



**BIOMEDICAL EQUIPMENT
MAINTENANCE PROGRAMME
UNDER
NATIONAL HEALTH MISSION**



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

No : 1019661

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: <u>PHC Ranni Pazhavayal</u> | Call Registration Date : <u>18/10/2024</u> |
| Address: <u>Padhanam, Thilla</u> | Caller ID : <u>141330</u> |
| | Date of Visit : <u>22/10/2024</u> |
| | Asset No : <u>0341759</u> |
| Ph: <u>859390997</u> | EQPT Name : <u>Bp Apparatus</u> |
| | Manufacture: <u>OMRON</u> Model: <u>HEM7120</u> |
| | S. No <u>20170419982411</u> Dept: <u>PP Unit</u> |

Service Classification : Breakdown call PMS Calibration Cust. Training

Problem Identified : E1 error

Action Taken : checked the machine, pump motor complaint
key pad switch complaint

Completed Date : Time : Spare Required

Spare Replaced Requested

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

| Cyrix Engineer | Date | Start Time | End Time |
|----------------|-------------------|----------------|----------------|
| <u>Sumesh</u> | <u>22/10/2024</u> | <u>11:30am</u> | <u>12:10pm</u> |

Customer Remark Completed Pending

Service Engineer Name : Sumesh Michael
Signature: [Signature]
Date: 22/10/2024
Contact Number: 9544367904

Customer Name: RESMI MOL P.S
Signature: [Signature]
Date: 22/10/24
Contact Number: 8593909997
Designation: NURSW OFFICER
Hospital Seal: [Seal]

PROFORMA

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

| | |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Name of Hospital: PHC RANNI PAZHAVANGADI | Name of District: PATHANAMTHITTA |
| Name of Equipment: B P Apparatus | Equipment ID & Barcode: 141330 & 0341759 ✓ |
| Make: Omron | Model: HEM 7120 ✓ |
| Serial Number: 20170419982VGI ✓ | Warranty details: NO WARRANTY |
| Date of purchase/ Year of manufacture/ Installation Date: 13/06/2020 | Present status of the equipment: MACHINE FULLY DAMAGED |
| Date of breakdown: 18/10/2024 (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 Main board and pump motor is faulty.

Recommendations for repair (required service details): NOT RECOMMENDED FOR REPAIR

Cost of spares (specify parts and cost): NOT AVAILABLE

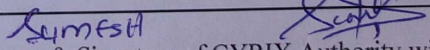
Percentage value of the cost of spares with respect to Cost of Purchase/ Asset Value: NOT AVAILABLE

Asset Value: 2200/-

Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not)

SERVICE REPORTS ATTACHED

Reasons for recommending the equipment as BER: Checked and found that Main board and Pump motor are defective. The machine was aged upto 3yrs and Quotation not submitted since spare parts are not available in market. So, equipment recommended for RBER.


 Name & Signature of CYRIX Authority with date

Remarks of Junior Consultant (Biomedical) NHM:

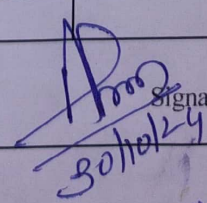
Telephonically verified on 11/11/2024. Recommended for BER as per rule.

Recommended for BER (Yes/ No):

CONSULTANT (BIOMEDICAL)
NATIONAL HEALTH MISSION
 PATHANAMTHITTA (NHM)

Date: 11/11/2024

Date: _____ Seal _____


 Signature of Superintendent / Medical Officer



MEDICAL OFFICER IN-CHARGE
 Primary Health Centre
 Ranni, Pazhavangadi
 MAKKAPUZHA - 689 876

BP APPARATUS (LOAD - CONT)

| DATE | ITEM | RE CDND | INSTR | BY | REMARKS | DATE | ITEM | RE CDND | INSTR | BY | REMARKS |
|------|------|---------|-------|----|---------|------|------|---------|-------|----|---------|
|------|------|---------|-------|----|---------|------|------|---------|-------|----|---------|

| | | | | | | | | | | | |
|---------|--------------------------------------------------------|---|---|--|-----|--|--|--|--|--|--|
| 13/5/20 | Received from Pharmacist (Digital BP apparatus CARRON) | 1 | 1 | | 1st | | | | | | |
|---------|--------------------------------------------------------|---|---|--|-----|--|--|--|--|--|--|

| | | | | | | | | | | | |
|---------|----------------------------------|---|---|--|----|--|--|--|--|--|--|
| 31/3/21 | Received from Pharmacist (15100) | 2 | 3 | | mm | | | | | | |
|---------|----------------------------------|---|---|--|----|--|--|--|--|--|--|

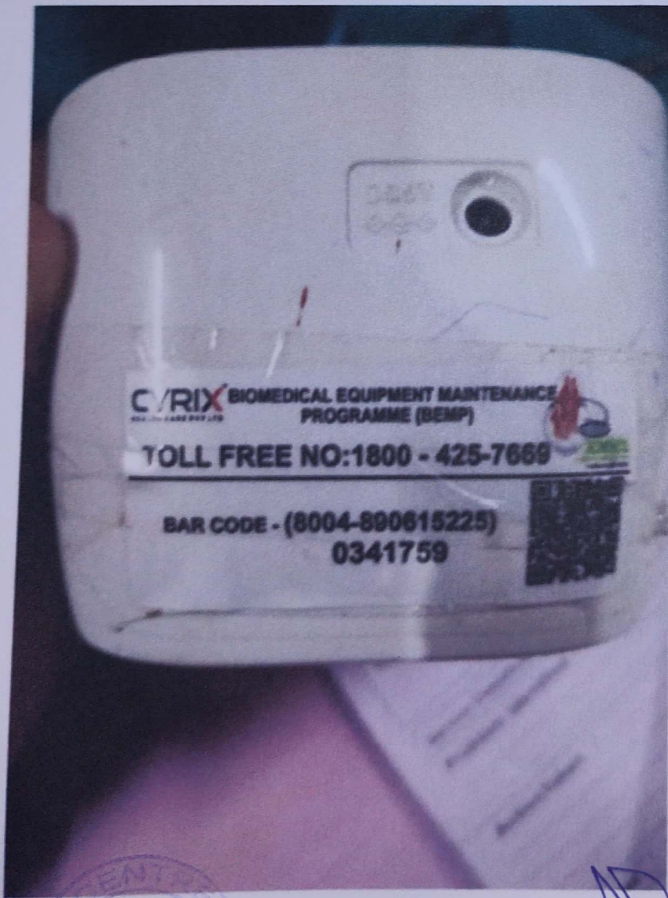
| | | | | | | | | | | | |
|---------|-------------------------|---|---|--|-----|--|--|--|--|--|--|
| 1/12/20 | R/d from Pharmacy store | 1 | 4 | | 1st | | | | | | |
|---------|-------------------------|---|---|--|-----|--|--|--|--|--|--|

Diamond money (Kagalcalp)

Transferred to stock register for equipment
Page No 23



[Signature]
30/10/24
MEDICAL OFFICER IN-CHARGE
Primary Health Centre
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Handwritten signature and date:
30/10/24

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