

ACUSON ABVS

Safety-Related Tests Report Service

ABVS Electrical Safety Test Report - Forms4Mobile

This document has been redacted. The original document is available upon deposit.

Customer:	
Address:	
Fax / E-Mail:	
Fax / E-Mail:	

Department:	Room:
Material-No.:	Serial-No.:
Contract-No.:	Expire date:
Order-No.:	System - ID:

The instructions US15-101.833.01.01.XX are required for this protocol

Final Evaluation

☐ Initial Measurement ☒ Repeat Measurement

The evaluation was performed after completing all work steps.

- ☐ No deficiencies
- ☒ Slight deficiencies that require corrective measures: These must be recorded under Remarks.
- ☐ Significant deficiencies: The safety of the system is no longer assured. If these deficiencies are not corrected, there is a **"risk for patients, users or third parties"**.

Signature:

Date: 15-Dec-2017

Tester: [REDACTED]

If required by country-specific regulations:

The customer or a representative has taken note of the result of the evaluation of the system condition.

Signature:

Date: 15-Dec-2017

Name: [REDACTED]

Remarks:

Plastic shroud surrounding transducer cracked.

Will schedule for replacement.

Remarks regarding the Protocol

The chapter numbers refer to the chapters in the instruction, which is referenced on the cover page.

All pages have to have the serial number of the system and the date of maintenance in the page header.

The assignment n.a. (not applicable) indicates that the checkpoint or measured value is not used for this system.

On page 2 the completeness and the results of the maintenance work is confirmed.

Explanation of Abbreviations in the Report

Abbrev.	Explanation	Abbrev.	Explanation
SI	Safety Inspection	SIE	Electrical Safety Inspection
SIM	Mechanical Safety Inspection	CSE	Customer Service Engineer



Measuring Equipment and Measuring Instruments Used

Measuring instruments and measuring devices (phantoms, MR coils, etc.) may not be entered in the table if they have already been entered in the mobile device.

Measuring equipment / -instruments	Serial No.	Date Used

1 General Information

1.1 General Requirements

2 Electrical Checks

2.1 Test Results

2.1.1 Part 1: Visual Inspection

SIE	Visual inspection of system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SIE	System - safety-relevant damages	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SIE	Visual inspection of transducers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SIE	Transducer - safety-relevant damages	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.1.2 Part 2: Protective Ground Continuity Test

2.1.2.1 First Measurement Point

SIE	At the first measurement point the protective ground continuity wire has to be <200 mΩ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 0.112 ohms				

2.1.2.2 Second Measurement Point

SIE	At the second measurement point the protective ground continuity wire has to be <200 mΩ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 0.160 ohms				

2.1.2.3 Third Measurement Point

SIE	At the third measurement point the protective ground continuity wire has to be <200 mΩ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 0.118 ohms				

2.1.3 Part 3: Alternative Equipment Leakage Test

SIE	Alternative equipment leakage current, the maximum Main PE Leakage is <600 µA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 218 µA				

2.1.4 Part 4: ECG Leakage Current Test

2.1.5 Part 5: Transducers

2.1.5.1 Transducer 1

Description:	14L5BV
Material No.:	10041852
Serial No.:	53734005



OK not OK n.a.

SIE Maximum leakage 50 μ A☒ ☐ ☐

Measured value: ok

2.1.6 Part 6: Functional Test

SIE ACUSON ABVS boots up and the ACUSON ABVS POD Assembly operates properly.

☒ ☐ ☐**3 Changes to Previous Version****3.1 Changes to Previous Version**

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ACUSON / SONOLINE

Maintenance Protocol System

Maintenance Protocol

Customer:	
Address:	
Fax / E-Mail:	
Fax / E-Mail:	

Department:	Room:
Material-No.: 10041461	Serial-No.:
Contract-No.:	Expire date:
Order-No.: 400301237094_0001	System - ID:

This document is valid for all products listed in the Maintenance Instructions
US00-000.831.01.XX.02
The instructions US00-000.831.01.18.XX are required for this protocol

Evaluating the Condition of the System

The system has no deficiencies. *	<input type="checkbox"/>
The system has slight deficiencies that have no effect on continued operation of the system. The deficiencies should be corrected preventively. *	<input checked="" type="checkbox"/>
The system has serious deficiencies. For safety reasons, continued operation of the system is permitted only after successfully correcting the deficiencies.	<input type="checkbox"/>

*) For imaging systems: The result of the image quality check shows no deviation from the reference values.

