राष्ट्रीय गतिशील दिव्यांगजन संस्थान
National Institute for Locomotor Disabilities (Divyangjan)
(दिव्यांगजन सशक्तिकरणविभाग,सामाजिकन्यायएवंअधिकारितामंत्रालय,भारत सरकार)
Department of Empowerment of PwDs (Divyangjan), Ministry of Social Justice and Empowerment, Govt. of India
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ENQUIRY NO: ICU-MAINT/2513/OT/2017/NILD Date: 06.08.2019

Delivery required within: 30 Days after receiving the P.O.
Last date of submission of quotation: 27.08.2019

REF: INVITING OF ONLINE QUOTATIONS THROUGH WWW.EPROCURE.GOV.IN FOR THE PURCHASE OF **ICU EQUIPMENT FOR OPERATION THEATRE.**

Sl. No.	Name of Equipment	Specification	QTY
01	ICU Ventilator	1. Operational Requirements:- a) Microprocessor Controlled ventilator with integrated facility for Ventilation monitoring suitable for Pediatric and Adult ventilation. b) Demonstration of the equipment when required. 2. Modes of Ventilation**:-** a) Volume controlled Ventilation. – CMV-VC Assist-VC SIMV-VC/PS b) Pressure Controlled Ventilation. CMV-PC Assist-PC SIMV-PC/PS c) Advanced mode APRV or equivalent PRVC/VS d) Spontaneous ventilation modes PSV CPAP e) Non-invasive ventilation: BIPAP & CPAP. f) PEEP. 3. Ventilation parameters: - a) Tidal volume - 50 – 2600 ML (Adult patient) 20 to 300 ML (**Paediatric** PC mode). b) I**nspiratory** Pressure - 0 – 80 cm H2O. c) PEEP/CPAP - Off-30 cm H2O. d) Respiratory rate - 5 – 120 BPM. e) **Inspiratory** Peak Flow - 6 – 120 1/min. f) Apnea /backup ventilation. g) **Inspiratory** and Expiratory hold. h) Oxygen Concentration - 21 –100 % i) Pressure trigger: -0.5 to -15 cm H2O j) Flow Trigger: 0.3 – 30 L/min k) Settable I:E ratios 1:1, 1:1.5, 1:2, 1:2.5, 1:3, 1:4, 1:5 with I/E Inverse Ratios: 2:1, 3:1 & 4:1, Pause Trigger(0.2 to 10 L/min) l) Tube compensation 4. Monitoring and display: - a) Monitor with LCD/TFT (10” or higher size) graphical display for real time simultaneous display of two waveforms.	01 No.

		b) Airway Pressure (Peak, Mean, Plateau, PEEP). c) Tidal volume (Inspired & Expired). d) Minute volume. e) Respiratory mechanics. f) Respiratory rate: Breathing rate and spontaneous g) Fi02 inspired. h) Resistance & Compliance. i) Adjustable Alarms for all measured & monitored parameters. j) Monitor and display min 3 waves-- Pressure and Time, Volume and Time and Flow and Time. k) Monitor and display min 2 loops-- Pressure-Volume, Flow-Volume, Pressure-Flow with facility of saving of min 2 Loops for reference. l) Trending facility for minimum 48hours with minimum 5 minutes resolution for recent 24 hours 5. Standard Accessories (with each machine): - a) Patient circuit(Adult and **Paediatric**) - complete set. b) Nebulizer - Complete set. c) Humidifier - 1 No. d) O2 Pressure Regulator with hose - 1 No. e) Hose for O2 and compressed air connection with connector - 5 **mts.** f) Test lung - 1 No. g) Reusable dual flap silicone face & nasal mask (Small, Medium, Large) with textured cushion flap for easy fit. h) ET tube cuff pressure monitor and HME filter. 6. Pneumatic Gas Sources: a) Gas delivery system by sound less medical grade compressor with the unit. b) In case of compressor failure it should also be operable with compressed air / oxygen supply of 45 to 60 psi. 7. Features: - a) The unit shall be capable of being stored continuously in ambient temperature of 0 -50 deg C and relative humidity of 15-90% b) Should have safety certificate from a competent authority CE / FDA (US) / STQC CB certificate / STQC S certificate or valid detailed electrical and functional safety test report from ERTL. c) Expiratory block should be **autoclavable** and no routine calibration required or with expiratory **autoclavable** filter. Filter should be provided with the machine. 8. Power:- a) Power Source: - 220/240 V Ac 50 Hz supply. b) Internal battery (maintenance free) with 1 hour minimum operating time for the ventilator 9. Mounting Trolley/Cast mounting with wheels and central braking for easy transportation.	
02	Monitor	**<u>Multiparameter Monitor:-</u>** 1. 15” colour TFT/LCD display with high visibility and highly visible alarm light 2. Should be portable with carrying handle 3. Colour display upto 8 waveforms simultaneously/4 digit fields 4. Automatic zoom in Facility in the monitor display preferable 5. Modular and with user modes standard Adult, pediatric, neonatal 6. The waveforms should be user selectable 7. Should have keys for quick access to main functions 8. Capability of storage of patient data and option of printing of patient	02 Nos.

