

AFTER CARE SERVICE REPORT

SMART SUCTION



CATTANI DEALER:

Address: _____

Suburb: _____ State: _____ Post Code: _____

Technician: _____

Phone: _____ Email: _____

CUSTOMER:

Address: _____

Suburb: _____ State: _____ Post Code: _____

Technician: _____

Phone: _____ Email: _____

PRODUCT:

Description: _____

Serial Number: _____ Gen Code: _____ Act. Code: _____

Invoice Number: _____ Date of Sale: _____

Installation Date _____ Hours Run: _____

AFTER CARE
∴ 100% RELIABILITY

AFTER CARE SERVICE SCHEDULE

SERVICE DUE	NO HYDROCYCLONE AMALGAM SEPARATOR	WITH HYDROCYCLONE AMALGAM SEPARATOR	SERVICE KIT QUANTITY
YEAR			
<input type="checkbox"/> 1	MINOR SERVICE	MINOR SERVICE	
<input type="checkbox"/> 2	MINOR SERVICE	MINOR & INTERMEDIATE SERVICE	
<input type="checkbox"/> 3	MINOR SERVICE	MINOR SERVICE	
<input type="checkbox"/> 4	MINOR SERVICE	MINOR & INTERMEDIATE SERVICE	
<input type="checkbox"/> 5	MINOR SERVICE & MAJOR SERVICE	MINOR SERVICE & MAJOR SERVICE	
<input type="checkbox"/> 6	MINOR SERVICE	MINOR & INTERMEDIATE SERVICE	
<input type="checkbox"/> 7	MINOR SERVICE	MINOR SERVICE	
<input type="checkbox"/> 8	MINOR SERVICE	MINOR & INTERMEDIATE SERVICE	
<input type="checkbox"/> 9	MINOR SERVICE	MINOR SERVICE	
<input type="checkbox"/> 10	MINOR SERVICE	MINOR & INTERMEDIATE SERVICE	

PLEASE NOTE: HEPA FILTERS ARE TO BE REPLACED ANNUALLY IF FITTED.

MINOR SERVICE TASKS

TASK	COMPLETED Please Tick
1 Clean and service suction inlet housing and filter. Replace inlet filter o-ring and lubricate with Lubri-Jet silicone drops. PLEASE NOTE: Excessive debris can be an indication of insufficient daily disinfection or ineffective infection prevention and control processes.	<input type="checkbox"/>
2 If fitted with a Hydrocyclone Amalgam Separator remove the amalgam cup, inspect nozzle at the base of the Hydrocyclone cone for any blockages, lubricate seal and cup locking guides. NOTE: Ensure that dental clinic is aware that EcoCycle offer an amalgam recycling service and sell spare cups. Call AUS: 1300 32 62 92 NZ: 0800 732 922.	<input type="checkbox"/>
3 Inspect all tubing (suction inlet, fluid waste outlet, exhaust and internal), checking for loose connections or any leaks. Replace as necessary.	<input type="checkbox"/>
4 Schedule next suction system service as per Cattani After Care Service Schedule.	<input type="checkbox"/>

INTERMEDIATE SERVICE TASKS

TASK	COMPLETED Please Tick
1 Remove and fully dismantle Hydrocyclone Amalgam Separator assembly.	<input type="checkbox"/>
2 Clean and service all internal parts. IMPORTANT: Note the condition of the brass valve (C-244185) and the cage (C-200207).	<input type="checkbox"/>
3 Replace all grey ISO tubing.	<input type="checkbox"/>
4 Reassemble Hydrocyclone Amalgam Separator assembly and refit to SMART Suction unit.	<input type="checkbox"/>
5 Test suction system to ensure no leaks are present at the Hydrocyclone Amalgam Separator. PLEASE NOTE: Ensure dental clinic is aware of EcoCycle amalgam recycling.	<input type="checkbox"/>
6 Schedule next suction system service as per Cattani After Care Service Schedule.	<input type="checkbox"/>

MAJOR SERVICE TASKS

TASK	COMPLETED Please Tick
1 Remove centrifuge and suction motor from SMART suction unit.	<input type="checkbox"/>
2 Fully dismantle centrifuge, replace (bearings, oil seal, flap valve, o-rings, end cover and cooling fan). Once complete reassemble.	<input type="checkbox"/>
3 Fully dismantle suction motor, replace (bearings, oil seal, foam and cages, gasket, end cover, cooling and rubber mounts). Once complete reassemble.	<input type="checkbox"/>
4 Fit centrifuge and suction motor in frame. Replace suction hose between suction motor and centrifuge. Replace exhaust tubing between suction motor and exhaust non-return valve.	<input type="checkbox"/>
5 Schedule next suction system service as per Cattani After Care Service Schedule.	<input type="checkbox"/>

TEST AND INSPECTION TASKS

TASK	STATUS <small>Please Tick</small>	NOTES
1	<input type="checkbox"/> OK	
2	<input type="checkbox"/> OK	Keypad: Inverter:
3	<input type="checkbox"/> OK	
4	<input type="checkbox"/> OK	
5	<input type="checkbox"/> OK	
6	<input type="checkbox"/> OK	
7	<input type="checkbox"/> OK	Off delay time:
8	<input type="checkbox"/> OK	Maximum suction motor frequency: Hz
Maximum Frequencies: Micro SMART = 120Hz Turbo SMART B = 110Hz Micro SMART CUBE = 145Hz Turbo SMART B CUBE = 165Hz Turbo SMART A = 85Hz Turbo SMART 2V = 110Hz Turbo SMART A CUBE = 140Hz Turbo SMART HP = 90Hz		
9	<input type="checkbox"/> OK	
10	<input type="checkbox"/> OK	
11	<input type="checkbox"/> OK	
12	<input type="checkbox"/> OK	

Signature:

Date:

SALES AND TECHNICAL SUPPORT



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