The evaluation was performed after completing all work steps.

Signature:

Date: 15-Dec-2017

Name:

If required by country-specific regulations:

The customer or a representative has taken note of the result of the evaluation of the system condition.

Signature:

Date: 15-Dec-2017

Name:

Remarks:

Cracked plastic shroud surrounding ABVS transducer.

Will schedule to replace.

Remarks Regarding the Protocol

The chapter numbers refer to the chapters in the instruction, which is referenced on the cover page.

All pages have to have the serial number of the system and the date of maintenance in the page header.

The assignment n.a. (not applicable) indicates that the checkpoint or measured value is not used for this system.

On page 2 the completeness and the results of the maintenance work is confirmed.

Explanation of Abbreviations in the Protocol

Abbrev.	Explanation	Abbrev.	Explanation
SI	Safety Inspection	PMF	Preventive Maintenance, Operating Value Check, Function Check
SIE	Electrical Safety Inspection	Q	System Quality, Image Quality
SIM	Mechanical Safety Inspection	QIQ	Image Quality
PM	Preventive Maintenance	QSQ	System Quality Check
PMP	Periodic Preventive Maintenance	SW	Software Maintenance
PMA	Preventive Maintenance Adjustments	CSE	Customer Service Engineer



Measuring Equipment and Measuring Instruments Used

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Measuring equipment / -instruments	Serial No.	Date used

OK not
OK OK n.a.

1 Planned Maintenance

1.1 Affected Systems

1.2 Introduction

1.3 Required Tools, Materials, and Documents

1.4 Preparations

PM	Discuss Customer Concerns	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Maintain the Patient Database	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Perform Disk Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

1.5 Performing Maintenance

PM	System History Analysis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Perform System Diagnostics Checks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Perform System Calibration (where applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PM	Clean the System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Clean and Inspect Transducers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Clean Air Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Clean the Trackball	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Check Monitor / Flat Panel Display (FPD)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Perform Monitor Optimization Procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PM	Check Movement of User Controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM	Check Mechanical Operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Maintenance of this section was performed by:

Signature: _____

Date:

Name:

1.6 Safety Checks

SI	Check Wheels and Wheel Locks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SI	Check Cooling Fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SI	Check the Power Cable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SI	Check Electrical Safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1.7 General System Maintenance

PM	Check Modules and Cables	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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		OK	not OK	n.a.
	PM Check Mandatory/Non-Mandatory System Modifications	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.8	Functional System Check			
	QSQ Check the System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	QSQ Check Image Quality and Transducers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	QSQ Check Air Filter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.9	Network Setup Check			
	PMF Verify Network Settings (if applicable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.10	Peripheral Devices Check			
	QSQ B/W and Color Video Printers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	QSQ VCR and/or DVR	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.11	Concluding the Maintenance			
	PM Check System / Preset Data (Backup)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	PM Concluding the Maintenance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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ACUSON S Family

Maintenance Protocol Service

S Family Maintenance Protocol

Customer:	
Address:	
Fax / E-Mail:	
Fax / E-Mail:	

Department:	Room:
Material-No.: 10041461	Serial-No.:
Contract-No.:	Expire date:
Order-No.: 400301237094_0001	System - ID:

The instructions US15-102.831.01.05.XX are required for this protocol

Evaluating the Condition of the System

The system has no deficiencies. *	<input type="checkbox"/>
The system has slight deficiencies that have no effect on continued operation of the system. The deficiencies should be corrected preventively. *	<input checked="" type="checkbox"/>
The system has serious deficiencies. For safety reasons, continued operation of the system is permitted only after successfully correcting the deficiencies.	<input type="checkbox"/>

*) For imaging systems: The result of the image quality check shows no deviation from the reference values.

