



บริษัท โฆวิท จำกัด
XOVIC CO., LTD.

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Preventive Maintenance

HOSPITAL CONTROL NO. _____

HOSPITAL NAME _____ DEPARTMENT _____

INSTRUMENT **Anesthetic Gas Module** MANUFACTURE **Philips** MODEL _____

SERIAL NUMBER _____

DATE _____ Next Due _____ Period of PM _____ Months

Action	Result		Remark
	Pass	Fail	
1. Check general conditions			
- Check the ventilator fan in the AGM for proper operation			
- Check The AGS Calibration at least once			
- Check the internal Nation tubing , room air filter and pump filter			
- Test the pump using the procedure			
- Check electrical safety			
2. Performance Check	Pass	Fail	
- Profrom Flow rate			
- Profrom the Diagnostic/Error			
- Profrom Baromeetric Pressure			
- Profrom the Span Calibration			
- Check that the cooling fan runs smoothly			
- Etc.....			
3. Cleaning	Pass	Fail	
- General Cleaning of the System			

Overall Test Result: PASS / FAIL

Comments :

Tested By :
(Signature) _____

(Name)

Customer Service