



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



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

**CYRIX**  
HEALTHCARE PVT LTD

No. : 223877

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 ..... Phc	Call Registration Date : 21/06/2024
Address ..... Edava	Caller ID : 118475
..... Thiruvananthapuram	Date of Visit : 20/07/2024
Ph : 9495701455	Asset No. : 0141767
	EQPT Name : Pharmacy Refrigerator
	Manufacture Godrej Model : Coldgold
	S. No. NA Dept. OP

Service Classification : Breakdown Call  PMS  Calibration  Cust.Training

Problem Identified : ..... Not working

Action Taken : Checked and found compressor and evaporator defective. Need to replace these spares for further checking and working condition of the equipment. Enquired spares with vendor

Completed  Date : 20/7/24 Time : 12pm Spare Required

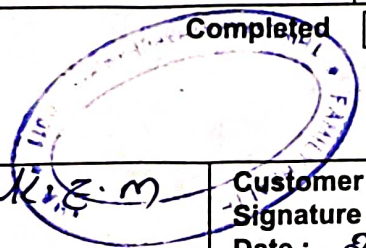
Spare Replaced  Requested

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

Cyrix Engineer	Date	Start Time	End Time
Deepak G.M	20/7/24	11:30	12pm

Customer Remark ..... Completed  Pending

Service Engineer Name : Deepak G.M	Customer Name : Sajavale
Signature : <i>[Signature]</i>	Signature : <i>[Signature]</i>
Date : 20/07/2024	Date : 20/07/24
Contact Number : 7902881038	Contact Number : <i>[Blank]</i>
	Designation : Nursing Officer
	Hospital Seal : 9495701455



*hann*  
20/7/2024  
Medical Officer in-Charge  
Family Health Centre  
Fuava


**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 EDAVA
3	Name of Equipment with Make, Model and Serial Number	Equipment Name : Pharmacy refrigerator Make : GODREJ Model : COLD GOLD Serial No : NA
4	Equipment ID/ Barcode	118475/0141767
5	Date of purchase/Year of manufacture / installation date.	01/04/2009
6	Warranty details (Yes/No)	No Warranty
7	*AMC/ CAMC Period agreed at the time of purchase	No CAMC/AMC
8	Date of breakdown (Date of registration of complaint through email/ Toll free)	21/06/2024
9	Action taken	Checked and found Compressor and Evaporator defective. Need to replace these for further checking and working condition of the equipment. Enquired spares with vendor.
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)	Compressor - 3000/- Evaporator - 2000/- Service and gas charge- 2500/-  Total - 7500/-



13	Asset Value	8444.4/-
14	# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value	88.8%
15	Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)	Cyrix service report and Quotation from vendor attached
16	Reasons for recommending the equipment as BER	Checked and found Compressor and Evaporator in defective condition. The equipment installed on 01/04/2009 and covered upto 15+ years. As per the tender clause 5.3.14.1 both criteria met. So we recommend the unit for condemnation.
17	Name & Signature of CYRIX Authority	DEEPAK EM 

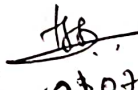
\*Not mandatory

#Based on the period of life and value as per the BER guidelines

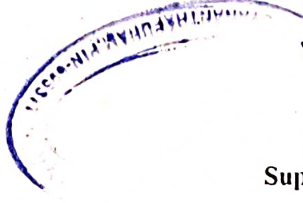
\* Attach Photograph


Remarks and Recommendations of Junior Consultant (Biomedical) NHM:

Compressor and evaporator defective.  
Machine also had covered 15+ years.  
As per tender conditions, BER.

