

# 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.	PWO372095	Schedule Month	March 2018
Work Order Date	01/03/2018	Completed Date	29/3/2018
Clinic Name	Klinik Pergigian Sekolah Kebangsaan	Clinic Code	WPL002
BE No.	WPL000082	Distict	LABUAN
BE Category	Scalers, Dental, Ultrasonic	WO Assigned to	Ashmawi
Ownership	<input checked="" type="checkbox"/> Existing Equipment	<input type="checkbox"/> Purchase	<input 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	
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<b>BE Third Party Calibration / Statutory Certification Details</b>			
Company Name		Cal / Cert Date	
Contact Number	NA	Cal / Cert Expiry Date	NA
<b>Action Taken</b> ↳ Check chasis, fittings, cable scaler handpiece and scaler handpiece ↳ Clean exterior then perform test. ↳ Unit perform well, (FUNCTIONING GOOD)			

<b>Schedule Maintenance Execution Details</b>				
SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
	MOHD. ASHMAWI B MOHD HISHAM BIOMEDICAL TECHNICIAN, QMS 019-2634231	29/3/18	12.15pm	12.45pm

Customer Remarks	
Engineer / Technician Signature Name: MOHD. ASHMAWI B MOHD HISHAM Date: 29/3/2018 BIOMEDICAL TECHNICIAN, QMS 019-2634231	Customer Signature Name: HERMAN NOWI Designation: Juruteknologi Pergigian Date: 29/4/18 Seal: 29/4/18 Klinik Pergigian Labuan Ringket 1, Klinik Kesihatan Peti Surat 80544 87014, W.P. Labuan Tel: 087-596000 est 6033 W. P. LABUAN


For Internal Use

First Verification  
QMS Circle Incharge

JULIUS LIANSUN  
BIOMEDICAL ENGINEER, QMS  
019-3620179

Final Verification  
QMS State Incharge

DICKY LEE  
SABAH STATE MANAGER  
QUANTUM MEDICAL SOLUTIONS SDN BHD

 Quantum Medical Solutions sdn bhd <i>Transcending boundaries, Transforming life</i>	<b>Quantum Medical Solutions Sdn Bhd</b> BEMS Planned Preventive Maintenance Checklist <b>Scalers, Dental, Ultrasonic</b> BE CODE : 17-487	CHECKLIST NO: CL-127 REV.000					
<b>PART 1 ASSET DETAILS</b>							
WORK ORDER NO ▶ <b>pw037095</b>	ASSET NO ▶ <b>WP1000087</b>						
MANUFACTURER ▶ <b>N</b>	MODEL ▶ <b>N 1N</b>						
FREQUENCY ▶ 3 MONTHLY ( ) 6 MONTHLY ( ) 12 MONTHLY <input checked="" type="checkbox"/>	PPM HOURS ▶ <b>0.50</b>						
<b>PART 2 SPECIAL PRECAUTION</b>							
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.							
<b>PART 3 TEST APPARATUS</b>							
<i>Tick (✓) where appropriate</i>							
NO	ASSET NO	DESCRIPTION	SERIAL NO	CALIBRATION DUE ON			
1	<b>TESA0085</b>	ELECTRICAL SAFETY ANALYZER	<b>3227039</b>	<b>10/1/2019</b>			
<b>PART 4 QUALITATIVE TASKS</b>							
<i>Tick (✓) where appropriate</i>							
	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - verify physical integrity, cleanliness and condition	(✓)	( )	( )	10 Indicators/ Displays - verify proper illumination and operation	( )	( )	(✓)
2 Mount/ Fasteners - verify physical integrity	(✓)	( )	( )	11 Alarms/ Interlocks - check all alarms available	( )	( )	(✓)
3 Power ON Self Test	(✓)	( )	( )	12 Scaling tip - verify physical integrity	(✓)	( )	( )
4 AC Plug - verify integrity	(✓)	( )	( )	13 Handpiece cable - verify physical integrity	(✓)	( )	( )
5 Power Cord - verify proper insulation and integrity	(✓)	( )	( )	14 Handpiece - verify physical integrity and operation	(✓)	( )	( )
6 Strain Relief - verify physical integrity at both ends of line cord	(✓)	( )	( )	15 Battery - verify battery charging indicator	( )	( )	(✓)
7 Circuit Breaker/ Fuse - verify integrity of external circuit breaker and/or rating of external fuse	(✓)	( )	( )	16 Water supply - verify proper operation	(✓)	( )	( )
8 Fittings/ Connectors - check all fittings/connectors	(✓)	( )	( )	17 O/P voltage-frequency - verify operation	( )	( )	(✓)
9 Controls/Switches - verify proper operation of controls	(✓)	( )	( )	18 Solenoid valve - verify proper operation	(✓)	( )	( )
<b>PART 5 PREVENTIVE MAINTENANCE TASKS</b>							
<i>Tick (✓) where appropriate</i>							
	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 Battery - Check/Replace***	(✓)	( )	( )				



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## Quantum Medical Solutions Sdn Bhd

BEMS Planned Preventive Maintenance Checklist

Scalers, Dental, Ultrasonic

BE CODE :17-487

CHECKLIST NO: CL-127  
REV.000

WORK ORDER NO ▶ PW0372095

### PART 6 QUANTITATIVE TASKS

Tick (✓) where appropriate

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA

### PART 7 ELECTRICAL SAFETY TEST

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

☒ PASS

☐ FAIL

☐ NA

### PART 8 NOTES

Part 5

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

↳ EST CLASS II

☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ NA

NEXT PPM DATE ▶ 28/3/2019

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

COMPLETED BY:

MOHD. ASHMANI B MOHD HISHAM  
BIOMEDICAL TECHNICIAN, QMS  
019-2634231

DATE: 29/3/2018

# Fluke Biomedical

Date 29/03/2018

## Test Setup

Operator ID LBNBME  
Calibration Tech  
Calibration Date 10/01/2019  
Firmware Version 2.08.01  
Serial Number 3227029  
Date & Time 29/03/2018 & 12:21  
JOB Name

## DUT Information

Equipment Number WPL 000082  
Serial Number  
Manufacturer  
Model  
Location KLINIK PERGIGIAN  
Other

## Template Information

Template Name SCALERS, DENTAL  
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 II

## PLC Configuration-Applied part setup

AP Name AP Type AP Num

## ESA615 Test Results

Test Name	Value	High Limits	Low Limits	Status
Mains Voltage				P
Live to Neutral	240.9 V	-	-	P
Equipment Current	0.0 A	-	-	P
Differential Leakage				P
Normal Condition	22 uA	100	-	P
Normal Condition-Reversed mains	35 uA	100	-	P

Signature