



BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

CYRIX

HEALTHCARE PVT LTD

No. : 223938

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

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<p>Health Facility CDH</p> <p>Address Pulayanarkotta Thiruvananthapuram</p> <p>Ph : 9895756220</p>	<p>Call Registration Date : 19-06-2024</p> <p>Caller ID : 118069</p> <p>Date of Visit : 26-06-2024</p> <p>Asset No. : 0115329</p> <p>EQPT Name : X-Ray viewer</p> <p>Manufacture Local Model : NA</p> <p>S. No. NA Dept. OP</p>
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Service Classification : Breakdown Call PMS Calibration Cust.Training

Problem Identified : Not getting on.

Action Taken : Checked and found LED Strips, LED driver boards and intensity controlled defective need to replaced these spares for further checking and working condition of the equipment.

Completed Date : 26/06/24 Time : 4:00pm Spare Required

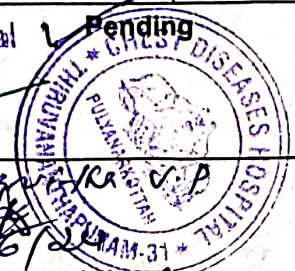
Spare Replaced Requested

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

Cyrux Engineer	Date	Start Time	End Time
Akhi Manohar	26/06/24	3:00 pm	4:00 pm

Customer Remark Completed independent Chest Diseases Hospital Pulayanarkotta

<p>Service Engineer Name : Akhi Manohar</p> <p>Signature : <i>[Signature]</i></p> <p>Date : 26/06/2024</p> <p>Contact Number : 8921568751</p>	<p>Customer Name : Kavitra V.P</p> <p>Signature : <i>[Signature]</i></p> <p>Date : 26/06/24</p> <p>Contact Number : 9447202296</p> <p>Designation : Nsg officer</p> <p>Hospital Seal :</p>
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**REPAIR OF BIOMEDICAL EQUIPMENTS UNDER BIOMEDICAL EQUIPMENT
MAINTENANCE PROGRAM (BEMP)**

Recommendations for Beyond Economic Repair (BER)

545

PROFORMA

Sl. No	Particulars	Details
1	Name of District	THIRUVANANTHAPURAM
2	Name of Hospital	CDH PULAYANARKOTTA
3	Name of Equipment with Make, Model and Serial Number	Equipment Name : XRAY VIEWER Make : Local Model : NA Serial No : NA
4	Equipment ID/ Barcode	118069/0115329
5	Date of purchase/ Year of manufacture/Installation Date	28/09/2017
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)	19/06/2024(Toll free)
9	Action taken	Checked found LED ,LED Driver board and intensity controller defective. 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)	LED Strips(4 Nos)-1694.92/- LED Driver Board-550.85/- Intensity controller-338.98/- Total- 3050/-

13	Asset Value	4913/-
14	* Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value	62%
15	Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)	CYRIX SERVICE REPORT AND VENDOR QUOTATION ATTACHED
16	Reasons for recommending the equipment as BER	Checked and found LED strips , LED driver boards and Intensity controller defective . The equipment was installed on 28/09/2017 and covered upto 6+ years. The repairing cost is 62%, As per the tender clause 5.3.14.1 recommending the unit for condemnation.
17	Name & Signature of CYRIX Authority	AKHIL MANOHAR 

*Not mandatory


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

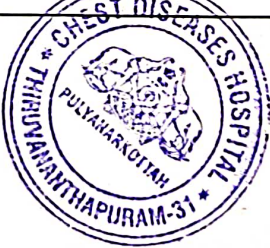
* Attach Photograph

Remarks and Recommendations of Junior Consultant (Biomedical) NHM:

LED Driver boards and Intensity controller defective.
So as per tender conditions, this can be BER.


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


15-07-2024
Signature of JC BM (NHM)



Superintendent
Chest Diseases Hospital
Pulayanarkottah

Date: _____


Signature of
Superintendent/Medical Officer (i/c)

MICRO ELECTRONICS
 ROHINI SHOPPING COMPLEX
 THAKARAPARAMPU, TRIVANDRUM
 Ph. : 0471 2476559, Mob.: 9995759943
 GSTIN : 32AASFM6164H1Z0

QUOTATION

Customer : CYRIX HEALTHCARE PRIVATE LIMITED

Qtn. No. : Q00004

Date : 02/07/2024

Phone : 8593957791

S.Man : SAJU

Cust. GSTIN :

Sl. No	Item Description	HSN/SAC Code	Rate of GST	Unit	Qty	Unit Price	Gross Value	Disc.	Net Value	GST Amt	Total
1	LED STRIP LIGHT	1701	18%	NOS	4	423.73	1694.92	0.00	1694.92	305.09	2000.01
2	SMPS MODULE	8471	18%	NOS	1	550.85	550.85	0.00	550.85	99.15	650.00
3	10K CONTROL	85334090	18%	NOS	2	169.49	338.98	0.00	338.98	61.02	400.00
Total							2584.75	0.00	2584.75	465.26	3050.00

Round Off :

GRAND TOTAL :

3050.00

RUPEES THREE THOUSAND FIFTY ONLY

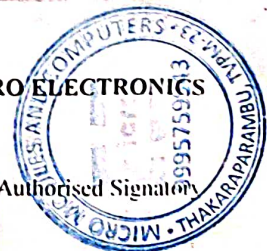
E & OE

Warranty should be claimed from authorised service centre only



Superintendent
 Chest Diseases Hospital
 Pulayanarkottah

For MICRO ELECTRONICS



Authorised Signatory

