

**SIPL FORM****Stryker****Title:** Service Report\_Field**Document Number:** IQF-CPMS-005-07**Call No:** PM-1251447**Version:** 00

<b>PI No: / Exp No:</b>	NA	<b>Call ID Date:</b>	15-05-2024 11:22 AM
<b>Customer Name:</b>	B.J HOSPITAL & RESEARCH INSTITUTE P LTD (GONDIA)	<b>Cat No:</b>	0240031050I
<b>Address 1:</b>	GANESH NAGAR	<b>Description</b>	PKG 32IN 4K SURGICAL DISPLAY I
<b>Address 2:</b>	GANESH NAGAR	<b>Product Sr. No:</b>	SV7321JL0424
<b>Address 3:</b>	NA	<b>Entitlement:</b>	Extended Warranty
<b>Address 4:</b>	NA	<b>Remarks if Entitlement is Other:</b>	
<b>Region:</b>	West	<b>Service Type:</b>	PM1
<b>State:</b>	MAHARASHTRA	<b>Remarks if Service Type is Other:</b>	
<b>City:</b>	GONDIA	<b>Contact Person:</b>	Dr. Vikas Jain
<b>Telephone No:</b>	9823278833	<b>Mobile No:</b>	0
<b>Email ID:</b>	0	NA	NA

<b>Engr started for Site:</b>	14-06-2024 02:34 PM	<b>Engineer reached site:</b>	14-06-2024 02:34 PM
<b>Job Start Time:</b>	14-06-2024 02:34 PM	<b>Job End Time:</b>	14-06-2024 03:46 PM

<b>Problem Description (Symptom):</b>	Only for preventive maintenance
<b>Action Taken at Site (Diagnosis):</b>	On Inspection checked unit for proper functioning as per check list checked unit is working fine.
<b>Final Report:</b>	As of now unit is working fine
<b>Job Completed:</b>	YES
<b>Recommendations to Customer:</b>	Please use system safely

**Material Consumed / Required / Returned / Inspected:**

S. No.	Part No.	Part Serial No.	Material Description	Part Qty
--------	----------	-----------------	----------------------	----------

**Customer Feedback:**

S. No.	Feedback (Excellent 5, V Good 4, Good 3, Average 2, Poor 1)	Ratings
1	Call Registration / Co-ordination Process	5
2	Response to Service Request	5
3	Engineer was equipped for solving the problem	5
4	Analysis / explanation by Service Engineer	5
5	Overall satisfaction about Stryker products & Service	5

<b>Customer Remarks:</b>	NA
--------------------------	----

**Note:** You can also give your feedback on [service.india@stryker.com](mailto:service.india@stryker.com) along with call reference number.

<b>Customer Signature:</b> 	<b>For Stryker India Private Limited</b>
<b>Customer Name: B.J HOSPITAL &amp; RESEARCH INSTITUTE P LTD (GONDIA)</b>	<b>Engineer Name: Gunjan Barnela Medipotion Solution</b>

**Toll Free:** 1800 103 8030

**Service Center:** KHEWAT NO.122,KHATA NO.157,MUSTAKIL NO,98,KILLA NO.6,7,8/1,13/1 SITUATED AT VILLAGE BHONDSI,TEHSIL,SOHNA,GURGAON,HR-122102