The evaluation was performed after completing all work steps.

Signature:

Date: 15-Dec-2017

Name:

If required by country-specific regulations:

The customer or a representative has taken note of the result of the evaluation of the system condition.

Signature:

Date: 15-Dec-2017

Name:

Remarks:

Plastic shroud surrounding ABVS transducer cracked.

Will schedule to replace.

Remarks Regarding the Protocol

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PM	Preventive Maintenance	QSQ	System Quality Check
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PMA	Preventive Maintenance Adjustments	CSE	Customer Service Engineer



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Measuring equipment / -instruments	Serial No.	Date used

OK not
OK OK n.a.

1 S Family Planned Maintenance

1.3 Evaluating the System Condition

QSQ Discuss Customer Concerns

☒ ☐ ☐

1.4 System Tests and Diagnostics

PMF System History Analysis

☒ ☐ ☐

PM Perform System Diagnostics Checks

☒ ☐ ☐

PM Perform Monitor Optimization

☐ ☐ ☒

1.5 Safety Inspection

SIM Inspect Wheels and Braking System

☒ ☐ ☐

SI Inspect Rear Card Cage Cover

☒ ☐ ☐

SIE Perform Electrical Safety Tests on System and Transducers

☒ ☐ ☐

SIE [For ACUSON S2000 ABVS Only] Perform Electrical Safety Test on S2000 ABVS

☒ ☐ ☐

SIM Test Cooling Fans

☒ ☐ ☐

1.6 Inspect and Clean the System

PM Clean the Flat Panel Display (FPD)

☒ ☐ ☐

PM Clean and Inspect the Control Panel and Trackball

☒ ☐ ☐

PM Clean and Inspect the Air Filters

☒ ☐ ☐

PM Clean and Inspect System Covers

☒ ☐ ☐

PM Clean and Inspect OEM Peripheral Devices

☐ ☐ ☒

PM Clean and Inspect Transducer Holders

☒ ☐ ☐

PM [For ACUSON S2000 ABVS Only] Clean and Inspect the ABVS POD

☒ ☐ ☐

1.7 Inspect System Mechanical Operation

PM Inspect Flat Panel Display (FPD)

☒ ☐ ☐

PM Inspect Control Panel Movement

☒ ☐ ☐

SI [For ACUSON S2000 ABVS only] Permanent Mounting Fixtures

☒ ☐ ☐

SI [For ACUSON S2000 ABVS only] Mechanical Operation

☒ ☐ ☐

PMF [For ACUSON S2000 ABVS Only] Calibrate the ABVS LCD

☐ ☐ ☒

1.8 Final Functional System Inspection

QSQ Verify System Functionality

☒ ☐ ☐

QSQ Verify Standby Functionality

☒ ☐ ☐

QSQ Inspect Image Quality and Transducers

☒ ☐ ☐

PMF Verify Network Settings (if applicable)

☒ ☐ ☐



OK not OK n.a.

PMF Verify SRS Connection (if applicable)

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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1.9 Peripheral Devices Inspection

QSQ Inspect BW or Color Printers

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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QSQ Inspect DVR

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
--------------------------	--------------------------	-------------------------------------

1.10 Concluding the Maintenance

PM Check System / Preset Data (Backup)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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PM Concluding the Maintenance

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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1.11 Documentation Requirements

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ACUSON S Family

Safety-Related Tests Report System

Electrical Safety Test Report - Forms4Mobile

Customer:	
Address:	
Fax / E-Mail:	
Fax / E-Mail:	

Department:	Room:
Material-No.: 10041461	Serial-No.:
Contract-No.:	Expire date:
Order-No.: 400301237094_0001	System - ID:

The instructions US22-101.833.01.01.XX are required for this protocol

Final Evaluation

☐ Initial Measurement ☒ Repeat Measurement

The evaluation was performed after completing all work steps.

- ☐ No deficiencies
- ☒ Slight deficiencies that require corrective measures: These must be recorded under Remarks.
- ☐ Significant deficiencies: The safety of the system is no longer assured. If these deficiencies are not corrected, there is a **"risk for patients, users or third parties"**.

