



ZILLA SWASTHYA SAMITI, KORAPUT.

OFFICE OF THE
CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, KORAPUT.

Phone No: 06852-252064 e-mail:nhmkpt@gmail.com

No. 28/NCD/KP

Dated 14/4/19

Sealed tenders are invited from registered manufacturer/authorised distributor/Traders/DGSD,GEM rate contract Holders/Supplier for supply of **Section A:supply & installation of INSTRUMENT EQUIPMENTS FOR HEALTH AND WELLNESS CENTRE &CHEMICAL CONSUMABLES (NIDAN)** for the year 2018-19 & **Section B. Supply of Drugs & Consumables,Aids& Appliances under NCD.**The details specification & terms &conditions are available in the district official website .The undersigned reserves the right to reject or cancel any or all the tenders without assigning any reason thereof.


14/4/19
Chief District Medical & Public Health Officer, Koraput

Contd



**CHIEF DISTRICT MEDICAL OFFICER
KORAPUT**

Tel: 06852-252064

Tender Reference No. CDMO/2018-19/88/NO**/**KPH/14-07-19

TENDER DOCUMENT

FOR

Section-A

**SUPPLY of EQUIPMENT & INSTRUMENT UNDER
HEALTH & WELLNESS CENTRE .**

Section-B

**SUPPLY OF DRUGS & CONSUMABLES, AIDS &
APPLIANCES UNDER NCD.**

**Address for Correspondence- Office of the
Chief District Medical Officer Koraput
At/Po-Koraput, Dist- Koraput, Odisha
Pin-764020.**

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OFFICE OF THE CHIEF DISTRICT MEDICAL OFFICER-KORAPUT

SECTION -I

NOTICE INVITING TENDER

Tender Reference No. *gsk/koj* CDMO/2018-19/EQUIPMENT

Dated: *19/01/2019*

1	Period of Availability of Tender Document	(Downloadable from website: www.Koraput.nic.in) In case of any bid amendment and clarification, responsibility lies with the bidders to collect the same from the above mentioned website before last date of submission of tender document and the tender inviting authority shall have no responsibility for any delay / omission on part of the bidder. 14-01-2019 to 31-01-2019, 1.00 P.M
2	Pre bid	21-01-2019, 11.00 A.M
2	Last date & time for submission of Tender	Date: 31-01-2019 Time: 1.00 PM Address of Submission of Bid: OFFICE OF THE CHIEF DISTRICT MEDICAL OFFICER Koraput Koraput, Odisha. (Through Speed post / Registered post/Courier)
4	Date, time and place of opening of Tender	A. Technical Bid (Cover A) opening: 31-01-2019 at 05.00 P.M in the address mentioned above. B. Financial Bid (Cover B): (Venue is mentioned at the address mentioned above) (Bidders / authorized representative may remain present at the time of opening of bid)



TENDERS ARE INVITED FROM ELIGIBLE BIDDERS AS PER THE ELIGIBILITY CRITERIA

SECTION -II

IMPORTANT INSTRUCTIONS TO BE NOTED CAREFULLY BY THE BIDDERS

1.	Mode of Procurement	Through Open Advertisement
2.	Purchaser	Chief District Medical Officer, Koraput
3.	Consignee	Chief District Medical Officer, Koraput
4.	Delivery Period	Within 30 days from issue of the purchase order.
5.	Mode of Delivery	By Air / Road / Rail
6.	Guarantee / Warranty /CMC	Two Years warranty from the date of Supply(i.e. stock entry certification)
7.	Tender Document Cost	Rs. 2,000/-(Two Thousand) plus 18% GST. The tender document cost is to be submitted in the shape of bank draft in favour of the ZSS Koraput from any Nationalized / Scheduled Bank payable at Koraput.
8.	Earnest Money Deposit (EMD)	The Earnest Money Deposit of Rs.50,000/-(Fifty Thousand) will be paid in the shape of demand Draft only in favour of ZSS, Koraput from any Nationalized / Scheduled Bank payable at Koraput
9.	Performance Security	The selected firm should submit the performance security in shape of Bank Draft /Bank Guarantee, equal to the amount of 10 % of the purchase order value (excluding the gst)of the items within 21 days of issue of the purchase order & the same will be returned back after completion of warranty period
10.	Pre-qualification (Eligibility Criteria)	Detail eligibility criteria is mentioned at Clause 2.1& 2.2 in Section -III

SECTION -III

TERMS AND CONDITIONS FOR SUPPLY & INSTALLATION OF MEDICAL EQUIPMENTS & INSTRUMENTS

Sealed tenders will be received till by the office of the Chief District Medical Officer Koraput. Any tender received after the due date & time will be rejected / returned to the sender unopened. The tenders will be received through **Regd. Post / Speed Post/Courier**.

1.3 The bidder(s) are to submit their tenders in **separate** sealed covered envelops for **technical bid** and **Financial bid** by super scribing **Cover "A" (Technical Bid) & Cover "B" (Price Bid)** and both the sealed covers should be put into a **third outer Cover**, which should be super scribed as "Tender for supply of Equipments & Instrument under NHM,Koraput:Tender Reference No.

1.4 The Sealed tenders "Cover A" (Technical Bid) submitted by the Bidders will be opened in the office chamber of the Chief District Medical Officer, Koraput on **dtd.31.01.19 at 05.00 P.M**. The Bidder or their duly authorized representatives are allowed to be present during the opening of the tenders if they so like.

ELIGIBILITY CRITERIA

- 2.1 Manufacturing units / Importers are eligible to participate in the tender provided, they full fill the following conditions:
- (i) Import License (In case of Importer only). In case of importers, they have to furnish the authorization from the manufacturer.
 - (ii) Valid ISO certificate of 9001 certification for quality management standards, Manufacturer should have ISO 14001 certification for environmental Management system.
 - (iii) Manufacturer should have BS OHSAS 18001 certification for occupational Health & safety management.
 - (iv) Should furnish stainless steel grade certification form Govt/ Govt. approved testing laboratory.
 - (v) Product must be BIFMA/ ISI/BIS /CE / US FDA etc. (valid ISI/BIS /CE /US FDA certificate) certified (As per **Section IV** - technical specification).
 - (vi) Bidder should have proof of supply **the required quantity** (executed directly by manufacturer or through distributor) of the equipment(s)/similar equipments mentioned in the schedule of requirement mentioned in the schedule of requirement to any Govt. organization / Corporate Hospitals / PSU Hospitals / UN Agencies and purchase order copies in support of that in last 2 years. (As per format Annexure VII –(Item wise)
 - (vii) Proof of annual average turnover (Manufacturers/Importer) of Rs.5.00 Cores or more along with Audit Report in the last three (3) financial years (FY-2015-16,2016-17 &2017-18) certified by the Chartered Accountant as per the format at **Annexure VI**.
 - (viii) Proof of compliance with IEC Certificate (As per **Section IV**- technical specification)



- (ix) Manufacturing unit who has been blacklisted either by the Tender inviting authority or by any state Govt. or Central Govt. organization is not eligible to participate in the tender for that item during the period of blacklisting. Copies of stay order(s) if any against the blacklisting should be furnished along with the bid.
- 2.2 Authorized distributors are eligible to participate in the tender provided:
- (i) They submit manufacturer's authorization from original equipment manufacturer (OEM) as per the format at **Annexure - V**.
 - (ii) Average Turnover for Equipment items is Rs.5 .00 Cores along with Audit Report in last three (3) financial years (FY-2015-16, 2016-17 &2017-18) as per **Annexure VI**. In addition to this, the distributor shall also submit the average annual turnover of the **manufacturer/importer** of the item(s) as mentioned in 2.1 (vii) above
 - (iii) Proof of supply of the quoted item (s) (executed directly by manufacturer or through distributor) of the equipment(s)/similar equipments mentioned in the schedule of requirement to any Govt. organization /Corporate Hospitals / PSU Hospitals / UN Agencies and purchase order copies in support of that in last two years. (**Annexure VII-Item wise**)
 - (iv) The authorized distributor will submit the following documents in support of the manufacturer along with the tender:
 - a) Valid ISO certificate of manufacturer as per above clause 2.1(ii) 2.1(iii) &2.(iv)
 - b) CE / US FDA / IEC certificates of the manufacturer as per technical specification.

DOCUMENTS TO BE SUBMITTED

The following documents should be enclosed in Cover "A" (Technical Bid) by the tenderer.

All the photocopies are to be attested by a Notary Public / Gazetted Officer.

COVER – A TECHNICAL BID:

- 3.1 Checklist with detail of the documents enclosed in **Cover "A"** (as per **Annexure - I**) with **page number**. The documents should be **serially arranged** as per this **Annexure - I** and should be securely tied and bound.
- 3.2 List of Item (s) Quoted with name of the Make & Model of the item (s) (**Annexure - II**)
- 3.3 Tender document fee of Rs.2000/-(Two Thousand)+ **18%GST** in shape of Demand Draft.
- 3.4 Earnest Money Deposit(s) of Rs.50,000/- (Fifty Thousand) in shape of Demand Draft). Details of EMD and the name of the equipment quoted should be clearly mentioned.
- 3.5 Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor / service centre / contract person / office in Odisha (**Annexure - III**).
- 3.6 The declaration form in **Annexure - IV** duly signed by the Bidder before Notary Public / Executive Magistrate.
- 3.7 Manufacturer's Authorization Format in **Annexure -V** (In case the bidder is not the manufacturer). Importers are also required to furnish the authorization from the manufacturer.



- 3.8 Certificate duly filled by the Auditor / Chartered Accountant (as per **Annexure –VI**) that the annual average turnover of the firm is Rs.5.00 crore or more in last 3 financial years - for bidders who are manufacturer/importer) OR annual average turnover of Rs.5.00 Crore or more in the last 3 (three) financial years for bidders who are authorized distributors of the manufacturer). The authorized distributor shall **also** submit the annual average turnover of the Manufacturer/importer along with his own turnover.
- 3.9 Performance Statement (**Annexure - VII**) (**Item wise**) during the last three years towards proof of supply of Equipments/similar equipments to any Govt. organization / Corporate Hospitals / PSU Hospitals / UN Agencies. The copy of Purchase orders and certificate from the user should be furnished in support of the information provided in the performance statement . Fails to furnish user certificate for supply of similar equipments leads to cancellation in technical prospective.
- 3.10 Deviation/No Deviation Statement from Technical Specification & details of technical specification of the product (**Annexure-VIIIA & B**)
- 3.11 Sample of items in compliance to the technical prospect.
- 3.12 Copy of Import License by the Importer (in case of Importer).
- 3.13 Copy of Valid ISO certificate as mentioned in clause 2.
- 3.14 Copy of Valid ISI / CE /US FDA certificate (as per Section V - Technical Specification).
- 3.15 Copy of Certificate in support of IEC certificate (as per Section V-Technical Specification).
- 3.16 Copy of the **up to date** IT clearance certificate for last three years.
- 3.17 The Original Tender Booklet with Conditions and the schedules signed by the Bidder at the bottom of each page with his official seal duly affixed.
- 3.18 Certificate in support of service centre in Odisha or undertaking to set up service centre in Odisha within one month from the date of installation if approved (for those who have no service centres in Odisha).

N.B: Valid means the certificate should be valid on or beyond the date of opening of tender (Cover-A).

COVER – B PRICE BID

4. The price to be quoted for medical equipments should be sent in the prescribed price format in a separate sealed covers hereafter called **Cover "B" (Price Bid)**. **Cover –B (Price Bid) of the Bidders who qualify in it's Technical Bid (Cover – A) and complies to tender specification & find to be as per technical specification and Product demonstration (if required) will only be opened .**

- 4.1 The tender format (Price Schedule) in duplicate in the prescribed form (as per **Annexure – IX**), must be submitted in Cover-B. The price of the item should be quoted inclusive of excise duty, insurance, packing, forwarding, freight (door delivery) and warranty for 2 years or more. The rate should be quoted both in figures and words. **In case of difference in words and figures, words will be taken into consideration for evaluation.**



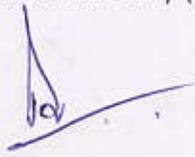
- 4.2 The Cover "B" of Bidders , who qualifies in their technical bid, will only be opened at the office of CHIEF DISTRICT MEDICAL OFFICER- KORAPUT date & time which will be intimated to them by C.D.M.O, Koraput.

