NO.CPRGHKK/STORE/MACHQC/1005/20-21 Office of the Dean, Chhatrapati Pramila Raje General Hospital, Kolhapur Dt.22/01/ 2021

Subject : <u>Quotation for Purchase of Machinery and Equipment's.</u> Reference : As per Hon. Dean's approved note Dated : 22/01/2021

We are inviting the quotations as per one envelope system for the following machinery and equipments required at different departments of this hospital. Quotations should be in the prescribed form and as per Terms and condition mentioned bellow. Prescribed format is available on **www.rcsmgmc.ac.in**. This quotation procedure is subject to administrative approval from Govt. of Maharashtra.

Last date of Submitting Quotation along with Demonstration report Date: 29/01/2021 up to 01.00 p.m.

Download the annexures and required forms from given on website, print as per given instructions, give the demonstration of the machinery / equipment to the respective Head Of The Department, for which intended to submit the quotation. All the photo copies should be self attested or attested by guazetted officer.

Sd/-Dean, C.P.R. General Hospital, Kolhapur.

Encl.:

List and Specifications of Machinery and Equipment's.
 Terms and Conditions

C.P.R. General Hospital, Kolhapur List and Specification for Machinery and Equipments

Specification	Particulars	Approx	List and Specification for Machinery and Equipments Specification	Name of
No.		Qty. Rqd.		Department
D-8	Radiovigeography (RVG) Disgital System	1	 Shold be compatible with Kodak 2100 intraoral X-Ray system CCD / Super CMOS technology Sensor Size : should be convenient and comfortable for adults as well as pediatric Sensor plate thickness – approx. 7.3 mm True image resolution of sensor 16-20 lines per mm Connection – USB 2.0 high speed Exposure life should be minimum 350000-400000 Should have automatic acquisition and save facility Should provied compatibility with software such as digital camera and scanner Sensor cable length should be approx 3 meters and reinforced for durability and reliability. 	Dentistry
D-9	Baby Warmer	2	 Physical Characteristics specifications 1. The unit should be made of mild steel tubular structure pretreated and powder coated. 2. Heater Rotation ±90° to the side to facilitate X-ray procedures. 3. The heater should automatically shuts off when in this position. 4. Bed Tilt should be ±15° Trendelenburg and Reverse Trendelenburg, continuous tilt 5. Mattress density should be approx. 21-25 kg/m3 and removable, washable, water proof cover 6. Should have plastic moulded storage drawers under baby's bed 2-3 in number. System Control specifications 1. Should have microprocessor based heater control and manual modes of operation 2. Should have user friendly touch sensitive control panel with large easy to read LED displays for actual (patient and air temperature) and set temperatures. 3. LED indicator for selected mode. 4. Should have Quartz Infrared Heater with parabolic reflector for uniform heat Radiation. 	OBGY

 5. The heater unit should be protected by a suitable grill. 6. The heater unit should be swiveling type and should be swiveled effortlessly. 7. The probes should be detachable type. 8. Should have memory back up to retrieve set data against power failure. 9. Should have calibration free temperature sensors. 10. Should have alarms with visual indicators for the following Temp high, 	
 ii. Temp low iii. Probe failure iv. Power failure v. Heater failure v. Heater failure 11. The heater should automatically cut off at 38 degree Celsius irrespective of the set parameters. 12. Should have an examination light with ON/OFF switch. 13. Should work with input 200 to 240Vac 50 Hz supply. 14. Should have 0-650 W heater output. 15. Heater output should be adjustable from 0 - 100% in 5% increments 16. servo Control should be between 30 - 38°C in increments of 0.1°C 17. Manual Mode should Indicate manual mode heat selection range from: 0-100% in 5% increments 18. Temperature Measurement Accuracy specification: ±0.3°C @ 30°C to 40°C 19. Temperature Display Resolution specification: ±0.1°C 20. Temperature Probe Accuracy specification: ±0.1°C @ 30°C to 42°C 21. Operating Temperature Range: +18 to +30°C 22. Humidity range: 30 to 95% RH 	
D-10 Central Oxygen System If mm pure copper Medical pipe If mm pure	TB and Chest

