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**REPAIR OF BIOMEDICAL EQUIPMENTS UNDER BIOMEDICAL EQUIPMENT
MAINTENANCE PROGRAM (BEMP)**

Recommendations for Beyond Economic Repair (BER)

PROFORMA

Sl. No	Particulars	Details
1	Name of District	Kottayam
2	Name of Hospital	phe Parathoda
3	Name of Equipment with Make, Model and Serial Number	Digital BP Apparatus Make: Lifecare Enterprise Model: NA SN: NA.
4	Equipment ID & Barcode	0542984, #75237
5	Date of purchase / Year of manufacture / Installation Date	14-07-2020
6	Warranty details (Yes/No)	No
7	*AMC/ CAMC Period agreed at the time of purchase	No.
8	Date of breakdown (Date of registration of complaint through email/ Toll free)	17-10-2023
9	Action taken	Unserviceable.
10	Present status of the equipment (Fully damaged / partially damaged)	Fully damaged.
11	Recommendations for repair (required service details)	All parts rusted. Unserviceable.
12	Cost of spares (specify parts and cost)	Internal PCB - 1400 Body parts - 500 1900 <u>1900</u>



Date 19/10/23

Superintendent / Medical Officer (t/c)

Signature of
The Medical Officer in-charge
P. C. Parathodu
Kottayam District

Signature of J.C.B.M (NHM)
CONSULTANT BIOMEDICAL ENGINEER
NATIONAL HEALTH MISSION
KOTTAYAM

Signature of J.C.B.M (NHM)
21/10/2023

Asset value + 2550
cost of spare - 1900 (88.5%)
Life period - 3 year
As per the RBER guidelines recommended
as RBER

Remarks and Recommendations of Junior Consultant (Biomedical) NHM:

* Attach Photograph

*Not mandatory #Based on the period of life and value as per the BER guidelines

13	Asset Value	2350/-
14	# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value	88.5%
15	Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)	Cyrix
16	Reasons for recommending the equipment as BER	Machine totally damaged conditions. All spare parts not available. Also machine aged upto 8 years. So recommended for BER.
17	Name & Signature of CYRIX Authority	Nirishah Roy



**BIOMEDICAL EQUIPMENT
MAINTENANCE PROGRAMME
UNDER
NATIONAL HEALTH MISSION**



SERVICE PROVIDER
Tender No. WO-37/2021-2022/698

CYRIX
HEALTHCARE PVT LTD

No. : 144735

ISO 13485 : 2012 & ISO 9001-2008 CERTIFIED COMPANY | AERB Approved Service Agency

Service Report 30/64 1 B, Petta Junction, Poonithura, Kochi - 682 038, Kerala
Ph : 98472 99500 Website : www.cyrix.com | E-mail : bemp.kl@cyrix.in

Health Facility <i>Phc Parathodu</i>	Call Registration Date : <i>17-10-2023</i>
Address <i>Parathodu</i>	Caller ID : <i>75237</i>
<i>Kottayam</i>	Date of Visit : <i>18-10-2023</i>
Ph : <i>9446905255</i>	Asset No. : <i>0542964</i>
	EQPT Name : <i>Digital BP Apparatus</i>
	Manufacture Lifecare Model : <i>NA</i>
	S. No. <i>NA</i> Dept. <i>OP</i>

Service Classification : Breakdown Call PMS Calibration Cust.Training

Problem Identified : *Fully damaged & rusted.*

Action Taken : *Checked. Display defective. Battery slots rusted and damaged. Board oxidised and switches rusted. Unrepairable. Recommended for BER.*

Completed Date : *19-10-2023* Time : *12:40pm* Spare Required

Spare Replaced Requested

Description	Qty.	Part Number	PR Number
1.			
2.			
3.			

Cyrix Engineer	Date	Start Time	End Time
<i>Nidhish Roy</i>	<i>19-10-2023</i>	<i>11:50am</i>	<i>12:40pm</i>

Customer Remark Completed Pending



Service Engineer Name : *Nidhish Roy*
Signature : *[Signature]*
Date : *19-10-2023*
Contact Number : *9072575096*

Customer Name : *Dr. Unnikrishnan V.V*
Signature : *[Signature]*
Date : *19-10-2023*
Contact Number : *9847299500*
Designation : *Medical Officer in Charge*
Hospital Seal : *The Medical Officer in Charge Parathodu Kottayam District*

Contact Number: 09722208 Date: 10-10-2023 Signature: <i>[Signature]</i> Service Engineer Name: <i>[Signature]</i>	Hospital Name: <i>[Blank]</i> Designation: <i>[Blank]</i> Contact Number: <i>[Blank]</i> Date: <i>[Blank]</i> Signature: <i>[Blank]</i> Customer Name: <i>[Blank]</i>
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Kottayam District
 Health Officer
 The District Office, Kottayam



Customer Name: <i>[Blank]</i>	Completed: <input checked="" type="checkbox"/>	Requiring: <input type="checkbox"/>
Date: 10-10-2023 Start Time: 11:20 AM End Time: 10:30 AM		
Description: <i>[Blank]</i> Job Number: <i>[Blank]</i> PR Number: <i>[Blank]</i>		

Problem identified: *[Blank]*
 Service Classification: Breakdown call PMS Calibration Staff Training
 Action taken: *[Blank]*

PR: <i>[Blank]</i> Address: <i>[Blank]</i> Health Facility: <i>[Blank]</i>	Date of Visit: 10-10-2023 Time: 11:20 AM Duration: <i>[Blank]</i>
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Name: <i>[Blank]</i> Address: <i>[Blank]</i> Health Facility: <i>[Blank]</i>	Date of Visit: 10-10-2023 Time: 11:20 AM Duration: <i>[Blank]</i>
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HEALTH CARE PART 10
XYIX
 NATIONAL HEALTH MISSION
 UNDER
 MAINTENANCE PROGRAMME
 BIOMEDICAL EQUIPMENT



BP APPARATUS - DIGITAL

JNV. No: PMS/KPM/166

Dated 19.6.20

Planet medical system;

Kanjirapally. Rs 2350/-

14/7/20

19

Rs. out to DEC on 18/11/20

Shamed

JAI



