

**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 | THIRUVANANTHAPURAM |
| 2 | Name of Hospital | PHC PUTHUKURICHY |
| 3 | Name of Equipment with Make, Model and Serial Number | Equipment : BP APPARATUS Make: OMRON Model :HEM 7111 SN : NA |
| 4 | Equipment ID & Barcode | 98473 & 0142479 |
| 5 | Date of purchase / Year of manufacture /Installation Date | 15.06.2020 |
| 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) | 27.02.2024 (Toll free) |
| 9 | Action taken | Checked the machine and found the control board and solenoid valve is defective. |
| 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 | |
| 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 that control board and valve defective. Quotation not attached as spare not available in the market. Hence recommending the equipment for condemnation. |
| 17 | Name & Signature of CYRIX Authority | KRISHNA PRAKASH V 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:

Control board and Valve defective.
So RBER.

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

MB
27-03-2024

Signature of JC BM (NHM)

| | | | | |
|------|------|--|--|--|
| | | | | |
| Date | Seal |  | | |
| | | Signature of Superintendent / Medical Officer (i/c) Medical Officer in charge Family Health Centre, Puthukurichy | | |



BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

CYRIX

HEALTHCARE PVT LTD

No. : 190601

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.cyrrix.com | E-mail : bemp.kl@cyrix.in

| | |
|---|---|
| <p>Health Facility : <u>FAC</u></p> <p>Address : <u>Pathukkurichy</u> <u>Thiruvananthapuram</u></p> <p>Ph : <u>8129590357</u></p> | <p>Call Registration Date : <u>27.2.2024</u></p> <p>Caller ID : <u>98473</u></p> <p>Date of Visit : <u>29.2.2024</u></p> <p>Asset No. : <u>0142479</u></p> <p>EQPT Name : <u>BP APPARATUS</u></p> <p>Manufacture : <u>Omron</u> Model : <u>HEM 7111</u></p> <p>S. No. : <u>NA</u> Dept. : <u>OP</u></p> |
|---|---|

Service Classification : Breakdown Call PMS Calibration Cust.Training

Problem Identified : Inflation issue

Action Taken : Checked and found that control board and sensor value is defective. need to replace these spares for further checking and wear & tear condition of the equipment.

Completed Date : 29/2/24 Time : Spare Required

Spare Replaced Requested

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

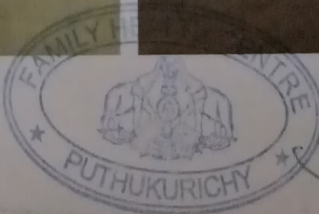
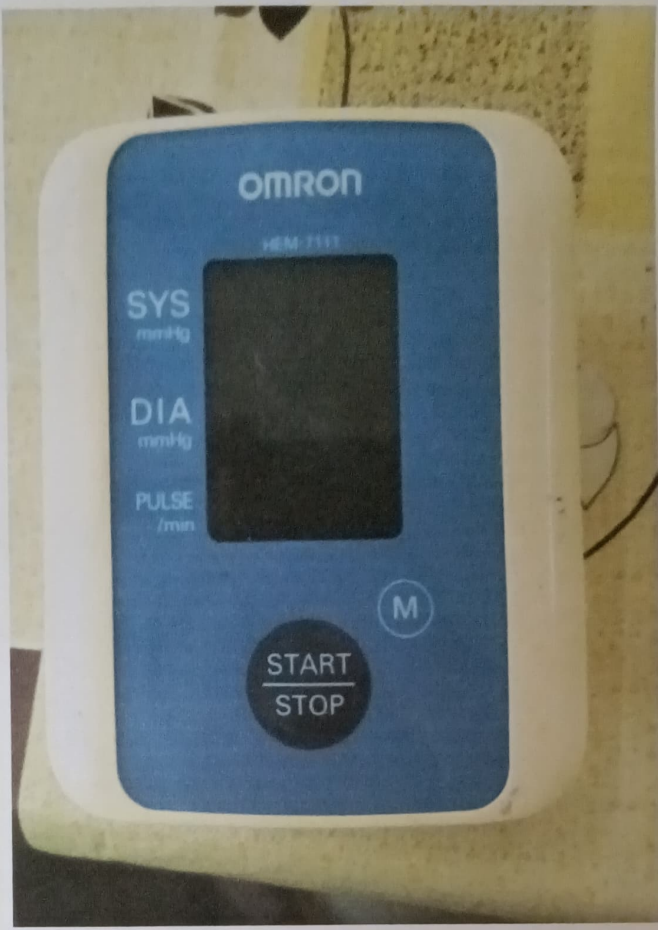
| Cyrux Engineer | Date | Start Time | End Time |
|---------------------------|------------------|------------|----------|
| <u>Krishna Prakash VS</u> | <u>29.2.2024</u> | | |

Customer Remark Completed Pending

Service Engineer Name : Krishna Prakash VS
Signature :
Date : 29/2/2024
Contact Number : 9072522086

Customer Name : FAJER KANAK
Signature :
Date : 29/2/2024
Contact Number : 7994660597
Designation : Nursing Officer
Hospital Seal :





SK
Medical Officer in charge
Family Health Centre, Puthukurichy

B.P. APPARATUS.

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| Date | Receipt | Issue | (Electronic) | Qty | Remarks |
|------------|---------|--|-------------------------------|---------|---|
| 31.3.18 | 26 | from page 30 of stock Reg. VSI 10 | (HEM 7120) | 1 | Rs. 1638/- Issued to staff. <u>W</u> <u>Received.</u> <u>Sundar</u> |
| 11.10.19 | 26 | from stock Reg. page 60. | HEM. 7120 Electronic Body Log | | |
| 7.11.19 | | Issued to SN Substack | Exp. Date 2/22 | Qty No. | Rs. 1809.02 |
| | | Reg Page No. 52 | | | |
| 22/5/2020 | | Invoice no. 873 | Qty 1 | | |
| | | (mercantile Regular - Lidecare) | | | |
| 26/6/2020 | | Issued to staff nurse. | 1 | | 0 |
| | | Substack register page no. 53 | | | <u>S</u> |
| 15/6/2020 | | Invoice no. 525 | Qty 3 | | Subst. Amt. 5408/- |
| | | (Digital - Omron) | | | |
| 23/7/2020 | | Issued to staff Nurse | 1 | | Balance 2. |
| | | and entered in Substack | | | |
| | | Reg. page no. 52 | | | |
| 10/2/21 | | Issued to Staff Nurse | page no. 52 | 1 | <u>W</u> <u>23/7/2020</u> |
| 23/10/21 | | Issued to DCC St. Michael's | | 1 | 0 |
| 11/11/2020 | | Invoice no UA-894/2020 date: 14/08/2020 from DHS | | | |
| | | file need project file | Digital thermometer | Qty 2 | HSN code 90189011 |
| | | B.P. Appa et al. | | | Project DHS 2015-16, NCD project (with regard to SHIP-5) |
| | | | | Qty 2 | 2 |
| 15/11/21 | | Issued to staff nurse | | 1 | |
| | | and entered in Substack | page no. 52 | | <u>W</u> <u>23/7/2020</u> |



Medical Officer in charge
Family Health Centre, Puthukurichy