			 O2 Flexible PVC pipe BPC Flow Meter with Humidifier And Line Adoptor & acc Twin Gauge Double Gauge Regulator Saddles, Elbos, Copper bend etc As per site requirement, O2 key,Spanner Etc. Jumbo Cylinder Jumbo Cylindeer Stand (4 Cylinder) O2 Alarm Analog 	
D-12	Defibrillator	1	 7 inch colour TFT screen Bi phasic waveform (current- controlled) High energy efficiency 100 charge/discharge of 300 J with fully charged battery Wide energy levels. 2-300 J of energy level can be selected for defibrillation by the user Remote energy selection, charging and discharging through paddles Patient-Paddle contact indication(Type BF) Pace pulse recognition Common mode rejection Input impedance (>2.5 Mohm) Frequency response (0.5 to 40 Hz) Heart rate display Heart rate alarms QRS tone Defibrillator protection 	Psychiatry
D-14	Portable X-Ray Machine		 Digital x ray and CR/DR from TRIMAX = USFDA / CE / ISO approved products in India TECHNICAL SPECIFICATIONS OF Portable X-Ray Unit 60 mA a Operation Requirement 1 Compact, light weight easily transferable portable X-ray unit suitable for bedside X-ray (Box type) 2 Effective breaking system with tube stand fully counter balanced with rotation in all direction. 3 Exposure with remote control should be available. 4 Cassette storage facility for all size cassettes along with cassettes screen 15" x 12" =4 Nos., 12" x 12" = 4 nos., 12" x 10"= 4 nos., 10" x 8" = 4 nos. (800 speed cassettes.) 	Paediatric

			5 Lead blocker 15" x 6" =2 nos. 6 Lightweight lead apron = 2 nos. 7 Lead letters & numbers 2 sets = 4 nos.	
			 b Technical Specification mA range : 60 mA, light weight, kV range : 40 kV to 90 kV. 2. 2. Should have digital display of mAs and kVs. 3. 3 Microprocessor controlled high frequency, output 15 kW or above. c X-ray Tube 1 Stationary Anode 2 Light beam collimator of multi leaft type of auto cutoff switch. 3 Exposure release switch should be detectable with a cord of sufficient length minimum 30 meters as per IRCP recommendation. 	
			d Standard Safety 1 Should comply with AERB/BIS/IRCP guidelines for radiation leakage and X-ray equipments.	
D-15	Pulse Oxymeter	10	 BRIGHT led LCD display for pelt , o2 , heart value Light weight & portable monitor 48 hrs graphical trends for spo2 and heart rate monitor With selected alarms Maximum battery back up 	Paediatric
D-17	Student Binacular Microscope	12	 Sturdy stand with plastic hand rests Binacular tube, 450 inclined, 3600 rotatable, IPD 54-74 mm Wide Field eyepiece HKW 10x paired Quadruple Nosepiece (Ball bearing type) VA series Semi Plan Achromatic objectives 4x, 10x, 40x (SL) and 100x (Spring loaded, oil immersion) Stage rectangular with mechanical stage cross travel 75 x 50 mm with co-axial control Sub-stage ABBE condenser NA 1.25 with aspheric lens. Iris diaphragm and special day light blue filter. Co-axial coarse and fine focusing mechanism with tension control Illumination system 6V-20W Halogen with intensity control Power Input 220V AC Packed in mouled Styrofoam box, with opetation manual, dust cover and cleaning cloth. 	Microbilogy
D-18	Non Invasive Ventilator (Bipap)	3	Dimensions : 18 cm L x 14 cm W x 10 cm H (7" L x 5.5" W x 4" H) Starting ramp : 4 to EPAPmin Pressure range : EPAP 4 - 25 cm H2O; IPAP 4 - 25 cm H2O; CPAP 4 - 20 cm	TB and Chest

