



# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

## CYRIX

HEALTHCARE PVT LTD

**No. :** 229931

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>Dr. Valappil</u></p> <p>Address <u>Cheruthoni</u><br/><u>Valappil</u></p> <p>Ph : <u>9447466031</u></p> | <p>Call Registration Date : <u>17/8/24</u></p> <p>Caller ID : <u>129932</u></p> <p>Date of Visit : <u>18/8/24</u></p> <p>Asset No. : <u>0610447</u></p> <p>EQPT Name : <u>Fetal doppler</u></p> <p>Manufacture <u>Nielix</u> Model : <u>NA</u></p> <p>S. No. <u>NA</u> Dept. <u>LR</u></p> |
|---|--|

**Service Classification :** Breakdown Call  PMS  Calibration  Cust.Training

**Problem Identified :** Not working

**Action Taken :** Check the Mergline Panel that the Menu  
panel and probe effective. Need to replace the  
Spere for further checking working condition of  
the equipment. Enquired Spere with OEM

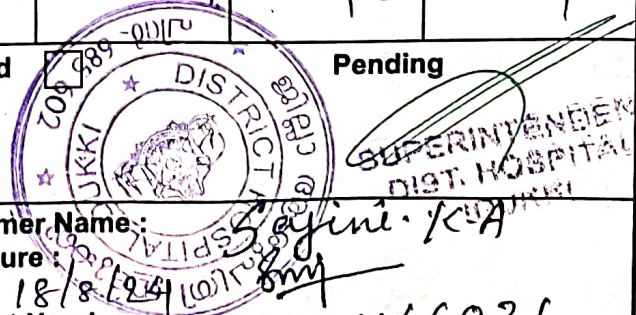
Completed  Date : 18/8/24 Time : 2:00pm Spare Required

Spare Replaced  Requested

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

| Cyrix Engineer | Date           | Start Time    | End Time      |
|----------------|----------------|---------------|---------------|
| <u>Murali</u>  | <u>18/8/24</u> | <u>1:00pm</u> | <u>2:00pm</u> |

**Customer Remark** Completed  Pending



|   |   |
|---|---|
| <p><b>Service Engineer Name :</b> <u>Muralikrishna ID</u></p> <p><b>Signature :</b> <u>[Signature]</u></p> <p><b>Date :</b> <u>18/8/24</u></p> <p><b>Contact Number :</b> <u>9847798098</u></p> | <p><b>Customer Name :</b> <u>Sajini KKA</u></p> <p><b>Signature :</b> <u>[Signature]</u></p> <p><b>Date :</b> <u>18/8/24</u></p> <p><b>Contact Number :</b> <u>9447466031</u></p> <p><b>Designation :</b> <u>Msgr other GRI</u></p> <p><b>Hospital Seal :</b></p> |
|---|---|

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

|   |   |
|---|---|
| Name of Hospital: DH IDUKKI   | Name of District: IDUKKI                                      |
| Name of Equipment: Fetal Doppler  | Equipment ID & Barcode: id:129932<br>barcode:0610447          |
| Make: NIDEK   | Model:230   |
| Serial Number: Na   | Warranty details: No Warranty                                 |
| Date of purchase/<br>Year of manufacture/ Installation Date: 1/12/2017  | Present status of the equipment: Fully damaged                |
| Date of breakdown: 17-08-2024 (toll-free)<br>(Date of registration of complaint through email/ Toll free)   | *AMC/ CAMC Period agreed at the time of purchase: No CAMC/AMC |
| Action taken: Check and find that the mainboard, and probe are defective. Need to be replace this spares for further checking and working condition of the equipment. Enquired spare with OEM |   |

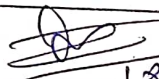
Recommendations for repair (required service details) Not recommending for repair

Cost of spares (specify parts and cost): main board:4500/-/-  
 Probe:1500/-  
 Total:6000/-

|   |                    |
|---|--------------------|
| # Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value: 71% | Asset Value:8400/- |
|---|--------------------|

Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)  
 The Cyrix service report and OEM quotation attached


Reasons for recommending the equipment as BER: Check and find that the mainboard, and probe are defective. The equipment was installed on 1/12/2017 and covered up to 6 + years. The repair cost of the equipment is 71%, and both criteria are met. So recommending the equipment for condemnation as per the tender clause 5.3.14.1.

John Abraham   
 Name & Signature of CYRIX Authority with date  
 30/8/24

Remarks of Junior Consultant (Biomedical) NHM:  
*Repairing cost is 71% of the asset value*  
*total working years 6*

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

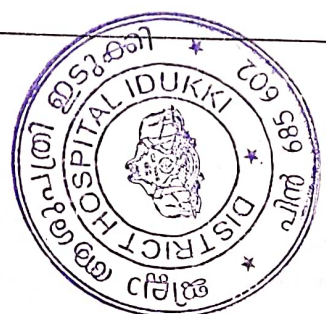
Date:

  
 Consultant Biomedical  
 National Health  
 Arogya  
 Signature of JC BM (NHM)

Date:  
 Medical Officer (i/c)

Seal

Signature of Superintendent /



**SUPERINTENDENT**  
**DIST. HOSPITAL**  
**IDUKKI**

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**REPAIRING QUOTATION FOR NIDEK FETAL DOPPLER**

1 message

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cloud99biotech@gmail.com <cloud99biotech@gmail.com>  
To: JITHUABRAHAMCYRIX@gmail.com

Wed, Aug 28, 2024 at 11:44 AM


Dear Sir,

Please find the attached document below.

Thank you for doing business with us.

Thanks and regards.

