

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.	PWO370939	Schedule Month	June 2018
Work Order Date	01/06/2018	Completed Date	24-06-2018
Clinic Name	Klinik Kesihatan Pesta / Kampung Ken.	Clinic Code	JHR015
BE No.	JHNLIE015	Distict	BATU PAHAT
BE Category	Light, Examination	WO Assigned to	MUHD SHAZRUL
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 type="checkbox"/> Preventive Maintenance (PM)	<input type="checkbox"/> Third Party Calibration (TPC)	
	<input checked="" type="checkbox"/> Routine Inspection (RI)	<input type="checkbox"/> Statutory Certification (SC)	

Reschedule Date	
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BE Third Party Calibration / Statutory Certification Details			
Company Name	NA	Cal / Cert Date	NA
Contact Number		Cal / Cert Expiry Date	
Action Taken <input checked="" type="checkbox"/> PM / RI job done as per checklist. Unit tested functioning good & ready to use. Manufacturer : <input type="checkbox"/> Corrective Maintenance / <input type="checkbox"/> Breakdown Modal : BE Sticker Availability : <input checked="" type="checkbox"/> Yes / <input checked="" type="checkbox"/> NA Serial No : Remarks:			

Schedule Maintenance Execution Details				
SI No	QMS Engineer / Technician Name	Date	Start Time	End Time
	MUHD SHAZRUL	24-06-2018	11:10	12:00

Customer Remarks	
Engineer / Technician Signature Name Date 24/06/2018 QUANTUM MEDICAL SOLUTION MUHAMMAD SHAZRUL BIN MOHD SAMSURI BIOMEDICAL TECHNICIAN	Customer Signature Name Designation Date Seal NUR HAZIRAH NEEZY ABDULLAH (No. Pendaftaran Penuh: 54451) Juruswat U29 KK Kampung Melayu Date Onn 24/6/18

For Internal Use

First Verification
QMS Circle Incharge

RAZILA MISKAN
 Biomedical Engineer (Circle In-Charge)
 Quantum Medical Solutions Sdn. Bhd.

Final Verification
QMS State Incharge



KEMENTERIAN KESIHATAN MALAYSIA

MEET Planned Preventive Maintenance Checklist

Light, Examination

BE CODE : 12-276

CHECKLIST NO: CL-091-000
REV.000

PART 1 ASSET DETAILS

WORK ORDER NO ▶ PWO 370511

BE NO ▶ JHNLIE 015

MANUFACTURER ▶ L.I.D. Sotramet

MODEL ▶ L10

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
1	TEESA 0074	ELECTRICAL SAFETY ANALYZER	3226906	9/10/2018
2	TEESA 0118	Lu2 meter	150106900	20/12/2018

PART 4 QUALITATIVE TASKS

Tick (✓) where appropriate

- | | | |
|---|---|-------------|
| 1 | Chassis - Verify physical integrity, cleanliness and condition. | (✓) () () |
| 2 | Fittings/Connectors - Verify integrity. | (✓) () () |
| 3 | Controls/Switches - Verify proper operation of controls. | (✓) () () |
| 4 | Easy handling of all the articulation - Verify performance. | (✓) () () |
| 5 | Brightness - Verify operation. | (✓) () () |

PART 5 PREVENTIVE MAINTENANCE TASKS

Tick (✓) where appropriate

- | | DONE | NOT DONE ** | NA |
|---|-------------|-------------|----|
| 1 | (✓) () () | | |
| 2 | (✓) () () | | |
| 3 | (✓) () () | | |

Notes:

4 Bulb holder - 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



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WORK ORDER NO ▶

PART 6 QUANTITATIVE TASKS

Tick (✓) where appropriate

No	Description	Units / UOM	Set Values	Measured Values	Limit/Tolerance	PASS	FAIL	NA
	Not Applicable							

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

NA

☐ CORRECTIVE MAINTENANCE REQUIRED

☒ FUNCTIONING

☐ NOT FUNCTIONING

WORK ORDER NO ▶ NA

NEXT PPM DATE ▶ JUN 19

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

COMPLETED BY: MUHD SHAZRU

DATE: 24-06-2018

Test Setup

Operator ID :
 Calibration Tech : DINA
 Calibration Date : 9/10/2017
 Firmware Version : 2.08.01
 Serial Number : 3226906
 Date & Time : 06/24/2018 & 11:25
 JOB Name :

DUT Information

Equipment Number : JHPLIE015
 Serial Number :
 Manufacturer : NA
 Model : NA
 Location : KK PESTA
 Other :

Template Information

Template Name : JHPLIE015	Standard : IEC60601-1-2nd Ed
Pause after Power ON: NO	Pause before Power Off: NO
Power ON delay: 2	Power OFF delay: 0
Test Speed: NORMAL	Test Mode: AUTO
Halt on Test Failure: YES	Multi PE Test: NO
Include Time: YES	Multi Resstore: WORST/LAST
Insulation Resistance $\geq 500V$	Reverse Polarity: YES
Multi Enclosure Test : NO	Classification: I

PLC Configuration-Applied part setup

AP Name AP Type AP Num

ESA615 Test Results

Test Name	Value	High Limits	Low Limits	Status
Insulation Resistance				P
Mains to Non-Earth Accessible Conductive Part	999 MOhm	-	-	P
Mains Voltage				P
Live to Neutral	241.1 V	-	-	P
Equipment Current	0.2 A	-	-	P
Enclosure Leakage Current				P
Normal Condition	0.5 uA-OPI	100	-	P
Open Neutral	0.6 uA-OPI	500	-	P
Open Neutral- Reversed Mains	0.6 uA-OPI	500	-	P
Normal Condition- Reversed Mains	0.7 uA-OPI	100	-	P
Earth Leakage Current				P
Open Neutral	2.2 uA-OPI	1000	-	P



Signature

