


**REPAIR OF BIOMEDICAL EQUIPMENTS UNDER BIOMEDICAL EQUIPMENT  
MAINTENANCE PROGRAM (BEMP)**

**Recommendations for Beyond Economic Repair (BER)**

**PROFORMA**

<b>Sl. No</b>	<b>Particulars</b>	<b>Details</b>
1	Name of District	Kollam
2	Name of Hospital	THQH PUNALUR
3	Name of Equipment with Make, Model and Serial Number	NEBULIZER Make : Life care Model : Na SI no: 1409
4	Equipment ID & Barcode	Barcode : 0222056 /-Ticket id : 97997
5	Date of purchase / Year of manufacture /Installation Date	13-01-2021
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)	24-02-2024
9	Action taken	Checked the machine found that the Nebulizer motor and piston are damaged condition, Enquired spares in the market
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. 1353/-
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 the nebulizer motor and piston are defective, enquired for spares in the market but spare are not available. Equipment is installed on 13-01-2021 and aged up to 3 years and 1 months. So we are recommending the equipment for condemnation.
17	Name & Signature of CYRIX Authority	Rinu Reji 

\*Not mandatory #Based on the period of life and value as per the BER guidelines


\* Attach Photograph

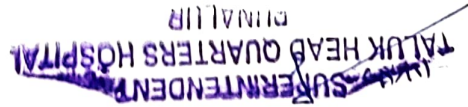
Remarks and Recommendations of Junior Consultant (Biomedical) NHM:

Fully damaged. Recommended for Beyond economic repair

  
 05/03/24  
 ABMO  
 Signature of JC BM (NHM)  
 NHM, KOLLAM

Date

Seal 

  
 Signature of  
 Superintendent /  
 Medical Officer (i/c)



# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

# CYRIX

HEALTHCARE PVT LTD

**No. :** 177090

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

<p>Health Facility: <u>TMH Punalur</u></p> <p>Address: <u>Punalur, Kottam</u> <u>Kerala.</u></p> <p>Ph : <u>7902771407</u></p>	<p>Call Registration Date : <u>24/02/2024</u></p> <p>Caller ID : <u>97997</u></p> <p>Date of Visit : <u>26/02/2024</u></p> <p>Asset No. : <u>0222056</u></p> <p>EQPT Name : <u>Nebulizer</u></p> <p>Manufacture <u>Libecare</u> Model : <u>NA</u></p> <p>S. No. <u>1409</u> Dept. <u>Casualty</u></p>
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**Service Classification :** Breakdown Call  PMS  Calibration  Cust.Training

**Problem Identified :** Nebulizer not getting on

**Action Taken :** Checked the nebulizer and found that the motor defective and piston damaged. Enquired spares in the market

Completed  Date : 26/02/24 Time : 11:00 AM Spare Required

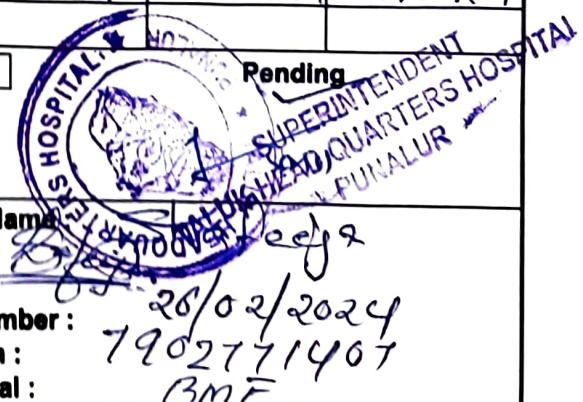
Spare Replaced  Requested

No.	Description	Qty.	Part Number	PR Number
1.				
2.	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>
3.				

Cyrix Engineer <u>Rinu Keji</u>	Date <u>26/02/24</u>	Start Time <u>10:00 AM</u>	End Time <u>11:00 AM</u>
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**Customer Remark** Completed  Pending

