



CALIBRATION REPORT	
Report No: HBMS/CAL/23-24	Calibration Date: 14.09.2023
	Calibration Valid: 13.03.2024
1.1. CUSTOMER DETAILS:	
Name and Address of the organization	M/s, GOVT.PRIMARY HEALTH CENTRE, ARNOOTHUMALAI, SALEM.
1.2. DESCRIPTION OF DEVICE UNDER TEST (DUT):	
EQUIPMENT NAME	PIPETTE
I Manufactured by	MICROLUX
II Model	5µl - 50µl
III Serial No	PHC/ATI/PIP/002
IV Location	LABORATORY

Calibration standards used :

Master instrument	Model	Serial no	Date of calibration	Calibration due on
Electrical compact scale	SF-400C	SF400-2240	07-OCT-2022	06-OCT-2023

Details of the machine: machine calibrated and checked output.

Number of measurement	Channel 1 (Volume)		
	05µl	20µl	50µl
1	05.05	20.08	50.97
2	05.06	20.07	20.02
3	05.01	20.05	20.96
4	05.97	20.99	20.02
5	05.01	20.08	20.09
6	05.02	20.95	20.04

For Heart Beat Medical Systems,


(Authorized signatory)

MD Reg No: TN/CBE/MD42/00016

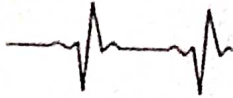
GSTIN: 33AAJFH1833M1ZB

99400 28355, 9751206106

88833 15662

No.42/1, Navaindia Road, Peelamedu,

CBE – 04, hbmedicalsystem@gmail.com



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1.1.CUSTOMER DETAILS:	
Name and Address of the organization	M/s, GOVT.PRIMARY HEALTH CENTRE, ARNOOTHUMALAI, SALEM.
1.2. DESCRIPTION OF DEVICE UNDER TEST (DUT):	
EQUIPMENT NAME	MICRO PIPETTE
i Manufactured by	MICROLUX
ii Model	_____
iii Value	100µl-1000µl
iv Serial No	PHC/ATI/PIP/001

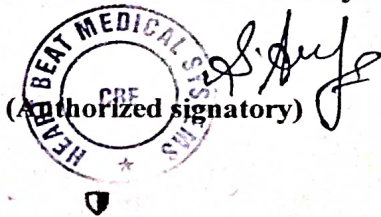
Calibration standards used :

Master instrument	Model	Serial no	Date of calibration	Calibration due on
Electrical compact scale	SF-400C	SF400-2240	07-OCT-2022	06-OCT-2023

Calibration test Report.

Number of measurement	Channel 1 (Volume)		
	100µl	500µl	1000µl
1	100.03	500.06	1000.14
2	100.04	500.09	1000.12
3	100.05	500.02	1000.10
4	100.09	500.08	1000.08
5	100.00	499.94	1000.09
6	100.08	500.07	1000.12

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