



Vermont Department of Health Laboratory

195 Colchester Avenue, P.O. Box 1125, Burlington VT 05402-1125
DataMaster Technical Services (ph) 802-863-7641; (fax) 802-863-7632

Annual Site Visit Preventive Maintenance Check List

Department/Agency: _____ DM serial #: _____

Performed By: _____ On: 1 / 1 / _____

Mark each process completed

_____ Print out Options, replace printer ribbon as needed.

_____ Check simulator temperature.

_____ Check chassis exhaust fan.

_____ Replace simulator jar o-ring.

_____ Perform pressure check of simulator.

_____ Vacuum inside of instrument, if needed.

_____ Check flow thermistor for debris and clean as needed

_____ Check that the breath tube is warm to the touch.

_____ Check 5-way valve.

_____ Check cable/tubing connections.

_____ Check simulator motor.

_____ Perform visual check of instrument surroundings.

_____ Check electrical voltages.

_____ Run tests.

_____ Attach tickets to Annual Site Visit Preventive Maintenance Check List [Alc 804].

_____ Document Annual Site Visit Preventative Maintenance in the on-site Check-up and Maintenance Log. [Alc 803]

_____ Document Annual Site Visit Preventative Maintenance in the on-site Operator's Log. [Alc 603]

TP1
2
3
4
Score
TIP

TP - \emptyset
TP - AGND \square \equiv
TP - 15 Do NOT Touch
with PVI
TP - 5 - Logic 5V \pm 2%
TP - 11 - 12 \pm 1% 100%
TP - 13 - 12
TP - 12 - 15 \pm 2%
14 - 5
TP 5 - Cooler Voltage
TP Level - Lamp Voltage



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- _____ Run tests.
- _____ Attach tickets to Annual Site Visit Preventive Maintenance Check List [Alc 804].
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TP1
2
3
4

Score
TIP

TP - \emptyset \square \equiv
 TP - AGND \square \equiv
 TP - 15 Do NOT Touch
 will fry
 TP - 5 - Logic 5V +/- 2%
 TP - 11 - 12 +/- 10%
 TP - 13 - 12
 TP - 12 15 +/- 2%
 14 - 5
 TP 5 - Cooler Voltage
 TP Lead - Lamp Voltage