

InstallationConfirmation

设备安装完成确认函

尊敬的/Dear _____ 医院/hospital:

经贵院大力协助，GE 医疗 _____ 设备，设备型号/Model Number: _____

设备序列号 /Product Serial Number: _____ GE SO 号/GE SO Number: _____

GE 系统编号/GE System ID: _____ 于 _____ 年 _____ 月 _____ 日完成安装调试。各项性能指标参数达到临床使用要求。GE 将在近期与贵院预约应用培训事宜。具体保修事宜参照合同执行。

Fully assisted by you, the equipment from GE Healthcare has been successfully installed and commissioning. The performance specifications fully meet the requirement for clinical use. GE will shortly arrange the application training. For details , please refer to contract.

贵方对安装调试如有意见和建议，请在如下注明，GE 医疗将尽快予以答复。

If you have any comments or suggestions for our work , please kindly put down here below. GE Healthcare will reply you soonest.

GE 医疗客户服务部将根据合同约定和技术要求，为该设备提供相应的免费定期保养。在执行定期保养之前，GE 医疗工程师将与使用科室提前预约，请在接到预约电话后提前安排病人的诊疗时间，并保存好病人的图像数据文件。如使用过程中出现任何问题，请及时拨打 GE 医疗客户服务部咨询及维修电话 400-812-8188.

GE Healthcare service department will provide you free of charge preventive maintenance as per technical requirements and terms in the contract. GE Healthcare engineer will contact user in advance before preventive maintenance. Please arrange your client (patient) appointments appropriately after confirmed with GE Healthcare engineer and keep your client (patient) image/data for reference. If you have any problem during the usage , Please just call GE Healthcare service department. The call for consultant and maintenance is 400-812-8188.

祝贵方使用愉快！

Best Regards !

医院用户/Hospital

GE 医疗中国客户服务部

GE (China) Healthcare Service Department

签名/盖章Signature/Company Seal

签名/盖章Signature/Company Seal

日期/Date

日期/Date