  
MANEESHA MOHAN M.R.  
Junior Consultant (Biomedical)  
National Health Mission  
Thiruvananthapuram  
Signature of JC BM (NHM)  
19/07/2024

Date: 20/07/24



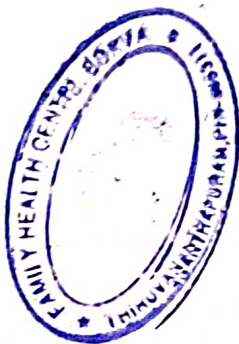
  
Signature of Medical Officer in-Charge  
Family Health Centre

Signature of Superintendent/Medical Officer (i/c)  
F&C

### STOCK BOOK OF MEDICINES

Name Of article: 24.700 Cylinder Refrigerated 1lb Litter

Date	Receipt	Issue	Balance	Date of Expiry	Price Rs. Ps	Name of the Firm and Date of supply	Remarks
1-1-19	Balance	Bld	From old reg	13	0		① 1 Nos - Staff Rs 800 Donated to DTC Meals
			NIL (2 Nos)				② 1 Nos - 1 Purchase → Lab - 10 Rs 8444-44
18-12-19	Lf From Eress		Agencul				③ 1 No - main sk
	1	3			18-12-19	From main store	
		3	NIL		Rs 8257-13		
24-2-19	in no: B 2 B / 10089		17-18			From Maxxel	Agencul Kansal 3400 Asdagan Lab Subst val-1A 1P-22
	1	1			17960-94		



*Kanar*  
20/07/24  
 Medical Officer in-Charge  
 Family Health Centre  
 Fdava



**COOLING EXPERTS Service / AMC bill & Report**  
GSTIN : 32CRIPR6918N1Z3

018

Request No: \_\_\_\_\_ Date: 26/06/20 Service  Installation  AMC   
 Appointment date & time: \_\_\_\_\_ Free  Chargeable  Stock Repair   
 Customer name: PHSC EDAVA Product: GODREJ REF.  
 Address: \_\_\_\_\_ Product status: Warranty  Contract  Out of warranty   
 Nearest land mark: \_\_\_\_\_ Model: \_\_\_\_\_ Contact no: \_\_\_\_\_  
 Mobile phone: \_\_\_\_\_ Serial no: \_\_\_\_\_  
 Invoice number: \_\_\_\_\_ Contract validity: \_\_\_\_\_  
 Amount: \_\_\_\_\_

(Name of customer) declare that there are no plumbing pipes, electrical wires or other substances concealed behind install area which might get damaged due to drilling activity required for product installation at my premise. I understand that Cooling Expert representative will take care of my belongings even if in case of any damages occurs due to drilling or installation activity to wall & other bathroom/ kitchen item I will not be entitled / claim against any such damages from cooling experts or representative. I agree and I allow Cooling Expert representative for installation knowing above facts.

Customer must sign & agree before installation, else installation can't be done. Customer Sign & date

Installation Check list	Service checklist	AMC Checklist
Demos and tips for maintenance <input type="checkbox"/>	Concern informed to customer <input type="checkbox"/>	Work done as per AMC CHECK list <input type="checkbox"/>
How to reach CCC - informed <input type="checkbox"/>	Replaced parts shown to customer <input type="checkbox"/>	Replaced parts shown to customer <input type="checkbox"/>
Warranty information installation <input type="checkbox"/>	Tagging done on replaced part <input type="checkbox"/>	Tagging done on replaced part <input type="checkbox"/>
Site cleaned post installation <input type="checkbox"/>	Site cleaned post service <input type="checkbox"/>	Site cleaned post service <input type="checkbox"/>
Accessories discussion if any <input type="checkbox"/>	AMC discussion, if any <input type="checkbox"/>	AMC discussion, if any <input type="checkbox"/>
Cash receipts handled over, if any <input type="checkbox"/>	Parts given to customer, if charged <input type="checkbox"/>	Parts given to customer, if charged <input type="checkbox"/>
	Cash receipts handled over, if any <input type="checkbox"/>	Cash receipts handled over, if any <input type="checkbox"/>