<p>Service Engineer Name : <u>Rinu Keji</u></p> <p>Signature : <u>[Signature]</u></p> <p>Date : <u>26/02/24</u></p> <p>Contact Number : <u>9061190042</u></p>	<p>Customer Name : <u>[Signature]</u></p> <p>Signature : <u>[Signature]</u></p> <p>Date : <u>26/02/2024</u></p> <p>Contact Number : <u>7902771407</u></p> <p>Designation : <u>BME</u></p> <p>Hospital Seal : <u>[Seal]</u></p>
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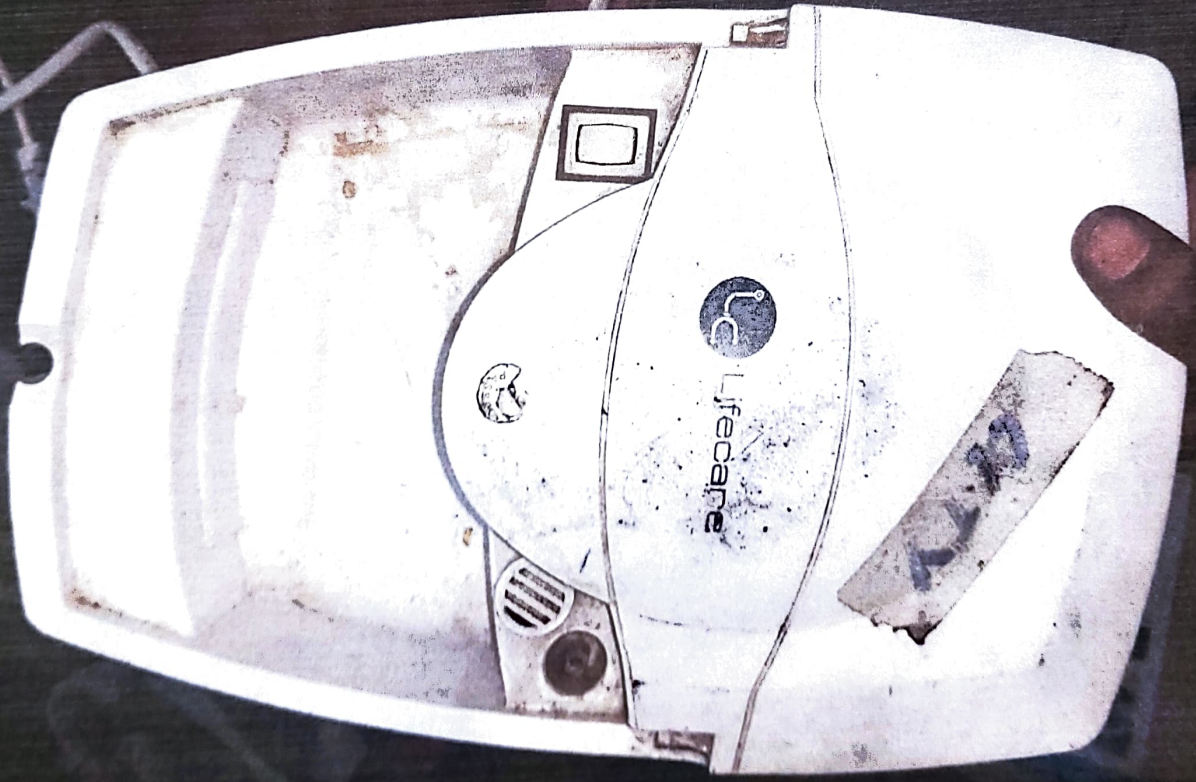
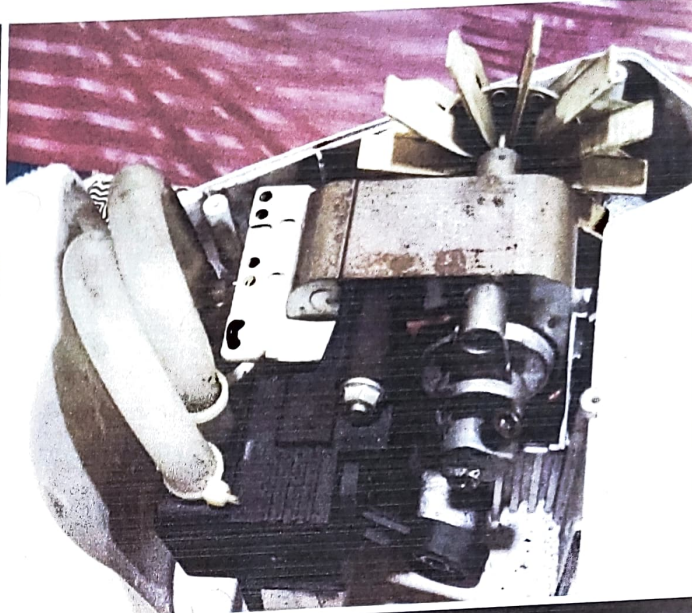


**CYRIX** BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME (BEMP)



TOLL FREE NO: 1300 - 425-7669

BAR CODE - (8004-890615225)  
0222056



TALUK HEAD QUARTERS  
WARD STOCK

*Neblisek*

HOSPITAL, PUNALUR  
REGISTER

98

Sl. No	Date	Name of Article	Quantity	MSR Page No.	Invoice No. & Date	Price	Rate	Installation Date
<i>13/12</i>	<i>2/11/20</i>	<i>Raised Iron Stock</i> <i>(Compl)</i>	<i>1</i>	<i>29</i> <i>Vol</i> <i>11</i>	<i>0435/</i> <i>2-20</i>	<i>83</i>	<i>Iron</i> <i>Supply</i>	<i>11/12</i>

TR In	TR Out	Make, Model & Suppliers Name & Phone No.	TR Out to Unserviceable Book & Date	Life Period	<i>Warranty</i>	Commission Date
		<i>Police Supply</i>			<i>1</i>	