



ZILLA SWASTHYA SAMITI, KEONJHAR
CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER :
KEONJHAR
(DISTRICT PROGRAMME MANAGEMNT UNIT,NHM)



Advt. No..325!

TENDER CALL NOTICE

Date. 10.09.2020

Sealed tenders are invited from registered manufacturers / authorized distributors/Traders for supply & installation of equipment, instruments & Furniture for NPPCD/CH/NOHP/NPHCE of Keonjhar district. Details regarding the terms and conditions and tender papers may be downloaded from the district NIC website i.e. www.kendujhar.nic.in . The tender document should reach to the office of the undersigned by **30.09.2020 up to 5:30 P.M** through Reg. Post /Speed Post only and the envelope should be super scribed on the top of the envelope clearly, "**Tender Call Notice for supply & Installation of EIF of Keonjhar district**" along with all the relevant documents and E.M.D. The tenders will be opened on dated **01.10.2020 at 11:00 A.M** in DTU Conference Hall,DHH,Keonjhar in presence of the bidders/their authorized representatives.

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

Sd/- Chief District Medical & Public Health Officer,Keonjhar

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10/09/2020

Chief District Medical & Public Health Officer
Keonjhar



**TERMS, CONDITIONS & SPECIFICATIONS FOR
SUPPLY OF EQUIPMENT, INSTRUMENT & FURNITURE FOR
NPPCD/CH/NOHP/FP/NPHCE UNDER KEONJHAR DISTRICT**

Name of the District / Health Institution: **CDM & PHO, KEONJHAR**
(HEALTH & F.W. DEPTT., GOVT. OF ODISHA)
Tel: (06766) 255525

Bid Reference – CDM&PHO KEONJHAR / 3351 - 2020-21

**TENDER DOCUMENT FOR SUPPLY & INSTALLATION OF EQUIPMENT,
INSTRUMENT & FURNITURE**

DATE OF AVAILABILITY OF BID DOCUMENT IN WEBSITE : 10.9.2020 To 30.09.2020

LAST DATE & TIME OF RECEIPT OF BID DOCUMENTS : 30.09.2020 till 05.30 pm

DATE & TIME OF OPENING OF COVER-A (Technical Bid) : 01.10.2020 at 11.00 am

PRE BID CONFERENCE : 15.09.2020 at 11.00 am

DATE OF OPENING OF COVER-B (Price Bid) : Will be intimated Latter

PLACE OF OPENING OF BID DOCUMENTS : DTU Hall, NHM, DHH

ADDRESS FOR COMMUNICATION : Chief District Medical & Public Health
Officer , O/o- CDM & PHO , District Head
Quarter Hospital ,Keonjhar

PIN CODE- 758001


Chief District Medical & Public Health Officer
Keonjhar

SECTION -I

IMPORTANT INSTRUCTIONS TO BE NOTED CAREFULLY BY THE TENDERERS

1.	Mode of Procurement	Through Open Tender
2.	Purchaser	CDM&PHO, Keonjhar
3.	Delivery Period	Within 30 days from issue of Purchase Order.
4.	Mode of Delivery	By Air / Road / Rail
5.	Items	Instrument, Equipment & furniture
6.	Guarantee / Warranty	Comprehensive warranty: including all spares, maintenance etc. for a period 2 (two) years from the date of installation.
7.	Tender paper Cost	Rs. 2000/- (Rupees Two Thousand) towards tender paper cost which is non refundable in the shape of demand Draft only in favor of <u>ZSS-NRHM, Keonjhar</u> drawn in any Nationalized / Scheduled Bank payable at Keonjhar.
8.	EMD	Rs. 50,000/- (Rupees Fifty Thousand) only for Earnest Money Deposit will be paid in the shape of demand Draft only in favor of <u>ZSS-NRHM, Keonjhar</u> drawn in any Nationalized / Scheduled Bank payable at Keonjhar.

SECTION -II

TERMS AND CONDITIONS FOR SUPPLY & INSTALATION OF MEDICAL EQUIPMENTS/ INSTRUEMNTS & FURNITURES

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.
2. List of Item (s) Quoted with name of the Make & Model . of the item (s) (**Annexure - II**)
3. Tender document fee of Rs.2,000/- in shape of **Demand Draft (Non-Refundable)** in favour of ZSS, NRHM, KEONJHAR.
4. Earnest Money Deposit(s) of Rs. 50,000/- in shape of Demand Draft. Details of EMD and the name of the equipment quoted should be clearly mentioned.
5. Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor / service centre / contract person / office in Odisha (**Annexure - III**).
6. The declaration form in **Annexure - IV** duly signed by the tenderer before Notary Public / Executive Magistrate.
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.
8. Certificate duly filled by the Auditor / Chartered Accountant (as per **Annexure-VI**) that the annual average turnover of the firm is Rs.1 Crore or more in last 3


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financial years (2016-17, 2017-18, 2018-19) - for bidders who are manufacturer/importer) and so also authorised distributors.

9. Performance Statement (**Annexure - VII**) (**Item wise**) during the last three years (2017-18, 2018-19, 2019-20) towards proof of supply of similar equipments to any Govt. Organization/ Corporate Hospitals / PSU Hospitals / UN Agencies. The copy of Purchase orders and certificate from the end user should be furnished in support of the information provided in the performance statement (Item wise)
10. Deviation/No Deviation Statement from Technical Specification & details of technical specification of the product (**Annexure-VIIIA & VIIIB**)
11. Leaflet/Technical Brochures of the product/item offered.
12. Copy of Import License by the Importer (in case of Importer).
13. Copy of Valid ISO certificate.
14. Copy of Valid ISI / CE /US FDA certificate (as per Section V - Technical Specification).
15. Copy of Certificate in support of IEC certificate (as per Section V-Technical Specification).
16. Copy of the GST Clearance Certificate.
17. The Original Tender Booklet with Conditions and the schedules signed by the tenderer at the bottom of each page with his official seal duly affixed.
18. Certificate in support of service center 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)

COVER – B (PRICE BID)

1. The price to be quoted for medical equipments should be sent in the prescribed price format in a separate sealed cover hereafter called cover“**B**” (**Price Bid**) and **super subscribe as “PRICE BID FOR INSTRUMENT, EQUIPMENT & FURNITURE”.** **Cover –B (Price Bid) of the tenderers who qualify in its 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 .**
2. 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 all tax & transportation. The rate should be quoted for **each item** both in figures and words. **In case of difference in words and figures, words will be taken into consideration for evaluation.**
3. The Cover “B” of tenderers who qualifies in their technical bid, will only be opened at the DTU Hall, NHM, DHH, O/o-CDM& PHO KEONJHAR. Date & time which will be intimated to them by CDM&PHO-KEONJHAR.


Contract Manager, NHM, DHH, O/o-CDM& PHO
KEONJHAR

EARNEST MONEY DEPOSIT

1. The Earnest Money Deposit will be submitted in the shape of **demand Draft and should be in favor of ZSS, NRHM KEONJHAR** from any Nationalized / Scheduled Bank payable at **keonjhar**.
2. The EMD of the unsuccessful tenderers will be returned back without interest and EMD of successful tenderer will be returned after completion of process.
3. The EMD will be forfeited if the tenderer 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

TENDER CONDITIONS :

1. The details of the medical equipments with specifications are mentioned in **Section VI. The firm must clearly mention their specification, special features, upgraded version (if any), detail technical catalogue of the offered model in their tender.**
2. Tenders should be typewritten or computerized.
3. Tender should invariably be attested with signature by the tenderer with date before submission, failing which the tender will be ineligible for further consideration.
4. Rates should be inclusive of all taxes and transportation and should **be quoted for the medical equipments (Item wise) on door delivery basis. The turnkey job (cost of accessories if any required for Installation/Commissioning).** The rates quoted should be in Indian Rupees only. Rates quoted in any other currency will not be accepted
5. The purchaser shall be responsible only after delivery and due verification, installation and commissioning of the equipment.
6. The rate per unit shall not vary with the quantum of order placed for destination point.
7. If there is difference between figures & words, words will be taken into consideration.
8. 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.
9. The price quoted by the tenderers shall not in any case, exceed the controlled price, if any, fixed by the Central / State Government 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.
10. No tenderer 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 tenderers 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.


