



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



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

CYRIX
HEALTHCARE PVT LTD

No. : 200987

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 : <u>DH</u> | Call Registration Date : <u>07/05/2024</u> |
| Address : <u>Kozhancherry</u> | Caller ID : <u>109944</u> |
| <u>Pethamamthitta</u> | Date of Visit : <u>08/05/2024</u> |
| Ph : <u>9656019987</u> | Asset No. : <u>0311211</u> |
| | EQPT Name : <u>Automatic field Analyser</u> |
| | Manufacture <u>Carl Zeiss</u> Model : <u>7401</u> |
| | S. No. <u>50895</u> Dept. <u>EYE OP</u> |

Service Classification : Breakdown Call PMS Calibration Cust.Training

Problem Identified : Machine not working

Action Taken : checked and found that result variation and multiple issues in machine. Enquired proction for one time service support visit from OEM.

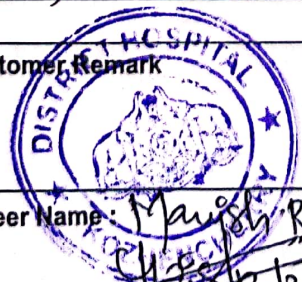
Completed Date : 08/5/24 Time : 3:00pm Spare Required

Spare Replaced Requested

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

| Cyrix Engineer | Date | Start Time | End Time |
|-----------------------|----------------|---------------|---------------|
| <u>Manish R. Nair</u> | <u>08/5/24</u> | <u>1:00pm</u> | <u>3:00pm</u> |

Customer Remark Completed Pending



Service Engineer Name : Manish R. Nair
Signature : [Signature]
Date : 08/5/24
Contact Number : 9365109472

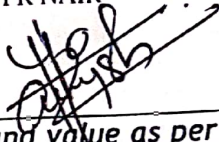
Customer Name : Breele kshmi S
Signature : [Signature]
Date : 08/5/24
Contact Number : 9656019987
Designation : Biomedical Technician
Hospital Seal : District Hospital Kozhancherry

**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 | PATHANAMTHITTA |
| 2 | Name of Hospital | DH KOZHENCHERRY |
| 3 | Name of Equipment with Make, Model and Serial Number | NAME- Automatic Field Analyzer MAKE- Carl Zeiss Meditech Inc. MODEL- 740i SL.NO- 740i-50895 |
| 4 | Equipment ID & Barcode | 109944 & 0311211 |
| 5 | Date of purchase / Year of manufacture /Installation Date | 16-06-2015 |
| 6 | Warranty details (Yes/No) | NO WARRANTY |
| 7 | *AMC/ CAMC Period agreed at the time of purchase | NO AMC/CAMC |
| 8 | Date of breakdown (Date of registration of complaint through email/ Toll free) | 07/05/2024 |
| 9 | Action taken | CHECKED AND FOUND RESULT VARIATION & MULTIPLE ISSUES.SO ENQUIRED QUOTATION FOR ONE TIME SERVICE SUPPORT VISIT FROM OEM. |
| 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 | RS. 12,62,485/- |
| 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 AND END OF LIFE LETTER ATTACHED |
| 16 | Reasons for recommending the equipment as BER | CHECKED AND FOUND RESULT VARIATION AND MULTIPLE ISSUES IN MACHINE.SO ENQUIRED ONE TIME SERVICE SUPPORT FROM OEM.THE OEM DECLARED AS END OF LIFE FOR THIS MACHINE. SO ACCORDING TO THE TENDER CLAUSE 5.3.14.2, THIS MACHINE RECOMMENDED FOR BER. |
| 17 | Name & Signature of CYRIX Authority | MANISH R NAIR  |


*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:
 Recommended for BER as per rule. Physically verified on 18/5/2024.


 Signature of JC BM (NHM)
CONSULTANT (BIOMEDICAL)
 NATIONAL HEALTH MISSION
 PATHANAMTHITTA

Date _____ Seal _____




SUPERINTENDENT
 District Hospital / Medical Officer (i/c)
 Kozhencherry



13/05/2024

Kerala Medical Services Corporation
Thycaud P.O.,
Thiruvananthapuram.
695014

Carl Zeiss India (Bangalore)
Private Limited,
Plot No.3, Jigani Link Road,
Bommasandra Industrial Area,
INDIA
Tel: 91-80-43438000
Fax: 91-80-27833010
Email: info@zeiss.com
Website: www.zeiss.co.in

Sub: Notification of End of Guaranteed Service

Equipment Model: HFA 740i, S/N: 740i-50895

Dear Sir/Madam,

Greetings from ZEISS India.

Inspired by Customer Success, ZEISS always looks for the patient and the customer's benefits by bringing the latest technology in health care. ZEISS takes feedback from the customers about product/application expectations and invests in innovative technologies to provide new medical products with user-friendly and unique features with important clinical relevance. However, as time passes, it warrants us to bring changes in the product hardware and software due to rapid change in technologies / non-availability of certain components in existing products.

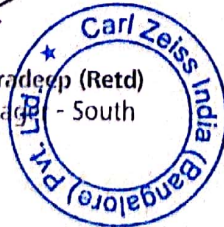
We understand that your institution is equipped with the above-subjected equipments for which ZEISS has announced **End of Service effective from April 2022 onwards**. End of Service means the end of Spares & technical expertise availability.

Alternately, our local sales team would facilitate information regarding the latest range of products under this category for your kind consideration.

Thank you for your continued support and confidence in our products. We value you as a customer and appreciate the continued opportunity to support you in your medical equipment and service needs.

