



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



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

CYRIX
HEALTHCARE PVT LTD

No. : 230144

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

30/64 1 B, Petta Junction, Poonithura, Kochi - 682 038, Kerala
Ph : 98472 99500 Website : www.cyrix.com | E-mail : hamp.ki@cyrix.in

Service Report

Health Facility : <u>CHC</u>	Call Registration Date : <u>12/7/24</u>
Address : <u>Moolthakunnam</u>	Caller ID : <u>122713</u>
<u>9KM</u>	Date of Visit : <u>15/7/24</u>
Ph : <u>6282465935</u>	Asset No. : <u>0731777</u>
	EQPT Name : <u>BP apparatus</u>
	Manufacture <u>Dr. Muepkin</u> Model : <u>BP-15</u>
	S. No. <u>NA</u> Dept. <u>Observation Room</u>

Service Classification : Breakdown Call PMS Calibration Cust. Training

Problem Identified : Bp apparatus not working

Action Taken : checked the equipment and found display and board defect. Need to replace those spare for further checking and working condition of the equipment.

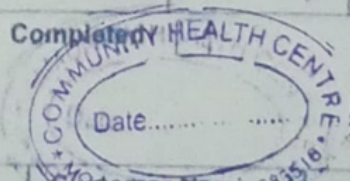
Completed Date : 15/7/24 Time : 1:30pm Spare Required

Spare Replaced Requested

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

Cyrix Engineer	Date	Start Time	End Time
<u>Sebin Sby</u>	<u>15/7/24</u>	<u>12:00pm</u>	<u>1:50pm</u>

Customer Remark : _____
Completed Pending




Service Engineer Name : Sebin Sby
Signature : [Signature]
Date : 15/7/24
Contact Number : 994651738
Customer Name : Muni Alai
Signature : [Signature]
Date : 15/7/24
Contact Number : NA
Designation : NA
Hospital Seal : 6282465935

**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	ERNAKULAM
2	Name of Hospital	CHC MOOTHAKUNNAM ERNAKULAM
3	Name of Equipment with Make, Model and Serial Number	Equipment : Bp Apparatus Make : Dr Morepen Model : Na SN : Na
4	Equipment ID & Barcode	122713 & 0731979
5	Date of purchase / Year of manufacture /Installation Date	28-03-2019
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)	12-07-2024 (Toll free)
9	Action taken	Checked and found display and main board defective. Need to replace main board and display 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

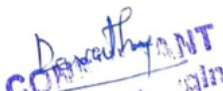
13	Asset Value	Rs. 1750/-
14	# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value	NA
15	Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)	Cyrix service report attached
16	Reasons for recommending the equipment as BER	Checked and found display and main board defective. Machine installed on 28-03-2019 and covered up to 5+ years. Quotation not attached since spares are not available in the market. So recommending the equipment for condemnation.
17	Name & Signature of CYRIX Authority	Sebin. 

*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 not submitted in a single page.
Yearwise BER criteria met.
part enquiry details not attached.
spares not available supported.


D. Ananth
Bio-Medical Engineer
9/1/24
NHM
Makulam
Signature of JC BM (NHM)
Aroyy

Date _____



Seal


 ഹെൽത്ത് സെൻ്ററിലെ ഹെൽത്ത് ഓഫീസർ
 സാമൂഹിക ആരോഗ്യ കേന്ദ്രം മുത്തക്കുന്നം
 Superintendent / Medical Officer (i/c)

Name of Article

BP Apparatus (Mercury)

015

Date	Receipt kg / gm / ml	Issue kg / gm / ml	Balance kg / gm / ml	Prize on RD time	Designation & Sign of Receiver	Sign of Pharmacist	Sign of Hospital Superintendent
6.03.2010	3		3	Rs 195/-			
7.03.2013	1		4		H. J. J.		
20/12/2015	Sphygmomanometers, with the bracelets of two sizes - Child / Adult. (Round Model) (Rd date 8/9/2009) (Tr. in from NRHM KIT)						
	1		5				
19/2/18	Rtd from store (Supply taken from store) (Rs 200/-)						
			6		R		
5/10/18	M.O. a/c che M/cm (Supply taken from store) (Rs 200/-)						
12/9/18	Condensed & written off as per order NO 60/18 M.O a/c che M/cm dated 20/7/2018 [①- 8/9/2009, ③- 6/2/2010] $\frac{Rs 195}{5} \times 1$						
			Balance → 2				
5/9/18	Rtd from the store (Rs 3080.00) [Electronic B.P Apparatus]						
			3				
28/3/19	Rtd from the store (Rs 1750/-)						
			2				
			Balance - 5		R. Rethakaran		
2/10/20	Tr out to Valsaruvampal Road - 3						
			2				
4/10/20	Tr out to Valsaruvampal Road - 2 (Rd 9/3/2013, 11/2/18, 5/9/18) - 2						
4/10/20	Condensed as per order no 328/2021 dt - 4/10/20 3 nos. Rd. 7/3/13 ① 19/2/18 ②						

Medical Officer in Charge
Community Health Centre
Moothakunnam

COMMUNITY HEALTH CENTRE
Date.....
M.OOTHAKUNNAM-685569

Balance - 2
cut 25/3/19

685569

