

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



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

# CYRIX

No.:

221496

Service Report 30/64 1 B, Petta Jun	ction, Poonithura, Koc		Service Agency			
* PN: 904/2 99300 Websit	te : www.cyrix.com	hi - 682 038, Ke E-mail : bemp.kk	rala @cyrix.in			
	Call Regist	ration Date :	29/06	12004		
Health Facility L.S. Noozanac			9	′ 11		
	Date of Visi	Date of Visit: 0/07/2004  Asset No.: 04/1777  EQPT Name: BP appeartus				
Address Alappuzha						
Kerala						
Ph: 9560889047				Medivision		
			Dept. Physic	1 1		
Service Classification : Breakdown C	Call PMS	Calibratio	on Cust	.Training 🔲		
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## REPAIR OF BIOMEDICAL EQUIPMENTS UNDER BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAM (BEMP)

### Recommendations for Beyond Economic Repair (BER)

### **PROFORMA**

SI. No	Particulars	Details
1	Name of District	ALAPPUZHA
2	Name of Hospital	LS NOORANAD
3	Name of Equipment with Make, Model and Serial Number	BP APPARATUS (MERCRY FREE) MAKE :- MEDICARE MODEL :- MEDIVISION 1018 SN :- 18036700433
4	Equipment ID & Barcode	120089 & 0411777
5	Date of purchase / Year of manufacture /Installation Date	28/10/2019
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)	29/06/2024
9	Action taken	Checked the machine and found that mainboard and battery holder are defective.
10	Present status of the equipment (Fully damaged / partially damaged)	Fully Damaged
11	Recommendations for repair (required service details)	Not Recommended For Repair
12	Cost of spares (specify parts and cost)	NA

13	Asset Value	RS - 2200/-
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 the machine and found that mainboard and battery holder are defective. The equipment was installed on 28/10/2019, aged up to 4 years 8 months. Quotation is not submitted since spares are not available in the market. So we are recommending the equipment for condemnation.
17	Name & Signature of CYRIX Authority -	SAUBAN BIN YASEEN

\*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:

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Consignature of JC BM (NHM)

Date 26/7/24

Superintendent / Medical Officer (i/c)

SUPERINTENDENT Leprosy Sanatorium Nooranad

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