Service details	Customer concern logged at call centre
Cause	
Reason	
Action	

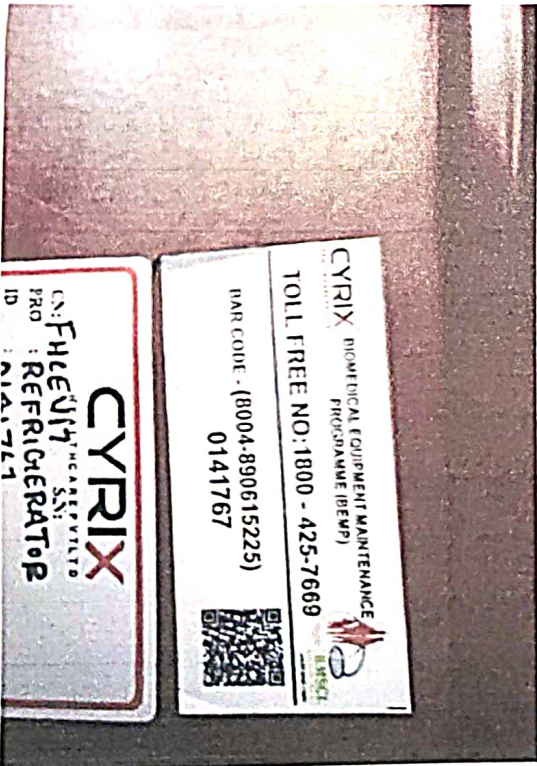
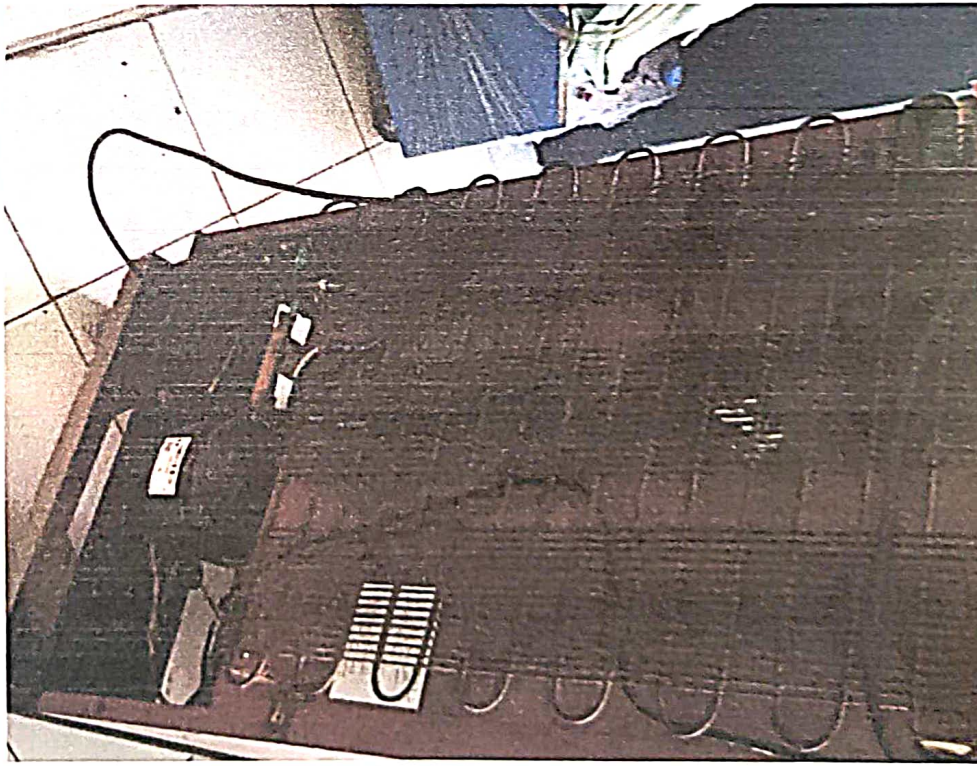
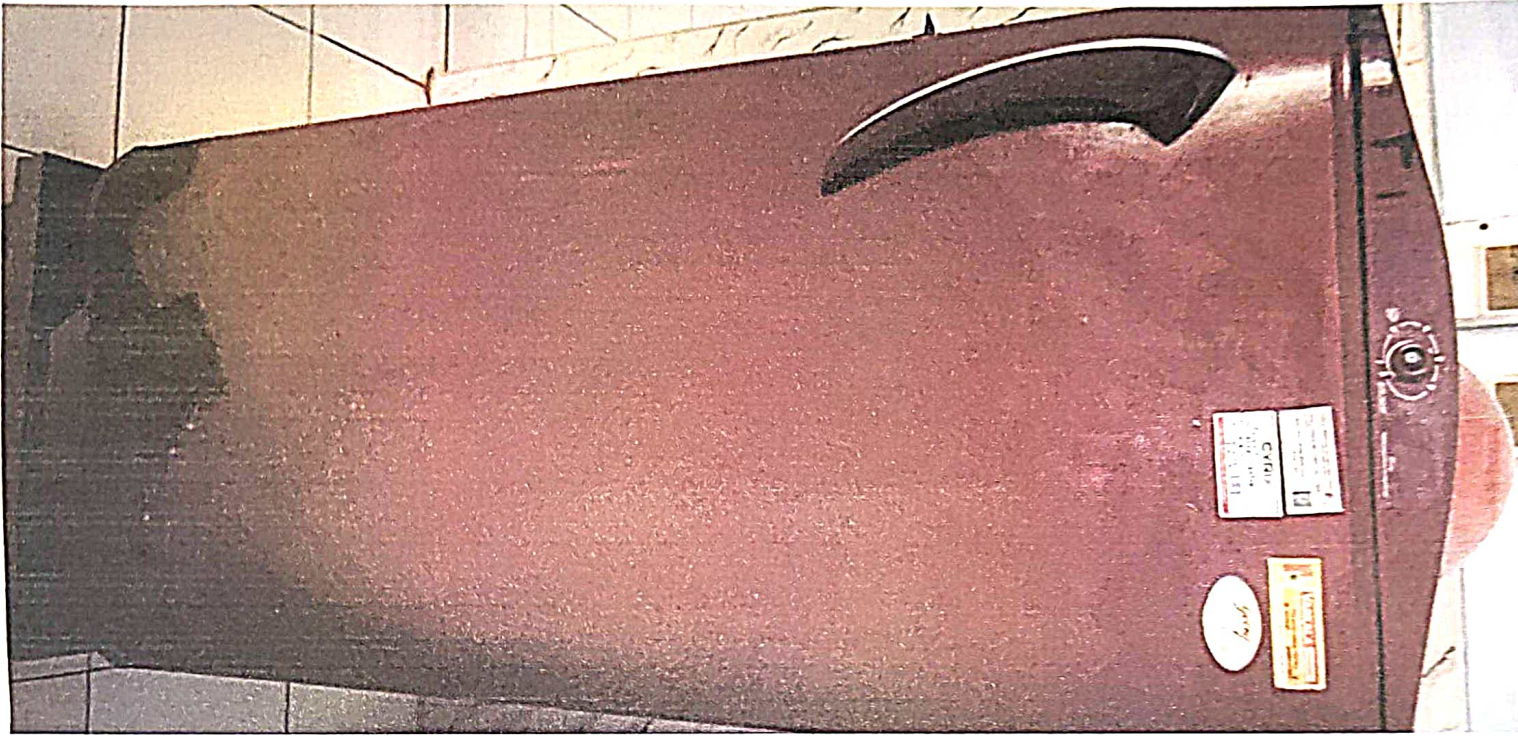
Got call from cooling Experts with in 1hr of registration  Technician or installer took prior appointment   
 I'm satisfied with Quality of repair  I'm satisfied with the technicians attitude

Material used	Qty	Rate	Total	Overall rating for Cooling Experts  ☺ <input checked="" type="checkbox"/>
<u>EVAPORATOR</u>	<u>1</u>	<u>2000</u>	<u>2000</u>	
<u>COMPRESSOR</u>	<u>1</u>	<u>3000</u>	<u>3000</u>	
<u>SERVICE CHARGE</u>		<u>2500</u>		
		<u>7500</u>	<u>7500</u>	

Time in: \_\_\_\_\_ Time Out: \_\_\_\_\_ Cash Receipt No (if any): \_\_\_\_\_ Amount: \_\_\_\_\_  
 Kilometers covered: \_\_\_\_\_ km SEVEN THOUSAND FIVE HUNDRED ONLY  
 SMS Done: \_\_\_\_\_ Part Tagging Done: \_\_\_\_\_  
 I certify that all work done as per procedure & done my best to DELIGHT customer

Technician / Installer's Name: S. ASOKAKUMAR Technician / Installer's Sign:





hem  
 20/09/24  
 Medical Officer in-Charge  
 Family Health Centre  
 Fdava