فرم کنترل کارکرد هود

Ventilator operation control form

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ردیف  No. | تاریخ  Date | تست مکش  Suction Test | | ملاحظات  Explain |
| قابل قبول  Acceptable | غیر قابل قبول  Non Acceptable |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
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| 6 |  |  |  |  |
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| 11 |  |  |  |  |
| 12 |  |  |  |  |

نام کارشناس کنترل کننده: امضاء

Expert Name: Signature

LQS- F50918