


24/08/24  
Jilba

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

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

**PROFORMA**

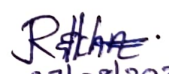
<b>Sl. No</b>	<b>Particulars</b>	<b>Details</b>
1	Name of District	IDUKKI
2	Name of Hospital	PHC Udumpanchola
3	Name of Equipment with Make, Model and Serial Number	Equipment name: B.P Apparatus Make: Bokang Model: na Serial number: na
4	Equipment ID & Barcode	ID: 129480 Barcode: 0640065
5	Date of purchase / Year of manufacture / Installation Date	25-11-2013
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)	14-8-2024 (Toll-free)
9	Action taken	Regarding the inspection of the equipment found that the glass tube and mercury tank were defective, and mercury fully spilled from the tank.
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	1323
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)	The Cyrix service report is attached
16	Reasons for recommending the equipment as BER	Checked and found the glass tube, and mercury tank were defective, and mercury fully spilled from the tank. The equipment was installed on 25/11/2013 and covered up to 10+ years. The quotation was not submitted since mercury is not available on the market. So, recommend for RBER
17	Name & Signature of CYRIX Authority	Jithu Abraham 


\*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:

  
 27/08/2024  
 Consultant Biomedical Engineer  
 National Health Service  
 Arogya  
 Idukki

Signature of JC BM (NHM)



Date \_\_\_\_\_ Seal \_\_\_\_\_

for Mr.   
 Medical Officer  
 P.H.C Udumbanchol  
 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. :** 226873

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>PHC</u></p> <p>Address ..... <u>Udumbanchola</u> <u>Idukki, Kerala.</u></p> <p>Ph : ..... <u>9495426343</u></p>	<p>Call Registration Date : ..... <u>14/8/24</u></p> <p>Caller ID : ..... <u>129480</u></p> <p>Date of Visit : ..... <u>16/8/24</u></p> <p>Asset No. : ..... <u>0640065</u></p> <p>EQPT Name : ..... <u>BP Apponatus - Manual</u></p> <p>Manufacture <u>Bakang</u> Model : <u>na</u></p> <p>S. No. <u>Will</u> Dept. <u>Subcenter</u></p>
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**Service Classification :** Breakdown Call  PMS  Calibration  Cust.Training

**Problem Identified :** ..... Not Working

**Action Taken :** ..... checked the machine. Found that  
Broken glass tube, spillout of mercury, leaked to manuf  
tank. Need to repair and replace the spare for  
further checking working condition of the equipment.

Completed  Date : 16/8/24 Time : 12 pm 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	Date	Start Time	End Time
<u>Vincent Vincent</u>	<u>16/8/24</u>	<u>10 am</u>	<u>12 pm</u>

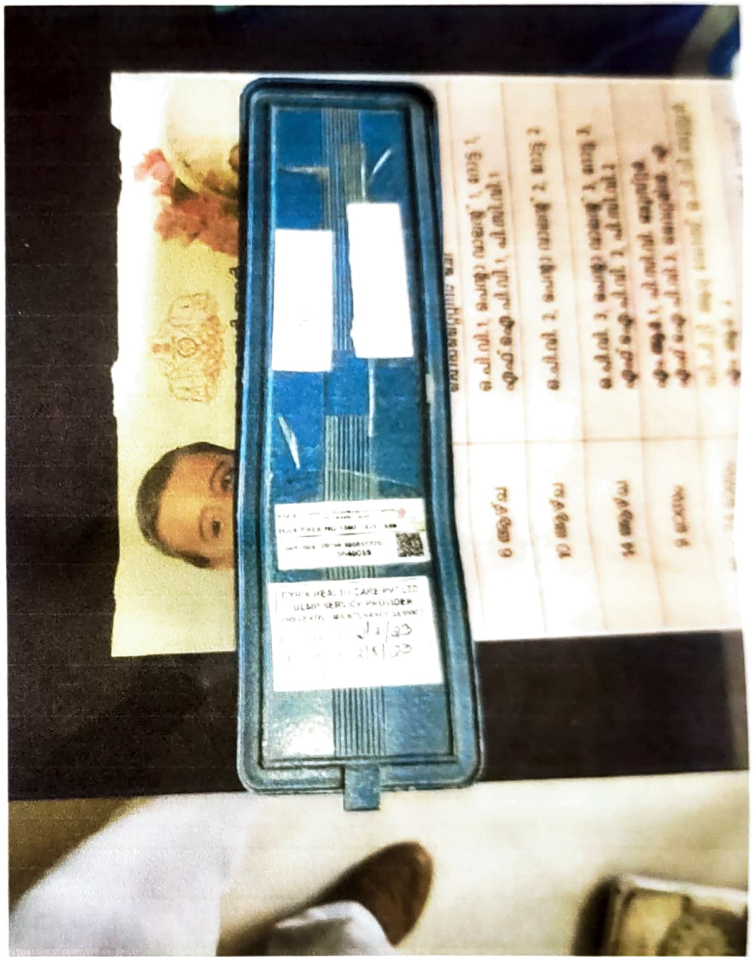
**Customer Remark** Completed  Pending

**Service Engineer Name :** Vincent Vincent  
**Signature :** [Signature]  
**Date :** 16/8/24  
**Contact Number :** 7593847124



**Customer Name :** Min  
**Signature :** [Signature]  
**Date :** 16/8/24  
**Contact Number :** 9495426343  
**Designation :** JPHN Gr I  
**Hospital Seal :**

*for Mr. [Signature]*  
**Medical Officer**  
**PHC Udumbanchola**



*for Mo,*  
  
 Medical Officer  
 PHC Udumbanchola

B.P. Apparatus - Mercury - 2.  
**STOCK REGISTER** M.S. Stock reg. No. 42  
 Health Service Department

Name of Article.....

Date	No. and Date of voucher or invoice	From whom received or to whom issued	Receipt	Issued	Balance after each transaction	Initials of Receiver	Remarks
		Brought forward					
25.11.13		From M/O Phe. (11/13)	2			HKD	
25.11.13		(B.P. apparatus) to Phe. (11/13)		2	0	HKD	31.36 31.34
27.1.14		From M.O. Phe. (11/13)			236.11		16.00 12.907.00
		Steel Nambah	1				
21.3.14		Haemoglobinometer - 1				HKD	
	6th	Order of forceps curved - 2					
		Order of forceps straight - 3					
		Curved Dressing clamp 8x8 - 1					
		Dressing drum (9x9) - 1				HKD	
		Sweeping needle } 5					
		Cutting - } 3					
		Merselle } - 3					
27.3.14		Issued to Phe during exam.					
27.3.14		Haemoglobinometer	1			HKD	Transferred to P. No. 6 541-22
		HCl	2-Bottle			HKD	
		DM - Storage with	2-Bottle			HKD	
Issued to S/O. K. S. S. S.		Haemoglobinometer -		1			
		DM		1-B			
		HCl		1B			
28/3/14		Issued Carried over					



Medical Officer  
 P.H.C. Udumbanchola