REJECTION OF TENDER

5. The tender submitted by the bidder will be rejected, if any of the following documents are wanting / not submitted with the tender:
- (i) Import License (In case of Importer)
 - (ii) Manufacturer's authorization in case of distributor/importer
 - (iii) Earnest Money Deposit (EMD).
 - (iv) Annual average turnover of the firm is Rs.5.00 Core or more in last 3 financial years (for bidders who are manufacturer/importer) **OR** annual average turnover of Rs.5.00 Cores or more in the last 3 (three) financial years (for bidders who are authorized distributors of the manufacturer). In case of authorized distributor, they will also have to furnish along with their own turnover, the Annual Average turnover statement as per Annexure-VI from the Manufacture/Importer of the item(s) as mentioned above.(in case of Authorised Distributor both Annual Turn audit report for manufacturer or his own are required. Without Manufacture's Audit Report leads to disqualified in technical bid)
 - (v) Valid ISO certificate ,BS OHSAS certificate & other test report of Manufacturer as mentioned in clause 2 (ii),(iii) &(iv).
 - (vi) Valid BIFMA/ISI / CE / US FDA certificate of the manufacturer as per Section IV – Technical Specification.
 - (vii) IEC Certificate of the manufacturer as per as per Section IV – Technical Specification.
 - (viii) Proof of supply/ installation of the quoted item (executed directly by manufacturer or through distributor) for Equipments/similar Equipments mentioned in the schedule of requirement to any Govt. Organization / Corporate Hospitals / PSU Hospitals / UN Agencies and certificate in support of that from the user during the last three years.(without user certificate it leads to cancellation in technical prospect).
 - (ix) sample of items in compliance to the technical prospect.
 - (x) Major deviations from the technical specification of the item(s) as per tender.
 - (xi) Price bid / quoted rate with signature and seal (Hard Copy).

EARNEST MONEY DEPOSIT (Rs.50,000/-)

- 6.1 The amount of Earnest Money Deposit required is mentioned in the Section-II. The Earnest Money Deposit will be submitted in the shape of **demand Draft only** in favour of **ZSS, Koraput** from any Nationalized / Scheduled Bank payable at Koraput
- 6.2 The EMD of the unsuccessful Bidders will be returned back without interest after placement of purchase order to the successful Bidder and EMD of successful Bidder will be returned after submission of performance security (ies).



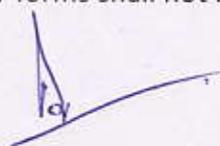
- 6.3 The EMD will be forfeited if the Bidder withdraws its tender / furnish forged documents which is found during bid evaluation OR doesn't sign the contract / doesn't furnish performance security / doesn't supply the items (in case of successful bidder) within the stipulated time period.

PERFORMANCE SECURITY & AGREEMENT

- 7.1 The Performance Security should be submitted in shape of Bank Draft/Bank Guarantee from a Nationalized / Scheduled Bank in favour of **ZSS, Koraput** equal to the amount of 10% of the purchase order value of the item excluding gst within 21 days of issue of the purchase order.
- 7.2 The agreement (as per Annexure – X) will be signed between the supplier and the purchaser and will be kept by the purchaser.
- 7.3 The performance Security Money will be returned back to the Bidder without interest after the expiry of the warranty period .
- 7.4 Security money will be forfeited if there is any violation of the tender terms and conditions.

TENDER CONDITIONS:

- 8.1 The details of the medical equipments with specifications are mentioned in **Section IV. The firm must clearly mention their specification, special features, upgraded version (if any), detail technical catalogue of the offered model in their tender.**
- 8.2 Tenders should be typewritten or computerized and every correction in the tender should invariably be attested with signature by the Bidder with date before submission, failing which the tender will be ineligible for further consideration.
- 8.3 Rates inclusive of excise duty / customs duty, packing, forwarding, insurance, transportation charges with 2 years or more onsite comprehensive warranty and exclusive of Sales Tax/VAT & Entry Tax should **be quoted for the medical equipments (Item wise) on door delivery basis.** The rates quoted should be in **Indian Rupees only.** Rates quoted in any other currency will not be accepted.
- 8.4 The purchaser shall be responsible only after delivery and due verification, installation and commissioning of the equipment.
- 8.5 The rate per unit shall not vary with the quantum of order placed for destination point.
- 8.6 If there is difference between figures & words, words will be taken into consideration.
- 8.7 In the event of the date being declared as a holiday by Govt. of Odisha, the due date of sale, submission of bids and opening of bids will be the following working day at the scheduled place & time.
- 8.8 The price quoted by the Bidders shall not in any case, exceed the controlled price, if any, fixed by the Central / State Government / DGS&D and the Maximum Retail Price (MRP). The purchaser, at his discretion, will in such case, exercise the right of revising the price at any stage so as to confirm to the controlled price or MRP as the case may be deleted.
- 8.9 The rate quoted and accepted will be binding on the Bidder for a period of **one year** from the date of approval of the rate contract and on no account; any increase in the price will be entertained till the completion of this tender period.
- 8.10 No Bidder shall be allowed at any time on any ground whatsoever to claim revision of or modification in the rate quoted by him. Clerical error / typographical error, etc. committed by the Bidders in the tender forms shall not be considered after opening



of tenders. Conditions such as " SUBJECT TO AVAILABILITY" / "SUPPLIES WILL BE MADE AS AND WHEN SUPPLIES ARE RECEIVED" etc., will not be considered under any circumstance and the tenders of those who have given such conditions shall be treated as incomplete and for that reason, shall be rejected.

- 8.11 If at any time during the period of rate contract, the price of tendered item is reduced or brought down by any law or act of the Central or State Government or the bidder. The Bidder shall be morally and statutorily bound to inform the purchaser immediately about such reduction in the contracted price. The purchaser is empowered to unilaterally effect such reduction in rate, in case the Bidder fails to notify or fails to agree for such reduction of rate.
- 8.12 Approved rate with terms, conditions & the quoted price of the tender shall remain valid for a period of 12 months from the date of approval of the rate contract.
- 8.13 If the relevant documents / certificates which are required to be furnished along with the tender are written in language other than English, the tendering firm shall furnish English version of such documents / certificates duly attested by a Gazetted Officer / Notary with his seal and signature.
- 8.14 If any information or documents furnished by the Bidder with the tender papers are found to be misleading or incorrect at any stage the tender of the relevant items in the approved list shall be cancelled and steps will be taken to blacklist the said firm for three (3) years.
- 8.15 Rate should be quoted in Indian Currency, both in words and figures against each item as the payments will be made in Indian currencies only (The Bidder shall not quote the rate for any item other than the item specified in the list. (**Section V – Schedule of Requirement**)).
- 8.16 Both Cover-A and Cover-B should have an **index and page number** of all the documents submitted inside that cover.
- 8.17 The Tax will be charged as per the guidelines given by the Finance Dept., Govt. of Odisha from time to time. Either C.S.T or V.A.T (as applicable) will be paid to the supplier. In case of Entry Tax, the supplier has to deposit the original receipt to claim it, if finished goods are brought from outside the State. The Sales Tax & entry tax components should be shown **separately** in the Price Schedule.
- 8.18 The requirement of items may increase or decrease depending on the situation.
- 8.19 The bidder may quote any other advance model over the specification cited in Section-V if any & decision of the purchase committee members in consultation with the concerned end user will be final in that case.

PACKAGING:

- 9.1 All the packaging should be New. The supplier shall provide such packaging of the goods as is required to prevent their damage or deterioration during transit to their final destination. The packaging shall be sufficient to withstand without any limitation including rough handling during transit, exposure to extreme temperature, salt and precipitation during transit and upon storage.

COMPREHENSIVE WARRANTY

(Undertaking as per Annexure – XI & XII)

- 10.1 The comprehensive warranty will remain valid for **2 years** from the date of supply of Equipment & Instrument with stock entry certification. The original copy of warranty documents will be submitted to the purchaser at the time of installation.

- 10.2 The warranty will cover **all the parts of the machine or item and any replacement or repair required** within the warranty period and will be provided by the supplier free of cost at the destination point (installation point). The supplier will take back the replaced parts / goods at the time of their replacement. No claim whatsoever shall be on the purchaser for the replaced parts / goods thereafter. No travelling allowances or transportation cost will be paid by the purchaser during the warranty period.
- 10.3 The Supplier shall warrant that the Goods supplied under this contract are new, unused, of the most recent or current models and they incorporate all recent improvements in design and materials. The Supplier shall further warrant that all Goods supplied under this contract shall have no defect arising from design, materials or workmanship or from any act or omission of the Supplier that may develop under normal use of the supplied Goods in the conditions prevailing in the place of final destination. Within warranty period the service engineer has to provide minimum two preventive maintenance (six month interval) visit other than complain and this has to be ensured by service report. Penalty: Any delay in attending the PM the delay period will be added to the warranty period.
- 10.4 The selected firm should have a service centre in Odisha.
- 10.5 All the warranty certificates must be handed over to the consignee after installation.

LABELLING:

- 11.1 The equipment supplied must be properly labelled with Sl. No., Model Name, Make & year of Manufacture

ACCEPTANCE OF TENDER AND SUPPLY CONDITIONS:

- 12.1 The Purchaser reserves the right to reject the tenders or to accept the tenders for the supply of the item tendered without assigning any reason thereof.
- 12.2 The Purchaser will be at liberty to terminate the contract either wholly or in part without assigning any reasons thereof. The Bidders will not be entitled to any compensation whatsoever for such termination.
- 12.3 The **supply should be completed within 30 days** from the date of issue of purchase order unless otherwise specified. If no supply is received even after 30 days or within 58 days with liquidated damage from the date of issue of the purchase orders such orders will stand cancelled automatically without further notice. Penalties shall also thereafter be applied to the Bidders decided by the committee. The approved firm shall also suffer forfeiture of the EMD and Performance Security Deposit.
- 12.4 The tender inviting authority or his authorised representative (s) has the right to inspect the factory of those company who have quoted for the tender, before accepting the rate quoted by them or before releasing any purchase order (s) or at any point of time during the validity period of tender and has also the right to reject the tender or terminate / cancel the orders issued or not to reorder based on the facts brought out during such inspections.



EVALUATION:

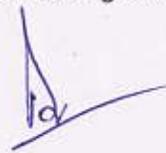
- 13.1 The price bid of the tenders who qualify in the technical bid fulfilling the eligibility criteria and complying to the technical specification shall only be opened.
- 13.2 The tender inviting authority may ask for demonstration of the equipment by the bidders at the premises of the tender inviting authority or a place as decided by the tender inviting authority as a part of the technical evaluation before opening of price bid in order to verify the compliance to technical specification.
- 13.3 The rates of the item quoted by the Bidders who qualify technically will be evaluated after taking the following points into consideration: -
- a) Rate of the items will be taken after inclusion of the excise duty / customs duty, transportation, insurance, packing & forwarding & comprehensive warranty for two (2) years or more,
 - b) The circulars issued by the Finance Department, Govt. of Odisha from time to time regarding tax matters shall be taken into account for evaluation and shall be binding on the bidders. As per the Govt. of Odisha Finance Deptt. Order No. 48317(230)/F dt.23.11.2010, in comparing the cost of an article, if purchased from within the State with the price of similar article if purchased from outside the State, the amount of Odisha Sales Tax (OST) now VAT shall be deducted from the total cost since it accrues back as revenue to the State. If after such deduction, the cost of articles to be purchased within the State is not more than the cost of including Central Sales Tax, transport and other charges of similar articles from outside the State, it would be economical to purchase articles within the State.

LIQUIDATED DAMAGE:

- 14.1 The C.D.M.O may allow extension for a maximum period of 4 (four) weeks (28 days), after the stipulated date of supply (i.e. 30 days) with a penalty of 0.5% which will be deducted from the purchase order value as "Liquidated Damage", for each week (7 days) of delay up to a maximum 2% on the value of the goods.
- 14.2 If the supplier fails to complete the supply within the extended period, i.e. 58 days after being allowed by the purchaser, no further purchase order will be placed to the firm for the said item including forfeiture of the Performance security and the concerned firm will be blacklisted for two (2) years from the date of issue of letter for the said item.

TERMS OF PAYMENT :

- 15.1 No advance payments towards cost of Equipment & Instrument will be made to the Bidders .
- 15.2 90% of the cost of the equipment (excluding gst) + 100% tax shall be paid to the supplier on receipt of the stock entry certificate, installation and demonstration of the item from the consignee. The balance 10% of the payment of equipment will only be made after receipt of certificate on working status of the equipment from the consignee after 6 weeks of installation and commissioning of the equipment.
- 15.3 Payments as mentioned above will only be made after keeping the **performance security deposit** from the supplier, if they have not deposited the same before. Payment will only be made after ensuring signing of the Agreement, undertaking and handing over of warranty papers of equipment



15.4 No claims shall be made against the purchaser in respect of interest on earnest money deposit or performance security deposit or any delayed payment or any other deposit.

