

TECHNICAL SERVICE REPORT

No. 1193511

DATE: 9/12/2020

CUSTOMER DETAILS		INSTRUMENT DETAILS		SERVICE STATUS	
NAME: <i>Victor hospital</i>		MODEL: <i>XN-350.</i>		<input type="checkbox"/> WARRANTY <input type="checkbox"/> R&R <input type="checkbox"/> AMC <input type="checkbox"/> CMC <input type="checkbox"/> CHARGED CALL	
ADDRESS: <i>Margao</i>		SR. NO.: <i>12250.</i>		TYPE OF CALL <input type="checkbox"/> INSTALLATION <input type="checkbox"/> P.M. VISIT <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input checked="" type="checkbox"/> APPLICATION SUPPORT <input type="checkbox"/> BREAKDOWN	
TEL NO:		CALL DETAILS		DOWN TIME:	
NAME OF THE OPERATOR:		COMPLAINT RECD.	DATE	TIME	COUNTER READING:
PROBLEM REPORTED:		RESPONSE	<i>9/12</i>	<i>5:30</i>	
OBSERVATIONS:		JOB COMPLETED	<i>9/12</i>	<i>8:30</i>	
ACTION TAKEN:		RESPONSE TIME			
1. Checked & performed Auto check out. 2. Calibrated out preventive maintenance. 3. performed 11 times normal sample precision test. 4. performed 11 times calibration test. Reference value (Salt) (S) Rem sample post maintenance.		TRAVEL TIME			
SITE CONDITION		LINE-NEUTRAL VOLT.: <i>222</i>	NEUTRAL-EARTH VOLT.: <i>0.2</i>	LINE-EARTH VOLT.: <i>235</i>	
BRAND OF REAGENT USED:		TO BE FILLED IN BY CUSTOMER			
<input type="checkbox"/> FOLLOWING PARTS HAVE BEEN REPLACED <input type="checkbox"/> FOLLOWING PARTS NEED TO BE REPLACED. PLEASE APPROVE		<input type="checkbox"/> PREVENTIVE MAINTENANCE CARRIED OUT SATISFACTORILY. <input type="checkbox"/> FAULT RECTIFIED & INSTRUMENT IS WORKING SATISFACTORILY. <input type="checkbox"/> WEIGHTED BY APPROVE RS. _____ FOR _____ <input type="checkbox"/> COMMENTS (IF ANY):			
NO.	DESCRIPTION	QTY.	COST	TOTAL	CUSTOMER'S SIGNATURE NAME: <i>U. U. U.</i>
TOTAL Rs.					RECEIVED ON: _____ CHECKED BY: _____ BRANCH _____ H. O. _____
INVOICE NO.:					
DATE:					
FOLLOW-UP ACTION (Required if any):					
ENGINEER'S/PRODUCT SPECIALIST'S SIGNATURE:					
TIME: _____ NAME: <i>Mohammed Iqbal</i>					
JOB CARD NO.:					



NOTE: Parts replaced are chargeable except during warranty Period. Consumables like printer head, lamp, tubing, paper rolls etc. & breakable parts are not covered by warranty and hence are chargeable. Parts replaced due to negligence in operation will also be charged in every case.

AT TRANSASIA, CUSTOMER SATISFACTION IS OUR PRIME CONCERN. IN CASE YOU HAVE ANY SUGGESTIONS PLEASE CONTACT: GENERAL MANAGER (TECHNICAL SERVICE), MUMBAI. TEL.: 4030 9000 FAX: (022) 4030 9090

TRANSASIA BIO-MEDICALS LTD.

Head Office: Transasia House, 8, Chandivall Studio Road, Andheri (E), Mumbai - 400 072. Tel.: (022) 4030 9000 Fax: (022) 2857 3030

Mumbai : Toll Free 1800 103 8226

Indore : Tel.: (0731) 403 3948

Chennai : Tel.: (044) 2822 7149

Kolkata : Tel.: (033) 2215 7839 Fax: 2215 8035

Lucknow : Tel.: (0522) 443 0900

Pune : Tel.: (020) 2616 2658

Dehi : Tel.: (011) 2578 5451/2573 2223

Chandigarh : Tel.: (0172) 484 3837

Hyderabad : Tel.: (040) 4430 9000

Ahmedabad : Tel./Fax: (079) 02640 7030/4032 1903

Jaipur : Tel.: (0141) 402 5085

Guwahati : Tel.: 91369 50480

Bangalore : Tel./Fax: (080) 2556 8044

Patna : Tel.: (0612) 230 3224

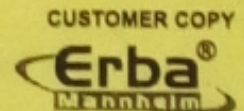
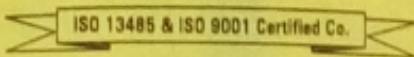
Chuttack : Tel.: (0671) 232 4555

