



# BIOMEDICAL EQUIPMENT MAINTENANCE PROGRAMME UNDER NATIONAL HEALTH MISSION



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

No : 1015457

# 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.cyrinx.com | Email : bemp.kl@cyrix.in

<p>Health Facility..... <u>P.H.C. Kulathoor</u>.....</p> <p>Address..... <u>Kulathoor</u>.....</p> <p>..... <u>Thiruvananthapuram, Kerala</u>.....</p> <p>Ph :..... <u>7012295910</u>.....</p>	<p>Call Registration Date : ..... <u>16/10/24</u>.....</p> <p>Caller ID : ..... <u>9847299500</u>.....</p> <p>Date of Visit : ..... <u>17/10/24</u>.....</p> <p>Asset No : ..... <u>0144926</u>.....</p> <p>EQPT Name : ..... <u>Coloumeter</u>.....</p> <p>Manufacture..... <u>Smek</u>..... Model : <u>NR</u>.....</p> <p>S. No..... <u>NR</u>..... Dept..... <u>Lab</u>.....</p>
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Service Classification : Breakdown call  PMS  Calibration  Cust. Training

Problem Identified : Checked the machine and found photometric cell and main board damaged

Action Taken : Need to replace the photometric cell and main board for checking the further working condition of the machine

Completed  Date : 17/10/24 Time : 09:00 PM Spare Required

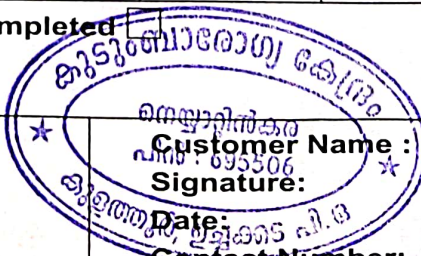
Spare Replaced  Requested

Description	Qty.	Part Number	PR Number
1.			
2. <u>NR</u>	<u>NR</u>	<u>NR</u>	<u>NR</u>
3.			

Cyrix Engineer <u>Ajith George</u>	Date <u>17/10/24</u>	Start Time <u>12:30 PM</u>	End Time <u>01:00 PM</u>
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Customer Remark Completed  Pending

Service Engineer Name : Ajith George  
Signature: Ajith  
Date: 17/10/24  
Contact Number: 7593647111



Customer Name : Reji Helen  
Signature: [Signature]  
Date: 17/10/24  
Contact Number: 7012295910  
Designation: Lab technician

**Medical Officer in Charge**  
**FHC Kulathoor Hospital**  
**Thiruvananthapuram**



PROFORMA

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

648

Name of Hospital: PHC KULATHOOR	Name of District: Thiruvananthapuram
Name of Equipment: COLORIMETER	Equipment ID & Barcode: 140927 & 0144926
Make: SMEK SCIENTIFIC TECH	Model: NA
Serial Number: NA	Warranty details: No Warranty
Date of purchase/ Year of manufacture/ Installation Date: 13/02/2017	Present status of the equipment: Fully Damaged
Date of breakdown: 16/10/2024 (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 getting ON. Identified that the photometric cell and main board complaint. Needs to replace these spares for further checking and working condition of the equipment. Enquired spares with vendor.	
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: 6472/-
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Abstract of Service Report provided by the OEM/ Authorized Service Provider/ CYRIX (Attached or Not):  
Cyrinx service report.

Reasons for recommending the equipment as BER: Checked and found photometric cell and main board complaint. The equipment was installed on 13/02/2017 and covered up to 7+ years. Quotation not submitted since the spares are not available on the market. So recommending the unit for condemnation.

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

Remarks of Junior Consultant (Biomedical) NHM:  
~~Letter for replacement received~~ Main board of colorimeter is defective. Quotation not submitted.  
 It cannot be repaired economically.

MANEESHA MOHAN M.R.  
 Junior Consultant (Biomedical)  
 National Health Mission  
 Thiruvananthapuram  
*[Signature]*  
 Signature of JC BM (NHM)

Recommended for BER (Yes/ No):  
 Date: 1-10-2024



Date: \_\_\_\_\_ Seal \_\_\_\_\_ Signature of Superintendent / Medical Officer (i/c)  
 Medical Officer in Charge  
 FHC Kulathoor Uchakkada  
 Thiruvananthapuram