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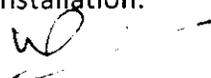
11. If at any time during the period of rate contract, the price of tendered item is reduced or brought down by any law or act of the Central or State Government or the tenderer, the tenderer shall be morally and statutorily bound to inform the purchaser immediately about such reduction in the contracted price. The purchaser is empowered to unilaterally effect such reduction in rate, in case the tenderer fails to notify or fails to agree for such reduction of rate.
12. If the relevant documents / certificates which are required to be furnished along with the tender are written in language other than English, the tendering firms shall furnish English version of such documents/ certificate duly attested by Gazetted officer / Notary with his seal and signature.
13. If any information or documents furnished by the tenderer 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.
14. 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 (Annexure- IX). The tenderer shall not quote the rate for any item other than the item specified in the list. (**Section V – Schedule of Requirement**).
15. Both Cover-A and Cover-B should have an **index and page number** of all the documents submitted inside that cover.
16. The Tax will be charged as per the guidelines given by the Finance Dept., Govt. of Odisha from time to time.
17. The requirement of items may increase or decrease depending on the situation.

TURNKEY:

1. The electrical power supply point will be provided by the purchaser at the room where the equipment will be installed but the wiring and electrical fittings inside the room and accessories if any required for installation & commissioning of the equipment from the power supply point to the point of actual installation or any other civil work required for installation of the equipment will be provided by the supplier without any extra cost (apart from the cost mentioned under turnkey in the Price schedule which should include the cost of all such requirement).
2. All the warranty certificates must be handed over to the consignee after installation.

TRAINING & OPERATIONAL MANUAL:

1. The firm / supplier will provide hands on training to two doctors and two technicians in his own cost for operating / handling the medical equipment(s) at the time of installation of equipment.
2. The supplier / firm will provide the operation / maintenance manuals of all equipments to the purchaser at the time of installation.


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UPTIME GUARANTEE:

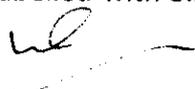
1. The Supplier (s) shall provide guarantee 95% uptime during comprehensive warranty period, i.e., for 2 years from the date of installation & commissioning.
2. Any uptime less than the specified period above will be compensated by the Supplier(s) by extending the warranty period. The consignee shall maintain a logbook in the format provided by the Supplier(s) which will indicate usage of the equipment every day and for calculation of up-time.

DOWNTIME PENALTY CLAUSE:

1. During the Guarantee / warranty period, desired uptime of 95% of 365 days will be ensured (24 hour). If downtime exceeds 5%, penalty in the form of extended warranty, double the number of days for which the equipment goes out of service will be applied. The supplier must undertake to supply all spares for optimal upkeep of the equipment for **TWO YEARS** after installation. If accessories / other attachment of the system are procured from the third party, then the supplier must produce cost of the accessory / other attachment and the CMC from the third party separately along with the main offer and the third party will have to sign the CMC with the purchaser if required.
2. In no case equipment should remain in non-working condition for more than 7 (seven) days from the date of complaint, beyond which a penalty will be applicable as per Rule.
3. The principals or their agents are required to submit a certificate that they have satisfactory service arrangements and fully trained staff available to support the uptime guarantee.

LABELLING:

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


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ACCEPTANCE OF TENDER AND SUPPLY CONDITIONS:

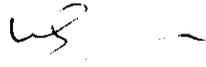
1. The Purchaser reserves the right to reject the tenders or to accept the tenders for the supply of the item tendered without assigning any reason thereof.
2. The Purchaser will be at liberty to terminate the contract either wholly or in part without assigning any reasons thereof. The tenderers will not be entitled to any compensation whatsoever for such termination.
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 58 days with liquidated damage from the date of issue of the purchase orders, authority reserves the rights to cancel the supply order.
4. The tender inviting authority or his authorized 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:

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.
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.

LIQUIDATED DAMAGE :

1. The CDM&PHO, KEONJHAR may allow extension for a maximum period of 4 (four) weeks(28 days), after the stipulated date of supply.
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.


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SECTION -III

PART-A

Schedule of Requirements of Equipments, Instruments & Furnitures

Sl No	Name of Items	Requirement	Place of Supply	Time of Supply
1	Servo Control Stabilizer	1	DHH, Keonjhar	30 Days
2	Shoulder Wheel	16		
3	Shoulder ladder	16		
4	Overhead Pully	16		
5	Walker	16		
6	Cervical Traction	16		
7	Exercise Bicycle	16		
8	Lumbar Traction	16		
9	Gait Aid appliance	16		
10	Hydro collator unit	16		
11	Traction Bed	16		
11	Head light	30		
12	Ear Specula	30		
13	Nasal Specula			
14	Ear Syringe	30		
15	Ear Syringe	30		
16	Otoscope	30		
17	Jobson Horne Probe	30		
18	Tung Fork	30		
19	Noise Maker	30		
20	Mouth Mirror	30		
21	Periodontal Probe	30		
22	Tooth Model with brush	30		
23	Touche	30		
24	IUCD KIT	4		
25	PPIUCD Forcep	52		
26	Near vision chart	30		
27	Color Vision Chart	30		
28	Snellens Chart	30		
29	Shoulder Wheel	16		
30	Shoulder Ladder	16		
31	Over Head Pully	16		
32	Walker	16		
33	Cervical Traction	16		
34	Exercise Bicycle	16		
35	Lumber traction	16		
36	Gait Aid Appliances	16		
37	Hydrocollate	16		
38	Traction Bed	16		

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SECTION -IV

TECHNICAL SPECIFICATION

1	Head Light	<p>Purpose: Coaxial luminaire provides shadow free illumination for improved efficiencies</p> <p>Light weight and comfortable head band options : Yes</p> <p>Supply of accessory like charger,cable & batteries : Yes</p> <p>Color of light : Cool day light</p> <p>Brightness (Lumen): 40</p> <p>Color Temperature (Degree Kelvin): 4500 degree K,</p> <p>Minimum LED Life (Hours): 20000</p> <p>Nature of focusing: Spot</p> <p>Portable compact design with no wires- into shirt pocket: Yes</p> <p>Charging time (Hours): 2-4Hours</p> <p>Color rendering index (CRI): 90</p> <p>Type of battery : Alkaline</p> <p>Run time (Minutes): 60</p> <p>ON/OFF control: Yes</p> <p>MINIMUM Spot diameter (mm): 10</p> <p>MAXIMUM Spot diameter (mm) : 60</p> <p>Standards:</p> <p>Product complies with: IEC 60601-1 and IEC60601-2-41 :Yes</p> <p>Model Should be CE/BIS certified :Yes</p> <p>Manufacturer should be ISO13485 certified: Yes</p>
2	Ear Specula	<p>Shape: Oval cone design</p> <p>Material: Stainless Steel, antimagnetic, acid-resistant</p> <p>Supply:Set of 4nos.Diameter: 3mm, 4mm,5mm& 7mm respectively.</p> <p>Sterilization / Disinfection:Completely reusable and fully autoclavable.</p> <p>Each instrument shall be embossed/etched with manufacturer's name, initials or recognized trade-mark and the words 'Stainless Steel' or letters 'ss'</p> <p>Manufacturer should be ISO 13485 certified</p> <p>Product should be CE/BIS approved</p>
3	Nasal Speculum	<p>Type: Thudichum</p> <p>Product: Nasal Specula</p> <p>Profile: Set of 3(Adult sizes-4&5 & pediatric sizes-3)</p> <p>Specialty: Rhinology Instruments</p> <p>Material: Stainless Steel(ASI410/420)</p> <p>Surface Finish: Satin</p> <p>Sterilization / Disinfection: Completely reusable and fully autoclavable.</p> <p>Each instrument shall be embossed/etched with manufacturer's name, initials or recognized trade-mark and the words 'Stainless Steel' or letters 'ss'</p> <p>Manufacturer should be ISO 13485 certified</p> <p>Product should be CE/BIS approved</p>
4	Mouth Mirror	<p>Type Mirror With Handle</p> <p>Shape of Mirror: Round</p> <p>Diameter of Mirror (mm) set :18 millimeter & 20millimeter</p> <p>Material of housing of the mirror: Medical Grade Stainless Steel(316/ASi410)</p> <p>Anti Fog Coating Yes</p> <p>Thick Non-Slip Handle for perfect grip: Yes</p> <p>Mirror should be With minimum 10 Cm Length of Handle: Yes</p> <p>Mirror should be detachable from the handle: Yes</p> <p>Extra light and handy for more fatigue-free working : Yes</p> <p>GENERAL FEATURES</p> <p>Product Description: Dental Mouth Mirror or Dentist's Mirror</p>


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		<p>Clinical Purpose: For allowing indirect vision by the dentist, reflecting light onto desired surfaces and retraction of soft tissues</p> <p>Disposable or Reusable: Reusable</p> <p>Sterile :Yes</p> <p>Autoclavable: Yes</p> <p>PACKAGING:Individually Packed</p> <p>CERTIFICATIONS & REPORTS</p> <p>Submission of Test Report from Central Govt/NABL/ILAC accredited Lab to prove the conformity to declared specification at the time of supply: YES</p> <p>Product certification: Manufacturer should be ISO13485 certified</p> <p>Product should be CE /IS approved</p> <p>WARRANTY & MAINTENANCE</p> <p>Warranty (Yrs) :Replacement warranty of 1year</p>
5	Tongue Depressor	<p>MAYO TONGUE DEPRESSOR</p> <p>Types shape Flat with round ends</p> <p>Stainless Steel(ASI410/420)</p> <p>Surface Finish: Polish</p> <p>Sterilization / Disinfection: Completely reusable and fully autoclavable.</p> <p>Each instrument shall be embossed/etched with manufacturer's name, initials or recognized trade-mark and the words 'Stainless Steel' or letters 'ss'</p> <p>Manufacturer should be ISO 13485 certified</p> <p>Product should be CE/BIS approved</p> <p>Child Size 140mm</p> <p>Adult Size 200mm</p>
6	Foreign Body Removal Forceps	<p>Name: Alligator</p> <p>Type: Forceps</p> <p>Size:5 1/2"</p> <p>Surface Finish: Polish</p> <p>Curvature: Straight Jaws with angled Shanks</p> <p>Working Surface style: Horizontally Serrated</p> <p>Material: Stainless Steel(ASI410/420)</p> <p>Sterilization / Disinfection: Completely reusable and fully autoclavable.</p> <p>Each instrument shall be embossed/etched with manufacturer's name, initials or recognized trade-mark and the words 'Stainless Steel' or letters 'ss'</p> <p>Manufacturer should be ISO 13485 certified</p> <p>Product should be CE/BIS approved</p>
7	Otoscope	<p>Diagnostic Otoscope rechargeable set is to be supplied in Leather / hard case preferably HIP (High Impact Plastic) with internal soft cushion material for easy portability and protection :Yes</p> <p>Light source : LED bulb</p> <p>Lamp Hour: 20,000 hours minimum /2years warranty of free replacement</p> <p>Number of Spare bulbs to be provided along with the otoscope:0</p> <p>Speculum adapter to be provided : Yes</p> <p>Number of sets of different sizes of Ear Specula to be provided along with otoscope : 2nos (One for Adult & one for pediatric)</p> <p>Disposable :No, It should be reusable</p> <p>Removable Otoscope head : Yes</p> <p>Rotatable lenses : Yes</p> <p>Rechargeable handle: Yes</p> <p>Provision for variable light intensity: Yes</p> <p>CRI: Minimum 90</p> <p>Color temperature: 4300K minimum</p> <p>CONSTRUCTION/FUNCTIONAL FEATURES</p> <p>Material of the device body: Medical Grade Stainless Steel/Medical grade ABS body</p> <p>Instrument Head Matt-black from inside: NA</p> <p>Fibre optics for Cool Light Transmission: Yes</p>

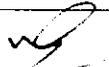

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		<p>Magnification: 3x/3.5x Wide angle viewing lens allowing instrument under Magnification: Yes Provision of sealed system for Pneumatic otoscopy with detachable pneumatic bulb : NA Voltage Rating of the bulb (Volts)(Min) : 2.5/3/3.5 Type of rechargeable battery: Li-ion/Ni-Cd/AA Capacity of the Battery (mAh): NA Battery Voltage(Volts) : 2.5/3/3.5 Continuous runtime of the battery (Minutes): Minimum 60minutes Charger to be provided along with the device: Yes Weight (gms): 200-300 STANDARD Conformity to Standard : EU-CE/USFDA/BIS Manufacturer Should be ISO13485 certified</p>
8	Jobson Horn Probe	<p>Jobson Horne Probe size: 5.5" Features: double end one side screw and other side round loop. Rust free sturdy construction for better grip. A light-weight, flexible and strong. Probes designed as a dual-purpose instrument with Curette loop at one end and a threaded section at the other for holding wrapped cotton wool. Reduced patient trauma due to smooth edges. Sterilization / Disinfection: Completely reusable and fully autoclavable. Each instrument shall be embossed/etched with manufacturer's name, initials or recognized trade-mark and the words 'Stainless Steel' or letters 'ss' Manufacturer should be ISO 13485 certified Product should be CE/BIS approved</p>
9	Tuning Fork	<p>Nickel-plated steel, material thickness 8 mm, Frequency: 128 Hz / 512 Hz and 1024 Hz. Sterilization / Disinfection: Completely reusable and fully autoclavable. Each instrument shall be embossed/etched with manufacturer's name, initials or recognized trade-mark and the words 'Stainless Steel' or letters 'ss' Manufacturer should be ISO 13485 certified Product should be CE/BIS approved</p>
10	Noise Maker	<p>Bell made of brass. Minimum length -8.5cm and minimum weight -70gram. Should be child friendly. Manufacturer should be ISO certified</p>
11	Mouth mirror	<p>Type Mirror With Handle Shape of Mirror: Round Diameter of Mirror (mm) set : 18 millimeter & 20 millimeter Material of housing of the mirror: Medical Grade Stainless Steel(316/ASi410) Anti Fog Coating Yes Thick Non-Slip Handle for perfect grip: Yes Mirror should be With minimum 10 Cm Length of Handle: Yes Mirror should be detachable from the handle: Yes Extra light and handy for more fatigue-free working : Yes GENERAL FEATURES Product Description: Dental Mouth Mirror or Dentist's Mirror Clinical Purpose: For allowing indirect vision by the dentist, reflecting light onto desired surfaces and retraction of soft tissues Disposable or Reusable: Reusable Sterile :Yes Autoclavable: Yes PACKAGING: Individually Packed CERTIFICATIONS & REPORTS Submission of Test Report from Central Govt/NABL/ILAC accredited Lab to prove the</p>

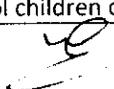

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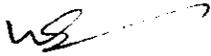
		<p>conformity to declared specification at the time of supply: YES</p> <p>Product certification: Manufacturer should be ISO13485 certified</p> <p>Product should be CE /IS approved</p> <p>WARRANTY & MAINTENANCE</p> <p>Warranty (Years) :Replacement warranty of 1year</p>
12	Periodontal probe	<p>Double ended periodontal probe. Provides accurate pocket depth measurement – and information on sub gingival calculus and other root surface unevenness</p> <p>Ball end of ø 0,5 mm - Increases tactile sensitivity - Does not damage tissue or pierce pocket bottom</p> <p>Sterilization / Disinfection: Completely reusable and fully autoclavable.</p> <p>Each instrument shall be embossed/etched with manufacturer's name, initials or recognized trade-mark and the words 'Stainless Steel' or letters 'ss'</p> <p>Manufacturer should be ISO 13485 certified</p> <p>Product should be CE/BIS approved</p>
13	Tooth Model	<p>Enlarged mouth model with toothbrush to demonstrate correct brushing and dental care.</p> <p>This model is three times life size and has normal anatomy. It's great for teaching proper brushing and flossing techniques.</p> <p>This teeth care demonstration model features a mouth with 32 teeth at three times life-size, for closer observation</p> <p>European CE Declaration according to 2014/53/EU and European Directive on Medical Devices</p> <p>Manufacturer's Quality Certification according to ISO 13485 Yes</p> <p>Packing Each model should be packed individually.</p> <p>Warranty 1 year</p>
14	Torch	<p>Should provide even field of light</p> <p>Bright and natural white light by high performance LED.</p> <p>LED burns at least 20,000 hours.</p> <p>Metal /ABS casing.</p> <p>Easy to use with on/off switch.</p> <p>Includes blade holder, batteries and nylon case.</p> <p>Designed for durability, comes with a 2-year warranty including LED</p> <p>Adjustable spot size from 2-5CM</p> <p>Manufacturer should be ISO certified</p> <p>Product should be CE/BIS approved</p>
15	Tooth Extraction Forceps Set(Adult)	<p>GENERAL FEATURES</p> <p>Product description: Dental Forceps for extraction of tooth</p> <p>Purpose For dental extraction of tooth</p> <p>Utility Dental surgeries of Adult</p> <p>PRODUCT INFORMATION</p> <p>Items in Extraction forceps set: Upper anterior, Lower anterior, Lower molar (Right), Lower molar (Left), Upper molar (Left), Upper molar (right), upper premolar, lower premolar.</p> <p>anatomically-designed beaks for a sure, effective grip: Yes</p> <p>Thick and non-slip handle : Yes</p> <p>Longevity and corrosion resistant material: Yes stainless steel (ASI 410/420)</p> <p>Cleaning, disinfection and sterility: All instruments autoclavable</p> <p>DIMENSIONS & MATERIAL</p> <p>Minimum Handle length (Cm) :10</p> <p>Material of all instruments :Surgical Grade Stainless steel(ASI410/420)</p> <p>Rockwell hardness (HRC): 1</p> <p>Tensile strength (Mpa) : 1</p> <p>STANDARD</p> <p>Product conformity to standard ISO 13485</p> <p>Product should be CE/BIS approved</p> <p>PACKING MODE</p>


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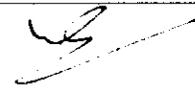
		<p>All the instruments along with user manual, warranty card, Dehumidifier, Cleaning brush, Cleaning cloth etc packed in a carrying case : Yes Packing Each carrying case packed Individually CERTIFICATIONS & REPORTS Submission of Test Report on form 39 or from Central Government /NABL/ILAC accredited Lab or Manufacture's in-house Test Report to prove the conformity to declared specification at the time of supply Yes Product conformity certificate is to be provided to the buyer at the time of supply Yes WARRANTY Minimum Warranty (yrs) : 5 years replacement</p>
16	Instrument Set	<p>As per requirement the clinician to decide the list of instruments</p> <p>Broad specification: 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 engraved/Embossed on the instrument. Sample demonstration Instrument should cover 2 years replacement warranteee. All the instruments should be autoclavable.</p>
17	Binocular Microscope	<p>Microscope Type: laboratory binocular non-hinged type with built in light and with light intensity regulator Conformity to Indian Standard: Research IS:5204 latest ISI MARKED :NA Eye piece Type : Compensating Binocular Eye pieces Confirming to the requirements of IS: 8275/1976 (latest) :Yes Eye Piece with magnification : Set of Two For Binocular 10x Objective Type : achromatic Objective Magnification :100X,40X,10X,4X Numerical Apertures of Objective: 1.25 Type of lamp for Illumination :LED Plano Concave mirror attachment :Yes Stage : Rectangular Size of Stage : 76 X 40 MM/Standards Size Coarse and Fine Movement of stage:Yes Co-axial focusing :Yes Micrometer Arrangement :No ACCESSORIES Extra eyepieces (inclusive in the scope of supply) : NA Carrying case (inclusive in the scope of supply):Yes WARRANTY Warranty 2 year CERTIFICATION Availability of Test Report from Central Govt/NABL/ILAC accredited lab to prove conformity to specification No Test Report No and Date N.A. Name and Address of the Lab N.A. Manufacturer Should be ISO13485 certified Model should be CE/USFDA /ISI approved</p>
18	Near Vision Chart	<p>Name of Tool : Lea Symbols Near Vision Card/ISIHARA Near Vision Chart Type : "16 inches/40 centimeter Lea Near vision chart" Objective : To fulfill the criteria to be a good vision for children by measuring near visual acquity Use : "To assess the child's functional vision at near distances" Utility: Pre-school children of 3 to 5 years age group</p>


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		<p>PRODUCT INFORMATION AND TESTING</p> <p>"Front side of the Lea symbol cards printed with proportionally spaced (log MAR) lines" : Yes</p> <p>"Back side of Lea symbol card printed with 25% and 50% spacing" : Yes</p> <p>"The card contains very familiar 4 symbols like circle, square, house and apple" : Yes</p> <p>All optotypes should be similar legibility : Yes</p> <p>Each line should have optotypes size ranging from 20/400 to 20/10 (6/120 to 6/3) equivalent : Yes</p> <p>Detection of mild amblyopia is possible with closed spacing of the symbols on Lea symbol card : Yes</p> <p>Test distance (cm) : 40</p> <p>Response key printed on the test card : Yes</p> <p>"Includes Student response or training card and instructions" : Yes</p> <p>Inclusive of conditioning flash card : Yes</p> <p>Can be used as wall hanging : Yes</p> <p>Material of the card "Non-tear waterproof material"</p> <p>Card size (cmxcm) : 20.3x25.4</p> <p>PACKING</p> <p>Packing (including user instructions) : Packed in a wallet</p> <p>CERTIFICATIONS</p> <p>Certification Available : Yes</p> <p>Manufacturer Quality certification (ISO)</p> <p>Product approval certificate for Clinical Use</p>
19	Color Vision Chart	<ul style="list-style-type: none"> • Individuals with color vision defect should see a different figure from individuals with normal color perception. • Makes use of the peculiarity that in red-green blindness, blue and yellow appear remarkably bright compared with red and green • Diagnostic plates: intended to determine the type of color vision defect. • International standard test chart books for color deficiency 38 plates with user manual • Book should be specially printed to measure incrementally higher color sensitivity and specificity <p>Manufacturer should be ISO certified</p>
20	Snellen's Chart	<p>Snellen chart with Red/Green bar to test visual acuity.</p> <p>Assessment distance 6m.</p> <p>Size: 23 x 35.5 cm</p>
21	Stadiometer	<p>Standards:</p> <p>Conformity to Stadiometer as per ICDS standards : Yes</p> <p>Stadiometer designed to Measure Height of Adult and Children aged 24 Month and Above in Vertical Position : Yes</p> <p>Performance Parameters</p> <p>Smallest Graduation for Stadiometer (cm) : 0.1 cm</p> <p>Accuracy for Stadiometer (cm) : (+/-)0.1 cm</p> <p>Precision for Stadiometer (cm) : (+/-)0.1 cm</p> <p>Warranty (in Years) : 2</p> <p>Dimensional And Material Parameters</p> <p>Unit of Measurement : In Centimeters</p> <p>Measuring Length in vertical position of Stadiometer (should be able to measure up to 200 cm at least) : 200 centimeter</p> <p>Width of board for stadiometer (cm) : Approx. 5.5 cms</p> <p>Weight of the device (Kg) : 4 kilogram or less</p> <p>Material of Board : mild steel rust proof</p> <p>Additional Features</p> <p>No part Should be Loose or Shaking During Transportation : Yes</p> <p>Double sided graduation Parallel to Board for Easy Measurement : Yes</p> <p>Stable connection assuring precise and accurate measurement : Yes</p>

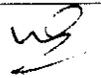

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		<p>No need of calibration as all parts have prefixed position: Yes Stadiometer should have Firm flat surface :Yes Designed for heavy duty use in demanding conditions : Yes Simple and fast set up, no tool (screw driver etc) required :Yes Orientation of numerals on the measurement scale: parallel to the board :Yes Stadiometer should have large foot plate providing extra stable base and smoothly gliding measuring slide/wedge : Yes Stadiometer shall have Adjustable feet for stability on uneven or soft ground and also spirit level indicator to check flat surface : Yes Fold-up Mechanism and low-weight, making it compact and easy to transport : Yes Stadiometer shall be free from sharp edges and corners : Yes Stadiometer shall have friction feature between board and measuring slide/wedge for preventing the latter from drooping when released: Yes Durable, Resistance to excessive Humidity, High temperature resistant, water resistant and shock Resistant :Yes Stadiometer supplied with : 1 Carry bag or carry case made of long lasting fabric, zipper closer (ii) removable, adjustable shoulder/back strap(s) and (iii) small side pocket for storage of operating instructions, loose parts and/or stationery material :Yes Stadiometer supplied with Instructions for use, training, maintenance and trouble shooting in English, Hindi and any other regional language as per requirement, appropriately illustrated with pictograms : Yes Packed in a carton box which should be of sturdy quality and provides adequate protection of the goods while in transportation :Yes Reports Model approval from Director (Legal Metrology) : Yes Certificate number and date from Director (legal Metrology) Department :IND/--/--/--- DATED:--/--/20-- Type Test certificate including Environmental conditions from Regional Reference and standard laboratory (RRSL) : Yes RRSL Certificate Number, date and address Calibration from concerned weight and measurement controller ate to be obtained at the time of supplies : Yes Model approval certificate, Type test and calibration certificate to be furnished if asked by buyer at the time of supplies: Yes</p>
22	Digital BP Apparatus	<p>Type Of SPHYGMOMANOMETERS or Blood Pressure recording unit: Digital Conformity to Indian Standard for SPHYGMOMANOMETERS : NA for digital Measuring device : Automated Type : Integrated ISI MARKED : NA for digital Measurement Method : Oscillometric Display for Digital BP instrument: LCD(Liquid Crystal Digital) Display Range: Pressure measurement (mmHg) : 0 to 300 Range: Pulse measurement for digital with accuracy \pm 5%. (per minute) 40 to 200 Accuracy: Pressure measurement (mmHg) : +/- 3 Pressure Detection : Capacitive Pressure sensor Inflation Automatic Pressure Application by pump Deflation and rapid Air Release : Automatic Pressure Release Valve Cuff Range : Medium (22-32)cm Cuff: disinfect able one piece and bladder cuffs, tested according to ISO,105 EO1/ equivalent standard. Operating Temperature range : 0 to 55 degree Celsius Storage Temperature range : (-10) to 55 degree Celsius Automatic power off if system is idle for 3 minutes :Yes</p>


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		<p>Weight (in gram) :230</p> <p>Power Power Source: AA size chargeable battery set Type of AA Size chargeable Battery (AA Size):Alkaline/ Li-ion</p> <p>WARRANTY, CERTIFICATIONS, TEST REPORTS Availability of Type Test Report covering complete test parameters as per IS3390 latest for Mercurial and IS7652 latest for Aneroid type, from any ILAC/NABL accredited/Central GovLABFor digital type including Environmental test from any ILAC/NABL accredited/Central Gov LAB : Yes CE Marking Certificate for B.P. Apparatus Model. Yes For Digital Sphygmomanometer ,Availability of Type test reports consisting of verification of all the features & functional parameters & environmental tests sequences as under: a) Dry heat test (For 16 hours at a temp of 55degree C in accordance with IS: 9000/part-3/section-3/1977)latest : Yes For Digital Sphygmomanometer Cold test(For 4 hrs at a temp of (-10) degree C in accordance with IS: 9000/part-2/section-3/1977latest c) Damp Heat Cyclic Test (For 2 cycles of 24 hrs at a temp 55 degree C & 95% RH in accordance with IS: 9000/part-5/section-1/1981)latest Note:- The BP Instrument shall be checked for all the parameters before conditioning After completion of the above environmental tests sequence, with a recovery period of 1 to 2 hrs, BP Instrument shall be functional " Yes</p>
23	Aneroid BP apparatus	<p>CONFIGURATION DETAILS Type Of Sphygmomanometer: Aneroid Design: Corrosion resistant shock proof body, chrome plated metal/ stainless steel pressure control valve Conformity to Indian Standard for SPHYGMOMANOMETERS :IS 7652 latest for Aneroid Measuring device :Mechanical Type : Portable Measurement Method:auscultatory Display for BP instrument:Gauge's background in white color. Graduated scale for ever/ 2mmhg, every 10 units and every 20 units. Range: Pressure measurement (mmHg) : 0 to 300 Accuracy:Pressure measurement (mmHg) +/- 3 Pressure Detection: NA Deflation and rapid Air Release: Manualsetting of deflation possible up-to 2/3mm Hg/sec. From 260mmHg To 15mm Hg in a maximum deflation time of 10 seconds Cuff Range: (22-32)cm Cuff Type: Nylon straps cuff with pouch, latex bulb with completely chromium plated valve with regulation of vent-hole air by screw valve. Sterilization / Disinfection: The cuff should be disinfect able one piece and bladder cuffs, tested according to ISO 105 EO1/ equivalent standard. Tube : Single rubber tubes used should have an internal diameter of 3 ± 0.5mm and the external diameter should not be less than 8mm Dimensions of the Equipment (mmXmm): NA Dimensions of the Dial screen (mmXmm) : The dial manometer with diameter of 50 mm-60mm Operating Temperature range 0 to 55 degree Celsius Stroage Temperature range (-10) to 55 degree Celsius Weight (in gram) 150 WARRANTY, CERTIFICATIONS, TEST REPORTS Availability of Type Test Report covering complete test parameters as per IS7652 latest for Aneroid type, from any ILAC/NABL accredited/Central GovLABFor digital type including Environmental test from any ILAC/NABL accredited/Central Gov LAB: Yes</p>

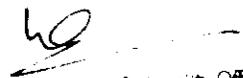

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		CE/IS Marking Certificate for B.P. Apparatus Model. Yes
24	Urine Analysis(DIPSTICK)	<p>Specification of DIPSTICK: Dipsticks for urine test for protein and sugar (1 container of 100 strips) Product :Urine Test Reagent Strips Purpose : To determine pathological changes in a patient's urine in standard urinalysis The entire reagent strips should be disposable: Yes Each strip should be stable and ready to use upon removal from the bottle Yes</p> <ul style="list-style-type: none"> ➤ Urine Reagent Strips provide tests for the following parameters: <ol style="list-style-type: none"> 1. Glucose 2. Bilirubin 3. Ketone (Acetoacetic acid) 4. Specific Gravity 5. Blood 6. pH 7. Protein 8. Urobilinogen 9. Nitrite 10. Leukocytes 11. Ascorbic Acid in Urine. ➤ 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 100 sizes. <p>Quality Standards:</p> <ul style="list-style-type: none"> ➤ Availability of Test Report from Central Govt/NABL/ILAC accredited Lab to prove the conformity to the declared specification (Proof of the same to be submitted to buyer on demand) : YES ➤ Availability of Valid Drug License from the appropriate Drug Authority defined under Drugs and Cosmetics Act, 1940(Proof of the same to be submitted to buyer on demand) For Manufacturing Urinalysis Strips, For Sale or Distribution of Urinalysis Strips ➤ Drug License Number: To provide ➤ Drug License date : To provide ➤ ISO 13485/ ICED 13485 Certified Manufacturer (Proof of the same to be submitted to buyer on demand): YES ➤ CE(IVD) /BIS approved ➤ Manufacturer should be ISO 13485 certified
25	Peak Flow Meter	<p>The PeakAir Peak Flow Meter is used to measure your "Peak Expiratory Flow Rate," which is simply the highest speed you can blow air from your lungs. Type: Mechanical Peak Flow Meter Instant readings to help track any changes in the air flow. Dual Flow Range: Accurately measures for both adults and children.</p> <p>Compact, lightweight and portable Built-in flexible three zone management system</p>


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		<p>Easy- to- read numbers Measurement Range 40-800 L/min Accuracy and repeatability assurance Washable</p> <p>Standards EN ISO 23747: 2009 compliance CE Approved/BIS</p> <p>Manufacturer should be ISO 13485 certified</p> <p>WARRANTY: The product is available with 1-year warranty.</p> <p>Peak Flow Meter-1, Reusable Mouthpiece-4 nos(2-Children & 2 Adults), Instruction Manual</p>
26	Lab Autoclave	<p>Type of Sterilizer: VERTICAL CYLINDRICAL Steam Sterilizer Pressure type Sterilizer Chamber size: 300 mm (Diameter) x 350 mm (Length), with Silicon door gasket (expansion type). Electric load of the unit shall be: 2-3 KW. Steam supply to Sterilizer : Steam Generation by electrically heated using immersion heaters wired for operation on 1 phase wire 230 Hz AC supply [with immersion heaters having mineral filled sheathed heating elements conforming to IS: 4159/2002 duly BIS marked and complying with safety requirements as per IS : 302-2-201(1992)] it should work with 1 phase 220/230 V 50 Hz AC supply Material: Sterilizer parts; Chamber, Jacket, Door, Door Ring and shall be made of SS 316/SS316L</p> <p>Type of control : Manual Provision of Lock on Steriliser Chamber door: Manual Lock Display facility for Sterilisation Cycle parameters : Manual pressure Gauge Steam & vacuum release valve . Warranty Period: 3 year Pressure, Steel & Spore Test Certificate from a Govt/NABL/ILAC approved testing laboratory shall be furnished by Seller to Buyer for the offered Product should be CE/BIS approved Conformity to standard for electrical safety latest amendment : IEC - 60101 Manufacturer should be ISO13485 certified</p>
27	Refrigerator	200 liter capacity may be procured as per availability of service facility .
28	Incubator	<p>Conformity to Standards: CE/BIS Conformity to standard for for electrical safety latest amendment : IEC - 61010</p> <p>Performance Parameters Purpose Bacteriological incubator are used for the incubation of biological products under controlled conditions Type of Incubator: Bacteriological Incubator Capacity in liters 20 Material of Inner Chambers: SS 304 Material of Outer Chamber: CRCA (powder coated point) Steel Ambient Temperature in °C: 5°C above ambient to 60 °C (Bacteriological Incubator) Temperature Accuracy in °C: ±0.5°C Temperature Uniformity in °C : ±2°C Insulation : Glass wool Controller : Microprocessor based PID control Digital Display of temperature in °C : Yes Type of Display : LED Type of Temperature sensor : PT100 Power supply : 220 V , 50 Hz Single Phase Door: Insulated door and fitted with heavy hinges and should have Toughened glass</p>

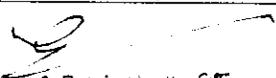

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		<p>window Air circulation fan Type of Shelves : Removable Material of Shelves : SS wire mesh Number of shelves :2 Size of incubator (L x W x H) in mm x mm x mm:NA Weight in kgs: NA Auto power break off: No Over temperature protection: Yes Safety alarm system : Yes Instruction manual to be provided :Yes Warranty in Years : 1</p> <p>Standards Manufacturer should have ISO13485 certification: Yes Copies of all certifications and reports to be provided to buyer on demand at time of supplies:Yes Product should be CE/BIS approved</p>
29	Micro Pipette	<p>Clinical purpose: Pipettes are most appropriate tools for drawing & dispensing of samples for users in the field of clinical diagnostics, control analysis and other areas.</p> <p>Technical Specification:</p> <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 OC ➤ Should have larger & clear 3 digit display giving smaller increment for wider selection of volume ➤ Volume range should be of 10-100µl with increment of 1 µl ➤ Accuracy: 0.8 to 5% ➤ 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 compatible 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 ➤ Manufacturers should have ISO 13485 certification for quality standards ➤ Should be applied with individual QC & calibration report according to ISO 8655
30	Centrifuge-8 Tubes	<p>Performance Parameters Purpose:Separating Serum from blood or for urine sedimentation Centrifuge Design: Bench Top Weight including Default Rotor in kg: NA Auto cut off: Yes Timer provided: Yes Maximum RPM 3000-3500 Number of steps for RPM variation :In steps /Continuous Incremental Steps of Variable RPM :300-400 Type of Motor: Brushless (without carbons) Maximum Noise level when working at 1 meter distance in db50 Ambient operating Temperature range in Degree centigrade Celsius and humidity range</p>


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		<p>0 to 50 degree centigrade and Relative humidity 15 to 90%</p> <p>Rotor imbalance diagnostics and automatic stop if required: Yes</p> <p>Facility to ensure that In case Machine is running and lid is opened with manual lock by user , machine shall stop: Yes</p> <p>Maximum Timer Set range 60 minutes</p> <p>Timer settings Provided : interval of 10 seconds up to 1 minute and over 1 minute up to 60 minutes in interval of 1 minute: NA</p> <p>Display : LED /LCD</p> <p>Speed Controller : Microprocessor controlled preprogrammed speed controller</p> <p>Speed Control: Accuracy in case of set speed (Plus minus RPM)</p> <p>Rotor configuration: Swing Out Rotor</p> <p>Rotor Feature with reference to Autoclavability: Autoclavable Rotor @ 121 Degree Celsius,</p> <p>Maximum Volume of the tube testable: 15 ml centrifuges tubes</p> <p>Rotor Size: 8X15ml</p> <p>Power supply : Single phase, 230 V 50 HZ AC Source</p> <p>Power consumption in watts: 500Max</p> <p>Length of Power cord in meters 2</p> <p>The Equipment shall be installed and demonstrated before Acceptance installation and demonstration: Yes</p> <p>Accessories: Spanner to tight or loose Nut of Rotor on Motor shaft head puller, spare rotor nuts , fuse-2,</p> <p>Warranty in Years 3</p> <p>Material Parameters:</p> <p>Assembly Material for manufacture of Medical Centrifuge: Consists of Die cast Aluminum, Aluminum sheet, Stainless Steel, CRC Steel, Plastic and Rubber</p> <p>Lid Material of Medical Centrifuge : m.C.R.C Steel Finish with Powder Coating or stove painting / ABS Plastic of injection molding</p> <p>Body Material of Medical Centrifuge: C.R.C Steel Finish with Powder Coating or stove painting / ABS PLASTIC OF injection molding</p> <p>Centrifuge Bowl material of Medical Centrifuge: 304 Quality Stainless Steel Molded</p> <p>Material of Rotor : Aluminium,</p> <p>Standard:</p> <p>ISO13485 certification for Manufacturer: Yes</p> <p>Copies of all certifications and reports to be provided to buyer on demand at time of supplies Yes</p> <p>Product should be CE/USFDA/BIS approved</p>
31	Needle Destroyer	<p>GENERAL Purpose : To destroy the used injection needles by instant electro melting process and to cut syringe tips manually using the appliance</p> <p>Type : Portable and electrical</p> <p>Principle of operation : Electro-melting type</p> <p>CONSTRUCTION</p> <p>Suitable sliding tray shall be provided for collection of residue and destroyed syringe tips : yes</p> <p>Material of the Housing /enclosure : ABS Plastic</p> <p>Housing/enclosure shall be moulded type and shock proof: yes</p> <p>Provision to burn the needles and to cut the syringe tips shall be provided in the unit : yes</p> <p>Manual cutter provided in the equipment Made of hardened blade of anti-corrosive SS material</p> <p>Transformer winding : Copper</p> <p>FUNCTIONAL</p> <p>Number of needles of 1mm dia and 80mm length that can be destroyed in continuous operation of 5 minutes 50</p> <p>Sizes of injection needles of all kinds which can be destroyed Dia Ranging from 0.4mm to 1.6mm (26 SWG to 14 SWG) with length 12.5mm to 80mm</p>


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		<p>ELECTRICAL</p> <p>Power supply : 207V to 253V,50Hz AC supply</p> <p>Power ON/OFF switch with indicator shall be provided : YES</p> <p>Rated power(Watts): 60 Watt</p> <p>Shall be provided with fuse and power cord of min 3m length and earthing point : YES</p> <p>Manual of usage instructions : To be supplied by the supplier</p> <p>CERTIFICATIONS</p> <p>Manufacturer should be ISO-13485</p> <p>Comply in general to IS:302Pt-1/1979 to ensure safe and reliable operation in normal use: YES</p> <p>Occupational health and safety certification from approved bodies as per OHSAS 18001-2007 : YES</p> <p>CE /BIS Certification from approved bodies : Yes</p>
32	Shoulder Wheel Over Head pulley Shoulder ladder	<p><u>Shoulder wheel, Overhead pulley, Shoulder ladder (set)</u></p> <p>Clinical use: Used for improving mobility & strength of shoulder girdle & rotator cuff muscles in case of frozen shoulder, paresis & paralysis cases.</p> <p>Technical Specification:</p> <p>A.Shoulder Wheel:</p> <ul style="list-style-type: none"> ➤ It should be a wall mounted one. ➤ The wheel for use of adult and pediatric ➤ The motion arc can be adjustable from 10 to 38 inches by adjusting the handle. ➤ The wheel shall be mounted on a two chrome plated height adjustable (8" to 26") rails. ➤ The resistance can be varied by turning the resistance knob. ➤ The manufacturer should be ISO certified <p>B. Over Head Pulley:</p> <ul style="list-style-type: none"> ➤ Heavy duty, medical grade, shoulders pulley exerciser for physical therapy use. ➤ Over the door metal bracket allows easy one hand setup. ➤ Units with a door strap require two hands, which is difficult with an injured shoulder. ➤ Easily adjustable cord length for any height and for use in both seating and standing position. ➤ The overhead pulley should have the provision of wall mounting. <p>C. Shoulder Ladder:</p> <ul style="list-style-type: none"> ➤ Wood Finger/Shoulder Ladder ➤ 32 vertical finger steps ➤ Solid wood with heavy topcoats ➤ Pre-drilled mounting holes ➤ The manufacturer should be ISO certified.
33	Walker	<p>Product type: Frame type, foldable walker</p> <p>Purpose : Walking training device for improving postural alignment while walking, overcoming musculoskeletal impairments and for improving mobility anterior support with less energy consuming</p> <p>Usage :Youth& OLD</p> <p>PRODUCT INFORMATION</p> <p>Posture control possible: Yes</p> <p>Light weight: Yes</p> <p>Wiped clean with a damp cloth: Yes</p> <p>Safety mechanism provided to prevent the user from slipping while walking : Yes</p> <p>Foldable for easy storage and transportation: Yes</p> <p>Anterior support Yes</p> <p>Forearm Supports with latex free flanged hand grips: Yes</p>

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		<p>DIMENSIONS, MATERIAL & WEIGHT Material frame: Stainless steel tubular frame Height of walker with standard wheels (cm): NA Height of walker with activity wheels (cm): NA Distance between hand grips (cm): 34 Frame width (Cm) : 58 to 60 Frame length (cm) : 52-59 Maximum user weight (kg): 100 Frame weight (kg) : 2.5 to 3.0</p> <p>PACKING MODE All the main parts and accessories are Individually bubble wrapped and packed in a strong box to avoid transit damage Yes</p> <p>CERTIFICATIONS & REPORTS Submission of Test Report from Central Government /NABL/ILAC accredited Lab or Manufacture's in house Test Report to prove the conformity to declared specification at the time of supply Yes Certification Available: ISO for manufacturer Product should be CE/ BIS approved WARRANTY:1year</p>
34	Cervical traction (manual)	<p>Cervical Traction Kitis a complete apparatus designed to provide traction to the cervical and upper dorsal vertebrae. Cervical traction Kit includes the following:</p> <ul style="list-style-type: none"> ➤ Traction Pulley Bracket ➤ Cervical Traction Head Halter ➤ Cervical Traction Spreader Bar ➤ Traction Cord(Nylon rope)5meter. ➤ Traction Weight Bag with weights <p>Controlled continuous traction Easy removal and application Reduced frictional losses Durable and sturdy for a long life and multiple use. Can be used in sleeping posture. Pulley is ergonomically designed to fit any bed side. Soft padded head halter provides a comfortable interface for the traction, is easy to wear and use. Manufacturer should be ISO13485 certified Product should be CE/BIS certified.</p>
35	Exercise Bicycle	<p>i) Tubular steel frame on properly balanced legs with four rubber tips ii). Fitted with one hard rubber type wheel, standard chain and a socket iii). Seat should be adjustable iv). Should be fitted with a ball bearing resistance roller which permits controlled movement in riding v. LCD/LED display with speedometer. vi. Warranty: 3 Years Manufacturer should be ISO13485 certified Product should be CE/BIS certified</p>
36	Lumber Traction manual	<p>It strengthening broken bones, immobilization or relieving pressure on the skeletal system. Composition: Universal type Includes pelvic belt, spreader bar & 3 meter long cord. It contains traction water and sand weight bag traction pulley bracket the pelvic traction bel traction cord and 8 kg weight.</p>


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		<p>Manufacturer should be ISO 13485 certified Product should be BIS/CE approved</p>
37	Gait Training Apparatus/ Parallel bar	<p>Clinical Use: It use for horizontal surface gait training, Coordination training of lower limb in various neurological conditions like paralysis, GBS, Parkinson etc.</p> <p>Technical Specification The parallel bar should be a height adjustable; plat form based one which should be very simple for easy accommodation of multiple patients of age group. The handrails should be in single piece, circular in design stainless steel ribbed pipe of minimum diameter 1 1/2". Both the end of the handrails should be fitted with bumpers. The Uprights should be made of heavy gauge square 1 1/2" steel tubes. All parts should be powder coated except the handrail. The handrail should single piece stainless steel pipe The uprights are to be fitted on a 1 1/2" thick hard plywood base water and termite resistance. Both end of this platform should be curved slope for obstruction free. The platform should be stain finish. Both the end of the plat form should have two anti-slip threads for none skidding. Safety treads at both ends of platform should be provided for safety of the patient when take turn. Models make it safer for patient to turn 15.3: Minimum dimension of the structure: Length of the bar: 10feet Width of the bar: 25" – 28" Height adjustment of the Bar: 26" – 39" The manufacturer should be ISO approved.</p>
38	Hydro Collator Unit	<p>Clinical Use: A moist heat modality use as a superficial to medium penetration thermotherapy modality. Clinically use for chronic pain management & joint stiffness cases.</p> <p>Technical Specification:</p> <ul style="list-style-type: none"> ➤ Water tank made up of Stain less steel inner & outer Cabin (20-25 Gauge thickness) ➤ High grade thermally insulated ➤ Static/Movable base ➤ Top lid of stainless still, thermally insulated with Fibre handle. ➤ Product Type:Table Top ➤ Dimensions: NA ➤ Tank capacity: 10- L ➤ Temperature range: 50-90 degrees Celsius ➤ Thermostatic temperature control (50 - 90 degree C) - Auto cut-off ➤ Thermal cut-out temperature ➤ Temperature accuracy: +/- 10% ➤ Heat-up time to 90 degree Celsius: in 3 hrs. ➤ Cool-down time from 90 degrees Celsius: 2 hrs. <p>Power supply Mains power: 220-230 V, 50/60 Hz Power consumption: 1000Watt</p> <p>Safety Standard Electrical safety class: Class 1, type B Safety tests: Conforms to IEC 60601-1</p> <p>Quality Standard: The model should be CE/BIS approved. The manufacturer should be ISO13485 certified</p> <p>Accessories must include:</p> <ul style="list-style-type: none"> ➤ Hydro collator Moist Heat Hot Pac : Standard Size-1, Over size-1,Cervical Standard size-1, Hydro collator Knee or Shoulder HotPac-1. ➤ Cotton Towel: 4 pieces.