Kochi : Tel.: (0484) 402 0511

Hubli : Tel.: (0836) 485 0900

DOC NO: SC00-406 / ISS - 5

www.transasia.co.in



Calibrator Cal

Instrument Nickname: XN-L VICTOR
Material: XN CAL

Calibration
L

	WBC	RBC	HGB	HCT
Target	6.742	4.469	12.56	36
No. 1	6.71	4.49	12.6	36
No. 2	6.99	4.47	12.6	36
No. 3	6.95	4.51	12.5	36
No. 4	6.94	4.48	12.6	36
No. 5	6.87	4.46	12.5	35
No. 6	7.02	4.50	12.5	36
No. 7	7.03	4.47	12.5	36
No. 8	7.02	4.48	12.6	36
No. 10	6.91	4.54	12.6	36
No. 11	6.93	4.50	12.6	36
Range V	0.32	0.08	0.1	0
Max R	0.52	0.13	0.2	2
Mean V	6.937	4.490	12.56	36
Delta Perc	2.81	0.47	0.00	0
Acceptable ()	2.27	1.25	0.78	2.4
Service L	14.00	4.00	5.00	5.0
Current R	100.2	102.0	99.9	102
New Rate	97.4	102.0	99.9	102

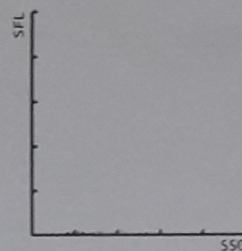
Sample No.: BACKGROUNDCHECK
 Patient ID:
 Name:
 Sample Comment:

Adapter:
 Ward:

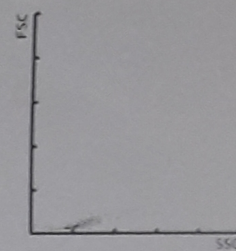
Pos.: 2020/12/09 17:51:47 WB
 Doctor:
 Birth:
 Sex:
 Nickname:

WBC	0.00	[10 ³ /uL]		
RBC	0.00	[10 ⁶ /uL]		
HGB	0.0	[g/dL]		
HCT	0.0	[%]		
MCV	----	[fL]		
MCH	----	[pg]		
MCHC	----	[g/dL]		
PLT	0	[10 ³ /uL]		
RDW-SD	----	[fL]		
RDW-CV	----	[%]		
PDW	----	[fL]		
MPV	----	[fL]		
P-LCR	----	[%]		
PCT	----	[%]		
NEUT	----	[10 ³ /uL]	----	[%]
LYMPH	----	[10 ³ /uL]	----	[%]
MONO	----	[10 ³ /uL]	----	[%]
EO	----	[10 ³ /uL]	----	[%]
BASO	----	[10 ³ /uL]	----	[%]
IG	----	[10 ³ /uL]	----	[%]

WDF



WDF-CBC



RBC



PLT



WBC-BF	[10 ³ /uL]		
RBC-BF	[10 ⁶ /uL]		
MN	[10 ³ /uL]		[%]
PMN	[10 ³ /uL]		[%]
TC-BF#	[10 ³ /uL]		

WBC IP Message

RBC IP Message

PLT IP Message

(2020/12/09)

	WBC	RBC	HGB	HCT	PLT
No. 2	7.43	5.19	14.5	43	242
No. 3	7.47	5.18	14.6	43.5	239
No. 4	7.49	5.15	14.4	43.2	240
No. 5	7.44	5.15	14.5	42.9	233
No. 6	7.27	5.22	14.6	43.4	234
No. 7	7.48	5.16	14.5	43.0	232
No. 8	7.37	5.20	14.6	43.3	232
No. 9	7.43	5.21	14.7	43.2	239
No. 10	7.53	5.21	14.7	43.2	235
No. 11	7.48	5.19	14.6	43.1	233

Mean Value	7.439	5.186	14.57	43.26	235.9
SD	0.074	0.025	0.09	0.26	3.7
CV (%)	1.0	0.5	0.6	0.6	1.6
Limit (%)	3.0	1.5	1.0	1.5	4.0

XN CAL CL-03352101 (2020/12/09)

	WBC	RBC	PLT	HCT	PLT
Target	6.742	4.469	12.56	36.29	245.9
No. 2	6.71	4.49	12.6	36.1	249
No. 3	6.99	4.47	12.6	36	249
No. 4	6.95	4.51	12.5	36	250
No. 5	6.94	4.48	12.6	36.1	253
No. 6	6.87	4.46	12.5	35.9	242
No. 7	7.02	4.50	12.5	36.2	247
No. 8	7.03	4.47	12.5	36.1	244
No. 9	7.02	4.48	12.6	36.1	243
No. 10	6.91	4.54	12.6	36.5	243
No. 11	6.93	4.50	12.6	36.3	252
Mean Value	6.937	4.490	12.56	36.17	247.2
SD	0.096	0.024	0.05	0.16	4.0
CV (%)	1.4	0.5	0.4	0.4	1.6
Limit (%)	3.0	1.5	1.0	1.5	4.0