PENALTIES:

- 16.1 If the successful Bidder fails to deposit the required performance security within the time specified or withdraws his tender after acceptance of his tender owing to any other reasons or unable to undertake the contract, his contract will be cancelled and the earnest money deposit / performance security deposit shall stand forfeited by the purchaser.
- 16.2 Violating the tender terms and conditions & non supply / supply which is not as per technical specification will disqualify the firm to participate in the tender for a period of 2 (two) years from the date of issue of letter and his E.M.D & performance security deposit will be forfeited and no further purchase order will be placed to that firm for that item.
- 16.3 In the event of any dispute arising out of the tender, such disputes would be subject to the jurisdiction of the High Court of Odisha.

CONDITIONS APPLICABLE TO LOCAL MSEs / SSI OF ODISHA:

The MSE / SSI Units of the State of Odisha will be given the following preferences in the tenders provided they produce the following documents as per MSME Development Policy-2009 and IRP - 2007:

- 17.1 Attested copy of valid manufacturing licence.
- 17.2 P.M.T Certificate from the Director of Industries, Odisha or General Manager District Industries Centre that it is a MSE / SSI Units of the State of Odisha, provided that MSE / SSI units has not been derecognised by the Govt. for that specified period.
- 17.3 Local Micro & Small Scale Enterprises (MSE) and Khadi & Village industrial units including handloom and handicrafts will enjoy a price preference of 10% vis-à-vis over local medium and large industries as well as industries outside the State.
- 17.4 Local Micro & Small Scale Enterprises having ISO, ISI Certification for their product shall get an additional price preference of 3% as per provision of IPR-2007.
- 17.5 Local MSEs registered with respective DICs, Khadi, Village, Cottage and Handicraft Industries, OSIC, NSIC shall be exempted from payment of earnest money and shall pay 25% of the prescribed performance security deposit.
- 17.6 Clause number 1 to 16 is also applicable to the Small Scale Industry Units of the State of Odisha.



Section IV

TECHNICAL SPECIFICATIONS:



Technical specifications for Equipment/ Instruments for HWCs

Quality Standard:

- Should be CE/BIFMA/BIS approved model.
- Manufacturer should have ISO 9001 certification for quality management standards.
- Manufacturer should have ISO 14001 certification for environmental management systems.
- Manufacturer should have OHSAS 18001 certification for occupational health & safety management.

Sl No	Name of the item	Specifications
1	Bed sight Screen (Screen Separators with stand)	<ul style="list-style-type: none"> • 3 folding partitions - 6 feet high and 6 feet long when opened • Tubular frame (CRCA tubular) mounted on 5cms high quality corrosion free castors with fine quality curtains. Pre-Treated and Epoxy Powder coated.
2	I.V Stand	<p>Overall approx. size: height – 150cm-230 cm (with telescopic adjustable height)</p> <p>Main Frame: Strong & Sturdy stainless steel tubular construction mounted on four pronged tubular/rectangular base fitted with five swivel rust proof castors of 50mm diameter.</p> <p>Stainless steel rod with double hooks All the Stainless Steel should be of 304 grade Should be pre-treated and epoxy coated finish.</p>
Clinical Material & Tool Equipment		
3	Basin 825 ml. Ss (Stainless Steel)	Basin of 825 ml. Ss (Stainless Steel)
4	Basin deep (capacity 6 litre)	SS Basin square/rectangular shaped of capacity 6liter
5	Tray instrument/Dressing with cover 310 x 195x63mm SS,	<p>Instrument Tray with Cover</p> <p>Made of 304 grade Stainless Steel</p> <p>Steel Size: 310 x 195x63mm</p> <p>Manufacturer should be ISO13485 approved Product should be BIS/CE approved</p>
6	Dressing Drum with cover 0.945 litres stainless steel	<ul style="list-style-type: none"> • Should be made of joint-less stainless steel of 304 grade steel of 0.5mm thickness. • Should have perforated body. • Should have chain locking with clamp to open or close the perforated body. • Size : 0.945 litres • Manufacturer should be ISO13485 approved Product should be BIS/CE

		approved
7	Hemoglobinometer (strip/micro-cuvette)	<p>It should be a point of care instrument to measure hemoglobin. The unit should have LCD screen for instant display of test result.</p> <ul style="list-style-type: none"> • It should be Factory calibrated as per ICSH (International Council for Standardization in Haematology). Needs no further calibration • Self-checking facility should be there between every measurement • Shelf life of the test strip/cuvette should be minimum 90 days from the opening of the packet / box and at least one year from the date of manufacturing. • Measurement Range: 4gm./dL to 20gm./dL • Accuracy should be $\geq 96\% CV < 5\%$ • Sample volume; approximately 10 to 15 μ L whole blood; capillary or venous blood • Minimum stored result memory :250 results • USB interface facility should be there for transfer of stored results. <p>Soft keys for user operation. It should communicate through mini-USB connector with a Computer/ laptop.</p> <p>Battery operated; The battery should support at least 500 tests.</p> <p>Each device should be supplied with: 1. Cover (Wash Proof) 2. USB Cable for data transfer 3. Other items required for functioning of the machine. The cost of Device, Strips (50 Nos.) & lancets (55 Nos.) should be quoted separately in price BOQ excel format.</p> <p>Operating condition: Capable of operating continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90% in ideal circumstances.</p> <p>Safety & Quality Standard: European CE or USFDA Certified. It should be Factory calibrated as per ICSH (International Council for Standardization in Haematology). The manufacturer should be ISO 13485 certified</p>
8	Instrument Sterilizer	<p>Electrically operated. Size ideally: 24x8x6 inch</p> <p>Should have replaceable immersion type heater ISI marked.</p> <p>Body should be made of SS-304 grade steel. (Test report certificate from independent laboratory should be submitted with technical bid.)</p> <p>Power Supply Power input to be 220-240VAC, 50Hz fitted with Indian plug</p> <p>Manufacturer should be ISO13485 approved</p> <p>Product should be BIS/CE approved</p>
9	Surgical Instruments	<p>Quality standard (Applicable to all surgical instruments): Instruments should be made up of stainless steel medical grade AISI 410 & 420. Test reports should be submitted in the technical bid. Part No. and the CE Mark must be</p>



		engraved/Embossed on the instrument. Sample demonstration. Instrument should cover 2 years replacement warranty. All the instruments should be autoclavable
10	Kelly's Forceps	Kelly's hemostat Forceps straight 140 mm
11	Cheatle's Forceps with Holder	Cheatle's Forceps 10" with SS Holder
12	Needle Holder	Needle holder -8inch
13	Scalpel holder	
14	Surgical Blade	Size 22,24,
15	Sponge holder	Sponge holding forceps 8" with double action Jaws
16	Kidney tray	Kidney tray,8"
17	Artery Forceps, straight, 160mm Stainless steel	Artery Forceps, straight, 160mm Stainless steel
18	Stitch cutter	Stitch cutting size with round handle double action jaw of 6 inch.
19	Allis forceps	Tissue Forceps finger ring, ratcheted forceps straight with 5x6 teeth and an overall length of 7-1/2 inches.
20	Dressing Forceps (spring type), 160mm, stainless steel	Dressing Forceps (spring type), 160 mm, stainless steel
21	HubCutter and Needle Destroyer	<ul style="list-style-type: none"> • Should be lightweight, portable & compact. • Housing should be moulded type, shock proof and made of ABS plastic/Stainless steel of 304 Grade. • Should be provided with removable discharge tray for easy disposal of syringe hubs. • Should have provision to burn the needle and cut the syringe tip. • Should have high Carbon Steel cutter to cut the syringe tips. • Should able to cut and destroy the needle up to 18G. • Should able to destroy minimum of 5 injection needles on continuous operation. • Should have heavy duty transformer. • Should have power ON/OFF switch with visual indication. • Should be properly insulated for protection from electric hazards. • Should have fuse protection with 5no.of fuse to be supplied of adequate rating. <p>Power Supply: Power supply should be 220-240 V AC, 50Hz with Indian plug. Manufacturer should be ISO13485 approved Product should be BIS/CE approved</p>
22	Artery Forceps-Curved	Artery Forceps 5"Curved double action jaw ratcheted with ring handle double action jaws.
23	Gauze Cutting Scissors	Angled with the lower blade being slightly longer & tip of the lower blade features a flattened blunt nodule to slide between bandages and skin without harming the skin. Size:5"
24	Oxygen Cylinder	10 Ltr

25	OxygenCylinder trolley	<ul style="list-style-type: none"> • Frame of the cylinder trolley is made with ms tubular steel. • Framework of the cylinder trolley mounted on two 10cm wheels. • Finish in epoxy powder coated. • Height:- 106Cm.
26	Stadiometer	<ul style="list-style-type: none"> • The measuring rod can be dismantled into several pieces and can be set easily. • The scale must be printed along the side of the measuring rod. • Measuring range (Both in cm & inch): 20-205 cm and 8 - 81". • Graduation of measuring rod: 1mm / 8inch. • The structure should be made of ABS plastic. The product • should be CE certified (certificate to be submitted in technical bid) Warranty : 1 Year
27	Nebulizer	<p>Should be of Heavy duty compact Nebuliser Heavy duty .Compact, lightweight, low noise(50dB+ 3dB) Durable long life compressor. Suitable for heavy duty/ institutional (hospital) use, should be able to run uninterruptedly for one hour. Max Pressure = 2.0-2.5 bars Operating pressure:1to1.5bars Compressor Air flow:8Lpm Normal Air Flow:4lpm Should produce particle of size 1-5 micron. Mass median Diameter (MMD) =2.5-3m. Output rate: 500gm/Min. Made of Heavy duty ABS body Power Supply: Power input to be 220-240VAC, 50Hz fitted with Indian plug Should be USFDA/CE approved model. Manufacturer should be ISO 13485 certified. Electrical safety conforms to the standards for electrical safety IEC 60601-1General requirements (or equivalent BIS Standard)</p>
Lab Diagnostic Materials		
28	Slide drying rack	<p>Acrylic slide rack, inclined, used for draining/drying slides. 5 slots accommodate 25 slides.</p>
29	Specimencollection bottle(100/pack)	
30	Micropipette	<ul style="list-style-type: none"> • Should have ergonomic design with light & smooth plunger action • Should have soft feel handle grip having both left & right hand operation • Pipette handle should have thermoplastic elastomeric to prevent transfer of body heat to pipette volume during continuous usage • Fully autoclavable: Entire pipette can be steam autoclaved at temp. Of 121 0C • Should have larger & clear 3 digit display giving smaller increment for wider selection of volume

		<ul style="list-style-type: none"> • Volume range should be of 1-10ml with increment of 20 µl • Accuracy: 1 to 2% • Should have locking mechanism to prevent accidental volume change during pipetting • Should have one hand eject facility • Should have in house clinical, repair and calibration facility • The tip cone should have leak free operation, smooth and light loading operation with choice of using variety of tips. • Should be compatibles to universal tip types • Should be available with different color codes. • Warranty: 3years. <p>Quality Standards:</p> <ul style="list-style-type: none"> • Should be USFDA/CE (IVD) approved product <p>Manufacturers should have ISO 13485 certification for quality standars</p>
31	Yellow Tips for Micropipette	<p>Pipette tips should be designed to fit and function on a wide variety of single or multichannel pipettes. It should be manufactured from the finest grade polypropylene material for proper fit and straightness. Packaging: Sterile wrapped racks.</p> <p>Quality Standards:</p> <ul style="list-style-type: none"> • The item should be CE certified Manufacturer should be ISO 13485 Certified
32	Binocular Microscope	<p>GMDN name : Binocular Microscope</p> <p>A. General Use</p> <ul style="list-style-type: none"> • Clinical purpose: Binocular microscope is simply a microscope that lets the viewer use both eyes. The microscope has 2 eye lenses. The development of the double eye piece microscope was adapted to reduce the eyestrain and muscular strain that typically results from traditional microscopes. • Used by clinical department/ward: Clinical labs <p>B. Technical Characteristics</p> <ul style="list-style-type: none"> • Technical characteristics (specific to this type of device) <ul style="list-style-type: none"> ▪ Body-Single mould sturdy stand, inclined Binocular body 30 °, 360° rotatable head ▪ Eyepieces-Highest quality 10X/20mm wide angle anti fungus field eyepiece. One with pointer. Diopter adjustment must be present on both eye pieces. ▪ Objectives-Parfocal, antifungus coated 4x, 10x, 40x and 100x (oil immersion) with semi planner achromatic correction. Objective should be well centred even if their position on turret is changed. ▪ Optical system-Infinity corrected ▪ Stage - Double plate rackless horizontal mechanical stage preferably 100 x 140 mm with fine vernier graduations designed

