

# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME



| RMSCL NATIONAL HEALTH MISSION (SHOW) 45-100-100-100-100-100-100-100-100-100-10  |              |  |                                 |            |  |  |
|---|--------------|--|---------------------------------|------------|--|--|
| SERVICE PROVIDER Tender No. WO. 27/2003 PROVIDER  | DI           | Contract of the Contract of th | 10.:                            |            |  |  |
| WO-3/12021-2022/698   |              | <b>^</b>   | 217                             | 7816       |  |  |
| HEALTHCARE PVTLTD  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.ki@cyrix.in |              |  |                                 |            |  |  |
|   | Call Registr | ration Date : .  | 30-05-                          | 2024       |  |  |
| Health Facility THOH MALLAPPALLY  | Caller ID:   | 114242   | <u> </u>                        |            |  |  |
| Address MALLAPPALLY   | Date of Visi | 1: 31-0  | 5 - 2024                        | £          |  |  |
| PATHANAMTHITTA  | Asset No. :  | 0321   | 671                             |            |  |  |
|   | EQPT Name    | : Nebul  | i sex                           |            |  |  |
| Ph: 9496266263  | Manufacture  | ELKO   | Model :                         | EL-710     |  |  |
|   | S. No. 119   | 126  | ept. Casc                       | 1911ty     |  |  |
| Service Classification : Breakdown Call   | PMS 🗌        | Calibration  | n Cus                           | t.Training |  |  |
| Problem Identified :  |              |  |                                 |            |  |  |
| Not won   | KING         |  |                                 |            |  |  |
| 1.W.J. L.   | *            |  |                                 |            |  |  |
| Action Taken: Checked the   | nachine      | Found -  | the pro                         | oblem      |  |  |
| cultb Compressor motor  | o cuith F    | iston, (   | comproves                       | 3508       |  |  |
| motor and Piston 15 clet  | ective       |  |                                 |            |  |  |
|   |              |  |                                 |            |  |  |
| Completed Date: 3105 24 Time:   | 0:30 Am      |  | Spare                           | e Required |  |  |
| Spare Replaced Requested  |              |  |                                 |            |  |  |
| Description 1.  | Qty.         | Part Nun   | nber                            | PR Number  |  |  |
| 2.  | /            | /  |                                 |            |  |  |
| 3.  | /            |  |                                 |            |  |  |
|   |              |  |                                 |            |  |  |
| Cyrix Engineer  |              | Date   | Start Time                      | End Time   |  |  |
| Cyrix Engineer  |              | Date 31 05 2024  | Start Time                      |            |  |  |
| Cyrix Engineer Abhilash Kumad   | Juk HC       |  | 10:00Ar                         | n 10:30 Am |  |  |
| Cyrix Engineer  | Completed ** |  |                                 | n 10:30 Am |  |  |
| Cyrix Engineer Abhilash Kumad   | Completed    | 31 05 2014   | Pend                            | n 10:30Am  |  |  |
| Cyrix Engineer  Abhilasb Kuman  Customer Remark   | Completed    | 31 05 2024<br>#05P/A   | 10:00Ar                         | n 10:30Am  |  |  |
| Cyrix Engineer  Abhilash Kuman  Customer Remark  Service Engineer Name: Abhilash Kuman  Signature: Than   |              | 31 05 2024   | Pend Nation                     | 10:30AM    |  |  |
| Cyrix Engineer  Abhilash Kuman  Customer Remark  Service Engineer Name: Abhilash Kuman  Signature: Than   |              | 31 05 2024   | Pend  No. Nati                  | ing        |  |  |
| Cyrix Engineer  Abhilash Kuman  Customer Remark  Service Engineer Name: Abhilash Kuman  |              | 31 05 2024  #05P/4  **  **  **  **  **  **  **  **  **   | Pend  Pend  Value  Value  TALUE | ing        |  |  |

