

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

407

Recommendations for Beyond Economic Repair (BER)

PROFORMA

Sl. No	Particulars	Details
1	Name of District	THIRUPUR (MA) Thiruvananthapuram
2	Name of Hospital	UPTE CHACKAL
3	Name of Equipment with Make, Model and Serial Number	BP Apparatus: DUSTA - EECO
4	Equipment ID & Barcode	85751 - 0140728
5	Date of purchase / Year of manufacture / Installation Date	23/09/2014
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)	15/12/2023
9	Action taken	Mercury spilled completely
10	Present status of the equipment (Fully damaged / partially damaged)	Fully damaged
11	Recommendations for repair (required service details)	Mercury spilled completely cannot be repaired
12	Cost of spares (specify parts and cost)	NTA

13	Asset Value	N/A
14	# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value	N/A
15	Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)	Find the attached copy of Cyrex Service report along with RBER documents
16	Reasons for recommending the equipment as BER	Mercury spilled completely. Cannot be rectified.
17	Name & Signature of CYRIX Authority	Mohamed Sajid M Sajid

*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:

Mercury spilled. So can be RBER.

M. INTESHA MOHAN M.R.
Junior Consultant (Biomedical)
National Health Mission
Thiruvananthapuram

JMB
18.12.2023

Signature of JC BM (NHM)

Date 20/12/23.

Seal

Signature of
Superintendent / Medical Officer (i/c)

Medical Officer
UPHC-CHACKAI
Thiruvananthapuram



BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

CYRIX

HEALTHCARE PVT LTD

No. : 162016

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

<p>Health Facility : <u>Mat CPHC Chackai</u></p> <p>Address : <u>Chackai</u> <u>Theeruvantapuram, Kerala</u></p> <p>Ph : <u>8606223443</u></p>	<p>Call Registration Date : <u>15/12/2023</u></p> <p>Caller ID : <u>85751</u></p> <p>Date of Visit : <u>15/12/2023</u></p> <p>Asset No. : <u>0140728</u></p> <p>EQPT Name : <u>BP Apparatus Mercury</u></p> <p>Manufacture : <u>Disha</u> Model : <u>EECO</u></p> <p>S. No. : <u>N/A</u> Dept. : <u>Op</u></p>
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Service Classification : Breakdown Call PMS Calibration Cust.Training

Problem Identified : checked the machine and found mercury spilled completely

Action Taken : Mercury spilled completely. Cannot be repaired in machine

Completed **Date** : 20/12/23 **Time** : 12:00pm **Spare Required**

Spare Replaced **Requested**

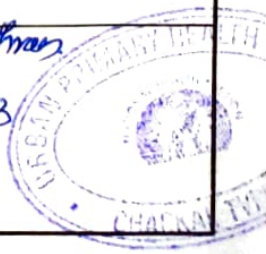
No.	Description	Qty.	Part Number	PR Number
1.				
2.	<u>RBER</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
3.				

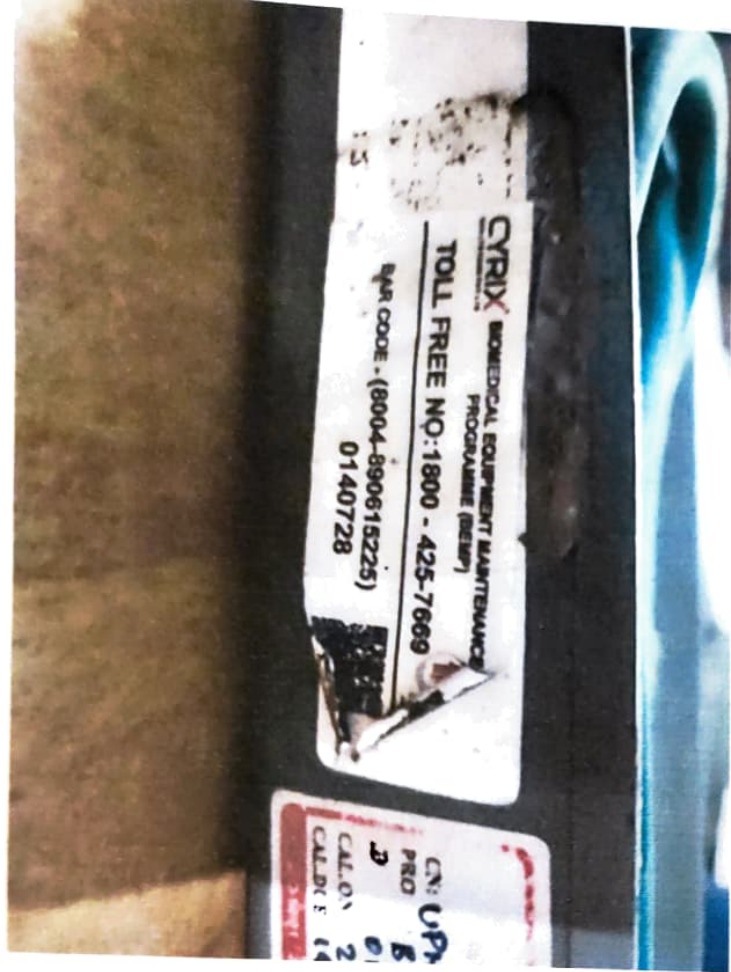
Cyrux Engineer	Date	Start Time	End Time
<u>Mohammed Sajid M</u>	<u>20/12/23</u>	<u>11:00pm</u>	<u>12:00pm</u>

Customer Remark : Mercury leaked completely **Completed** **Pending**

Service Engineer Name : Mohammed Sajid M
Signature : [Signature]
Date : 20/12/23
Contact Number : 993499197

Customer Name : Amith Mathan
Signature : [Signature]
Date : 20/12/23
Contact Number : 701293514
Designation : Staff Nurse
Hospital Seal : [Seal]





STOCK REGISTER

Name of Articles: SPHYGMO MANOMETER Rate: 2700/- 51

PARTICULARS	BILL No.	RECEIPT		ISSUED		BALANCE	
		Qty.		Qty.		Qty.	
1. Received on 23/2/2014 Novaphon 300 Sphygmomanometer		1	piece (complaint. Replaced a new BP apparatus. on 23/9/14.)				
1. Life - Cine ultra sphygmomanometer 23/9/14.		1	piece.			1	2700
2. Received on 23/3/15		1				2	2700
Issued to Dr. Rengjini			} pag No: 1	1		1	2700
Issued to Dr. Shreekh				1		Nil	2700
23/6/2019 Received from NHM office Bill date: 20/6/19 228 4-7-19.			No. 5	3		3	8100
5/1/19 Received from Krishna Medicare Dept						1	2700