		<p>with convenient coaxial adjustment for slide manipulation preferably through 30 x 70 mm double slide holder</p> <ul style="list-style-type: none"> ▪ Sub stage-Abbe condenser focusable, continuously variable iris diaphragm ▪ Illuminator-Built-in LED light source with white light with intensity control and LED life of more than 10,000 Hrs.Colour Temperature minimum: 4000K. ▪ Finish-A durable textured acid resistant finish. ▪ Battrey backup: minimum 1 Hour ▪ Nose piece: Backward tilted revolving nose piece suitable to acomodate four objectives with click stop and rubber grip. ▪ Focussing: Coaxial coarse and fine focussing knob, capable of smooth, fine focussing movement sensitivity; minimum: 300 micron; focussing stop for slide safety ▪ 12-Objectives: All DIN type <p>Plan Achromatic (Anti Fungus)</p> <ul style="list-style-type: none"> ▪ 04xN.A .01 WD 6.50mm ▪ 10x N.A 0.25 WD 5.6mm
32		<ul style="list-style-type: none"> ▪ 40x N.A 0.65 WD .6mm ▪ 100x (Oil).N.A 1.25 WD .13mm <ul style="list-style-type: none"> • User's interface : Manual • Software and/or standard of communication (where ever required) : NA <p>C. Physical Characteristics</p> <ul style="list-style-type: none"> • Dimensions (metric) : NA • Weight (lbs, kg) :NA • Capacity:NA • Noise (in dBA) : NA • Heat dissipation: NA • Mobility, portability: Portable <p>D. ENERGY SOURCE :(Electricity)</p> <ul style="list-style-type: none"> • Power Requirements: Input voltage- single • Battery operated: Yes with 1hour backup • Tolerance (to variations, shutdowns): NA • Pressure gauge : NA • Operating pressure: NA • Sterilizing pressure: NA • Protection: Should have over-charging cut-off with visual symbol. • Power consumption : less than 2 Watt <p>E. Accessories, Spare Parts, Consumables</p> <ul style="list-style-type: none"> • Accessories (mandatory, standard, optional); Spare parts (main ones); Consumables / reagents (open, closed system) : Should provide with wooden storage box, dust cover, immersion oil. <p>F. Environmental and Departmental Consideratons</p> <ul style="list-style-type: none"> • Atmosphere / Ambiance (air conditioning, humidity, dust...) <p>Operating condition: Capable of operating</p> <ul style="list-style-type: none"> • continuously in ambient temperature of 10 to 50 deg C and relative humidity of 15 to 90% in ideal circumstances.

		<p>Storage condition: Capable of being stored continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90%."</p> <ul style="list-style-type: none"> • User's care, Cleaning, Disinfection & Sterility issues: <ul style="list-style-type: none"> ▪ Disinfection: Parts of the Device that are designed to come into contact with the patient or the operator should either be capable of easy disinfection or be protected by a single use/disposable cover. ▪ Sterilization not required." <p>G. Standards and Safety</p> <ul style="list-style-type: none"> • Certificates (pre-market, sanitary, ..); Performance and safety standards (specific to the device type);Local and/or international <ul style="list-style-type: none"> ▪ Should be US FDA/CE (from a Notified body)/BIS approved product. ▪ Manufacturer should have ISO 13485 certification for quality standards. ▪ Electrical safety conforms to the standards for electrical safety IEC 60601-General requirements (or equivalent BIS Standard) ▪ Certified to be compliant with IEC 61010-1, IEC 61010-2-40 for safety.
		<p>H. Training and Installation</p> <ul style="list-style-type: none"> • Pre-installation requirements: nature, values, quality, tolerance <ul style="list-style-type: none"> ▪ Availability of 5 amp socket; ▪ Safety and operation check before handover; • Requirements for sign-off : Certificate of calibration and inspection from the manufacturer • Training of staff (medical, paramedical, technicians) <ul style="list-style-type: none"> ▪ Training of users on operation and basic maintenance; ▪ Advanced maintenance tasks required shall be documented <p>I. Warranty and Maintenance</p> <ul style="list-style-type: none"> • Warranty: 3 years • Maintenance tasks: CMC 5 years, 2 PM Visits Annually. All Breakdown calls to be attended within 24 hrs of registration." • Service contract clauses, including prices : The spare price list of all spares and accessories (including minor) required for maintenance and repairs in future after guarantee / warranty period should be attached; <p>J. Documentation</p> <ul style="list-style-type: none"> • Operating manuals, service manuals, other manuals "Should provide 2 sets(hardcopy and soft-copy) of:- <ul style="list-style-type: none"> ▪ User, technical and maintenance manuals to be supplied in english/hindi language along with machine diagrams; ▪ List of equipment and procedures required for local calibration and routine maintenance; ▪ Service and operation manuals (original and copy) to be provided; ▪ Advanced maintenance tasks documentation; ▪ Certificate of calibration and inspection" • Other accompanying documents:List of important spares and accessories, with their part numbers and cost; <p>K. Notes</p> <ul style="list-style-type: none"> • Service Support Contact details (Hierarchy Wise; including a toll free/landline number) "Contact details of manufacturer, supplier

		<p>and local service agent to be provided; Any Contract (AMC/CMC/add-hoc) to be declared by the manufacturer;" Recommendations or warnings Any warning signs would be adequately displayed</p>
33	Neuber Chamber	<p>The counting grid is of 3mmx 3mm in size.</p> <ul style="list-style-type: none"> • The grid should have 9 square subdivisions of width 1mm. • The central square should be spilt into 25 squares of width 0.2mm (200µm) • The haemocytometer should have two cover slips • The glass cover should be of squared shaped of width 22mm • Material: Thermal and shock resistant glass • The chamber should have two special clamps to avoid the cover glass to avoid edge-lift. <p>Pipette</p> <p>The pipette should be made of glass of maximum capacity of 20,200 and 2000µl.</p> <p>Dimensions (metric):length-300mm +/-10mm, 2mm thichness. Autoclaving at 121degree centigrade</p> <p>Should be resistance to mechanical, chemical and over heating.</p> <p>STANDARDS AND SAFETY:</p> <ol style="list-style-type: none"> 1. should beISO 648/IS 117 approved product. 2. Manufacturer and Supplier should have ISO13485/ ISO 9001 certification for quality standards. 3Certificate of calibration from the manufacturer 4. The product should be USFDA/ CE marked
34	ESR Stand with tube	<p>ESR Stand with Tubes</p> <ul style="list-style-type: none"> ➤ Screw type stand with cast iron base and highly nickel plated ➤ The base shall have minimum 5tube holder ➤ 2nos spare tubes should be provided with the ESR stand. ➤ The witrobes tube should be made of Soda-lime Glass/borocilicate glass material. ➤ Diamension: <ul style="list-style-type: none"> • 110 to 120mm mm Length • 2.9mm to 3 mm inside Diameter • 7.0mm to 8.0mm outer diameter. ➤ The uniformity of the bore shall be ± 0.1 mm throughout the tube. ➤ The tube shall be graduated from 0 to 105mm ± 0.25 mm in 1- mm divisions and numbered every 1 cm from the inside bottom of the tube. ➤ The tube shall be legibly marked with the manufacturer's or vendor's name or mark and possess a frosted area for marking purposes. ➤ Open at both ends; cotton plugged ➤ Calibration in yellow/white for easy reading. ➤ It should have good chemical resistance towards acids, salt solutions and organic solutions. ➤ Can be easly cleaned with distle water. ➤ It should be autoclavable. <p>Quality Standards:</p>

		<p>➤ The item should be CE certified with marking Manufacturer should be ISO 13485 Certified</p>
35	TC-DCCount apparatus	<p>TC-DC Count apparatus: All metal case housing ,durable ,Chemical resistant easy to clean and disinfect. Stable and wide base with rubber feet Should be 8-Key model with dual reset mount Should have totalizer window Should have WBC maturation series picto-stip chart just above the key window</p>
36	Sickling test kit	<p>Kit consists of R1-2x20ml(Solubility buffer) R2-2 vials (Solubility reagent-Sodium Dithionite) Empty reaction tube-20nos Result reading stand- Reagent dropper-2 Sample dropper-20 Rubber teat-2 Pack insert-1</p>
37	Colorimeter	<p>Digital colorimeter for clinical biochemical test. Digital Colorimeter with auto zero facility displaying test result. Easy operation with auto storage facility of concentration. Wavelength: 410, 470, 490, 520, 540, 580, 610 & 640 nm Photometric range :%of Transmission 0 to 100 Absorbance -0.0 to 1.5 Abs Repeatability ± 0.01 Abs Sample volume:1ml Light source: Halogen/LED *Sample Holder :75 x 12 mm ± 0.5 mm Test tube with 10 mm Path Length With shutter. The manufacturer should be ISO13485 approved Product should be CE certified Product should be safety compliance to IEC 61010</p>
38	Centrifuge machine	<p>Centrifuge Table Top- 4tube GMDN name : Centrifuge 1 USE Clinical purpose: Used in Biochemical and Analytical labs for Hematocrit, blood Corpusule percentage, Serum Analysis, Precipitate Separation and Blood Group matching. Used by clinical department/ward: Analytical Laboratories TECHNICAL 2 TECHNICAL CHARACTERISTICS Technical characteristics (specific to this type of device) "</p> <ul style="list-style-type: none"> • Speed: Maximum Range 3000 to3500RPM • Receptroating Centrifugal force (RCF): 1500 to 1600 • Minimum Capacity: 60ml • Digital Timer range: 0 to 30 minutes with Hold Function • Auto Lid interlock to prevent opening while running centrifuge with emergency lidlock release.

- The lid will be only opened once the motor is completely stop.
 - Digital display of RPM
 - Stainless steel Chamber easy to clean
 - Hinges to prevent door falling
 - Rotor Head Sizes: 4x 15ml. Rotor Head: Angle rotor
- Rotors should be autoclavable
- The unit should be vibration free."
 - Noise level <60dB.

User's interface Manual

Software and/or standard of communication (where ever required) NA

3 PHYSICAL CHARACTERISTICS

Dimensions (metric) NA

Weight (lbs, kg) NA

Capacity 120 ml or above

Noise (in dBA) NA

Heat dissipation Heat Dissipation: Should maintain nominal Temp and the heat should be disbursed through an cooling mechanism Mobility, portability Portable

4 ENERGY SOURCE (electricity, UPS, solar, gas, water, CO2)

Power Requirements "220-240 V/50Hz

Battery operated No

Protection NA

- Power consumption 100 to 200 Watts

5 ACCESSORIES, SPARE PARTS, CONSUMABLES

Accessories (mandatory, standard, optional); Spare parts (main ones);

Consumables / reagents (open, closed system) Rubber

adapter should be provider for the use of vacutainer for 3ml and 5ml

6 ENVIRONMENTAL AND DEPARTMENTAL CONSIDERATONS

Atmosphere / Ambiance (air conditioning, humidity, dust ...)

1) Operating condition: Capable of operating continuously in ambient temperature of 10 to 50 deg C and relative humidity of 15 to 90% in ideal circumstances.

2) Storage condition: Capable of being stored continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90%."

6.2 User's care, Cleaning, Disinfection & Sterility issues

"1) Disinfection: Parts of the Device that are designed to come into contact with the patient or the operator should either be capable of easy disinfection or be protected by a single use/disposable cover.

2) Sterilization not required."