D-19 Patient Monitor (BP/Putst/O2) 4 4 H2O Flex pressure relief :0 to 30 (S-mode) Breath rate : 0 - 30 beats per minute Ramp time : 0 to 45 min (S-min increments) min Warranty : Two years (US only) Weight without humidifier : 1:36 (3) kg (bbs) On-board data storage capacity (minimum) : up to 3 mon Electrical requirements : 100-240 (50/60) VAC (H2) Filters : Foam and optional utura-fine Device setup : LCD/control wheel/push batton Data storage capacity Display (minimum) : compliance VIC, 1-, 7- and 30-day averages Data storage capacity Display (minimum) : compliance VIC, 1-, 7- and 30-day averages 30-day averages Data storage capacity Display (minimum) : compliance VIC, 1-, 7- and 30-day averages 30-day averages Data storage capacity Display (minimum) : cgt/>1 yr Compliance meter : Breathing detection Altitude compensation : A nuomatic Humidification : Integrates with System One 60 Series humidifier and System One 60 Series Heated Tube hamidifier Miscellancous : Lighted LDDs Modes : CPAP, S ST, PC, T Flex confort Faitures Patterns of use : Standard Advanced event detection* Standard Reimbursement*: RAD with high resolution • • Display mode: 12" color TFT ICD with backup rate Encur/DirectView data capture and reporting • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Display mode: 12" color TFT ICD with bight resolution • • Disenplay ical be for adult,				
D-19 Patient Monitor (BP/Pulst/O2) Flex comfort : Bi-Flex Comfort features Patterns of use : Standard Advanced event detection* :Standard Advanced event detection* :Standard Advanced event detection* :Standard Heinbursement*: RAD with backup rate Beinbursement*: RAD with backup rate Flex comfort : Display mode : 12" color TFT ICD with high resolution • Be applicable for adult, pediatric and neonatal for all -round monitoring. • Display mode : 12" color TFT ICD with high resolution • Be applicable for adult, pediatric and neonatal for all -round monitoring. • Operation interface with Chinese and English (Oponal Languages : French, German, Italian, Trukish etc. Butting display modes are optiona, such as big characters interface. • Multiple display modes are optiona, such as big characters interface.			Flex pressure relief :0 to 30 (S-mode) Breath rate : 0 - 30 beats per minute Ramp time : 0 to 45 min (5-min increments) min Warranty : Two years (US only) Weight without humidifier : 1.36 (3) kg (lbs) On-board data storage capacity (minimum) : up to 3 mon Electrical requirements : 100-240 (50/60) VAC (Hz) Filters : Foam and optional ultra-fine Device setup : LCD/control wheel/push button Data storage capacity Display (minimum) : Compliance VIC, 1-, 7- and 30-day averages Data storage capacity SD Card (minimum) : <gt></gt> 1 yr Compliance meter : Breathing detection Altitude compensation : Automatic Humidification : Integrates with System One 60 Series humidifier and System One 60 Series Heated Tube humidifier Miscellaneous : Lighted LEDs	
D-19 Patient Monitor (BP/Pulst/O2) Patient Monitor			One 60 Series Heated Tube humidifier Miscellaneous : Lighted LEDs Modes : CPAP, S, S/T, PC, T	
 D-19 Patient Monitor (BP/Pulst/O2) Display mode : 12" color TFT ICD with high resolution • Be applicable for adult, pediatric and neonatal for all -round monitoring. Operation interface with Chinese and English (Oponal Languages : French, German, Italian, Trukish etc. Multiple display modes are optiona, such as big characters interface. TB and Chest 			Patterns of use : Standard Advanced event detection* :Standard Reimbursement*: RAD with backup rate	
	D-19	4	 Display mode : 12" color TFT ICD with high resolution • Be applicable for adult, pediatric and neonatal for all -round monitoring. Operation interface with Chinese and English (Oponal Languages : French, German, Italian, Trukish etc. Multiple display modes are optiona, such as big characters interface. Waveform and data colour can set optionally 	TB and Chest

			 leads). Adopt digital SpO2 technology, which has stront antiinterference and anti weak filling capability. Function of NIBP review, storage for up to 400 NIBP data Connect central monitoring station, other bed observation and software updating with wireless and wired mode. Built-in SD card, U disk for storing data and U disk updating. Support the functions of VGA video output and adjustable LCD backlight. Three operation mode : monitoring, surgery and diagnosis. Auto analysis for arrhythmia waveform Calculation function for drug concentration and titration table. Dual-channel temprerature monitoring, and with software and hardware. Built in rechargeable lithiu battery for uninterrupted monitoring. The product has passed FDA certification in america and CE certification in Europe. 	
P-2	Apex Locator	1	 Apex locator should be accurate, reliable for detecting minor apical foramen inside the root canal system. It should be comfortable with its multi- frequency technology for its use in dry and wet canals. It should have audible alarm with adjustable volume while displaying file progression in root canal. It should be powered by rechargeable battery. It should have measurement cable with lip clip . Lip clip and connection hook should be autoclavable. 	Dentistry

Sd/-Dean, Chhatrapati Pramilaraje General Hospital, Kolhapur.

Copy for publishing on office website Dr. Sudesh Gandham, President Website Development Committee And Professor and Head, Dept. Of P.S.M., C.P.R. Hospital, Kolhapur.

