

Service Repair Sheet SRS68418

Contact Name

Company/ Hospital Name

Department

Position

Direct Phone

General Phone

Opera Account

Email

Order Number

Date Received

Booked in By

Main Company

Type Return

Karl Green

Alexandra Hospital

Technical Services

01562823424

01562823424

00004295

karl.green1@nhs.net

305518132

27/Mar/2023

Robert Connor

Viamed

For Servicing

VIAMEDclean

Goods In Only

Decontamination
certificate provided
by customer ☒

Cleaned by Viamed,
if no declaration certificate
from customer ☐

Signed: _____

Date: _____

Goods Out Only

Cleaned by Viamed before
returning to customer

Signed: _____

Date: _____

Notes 13/Mar/2023 Kate Griffiths

13/Mar/2023 Kate Griffiths

Would like to send in V1000 for service and calibration. S/n: PR02913A10. Used Alex Hosp a/c as that is the a/c it was purchased on

13/Mar/2023 Kate Griffiths

Says he will send in a PO before sending in the device

14/Mar/2023 Sophie Lines

PO received and attached

14/Mar/2023 Sophie Lines

Carriage was incorrect on the PO - Kelly Turner in Procurement has said it is okay to proceed - email attached

21/Mar/2023 Kate Griffiths

Karl says will send device in later this week

27/Mar/2023 Robert Connor

Received 1 x V1000 s/n PR02913A10, with 4 x AA battery, grey silicone cover, and blue fabric case.

Ready For quote

CGreen 29.3.23

Repair Complete Signed

SRN	Equipment	Stock Ref	Serial Number	Warranty
SRN35712	Foetal Simulator	1410000	PR02913A10	N

1480000 x 1 @ £45
S/N, SRS, SRN

1430309 x 1 FOC
SRS, SRN

UPS x 1 £12

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Repair	Ref	S/N	Equipment Type
SRN35712	1410000	PR02913A10	Foetal Simulator

Complete - Repaired
Time :0 Hour(s)

Parts Replaced

Qty: 1 1430309

Qty: 1 1480000

V1000 has had transducer interface cushion replaced and calibration has been checked



Supplier:
VIAMED LTD

15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE
BD20 7DT

GLN:

Buyer KELLY RWP TURNER

Telephone

Email kelly.turner39@nhs.net

RWP 182848 TECHNICAL SERV DEPT

Deliver to:
KIDDERMINSTER HOSPITAL
RECEIPTS AND DISTRIBUTION
FRANCHISE STREET
KIDDERMINSTER, DY11 6RJ

Invoice to:
WORCESTERSHIRE ACUTE HOSPITALS
NHST
RWP PAYABLES 6485
PO BOX 312
LEEDS, LS11 1HP

0303 123 1177
GLN:

Order Number	305518132
Date	14-MAR-23

PLEASE CHECK THIS P.O. IF ANY OF THE DETAILS CONCERNING THE ITEMS LISTED ARE BELIEVED TO BE INCORRECT, I.E. SUPPLIER CODE, ITEM DESCRIPTION, PRICE OR DELIVERY CHARGE,

PLEASE EMAIL FULL DETAILS OF THE AMENDMENTS TO: WAH-TR.PURCHASING@NHS.NET OR ALTERNATIVELY FAX AN AMENDED COPY OF THE P.O. TO 01527 502822 AND,

IF REQUIRED, THE ORDER WILL BE RESUBMITTED TO YOU.

Quantity Required	U.O.M.	Supplier Part Number	Description	Delivery Date	Unit Price Including Discount	Line Value GBP
45 EACH	calibration		Calibration to Viamed Foetal Heart Simulator Reference number SRS68418	27-MAR-23		45.00
10 EACH	Shipping		Return shipping for Viamed Foetal Heart Simulator Reference number SRS68418	27-MAR-23		10.00

Total Value of Order (Exc VAT) 55.00

Instructions to Supplier: This order is subject to the standard NHS Terms and Conditions of contract. For a copy of these please contact the Buyer for this order. Any price alterations must be agreed with the buyer prior to order execution. The above order number must be quoted on all invoices, acknowledgements, delivery notes and other correspondence. A delivery note must accompany each consignment of goods. The order must not be passed to any third party for supply. Any invoices not complying with these instructions will be returned unpaid to the supplier.

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CGREEN 29.3.23 Mistake 09 29.3.23

Repair Complete Signed

CGREEN 29.3.23

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