Form B03 Scheduled Maintenance Work Order



Work Order No.	PWO365365	Schedul	le Month	June 2018						
Work Order Date	01/06/2018	Comple	ted Date	25/6/18						
Clinic Name	Klinik Pergigian Selkolah Menengah Le	Clinic C	ode	JHR556						
BE No.	JHR023431	Distict		LEDANG						
BE Category	STERILIZING UNITS, STEAM	WO Ass	igned to	DAIDIE						
Ownership	✓ Existing Equipment		Purchase	New						
BE Condition	✓ Active	BER Proposed								
Work Order Type	Preventive Maintenance (PM)	Third Party Calibration (TPC)								
Work Order Type	Routine Inspection (RI)		Statutory Certification (SC)							
Reschedule Date										
BE Third Party Calib	ration / Statutory Certification Details									
Company Name	-	Cal / Ce	ert Date							
Contact Number	-	Cal / Ce	ert Expiry Date	2						
Action Taken										
PM / RI jo	b done as per checklist. Unit tested functioning god	od & read	y to use.	Manufacturer: Eschwann Modal: Little Sister.						
Corrective	e Maintenance / Breakdown	Modal: Little Sister.								
BE Sticke	r Availability : Yes / NA		Serial No :							
	BE Sticker Availability: Yes / NA Serial No:_ Remarks: Asset under Pepair -									
Schedule Maintenar	nce Execution Details									
SI No	QMS Engineer / Technician Name		Date	Start Time	End Time					
Î	Zaidie		25.6.10	200'-	300					
Customer Remarks										
Engineer / Technician	Signatura	Custome	er Signature							
Name		Name	0/4	wollt.						
Date	MUHD LAIDE BIN HALIL	Designa		1/01						
	Griguital elegitor and an analysis	Date DR SITI SARINA ALI PEGAWAI PERGIGIAN								
		Seal	FEGA	MDC 3928						

For Internal Use

First Verification

QMS Circle Incharge

Plan December 200 200 Smill Blow cal Engineering Medical Solutions Faith: 012-3967638 Final Verification QMS State Incharge



KEMENTERIAN KESIHATAN MALAYSIA

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

CHECKLIST NO:CL-148-000 REV.001

	ORDER NO >	PW03	16536	5							ASSET NO	> 4	JHR	02	34	13)	
MANU	FACTURER ►	GENERA									MODEL	>	GENE	RAL			
FREQ	UENCY >	3 MONT	HLY ()	6 MON	ITHLY (/)		12 MONTHLY	()	PPM HOURS	•	1 HO	JR			
PART	2 SPECIAL PREC	AUTION														1	
If there	is evidence of body	fluid contan	nination, su	bmit the devi	ice for clea	aning	and o	decontaminatio	n befo	ore insp	ecting it.		18/8/				
Wear	appropriate Personne	el Protection	Equipmen	t (PPE) durin	ig work.	3											
Wear	grounded electrostati	c wristband	when hand	lling PCB or	electronic	comp	onen	ts.									
Refer t	to the safety procedu	re for addition	onal precau	tions and gu	idance as	per m	nanuf	acturer guidelir	nes.								
Make	sure the test equipme	ent used are	duly calibr	ated.													
PART	3 TEST APPARAT	าบร															
Tick (1	/) where appropriate	30000000000000000000000000000000000000											1				
NO	ASSET	NO		DI	ESCRIPTI	ION				SE	ERIAL NO		CA	LIBR	IOITA	N DUI	E ON
1	TEESA	0025	DIGITAL T	EMPERATU	IRE METE	R			2	195.	202 01 h	5		2	6/	12/	18
2	TEJAA 0	338	DIGITAL P	RESSURE N	METER					H . 3	15545			8/	11/	18	
PART	4 QUALITATIVE T	ASKS															4.3
Tick (() where appropriate			· · · · · · · · · · · · · · · · · · ·													
				PASS F	AIL N	NA							PAS	S	FAIL	,	NA
	hassis - verify physic leanliness and condit			(/) () ()	10	Over pressure integrity	cut o	f valve -	· Verify physical		()) ()
	ower Cord - verify pr nd integrity	oper insulat	ion	(/) () ()	11	Door lock - Ve	rify ph	nysical i	ntegrity		1	/)) ()
	train Relief - verify pl t both ends of line co		grity) ()	12	Door gasket V	erify p	ohysical	integrity		/	() () ()
	ittings/ Connectors - ttings/connectors	check all		/) () ()	13	Check water to	ank le	ak			/)	() ()
	controls/Switches - ve	erify proper		(/) () ()	14	Check drain v	alve -l	Physica	I integrity		1)	() ()
6 Ir	ndicators/ Displays - v lumination and opera	1.5	r	(/) () ()	15	Check label					4	1	() ()
	check fuse, circuit bre			(/)() ()	16	Check demine available)	eralisa	tion and	d sensor (if		(ye	-)	() (/
8 H	leater - verify physica	al Integrity		()(/) ()	17		atic wa	ater fillir	ng (if available)		()	() (/)
	chamber - verify phys scalling, rusting, pittir			() () ()	18	Replace Bacte	eria/Ai	ir Sterili	zation Filter		()	() ()
PART	5 PREVENTIVE M	IAINTENAN	ICE TASKS	3													
Tick (() where appropriate															_	
					TOT ONE N	NA							DOI	٧E	NOT DONE		NA
	Clean exterior and integration	erior of the	!	(/)() ()	4	Lubricate all n	noving	parts			() () (/)
2	heck / replace gaske	et ***		(/)() ()	Note	es:									
3 C	neck/ clean solenoic	is	2	(/)() ()		** If you	ı have	ticked	s defined as NO 'NOT DONE', the r Applicable				8		



