



球管故障调查表 TUBE FAILURE INFORMATION FORM

本报告填妥后请反馈给我公司 (邮件: csong4@rcan.com.cn), 以便我们及时地提供技术服务;

Please fill in the form exactly and return to us for updated service (Email:csong4@rcan.com.cn).

使用单位(医院) End User/Hospital		单位联系人 Name/ATTN		联系方式 Tel/Email	
服务公司 Service Company		维修工程师 Engineer		联系方式 Tel/Email	
设备型号 System Model		球管型号 Tube Type		序列号 Serial No.	
安装日期 Date Installed		故障日期 Failure Date		门诊量 Outpatient Qty.	/天(Per day)
起始曝光次数 Initial Scan Counts		当前曝光次数 Ending Scan Counts		累计曝光次数 Total Scan Counts	
故障工作条件 FailureCondition	管电压/Tube Voltage:___KV 管电流/ Tube Current: ___mA 现象首次出现时间/The date for the first failure happenedon: _____				
故障调查 Failure Comments	<p>1. 球管故障前后影像质量是否相同? What is the quality for the imaging before and after failure? <input type="checkbox"/>是/Yes <input type="checkbox"/>否/No, 说明(图像异常, 请附照片)/Comments: _____</p> <p>2. 球管故障前后是否做过散热器清理/高压插座清理或其他保养工作? Did cleaning the CT before & after failure? <input type="checkbox"/>否/No <input type="checkbox"/>是/Yes, 说明(设备保养的情况)/Comments: _____</p> <p>3. 这只球管的噪音如何? What is the noise for this tube? <input type="checkbox"/>正常/Normal <input type="checkbox"/>越来越大/Bigger than before 噪音来源/Noise from: <input type="checkbox"/>散热器/Transformer <input type="checkbox"/>管套/Hoursing <input type="checkbox"/>其它/Other: _____ 噪音刺耳程度/Level of noise: <input type="checkbox"/>感觉到但可忍受/Acceptable <input type="checkbox"/>勉强忍受/Barely tolerated <input type="checkbox"/>不能忍受/Can't be tolerated 说明/Comments: _____</p> <p>4. 这只球管的手触温度如何? What is the heat or temperature for this tube by using hand touch? <input type="checkbox"/>温热/Normal <input type="checkbox"/>烫手/Hot <input type="checkbox"/>无法接触/Cannot touch, 说明(手触摸位置)/Comments: _____</p> <p>5. 这只球管是否漏油? 漏油点在哪? Is this tube oil leak? Where is the leak point? <input type="checkbox"/>否/No <input type="checkbox"/>是/Yes, 漏油点(请附照片)/Leak point: _____ 漏油量(提供图片或者描述一下大小)/Amounts of the leaking oil: _____</p> <p>6. 这只球管的打火情况如何? What is the situation of arcing for this tube? <input type="checkbox"/>不打火/No Arcing <input type="checkbox"/>打火/Arcing, 打火间隔/Arcing Period or frequency: <input type="radio"/>每天/Per day <input type="radio"/>每小时/Per hour <input type="radio"/>每分钟/Per min <input type="radio"/>每次开机/Operation the System <input type="radio"/>每次曝光/Expore 每天打火次数/Arcing: ___次/per day, 其它说明/Other comments: _____</p> <p>7. 这个故障是间歇性的吗? Is the failure intermittent? <input type="checkbox"/>是/Yes <input type="checkbox"/>否/No, 说明/Comments: _____</p> <p>8. 这个球管或机器最近 1 个月是否维修过? 故障情况? Did the tube and system have been repaired ago? <input type="checkbox"/>否/No <input type="checkbox"/>是/Yes, 说明/Comments: _____</p> <p>9. 这只球管和上一只球管的故障是否一样? Is it the same failure situation between this tube and former one? <input type="checkbox"/>是/Yes <input type="checkbox"/>否/No, 说明/Comments: _____</p> <p>10. 这个设备的错误代码及含义是什么? What is the error code of the system and what is meaning? (请附报错日志照片并描述报错情况) _____</p> <p>11. 是否已排除高压故障的可能性? 具体操作是什么? Have you ruled out the possibility of a high voltage failure? _____</p> <p>12. 空载测试是否做过? Is there an empty test? <input type="checkbox"/>是/Yes <input type="checkbox"/>否/No, 说明/Comments: _____</p> <p>13. 是否已清理散热器并重新启动设备尝试? Have you cleaned the radiator and restarted the equipment after clean? _____</p>				
其他说明:	_____				
推测故障原因/Failure Mode:	_____				
瑞能推测(由瑞能填写)/File in by RCAN:	_____				
制单人:	审核人:	确认人:			