



BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

CYRIX

HEALTHCARE PVT LTD

No. : 180967

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>PHC Puthiyappa</u></p> <p>Address <u>Puthiyappa</u> <u>Kochi</u></p> <p>Ph : <u>9946 856243</u></p>	<p>Call Registration Date : <u>14-02-2024</u></p> <p>Caller ID : <u>96068</u></p> <p>Date of Visit : <u>15-02-2024</u></p> <p>Asset No. : <u>1192588</u></p> <p>EQPT Name : <u>BP Apparatus</u></p> <p>Manufacture <u>Lifecare</u> Model : <u>NA</u></p> <p>S. No. <u>NA</u> Dept. <u>Sub Centre</u></p>
---	--

Service Classification : Breakdown Call PMS Calibration Cust.Training

Problem Identified : Machine not getting on.

Action Taken : Checked the machine and found that display and main board are defective, need to replace those spares for further checking working condition of the equipment, enquired OEM for spares.

Completed Date : 15/2/24 Time : 2:00 pm Spare Required

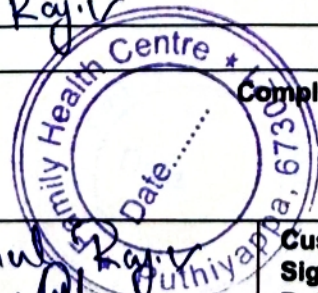
Spare Replaced Requested

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

Cyrix Engineer	Date	Start Time	End Time
<u>Athul Rajiv</u>	<u>15/2/24</u>	<u>12:00 pm</u>	<u>2:00 pm</u>

Customer Remark Completed Pending

<p>Service Engineer Name : <u>Athul Rajiv</u></p> <p>Signature : <u>[Signature]</u></p> <p>Date : <u>15/2/24</u></p> <p>Contact Number : <u>9072522059</u></p>	<p>Customer Name : <u>DR. Neethan</u></p> <p>Signature : <u>[Signature]</u></p> <p>Date : <u>15/2/24</u></p> <p>Contact Number : <u>9946856243</u></p> <p>Designation : <u>Surgeon</u></p> <p>Hospital Seal : <u>[Seal]</u></p>
--	---




DR. Neethan
MEDICAL OFFICER
FAMILY HEALTH CENTRE
PUTHIYAPPA
Surgeon

**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	KOZHIKODE
2	Name of Hospital	PHC PUTHIYAPPA
3	Name of Equipment with Make, Model and Serial Number	Equipment : Digital BP Apparatus Make : Lifecare Model : NA SN : NA
4	Equipment ID & Barcode	96068 & 1142588
5	Date of purchase / Year of manufacture /Installation Date	10- 10- 2019
6	Warranty details (Yes/No)	No warranty
7	*AMC/ CAMC Period agreed at the time of purchase	No AMC/CMC
8	Date of breakdown(Date of registration of complaint through email/ Toll free)	14/02/2024(Toll free)
9	Action taken	Checked and found display and main board defective need to replace these spares for further checking working condition of the equipment.enquired OEM for spares
10	Present status of the equipment (Fully damaged / partially damaged)	Fully damaged
11	Recommendations for repair (required service details)	Not recommending for repair
12	Cost of spares (specify parts and cost)	NA

13	Asset Value	2200
14	# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value	NA
15	Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)	Cyrix service report attached
16	Reasons for recommending the equipment as BER	Checked and found display and main board defective need to replace these spares for further checking and working condition of the equipment. Equipment installed on 10/10/2019 aged up to 4 years 4 months. Enquired OEM for spares. Its a low cost equipment and spares are not available in the market So recommending the equipment for condemnation
17	Name & Signature of CYRIX Authority	ATHUL RAJ V 

*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:

Checked & found display and main board defective & need to replace the same. Machine installed on 10/10/2019. So recommended for condemnation

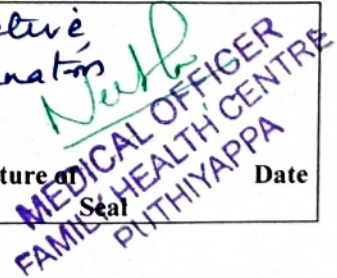
Signature of JE-BM (NHM)
Consultant Bio Medical Engineer
National Health Mission
Kozhikode



Since the machine is defective it may be taken up for condemnation.
DK. Neethu K.A.
Assistant surgeon.

Superintendent / Medical Officer (i/c)

Signature of  Date



STOCK BOOK OF

Name of article Subcentre kit

Date	Invoice No.	From whom received or to whom issued	Receipt	Issued	Balance	Batch No Exp. Date Mfg. Date	Price per Unit/MFG.	Remarks
		Brought Forward						
10-10-75		Received from FHC - Puthiyappa.	1		1			
1		Each kit contains BP Apparatus	1					
		Digital (Chife hand)						
2		Dust Bin (Black)	1					
3		Dust Bin (Red)	1					
4		Dust Bin (Yellow)	1					
5		Examination Table	1					
6		Fetoscope	1					
7		Gloves sterile	1 pack					
8		Glucometer strips	1 pack					
9		Glucometer (om- call-plus)	1					
10		Haemometer test strips	50					
11		Haemometer (True Hb)	1					
12		Hub culture	1					
13		Infantometer	1					
14		kit for rotovirus Residual Chlorine	1					
15		harvet	1 pack					
16		measuring tape	1					
17		Nebulizer (Chife)	1					
18		Salt testing kit	1					
19		Stadiometer	1					
20		Stethoscope	1					
21		Thermometer (Digital)	1					



Handwritten signature
MEDICAL OFFICER
FAMILY HEALTH CENTRE
PUTHIYAPPA



Medical Officer
Family Health Centre
Puthiyappa

Family Health Centre
Date.....
Puthiyappa, 673021