

Scheduled Maintenance Work Order

Quantum Medical Solutions sdn bhd
transcending boundaries, transforming life

Format Ref:- QMS/TSD-022 Rev.01

Work Order No	pwo 409 264	Scheduled Month	January 2019
Work Order Date	9/10/19	Completed Date	10/1/19
Clinic Name	KD. Matang Jelutong	Clinic Code	PRK 185
BE No	PRK007584 PRK007587	District	Kerian
BE Category	Fetal Heart Detectors, Ultrasonic	WO Assigned to	Razin
Ownership	<input checked="" type="checkbox"/> Existing Equipment	<input type="checkbox"/> MEET Equipment	
BE Condition	<input type="checkbox"/> Under Warranty	<input type="checkbox"/> BER Proposed	
Work Order Type	<input type="checkbox"/> Preventive Maintenance (PM) <input checked="" type="checkbox"/> Routine Inspection (RI)	<input type="checkbox"/> Third Party Calibration (TPC) <input type="checkbox"/> Statutory Certification (SC)	

Reschedule Date	NA
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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 - PPM done as per checklist - Battery cover not available. Already informed to end user		Manufacturer : Biotas Model : Bt-200 S/N : BAA 913 209 Purchase Date : 2009 Kewpa No: KKM/JEN/PRK/KO/08-04-31/169/2
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Schedule Maintenance Execution Details

SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
1.	Razin	10/1/19	1430	1500

Customer Remarks	NA
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Engineer / Technician Signature Name Date	Customer Signature Name Designation Date Seal
MUHAMMAD RAZIN MUHAMMAD RAZIN JUNIOR QUANTUM MEDICAL SOLUTIONS SDN BHD 10/1/19	SHAMLIYAZA BINTI MAT YACOB JURURAWAT MASYAHAKAT U19 10/1/19

For Internal Use only

First Verification
QMS Circle InchargeFinal Verification
QMS State Incharge



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist
Fetal Heart Detectors, Ultrasonic
BE CODE : 11-696

CHECKLIST NO: CL-070-000
REV.000

PART 1 ASSET DETAILS

WORK ORDER NO ▶ PWO 409264

BE NO ▶ PRK007587

MANUFACTURER ▶ Biotos

MODEL ▶ BT-200

FREQUENCY ▶ 12 MONTHLY (✓)

PPM HOURS ▶ 0.50

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

PART 4 QUALITATIVE TASKS

Tick (✓) where appropriate

	PASS	FAIL	NA		PASS	FAIL	NA
1 Chassis - Verify physical integrity, cleanliness and condition.	(✓)	()	()	7 Indicators/Displays - Verify proper illumination and operation.	(✓)	()	()
2 Mount/Fasteners - Verify physical integrity.	(✓)	()	()	8 Alarm/Audible Signal - Verify operation.	(✓)	()	()
3 Power Cord - Verify proper insulation and integrity.	()	()	(✓)				
4 Strain Relief - Verify physical integrity at both ends of line cord.	()	()	(✓)				
5 Transducers/Cables - Verify integrity and condition.	(✓)	()	()				
6 Controls/Switches/Keypad - Verify proper operation of controls.	(✓)	()	()				

PART 5 PREVENTIVE MAINTENANCE TASKS

Tick (✓) where appropriate

	DONE	NOT DONE **	NA
1 Cleaning the exterior/interior.	(✓)	()	()
2 Clean Transducers/Cables.	(✓)	()	()
3 Check/Replace battery. ***	(✓)	()	()

* battery cover not available.

Notes:

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

