

CALIBRATION REPORT

Report No : HBMS/CAL/23-24

Calibration Date : 06.10.2023

Calibration Valid: 05.04.2024

1.1. CUSTOMER DETAILS:

Name and Address of the organization

M/s, PRIMARY HEALTH CENTRE,
CHETTIMANGURUCHI.

1.2. DESCRIPTION OF DEVICE UNDER TEST (DUT):

EQUIPMENT NAME		CENTRIFUGE
i	Manufactured by	-----
ii	Model	-----
iii	Serial No	PHC/CMI/CF/001
iv	Location	LABORATORY

CALIBRATION WORKSHEET

Tabulation For – Centrifuge

S.no	Unit under test IN Minutes	Observed speed tachometer in RPM	Deviation measured \pm RPM
1	1000	1000	0
2	1200	1201	1
3	1500	1502	2
4	2000	1999	-1

Acceptable deviation is \pm 5 RPM it depends on Max Speed Range

MD Reg No: TN/CBE/MD42/00016

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