Thanking you,
for Carl Zeiss India (Bangalore) Private Limited

Lt Commander HM Pradeep (Retd)
Regional Service Manager - South



Stock Register of 71
 Name of Articles **AUTOMATED FIELD ANALYZER**
 MODEL - HPA 117401

| Date | No. & Date of Invoice | From whom received or to whom issued | Receipt | Issued | Balance | Initial |
|------------|--|--|---------|--------|---------|---------|
| | | MAKB-CARIZISS MEDITEC B/F S/N NO - 7401 - 57895 | INC | | | |
| 16/02/2015 | INVOICE NO - 0276 DATED: 20/05/2015 | | | | | |
| | SUPPLY ORDER NO - 111/2015/10 dt: 26-03-2015 | | | | | |
| | OR KMSCL T.V.M. | | | | | |
| | | | IND | | IND | 1225701 |
| | | CST @ 3% | | | | 36771 |
| | | 20791 | | | | 1262485 |
| 16/02/2015 | 26 above issue issued | to Dr. KNRUVILLA GEORGE | | IND | | |
| | Control Unit - ophthalmology | | | | | |

(Page no. 69 of Inventory Register)



Signature
 District Hospital Kozhikode

Purchase Order - KL 24 25 100323 - Carl Zeiss India Bangalore Private Limited - 0311211 DH KOZHENCHERRY

5 messages

Anjitha T L <purchasecyrix2@gmail.com> Wed, May 8, 2024 at 5:09 PM
 To: "Sharma, Rekha" <rekha.sharma@zeiss.com>, "Husain Ansari, Mazhar" <mazhar.ansari@zeiss.com>, "Saleem, Mohammed" <mohammed.saleem@zeiss.com>, "Alex, Rani [ext]" <rani.alex.ext@zeiss.com>
 Cc: "Cyrix Purchase Mgr." <purchasemgr@cyrix.in>, Project Manager KLBEMP <pm.bempkl@cyrix.in>, Assistant Manager Purchase <ampurchase@cyrix.in>, BEMP Service 2 <bempservicekl2@gmail.com>, Cyrix Accounts Payable <acc.payable@cyrix.in>, "Siju K Mathai-Asst Manager (Accounts)" <asst.acmanager3@cyrix.in>, Cyrix Payments <paymentcyrix@gmail.com>, Afsal Yunuze <zm1.klbemp@cyrix.in>, Abijith A <abijithacyrix@gmail.com>, Maneesh R Nair <maneeshrcyrix@gmail.com>, Logistics Cyrix <logisticscyrix@gmail.com>, Cyrix Logistics <logistics@cyrix.in>, Kerala GRN <keralagrn@cyrix.in>, sherin <purchasecyrix5@gmail.com>

Dear Sir,

Please find the attached Purchase Order and do the needful. Kindly send a confirmation mail with details of material delivery (Docket details) along with the invoice Copy mentioning our PO No. (For reference) with Seal and Signature.

EDD as per payment term:16/05/24.

For Queries and Clarifications

- 1 Technical : blesseencyrix@gmail.com /afsal
 - 2 Accounts : cyrix@gmail.com /bempservicekl@gmail.com
 - 3 Logistics : acc.payable@cyrix.in
 - 4 PO Clarification : logisticscyrix@gmail.com
 - 5 Delivery Address : smijacyrix@gmail.com / purchasemgr@cyrix.in
- Cyrix Healthcare Pvt Ltd - Godown**
Chithrappuzha Ponjassery Road, Irumpanam
Door No 13 353a, Sy No. 254/7-3
Pin Code - 682309-,Kerala, India

@ Cyrix Accounts

Payment Term: 100% advance

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Thanks & Regards

Anjitha T L
Purchase Assistant

Dear Sir,

Kindly arrange end of life letter

On Wed, May 8, 2024 at 5:09 PM Anjitha T L <purchasecyrix2@gmail.com> wrote:

[Quoted text hidden]

—

Thanks & Regards,

Abijith A

Divisional Incharge

Mob-7593847141

abijithacyrix@gmail.com

[Quoted text hidden]

IZRATH <purchasecyrix5@gmail.com>

Wed, May 15, 2024 at 5:22 PM

To: Abijith A <abijithacyrix@gmail.com>

Cc: Anjitha T L <purchasecyrix2@gmail.com>, Project Manager KLBEMP <pm.bempkl@cyrix.in>, Assistant Manager Purchase <ampurchase@cyrix.in>, BEMP Service 2 <bempservicek12@gmail.com>, Cyrix Payments <paymentcyrix@gmail.com>, Afsal Yunuze <zm1.klbemp@cyrix.in>, Maneesh R Nair <maneeshrcyrix@gmail.com>

Dear Abijith,


Please find the EOL Letter

Thanks & Regards

IZRATH K K

Purchase Department

[Quoted text hidden]

 20240514100148.pdf
62K





M Gmail



HUMPHREY FIELD ANALYZER

MODEL 740i

SN 740-50895



100V-120V~, 50/60Hz, 4.0A 230V~, 50/60Hz, 1.8A



PATENT www.medtec.znss.com/patents
Carl Zeiss Meditec, Inc., 5100 Hacienda Drive, Dublin, CA 94568 USA
Carl Zeiss Meditec AG, Carl-Zeiss-Strasse 51 52, 07743 Jena, Germany

SUPERINTENDENT
Dist. Hospital Kozhenchery

CYRIX BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME (BEMP)
TOLL FREE NO: 1800 - 425-7669
BAR CODE - 0311211

