

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

Name of Hospital: MCH Guruvayur	Name of District: Thrissur
Name of Equipment: BP apparatus	Equipment ID & Barcode: #141850 - 0844918
Make: S cure	Model: NA
Serial Number: NA	Warranty details: No Warranty
Date of purchase/Year of manufacture/ Installation Date: Ticket master installation date – NA, As per the Stock book installation date – 08-05-2020	Present status of the equipment: Fully damaged
Date of breakdown: 21-10-2024 Date of registration of complaint through email/Toll free): Toll free	*AMC/ CAMC Period agreed at the time of purchase: No AMC/CAMC
Action taken: The machine checked and found display and motor are defective. Need to replace these spares for checking working condition of equipment.	

Recommendations for repair (required service details): Not Recommending

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 report attached.

**Reasons for recommending the equipment as BER:** The machine checked and found display and motor are defective. In ticket master installation date is Nil, As per stock book machine installed on 8-05-2020 and aged up to 4 years and 5 months. Quotation not submitted since the spares are not available in the market. So, we are recommended to RBER

*[Signature]*  
11/11/24

**BIJO T JOY**  
Name & Signature of CYRIX Authority with date

Remarks of Junior Consultant (Biomedical) NHM:  
Space not available.

Recommended for BER (Yes/ No): <span style="color: green;">✓</span> Yes.	 Signature of JC BM (NHM)
Date:	

 Seal	<p style="font-size: 1.2em; color: blue;"><i>[Signature]</i> 4-11-24</p> Signature of Superintendent / Medical Officer (i/c)
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\*Not mandatory #Based on the period of life and value as per the BER guidelines \* Attach Photograph



# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

No : 1006745

# 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

<p>Health Facility..... <u>MCH</u>.....</p> <p>Address..... <u>Chuvannur</u>..... <u>Thiruvananthapuram</u>.....</p> <p>Ph:..... <u>7356276185</u>.....</p>	<p>Call Registration Date : ..... <u>21.10.2024</u>.....</p> <p>Caller ID : ..... <u>14.1850</u>.....</p> <p>Date of Visit : ..... <u>22.10.2024</u>.....</p> <p>Asset No : ..... <u>0844918</u>.....</p> <p>EQPT Name : ..... <u>Bp apparatus</u>.....</p> <p>Manufacture..... <u>Secura</u>..... Model : <u>NA</u>.....</p> <p>S. No..... <u>NA</u>..... Dept..... <u>OP</u>.....</p>
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Service Classification : Breakdown call  PMS  Calibration  Cust. Training

Problem Identified : ..... Not working.....

Action Taken : ..... meter checked and found display and motor are detection need to replace fuse span for further service......

Completed  Date : .. 22.10.24..... Time : .. 10:00..... Spare Required

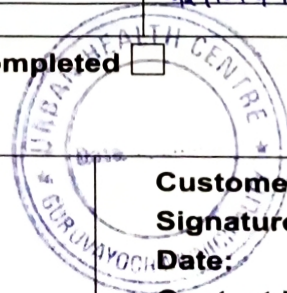
Spare Replaced  Requested

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

Cyrix Engineer	Date	Start Time	End Time
<u>Biyo</u>	<u>22/10/24</u>	<u>9:00am</u>	<u>10:00</u>

Customer Remark  Completed  Pending

<p>Service Engineer Name : <u>Biyo</u></p> <p>Signature: <u>[Signature]</u></p> <p>Date: <u>22/10/24</u></p> <p>Contact Number: <u>8921570010</u></p>	<p>Customer Name : <u>Santhosh Kumar</u></p> <p>Signature: <u>[Signature]</u></p> <p>Date: <u>22/10/24</u></p> <p>Contact Number: <u>7356276185</u></p> <p>Designation : <u>Staff nurse</u></p> <p>Hospital Seal</p>
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Medical Officer In Charge  
Urban Family Health Centre  
[Signature]  
Thiruvananthapuram



8  
**Serial**

# STOCK REGISTER

Name of Articles **BP apparatus**

Cost Rate

DATE	PARTICULARS	V.No of Bill No	RECEIPT		ISSUED		BALANCE
			Quantity	Quantity	Quantity	Quantity	
23/4/20	Received from Stock manager		1				
8/5/20	Recd from stock Digital BP apparatus		1				
16/3/21	Digital BP monitor		1				
4/10/19	BP apparatus manager		1				
8/10/24	Digital BP apparatus		1				

