



BIO-MEDICAL EQUIPMENT MAINTENANCE & MANAGEMENT PROGRAM (BMMP) OF
PUNJAB HEALTH SYSTEMS CORPORATION



INCIDENT REPORT

I. R. No. **126**
Date **12/12/23**
Region

1 Device Identification	
a. Asset No.	4200030087
b. Asset description	Oxygen Concentrator
c. Manufacturer Name	N/A
d. Model	ZY-52W
e. Serial No.	2105263221074
f. Any other Details	

2 Date & Location	
a. Hospital Name	CHC MORINDA
b. Department Name	General Ward
c. Date of Occurrence	12/12/23
d. Time of Occurrence	12:1
e. Date of Reported	12/12/23
f. Time Reported	

3 Follow Up Action	
A. BM Work Order No.:	

3 Damage to Equipment	
A. Major <input checked="" type="checkbox"/>	B. Minor <input type="checkbox"/>

5 Description of the Incident (State exactly what was the sequence of events leading up to the incident and where the incident occurred Please add another paper if space provided is not enough)

Machine is submerged in flood & Rain water
Rusted badly & jammed. Not Repairable

6 Cause of Incident			
a. Physical Damage	<input type="checkbox"/>	j. Inadequate Illumination	<input type="checkbox"/>
b. Missing Spare/Parts	<input type="checkbox"/>	k. Hazardous Method or Procedure	<input type="checkbox"/>
c. Operating without Authorization	<input type="checkbox"/>	l. Non Use of Personal Protective Equipment	<input type="checkbox"/>
d. Wrong Usage / Setting	<input type="checkbox"/>	m. Patient Action	<input type="checkbox"/>
e. Unsafe Equipment	<input type="checkbox"/>	n. Fire, Explosion or Natural Calamities	<input checked="" type="checkbox"/>
f. Unsafe Position or Posture	<input type="checkbox"/>	o. Hazardous Personnel Attire	<input type="checkbox"/>
g. Working on Moving or Dangerous Equipment	<input type="checkbox"/>	p. Unsafe Design or Arrangement	<input type="checkbox"/>
h. Distraction, Teasing or Willfull Misconduct	<input type="checkbox"/>	q. Equipment Malfunction or Device Failure	<input type="checkbox"/>
i. Not Guarded or Temporarily Guarded	<input type="checkbox"/>	Other Explain	<input type="checkbox"/>

7 Action Taken on Equipment Repair	
a) Minor problem and solved without any financial implications.	<input type="checkbox"/>
b) Minor problem and submitted the quote for required parts.	<input type="checkbox"/>
c) Major problem, needs vendor support for further trouble shooting.	<input type="checkbox"/>
d) Major problem. Can not be repaired, Proposed for BER	<input checked="" type="checkbox"/>

E) Replacement required parts details		Part Nos	Qty.	Approx. Cost
a)				
b)				
c)				
d)				
e)				
Total approx. estimate cost of Repair				

8 Remarks (if any)

Signatures	Engineer Name	<i>Ranbir Singh</i>	NODAL OFFICER	<i>[Signature]</i>	
	Date		Date	ਸੀ. ਐਚ. ਸੀ. ਮੋਰਿੰਡਾ, ਰੂਪਨਗਰ	

AOV INTERNATIONAL LLP

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38429

SERVICE REPORT

HOSPITAL NAME	CHC MORINA	COMPLAINT NUMBER	Service Call
HOSPITAL TYPE	CH	COMPLAINT RECEIVED DATE/ TIME	
DISTRICT	ROPAR.	COMPLAINT ATTENDED DATE/ TIME	12/12/23
USER CONTACT DETAILS		COMPLAINT RECTIFIED DATE/ TIME	12/12/23
EQUIPMENT TYPE (TICK THE BOX)	<input checked="" type="checkbox"/> UNDER CONTRACT <input type="checkbox"/> UNDER WARRANTY <input type="checkbox"/> UNDER AMC/CMC <input type="checkbox"/> PHYSICAL DAMAGE <input type="checkbox"/> CONDEMNED		

EQUIPMENT DETAIL	EQUIPMENT NUMBER: 4200030087	MANUFACTURER: others
	EQUIPMENT NAME: OXYGEN CONCENTRATOR	MODEL NO: 24-52W
	DEPARTMENT: GENERAL WARD	SERIAL NUMBER: 2105263221074

PROBLEM IDENTIFIED: Machine is not working (Due to Flood & Rain water submerged)

ACTION TAKEN: checked & found that machine was submerged in rain & flood water. Main PCB, compressor motor rusted completely & damaged. All the filter are checked. All the spare item are not repairable. & also not spare available in market

PHASE - NEUTRAL (VOLT):
 PHASE - EARTH (VOLT):
 NEUTRAL - EARTH (VOLT):

ENGINEER'S REMARKS: This is ^{MC} recommended for condimination.

SPARES CONSUMED	PART NAME	QTY.	SERIAL NO. / LOT NO.
	/	/	/

CUSTOMER REMARKS IF ANY:

JOB COMPLETED SATISFACTORY <input type="checkbox"/> YES <input type="checkbox"/> NO	FOR AOV INTERNATIONAL LLP Ravinder Singh Ravi Bhadray ENGINEER NAME & SIGNATURE
CUSTOMER SIGNATURE WITH SEAL ਸੁਨੀਅਰ ਮੈਡੀਕਲ ਅਫਸਰ ਏ; ਸੀ ਐਚ ਸੀ ਮੋਰਿਨਾ, ਰੋਪੜ	