

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.	PWO365679	Schedule Month	June 2018
Work Order Date	01/06/2018	Completed Date	27/6/18
Clinic Name	Klinik Kesihatan Batu Anam	Clinic Code	JHR080
BE No.	JHNREE037	Distict	SEGAMAT
BE Category	Refrigerators, Pharmacy (Medium)	WO Assigned to	12VAN
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	
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3E Third Party Calibration / Statutory Certification Details

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

Action Taken

☒ PM / RI job done as per checklist. Unit tested functioning good & ready to use.

Manufacturer: Thermo

☒ Corrective Maintenance / ☐ Breakdown

Modal: P-6500 38600

BE Sticker Availability: ☒ Yes / ☐ NA

Serial No: 38600316042002

Remarks: PPM done by Vendor

Schedule Maintenance Execution Details

SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
1	12VAN	27/6/18	10:30	1:10

Customer Remarks

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Engineer / Technician Signature Name Date  <p>MOHD SHAFUDIN BIN ZAKARIA Technical Service Department Quantum Medical Solution Sdn. Bhd</p>	Customer Signature Name Designation Date Seal  <p>ZURAIKHAN ZAHID TAHIR KURAWAT KESIHATAN U32 (KUP) KLINIK KESIHATAN BATU ANAM 85100 SEGAMAT</p>
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For Internal Use


First Verification

QMS Circle Incharge

MOHD SHAFUDIN BIN SIMIN
Biomedical Engineering
Quantum Medical Solutions
H/P: 012-3967638

Final Verification

QMS State Incharge

 Quantum Medical Solutions sdn bhd <small>transcending boundaries, transforming life</small>	Quantum Medical Solutions Sdn Bhd BEMS Planned Preventive Maintenance Checklist Refrigerators, Pharmacy (Medium) BE CODE : ME-028	CHECKLIST NO: CL-191 REV.000		
PART 1 ASSET DETAILS				
WORK ORDER NO ▶ pw 0365679 MANUFACTURER ▶ Thermo FREQUENCY ▶ 3 MONTHLY () 6 MONTHLY () 12 MONTHLY <input checked="" type="checkbox"/>	ASSET NO ▶ JHN REE 037 MODEL ▶ 386 PPM HOURS ▶ 1.00 h.			
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 TESTER	3226902	19/12/18
		THERMOMETER	H-310418	26/12/18
		NA	150423818	10/11/18
PART 4 QUALITATIVE TASKS				
Tick (✓) where appropriate				
	PASS	FAIL	NA	
1 Chassis - verify physical integrity, cleanliness and condition	(✓)	()	()	7 Controls/ Switches/ Keypad - verify proper operation of controls
2 Mount/ Fasteners - verify physical integrity	(✓)	()	()	8 Indicators/ Displays - verify proper illumination and operation
3 Power Cord - verify proper insulation and integrity	()	()	(✓)	9 Alarm/ Audible Signal - verify operation
4 Strain Relief - verify physical integrity at both ends of line cord	(✓)	()	()	10 Door Gasket, Hinges - Verify physical Integrity
5 Circuit Breaker/ Fuse - verify integrity of external circuit breaker and/or rating of external fuse	(✓)	()	()	11 Check Compressor - Verify physical Integrity
6 Fittings/ Connectors - check all fittings/connectors	(✓)	()	()	12 Calibration
				() () () (✓)
PART 5 PREVENTIVE MAINTENANCE TASKS				
Tick (✓) where appropriate				
	DONE	NOT DONE **	NA	
1 Cleaning the inside with a vacuum cleaner	(✓)	()	()	4 Check / replace door gasket
2 Clean compressor	(✓)	()	(✓)	
3 Check/ clean thermostat	(✓)	()	()	
Notes: * For all Parts, NA is defined as NOT APPLICABLE ** If you have ticked 'NOT DONE', then justify in Part 8 *** Choose Whichever Applicable				



BEMS Planned Preventive Maintenance Checklist
Refrigerators, Pharmacy (Medium)
BE CODE : ME-028

WORK ORDER NO ▶ *Mo 365679*

Tick (\checkmark) where appropriate

[illegible]

ELECTRICAL SAFETY TEST, (attach report)

(In accordance to IEC 60601)

☐ PASS☐ FAIL

☒ NA

PART 8 | NOTES

in A

☐

CORRECTIVE MAINTENANCE REQUIRED

☒

FUNCTIONING

7

NOT FUNCTIONING

WORK ORDER NO ► _____

NEXT PPM DATE ► 2024

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

COMPLETED BY:

DATE :