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	ERNAKULAM		
2	Name of Hospital	CHC VENGOOR ERNAKULAM		
3	Name of Equipment with Make, Model and Serial Number	Equipment : Bp Apparatus Make : Na Model : Na SN :Na		
4	Equipment ID & Barcode	117271 & 0732665		
5	Date of purchase / Year of manufacture /Installation Date	10-10-2018		
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)	14-06-2024 (Toll free)		
9	Action taken	Checked and found main board defective. Need to replace main board 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)	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)			
16	Reasons for recommending the equipment as BER	Checked and found main board defective. Machine installed on 10-10-2018 and covered up to 5+ years. Quotation not attached since spares are not available in the market. So recommending the equipment for condemination.		
17	Name & Signature of CYRIX Authority	YeddhuKrishna G S		

^{*}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:

BER Submitted after 30 days. un able to exepain exeposited.

BER Submitted after 30 days. un able to exepain exeposited.

BER Submitted after 30 days. un able to exepain exeposited.

Brown Enguing Click not attached.

Signature of JC BM (NHM)

National Rivers

Date

Seal

Signature of Superintendent / Medical Officer (i/c)

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



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

230801

No. :

HEALTHCARE PVT L 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 Call Registration Date: 14/06/2024 Health Facility Caller ID: 11.72.71 Date of Visit : 17 |06 | 202 a Address CHC Vengagy Asset No.: 0732665 Ernakulan, kerala EQPT Name: Bp opposition Ph: 9656259713 S. No. NA Dept. Main Center Service Classification : Breakdown Call 🖳 PMS 🗌 Calibration **Cust.Training** Problem Identified : Not working Action Taken :..... Checked and replane, Main bound for ferther cheeking and working Date: 17/6/28 Time: 9:32Am. Completed Spare Required Spare Replaced Requested **Description** Qty. **Part Number PR Number** 1. Main bound for Bp apparents 2. 3. **Cyrix Engineer Start Time End Time** Date mshno 6/20 9:200m 9:00Am Completed **Customer Remark Pending** സിക്കിൽ ഓഫിസർ ഇൻചാർട Customer Name : BHJ & Color Colors Service Engineer Name : Healhalka ishha Signature: Signature : Date: Contact Number : 1 6 Date: 17/6/24 Muzina Officer Designation: Contact Number: 80861472 36

Hospital Seal:

Name of Institution

12 STOCK & ISSUE REGISTER

Date	From whom received	G.L. Bill No. & Date	Quantity Received	Quantity Issued	Balance Quantity	Remarks
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10/10/18	B. P Apparatus (Digita	\$676	1		2	
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