Signature:

Date: 15-Dec-2017

Tester: [REDACTED]

If required by country-specific regulations:

The customer or a representative has taken note of the result of the evaluation of the system condition.

Signature:

Date: 15-Dec-2017

Name: [REDACTED]

Remarks:

Plastic shroud surrounding ABVS transducer cracked.
Will follow up. Otherwise, system checkout satisfactory.

Remarks regarding the Protocol

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1 General Information

1.1 General Requirements

2 Electrical Checks

2.1 Test Results

2.1.1 Part 1: Visual Inspection

SIE	Visual inspection of system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SIE	System - safety-relevant damages	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SIE	Visual inspection of transducers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SIE	Transducer - safety-relevant damages	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.1.2 Part 2: Protective Ground Continuity Test

2.1.2.1 First Measurement Point

SIE	At the first measurement point the protective ground continuity wire has to be <200 mΩ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 0.067 ohms				

2.1.2.2 Second Measurement Point

SIE	At the second measurement point the protective ground continuity wire has to be <200 mΩ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 0.079 ohms				

2.1.2.3 Third Measurement Point

SIE	At the third measurement point the protective ground continuity wire has to be <200 mΩ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 0.164 ohms				

2.1.2.4 Fourth Measurement Point

SIE	At the fourth measurement point the protective ground continuity wire has to be <200 mΩ	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 0.079 ohms				

2.1.3 Part 3: Alternative Equipment Leakage Test

SIE	Alternative equipment leakage current, the maximum Main PE Leakage is <400 µA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Measured value: 125 µA				

2.1.4 Part 4: ECG Leakage Current Test

SIE	ECG leakage current does not exceed 10 µA.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Measured value: NA				

2.1.5 Part 5: Transducers

2.1.5.1 Transducer 1

Description:	14L5
Material No.:	10789396
Serial No.:	53428012

SIE Maximum leakage 50 µA

☒ ☐ ☐

Measured value: 1.5 uA

2.1.5.2 Transducer 2

Description:	18L6
Material No.:	10789400
Serial No.:	60502036

SIE Maximum leakage 50 µA

☒ ☐ ☐

Measured value: 219 uA

2.1.5.3 Transducer 3

Description:	9L4
Material No.:	10789393
Serial No.:	53531043

SI Maximum leakage 50 µA

☒ ☐ ☐

Measured value: 6.6 uA

2.1.5.4 Transducer 4

Description:	
Material No.:	
Serial No.:	

SIE Maximum leakage 50 µA

☐ ☐ ☒

Measured value: NA

OK not
OK OK n.a.

2.1.5.5 Transducer 5

Description:	
Material No.:	
Serial No.:	

SI Maximum leakage 50 μ A☐ ☐ ☒

Measured value: NA

2.1.5.6 Transducer 6

Description:	
Material No.:	
Serial No.:	

SIE Maximum leakage 50 μ A☐ ☐ ☒

Measured value: NA

2.1.5.7 Transducer 7

Description:	
Material No.:	
Serial No.:	

SIE Maximum leakage 50 μ A☐ ☐ ☒

Measured value: NA

2.1.5.8 Transducer 8

Description:	
Material No.:	
Serial No.:	

SIE Maximum leakage 50 μ A☐ ☐ ☒

Measured value: NA

OK not
OK OK n.a.

2.1.5.9 TEE Transducer 1

Description:	
Material No.:	
Serial No.:	

SIE Maximum leakage 300 μ A☐ ☐ ☒

Measured value: NA

2.1.5.10 TEE Transducer 2

Description:	
Material No.:	
Serial No.:	

SIE Maximum leakage 300 μ A☐ ☐ ☒

Measured value: NA

2.1.5.11 TEE Transducer 3

Description:	
Material No.:	
Serial No.:	

SIE Maximum leakage 300 μ A☐ ☐ ☒

Measured value: NA

2.1.6 Part 6: Functional Test

SIE System boots to imaging and generates a normal B-mode image

☒ ☐ ☐

3 Changes to Previous Version

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