

Medical Equipment Pre-Delivery Inspection Checklist

Date		Location	
Equipment Name		Model	
Serial Number		Manufacturer	
Inspected By		Contact	

Checklist Items

Item	Pass	Fail	Remarks
Packaging Condition			
Physical Condition (No Damage)			
Correct Model & Serial Number			
Accessories Present			
User Manual & Documentation			
Power On/Off Check			
Basic Functionality Test			
Alarm/Indicator Light Check			
Electrical Safety Check			
Calibration/Certification Labels			

Remarks / Additional Notes

Inspected by

Received by