



# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

No : 1001213

**CYRIX**<sup>®</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.G.H</u>	Call Registration Date : ..... <u>09/10/2024</u>
Address..... <u>Nemom</u>	Caller ID : ..... <u>139769</u>
..... <u>Thiruvananthapuram</u>	Date of Visit : ..... <u>10/10/2024</u>
Ph : ..... <u>9446415708</u>	Asset No : ..... <u>0121734</u>
	EQPT Name : ..... <u>Nebulser</u>
	Manufacture..... <u>Lifecare</u> Model : ..... <u>CV 02MC</u>
	S. No..... <u>N/A</u> ..... Dept..... <u>Casualty</u>

Service Classification : Breakdown call  PMS  Calibration  Cust. Training

Problem Identified : ..... Not enough fumes

Action Taken : ..... checked and found that the unit is not providing enough fumes. Identified that the motor weak and piston damage. Need to replace these spares for further checking and working condition of the equipment.

Completed  Date : ..... 10/10/2024 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>Kasyep p v</u>	<u>10/10/24</u>	<u>1:30pm</u>	<u>2:00pm</u>

Customer Remark Completed  Pending

Service Engineer Name : <u>Kasyep p v</u>	Customer Name : .....
Signature: <u>[Signature]</u>	Signature: .....
Date: <u>10/10/2024</u>	Date: <u>10/10/2024</u>
Contact Number: <u>7593847134</u>	Contact Number: <u>9446415708</u>
	Designation : ..... <u>Senior Nursing Officer</u>
	Hospital Seal

PROFORMA

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

Name of Hospital: THQH NEMOM	Name of District: Thiruvananthapuram
Name of Equipment: NEBULISER	Equipment ID & Barcode: 139769 & 0121734
Make: LIFECARE	Model: CN-02MC
Serial Number : NA	Warranty details : No Warranty
Date of purchase/ Year of manufacture/ Installation Date: 30/12/2021	Present status of the equipment: Fully Damaged
Date of breakdown: 09/10/2024 (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 not providing enough fumes. Identified that the motor weak and piston 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: 1353 /-
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Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not):  
Cyrinx service report attached.

Reasons for recommending the equipment as BER: Checked and found that the motor weak and piston defective. Quotation not submitted since the spares are not available in the market, so recommending the unit for condemnation.

*Karyep.pv*  
Name & Signature of CYRIX Authority with date

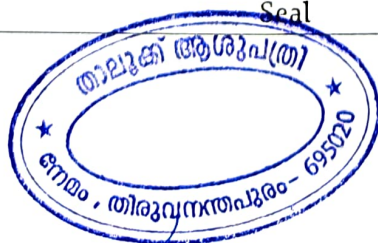
Remarks of Junior Consultant (Biomedical) NHM:  
*Moton weak and piston damaged. So ~~cannot~~ repaired economically.*

Recommended for BER (Yes/ No):	<i>fbb</i>
Date: <i>1.10.2024</i>	

Signature of JC BM (NHM)

*S. SIVAKUMAR*  
Signature of Superintendent / Medical Officer (i/c)

Date:



*സുപ്രണ്ട്*  
താലൂക്ക് ആശുപത്രി  
നേമം, തിരുവനന്തപുരം 20

# NEBULIZER TALUK HOSPITAL, NEMOM

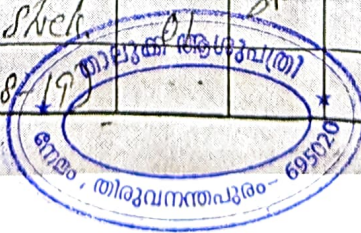
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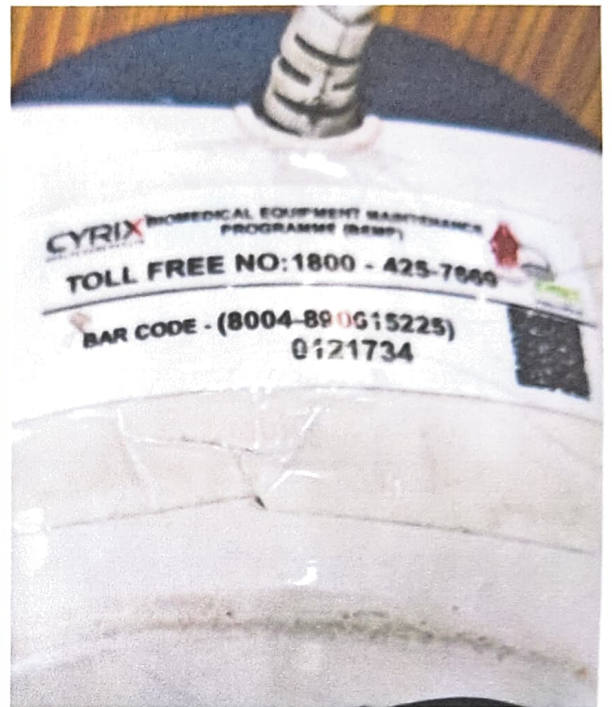
## STOCK REGISTER

Year : 20 - 20

Date	No. and date of voucher or invoice	From whom received or to whom issued	Receipt	Issued	Balance after each transaction	Initials of Receiver
		Manifest is from Book				Ref Date from 11/8/07 - 1
		No. 20, Page No. 19.				
15/3/17		Condemed as per order No A 786/249 Dab 1/7/19		7		13/4/09 - 1 13/11/20 - 1 28/4/14 - 1 21/6/14 - 1 30/10/15 - 1
23/2/2019		Rel from Stru	1		01	15/3/17 - 1 18/2/12 - 28/6/09 - 49-2-14 - 12/7/17 @ 12/E 17/69 535
30/3/19		Rel from Stru	2			31/12/0
		Purchase from LPA-P-157 (Corp. Proj. 2018-19) Balance				3 mfr 1 unscrutable 10A-133 & worky
23-07-2020		Reverd from stock. (Cr. P. - 2018-19)	01			
16/11/2021		Reverd back from (FLC) P.C. 1 (Reverd from stock)			05	2 unscrutable & worky 3 notu
16/11		Reverd from stock.				
30-12-2021		Reverd from stock.	01		06	2 worky 10A-133
11-02-2022		CONDENMED AS PER ORDER no. 22-07-17-03.704, A3.5/2022 / 74N/ dtd. 11.02.2022.				03 04 12 - 015
						04. 02 Sub No Sub No
2.5.0		Reverd from stock (Corp. Project - 2018-19)			03	met r. 10A-133 Sub No End

സൂപ്പർ  
താലൂക്ക് ആശുപത്രി  
തിരുവനന്തപുരം 20





*Dr. Srinivasan M*

**സുപ്രണ്ട്**  
താലൂക്ക് ആശുപത്രി  
നോ, തിരുവനന്തപുരം 20