**KERALA MEDICAL SERVICES CORPORATION LTD**  
**INSTALLATION CERTIFICATE**

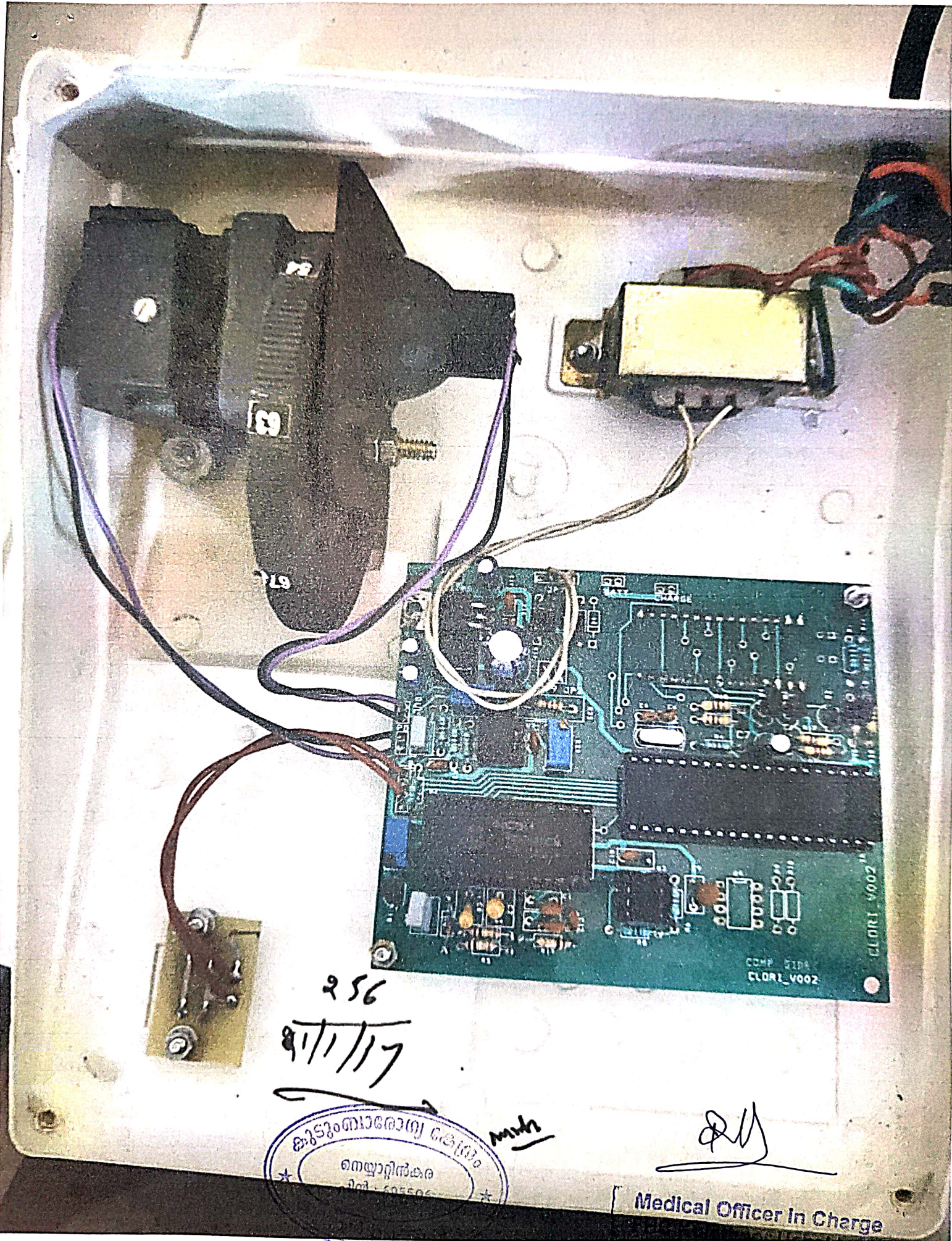
*(to be filled jointly by the Tenderer, head of user institution & Representative of the Tender Inviting Authority individually for every equipment)*

HOSP CODE/Hospital Name:  PHC Kulathoor Laboratory, Trivandrum		SUP.CODE/ Name of the Supplier <b>SCIENTIFIC MEDICAL EQUIPMENTS (KERALA)PVT.LTD</b> <b>EROOR ROAD, TRIPUNITHURA</b>  COCHIN-682 301	
EQPT CODE /Name of the equipment: COLORIMETER		Make / Model	ST-DPS1 CL-223/Elico
		Serial no.	
Original Equipment Manufacturer SCIENTIFIC TECH		Installation date	13/02/17
Installed by	Service Er. Name/ID No	Mobile no	
	SANOLI	9633856189	
Service center address			
Email ID smekcochin@gmail.com			
Service Centre Manger's name		Mob. No	
Mr. Balasubramanian		9895035894	
Installation.location/department /Room No		Project name NRHM 13-14 PH LAB 13-14	
Purchase Order no SO/357/2016-2017/18	Dated 14.12.2016	Value 9130.00	
Comprehensive Warranty period	From 13/02/17	To 13/02/18	
Whether the sticker (as per cl 5.5.4 of the tender doc) affixed on all the key components of the equipment or on a conspicuous place in the installed room/storage area? YES/NO (tick one)			
Whether a digital Photograph of the installed equipment taken after affixing the sticker in the presence of the hospital personnel? YES/NO (tick one)			
Accessories supplied			
Item	Qty.	Serial No.	Remarks



  
**Medical Officer in Charge**  
**FHC Kulathoor Uchakkada**  
**Thiruvananthapuram**





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8/11/17

കുടുംബാരോഗ്യ കേന്ദ്രം  
നെയാറ്റിൻകര  
ഫോൺ: 605506

*Muh*

*[Handwritten Signature]*

Medical Officer in Charge  
Thiruvananthapuram