



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



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

**CYRIX**  
HEALTHCARE PVT LTD

No. : 182709

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ISO 13485 : 2012 & ISO 9001-2008 CERTIFIED COMPANY | AERB Approved Service Agency

**Service Report** 30/64 Y B, Potta Junction, Poonithura, Kochi - 682 038, Kerala  
Ph : 98472 99500 Website : www.cyrilx.com | E-mail : bemp.kt@cyrilx.in

Health Facility : <u>PHC Kadavanpally</u>	Call Registration Date : <u>24/05/24</u>
Address : <u>Kadavanpally</u>	Caller ID : <u>112785</u>
<u>Thiruvananthapuram, Kerala</u>	Date of Visit : <u>30/05/24</u>
Ph : <u>98472 99500</u>	Asset No. : <u>0143046</u>
	EQPT Name : <u>Nebulizer</u>
	Manufacture : <u>Accusure</u> Model : <u>ASXL</u>
	S. No. : <u>N/A</u> Dept. : <u>OP</u>

Service Classification : Breakdown Call  PMS  Calibration  Cust. Training

Problem Identified : Checked the machine and found pump not working

Action Taken : Found that the pump and motor shaft need to be replaced. Checked the machine and found the pump not working. Need to replace motor and pump by checking the higher working position of the machine.

Completed  Date : 30/05/24 Time : 03:00pm Spare Required

Spare Replaced  Requested

Description	Qty.	Part Number	PR Number
1.			
2. <u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
3.			

Cyrilx Engineer	Date	Start Time	End Time
<u>Mohammed Sajid M</u>	<u>30/05/24</u>	<u>02:30pm</u>	<u>03:00pm</u>

Customer Remark: \_\_\_\_\_ Completed  Pending Form

Service Engineer Name : <u>Mohammed Sajid M</u>	Customer Name : <u>Meharaj</u>
Signature : <u>[Signature]</u>	Signature : <u>[Signature]</u>
Date : <u>30/05/24</u>	Date : <u>30/05/24</u>
Contact Number : <u>7993499127</u>	Contact Number : <u>99472 99500</u>
	Designation : <u>Nursing Officer</u>
	Hospital Seal : <u>BABY HEALTH CENTRE</u>

*Ushu 3*  
**DR. DIVYA CHANDRADAS**  
ASSISTANT SURGEON  
MBBS, MSc Cancer Therapy (UK)  
Registration: 40236  
FAMILY HEALTH CENTRE  
Kadavanpally, Thiruvananthapuram-695 029

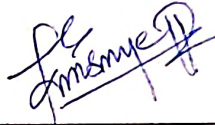
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**REPAIR OF BIOMEDICAL EQUIPMENTS UNDER BIOMEDICAL EQUIPMENT  
MAINTENANCE PROGRAM (BEMP)**

**Recommendations for Beyond Economic Repair (BER)**

**PROFORMA**

Sl. No	Particulars	Details
1	Name of District	THIRUVANANTHAPURAM
2	Name of Hospital	PHC KADAKAMPALLY
3	Name of Equipment with Make, Model and Serial Number	Equipment Name : NEBULIZER Manufacturer : ACCUSURE Model : ASML Sl: NA
4	Equipment ID/ Barcode	112985 / 0143046
5	Date of purchase/ Year of manufacture/Installation Date	28/04/2018
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)	24/05/2024(Toll free)
9	Action taken	Checked and found Nebulizer motor and piston damage. Need to replace these spares for further checking and working condition of the equipment.
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)	Not available

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 RBER	Checked and found nebulizer motor with piston defective. The equipment was installed on 28/04/2018 and covered upto 6+years. Quotation not submitted since the spares are not available in the market., So Recommending the equipment for condemnation.
17	Name & Signature of CYRIX Authority	Kasyep PV 

\*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:

Piston and Motor defective. So as per tender conditions, it can be RBER.

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

  
22.06.2024  
Signature of JC BM (NHM)

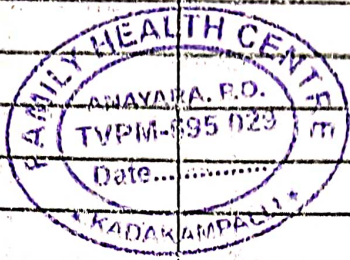
Date:



*For MOK*  
*Devganga Chandra*  
DI. DIVYA CHANDRADAS  
ASSISTANT SURGEON  
MBBS, MSc Cancer therapy (UK)  
TCMC Registration: 40236  
MEDICAL OFFICER  
FAMILY HEALTH CENTRE  
Signature of *Devganga Chandra*  
Kadakampalli, Anayara P.O.,  
Thiruvananthapuram-695 029  
Superintendent/Medical Officer (i/c)

# NEBULIZER

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Date	Opening balance	Received	Total (accumulated)	Issued	Balance	Remarks
28/4/18		From pharmacist	1 (Etigalens)	1	Nil	<u>Se</u>
						
Vistasy <u>Divya Chandradas</u>						
DR. DIVYA CHANDRADAS ASSISTANT SURGEON MBBS, MSc Cancer Therapy (UK) TCMC Registration: 40236 MEDICAL OFFICER FAMILY HEALTH CENTRE Kadakampalli, Anayara P.O., Thiruvananthapuram-595 029						

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# AccuSure<sup>ML</sup> Piston Nebulizer

Model : ASML  
Input : 230V / 50Hz  
Current : 0.8A



Microgene Diagnostic Systems Pvt. Ltd.  
E-mail : contact@microgenediagnostic.com

**CYRIX** BIOMEDICAL EQUIPMENT MAINTENANCE  
PROGRAMME (BEMP)

TOLL FREE NO: 1800 - 425-7669

BAR CODE - (8004-890615225)  
0143046

**CYRIX**

FMCKP27  
NEBULIZER  
0143046  
DATE: 01-07-24  
01-07-24

DR. ANAYA CHANDRADAS  
ASSISTANT SURGEON  
MBBS, MCh Cancer Therapy (UK)  
TCMC Registration: 40236  
FAMILY MEDICAL OFFICE  
FAMILY HEALTH CENTRE  
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Thiruvananthapuram - 695 029



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