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 vyapar\_print\_28\_08\_2024\_11\_38\_44.pdf  
184K



9744473043, 9744473243

cloud99biotech@gmail.com

1 KMC/III-133  
Room No: 22  
CSI Golden Jubilee Campus  
Baka Hill  
Shash Road  
Kottayam

## CLOUD99 BIOTECH

GSTIN: 32AMWPT5633Q1Z0  
State: 32 - Kerala

MSME NO.: UDYAM-KL-07-0030714  
DL NO.: KL/KTM/MD42/2023/000015

## Estimate

Estimate For:

### JITHU ABRAHAM

1ST FLOOR 30/641B CYRIX HEALTHCARE PVT LTD  
KOCHI DHANUSHKODI ROAD POONITHURA

Contact No.: 6238655106

GSTIN Number: 32AAFCC2499H2ZM

State: 32-Kerala

Estimate No.: C99B-QTN-55

Date: 28/08/2024

Place of Supply: 32-Kerala

| Item name  | HSN/ SAC | Quantity | Unit | Price/ Unit | GST            | Amount     |
|--|----------|----------|------|-------------|----------------|------------|
| 1 MAIN BOARD<br>(MAIN BOARD FOR FETAL DOPPLER)         | 8423     | 1        | Nos  | ₹ 4,500.00  | ₹ 0.00 (0%)    | ₹ 4,500.00 |
| 2 PROBE FOR FETAL DOPPLER<br>(PROBE FOR FETAL DOPPLER) | 90189099 | 1        | Nos  | ₹ 1,339.29  | ₹ 160.71 (12%) | ₹ 1,500.00 |
| <b>Total</b>   |          |          |      |             | ₹ 160.71       | ₹ 6,000.00 |

Pay To:

Bank Name : UNION BANK OF INDIA, KOTTAYAM

Bank Account No. : 361201010035646

Bank IFSC code : UBIN0536121

Account holder's name : CLOUD99 BIOTECH

|              |            |
|--------------|------------|
| Sub Total    | ₹ 5,839.29 |
| SGST@0%      | ₹ 0.00     |
| CGST@0%      | ₹ 0.00     |
| SGST@6%      | ₹ 80.36    |
| CGST@6%      | ₹ 80.36    |
| <b>Total</b> | ₹ 6,000.00 |

### Description

DISTRICT HOSPITAL IDUKKI  
EQUIPMENT: FETAL DOPPLER  
MAKE: NIDEK  
MODEL: 230  
SNO: NA

### Estimate Amount In Words

Six Thousand Rupees only

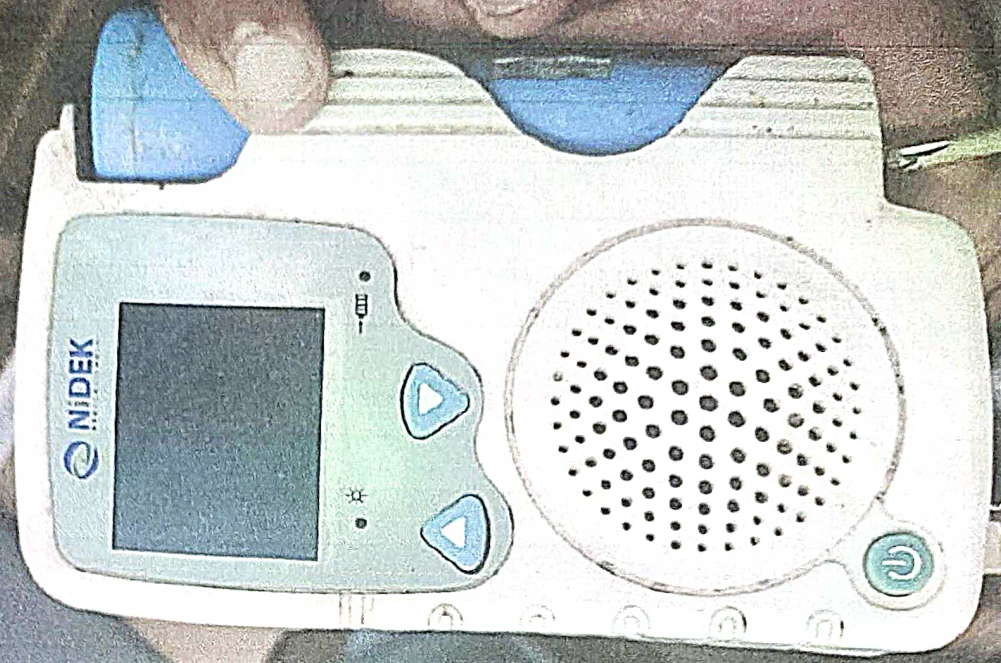
### Terms And Conditions

Thanks for doing business with us!

For: CLOUD99 BIOTECH



Authorized Signatory



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കേരളം മെട്രിക് ഹോസ്പിറ്റൽ  
DISTRICT HOSPITAL  
IDUKKI  
609 939  
939 609

SUPERINTENDENT  
DIST. HOSPITAL  
IDUKKI

|         |   | Rd | Issue | Balance |
|---------|---|----|-------|---------|
| 1/12/17 | Rd from store.<br>P.No - 125 Vol IV.<br>Ns - (16,800) / (2 Nos)<br>(68068106)<br>(68068110) | 2  |       | 2       |
| 7/10/22 | Rd from store.<br>(Fetal Doppler (Perfexa)<br>(8004-890615225) (0611412)                    | 1  |       | 3       |
| 4/12/22 | Pr out to<br>Naulakha<br>Stock Reg Vol II PJ 109  |    |       |         |

Front to Pagan 193  
Double entry  
Wmy.



~~SUPERINTENDENT  
DIST. HOSPITAL  
IDUKKI~~