7 STANDARDS AND SAFETY

7.1 Certificates (pre-market, sanitary, ..); Performance and safety standards (specific to the device type); Local and/or international "

1. Should be FDA/CE(From a notified body) as per IVD /BIS approved product.

		<p>2. Manufacturer and Supplier should have ISO 13485 certification for quality standards.</p> <p>3. Certified to be compliant with IEC 61010-1, IEC 61010-2-20 for safety. General requirements” IEC 61010-2-020 “Safety requirements for electrical equipment for measurement, control, and laboratory use - Part 2-020: Particular requirements for laboratory centrifuges” ”</p> <p>8 TRAINING AND INSTALLATION</p> <p>8.1 Pre-installation requirements: nature, values, quality, tolerance ”</p> <p>1) Availability of 5 amp socket;</p> <p>2) Safety and operation check before handover;</p> <p>Requirements for sign-off Certificate of calibration and inspection from the manufacturer</p> <p>Training of staff (medical, paramedical, technicians)</p> <p>1) Training of users on operation and basic maintenance;</p> <p>2) Advanced maintenance tasks required shall be documented</p> <p>9 WARRANTY AND MAINTENANCE</p> <p>Warranty 3 years</p> <p>Maintenance tasks "CMC 5 years 2 PM Visits Annually. All Breakdown calls to be attended within 24 hrs of registration." Service contract clauses, including prices The spare price list of all spares and accessories (including minor) required for maintenance and repairs in future after guarantee / warranty period should be attached;</p> <p>10 DOCUMENTATION</p> <p>Operating manuals, service manuals, other manuals "Should provide 2 sets (hardcopy and soft-copy) of:-</p> <p>1) User, technical and maintenance manuals to be supplied in english/hindi language along with machine diagrams;</p> <p>2) List of equipment and procedures required for local calibration and routine maintenance;</p> <p>3) Service and operation manuals (original and copy) to be provided;</p> <p>4) Advanced maintenance tasks documentation;</p> <p>5) Certificate of calibration and inspection"</p> <p>10.2 Other accompanying documents List of important spares and accessories, with their part numbers and cost;</p> <p>11 NOTES</p> <p>Service Support Contact details (Hierarchy Wise; including a toll free/landline number) "Contact details of manufacturer, supplier and local service agent to be provided;</p> <p>Any Contract (AMC/CMC/add-hoc) to be declared by the manufacturer;"</p> <p>Recommendations or warnings any warning signs would be adequately displayed</p>
39	Vulsellum Uterine	Vulsellum Uterine Forceps curved 25.5 cm
40	Cusco's/Graves Speculum vaginal bi valve	Cusco's/Graves Speculum vaginal bi-valve small size
41	Sims retractor/depressor	Sims retractor/depressor small size
42	Sims Speculum	

	vaginal double ended ISS Medium	Sims Speculum vaginal double ended ISS Medium size
43	Uterine Sound Graduated	Uterine Sound Graduated 10-12"
44	Cord cutting Scissors	Cord cutting Scissors- Size 6 inch double action jaw with round handle. Blunt, curved on flat, 160 mm ss
45	Foetal Doppler	<p>A portable, hand-held, battery-powered device assembly consisting of a measuring and display unit and an attached probe or interchangeable probes designed to noninvasively detect foetal heart beats using ultrasound/Doppler technology.</p> <ul style="list-style-type: none"> • Water proof probes of 2MHz & 3MHz frequency. • Ultra sound Intensity <10mw/ cm², • Auto Shut Of Facility to save Battery Power • Built -in Speaker, Volume Control Facility and Audio Output for Ear Phone • Heart Rate Range should be from 50 to 200 bpm with accuracy of +/-2%. • Should be Water Proof Body, Should have Facility for FHR Data transfer to PC. • LCD display <p>Power Requirements AA batteries Battery operated AA battery type; Minimum Battery Time of 300 minutes.</p> <p>Accessories:</p> <ul style="list-style-type: none"> ▪ AA battery(rechargeable)-2nos <p>2MHz probe-1no</p> <p>STANDARDS AND SAFETY:</p> <ul style="list-style-type: none"> ▪ USFDA or CE(Notified) or UL approved product. ▪ Type B or BF, Performance and safety standards (specific to the device type) ▪ Shall meet IEC-60601-1-2:2007 Medical electrical equipment - - Part 1-2: General requirements for basic safety and essential performance <p>Local and/or international Manufacturer should be ISO 13485 certified</p>
46		<p>Technical Specification 0-760 mm Hg \pm 10 regulable 1/4 HP; single phase motor flutter free vacuum control knob Wide mouthed 1 LITRE (Polycarbonate) with self-sealing bungs and mechanical over flow safety device. Dimensions (metric) : Portable Table top Noise (in dBA) 50 dB A \pm 3</p>

	Suction Machine	<p>Accessories & Spares Collection container & its cap, suction tube tips, a vacuum gauge and control knob.</p> <ul style="list-style-type: none"> • Tubing: 8 mm ID x 2 mtr (PVC) • 1 It polycarbonate jar of Inos <p>Quality Standard: Quoted model should be USFDA /CE certified, ISO 13485:2003; ISO 10079-1- 1999</p>
47	Ambu Bag (Paediatric size) with Baby mask	<ul style="list-style-type: none"> • Manual resuscitator with transparent face-mask • Child models (750ml, & 500ml bag capacity); • Standard 15/22 mm Swivel connector allows connections to all common masks Endo-tracheal Tubes; • Provision to give supplemented oxygen-by-oxygen reservoir providing 100% oxygen; • Non-re breathing valve enabling the patient to inspire oxygen from the reservoir bag. • Should be single hand opera table • Should be easy to dissemble for cleaning and disinfection • Should have pressure release valve at 40cm H2O • Should have silicone oxygen tube 2m length. • 10. It should be upto 40 times autoclavable including bag and washers. • The bag should be made of soft silicone material. • Self-Inflating Resuscitator bag should be of medical grade silicone rubber. • The reservoir should be a PVC bag of 600ml capacity 500ml bag capacity and 1000ml for 750ml bag capacity. <p>1 Accessories (mandatory):- Silicon bellows, Non Rebreathing Valve, 2 meter oxygen tube, Guedel Airway sizes viz 0 and 1, Neonatal Mask of 3 sizes viz 00, 0 and 1</p> <p>STANDARDS AND SAFETY ISO 13485; Manufacturer / supplier should have ISO certificate for quality standard. Should be USFDA / CE (From notified body) approved product or BIS certified</p> <ul style="list-style-type: none"> • should meet ISO 10651-4 standard requirement
48	Dipsticks for urine test for protein and sugar	<p>URINE Complete rapid test reagent strips :</p> <ul style="list-style-type: none"> • Urine Reagent Strips are for in vitro diagnostic use only. • Indications for urine test strips: <ul style="list-style-type: none"> ▪ Screening for prevention ▪ Treatment monitoring ▪ Patient self-testing • Urine Reagent Strips provide tests for the following parameters: <ul style="list-style-type: none"> ▪ Glucose ▪ Bilirubin ▪ Ketone (Acetoacetic acid) ▪ Specific Gravity

		<ul style="list-style-type: none"> ▪ Blood ▪ pH ▪ Protein ▪ Urobilinogen ▪ Nitrite ▪ Leukocytes ▪ Ascorbic Acid in Urine. <ul style="list-style-type: none"> • The Urine Reagent Strips should be packaged along with a drying agent in a plastic bottle with a cap to provide complete air tight. • Each strip should be stable and ready to use upon removal from the bottle. • The entire reagent strip should be disposable. • Results are obtained by direct comparison of the test strip with the color blocks printed on the bottle label. • All the reagent strips should be withstand at a room temperature between 15°-30°C (59°-86°F) and out of direct sunlight. • The minimum self-life of the urine strips should be 1year unopened and minimum 3months once it is opened. • The required controlled shall be provided along with the strip packet. • The strip pack sizes should be of 25/50/100 sizes. • Urinalysis test strips types <ul style="list-style-type: none"> Ketones- Single test <ul style="list-style-type: none"> ▪ Glucose, Protein & pH- Three parameter ▪ Glucose, Protein pH, Leukocytes, Nitrites, Ketones, Bilirubin, Blood, Urobilinogen, and Specific Gravity-10 parameter ▪ Leukocytes and Nitrite-Special parameter <p>Quality Standards:</p> <ul style="list-style-type: none"> • The manufacturer should be ISO 13485 certified. • The strips should be USFDA/CE (IVD) approved. • The strips should be DCGI approved.
Items required for providing Specialty services (Oral Health)		
49	Inter dental cleaning aids	Wooden/plastic Triangular Sticks Inter proximal Brushes
50	Dental Probe	Single Ended with round handle.Made of SS,Handle of size 12mm, and Graduated probe.CPI TN/UNC15 typemade of stainless still 410 /420 grade.
51	Universal tooth extractor	Dental Forceps of standard size foradult use . Straight curvature with Serrated work surface area. Made of Stainless Steel 410 grade. Instrument handle is of English pattern. The set shall be consists of 12 items of universal dimensions.
ENT		
52	Torch	LED focusing torch with chrome/steel ribbed body (medium size) with battery
53	Tongue Depressor	Wooden flat disposable tounge depressor. Box size:100/Box

54	Mouth Gag	Size-5", Finger ring instrument with grip & locking system. Blades of 1" long & 1/4" wide.
55	Mouth Mirror	Angular mirror-2 pieces. To provide indirect vision To retract lips, cheeks, and tongue To reflect light into the mouth. Accurate image from flat surface mirrors, image magnified with concave mirrors. Size of 14mm -22 mm of Plane size. Stainless Steel. Fog free with Flat/round ribbed handle. The mirror shall be made of fiber glass and the handle shall be made of stainless steel 410/420 grade
56	Tuning fork	Nickel-plated steel, material thickness 8 mm, Frequency: 128 Hz / 512 Hz
57	Nasal Speculum (St. Claire's)*	Nasal Speculum of length 3" having two 5mm wide x 11mm long blades.
58	Ear Speculum – metallic, dull finish	Ear Speculum – metallic, dull finish
59	Jobson-Horne probe	Jobson-Horne probe-Curette loop at one end and threaded section at the other end for holding cotton wool Manufactured from carbon filled nylon material to provide better strength and flexibility.
60	Otoscope	<p>Otoscope</p> <ul style="list-style-type: none"> • GMDN name: Otoscope <ul style="list-style-type: none"> ▪ Clinical purpose: An otoscope or auriscope is a hand-held and battery powered device containing illumination and viewing optics medical device which is used to look into the ears. Health care providers use otoscopes to screen for illness during regular check-ups and also to investigate ear symptoms. An otoscope potentially gives a view of the ear canal and tympanic membrane, or eardrum. ▪ Used by clinical department/ ward: ENT • Technical characteristics (specific to this type of device): <ul style="list-style-type: none"> ▪ Battery (3.5v) operated high efficiency Fiber optic LED otoscope with detachable head and handle with high quality optics. ▪ The viewing window with 3x magnification. ▪ Should have on/off button on the handle for illumination, the handle should be made of Solid metal- chrome slip type shock proof. ▪ The light should have minimum colour temperature of 4000k with CRI >90 for Bright and homogeneous illumination with excellent colour rendering. ▪ Should have rotating knob to control the intensity of the otoscope. ▪ The LED lamp life should be more than 10000 hrs. • User's interface: Manual • Software and/or standard of communication (where ever required): NA • PHYSICAL CHARACTERISTICS <ul style="list-style-type: none"> ▪ Dimensions (metric): Hand Held Portable

- Weight (lbs, kg): NA
- Configuration : NA
- Noise (in dBA) : NA
- Heat dissipation: NA
- Mobility, portability : Handheld device
- ENERGY SOURCE (electricity)
 - Power Requirements : NA
 - Battery operated : Yes
 - Tolerance (to variations, shutdowns): NA
 - Protection : NA
 - Power consumption : NA
- ACCESSORIES, SPARE PARTS, CONSUMABLES
 - Accessories (mandatory, standard, optional); Spare parts(main ones); Consumables / reagents (open, closed system)
 - Battery -2nos
 - ✓ Reusable EAR specula of 2mm, 3mm, and 4mm three from each. The specula should be autoclavable.
 - ✓ Storage case (rigid and steady)
- ENVIRONMENTAL AND DEPARTMENTAL CONSIDERATIONS:
 - Atmosphere / Ambiance (air conditioning, humidity, dust ...)
 - ✓ Operating condition: Capable of operating continuously in ambient temperature of 10 to 40 deg C and relative humidity of 15 to 90% in ideal circumstances.
 - ✓ Storage condition: Capable of being stored continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90%.
 - User's care, Cleaning, Disinfection & Sterility issues
Disinfection: Parts of the Device that are designed to come into contact with the patient or the operator should either be capable of easy disinfection or be protected by a single use/disposable cover.
- STANDARDS AND SAFETY
 - Certificates (pre-market, sanitary, ..); Performance and safety standards (specific to the device type); Local and/or international
 - ✓ Product should be USFDA/CE approved
 - ✓ Should have IEC 60601-1/IEC 60601-1-2/CE (EU) certificate;
 - ✓ Manufacturer / supplier should have ISO 13485 certificate for quality standard;
- TRAINING AND INSTALLATION