VICTOR HOSPITAL

VICTOR HOSPITAL MALBHAT, MARGAO, GOA-403 601,

Email: info@victorhospital.com Web: www.victorhospital.com Emergency: 1066 CIN: U85110GA2000PLC002896

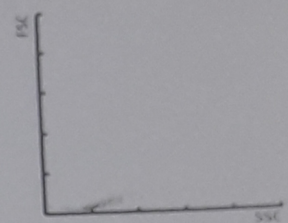
Tel.: +91 832 672 8888 (8 Lines), Fax: +91 832-2720078

Name: _____ Sample No.: **BACKGROUNDCHECK** 2020/12/09 17:51:47
 Doctor: _____ Sex: _____ Age: _____

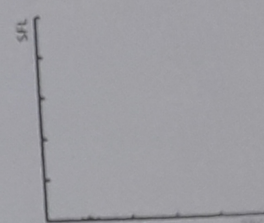
Haematology Test Done on Fully Automated Six Part Cell Counter SYSMEX XNL-350

WBC	0.00	[10 ³ /uL]		(3.00 - 15.00)
NEUT	----	[10 ³ /uL]	----	(37.0 - 72.0)
LYMPH	----	[10 ³ /uL]	----	(20.0 - 50.0)
EO	----	[10 ³ /uL]	----	(0.0 - 6.0)
MONO	----	[10 ³ /uL]	----	(0.0 - 14.0)
BASO	----	[10 ³ /uL]	----	(0.0 - 1.0)
IG	----	[10 ³ /uL]	----	(0.0 - 72.0)
HGB	0.0	[g/dL]		(8.0 - 17.0)
RBC	0.00	[10 ⁶ /uL]		(2.50 - 5.50)
HCT	0.0	[%]		(26.0 - 50.0)
MCV	----	[fL]		(86.0 - 110.0)
MCH	----	[pg]		(26.0 - 38.0)
MCHC	----	[g/dL]		(31.0 - 37.0)
PLT	0	[10 ³ /uL]		(150 - 450)
RDW-SD	----	[fL]		(37.0 - 54.0)
RDW-CV	----	[%]		(11.0 - 16.0)
PDW	----	[fL]		(9.0 - 17.0)
MPV	----	[fL]		(9.0 - 13.0)
P-LCR	----	[%]		(13.0 - 43.0)
PCT	----	[%]		(0.17 - 0.35)

WDF - CBC



WDF



RBC



PLT



WBC IP Message

RBC IP Message

PLT IP Message

ESR (WINTROBE METHOD) -

PERIPHERAL SMEAR -

Sample No.: **BACKGROUNDCHECK**

DR. GOURI ANVEKAR
 MBBS.MD
 (Consultant Pathologist)

< XN CAL™ ASSAY SHEET >

For XN-1. s

Lot No. 03352101

Exp. Date 2021.4

	RBC 10 ⁶ /μL	HGB		HCT %	PLT 10 ³ /μL
		g/dL	mmol/L		
TARGET	4.469	12.56	7.79	36.29	245.9

	WBC-C 10 ³ /μL	WBC-D 10 ³ /μL	RET% %	RBC-O 10 ⁶ /μL	PLT-O 10 ³ /μL
TARGET	7.203	6.742	2.407	4.321	255.7

There are some parameters which is not displayed on IPU according to the instrument.

Please refer to the package insert for the handling of the XN CAL.

Do not leave caribrator in the room temperature over an hour.

Please store it in a refrigerator (2-8°C) immediately after use.

* : This refers to the validity of the assay values for service palameters.

** : Don't calibrate ** marked palameters.

Precision

Instrument Nickname: XN-L VICTOR

Execution

	WBC	RBC	HGB	HCT
No. 2	7.43	5.19	14.5	43
No. 3	7.47	5.18	14.6	43
No. 4	7.49	5.15	14.4	43
No. 5	7.44	5.15	14.5	42
No. 6	7.27	5.22	14.6	43
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No. 10	7.53	5.21	14.7	43
No. 11	7.48	5.19	14.6	43
Mean	7.439	5.186	14.57	43.0
SD	0.074	0.025	0.09	0.0
CV (%)	1.0	0.5	0.6	0
Limit (3.0	1.5	1.0	1