



# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

# CYRIX

HEALTHCARE PVT LTD

No. : 232360

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.cyrilx.com | E-mail : bomp.kl@cyrilx.in

<p>Health Facility ... <i>DH. Neelumangal</i> .....</p> <p>Address ..... <i>Privandam</i> .....</p> <p style="text-align: center;"><i>Kerala</i></p> <p>Ph : ..... <i>9744383388</i> .....</p>	<p>Call Registration Date : <i>09/08/2024</i> .....</p> <p>Caller ID : ..... <i>128455</i> .....</p> <p>Date of Visit : ..... <i>14/08/2024</i> .....</p> <p>Asset No. : ..... <i>0112118</i> .....</p> <p>EQPT Name : ..... <i>pharmacy Refrigerator</i> .....</p> <p>Manufacture ..... <i>Kelvin</i> Model : <i>na</i> .....</p> <p>S. No. .... <i>na</i> ..... Dept. .... <i>lab ICTC</i> .....</p>
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**Service Classification :** Breakdown Call  PMS  Calibration  Cust.Training

**Problem Identified :** ..... *No cooling, Door issue* .....

**Action Taken :** ..... *checked and found cooling gas exhausted, Door bending defective, body rusted. need to replace all of these. Spares for further checking and working condition of the equipment.* .....

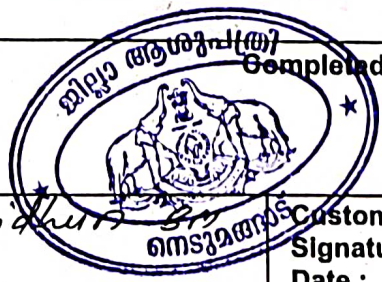
Completed  Date : *14/08/24* Time : *11:00 AM* Spare Required

Spare Replaced  Requested

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

Cyrix Engineer	Date	Start Time	End Time
<i>Midhun . BM</i>	<i>14/08/24</i>	<i>10:00 AM</i>	<i>11:00 AM</i>

**Customer Remark** Completed  Pending



<p>Service Engineer Name : <i>midhun . BM</i></p> <p>Signature : <i>[Signature]</i></p> <p>Date : <i>14/08/2024</i></p> <p>Contact Number : <i>9074167987</i></p>	<p>Customer Name : <i>Neen S</i></p> <p>Signature : <i>[Signature]</i></p> <p>Date : <i>14/8/24</i></p> <p>Contact Number : <i>8547 6316 2</i></p> <p>Designation : <i>2 മുഖ്യവേണ്ടി</i></p> <p>Hospital Seal : <i>ICTC</i></p>
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**PROFORMA**  
**RECOMMENDATION FOR BEYOND ECONOMIC REPAIR (RBER)**  
**BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAM (BEMP)**

Name of Hospital: DH NEDUMANGAD	Name of District: Thiruvananthapuram
Name of Equipment: REFRIGERATOR	Equipment ID & Barcode: 128455 & 0112118
Make: KELVINATOR	Model: POWERCOOL
Serial Number: NA	Warranty details: No Warranty
Date of purchase/ Year of manufacture/ Installation Date: 23/11/2011	Present status of the equipment: Fully Damaged
Date of breakdown: 09/08/2024 (Toll free) (Date of registration of complaint through email/ Toll free)	*AMC/ CAMC Period agreed at the time of purchase: No AMC/CAMC

Action taken: Checked and found that the unit is too old and rusted. Identified cooling gas exhausted, door and door beading defective. Need to replace these spares for further checking and working condition of the equipment.

Recommendations for repair (required service details): Not recommending for repair.

Cost of spares (specify parts and cost): Gas charging, door patch work and beading = 14750/-

# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value: 82.1%	Asset Value: 17960/-
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Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not):  
 Cyrix service report and Vendor quotation attached.

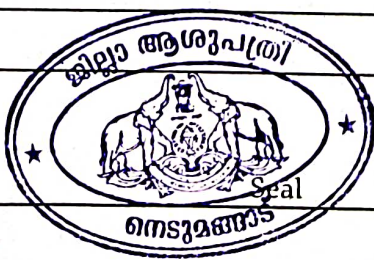
Reasons for recommending the equipment as BER : Checked and found that the unit is too old and rusted. Identified cooling gas exhausted, door and door beading defective. The unit was installed on 23/11/2011 and covered up to 12+ years. The repair cost is 82.1%. As per the tender clause 5.3.14.1 recommending the unit for condemnation.


  
 Name & Signature of CYRIX Authority with date

Remarks of Junior Consultant (Biomedical) NHM:  
*Since the repair cost is high, this can be RBER as per tender condition*

Recommended for BER (Yes/ No):  Yes /  No

Date: 06-09-2024



  
**MANEESHA MOHAN M.R.**  
 Signature of Biomedical  
 Junior Consultant NHM (NHM)  
 National Health Mission  
 Thiruvananthapuram

Date: \_\_\_\_\_ Signature of Superintendent / Medical Officer (i/c) \_\_\_\_\_

  
 ജില്ലാ ആശുപത്രി  
 നെടുമങ്ങാട്



# FREEZ AIR

FREEZ AIR REFRGERATION &AIRCONDITON SERVICE

THIRKKATHIKA,,K P.11/1111

27/08/2024

KULAKUDIYOORKONNAM,NEMOM P.O

THIRUVANATHAPURAM

Email:freezair.tvm@gmail.com

GST/UIN:32BEHPG4104B1ZF

## name Client &Address

CYRIX HEALTHCAREPVTLD,1<sup>ST</sup> FLOOR,30641B

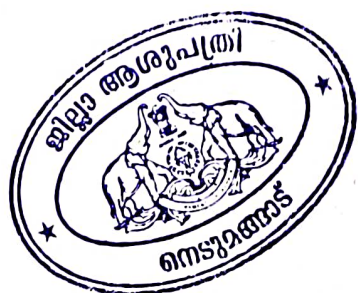
KOCHI DANUSHKODIROAD,POONITHURA,ERNAKULAM

GSTIN/UNI;32AAFCC2499H2ZM

QUOTATION FOR THE DOUBLE DOOR REFRIGERATOR DOOR BEDING,DOOR  
PACHWORK,PANTING,GAS CHARGING

SITE ;DH NEDUMANGAD

S.NO	DESCRIPTION	QTY	PRICE	TOTAL
1	DOUBLE DOOR KELVINATOR REFRIGERATOR DOOR PACHWORK,PAINTING,DOOR BEEDING,GASCHARGING .	1	12500/	12500/
TOTAL			14,750	
			GST	2,250/



*Nes*  
 സുപ്രണ്ട്  
 ജില്ലാ ആശുപത്രി  
 നെടുമങ്ങാട്