		<ul style="list-style-type: none"> ▪ Pre-installation requirements: nature, values, quality, tolerance:NA ▪ Requirements for sign-off Certificate of calibration and inspection from the manufacturer ▪ Training of staff (medical, paramedical, technicians) <ul style="list-style-type: none"> ✓ Training of users on operation and basic maintenance; ✓ Advanced maintenance tasks required shall be documented <ul style="list-style-type: none"> • WARRANTY AND MAINTENANCE <ul style="list-style-type: none"> ▪ Warranty: 3 years including bulb ▪ Maintenance tasks <ul style="list-style-type: none"> ✓ Maintenance manual detailing; ✓ Complete maintenance schedule; ▪ Service contract clauses, including prices: The spare price list of all spares and accessories required for maintenance and repairs in future after guarantee / warranty period should be attached. <ul style="list-style-type: none"> ✓ Free servicing (min. 2/year) during warranty period • DOCUMENTATION <ul style="list-style-type: none"> ▪ Operating manuals, service manuals, other manuals Should provide 2 sets(hardcopy) of:- <ul style="list-style-type: none"> ✓ User, technical, maintenance and service manuals to be supplied along with machine diagrams; ✓ List of equipment and procedures required for local calibration and routine maintenance; ✓ Certificate of calibration and inspection; ▪ Other accompanying documents List of important spares and accessories, with their part numbers and cost; • NOTES <ul style="list-style-type: none"> ▪ 11.1 Service Support Contact details (Hierarchy Wise; including a toll free/landline number):Contact details of manufacturer, supplier and local service agent to be provided; ▪ Any Contract (AMC/CMC/add-hoc) to be declared by the manufacturer; ▪ Recommendations or warnings: Any warning signs would be adequately displayed
61	Whole blood finger prick HIV Rapid Test & STI screening test	<p>Intended of Use: The assay should be able to detect antibodies of HIV1, HIV2 and all the subtypes by detection of antibodies by the agglutination/ Enzyme</p> <p>Should be 3rd generation:</p>

		<ul style="list-style-type: none"> • The assay should have sensitivity of 100% or more and specificity of 100% or more as per data from an identified national reference laboratory. • The assay should have solid phase/ particles coated with synthetic and/ or recombination or both types of antigens of HIV1 & HIV2. • Total procedure time should not be more than 30 minutes. • The manufacturers should ensure that: <ul style="list-style-type: none"> ▪ The test kit should be packed such that there is a provision to conduct single test at a time; ▪ The assay components should include HIV positive and negative serum controls sufficient for conducting 20% of the tests (10% negative and 10% positive controls); and ▪ The pack size of HIV rapid test kits should be 30 tests per Kit. • The manufacturer should be ISO 13485 certified. The strips should be USFDA/CE (IVD) approved. The strips should be DCGI approved.
62	Typhoid rapid test kit	<p><u>Widal test KIT</u> <u>The test kit should have the following configuration</u></p> <p>1. 'O' Antigen 5ml 2 'H' Antigen 5ml 3 AH' Antigen 5ml 4 BH' Antigen 5ml 5 Positive control 5ml 6 Negative control 5ml 7 Test Serum Sample 2 ml 8 Glass Slide 1 No.RT 9 Disposable Mixing Sticks</p> <ul style="list-style-type: none"> ➤ Result should be within 3 minutes ➤ Homologues antigen antibody reaction with no cross reactivity with other salmonellar groups ➤ High specificity:98% ➤ Higher sensitivity:98% ➤ Self-life 1 year
63	Rapid test kit for Hepatitis B & C	<p>Intended Of Use: HBsAg/HCV Ab Rapid Test is a lateral flow chromatographic immunoassay for the qualitative detection of Hepatitis B surface antigen (HBsAg) and anti-Hepatitis C virus antibodies (IgG, IgM, IgA) in human serum, plasma and whole blood. It is intended to be used as a screening test and as an aid in the diagnosis of infection with Hepatitis B virus (HBV) and Hepatitis C virus (HCV).</p> <ul style="list-style-type: none"> ➤ Should be immunoassay/capture principle ➤ Should be lateral flow device ➤ Should have in built quality control band or dot ➤ Should have short interpretation time not more than 10 minutes ➤ Should have specificity and sensitivity of 100% ➤ Must be evaluated and approved by NIB <p><u>Kit Configuration</u></p>

		<ol style="list-style-type: none"> 1. Diagnostics Rapid Card 2. HBsAg colloidal gold rapid test strips, each placed in white plastic cassette and packed in foil pouch. 3. Instructions for use. 4. 1 vial of sample diluent. <p>Sensitivity 100 % Specificity 100 %</p>
64	Digital Stop Watch	<p>Should have plastic body Should be battery operated Should be supplied with neck cord Should have normal time display with hour,minute,second with stop watch function Should be water resistant Should have illuminator for clear visibility Warranty one year</p>
65	HBNC KIT BAG	<p>Appropriate size(made of rexin/tetron) to accommodate all the three terms The Bag should have coper operating with Zip facility Should have handle to carry The logo NRHM and the title HBNC equipment kit,Govt of Odisha Supply,Not for sale should be printed on the Bag</p>



SECTION -V

ANNEXURES

**(Technical Bid, Price Bid, Agreement,
Undertaking)**

CHECK LIST



ANNEXURE -I

(To be submitted in Cover A Technical Bid)

Note : The documents has to be arranged serially as per the order mentioned in the check list

Please put in the respective box

COVER – A (TECHNICAL BID)

DOCUMENTS : SUBMITTED OR NOT

1. List of Item (s) – Annexure II

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

2. Tender document Fee

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

3. Earnest Money Deposit

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

4. Details of Manufacturing Unit / contract person
Liaisoning agent / servicing centre (Annexure III)

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

5. Declaration form (Annexure -IV) signed
by the Bidder & affidavit before
Notary Public / Executive Magistrate

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

6. Manufacturer's Authorization Format
(Annexure – V)

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

7. Proof of avg. Annual turnover of Rs 5.00 crore/
or more With audit Report last
3 financial years (Annexure - VI)

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No.	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	-----	--------------------------

8. Performance Statement (Item wise)
With user certificate during the

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

last two year(Annexure -VII)

9. Copies of Purchase order (Item wise)
in support of the performance statement

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

Page	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
------	--------------------------	-----	--------------------------	----	--------------------------

10. Deviation/No deviation Statement (Item wise) & details of technical specification (Annexure –VIII A & B)

11. Copy of Manufacturing License / import license

Page		Yes		No	
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12. Copy of Valid ISO Certificate ,BS OHSAS ,Test Report as required

Page		Yes		No	
------	--	-----	--	----	--

13. Attested Photocopy of Up-to-date CE / US FDA/BIS Certificate (Item wise) (As per technical specification)

Page		Yes		No	
------	--	-----	--	----	--

14. Attested Photocopy of Up-to-date IEC Certificate (As per technical specification)

Page		Yes		No	
------	--	-----	--	----	--

15. Photocopy of PAN & GST certificate

Page		Yes		No	
------	--	-----	--	----	--

16. Photocopy of last IT return last 3 years

Page		Yes		No	
------	--	-----	--	----	--

17. Copy of original Tender and schedules, duly Signed by the Bidder

Page		Yes		No	
------	--	-----	--	----	--

Annexure II

(To be submitted in *Cover A -Technical Bid*)

DETAILS OF THE BIDDER & LOCAL CONTACT PERSON

	Corporate Office (The address in which the purchase orders and payment details will be communicated)	Local Contact Person / Branch Office / Zonal Office / Service Centre if any, in Orissa.
Name & Full Address		
Telephone Nos., landline		
Mobile		
Fax		
E – Mail		
Date of Inception	Copy of Certificate of incorporation of Manufacturer)	
Manufacturing License Nos. & Date	Copy of manufacturing licence of Manufacturer)	
Name of the issuing authority		
License valid up to		

Signature of the Bidder:

With seal

Date :

Official Seal :

ANNEXURE – IV

(To be submitted in *Cover A -Technical Bid*)



DECLARATION FORM

I / Wehaving
My / ouroffice
at.....do declare that I / We have
carefully read all the terms & conditions of tender of the _____, Orissa for the
supply of medical equipments. The approved rate will remain valid for a period of one year
from the date of approval. I will abide with all the terms & conditions set forth in the Tender
Reference no. _____

I/We do hereby declare I/We have not been de-recognised / black listed by any State
Govt. / Union Territory / Govt. of India / Govt. Organization / Govt. Health Institutions for
supply of Not of Standard Quality (NSQ) items / non-supply.

I/We agree that the Tender Inviting Authority can forfeit the Earnest Money Deposit
and or Security Deposit and blacklist me/us for a period of 5 years if, any information
furnished by us proved to be false at the time of inspection / verification and not complying
with the Tender terms & conditions.

I/We further declare that I/We possess valid manufacturing license (s) bearing No. (s)
.....Valid upto I / We
..... do hereby declare
that I / we will supply the _____ as per the terms, conditions & specifications
of the tender document. I / we further declare that I / we have a service centre / will establish
a service centre within one month of installation of the equipment in Orissa.

Signature of the bidder :

Seal

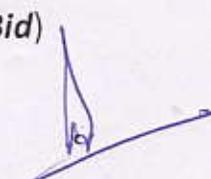
Date

Name & Address of the Firm:

Affidavit before Executive Magistrate / Notary Public.

ANNEXURE - V

(To be submitted in **Cover A - Technical Bid**)



MANUFACTURER'S AUTHORISATION FORMAT

To

The CDMO, Koraput
Deptt. of Health & Family Welfare
Govt. of Orissa.

Ref: Tender No. _____ Dated _____ for _____.

Dear Sir,

We, _____ are the manufacturers of _____

_____ (name of equipment(s) having factories at _____
_____.

1. Messrs _____ (name and address of the agent) is our authorized agent for sale and service of _____ (name of equipment(s))
2. We confirm that Messrs. _____ (name of the above agent) is authorized to submit a tender, and enter into a contract with for the above goods manufactured by us.
3. We also extend our full guarantee / warranty and also full back-up support for AMC/CMC as required by the purchaser.

Yours faithfully,

(Signature with date, name and designation)

For and on behalf of Messrs _____

(Name & address of the manufacturers)

Seal

Note : This letter should be on the *letterhead* of the *manufacturer* and should be signed by a person having the power of attorney to legally bind the manufacturer.

1. Original letter shall be attached to the technical bid.

(To be submitted in Cover A -Technical Bid)



(To be furnished in the **letter head** of the Auditor)ANNUAL TURN OVER STATEMENT

The Annual Turnover for Equipment products of

M/s _____ who is a

manufacturing unit for the last three years are given below and certified that the statement is true and correct.

Sl.No.	Year	Turnover in Crores (Rs.)
1.	2015 - 2016	-
2.	2016- 2017	-
3.	2017- 2018	-

Avg. Annual Turnover (for the above three years) in Crores

(Rs.) _____

Date:

Signature of Auditor/

Place:

Chartered Accountant

(Name in Capital)

Seal

Membership No.-

Registration No. of Firm

Note:

- a) To be issued in the **letter head** of the Auditor. **Separate certificates** should be furnished for different manufacturer in case the bidder is quoting products of different manufacturers.



(To be submitted in Cover A - Technical Bid)

Annexure VII

PROFORMA FOR PERFORMANCE STATEMENT

Tender Reference No. :

Name of Bidder :

Name of Manufacturer :

Name of the Item (s) :

Sl.	Order placed by (Address of purchaser) (attach documentary proof)*	Order no. & Date	Item Name	Make & Model	Qty	Value of Contract (Rs.)	Date of Completion		Reasons for delay if any	Have the goods been functioning satisfactorily (attach documentary proof)**
							As per contract	Actual		
1										
2										
..										
..										

Signature and seal of the Tenderer

* The documentary proof will be **copies of the purchase order** (during the last 2 years or more) indicating Contract No. and date along with a notarized certification (by the bidder) authenticating the correctness of the information furnished. ** The documentary proof will be certificate from the consignee/end user indicating Contract No. and date along with a notarized certification (by the bidder) authenticating the correctness of the information furnished.

(To be submitted in *Cover A -Technical Bid*)

Annexure VIIIA

STATEMENT REGARDING DEVIATIONS FROM TECHNICAL SPECIFICATIONS (IF ANY)

Following are the Technical deviations and variations from the purchaser's Technical Specifications.

Sl. No.	Item Name	Clause of Technical Specification	Statement of Deviations / Variations if any
1			
2			
..			
..			
..			

In case there is no deviation from technical specification, Pl. Mention **No Deviation**.

Signature of the Bidder

Name :

Date :

Place :

Seal

(To be submitted in *Cover A -Technical Bid*)

DETAILS OF TECHNICAL SPECIFICATION OF THE PRODUCT OFFERED BY THE BIDDER

Sl. No.	Item Name	Make	Model	Detail Specification of the product offered* (Pl. Describe the detail specification of the product offered)
1				
2				
..				
..				
..				

* Leaflets/Technical Brocheures of the product offered must be attached in support of the information provided above.

Signature of the Bidder

Name :

Date :

Place :

Seal

ANNEXURE IX

(To be submitted in COVER B - PRICE BID)

A handwritten mark in blue ink, possibly a signature or initials, consisting of a vertical line, a horizontal line, and a diagonal line.

