

### BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

## CYRIX

No.:

161971

Tender No. WO-37/2021-2022/698	AREPVI	LTD		
ISO 13485 : 2012 & ISO 9001-2008 CERTII	FIED COMPANY	AERB Approved Ser	a	
Service Report 30/64 1 B, Petta Junction, Post 1 B, 198472 99500 Website: www.  Health Facility Phane Report Roll Problem Identified: United Report Roll Problem Identified: United Roll Phane Report Report Roll Phane Report Roll	Call Registra Caller ID: Date of Visit Asset No.: EQPT Name Manufacture S. No.	Solution Date:  \$009 (a)  14/11  0766  Calibration	yrix.in  14/11/2  14/11/2  23  2941  Provided:  apt. O. P.  Cust.	L3
Action Taken: Check the Use place and outing the Bourd Confound issue in Bourd Confound issue in Bourd.  Completed Date: [4][] & Time:	westion	naguest	of yet fer in	めひこうし
Spare Replaced Requested	Qty.	Part Num	ber	PR Number
Description	wiy.	, art ituii		
1.				
2.				
3.			04	End Time
Cyrix Engineer		Date	Start Time	End Time
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nkw 11	lenin	14/11/93	1:30 K	2:40Pm
Customer Remark	Completed		Pendi	ng

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

## Recommendations for Beyond Economic Repair (BER)

#### **PROFORMA**

SI.	Particulars	Details
No	Name of District	Ernakwam
2	Name of Hospital	Phc Kalloorkad
3	Name of Equipment with Make, Model and Serial Number	BP Appoinations  Biamond, Deluxe
4	Equipment ID/ Barcode	0744941
5	Date of purchase/ Year of manufacture	12/9/19
6	Warranty details	NA
7	*AMC/ CAMC Period agreed at the time of purchase	NA
8	Date of breakdown/ Date of registration of complaint	14/11/23
9	Action taken	cheek, and found issue in boon complaint
10	Present status of the equipment (Fully damaged / partially damaged)	fully clamaged.
11	Recommendations for repair (required service details)	check and found board complains
12	Cost of spares (specify parts and cost)	NA

13	# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value	NA
14	Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX.	Yes
15	Reasons for recommending the equipment as BER	boosed complaint
16	Signature of CYRIX Authority	ARMHUNUD 14/hla3

\*Not mandatory

#Based on the period of life and value as per the BER guidelines

## \* Attach Photograph

Remarks and Recommendations of Junior Consultant (Biomedical) NHM:

Unable to szepain. Met BER noms.

Signature of JC BM (NHM)

Date 14/11/23

Signature of Superintendent/Medical Officer (i/c)

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**REDMI NOTE 9** 

(read pro). (Rate 2407,18) PHC KRD Std 6/06/2015 Condemnce as per crops No. 19215 Rd (mercury fac)