TERMS AND CONDITIONS

4	Quatation	1 All rights are recorned by The Deen CDD Convert Hearing to reject
1	Quotation	1. All rights are reserved by The Dean, C.P.R. General Hospital, Kolhapur to reject any or all quotations without assigning any reason.
		2. This procedure is subject to availability of administration approval and funds by
		Govt. of Maharashtra.
2	Security Deposit :	The successful supplier will have to pay a security deposit of an amount equivalent to
		5% of the cost of the equipment offered in one of the following form.
		a) Bank guarantee valid for ten years issued by any Nationalized bank in concurrence
		with the Reserve Bank of India, Mumbai.
		b) National Saving Certificate, national Defense Certificate or Postal Saving
		Certificate pledged in the name of the Dean, Chhatrapati Pramila Raje General
3	Delivery Period :	Hopital, Kolhapur" payable at Kolhapur. for a period of ten years. The delivery of goods should invariably be made with in <u>6 To 8 weeks</u> for indigenous
5	Denvery renou.	terms and <u>8 To 12 weeks</u> for imported items, from the date of confirm order. If the
		date of delivery cannot be strictly adhered to, then extension required by the quotation
		should be stated in the bid. No excuses for delay by any statutory like custom etc. will
		be taken into consideration for extension of the period of delivery. The primary
		responsibility for supply of goods in time will rest with the supplier.
4	Penalty on late delivery	In the event of the late delivery of goods, the buyer will recover from supplier by way narrally a sum equal to half remeat $(1/29)$ of raise of the goods (while the
	:-	penalty, a sum equal to half percent (1/2%) of price of the goods (subject to maximum 5%) delivered late per week calculated from the next day after the agreed
		delivery period is over.
5	Warranty Period :-	The warranty period shall be for Two years from the date of commissioning of all
C	······································	equipments supplied as certified by the consignee.
6	Warranty Contents:-	Clearly mention the items which are covered under warranty and which are not covered
		under warranty, if not mentioned separately; it will be treated as whole machinery
		including all accessories etc. is covered under warranty .
7	Warranty Extension :	The successful quotation must ensure 100% uptime during warranty period in case of down time, warranty period will be extended for period of down time. The quotation will have
		to give Bank Guarantee (of Nationalized bank) of 5% of ordered value valid for 02 years
		towards performance guarantee for warranty. If the equipment is not attended within 24
		hours for Kolhapur and 48 hours for Other Places. The supplier will be liable to pay a
		penalty of 0.05% of purchase cost per day of delay. Such penalty shall be recovered from
	4	the amount of bank guarantee. Certificate of such uptime / downtime shall be issued by the end user. Which shall be binding for the supplier.
		Replacement of parts and service thereof due to manufacturing defects during warranty
		period will be entirely at the supplier's cost. The expenditure incurred for procurement of
		space, transport, installation, commissioning and various duties there of shall be borne by
		the supplier.
8	Annual Maintenance	The supplier will have to agree to enter into a annual maintenance contract (AMC) @ 1% of the ordered value of the equipment or will have to agree for comprehensive maintenance
	Contract / Comprehensive	of the ordered value of the equipment or will have to agree for comprehensive maintenance (CMC) inclusive of all spares $@5\%$ of the ordered value of the equipment. The period of
	Maintenance Contract	such AMC / CMC will be of 8 years after completion of warranty period, In case of non-
	:-	compliance of AMC/CMC the supplier will be liable to pay a penalty. Such penalty shall be
		recovered from the amount of bank guarantee. Payment for AMC/CMC on yearly basis will
		be made by the user institution, at the end of year after satisfactory performance report
9	Payment :	from the end user Initial payment of 90% of the contract value will be made on delivery and successful
7	i ayınıcını .	installation. Remaining 10 % of the contract value will be paid only on satisfactory
		commissioning of the machinery for minimum period of 30 days and after all
		documentary compliance. Payment is subject to availability of grants.
10	Rates :	The rates quoted must be in Indian Rupees. The rates quoted should be inclusive of excise
		duty, GST, Transportation, Insurance, packing and forwarding and Fittings and Installation
		charges etc Rates should be within the market rate limits and should not be more than
		M.R.P. at any circumstances. At any stage of the quotation process even after completing the process if it is found that the rates mentioned are more than the M.R.P., the supplier is
		responsible for refund the difference with interest to this office.
L		

