

Service Event Report

Instructions on reverse

Choose a Service Type

Choose a Part Status

Service Type (check one)
<input type="checkbox"/> Out of Box Failure
<input type="checkbox"/> Warranty Service
<input type="checkbox"/> Out of Warranty Service

Parts Status (check one)
<input type="checkbox"/> No parts necessary for this repair. Service Event Report for your information.
<input type="checkbox"/> I need parts for this repair (list the parts below and attach Purchase Order)
<input type="checkbox"/> I need parts to replenish my stock (list the parts used below and attach Purchase Order)
<input type="checkbox"/> Will not replenish stock. Please give me a RMA for the return of the faulty parts.
<input type="checkbox"/> No parts necessary. Please issue a RMA for repair at SonoSite.

For SonoSite Use Only	
Service Request	
Order Number	
RMA Number	
Work Order	

Enter complete contact information

Service Provider

Name:		Provider Reference:	
Company:		Date Reported:	
Address:			
Phone Number:		Fax Number:	
E-mail address:			

Device Description

Enter product information for the system being repaired

Ref Number:		Serial Number:	
Name:		Lot Number:	
ARM/SHDB Version:		Configuration:	

Problem Found

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Put the system configuration here. You can find this on the System Information Page

Service Performed

Enter DETAILED problem description here.

Performed By:	
Date:	

Parts Removed

Part Name	Part Number	Serial Number	Lot Number	Rev	Replaced By

Enter details for parts being removed from the system.

Enter details for parts being installed into the system.

Parts Installed

Part Name	Part Number	Serial Number	Lot Number	Rev	Replaced By

Tests Performed (attach test data)

Test:		Test:	
Performed By:		Performed By:	
Result: Pass <input type="checkbox"/> Fail <input type="checkbox"/>		Result: Pass <input type="checkbox"/> Fail <input type="checkbox"/>	

Attach additional sheets as required