WORK Order No

KEMENTERIAN KESIHATAN MALAYSIA

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

- Ph-0369365

CHECKLIST NO:CL-148-000 REV.001

	Description	Checke	d Se	rvice/ lean	Repl	aced	Not Applicable	No	Description	Checked	Service/ Clean	Replaced	Not Applicat
	Fuses	(/)	()	()	()	16	Discharge Valve	(/)	()	()	(
2	Main Control Board	(/)) ()	()	()	17	Infill Valve	()	()	()	(
3	Control Board	(/)) ()	()	()	18	Heating Element	()	1/5	()	(
4	Fan Running Rear & Side) ()	()	()	19	Heat Exchanger/Cooling system (if applicable)	()	()	()	
5	Water Resevoir Float Switch/Water Level Sensor		^) ()	()	()	20	Vacuum Pump	(/)	()	()	(
6	Water Resevoir) ()	()	()	21	Door Gasket		()	()	(
7	Electric Door Lock	(/	()	()	()	22	Chamber Guard Seal (if applicable)	()	(/)	()	(
8	Pressure Door Lock	1) ()	()	()	23	Solid State Relay	(/)	()	()	(
9	Discharge Door Lock) ()	()	()	24	Thermostat Assembly	(/)	()	()	(
10	Pressure Transducer	() ()	()	(/)	25	Temperature Sensor	5	()	()	(
11	Pressure Gauge	() ()	()	(/)	26	Thermal Printer (if applicable)	120	()	()	
12	Safety Valve	() ()	()	(/)	27	Vacuum Pump (if applicable)	1	()	()	(
13	Air Valve/Steam Solenoid Valve	() ()	()	(/)	28	Filters / strainer		()	()	(
14	Air Valve/Steam Solenoid Valve	() ()	()		4					
15	Air Valve/Steam Solenoid Valve	() ()	()	(/)						
PA	RT 7 Technician Remarks												
								MA					
								NA					
				/	/			NA					
				/		/		NA					



KEMENTERIAN KESIHATAN MALAYSIA

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

CHECKLIST NO:CL-148-000 REV.001

WORK ORDER NO ► PW0365365 PART 8 QUANTITATIVE TASKS Tick (√) where appropriate Set Units / Measured Limit/Tolerance Description PASS FAIL NA No UOM Values 134-137 1 Temperature reading () °C 121-124 2.03-2.32 2 Pressure reading bar 1.03-1.23 refer to EST Refer to nameplate 3 Electrical Supply Voltage ٧ () (·) () refer to EST Refer to nameplate kW () () () Electrical Power PART 9 ELECTRICAL SAFETY TEST ELECTRICAL SAFETY TEST, (attach report) (In accordance to IEC 60601) PASS FAIL PART 10 NOTES NA NOT FUNCTIONING CORRECTIVE MAINTENANCE REQUIRED **FUNCTIONING** NEXT PPM DATE - DRC 2019 WORK ORDER NO ▶__ PPM has been performed in accordance to the checklist and the equipment is functioning to the intended purpose. COMPLETED BY: WITNESSED BY USER: MUHD ZAIDIE BIN HALIL Technical Service Department Quantum Medical Solution Service DATE: DATE: