OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, KANDHAMAL

E-Mail: cdmophulbani@gmail.com,
Phone / Fax No- 06842-253249

****

No. 6589 Phulbani Dated 07 / 06 /2018
DWH / 38 / SNCU – EI / 18-19

To

The Director,
I & PR Department, Govt. of Odisha
Lok Sampark Bhawan, Bhubaneswar
E-mail id: ipr.advt@gmail.com / iprenews@gmail.com

Sub: **Publication of the advertisement related to supply & installation of Equipment & Instrument to Kandhamal district.**

Sir,

Please find here with a specimen copy of the advertisement related to **supply & installation of Equipment & Instrument for SNCU of Kandhamal district** for Publication of the same in two nos. of daily news paper (One time) by **Dt.08.06.2018**.

This is for favour of your kind information and necessary action.

Yours faithfully,

7-6-18
Chief District Medical & PH Officer,
Kandhamal

Memo No. 6590 / DWH Date: 07-06-2018

1. Copy to the DI & PRO, Kandhamal for information and necessary action.
2. Copy to the DIO, NIC, Kandhamal for information with a request to publish the same along with the enclosures (enclosed herewith) in the District website of Kandhamal district for wide publicity.

7-6-18.
Chief District Medical & PH Officer,
Kandhamal

OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, KANDHAMAL

No. 6588 /DWH **Tender Call Notice** Date 07-06-2018

Sealed tenders are invited from authorized firms for **supply & installation of Equipment & Instrument for SNCU of Kandhamal district**. The details are available in the district website: www.kandhamal.nic.in . The eligible bidders may submit their tender papers **on or before 19.06.2018 by 12 Noon** through Registered Post / Speed Post / Courier only to the undersigned. The **Technical Bid document & Price Bid will open on 19.06.2018 at 4 PM** by the purchase committee in the office chamber of the undersigned. The undersigned reserves the right to accept or reject any or all the tender without assigning any reason thereof.

Sd/-
Chief District Medical & PH Officer, Kandhamal

CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER
KANDHAMAL

Tel: 06842-253385;
e-mail :cdmophulbani@gmail.com,

Tender Reference No. DWH/2018-19/6588

TENDER DOCUMENT
FOR
SUPPLY & INSTALLATION
OF
MEDICAL EQUIPMENTS, INSTRUMENT
FOR
SICK NEAONATAL CARE UNIT (SNCU)

Address for Correspondence- Office of the Chief District Medical & Public Health Officer, Kandhamal
At/Po-Phulbani, Dist- Kandhamal, Odisha
Pin-762001

ABSTRACT OF CONTENTS IN THE TENDER PAPER

OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, KANDHAMAL

SECTION -I

NOTICE INVITING TENDER

Tender Reference No. : . **DWH/2018-19/ 6588** Dated: 07.06.2018

TENDERS ARE INVITED FROM ELIGIBLE BIDDERS AS PER THE ELIGIBILITY CRITERIA FOR SUPPLY & INSTALLATION OF MEDICAL EQUIPMENT & INSTRUMENT ITEMS

1	Period of Availability of Tender Document	**From 08.06.2018 TO 19.06.2018** **(Downloadable from website: www.kandhamal.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.
2	Last date & time for submission of Tender	**Date: 19.06.2018, Time: 12 Noon** **Address of Submission of Bid:** OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, KANDHAMAL ***At/Po- Phulbani, Dist.- Kandhamal, Pin- 762001*** ***(Through Speed post / Registered post / Courier)***
3	Date, time and place of opening of Tender	**A. Technical Bid (Cover-A): Opening - 19.06.2018 at 4.00 PM in the address mentioned above.** **B. Financial Bid (Cover B): Opening – 19.06.2018 at 4.00 PM in the address mentioned above.** ***(Venue is mentioned at the address mentioned above)*** ***(Bidders / authorized representative may remain present at the time of opening of bid)***

SECTION -II

IMPORTANT INSTRUCTIONS TO BE NOTED CAREFULLY BY THE TENDERERS

1.	**Mode of Procurement**	Through Open Advertisement
2.	**Purchaser**	Chief District Medical & Public Health Officer, Kandhamal
3.	**Consignee**	DHH,SDH,AH,CHC etc of District Kandhamal
4.	**Delivery Period**	Within 10days from issue of the purchase order.
5.	**Mode of Delivery**	By Air / Road / Rail
6.	**Guarantee / Warranty /CMC**	Comprehensive warranty including all spares, maintenance etc. for a period 3*(three) years* from the date of installation & commissioning and *3(three) years* CMC after warranty period.
7.	**Tender Document Cost**	Rs. 2,000/- : The tender document cost (Non-refundable) is to be submitted in the shape of bank draft in favour of the ZSS Non NRHM Fund, Kandhamal from any Nationalized / Scheduled Bank payable at Phulbani.
8.	**Earnest Money Deposit (EMD)** **(The approx. no. of equipment is mentioned in the Schedule of requirement – Section IV)**	The bidder may quote for any or all the equipment by submitting the required EMD (Refundable) of Rs20,000/-. The Earnest Money Deposit will be paid in the shape of demand Draft only in favour of ZSS Non NRHM Fund, Kandhamal from any Nationalized / Scheduled Bank payable at Phulbani.

SECTION -III

TERMS & CONDITIONS

Sealed tenders are invited from the eligible bidders as per the eligibility criteria for **supply & installation of Equipment & Instrument Items** for the District, Kandhamal.

1. The bidders have to submit their tenders in separate sealed covers (i.e. **Cover "A"-Technical Bid & Cover "B"- Price Bid**). Both the covers should be put into a third **Cover "C"** which must be super-scribed as "**Tender for "Supply & installation of Equipment & Instrument Items for SNCU" and & Tender Reference No. _____**.

2. **The Cover "A" (Technical Bid) should contain as follows**:

1) Checklist with details of the documents enclosed in **Cover "A"** (as per **Annexure - I**) with page number. The document should be ***serially arranged*** as per this **Annexure - I** and should be securely tied and bound.
2) Manufacturing unit / supplier, 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. They should submit a declaration about this by a **Notary Public**.
3) EMD **Rs.20,000/-** (Rupees Twenty Thousand only - Refundable) in shape of Bank Draft / Bankers Cheque in favour of ZSS Non NRHM Fund, Kandhamal payble at Phulbani.
4) Tender Paper Cost **Rs.2000/-** (Rupees Two Thousand only – Non-refundable) in shape of Bank Draft / Bankers Cheque in favour of ZSS Non NRHM Fund, Kandhamal payble at Phulbani.
5) List of Item (s) Quoted individually in the prescribed format (**Annexure – II).**
6) Copy of organization PAN.
7) Copy of organization Income Tax Acknowledgement Report (***Assessment Year 2015-16, 2016-17, 2017-18***) and copy of the audited financial statement for the last three financial year i.e. 2014-15, 2015-16 & 2016-17.
8) Photocopy of the GST registration certificate.
9) The manufacturer / supplier should have 5 years market standing in supplying EIF to minimum 10 nos. of Govt./Corporate/PSU Hospitals in India. The copy of minimum 10 nos. of purchase orders from the minimum 10 nos. of users should be furnished in support of the information provided in the market standing statement (item wise).
10) Performance Statement during the last five years towards proof of supply of similar EIF to minimum 10 nos. of Govt./Corporate/PSU Hospitals in India. The copy of certificate from

minimum 10 nos. of users should be furnished in support of the information provided in the performance statement (item wise).

11) Original Copy of Valid Manufacturing License of the manufacturer (s) / Import License by the Importer from the Original Equipment Manufacturer (OEM).
12) Copy of valid ISO Certificate.
13) Copy of valid ISI / CE / BIS / US FDA / IEC certificate.
14) All the tender documents should sign by the bidders at the bottom of each page with his official seal duly affixed.
15) Leaflet / Technical Brochures of the products / item offered.
16) They should quote the rates for individual items inclusive of excise duty, insurance, packing, forwarding, freight (door delivery) and exclusive GST (if any) and should submit a self declaration about this.
17) They must submit the undertaking that they will supply the stocks **within 10 days** after receipt of the Purchase Order from this office. In case of non-supply, the authority may allow extension for a **maximum period of 02 days** after the stipulated date of supply with a **penalty of 0.2% per day**, which will be deducted from the purchase order value as "**Liquidated Damage**".
18) If the supplier fails to complete the supply within the extended period, i.e. 12 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 EMD and the concerned firm will be blacklisted for three (3) years from the date of issue of letter for the said item.
19) 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 three (3) years from the date of issue of letter and his E.M.D will be forfeited and no further purchase order will be placed to that firm for that item.
20) The supplier shall have a minimum turnover of Rs.1 (one) Crores or more in the last three year financial years i.e. 2014-15, 2015-16 & 2016-17 and copy of the audited financial statement for the last three financial year i.e. 2014-15, 2015-16 & 2016-17.

3. <u>General Condition</u>:

1) Eligible bidders should submit their tender documents to the CDM&PHO Kandhamal through **Speed Post / Registered Post / Courier only on or before 19.06.2018 by 12 Noon**.
2) Any tender documents received after the due date & time will be rejected and returned to the sender unopened.

3) Violating the tender terms and conditions & non-supply / partially supply / supply, which is not as per technical specification, will declared as **Blacklisted** and disqualify the firm to participate in any tender of this district for a period of next 03 (three) years from the date of issue of the letter and his E.M.D. will be forfeited.

4) Tenders documents should be typewritten or computerized, failing which the bidders will be ineligible for consideration. No further correction will be allowed.

4. **The Cover "B" (Price Bid) should contain as follows**:

1) Financial Bid must be submitted in the prescribed format as attached in **Annexure- IV**. No other document should be enclosed in the Financial Bid. The Financial Bid should be sent in a separate sealed cover called **Cover "B" (Price Bid).**

2) The rates should be computerized.

3) The price quoted by the tenderers 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.

4) The rate quoted and accepted will be binding on the tenderer 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.

5) If there is difference between figures & words, words will be taken into consideration.

The last date for submission of the tender documents is fixed **on 19.06.2018 by 12 Noon**. The Technical Bid will be opened on **19.06.2018 at 4.00 PM** by the purchase committee.

The undersigned reserves the right to reject or cancel any or all the tenders without assigning any reason thereof.

7.6.18

Chief District Medical & PH Officer
Kandhamal

Annexure-I

CHECK LIST

Sl. No.	List of Tender Documents Submitted	Yes	No	Page No.
1	Cover "A"-Technical Bid			-
2	Cover "B"- Price Bid			-
3	EMD Rs.20,000/- (Rupees Twenty Thousand only - Refundable) in shape of Bank Draft / Bankers Cheque in favour of ZSS Non NRHM Fund, Kandhamal payble at Phulbani.			
4	Tender Paper Cost **Rs.2000/-** (Rupees Two Thousand only – Non-refundable) in shape of Bank Draft / Bankers Cheque in favour of ZSS Non NRHM Fund, Kandhamal payble at Phulbani.			
5	List of Item (s) Quoted in the prescribed format (**Annexure – III)**			
6	Self attested photocopy of organization PAN.			
7	Self attested photocopy of organization Income Tax Acknowledgement Report (***Assessment Year 2015-16, 2016-17, 2017-18***) and copy of the audited financial statement for the last three financial year i.e. 2014-15, 2015-16 & 2016-17.			
8	Self attested photocopy of the GST registration certificate.			
9	Self attested photocopy regarding 5 years market standing in supplying above items to minimum 10 nos. of Govt./Corporate/PSU Hospitals in India.			
10	Performance Statement during the last five years towards proof of supply of similar EIF to minimum 10 nos. of Govt./Corporate/PSU Hospitals in India. The copy of certificate from minimum 10 nos. of users should be furnished in support of the information provided in the performance statement (item wise).			
11	Self attested photocopy of valid ISO certificate.			
12	Self attested photocopy of valid ISI / CE / BIS / US FDA / IEC certificate.			
13	All the tender documents should sign by the bidders at the bottom of each page with his official seal duly affixed.			
14	Leaflet / Technical Brochures of the products / item offered.			
15	Declaration by **Notary Public regarding blacklisted** of Manufacturer / supplier either by the Tender inviting authority or by any state Govt. or Central Govt. organization as per **Annexure-V**.			
16	Original copy of Valid Manufacturing License of the manufacturer (s) / **Import License** by the Importer from the Original Equipment Manufacturer (OEM) as per **Annexure-VI**.			
17	Self Declaration regarding quote the rates for individual items inclusive of excise duty, insurance, packing, forwarding, freight (door delivery) and exclusive of GST charges (if any) as per **Annexure-VII**.			
18	Self Declaration regarding the rate quoted and accepted will be binding on the tenderer 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 as per **Annexure-VIII**.			
19	Undertaking regarding they will supply the stocks **within 10 days** after receipt of the Purchase Order from this office as per **Annexure-IX.**			
20	Declaration regarding the supplier shall have a minimum turnover of Rs.1 (one) Crores or more in the last three year financial years i.e. 2014-15, 2015-16 & 2016-17 as per **Annexure-X**. The bidders shall submit the audited financial statement for the last financial year i.e. 2014-15, 2015-16 & 2016-17 for verification of turnover.			

Annexure-II

TENDER ITEMS

Sl. No.	Name of the Item
1	Auto Clave HP Vertical (Double Bin)
2	Auto Clave HP Vertical (Single Bin)
3	Blood Lancet
4	Digital Thermometer (low reading)
5	Drug Trolley
6	Electrical Suction Apparatus
7	Foot Operated Suction Apparatus
8	Glucometer
9	Glucometer Strips
10	Infantometer
11	Infusion Pump
12	Instrument Sterilizer S.S. (Electrical)
13	Neonatal Stethoscope
14	Oxygen Concentrator (double outlet)
15	Oxygen Hood
16	Pulse Oxymeter
17	Transcutaneous Biluribinometer
18	Weighing Scale (Baby) (Electronics)

7.6.18

Chief District Medical &
Public Health Officer, Kandhamal

Annexure- III

LIST OF ITEMS QUOTED

Sl. No.	Tender Quoted Sl. No.	Name of the Item (As per Annexure-II)	Manufacture Name	Make	Model Name	Specification submitted by the Bidders (mention details)

Signature of the Bidder with seal

Annexure- IV

PRICE BID

Sl. No.	Name of the Item	Make & Model	Unit Price with all accessories (as per Tender Clause No.-2.16) (both in words and figures)

Signature of the Bidder with seal

Annexure- V

DECLARATION

(Filled by the Notary)

I / We _____ do hereby declare that I / We have **not been de-recognized / black listed** by the Tender inviting authority or by any state Govt. or Central Govt. organization for supply of **Not of Standard Quality Items / non-supply**.

I / We agreed that the Tender Inviting Authority can forfeit the Earnest Money Deposit and blacklist me / us for a period of 3 years if, any information furnished by me / us proved to be false at the time of inspection / verification and not complying with the Tender terms & conditions.

Seal & Signature of the Notary

Annexure- VI

MANUFACTURER'S AUTHORISATION FORM

*(to be submitted by authorized distributor/importers in a **letterhead** in case the bidder is the authorized distributor/importer of OEM)*

No. Dated:

To

The Chief District Medical & Public Health Officer,
Kandhamal, Phulbani, Odisha

Dear Sir / Madam,

Bid Reference No. :
Equipment Name :

We ..... (name of the OEM) are the original manufacturers of the above equipment having registered office at ..... (full address with telephone number/fax number & email ID and website), having factories at _____ and _____ , do hereby authorize M/s._____(Name and address of bidder) as _____ (Importer / Distributor) to submit bids, and subsequently negotiate and sign the contract with you against the above bid no..

No company or firm or individual other than M/s._____ are authorized to bid, negotiate and conclude the contract in regard to this business against this specific bid reference no.

We also hereby undertake to provide full guarantee/warrantee /CMC/AMC as agreed by the bidder in the event the bidder is changed as the dealers or the bidder fails to provide satisfactory after sales and service during such period of Comprehensive warranty/CMC/AMC and to supply all the spares/reagents / consumables for 6 years.

We also hereby declare that we have the capacity to manufacture and supply, install and commission the quantity of the equipments bided within the stipulated time.

(Name)
for and on behalf of M/s._____
(Name of manufacturers)

Date:
Place:

Seal

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

Annexure- VII

DECLARATION

(Filled by the Bidder)

I / We _____ do hereby declare that I / We have quoted the rates for individual item inclusive of excise duty, insurance, packing, forwarding, freight & door delivery and exclusive GST (if any).

Signature of the Bidder with seal

Annexure- VIII

DECLARATION

(Filled by the Bidder)

I / We _____ do hereby declare that the rate quoted and accepted will be binding on the tenderer 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, otherwise the Tender Inviting Authority can **forfeit the Earnest Money Deposit and blacklist me / us for a period of next 3 years**.

Signature of the Bidder with seal

Annexure- IX

DECLARATION

(Filled by the Bidder)

I / We _____ do hereby declare that I / We supply the stocks **within 10 days** after receipt of the Purchase Order from the Tender Inviting Authority. In case of non-supply within the stipulated time period, the tender inviting authority may please be allowed extension for a **maximum period of 02 days** after the stipulated date of supply with a **penalty of 0.2% per day**, which will be deducted from the purchase order value as "**Liquidated Damage**".

I / We agreed that the Tender Inviting Authority can **forfeit the Earnest Money Deposit and blacklist me / us for a period of next 3 years for non-supply / part supply** of the stocks within the time period.

Signature of the Bidder with seal

Annexure- X

ANNUAL AVERAGE TURN OVER STATEMENT
(To be furnished in the letter head of the Chartered Accountant)

The Annual Turnover of M/s _____ for the last 3 financial years are given below and certified that the statement is true and correct.

Sl. No.	Financial Year	Turnover in Crore (Rs.)
1	2014-15	
2	2015-16	
3	2016-17	
Average Annual Turnover in Crore (Rs.)		

Date: **Signature of Chartered Accountant**

Place: **(Name in Capital)**

Seal **Membership No.-**

Note:

1) To be issued in the letter head of the Chartered Accountant with membership No.

2) Also attach photocopies of the audited P/L account of each year highlighting the turnover in support of that.

Annexure- XI

TECHNICAL SPECIFICATION OF THE ITEMS

Autoclave HP Vertical (Double Bin)

MANUFACTURER & PRODUCT QUALITY STANDARD:

1. Should be USFDA/CE /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)
Pressure test certificate from a NABL lab as per the requirement of IS 3829-3 standard should be furnished in the technical bid.
Steel grade certificate of SS 304 from a NABL Lab should be furnished in the technical bid.

TECHNICAL SPECIFICATIONS:-

1) High Grade strong stainless steel SS 304, Triple walled construction.
2) Positive radial self-locking safety doors.
3) Hydrostatically tested to withstand 2.5 times the working pressure.
4) Sealed with Neoprene/Silicon long-lasting and durable gasket.
5) Analogy display for Jacket and Chamber pressure and temperature.
6) Outer jacket of SS 304 grade insulated to prevent heat loss.
7) Mounted on Stainless steel frame.
8) Internal joints should be argon arc welded.
Should have 2 bins for loading.
Chamber working pressure should be 1.1 to 1.2 Kg/cm sqr (15 to 20PSI) with working temperature of 1210C &1350C
Safety Devices: Pressure Switch, Safety valves Vacuum breaker, Low Water Level Cut – Off
Foot operated paddle lifting device. **2.2. User's interface**: Manual

2.3. Software and/ or standard of communication (where ever required) : NA
3 physical characteristics
3.1. Weight (lbs, kg) : NA
3.2. Size: 600mm(H)×400mm(D) with chamber volume of 80ltrs. or more with ±5% deviation
3.3. Noise (in dba) :NA
3.4. Heat dissipation: NA
3.5. Mobility, portability: Portable
4 Energy Source (electricity)
4.1. Power requirements: Input voltage- 220 V/440V, Single Phase or Three Phase
4.2. Battery operated: No
4.3. Tolerance (to variations, shutdowns)
4.4. Pressure gauge: 0 to 2.1Kgf/cm^2
4.5. Operating pressure: from 15 to 20 psi
4.6. Sterilizing pressure: 1.2Kgf/cm (15 psi) at 121˚C
4.7. Protection: Should have over-charging cut-off with visual symbol.
4.8. Load: **atleast 6 kW or more with single phase or three phase 5**
accessories, Spare parts, consumables
5.1. Accessories (mandatory, standard, optional); Spare parts (main ones); consumables / reagents (open, closed system)
Sterilisation perforated drum (SS): 2 no.
Gaskets: 2 no.

Sterilization strip indicators: 100nos.
Sterilization tape indicators (biological & chemical): 1 roll

Autoclave Hp Vertical (Single Bin)

1.1 .clinical purpose
An airtight vessel for heating and sometimes agitating its contents under high steam pressure; used for industrial processing, sterilizing, and cooking with moist or dry heat at high temperatures.
1**.2.used by clinical department/ward**: Operation theatre
Technical
2 Technical Characteristics
2.1. Technical characteristics (specific to this type of device)

- High Grade strong stainless steel, double walled construction.
- Positive radial self-locking safety doors.
- Hydrostatically tested to withstand 2.5 times the working pressure.
- Sealed with Neoprene/Silicon long-lasting and durable gasket.
- Outer jacket insulated to prevent heat loss; with a high grade insulation material
- Mounted on 304 stainless steel frame with ground levelling flanges.
- Temperature and pressure cut-off device.
- Auto cut-off at low water level
- Rust-proof 304 grade stainless steel.
- Cylindrical construction.
- Equipment should have separate steam release valve and drainage system.
- Minimum of two safety valves with auto-release at 16 and 20.
- Chamber working pressure should be 1.1 to 1.2 Kg/cm sqr (15-18PSI) with working temperature of 121^{0}C &135^{0}C
- Safety Devices: Pressure Switch, Safety valves Vacuum breaker, Low Water Level Cut – Off

2.2 user's interface: Manual
2.3.Software and/ or standard of communication(where ever required):NA
3 physical characteristics
3.1 Dimensions (metric): NA
3.2.Weight (lbs, kg): NA
3.3.capacity: 40liter
3.4.noise (in dba):NA
3.5 Heat dissipation: NA
3.6. Mobility, portability: Portable
4 energy Source: (electricity)
4.1. Power requirements: Recharging unit: Input voltage- single
4.2 batteries operated: No
4.3 .tolerance (to variations, shutdowns) :±10%
4.4. Pressure gauge:0-2.1Kgf/cm^2
4.5. Operating pressure: from 15-20 psi
4.6. Sterilizing pressure: 1.2Kgf/cm(15 psi) at 121˚C
4.7. Protection: Should have over-charging cut-of with visual symbol.
4.8. Power consumption: 4-6KW
5 accessories, Spare parts, consumables
5.1.accessories (mandatory, standard, optional); Spare parts (main ones); consumables / reagents (open, closed system) :
1. Automatic Pressure Control Switch -2 no.

2. Automatic Water Cut-of Device -2 no.
3. Micro Processor PID Controller with Timer & Auto Stop Facility
4. Digital Pressure Indicator-2 no.
5. Perforate basket(rust-free stainless steel)
6. Cord-plug-4 no.
7. Biological and chemical indicators-1 set

6 environmental and Departmental considerations

6.1.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 USFDA/CE /BIS approved product.
2. Manufacturer and Supplier should have ISO 13485 certification for quality standards.
3. Electrical safety conforms to the standards for electrical safety IEC 60601-General requirements (or equivalent BIS Standard)
4. Shall meet internationally recognised for Electromagnetic Compatibility (EMC) for electro medical equipment: 61326-1.
5. Certified to be compliant with IEC 61010-1, IEC 61010-2-40 for safety.
6. Pressure test certificate from a NABL lab.
7. Steel grade certificate of 304 from a NABL Lab.

7.2. Local and/or international Manufacturer / supplier should have ISO certificate for quality standard.

8 training and installation

8.1.Pre-installation requirements: nature, values, quality, tolerance

1) Availability of 5 amp socket;
2) Safety and operation check before handover;

8.2. Requirements for sign- of: Certificate of calibration and inspection from the manufacturer

8.3. Training of staff (medical, paramedical, technicians)

1) Training of users on operation and basic maintenance;
2) Advanced maintenance tasks required shall be

9 Warranty and maintenance

9.1. Warranty: 3 years

9.2. Maintenance tasks

1) Maintenance manual detailing;
2) Complete maintenance schedule;

9.3. 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; 10 Documentation

10.1. Operating manuals, service manuals, other manuals

Should provide 2 sets(hardcopy and soft-copy) of:-
1) User, technical and maintenance manuals to be supplied in English/ Hindi language along with

machine diagrams;
2) List of equipment and procedures required for local calibration and routine maintenance;
3) Service and operation manuals (original and copy) to be provided;
4) Advanced maintenance tasks documentation;
5) Certificate of calibration and inspection

10.2. Other accompanying documents

List of important spares and accessories, with their part numbers and cost;

11 notes

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;

11.2. Recommendations or warnings

Any warning signs would be adequately displayed

Quality Standards For All hospital Furniture

- Manufacturer should be ISO 9001 certified.
- Should have ISO14001- for Environment friendly features.
- Should have OSHAS 18001for occupational health safety management
- Product must be CE/BIS/BIFMA certified.
- Should furnish stainless steel grade certificate from Govt/Govt. approved testing laboratory.

Manufacture should produce test certificate from Govt/Govt. approved laboratory for test procedure like impact test, bend test, salt spray chamber test, epoxy powder coating & phosphate coating for quoted item

Blood Lancet

Digital Thermometer (Low Reading)

Drug Trolley

- Cardiac massage board laminated shelves.
- 2 Plastic Cabinet with 3 drawers in each.
- 12.5cm swivel media castors, two are breaking.
- Provision for Corner buffers and I.V. Rod.
- Oxygen Cylinder Holder provision.
- Six removable bins & two Polystyrene storage unit with three drawers each.
- Size : 94L x 49W x 153H Cm.

Suction Machine (Electrical)

GMDN definition An assembly of devices designed to evacuate fluid, tissue, gas, or other foreign materials from a body cavity or lumen by means of suction. It generally consists of a mains electricity (AC-powered) suction pump, tubing, plastic/glass collection container(s), a vacuum gauge, a vacuum control knob, an overflow trap, a moisture filter, and possibly a microbial filter. The pump creates a vacuum in the suction tubing, which is inserted into the body for the removal of materials into the collection container. This system can be used in a wide variety of settings within healthcare facilities.

GENERAL

1. USE

1.1 Clinical purpose To aspirate fluids, secretions, or other foreign materials from a patient's airway by means of suction.
1.2 Used by clinical department/ward:All
TECHNICAL
2. TECHNICAL CHARACTERISTICS
2.1 Technical characteristics (specific to this type of device)
0-760 mm Hg ± 10 regulable, 1/2 HP; single phase 1440 RPM motor; flutter free vacuum control knob,; Wide mouthed 2 x 2 LITRE (Polycarbonate) with self sealing bungs and mechanical over flow safety device.
2.2 Settings Manual
2.3 User's interface Manual
2.4 Software and/or standard of communication (where ever required):NA
3. PHYSICAL CHARACTERISTICS
3.1 Dimensions (metric) Max: 43 x 30 x 68 cms
3.2 Weight (lbs, kg) Max: 27Kg
3.3 Configuration NA
3.4 Noise (in dBA) 50 dB A ± 3
3.5 Heat dissipation should maintain upto 36.5 deg temp and the heat disbursed through a exhaust fan.
3.6 Mobility, portability: Yes
4. ENERGY SOURCE (electricity, UPS, solar, gas, water, CO2 ....)
4.1 Power Requirements 220 V, 50 Hz, 2 ± 0.5 Amps, 370 watts.
2 Technical Specification emergence y response system
4.2 Battery operated NA
4.3 Tolerance (to variations, shutdowns) Voltage corrector / stabilizer to allow operation at ± 30% of local rated voltage. Use of SMPS to correct voltage.
4.4 Protection Electrical protection by resettable overcurrent breakers or replaceable fuses, fitted in both live and neutral lines.
4.5 Power consumption 200W
4.6 Other energy supplies NA
5. CCESSORIES, SPARE PARTS, CONSUMABLES
5.1 Accessories & Spares Collection container & its cap, suctions tube tips, a vacuum gauge and control knob.
5.2 Consumables / reagents (open, closed system)
Tubing:8 mm ID x 2 mtr (PVC), 2x2 lt polycarbonate jar.
6. ENVIRONMENTAL AND DEPARTMENTAL CONSIDERATONS
6.1 Atmosphere / Ambiance (air conditioning, humidity, dust ...)
Capable of being stored continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90%. Capable of operating continuously in ambient temperature of 10 to 40 deg C and relative humidity of 15 to 90%.
6.2 User's care, Cleaning, Disinfection & Sterility issues Complete unit to be easily washable and sterilizable using both alcohol and chlorine agents.
7. STANDARDS AND SAFETY
7.1 Certifications FDA /CE 1023, ISO 13485:2003; ISO 10079-1-1999; IEC 60601-1-8-2006; IEC 60601-1-SER-Ed 1.0-2011; IEC/TRF 60601-1-8-Ed 4.0-2010.
8. TRAINING AND INSTALLATION
8.1 Pre-installation requirements:nature, values, quality, tolerance
Avalability of 15 amp socket, safety and operation checks before handover.
8.2 Requirements for sign-off Certificate of Calibration and inspection from the factory.
8.3 Training of staff (medical,paramedical, technicians)

Training of users in operation and basic maintenance shall be provided
9. WARRANTY AND MAINTENANCE
9.1 Warranty 3 years
9.2 Maintenance tasks Maintainance manual detailing complete maintaining schedule
9.3 Service contract clauses, including prices
Local clinical staff / authorized officer on behalf of purchaser to affirm completion of installation
10. DOCUMENTATION
10.1 Operating manuals, service manuals, other manuals
Advanced maintenance tasks required shall be documented.
User, technical and maintenance manuals to be supplied in English language along with machine diagrams.
List to be provided of equipment and procedures required for local calibration and routine maintenance.
10.2 Other accompanying documents
List to be provided of important spares and accessories, with their part numbers and cost. Certificate of calibration and inspection to be provided.
11. NOTES
11.1 Service Support Contact details (Hierchy Wise; including a toll free/landline number)
Any Contract (AMC/MC/add-hoc) to be declared by the manufacturer
11.2 Recommendations or warnings Any recommendations for be provided.

Foot Operated Suction Machine

PRODUCT & MANUFACTURER QUALITY STANDARDS:
It Should be US FDA / CE/BIS approved product,
Manufacturer should be ISO 13485:2003 certified.
TECHNICAL SPECIFICATION:
Giving vacuum more than 550 mm Hg, with 200ml/stroke, oil free diaphragm pump.
Settings-Manual
User's interface-Manual
Mobility, portability-No
ENERGY SOURCE: Not Required
ACCESSORIES SPARE PARTS, CONSUMABLES:
Accessories & spare parts -Collection bottles, clear unbreakable jar(one set extra)
Consumables / reagents (open, closed system):- Microbial filter, silicon tubing (one extra set)

Glucometer

Glucometer test strips

- Test strips must be as per same make / model of Glucometer.

Infantometer

The measuring mat should be made of good quality material which can be cleaned with all commercially available disinfectants.
The measuring mat should have integrated head piece and sliding leg positioner that
Measurement range (Both in cm & inch): 10 to 99 cm (4 – 39")
Graduation: 5 mm

The mat should be foldable for easy transportation and should have facility for wall hanging. It should be **CE certified** (certificate to be submitted in technical bid).

Infusion Pump

1. Should be operated on drip rate Peristaltic finger pump method.
2. Should compatible with most of the IV set (macro/micro drip sets).
3. Should have the following flow rates.
4. IV Set ml/hr drops/min
   15 drops/ml 3~450ml/hr 1~100drops/min
   20drops/ml 3~450ml/hr 1~100drops/min
   60drops/ml 1~100ml/hr 1~100drops/min
5. Should have a flow rate accuracy of ±10% and drip rate accuracy of ±2%.
6. Should have a volume infused display from 0 to 999.9ml.
7. Should have a purge and KVO facility.
8. Should have a audible and visual alarm for occlusion pressure, air alarm, door open, empty, low battery.
9. Should have a LCD display with backlight and graphical display of infusion Should have a minimum 2hr battery back up at highest delivery rate
10. Should work with input 200 to 240Vac 50 Hz supply.
11. Should have safety certificate from a competent authority CE / FDA (US) / STQC CB certificate / STQC S certificate or valid detailed electrical and functional safety test reportfrom ERTL. Copy of the certificate / test report shall be produced along with the technical.

Instrument Sterilizer S.S. (Electrical)

Neonatal Stethoscope

Manufacturer should be ISO 13485 certified.
Model should be USFDA or European CE approved product. CE certificate must be issued by notified body.

TECHNICAL SPECIFICATION:

Stethoscope of standard size, chromium plated metal binaural, V rubber tube in one piece and rotating piper fitting for both flip functions.

Neonatal stethoscope.

Extra-soft, replaceable and pivot able ear-tips for perfect sealing at the ear canal.

Designed with precision chest-piece made of stainless steel/ chromed brass.

Good quality diaphragm of maximum -Ø 45mm.

High quality membrane for precise acoustics with non-chill rims for improved adaptation on the skin and for excellent sound transmission.

Length should be 27" to 29" with colour -black.

The Y-tube should be made of Latex-free treated rubber.

Easy to dismantle, and therefore to clean and disinfect.

PHYSICAL CHARACTERISTICS

Dimensions (metric)- Diaphragm size as specified

Weight (lbs, kg)-Weight: 110-150 gm

Mobility, portability-Yes

ACCESSORIES, SPARE PARTS, CONSUMABLES:
Accessories (mandatory, standard, optional)- 1 x spare set of earpiece, 1 x spare diaphram.

Oxygen Concentrator (Double Outlet)

PRODUCT & MANUFACTURER QUALITY STANDARDS:
Should be USFDA or European CE approved product. CE certificate must be issued by notified body.
Manufacturer should be ISO 13485 certified
Shall meet IEC 60601-1 standard requirements
TECHNICAL SPECIFICATION:
Flow rate: 0 to 5 LPM, Oxygen purity > 93%.
O2 delivery pressure: minimum: 4 to 8 PSI
Atomising pellet (ml/min.) > 0.5, uninterrupted flow of oxygen,
Low pressure alarm, high pressure alarm and power failure alarm .The unit should have inbuilt Oxygen sensing device (OSD) to monitor the purity of produced oxygen.
Unit capable for supplying oxygen
Should be capable of providing minimum 12 hours of continuous operation
PHYSICAL CHARACTERISTICS
User's interface-front panel access to reset switch
Noise (in dBA)- ≤50 db
heat dissipation-Heats dissipated using an internal exhaust
Mobility, portability-Yes. Provided with easy maintenance wheels for free movement.
ENERGY SOURCE:
Power Requirements-230 +/- 10% VAC, 50 Hz
Battery operated-NA
Tolerance (to variations, shutdowns)-fuse controlled variation, automatic switch over from AC to DC and vice versa
Protection-OVP, earth leakage protection
ACCESSORIES, SPARE PARTS, CONSUMABLES
Accessories (mandatory, standard, optional)-
Humidifier Bottles -2nos
Power cord- 1no
Additional spare items to be supplied-
Nasal Cannula with extension tubing-2 nos
Gross particle cabinet filter-2nos.
Compressor intake filter -2nos.
Bacterial filter of 0.8 to 1.0 micron-2nos.
Geolite crystal- 1set

Oxygen Hood (Neonate / Infant / Paediatric)

PRODUCT & MANUFACTURER QUALITY STANDARDS:
The company should be ISO 13485 certified
Should be CE or USFDA approved
TECHNICAL SPECIFICATION:
Transparent Polycarbonate unbreakable single moulded.
Silicon rubber Neck Port adjustment enabled to minimize the wastage of oxygen.
Silicone rubber Neck port adjustment to ensures use in Neonate/Infant/Paediatric patients

Oxygen inlet Port
Should have outlet at the base to prevent CO2 accumulation.
PHYSICAL CHARACTERISTICS
Dimensions (metric)- Appropriate to comfortably fit all size babies up to 5 years of age. (Small and medium size)
Weight (lbs, kg)-extremely light weight
Mobility, portability-portable
ACCESSORIES, SPARE PARTS, CONSUMABLES:
Consumables / reagents (open, closed system)-tubing
Note: Bidder has to quote for all three sizes of oxygen hood with respective neck port sizes in respective row of price BoQ, However combination/ addition of all the sizes will taken into consideration for financial bid evaluation

Pulse Oxymeter

PRODUCT & MANUFACTURER QUALITY STANDARDS:
Should be USFDA or European CE approved product. CE certificate must be issued by notified body.
Should confirm to ISO 80601-2-61-2011: Medical Electrical equipment- part 2-61: Particular requirements for the basic safety and essential performance of pulse oxymeter.
Electrical safety conforms to standards for electrical safety IEC-60601-1, EMC safety confirms to IEC 60601-1-2 standard requirement.
Manufacturer should have ISO 13485 certificate for quality standard.
[All above quality standards certificates must be furnished issued from independent agencies. Self declaration shall not be accepted.]
OVERVIEW OF FUNCTIONAL REQUIREMENTS:
Continuously displays patient oxygen saturation in real time using an external probe on the skin.
Contains adjustable alarms to alert when either saturation or heart rate is low. Reusable, sterilisable probes are robust and easily connected and disconnected. Operates from mains voltage or from internal rechargeable battery.
TECHNICAL SPECIFICATION: The machine should measure all below mentioned parameter for all types of patients i.e adult, paediatric and neonatal.
SpO2 measurement range at least 40 to 70 and 70 to 99 %, minimum gradation 1%.
Accuracy of SpO2 better than ± 3% for range below 70% and better than ± 1% for range above 70%.
Pulse rate range at least 30 to 240 bpm, minimum gradation 1 bpm.
Accuracy of pulse rate better than ± 5 bpm.
Signal strength or quality to be visually displayed.
Audiovisual alarms required: high and low SpO2 and pulse rate (operator variable settings), sensor disconnected, sensor failure, low battery.
Should have TFT Screen display.
Plethysmograph (may be in form of bar) display is mandatory.
The device should have proven technology to measure all parameters in the state of **low perfusion** and **motion artifacts**. **(Supporting documents pertaining to ability of performing in low perfusion and motion artifacts conditions must be furnished).**
The specific OEM technology has to be specified in USFDA or CE certificate and should be available in both device as well as the sensor.
Settings- Should have minimum 24 hrs trend memory for SpO2 & PR.
User's interface-Easily accessible touch button to operate the machine.

Software and/or standard of communication-in built

Should be a standalone and line powered pulse oximetry device (Not portable hand held type of battery operated). Configurable vital sign monitors shall not be accepted.

Case is to be hard and splash proof

Display must allow easy viewing in all ambient light levels

Supplied in protective case for clean storage and safe transport

Should be less than 5 kg.

heat dissipation-dispersed through exhaust

Mobility, portability-Mobile

ENERGY SOURCE:

Voltage-220 to 240V, 50 Hz

Battery operated-Internal, replaceable, rechargeable battery allows operation for at least two hours in the event of power failure

Battery charger to be integral to mains power supply, and to charge battery during mains power operation of unit.

Tolerance (to variations, shutdowns)-Voltage corrector / stabilizer / UPS to allow operation at ± 30% of local rated voltage

Protection-Should have electrical protection by resettable circuit breaker or equivalent facility.

Power consumption: NA

Other energy supplies-Mains supply cable to be at least 3m in length

ACCESSORIES, SPARE PARTS, CONSUMABLES: (Cost of each type of probe must be furnished separately in the pdf file (Format-B) of financial bid.)

Accessories –Adult, Paediatric & Two reusable Y Probes with clips for infant use.

Spare parts (main ones)-Two sets of spare fuses (if non-resettable fuses used)

Consumables / reagents (open, closed system)-NA

TRANSCUTAEOUS BILIRUBINO METER

Intended use	: Pre, during and post phototherapy
Gestational age	: 27-42 weeks
Post – natal age	: 0-20 days
Patient weight range	: 950-4995 grams
Total serum bilrubin range	: 0-20 mg/dl / 0-340µmol/L
Acuracy (RMSE)	: +/- 1.5mg/dL at 66% of the time or 1 Sigma
	+/- 26µmol/L at 66% of the time or sigma
Repeatability (SD)	: +/-0.66 mg/dL
	+/-11.2 µmol/L
Correlation	: r=0.90
Expected battery life (minimum)	: 1 year

Weighing Scale (Baby) (Electronics)

1.1. Clinical purpose -To measure body mass of the neonate

1.2 Used by clinical department/ward-NICU/SNCU

TECHNICAL

2. TECHNICAL CHARACTERISTICS

2.1 Technical characteristics (specific to this type of device)-

1. Table top, light and portable,
2. Built in rechargeable battery,
3. Easy to clean baby tray (acrylic),
4. Zero weight adjustment facility,
5. Quick, clear digital read outs,
6. Measurement does not change with position of baby on the pan;
7. Provision to measure the height of the baby in its laying position.
8. Accuracy: 5g, resolution: 1g, limit: 10gm ~ 15kg

2.2 Settings-Auto setting to 0.00 once a the machine is switched on or when no external weight has been put on

2.3 User's interface-LCD display

2.4 Software and/or standard of communication (where ever required)-in built

3. PHYSICAL CHARACTERISTICS

3.1 Dimensions (metric)-Base: 300mm x 265mm x 85mm, Pan: 510mm x 300mm x 85mm

3.2 Weight (lbs, kg)-NA

3.3 Configuration-N.A.

3.4 Noise (in dBA)-N.A.

3.5 Heat dissipation-NA

3.6 Mobility, portability-portable

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

4.1 Power Requirements-230 V AC,

4.2 Battery operated-6V, one hour backup

4.3 Tolerance (to variations, shutdowns)-NA

4.4 Protection-NA

4.5 Power consumption-NA

4.6 Other energy supplies-NA

5. ACCESSORIES, SPARE PARTS, CONSUMABLES

5.1 Accessories (mandatory, standard, optional)-NA

5.2 Spare parts (main ones)-NA

5.3 Consumables / reagents (open, closed system)-NA

6. ENVIRONMENTAL AND DEPARTMENTAL CONSIDERATONS

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

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.An ambient air velocity less than 0.3 m/s.

6.2 User's care, Cleaning, Disinfection & Sterility issues-Complete unit to be easily washed and disinfected using both alcohol and chlorine agents.

7. STANDARDS AND SAFETY

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

The Scale should be as per BIS specifications. The scale should have ISI mark ie IS: 2489 Or CE/FDA certified. Should have model approval from Legal Metrology Dept., Govt. of India. The manufacturer shall have the valid 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.

8. TRAINING AND INSTALLATION

8.1 Pre-installation requirements: nature, values, quality, tolerance-NA

8.2 Requirements for sign-off-NA

8.3 Training of staff (medical, paramedical, technicians)-NA

9. WARRANTY AND MAINTENANCE

9.1 Warranty-one year

9.2 Maintenance tasks- calibration schedule to be provided

9.3 Service contract clauses, including prices-Any Contract (AMC/MC/add-hoc) to be declared by the manufacturer

10. DOCUMENTATION

10.1 Operating manuals, service manuals, other manuals-NA

10.2 Other accompanying documents-NA

10.3 Recommendations for maintenance-Cautionary Note: Do not press the weighing pan with your hand. It could damage the load cell system in the weighing machine

10.4 Others-

11. NOTES

11.1 Service Support Contact details (Hierchy Wise; including a toll free/landline number)-Any Contract (AMC/MC/add-hoc) to be declared by the manufacturer

11.2 Recommendations or warnings-Any Contract (AMC/MC/add-hoc) to be declared by the manufacturer.