



BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



No : 1000999

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

CYRIX[®]

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..... <i>CHC</i>	Call Registration Date : .. <i>7/8/24</i>
Address..... <i>Venpakel</i>	Caller ID : .. <i>128044</i>
..... <i>Tiruvandrum</i>	Date of Visit : .. <i>7/8/24</i>
Ph : .. <i>9539 506472</i>	Asset No : .. <i>0150758</i>
	EQPT Name : .. <i>BP apparatus</i>
	Manufacture .. <i>OMRON</i> .. Model : .. <i>hem 71215</i> ..
	S. No. .. <i>202304000</i> .. Dept. .. <i>FAC</i> ..

Service Classification : Breakdown call PMS Calibration Cust. Training

Problem Identified : .. *not switching on* ..

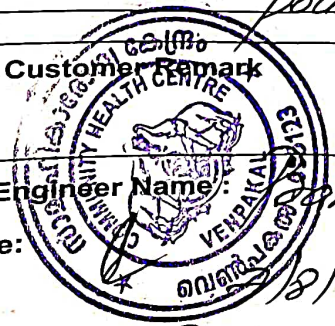
Action Taken : .. *Checked the machine and found that main board and pump defective. Need to replace these spares for further checking and working completion of the equipment.* ..

Completed Date : .. *7/8/24* .. Time : .. *10 am* .. Spare Required

Spare Replaced Requested

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

Cyrix Engineer	Date	Start Time	End Time
<i>Pravin</i>	<i>7/8/24</i>	<i>9.30 am</i>	<i>10 am</i>



Customer Remark Completed Pending

Service Engineer Name : .. *Pravin P.S.* ..

Signature: .. *[Signature]* ..

Date: .. *7/8/24* ..

Contact Number: .. *90245 20852* ..

Customer Name: .. *Anitha S* ..

Signature: .. *[Signature]* ..

Date: .. *7/8/24* ..

Contact Number: .. *8848777094* ..

Designation: .. *OPN CIP* ..

Hospital Seal

PROFORMA

RECOMMENDATION FOR BEYOND ECONOMIC REPAIR (RBER)
BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAM (BEMP)

Name of Hospital: CHC VENPAKAL	Name of District: Thiruvananthapuram
Name of Equipment: Digital BP Apparatus	Equipment ID & Barcode: 128044 & 0150758
Make: Omron	Model: HEM 7121J
Serial Number: NA	Warranty details: No Warranty
Date of purchase/ Year of manufacture/ Installation Date: 19/07/2023	Present status of the equipment: Fully Damaged
Date of breakdown: 07/08/2024 (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 mainboard and pump 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): NA

# Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value: NA	Asset Value: 2200/-
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Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not):
Cyrix service report attached.

Reasons for recommending the equipment as BER: Checked the unit and found that the mainboard and pump defective. Since the spares was not available in the market. Recommending the unit for condemnation.

Kasyep.pv *[Signature]*
Name & Signature of CYRIX Authority with date

Remarks of Junior Consultant (Biomedical) NHM:
Main board and pump defective. So as per tender conditions this can be RBER.

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

Date: *6-09-2024*



[Signature]
MANEISHA MOHAN M.R.
Signature of JE BM (NHM)
Junior Consultant (Biomedical)
National Health Institute
Thiruvananthapuram
Superintendent / Medical Officer (i/c)

Date:

IN HOUSE DRUG BANK (IHDB)

...SATHHES, S.A.T Hospital, Govt. Medical College, Thiruvananthapuram- 695311, Phone :
0471-2528305 .

DLNO 1 : 412/20/2001 Dt: 13-11-2001
DLNO 2 : 413/21/2001 Dt: 13-11-2001

32AABTS158Q1ZZ

Invoice For Payment

Customer Name: CHC VENPAKAL-MEDICAL OFFICER

No: 11180@N/2023/7

Address: CHC VENPAKAL-MEDICAL OFFICER

Date: 19/07/2023 12:50:46PM

Order No: HEALTH GRANT

Phone No:

Prepared By: ARCHANA

SlNo	Product	Mnf	Pack	Batch	Expiry	Mrp	Taxable	Tax	%	Rate	Qty	Amount
1	FOETAL DOPPLER MACHINE COLOUR- POCKET	SURGI	1.00	01	12/2029	5600.00	2946	354	12.00	3300.00	10	33000.00
2	HEIGHT AND WEIGHT MEASURING SCALE	SURGI	1.00	01	12/2029	6000.00	2756	496	18.00	3252.01	11	35772.11
3	GLUCOMETER ON CALL PLUS - STRIP	SURGI	1.00	723*	08/2024	25.00	7	1	12.00	7.50	10000	75000.00
4	GLUCOMETER LANCET	SURGI	1.00	7*01	12/2026	4.00	1	0	12.00	1.00	10000	10000.00
5	TORCH-LED PEN SURGICAL	SURGI	1.00	2*01	12/2029	999.00	182	33	18.00	214.51	10	2145.10
6	BP APPARATUS ELECTRO MONITOR OMRON HE	SURGI	1.00	MRON	12/2029	2345.00	1618	194	12.00	1812.25	10	18122.50
7	GLUCOMETER ON CALL PLUS 100 STRIP + GLUCO	SURGI	1.00	3609	02/2026	1800.00	848	102	12.00	950.00	10	9500.00
8	WOODEN TOUNGE DEPRESSOR	SURGI	1.00	TD01	02/2024	7.00	2	0	18.00	2.20	1000	2200.00

