

Poly Medicure Limited

232- B, 3rd Floor, Okhla Industrial Estate, Phase - 3, New Delhi - 110020
 Tele: 011-26321889/26321893/26321899/26321838 Fax: 011-26321894/26321839
 Web: www.polymedicure.com E-mail: marketing@polymedicure.com
 CIN NO. L40300DL1995PLC066923

DeDe Jagadhari
Civil Hospital
Jagadhari

Commissioning Report.

Commissioning check list:

The commissioning (putting into the service) shall be performed and documented before the machine is handed over user according to the specified check list with reference to instructions for use.

REF (Article NO.)	<i>Dial-Ezee</i>
SN (serial Number)	<i>XT-210623</i>
Date of Purchase	<i>—</i>
Date of Installation	<i>16/Nov/2021</i>
Responsible Person (User)	<i>Miss. Ridhima (Centre Manager)</i>
Operating hours (h)	<i>20 hrs.</i>
Supplied by	<i>poly medicure ltd.</i>
Company	Poly Medicure Limited

A	Visual inspection:	Done
1	Machine: Clean /complete, no damages /moisture influences or loose assemblies; no moveable parts touching tubing's or wires; casters are moveable.	<input checked="" type="checkbox"/>
2	Check tight seat and damages of mains supply (Main's cord and connectors)	<input checked="" type="checkbox"/>
3	Protect Earth Resistance; < 0.3 (Ω) (Note Highest value).	<input checked="" type="checkbox"/>
4	Machine Inc. Mains cord, Move the mains cord during the check, thus possible loose connections can be detected;	<input checked="" type="checkbox"/>
5	check earthing on the earthing point.	<input checked="" type="checkbox"/>
B	Install Machine	
1	If present remove the Transport locks (cable Ties) Connect water Inlet to the machine, Connect Dialysate Connectors and fasten with tubing	<input checked="" type="checkbox"/>
2	Assembly Dialyser Holder	<input checked="" type="checkbox"/>
C	Function Inspection	
1	Pay attention to the filling of the machine to prevent dry run of the heater	<input checked="" type="checkbox"/>
2	Switch on Machine, Fill and rinse.	<input checked="" type="checkbox"/>
3	Flow chambers, Go to heating Menu increase the value, Then rinse in disinfection	<input checked="" type="checkbox"/>

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4	Self-test Passed (and 15 minutes with therapy with UF function check	✓
5	Ultrafiltration Comparison measurement 15 Minutes with UF rate with 500ML/h	✓
6	Temperature: compare measurement 37°	36.5°C ✓
7	Conductivity: Compare measurement 14.3ms/cm	14.0 ms/cm ✓
8	Check Leakage current of the Machine: Note (All water connections and data lines must be connected during the check of the leakage current. ≤0.5 (mA) During heat-up phase(- change mains polarity and note highest value)	✓
9	Safety Air detector check (SAD), alarm function audio /visual	✓

Note: The commissioning was performed, and the machine was handed over to the Responsible person.

1. Customer signature:

[Signature]
 JAGADHRI
 DCDC KIDNEY CARE
 DCDC CIVIL HOSPITAL

2. Customer Name

: Miss Ridhima

3. Date

17/Nov/2021

With seal.

4. Signature

[Signature]

Name Service Engineer:

[Signature]

7. Customer Name