11	Specification :	Quoted Machinery should be as per the specification mentioned above chart.				
12	GEM Product :	If any product is available on G.E.M. Portal, then quotation procedure for such product				
		will be treated as cancelled.				
13	 Attachments: Must be attached in the iquencial order nentioned.) All the annexures must be printed on A-4 Size Paper) Annexure – A (Satisfatory Demonstration Report signed and issued by H.O.D. user department) Must be attached with quotation envelope externaly. Quotation submitted without "Annexure A" will not be accepted. Office will not pay any type charges for demonstration purpose, all expenditure will be born by supplier only. Submit in Sealed Envelope : (Use Separate Envelope for each equipment.) 2) Annexure – B (Acceptance letter of all terms and conditions duly signed and stamped by the supplier on suppliers letter head.) Annexure – C (Quotation On Given Format duly stamped and signed by Authorised Signatory) (Amount should be quoted only for demonstrated Machinery / Equipment mentioned in Annexure - A) GST Clearance / Exemption Certificate, 5) Authorisation Letter from manufacturer for selling, after sales service and to enter in to agreement on behalf of manufacturer. 					
		6) Product Catalogue,				
		7) I.S.O./ I.S.I. Certificate if applicable,8) Attested photo copies of PAN Card,				
		9) Registration Certificate (Shop Act License, Company Reg. Certificate etc.)				
14	Submission	Quotation should be enrolled at Inward department and then submitted to Machinery				
15	Superscript	and Equipment Store Department.Pleasesuperscripttheenvelopewith"QUOTATIONFOR				
10	~ ~ Porseript	Machine / Equipment (Specification No)				
		Sd/- Dean, Chhatrapati Pramilaraje General Hospital, Kolhapur.				

	Annexu	re – A	
	<u>(Don't insert in Quo</u>	tation Envelope)
		No. CPRGHK/	/2020-21
		Department	
		<u>Chhatrapati Pra</u>	amilaraje General Hospital,
		<u>Kolhapur</u>	
		Date: /	/2021
<u>To,</u>			
<u>M/s</u>			
	Subject : Demonstration report of		
	Specification No.		
	Reference : Quotation published by	Dean, C.P.R. Hos	spital, Kolhapur
	<u>No. cprghk/store/ma</u>	ACH/QC/1005/20-2	1, Dt.22/01/2021

With reference to above mentioned subject, certified that

Particulars				
M/s has given demonstration for				
Machine / Equipment (Specification No.).				
Demonstrated machine Model No. : on date / /20				
Demonstrated machine is complying with our required specifications. Hence, Allowed to				
submit the quotation.				
Demonstration Not required for this equipment / machine. Hence, allowed to submit the				
tion.				

As per point No. _____ mentioned above, this department is agreed for further necessary procedure.

Professor And H.O.D. Stamp

<u>Annexure – B</u> (Insert in Quotation Envelope) (On Suppliers Letterhead)

(On Suppliers Letterhead)

Terms & Condition Acceptance Certificate

Date

Ref :-

To,

The Dean, Chhatrapati Pramilaraje General Hospital, Kolhapur.

Subject : Acceptance of all terms and conditions.

Ref:- Quotation Call No. CPRGHK/STORE/MACH/QC/1005/2020-21 Date :22/01/2021

Respected Sir,

I/We the undersigned, have examined the above mentioned Quotation Call document and I/We have read all the terms and conditions of the quotation carefully and I/We agree to abide by them.

If our quotation is accepted, we undertake to supply the goods & perform the services as mentioned in

Quotation Call Document in Accordance with the delivery schedule.

I/We further understand that you are not bound to accept the lowest or any quotation you may receive against your quotation enquiry.

I/We confirm that we fully agree to the terms & conditions specified in above mentioned Tender Enquiry document including Amendment /Corrigendum if any.

______ is covered under warranty clause and _______ is not covered under warranty clause.

Sign & Office Seal of the Supplier

Annexure – C

(Insert in Quotation Envelope) (On Suppliers Letterhead) (Price Quotation)

To, The Dean, Chhatrapati Pramilaraje General Hospital, Kolhapur

Respected Sir,

We are giving our lowest possible rates for the bellow mentioned Equipment.

Specification No.	Particulars	M.R.P. Per Unit In INR	Rate Per Unit In INR				
110.	NAME OF EQUIPMENT AS MENTIONED IN						
	QUOTATION CALL LETTER						
	OUDIATION CALL LETTER						
	<u>Add. : GST % :</u>						
	Add. : Any Other Taxes (If any) :						
	<u>Grand Total :</u>						
	(Inclusive of All Taxes, Duties, Installation and						
	Delivery at site, Fitting and Fixtures etc.)						
Total Amount	in Words (INR): (In CAPITAL Letters)						
•							

Note :

- 1) Variation in Amount in Figure and Amount in word will be treated as falsy quotation and it will be cancelled without any notice.
- 2) Do not over write the figures and amount in words.
- 3) Only original form given by this office will be accepted (Quotation made on letter head will not be accepted.)
- 4) Certified that the above mentioned price of the goods to be supplied is not more than the M.R.P. of the said goods.

Sign & Office Seal of the Supplier