39	Traction Bed	i Traction Bed – 4 Fold ii. Size : 6 (L) x 2.5 (W) x (H) 3 feet iii. For horizontal cervical and lumbar traction. Should have complete with Storage Shelf & a Flexion Stool Manufacturer should have ISO certified. Product should be CE/BIS Certified
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SECTION –V

ANNEXURES

(Technical Bid, Price Bid)

(25)


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CHECK LIST

(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



COVER – A (TECHNICAL BID)

DOCUMENTS : SUBMITTED OR NOT

Sl no	Documents	Submitted (Yes/ No)	Page No		
1	List of Item (s) – Annexure II		<table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>		
2	Tender document Fee				
3	Earnest Money Deposit				
4	Details of Manufacturing Unit / contract person Liaisoning agent / servicing centre (Annexure III)				
5	Declaration form (Annexure -IV) signed by the Tenderer & affidavit before Notary Public / Executive Magistrate				
6	Manufacturer's Authorization Format (Annexure – V)(for distributor/Importer)				
7	Proof of avg. Annual turnover for last 3 financial years (for manufacturer /Importer) / Proof of Annual turnover for last 3 financial years for authorized distributor as well as manufacturer/Importer (in case of distributor) (Annexure - VI)				
8	Performance Statement (<i>Item wise</i>) during the last three years (Annexure – VII) Copies of Purchase order (<i>Item wise</i>) in support of the performance statement				
9	Deviation/No deviation Statement (<i>Item wise</i>) & details of technical specification (Annexure -VIII A & B)				
10	Leaflets/Technical Brocheures of the Products offered (<i>Item wise</i>)				
11	Copy of Import license (In case of				



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	Importer		
12	Copy of Valid ISO Certificate		
13	Attested Photocopy of Up-to-date / US FDA/BIS Certificate (<i>Item wise</i>) As per technical specification)		
14	Attested Photocopy of Up-to-date IEC Certificate (<i>Item wise</i>) (As per technical specification)		
15	Photocopy of PAN		
16	Photocopy of GST certificate		


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ANNEXURE-III

(Refer Clause No. 3.5)

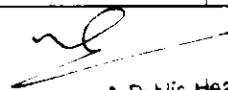
(To be submitted in *Cover A -Technical Bid*)

DETAILS OF THE TENDERER & LOCAL CONTACT PERSON/ SERVICE CENTRE

	Corporate Office (The address in which the purchase orders and payment details will be communicated)	Address of Local Contact Person / Branch Office / Zonal Office Address of Service Centre if any, in Odisha.
Name & Full Address		
Telephone Nos., landline		
Mobile		
Fax		
E – Mail		
Date of Inception	(Copy of Certificate of incorporation)	
Name of the issuing authority		
Import License (in case of Importer only)		
GST		
PAN		
Details of the Service Centre Facilities (in Odisha)		

Signature of the Tenderer :

with seal


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(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 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 items / non-supply.

I/We agree that the Tender Inviting Authority can forfeit the Earnest Money Deposit
and or Performance Security Deposit and blacklist me/us for a period of 3 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 _____do hereby declare that I / We
supply the _____ supply the items as per term and condition of
thr tender document. I/ We further declar that I/we have service center/ will establish a
service ceter with in a month of installation of equipment in odisha.

Signature of the bidder :

Date :

Name & Address of the Firm:

Seal:


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(To be submitted in *Cover A -Technical Bid*)
MANUFACTURER'S AUTHORISATION FORMAT

To

Ref: Tender No. _____ Dated _____ for _____. Dear Sir,

We, _____ are the manufacturers of _____

(name of equipment(s) and have the manufacturing factory at _____.

1. Messrs _____ (name and address of the agent) is our authorized distributor for sale and service of _____ (name of equipment(s))
2. We confirm that **no supplier or firm or individual other than Messrs**-----
_____ (name of the above distributor) is authorized to submit a tender and enter into a contract with you for the above goods manufactured by us.
3. We also extend our full warranty (3 years comprehensive warranty) and also full back-up support for 3 years AMC/CMC after the warranty period as required by the purchaser.
4. We undertake that we have adequate infrastructure and spare part support to carry out the warranty and AMC/CMC services and do accept to provide uptime guarantee of 95% as per this tender clause No. 13.1.

Yours faithfully,

(Signature with date, name and designation)

For and on behalf of Messrs _____ (Name & address of the manufacturers)

Seal

Note :


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

ANNEXURE – VI

(To be furnished in the **letter head** of the Auditor/ Chartered Accountant)

ANNUAL TURN OVER STATEMENT

The Annual Turnover for the last three financial years of
M/s _____ who is a Manufacturer

/Distributor/Importer (Pl. tick whichever is applicable) are given below and certified that the statement is true and correct

Sl.No.	Year	Turnover in (Rs.)
1.	2016-2017	-
2.	2017-2018	-
3.	2018-2019	-

Average Annual Turnover (for the above three years) in (Rs.) _____

Date:
Place:

Signature of Auditor/
Chartered Accountant
(Name in Capital) Seal

Note

To be issued in the **letter head** of the Auditor/Chartered Accountant mentioning the Membership no.


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(To be submitted in Cover A - Technical Bid)
Annexure VII

PROFORMA FOR PERFORMANCE STATEMENT

(For the period of last three Years)(2017-18, 2018-19 & 2019-20)

ITEM WISE (Pl. Furnish separate performance statement itemwise if the bidder quote for more than one item & attach the order copies alongwith each performance statement)

Tender Reference No. :

Name of Tenderer :

Name of Manufacturer :

Name of the Item :

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

Signature and seal of the Tenderer

* The documentary proof will be copies of the purchase order (during the last 3 years) 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.

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(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			
3			
4			
5			

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

Signature of the Bidder

Name :

Date :

Place :

Seal

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

Annexure VIII B

DETAILS OF TECHNICAL SPECIFICATION OF THE PRODUCT (S) OFFERED BY THE BIDDER

Sl. No.	Item Name	Make	Model	Detail Specification of the product(s) offered* (Pl. Describe the detail specification of the product offered) – Para wise compliance to the technical specification asked for.	**Page no. of the Catalogue / Leaflet where Para wise compliance information as per technical specification is available
1					
2					
3					
4					

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

** It is mandatory to mention the page no(s) in the format as mentioned above.

Signature of the Bidder

Name :

Date :

Place :

Seal

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To be submitted in Cover B – Price Bid **ANNEXURE-IX**

FORMAT - PRICE SCHEDULE

SI No	Name of the Item (s) (Items mentioned in the schedule of requirement)	Make & Model	Unit Price with all accessories which includes transportation excludes Taxes	** Cost of Turnkey if any (all accessories for installation & commissioning including all taxes for turnkey in Rs. (Door delivery & installation)	GST (if any) on & above the item price mentioned in (3)	* Total Cost of the Item
A	B	C	D	E	F	G=D+E+F

Price of each item (s) quoted should be mentioned separately in separate sheet & should be sealed in separate envelopes

* GST which will be chargeable on the price (3) shall be mentioned separately in column 7 above.

** The cost of turnkey shall only be quoted if any specific accessories/equipment is required for installation & commissioning. In case of turnkey, the details of accessories/equipment are to be mentioned.

(37)

[Signature]