



# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

No : 1005012

**CYRIX**<sup>(R)</sup>  
HEALTH CARE PVT LTD

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 | Email : bemp.kl@cyrix.in

Health Facility..... <u>T.H.Q.H</u> .....	Call Registration Date : ..... <u>13/7/2024</u> .....
Address..... <u>Cherthala</u> .....	Caller ID : ..... <u>123753</u> .....
..... <u>Alappuzha</u> .....	Date of Visit : ..... <u>19/7/24</u> .....
Ph : ..... <u>9946553692</u> .....	Asset No : ..... <u>0420175</u> .....
	EQPT Name : ..... <u>Pulse Oximeter</u> .....
	Manufacture..... <u>Mastros</u> Model : <u>Lotus-500</u>
	S. No..... <u>100472-65</u> Dept..... <u>Minor O.T.</u>

Service Classification : Breakdown call  PMS  Calibration  Cust. Training

Problem Identified : ..... pulse oximeter is not working properly. no data in Display white screen.....

Action Taken : ..... Regarding the inspection of the equipment found that the main Board, SpO2 probe SpO2 module and Display are defective need to replace these SpO2 and further checking and working condition of Equipment.....

Completed  Date : 19/7/24 Time : 11:00 am Spare Required

Spare Replaced  Requested

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

Cyrix Engineer	Date	Start Time	End Time
<u>Nasut</u>	<u>19/7/24</u>	<u>10:00 am</u>	<u>11:00 am</u>

Customer Remark  Completed  Pending

Not working

Service Engineer Name : Nasut  
Signature: [Signature]  
Date: 19/7/24  
Contact Number: 9526744524



Customer Name : Anila Manmadhan  
Signature: [Signature]  
Date: 19/7/24  
Contact Number: 7994618723  
Designation : NO GRILL  
Hospital Seal



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Ph : 98472 99500 Website : www.cyrix.com | Email : bemp.kl@cyrix.in

Health Facility..... <u>T.H.Q.H</u> ..... Address..... <u>Cherthala</u> ..... <u>Alappuzha</u> ..... Ph:..... <u>9946553692</u> .....	Call Registration Date : ..... <u>18/7/2024</u> ..... Caller ID : ..... <u>123753</u> ..... Date of Visit : ..... <u>19/7/24</u> ..... Asset No : ..... <u>0420175</u> ..... EQPT Name : ..... <u>Pulse Oximeter</u> ..... Manufacture. <u>Mastx.O.S.</u> Model : <u>L.R.T.U.S.-500</u> S.No. <u>100472-68</u> Dept. <u>Minor OT</u>
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Service Classification : Breakdown call  PMS  Calibration  Cust. Training

**Problem Identified :** ..... Pulse oximeter is not working properly no data in Display white screen.....

**Action Taken :** ..... Regarding the inspection of the equipment found that the main board, SpO2 probe, SpO2 module and Display are defective. Enquired SpO2 with the O.E.M......

Completed  Date : 26/7/24 Time : 1:00 PM Spare Required

Spare Replaced  Requested

No.	Description	Qty.	Part Number	PR Number
1.				
2.				
3.				

Cyrix Engineer	Date	Start Time	End Time
<u>Nasut</u>	<u>26/7/24</u>	<u>12:00 PM</u>	<u>1:00 PM</u>

Customer Remark  Completed  Pending

Not working Prd mo Bmd



Service Engineer Name : Nasut  
 Signature: [Signature]  
 Date: 26/7/24  
 Contact Number: 9526744524

Customer Name :  
 Signature:  
 Date:  
 Contact Number:  
 Designation :  
 Hospital Seal

[Signature]  
**SUPERINTENDENT**  
**LUK HEAD QUARTERS HOSPITAL**  
**CERTHALA**

**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	ALAPPUZHA
2	Name of Hospital	THQH CHERTHALA
3	Name of Equipment with Make, Model and Serial Number	PULSE OXIMETER MAKE :- MASTROS MODEL :- LOTUS -500 SN :- 100472-68
4	Equipment ID & Barcode	123753 & 0420175
5	Date of purchase / Year of manufacture /Installation Date	31/01/2016
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)	18/07/2024
9	Action taken	REGARDING THE INSPECTION OF THE EQUIPMENT FOUND THAT THE MAIN BOARD, SPO2 PROBE, SPO2 MODULE AND DISPLAY ARE DEFECTIVE. ENQUIRED SPARE WITH THE OEM.
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 :- 37275 /-
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	REGARDING THE INSPECTION OF THE EQUIPMENT FOUND THAT THE MAIN BOARD, SPO2 PROBE, SPO2 MODULE AND DISPLAY ARE DEFECTIVE. ENQUIRED SPARE WITH THE OEM. THE EQUIPMENT WAS INSTALLED ON 31/01/2016, AGED UP TO 8 + YEARS. THE OEM IS NOT EXISTING, SO WE RECOMMENDING THE EQUIPMENT AS BER AS PER THE TENDER CLAUSE 5.3.14.2
17	Name & Signature of CYRIX Authority	NASEEF K N <i>Naseef</i>

\*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:

*Recommended for BER*

*[Signature]*  
 JYOTHI  
 Consultant (Biomedical Engineering)  
 NHM ALAPPUZHA

Signature of JC BM (NHM)

*For condensation*



Date

Seal

*[Signature]*  
 23/5

Signature of Superintendent / Medical Officer (i/c)

SUPERINTENDENT  
 MALUK HEAD QUARTERS HOSPITAL  
 CHERTHALA

*Bindup [Signature]*





