

BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

CYRIX

No.: 196481

PVTLTD ALTHCA RE ISO 13485: 2012 & ISO 9001-2008 CERTIFIED COMPANY AERB Approved Service Agency 30/64 1 B, Petta Junction, Poonithura, Kochi - 682 038, Kerala Ph: 98472 99500 Website: www.cyrix.com | E-mail: bemp.kl@cyrix.in **Service Report** Call Registration Date : ... Caller ID : Date of Visit: Address/... Asset No. : Manufacture Dy Morepen Model: CN-0] S. No. NA Dept. ORTHO WARD **Cust.Training** Calibration Service Classification : Breakdown Call PMS Date : 11-03-24 Time : 4:00 PM Spare Required L Completed Requested Spare Replaced Part Number PR Number Qty. Description 1. Motor Piston 2. 3. **End Time** Start Time Date Cyrix Engineer 4:00 PI Completed Pending **Customer Remark** Service Engineer Name: Jbin Jumus Signature Signature Date:

Date: Designation: Hospital Seal: Date: Contact Number:



REPAIR OF BIOMEDICAL EQUIPMENTS UNDER BIOMEDICAL EQUIPMENT

Recommendations for Beyond Economic Repair (BER)

PROFORMA

SI.	PROFORM			
No	Particulars	Details		
1	Name of District	Ernakulam		
2	Name of Hospital	THQH NORTH PARAVUR		
3	Name of Equipment with Make, Model and Serial Number	Equipment: NEBULISER Make: DR.MOREPEN Model: CN-01 Sr.no: NA		
4	Equipment ID & Barcode	100381 & 0721445		
5	Date of purchase / Year of manufacture /Installation Date	24-11-2015		
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)	09-03-2024 (TOLL-FREE)		
9	Action taken	Checked the machine and found that motor and piston are defective.		
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.1353
	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 that that motor and piston are defective. The equipment outlived 9+years installed on 24-11-2015. Since the spares are not available in the local market, So recommending the equipment for condemnation.
	17	Name & Signature of CYRIX Authority	JIBIN THOMAS GEORGE

^{*}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:

Signature of JC BM (NHM)

Superintendent / Medical Officer (i/c)

Signature of seal

Date

SUPERINTENDENT
TALUK HEAD QUARTERS HOSPITAL
NORTH PAPAVUR

STOCK BOOK (MEDICINES)

	STOCK BOOK (MEDICINES)									
Name of	Medicine 03	WEBU	LIXER		Name of N	Medicine				
	Receipt	Issue	Balance	Date	Receipt	Issue	8			
Duste	kg /gm /ml	kg/gm/ml	kg /gm./mi.	Comme	kg /gm /ml.	kg./gm./mi	kg			
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Dr. Morepen Compressor Nebulizer

: CN 01 MODEL NO. : 180 VA

: AC-230V/50Hz POWER INPUT

SERIAL NO. : 095230 : 13/12

LOT No. Mode of operation - continuous

IPX0 No AP/APG

DISTRIBUTED LABORATORIES LIMITED

Customer Care: 011-66320248



C € 0123