Mrp Amount: 470440.00

Items Total

185739.71

Service Charge

3714.79

NetAmount: 189454.50

Invoice Amount

189455.00

Rupees: One Lakh Eighty Nine Thousand Four Hundred and Fifty Five point Zero

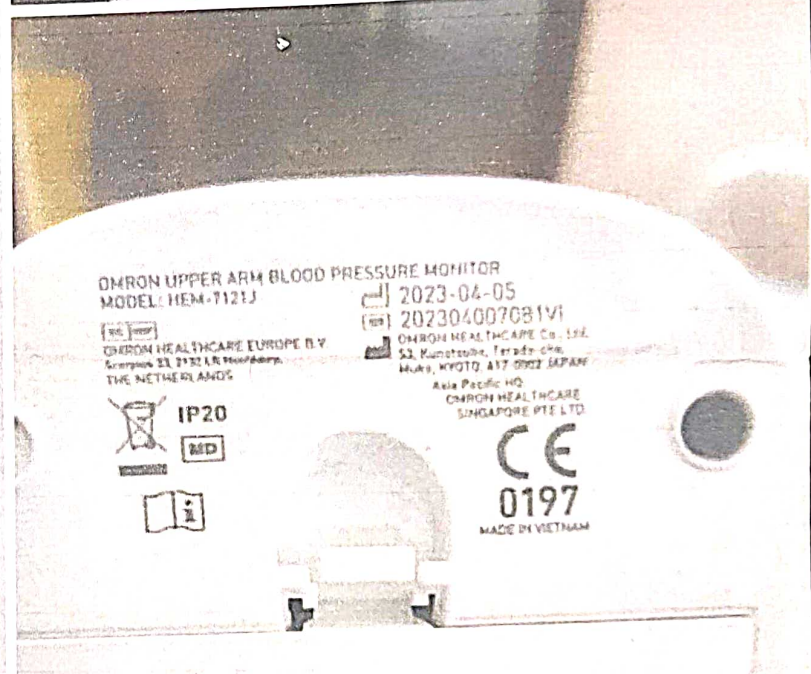
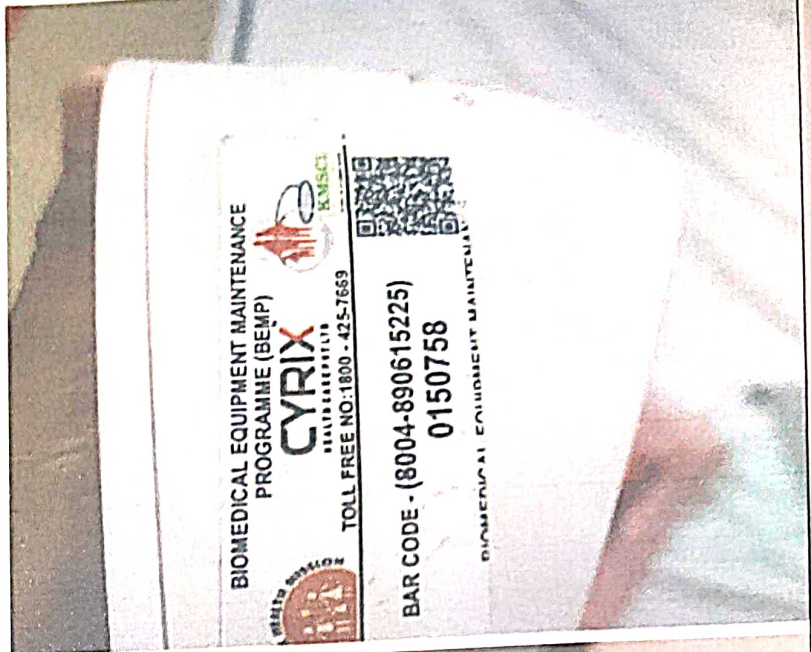
Terms & Conditions Message:

- RATE OF MEDICINES MAY VARY BY CHANGE OF MRP OR BATCHES
- RATE IS INCLUSIVE OF GST
- 100 % PAYMENT IN ADVANCE ALONG WITH SUPPLY ORDER
- FOR DRUG SUPPLY INFORMATION OR DOUBIT - PLEASE CONTACT THROUGH WHATSAPP OR PHONE 790-7063-829 OR ARCHANA - MOB-949-7161-293
- FOR MONEY TRANSFER :- S.B.I, NIRAMONKARA, BRANCH MEDICAL COLLEGE TVPM.
- IFC CODE SBIN0010707 AC NO-30569922130- PAN NO-AAABTS1586Q
- PAYMENT ADDRESS TO MEDICAL OFFICER, IHDB SAT HOSPITAL, TVPM
- FOR ANY URGENT - 944-6283-547 CHIEF PHARMACIST - BIJU A

Chief/Senior Pharmacist



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for Nomchay
മേഡിക്കൽ ഓഫീസർ ഇൻ ചാർജ്ജ്
സമാഹിതാരോഗ്യ കേന്ദ്രം
വെൻപാകൽ
തിരുവനന്തപുരം - 695323



Handwritten signature and text:
 മെഡിക്കൽ ഉപകരണങ്ങൾ
 സാമൂഹികാരോഗ്യ കേന്ദ്രം
 വെമ്പാകൽ - 695123