



บริษัท ไซวิค จำกัด  
XOVIC CO., LTD.

448, 450 Soi Supharaj, Phaholyothin Rd., Samsaen Nai,  
Phyathai, Bangkok 10400, Thailand  
Tel: 02 090-2591/4 Ext 229 [Service Dept.]  
Fax: 02 270-0513 [Service Dept.]  
เลขประจำตัวผู้เสียภาษี : 0105529003833

Preventive Maintenance

HOSPITAL CONTROL NO. \_\_\_\_\_

HOSPITAL NAME		DEPARTMENT	
INSTRUMENT	Ventilator	MANUFACTURE	Drager
MODEL NUMBER	Savina 300	SERIAL Number.	
Ventilator Software Version		SW Build ID.	
Option		Device ID.	
		Ventilator Hour :	Operational Hour : Hr.
			Service Hours : Hr.

DATE \_\_\_\_\_ Next Due \_\_\_\_\_ Period of PM \_\_\_\_\_ Months

Service / Calibrations Performed	Action	Remark
SN. Expiratory valve	<input type="checkbox"/> Verified	
Rating plates and option lable	<input type="checkbox"/> Verified	
Filter cover and O2 gas connecting tube	<input type="checkbox"/> Verified	
Test ON Battery .	<input type="checkbox"/> Verified	
Ventilator Warm-UP Cycle (15 Minutes)	<input type="checkbox"/> Verified	
Electrical Safety Test (IEC60601)	<input type="checkbox"/> Verified (Every 1 Year)	

SERVICE MODE TESTS / CALIBRATIONS			
Parameter Device Check	Result		
Alarm Signals	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Auxillary acoustic alarm	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Breathing circuit connected	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Inspect humidifier	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Test lung connection	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Expiratory valve	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Safety valve	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Expiratory flow sensor	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Breathing circuit check	Result		
Leakage	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Resistance / Compliance	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail
Oxygen Sensor calibration	<input type="checkbox"/> Pass	<input type="checkbox"/> N/A	<input type="checkbox"/> Fail

Overall Test Result: PASS / FAIL

Comments :

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Tested By :  
(Signature) \_\_\_\_\_

(Name)

Customer Service