



## PREVENTIVE MAINTENANCE

### KN001599

Location: 2  
Department: Operating Room  
PM Cycle: 2  
PM Last: April  
PM Due: October

### MEMORIAL HOSPITAL

Description: MONITOR; ECG  
Manufacturer: DATASCOPE CORP.  
Model: 2100  
Serial: A1280DR

### MAINTENANCE PROCEDURES:

*KBS085P*

*ECG, SINGLE CHANNEL*

#### PASS FAIL

- | <input type="checkbox"/> | <input type="checkbox"/> |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Inspect exterior of equipment for damage or missing hardware.                             |
| <input type="checkbox"/> | <input type="checkbox"/> | Inspect the power cord, strain relief and plug(s) for any signs of damage.                |
| <input type="checkbox"/> | <input type="checkbox"/> | Turn unit off, open user accessible covers and inspect unit for damage.                   |
| <input type="checkbox"/> | <input type="checkbox"/> | Clean unit interior components and exterior with vacuum or compressed air.                |
| <input type="checkbox"/> | <input type="checkbox"/> | Inspect interior for signs of corrosion or missing hardware. Repair as required.          |
| <input type="checkbox"/> | <input type="checkbox"/> | Inspect electrical components for signs of excessive heat or deterioration.               |
| <input type="checkbox"/> | <input type="checkbox"/> | Inspect condition of electrodes, connectors and cables.                                   |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify correct detenting and lead shorting of lead selector switch.                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify calibration pulse and decay time; correct balance and frequency response.          |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify correct operation of frequency response switch.                                    |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify correct operation of gain and position controls and chart speeds.                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Inspect drive rollers and drive motor. Inspect paper bail assembly.                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify operation of writing and marker stylus, electric stops and mechanical stops.       |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify linearity and step response of signal at high, mid and low position.               |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify correct operation of stylus temperature control and auto recording, if applicable. |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify other options, such as pulse and pressure transducers.                             |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify correct operation of marker stylus in manual and auto mode.                        |
| <input type="checkbox"/> | <input type="checkbox"/> | Clean drive rollers and paper feed assembly.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Clean motor drive belts. Lubricate as recommended.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify the operation of special functions using manufacturer's service manual.            |
| <input type="checkbox"/> | <input type="checkbox"/> | Clean and lubricate casters as necessary.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify correct operation of all buttons, controls, displays and/or indicators.            |
| <input type="checkbox"/> | <input type="checkbox"/> | Verify correct operation of unit in all functional modalities.                            |