To be submitted in *Cover B – Price Bid*

MODEL TENDER FORMAT (PRICE SCHEDULE)

Name of the item	Make/ Model	Price without GST (Rs)	Rate of GST (%)	Amount of GST (Rs)	Total Price of GST (Rs)

Note: Comparison will be made on unit price with out GST

Signature of the Bidder

Date:

Place



2

AGREEMENT

THIS AGREEMENT IS MADE AT _____ THIS THE DAY OF _____ 201__

BETWEEN

Name of the Supplier
with full address

Here in after called the "Supplier(s) _____" as 1st Party

AND

The C.D.M.O/C.M.O / M.O, I/c
Health & F.W. Department
Represented through the

_____ / **THE CONSIGNEE**
Hereinafter called the "PURCHASER" _____ as 2nd Party.

Relying on the documents and representation of facts connected to the issue of aforesaid parties to undertake the responsibilities of sell and purchase of following equipment(s) etc. with the terms & conditions hereinafter laid down.

And whereas the 2nd party "Purchaser(s)" is willing to purchase

Name of the Item:

Specifications: As per specifications laid down in the Tender terms & conditions

The Supplier(s) has agreed to sell the equipment(s) completed in all respects according to the Tender requirements and their / his offer dtd. _____ and the Supplier(s) has also agreed to install to make them operative at the destination mentioned in the Tender document with the following descriptions and their cost mentioned against each.

<u>Description of goods:</u>	<u>Offered Price</u>	<u>Total</u>
------------------------------	----------------------	--------------

The price / cost of the item also include the followings in addition to above.

1. Insurance
2. Freight
3. Transportation
4. Customs duty / Excise duty
5. Charges for documents, instructions manual, tools
6. F.O.R. at the destinations mentioned in the consignee list
7. Training to doctors & technicians.
8. Maintenance of the system includes all accessories supplied and their spare parts required during comprehensive warranty period of two year at free of cost from the date of successful installation and satisfactory functioning of the system at the site.
9. Installation and commissioning of the system by the Supplier's engineer at site.
10. Any other charges including loading & unloading, packing & forwarding etc. will be paid by the Supplier(s) till the completion of the installation and turnkey job if any.


48

TERMS AND CONDITIONS:-

PRICE:

Only the price quoted by the Supplier(s) in his / their financial proposal will be the price for payment and no other price escalation will be allowed at any circumstances.

TERMS FOR PAYMENT:-

- A. The payment(s) shall be made by purchaser in Indian currencies No advance payments towards cost of Instruments and Equipments etc. will be made to the Bidder. No payment will be made to the supplier if he has not deposited the unconditional performance security in shape of Bank draft amounting to 10% of the purchase order value which will be deposited in RKS / ZSS fund of Koraput with the warranty for 2 years agreement to the consignee.
- B. Before release of payment the supplier has to submit his signed agreement, warranty documents of equipment. The undertaking as per Annexure – XI & XII will also be submitted to the consignee with photocopies to the purchaser.

TERMS OF CONTRACT :

The C.D.M.O/C.M.O will be at liberty to terminate the contract either wholly or in part without assigning any reason. The Bidders will not entitled to any compensation whatsoever in such terminations.

PENALTIES :

If the successful Bidder fails to execute the agreement and / or deposit the required security within the time specified or withdraws his tender after acceptance of his tender owing to any other reasons, he is unable to undertake the contract, his contract will be cancelled and the Earnest Money Deposit deposited by him along with his tender shall stand forfeited and he will also be liable for all damages sustained by the C.D.M.O/C.M.O by reasons of such breach, such as failure to supply / delayed supply including the liability to pay any difference between the prices accepted by him and those ultimately paid for the procurement of the articles concerned. Such damages shall be assessed by the C.D.M.O/C.M.O whose decision is final & binding in the matter.

If any articles or things supplied by the Bidder have been partially or wholly used or consumed after supply and are subsequently found to be in bad order, unsound, inferior in quality or description or are otherwise faulty or unfit for consumption / use & rusted then the contract price or prices of such articles on full will be recovered from the tenderer, if payment had already been made to him or the Bidder will not be entitled to any payment for that item & no further order will be given to him. For infringement of the stipulations of the contract or for other justifiable reasons, the contract may be terminated by the C.D.M.O/C.M.O and the Bidder shall be liable for all losses sustained by the C.D.M.O/C.M.O in consequence of the termination which may be recovered from the Security Deposit made by the Bidder or other money due or become due to him.

Supply of sub-standard items or non - performance of tender terms & conditions will disqualify a firm to participate in the tender for the next five years.

ARBITRATIONS :

In the event of any dispute out of the contract, such dispute should be subject to the Jurisdiction of the Civil Court, Dist. Koraput or High Court, Orissa.

CHANGE OF TERMS AND CONDITIONS :



Any amendment to the terms & conditions and clauses of the agreement if required must be done in writing duly signed by the two parties.

IN WITNESS WHERE OF the parties herein to have set and subscribed their respective hands the day and year first herein above written.

Executed by Purchaser (s) / Consignee

Executed by Supplier(s)

In presence of (Witness)

In presence of (Witness)



WARRANTY / GUARANTEE / UNDERTAKING
(to be submitted on Rs.100/- stamp paper)

Tender ref. No. _____

Name of the equipment:

Date of Installation:

Name of the Consignee:

Name of the purchaser:

I / we / M/s _____

hereby declare that

- i. I / we do Accept / Agree for the warranty / guarantee (2 years Warranty followed) as per this tender clause .I / we will not charge / quote any extra price on account of the above said warranty / guarantee.
- ii. The 2year comprehensive warranty is valid from dt. _____ to dt. _____

Date:

Place:

Signature of the competent authority

on behalf of the company / firm.

Seal of the firm.

N.B: 1. To be attested by Notary Public

2. Only to be submitted by the approved supplier / Bidder to the consignee and a copy to the purchaser before release of payment.



UNDERTAKING

(To be submitted on Rs.100/- stamp paper)

Tender ref. No. _____

Name of the equipment:

Date of Installation:

Name of the Consignee:

Name of the purchaser:

Sir,

I / we _____ hereby
declare that

1. I / we am / are the manufacturers / authorized agents / distributors of _____
_____.
2. I / we do accept / agree for the all clauses including the warranty 2 years I / we do hereby confirm that the prices / rates quoted are fixed and are at par with the prices quoted by me / us to any other Govt. of India / Govt. of Orissa Hospitals / Medical Institutions. I / we also offer to supply the stores at the prices and rates not exceeding those mentioned in the price bid.
3. I / we agree to abide by my / our offer for a period of 365 days from the date of approval of the tender.
4. I / we have necessary infrastructure for the maintenance of the equipment and will provide all the accessories / spares as and when required.
5. I / we also declare that in case of change of Indian Agent or for any other change, merger, dissolution solvency etc. in the organization of our foreign principles, we would take care of the Guarantee / warranty / maintenance of the machinery / equipment and have provided written confirmation for the same.
6. I / we shall provide assistance to the consignee in clearance and delivery of store at consignee's stores / premises.
7. The demurrage / storage charges, if any, payable to the customs department, due to non-receipt of required documents in time by the hospital / delay due to incorrect entries, mistakes to the documents etc. shall be borne by me / us.



8. I / we have carefully read and understood all the terms and conditions of the tender and shall abide by them.
9. I / we undertake to get the equipment's repaired within 48 hours of receiving of the complaint from the indenting hospital / consignee failing which a penalty @ 1% of the cost may be recovered from the performance security. before releasing the same after completion of warranty period.

Signature of the witness
Name & address

Signature of the Tenderer
Name & address

Dated

Seal of the firm.

10. **N.B:** 1. To be attested by Notary Public.
11. 2. Only to be submitted by the approved supplier / Bidder to the consignee and a copy to the purchaser before release of pay



Section B

**CHIEF DISTRICT MEDICAL OFFICER
KORAPUT**

Tel: 06852-252064

Tender Reference No. CDMO/2018-19/_____/_____

**TENDER DOCUMENT
FOR
SUPPLY OF DRUGS & CONSUMABLES, AIDS
& APPLIANCE FOR SC**

Address for Correspondence- Office of the
Chief District Medical Officer Koraput
At/Po-Koraput, Dist- Koraput, Odisha
Pin-764020.



09

SECTION -II

IMPORTANT INSTRUCTIONS TO BE NOTED CAREFULLY BY THE TENDERERS

1.	Purchaser	Health & F.W. Department
2.	Indenter	Chief District Medical & Public Health Officer, KORAPUT
3.	Consignee	DHH KORAPUT
4.	Delivery Period	Within 15 days from issue of the work order.
5.	Mode of Delivery	By Air / Road / Rail/by Hand
6.	Guarantee / Warranty	NA
7.	EMD	Rs.10, 000.00 (Rupees Ten Thousand) only. The Earnest Money Deposit will be paid in the shape of demand Draft only in favour of CDM&PHO KORAPUT from any Nationalized/Scheduled Bank payable at KORAPUT



SECTION III

TERMS & CONDITIONS FOR SUPPLY OF EQUIPMENTS & CONSUMABLES UNDER NCD

- Sealed tenders will be received by Dated **31.01.2019, 1.00 P.M.** Tender for Supply of Chemical & Consumables for the year 2018-19 by the CDM&PHO, KORAPUT in the office of the Chief District Medical & Public Health Officer, KORAPUT. Any tender received after the due date & time will be rejected & returned to the sender unopened. **The tender paper will be received through Regd. Post / Speed Post/ Courier only.**
- The bidder(s) are to submit their tenders in **separate** sealed covered envelopes for **technical bid** and **commercial bid** by superscribing **Cover "A" (Technical Bid) & Cover "B" (Price Bid)** and both the sealed covers should be put into a **third outer Cover**, which should be superscribed as **"Tender for Drugs & Consumables, Aids & Appliances for SC under NCD for the year 2018-19"**.
- The Sealed tenders "Cover A" (Technical Bid) submitted by the tenderers will be opened by the CDM&PHO, KORAPUT in the office chamber of the CDM&PHO, KORAPUT at **5.00 P.M on 31-01-2019**. The tenderer or their duly authorized representatives are allowed to be present during the opening of the tenders if they so like.

ELIGIBILITY CRITERIA

Manufacturing units / Importers/ Authorised Suppliers are eligible to participate in the tender provided, they have

- (i) The tenderer must submit GST Certificate along with the upto date GST Return certificate upto March 2018
- (ii) Photo copy of PAN must be submitted by the tenderer
- (iii) Income Tax clearance certificate for last three FY.
- (iv) An under taking must be submitted by the tenderer that items will be supplied to the consignee along with the test report within 15 days from the issue of the purchase order.

- (v) Should submit the Manufacturing License/Import License/Authorization Certificate in case of the case may be.
- (vi) Drug Licence certificate in case of drugs & consumables items.
- (vii) Should submit the registration Certificate
- (viii) Should submit the proof of supply to Govt. Hospitals for last Five financial year, at least minimum five order copy for each year.
- (ix) Should submit the Proof of Average annual turnover of the manufacturing firm Importer/Authorized supplier or distributor/bidder of Rs.1(One) Crore or more in last three (3) financial years should be submitted duly prepared and certified by a chartered accountant.
- (x) Should have metrological certificate in case of weighing scale.
- (xi) ISO certificate/IEC/BIS quoted against each item.

The following documents should be enclosed in Cover "A" (Technical Bid) by the tenderer. All the photocopies are to be attested by self with official seal.

TECHNICAL BID :

1. Checklist with detail of the documents enclosed in Cover "A" (as per Annexure - I)
2. Earnest Money Deposit of Rs. 10000/- (Rupees Ten Thousand) only (refundable). If the bidder qualified in technical bid the EMD will be returned after One Year and if the bidder is not qualified in technical bid the EMD will be refunded at the same day.
3. Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor /Supplier/ contract person / office in Odisha (Annexure - II).
4. Copy of GST Certificate along with up to date GST return certificate upto March 2018.

Declaration Form (Annexure - III)

Name of the items quoted(Annexure IV)

7. Undertaking regarding items should be supplied to the FOR destination within 15 day.
8. Tender Paper Cost Rs.1180/- in shape of Demand Draft..
9. Photo Copy of manufacturer's Authorization Certificate.
10. Photo copy of registration Certificate.
11. Photo copy of PAN,IT Return for last three FY,
12. ISO/IEC/BIS/Metrological certificate
13. Drug license incase of Drugs & Consumable items
14. Proof of supply to Govt. Hospitals for last Five financial year, at least minimum five order copies for each year.