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

## Recommendations for Beyond Economic Repair (BER)

## PROFORMA

| SI. | Particulars  | Details  |
|-----|--|--|
| No  |  | PATHANAMTHITTA   |
| 1   | Name of District   | 171111111111111111111111111111111111111  |
| 2   | Name of Hospital   | THQH MALLAPALLY  |
| 3   | Name of Equipment with Make, Model and Serial Number                           | NAME- NEBULISER  MAKE- Elko Surgical and Ailed Products  MODEL- EL-710  SL.NO- 11926 |
| 4   | Equipment ID & Barcode   | 114242 & 0321671   |
| 5   | Date of purchase / Year of manufacture /Installation Date                      | 12/05/2017   |
| 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) | 30/05/2024   |
| 9   | Action taken   | CHECKED AND FOUND THAT COMPRESSOR MOTOR WITH PISTON DEFECTIVE.                       |
| 10  | Present status of the equipment (Fully damaged / partially damaged)            | FULLY DAMAGED  |
| 11  | Recommendations for repair (required service details)                          | NOT RECOMMENDING FOR REPAIR  |
|     |  | NA   |
| 12  | Cost of spares (specify parts and cost)  |  |

| 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<br>the OEM/ Authorized Service Provider/<br>CYRIX (Attached or Not) | CYRIX SERVICE REPORT ATTACHED   |
| 16 | Reasons for recommending the equipment as BER  | CHECK AND FOUND THAT COMPRESSOR MOTOR WITH PISTON DEFECTIVE. EQUIPMENT INSTALLED ON 12/05/2017 AND AGED UPTO 6+ YEARS. QUOTATION NOT SUBMITTED SINCE SPARES ARE NOT AVAILABLE IN THE MARKET.SO RECOMMENDING THE EQUIPMENT FOR RBER. |
| 17 | Name & Signature of CYRIX Authority  | Abhilash Kumar  |

<sup>\*</sup>Not mandatory #Based on the period of life and value as per the BER guidelines

#### \* Attach Photograph

Physically verified on 10/6/2024. Machine is fully damaged.

Stock entry defects not provided from hospitals. Recommended to BER as per rule. Remarks and Recommendations of Junior Consultant (Biomedical) NHM: NATIONAL HEALTH SION PATHANAMTHITTA Signature of JC BM (NHM)



#### ഭരണ ഭാഷ മാത്യഭാഷ

താലൂക്ക് ആസ്ഥാന ആശുപത്രി മല്ലപ്പുള്ളി മല്ലപ്പള്ളി വെസ്റ്റ് പി. ഒ, മല്ലപ്പള്ളി, പിൻ -689 585

ഫോൺ:0469-2683084 ഇമെയിൽ ഐഡി:thospitalmallappally@gmail.com

കത്ത് നം.എ2-1343/2024

താലൂക്ക് ആശുപത്രി, മല്ലപ്പള്ളി

പ്രേഷകൻ സൂപ്രണ്ട് താലൂക്ക് ആശുപത്രി മല്ലപ്പള്ളി

സ്വീകർത്താവ് മാനേജിംഗ് ഡയറക്ടർ കെ.എം.സി.എൽ. ലിമിറ്റഡ് തിരുവനന്തപുരം

സർ

വിഷയം:ഉപയോഗരഹിതമായ ഉപകരണങ്ങൾ ഗർഹണം ചെയ്യുന്നതിനുള്ള അനുമതി -സംബന്ധിച്ച്

സൂചന:സീനിയർ നഴ്സിംഗ് ഓഫീസറുടെ കത്ത് തീയതി 13.05.2024

മല്ലപ്പുള്ളി താലൂക്ക് ആശുപത്രിയിലെ പ്രവർത്തന രഹിതമായ താഴെ പറയുന്ന ഉപകരണ ങ്ങങ്ങളുടെ Stock Details ഈ സ്ഥാപനത്തിൽ ലഭ്യമല്ലാത്തതിനാൽ ഗർഹണം ചെയ്യുന്ന തിനുള്ള അനുമതി നൽകമെന്ന് അഭ്യർത്ഥിക്കുന്നു.

| ക്രമ നം. | ഉപകരണം    | ബാർകോഡ് |
|----------|-----------|---------|
| 1        | Nebuliser | 0321540 |
| 2        | Nebuliser | 0321671 |

മല്ലപ്പള്ളി 20.05.2024



താലൂക്ക് ആശുപത്രി മല്ലപ്പള്ളി

SUPERINTENDENT TALUK H.Q. HOSPITAL · MALLAPPALLY



