAMAD SAFWAN BIN ROSLAN	NORHASMAH BINTI BAHRU
Biomedical Technician	Jururawat Kesihatan U29
Quantum Medical Solution Sdn. Bhd	KK Sungai Rengit
10/7/18	10/7/18
	Seal

For Internal Use

MUHD RAMADHAN B. TAMAR SAYA
Biomedical Engineer

First Verification Technical Service Department
Quantum Medical Solutions Sdn. Bhd.
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Final Verification
QMS State Incharge



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist
Monitoring Systems, Physiologic
BE CODE 12-636

CHECKLIST NO: CL-101-000
REV.000

PART 1 ASSET DETAILS

WORK ORDER NO ▶ PW0366443 ASSET NO ▶ ~~344~~ JHNmoP072
MANUFACTURER ▶ MINORAY MODEL ▶ ipm 10
FREQUENCY ▶ 3 MONTHLY () 6 MONTHLY () 12 MONTHLY (✓) PPM HOURS ▶ 1.00

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
1	TESSA 0010	ELECTRICAL SAFETY ANALYZER	3218071	24/8/18
2	TESSA 0186	PATIENT SIMULATOR / NIBP ANALYZER	3233028	12/10/18
3	MD	OXYGEN SATURATION/PULSE RATESIMULATOR	MD	MD
4	TESSA 0186 MD	NIBP ANALYZER / NIBP ANALYZER	3231028 MD	12/10/18 MD

PART 4 QUALITATIVE TASKS

Tick (✓) where appropriate

	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	(✓)	()	()	8 Fittings/ Connectors - check all fittings/connectors	(✓)	()	()
2 Mount/ Fasteners - verify physical integrity	(✓)	()	()	9 Controls/Switches - verify proper operation of controls	(✓)	()	()
3 Cables - verify integrity	(✓)	()	()	10 Indicators/ Displays - verify illumination and operation	(✓)	()	()
4 AC Plug - verify integrity	(✓)	()	()	11 Alarms - verify proper operation and automatic activation	(✓)	()	()
5 Power Cord - verify proper insulation and integrity	(✓)	()	()	12 Cuff & hose - verify connectivity and physical integrity	(✓)	()	()
6 Strain Relief - verify physical integrity at both ends of line cord	(✓)	()	()	13 ECG cable - verify physical integrity, connection and proper operation	(✓)	()	()
7 Circuit Breaker/ Fuse - verify integrity of external circuit breaker and/or rating of external fuse	(✓)	()	()	14 SPO ₂ probe - verify proper operation and condition	(✓)	()	()

PART 5 PREVENTIVE MAINTENANCE TASKS

Tick (✓) where appropriate

	DONE	NOT DONE	NA	
1 Clean the exterior and interior of the equipment	(✓)	()	()	
2 Battery - check/ replace***	(✓)	()	()	Notes: * For all Parts, NA is defined as NOT APPLICABLE **If you have ticked 'NOT DONE', then justify in Part 8 *** Choose Whichever Applicable



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist
Monitoring Systems, Physiologic
BE CODE : 12-638

CHECKLIST NO: CL-101-000
REV.000

WORK ORDER NO ▶ PWD 366443

PART 6 QUANTITATIVE TASKS

Tick (✓) where appropriate

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
1	NIBP Pressure (Systolic/Diastolic)	mmHg	80	80	75-85	(✓)	()	()
		mmHg	50	50	45 - 55	(✓)	()	()
		mmHg	120	120	115 - 125	(✓)	()	()
		mmHg	70	70	65 - 75	(✓)	()	()
		mmHg	200	200	195 - 205	(✓)	()	()
		mmHg	150	150	145 - 155	(✓)	()	()
2	Heart Rate Accuracy	bpm	30	30	29 - 31	(✓)	()	()
		bpm	60	60	59 - 61	(✓)	()	()
		bpm	120	120	118 - 122	(✓)	()	()
3	SpO2 Accuracy	%	80	80	78 - 82	(✓)	()	()
		%	90	90	88 - 92	(✓)	()	()
		%	98	98	96 - 100	(✓)	()	()

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

MA

☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ MA

NEXT PPM DATE ▶ July 2019

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

COMPLETED BY:

MOHAMMAD SAFWAN BIN ROSLAN
Biomedical Technician
Quantum Medical Solution Sdn. Bhd

DATE: 10/7/19

Test Setup

Operator ID :
 Calibration Tech : MOHANA
 Calibration Date : 24/08/2018
 Firmware Version : 2.08.01
 Serial Number : 3218071
 Date & Time : 10/07/2018 & 02:15pm
 JOB Name :

DUT Information

Equipment Number : JHNMOP072
 Serial Number :
 Manufacturer :
 Model :
 Location : KK SUNGAI RENGIT
 Other :

Template Information

Template Name : MONITORING
 Pause after Power ON: NO
 Power ON delay: 2
 Test Speed: NORMAL
 Halt on Test Failure: YES
 Include Time: YES
 Insulation Resistance Voltage: 500V
 Multi Enclosure Test : NO

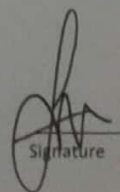
Standard : IEC60601-1-2nd Ed
 Pause before Power OFF: NO
 Power OFF delay: 0
 Test Mode: AUTO
 Multi PE Test: NO
 Multi Resstore: WORST/LAST
 Reverse Polarity: YES
 Classification: I

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	0.361 Ohm	0.2 -		F
Insulation Resistance				P
Mains to Protective Earth	49.0 MOhm	-		P
Mains to Non-Earth Accessible Conductive Part	999 MOhm	-		P
Mains Voltage				P
Live to Neutral	259.5 V	-		P
Neutral to Earth	5.4 V	-		P
Live to Earth	254.0 V	-		P
Equipment Current	0.0 A	-		P
Earth Leakage Current				P
Normal Condition	50.6 uA-OPi	500 -		P
Open Neutral	58.9 uA-OPi	1000 -		P
Open Neutral- Reversed Mains	27.4 uA-OPi	1000 -		P
Normal Condition- Reversed Mains	15.4 uA-OPi	500 -		P
Enclosure Leakage Current				P
Normal Condition	0.6 uA-OPi	100 -		P
Open Earth	1.1 uA-OPi	500 -		P
Open Neutral	0.7 uA-OPi	500 -		P
Open Neutral- Reversed Mains	0.7 uA-OPi	500 -		P
Normal Condition- Reversed Mains	0.6 uA-OPi	100 -		P
Open Earth- Reversed Mains	0.7 uA-OPi	500 -		P


 Signature