3.13 Certificate duly filled by the Auditor / Chartered Accountant that the average annual turnover of the bidder is Rs.1 (One) Crore or more in the last 3 (three) financial years.

3.12 Sample of small equipment may be produce at the time of technical bid.



COVER – B (PRICE BID)

4. The tender format giving the quoted rate for Drugs and medical consumables should be sent in a separate sealed cover hereafter called **Cover "B" (Price Bid)**.

Cover –B (Price Bid) will be opened only of the tenderers who qualify in Technical Bid (Cover – A) and product is as per tender specification.

The tender format (Price Schedule) in the prescribed form (as per Annexure – V), hard copy must be submitted in Cover-B. **The price of the item should be quoted exclusive of tax with door delivery**

The Cover "B" of successful tenderers who qualifies in their technical bid, will be opened at the office chamber of the C.D.M.& P.H.O, KORAPUT by the C.D.M.& P.H.O, KORAPUT on the same day/ decided by the purchase committee members in the presence of the tenderers or their authorized representatives

NB: At the time of supply the Chemical & consumables the

1. Price should be omitted from the Primary and secondary packing
2. Odisha Govt. Supply Not for Sale should be printed on Primary and secondary packing.

Analytical Test report of each batch should be submitted



CHECK LIST
(To be submitted in **Technical Bid**)

Note : The documents has to be arranged serially as per the order mentioned in the check list

Please put \surd in the respective box

COVER – A (TECHNICAL BID)

DOCUMENTS : SUBMITTED OR NOT

- | | | | |
|---|-----------------------------------|------------------------------|-----------------------------|
| 1. Demand Draft of Rs.1180/- towards Tender Paper Cost | Page <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Earnest Money Deposit Rs. 10000/- | Page No. <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor contract person /Supplier . Annexure - II | page No. <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Photocopy of PAN | Page <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Photocopy of GST certificate | Page No. <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. Photocopy of Drug License | Page No. <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7. Photocopy of ISO/IEC/BIS /Metrological certificate | Page No. <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 8. Declaration Form (Annexure – III) | Page No. <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 9. Undertaking | Page No. <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 10. Photocopy of Registration certificate | page <input type="checkbox"/> | yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 11. Registration Certificate | Pag <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 12. Authorization Certificate | Page <input type="checkbox"/> | yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 13. Proof of supply to Govt Hospital | Page <input type="checkbox"/> | yes <input type="checkbox"/> | No <input type="checkbox"/> |



(Five Order Copies each last five Financial Year.

Page		Yes		No	
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14. Up to date GST Return Certificate .

Page		Yes		No	
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15. Average annual turn over 1 crore for last 3 financial year

Page		Yes		No	
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(To be submitted in Cover A - Technical Bid)

DETAILS OF THE TENDERER & LOCAL CONTACT PERSON

	Corporate Office (The address in which the purchase orders and payment details will be communicated)	Local Contact Person / Branch Office / Zonal Office / Service Centre if any, in Odisha.
Name & Full Address		
Telephone Nos., landline		
Mobile		
Fax		
E - Mail		
License valid up to		

Signature of the Tenderer :
with seal

Date : Official

Seal :



(To be submitted in Cover A -Technical Bid)

DECLARATION FORM

I / Wehaving My/
our.....office
at.....do declare that I / We have carefully
read all the terms & conditions of tender of the _____, Odisha for
the supply of BCL, Chemical, Drugs & Medical Consumables. The approved rate
will remain valid for a period of one year from the date of approval. I will abide
with all the terms & conditions set forth in the Tender Reference no. ____

I/We do hereby declare I/We have not been de-recognised / black listed
by any State Govt. / Union Territory / Govt. of India / Govt. Organization / Govt.
Health Institutions for supply of Not of Standard Quality (NSQ) items / non-
supply.

I/We agree that the Tender Inviting Authority can forfeit the Earnest
Money Deposit and or Security Deposit and blacklist me/us for a period of 5 years
if, any information furnished by us proved to be false at the time of inspection /
verification and not complying with the Tender terms & conditions.

Seal

Signature of the bidder :

Date :

Name &

Address of the Firm: Affidavit before Executive Magistrate /

Notary Public.



Section IV

Technical Specification of the Items under NCD:

Items	Specifications
<p>Glucometer</p>	<p>GLUCO METER Description of Function: A glucose meter (or glucometer) is a medical device for determining the approximate concentration of glucose in the whole blood.</p> <p>Product Quality Standards: <input type="checkbox"/> Should be USFDA/CE (Notified) of the quoted model <input type="checkbox"/> Manufacturer should be ISO certified for quality standards.</p> <p>Technical Specifications <input type="checkbox"/> Strip Ejector Facility device is required . <input type="checkbox"/> Small, portable and user friendly device is required. Blood should not go into the glucometer while measurement. <input type="checkbox"/> It should be able to measure whole blood in capillary mode. <input type="checkbox"/> Minimum analytical range: 30 – 600 in mg/dl. <input type="checkbox"/> Accuracy should be as per International Standard ISO 15197- Requirements for blood-glucose monitoring systems for selftesting in managing diabetes mellitus. <input type="checkbox"/> Reproducibility/Precision: +/- 5% <input type="checkbox"/> Display should be 43mm+ 5 mm measured diagonally. <input checked="" type="checkbox"/> It should be battery operated electronic system and the battery life should be for at least 1000 tests. <input type="checkbox"/> Shelf life of strips: Minimum 12 months at the time of delivery to consignee. <input type="checkbox"/> Packing of strips: not more than 50 strips in a pack. Strips should work min. 3 months after opening of strips pack. <input type="checkbox"/> Control solution for checking reliability of strips will be supplied free of cost as & when required. <input type="checkbox"/> Ready availability of reagent test strips, battery & other consumables across Odisha for at least 5 years. <input type="checkbox"/> Machine should be supplied with lancing device of 2nos. <input type="checkbox"/> Machine should have 4 yrs. of replacement warranty.</p> <p>Equipment Configuration: 1- Glucometer-1no 2- Lancing Device-2no 3- Standard batteries-1Set 4-Carrying case-1 5-Instruction manual 6-Warranty card</p> <p>Consumables: 1. 115 nos. single use auto-disabled lancets in multi packs. 2. Test strips -100 nos. in two packs 3. Control strip.</p>

Weighing Scale(Adult)	<ul style="list-style-type: none"> ➤ Sturdy dial type mechanical platform weighing machine for adult and children. ➤ Zero adjustment facility should be there. ➤ Sensitivity: 500 gm ➤ Range of weighing : 0-120 kg ➤ The manufacturer shall have the valid manufacturing license and should have model approval by the legal metrological Deptt. And the weighing scale must be stamped by the by legal metrological Deptt. in case of distributor, the bidder should have valid distributor and repair license from legal metrological Deptt., Govt. of Odisha. ➤ ISO 9001 certified manufacturer (Certificate to be submitted) <p>Warranty: 1 year</p>
Baby Weighing Scale	<p>Technical Specification:</p> <ul style="list-style-type: none"> • Should have tough Nylon Plastic(Black) Body with demonstration photos in white clor • Capacity: Maximum Load capacity should be 5 K.g • Eacg product should be stamped by Weight & Measurement Departmenet. • Should have color coded reading scale • Should have zero adjustment. • Should have inbuilt overload protection. • Minimum Graduation should not be less than 100gms. • Scale should be fitted with approx 3* rod handle with non corrosive metallic ring on top and S shaped hook at the bottom for suspending the sling bag • Spring used in the scale should be made of heavy duty steel spring non corrosive grade II • Sling bag should be made of double stitched though &tear assistant 100% polyester to weight the baby(with load carrying capacity of at least 7 Kg. • Sling Bag width at the middle of the bag 24*.Two nos. sling bag should be provided in each baby weighing scale. • The bidder must have model approval copy by the legal metrology department.
Height Measuring Aparatus	<ul style="list-style-type: none"> ➤ Height Measuring Scale ➤ Floor model with mechanical weighing scale ➤ Measuring range: 20-205 cm ➤ Manufacture must be ISO certified.
Ophthalmic services	
Snellen vision chart	Snellen vision chart
Near vision chart	Near vision chart
OTHER	
NSV KIT	
IUCD KIT	
MINILAP KIT	
PPIUCD FORCEPS	
AID&APPLIANCE FOR S/C	

WALKING STICKS	frame -alluminium powder coated /alluminium anodised Soft handgrips Plastic min Height -85 CM Maxc height -95 cm Weight .300 to .400Kg Capacity 50 Kg
WALKER(ORDINARY)	WALKER IS EQUIPIED WITH AN ALLUMINIUM BODY WHICH SUPPORT FOR WALKING CAN BE EASILY FOLDED(ADJUSTABLE HEIGHT)
COMMODE CHAIR	FRAME ALLUMUNIUM POWER COATED FITTED WITH CAN BE EASILY FOLDED
BED PAN	MADE UP STAINLESS STEEL.

Drugs & Consumables for National Tobacco Programme

Category	Type of Drugs
NRT	Nicotin Gums
	Nicotin Gums
	Nicotin Patch
Non NRT	Bupropion Hydrochloride
	Varenicline Tartrate

DRUGS & CONSUMABLES FOR NATIONAL PROGRAMME BLINDNESS PROGRAMME

01	Inj Adrenalin	250
02	Acetone 500ml	50 bot
03	Intra Ocular Lens (IOL)	1000
04	Inj ViscoElastic(Aurovisc/Apavisc/Irimist v/Hymolose)	400
05	Eye Drop Tropicamid + Phenylpherin	200
06	26 G Needle(Dispo)	2000
07	24 G Needle (Dispo)	1500
08	SICS Blade Crecent 2.6	250
09	SICS Blade Keratome 2.8	150
10	SICS Blade 15* side port	100
11	Eye Drop Cyclopentolet	1000
12	Inj Hynidase (Hyaluronidase)	120
13	Inj Lignocaine + AD 30 ml	200
14	Inj Sensoricaine (Bupivacine 0.5% /20 ml	120
15	Inj Decadron 2 ml	300
16	Eye Drop Moxifloxacin + Predinosolone 10 ml	1200
17	Inj Trypan Blue	150
18	Inj Pilocarpin	50
19	Eye Drop Timolol Meliate0.5%	50
20	Liquid Antiseptic Shop 500ml Bottle	20
21	Eye Drop hypersol 5	50

SI No	Name of the Medicines & consumables	Quantity Required
01	Conjunctiva Scissor (micro)	20
02	Vanus Scissor(Angeled)	10
03	Vanus Scissor(Straight)	10
04	Limbs	20
05	Mac Fercen Forceps	20
06	Mac Fercen Forceps(Pointed Tip)	20

07	Lens Dialer	10
08	Symco Canula	20
09	Irrigating vectis	20
10	Capsulectomy Forcep	10
11	Micro Needle Holder (curved)	10
12	Suture Tying Forcep	10
13	Tooth Forcep	10
14	Ellectric Cauty machine	1
15	Cauty Prob	4
16	Cauty Prob Wire	2
17	Superior Rectus Needle	20 pkts
18	OT Gown	20 nos
19	OT Towel	100 nos
20	Cap	20 nos
21	Mask	20 nos

SI No	Name of the Medicines & consumables	Quantity Required
01	Conjunctiva Scissor (micro)	20
02	Vanus Scissor(Angeled)	10
03	Vanus Scissor(Straight)	10
04	Limbs	20
05	Mac Fercen Forceps	20
06	Mac Fercen Forceps(Pointed Tip)	20
07	Lens Dialer	10
08	Symco Canula	20
09	Irrigating vectis	20
10	Capsulectomy Forcep	10
11	Micro Needle Holder (curved)	10
12	Suture Tying Forcep	10
13	Tooth Forcep	10
14	Ellectric Cauty machine	1
15	Cauty Prob	4
16	Cauty Prob Wire	2
17	Superior Rectus Needle	20 pkts
18	OT Gown	20 nos
19	OT Towel	100 nos
20	Cap	20 nos
21	Mask	20 nos

MEDICINE REQUIRED UNDER MENTAL HEALTH PROGRAMME

01	Olanzapine 5 mg	600
02	Trihexiphenidyl 2 mg	600
03	Amisulprid 100 mg	600
04	Clonazepam 1 mg	200
05	Clonazepam 0.5 mg	200
06	Clonazepam 2 mg	200
07	Escitalopram 10 mg	200
08	Sodium Valprode 300 mg	200
09	Sodium Valprode 500 mg	200
10	Donepezil Hydrochloride 5 mg	200
11	Donepezil Hydrochloride 100 mg	200

Section V

Price Bid Format

SI NO	Name of the items	Price per unit	Rate of GST	Total Price

