

## Preventive Maintenance Checklist Clinical Centrifuge Certification

PM Date: _____	Make: _____
Customer: _____	Model: _____
Facility: _____	Serial #: _____
Room: _____	Asset #: _____
	Tech: _____

**A. Inspection:**

- \_\_\_\_\_ Inspect Shaft of Motor for Wobble
- \_\_\_\_\_ Inspect Motor Brushes
- \_\_\_\_\_ Rotor Balanced
- \_\_\_\_\_ Inspected Rubber Feet
- \_\_\_\_\_ Inspected Power Cord
- \_\_\_\_\_ Inspected Tube Cushions
- \_\_\_\_\_ Check Brake for Proper Operation
- \_\_\_\_\_ Check Door Latches & Timers Checked
- \_\_\_\_\_ Refrigeration (If applicable)

**B. Calibration:**

- \_\_\_\_\_ Check Speed Control Accuracy
- \_\_\_\_\_ Strobe Tach Head for Correct RPM as Shown in Operation Manual
- \_\_\_\_\_ RPM Setting
- \_\_\_\_\_ Tachometer Reading

**C. Operational Review:**

- \_\_\_\_\_ Daily Maintenance
- \_\_\_\_\_ Review Importance of Balance Load

**Service Tech Recommendations:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**D. N.I.S.T:**      Electric Digital Tachometer - Control Company, Model # 4262,98767-08, SN# 240197082  
                          Thermocouple Thermometer - Control Company, Model # 9003,20250-03, SN# 240056680

The above inspection and calibration steps were performed in accordance with manufacturer specs. This PM procedure follows the guidelines as set forth in "Laboratory Instrument Maintenance and Function Verification", published by the College of American Pathologists.