		reports. 9. Basic patient side module for measuring ECG, SPO2, NIBP, IBP, Respiration Rate, temperature & ETCO2, for adult, pediatric and neonatal patients as standard. 10. Monitor should have in built Lithium-ion type battery for approx 3 Hrs continuous operation in case of mains failure or supplied with a pure sine wave UPS for 3 Hour backup. 11. Defibrillator and cautery protection should be provided 12. ECG: a) Multichannel (up to 12 lead) ST segment analysis b) 5 lead with cascade waveform facility. c) HR range 20-250 BPM d) HR/PR Source selection facility from Automatic, SpO2, IBP and NIBP. e) Automatic arrhythmia detection & alarm for standard & lethal arrhythmia 13. PULSE OXIMETRY a) Display of **Plethysmograph** with SpO2 values & perfusion index(desirable). b) Pulse Strength indicator with Variable pitch with change in SpO2 c) SpO2 Range – 0-100% d) PR Range – 20 to 250 BPM e) Protection against external **cautery i**nterference. 14. ETCO2 a) Should be Main Stream/ side-stream **capnography** with display of CO2 and digital Values of EtCO2, FiCO2 & RR. b) EtCO2, FiCO2 Range – 0-99 mmHg c) EtCO2, FiCO2 Resolution –1mmHg d) Alarms: Apnea Alarm, Occlusion error 15. NIBP a) Measurement and display of systolic diastolic and mean pressure values of NIBP measurement for adult, child & neonate. b) User selectable alarm settings c) Mode: Manual, automatic (selectable time interval 2-90 minutes) and STAT (continuous 5 minute operation), **venipuncture** mode (optional) d) Range 20-250 mmHg 16. TEMPERATURE a) Two units: (º Centigrade and º Fahrenheit) selectable b) Temp. Range – 0- 50 Deg C. 17. RESPIRATION a) RR range 5-150bpm, b) Sourced through ECG cable or CO2. Priority to CO2. c) Apnea alarms should be provided. 18. IBP a) Range : -10 to 300 mmHg b) 2 channels preferable c) Resolution: 1mmHg 19. TRENDS & ALARMS a) 72 Hrs graphical/tabular trends with zoom facility and separate dedicated trend for storing min 200 NIBP readings b) Adjustable alarm limits c) Should have separate volume control for beep sound for QRS and alarm sound. d) Should have Alarm recall facility for last 24 Alarm events with date, time and Message e) Recorder option for printing upto 4 waveforms and alphanumeric data and trends etc.	

		20. ACCESSORIES a) 5 Lead ECG cable set b) NIBP Cuffs for Adult , Obese adult, Child , neonatal c) Disposable EtCO2 module with all accessories: pediaric and adult d) Temperature probes - adult and pediatric :1 core and 1 skin probe e) Reusable SPO2 probes: adult 2, paediatric 2 f) IBP cables and complete monitoring kit 21. ENVIRONMENTAL FACTORS a) The unit shall be capable of operating continuously in ambient temperature of 10-40 deg c and relative humidity of 15-90% b) The unit shall be capable of being stored continuously in ambient temperature of 0-50 deg C. 22. POWER SUPPLY -Power input to be 220-240 V AC, 50Hz fitted with Indian plug. 23. STANDARDS, SAFETY & TRAINING a) Should be USFDA,CE approved product b) Shall meet the safety requirements as per IEC 60601 – 2- 27: 1994 – Medical electrical equipment – Part 2:	
03	Syringe pump	1. Should be easy to use and nurse friendly. 2. Should have automatic syringe size and model detection 3. Should have large format LCD/TFT display. 4. Compatible Syringe range from 10-50/60 ml. 5. Should have a minimum flow rate range from 0.1 – 1200 ml/hr for 50ml syringe, 0.1 – 100 ml/hr for 20ml syringe and 0.1 – 60 ml/hr for 10ml syringe. (0.1 ml/h step, if the value is 100 ml/h or above, the step should be 1ml/h) 6. KVO rate: 0.1 ml/h~5 ml/h (Adjustable) 7. Should have a flow rate accuracy of ±2% 8. Should have programmable and manual bolus. 9. Infusion mode setting: Rate mode, weight mode and time mode, 10. Should have at least 3 levels of programmable occlusion pressure 11. Infusion history records 1500 pcs 12. Should have automatic bolus reduction system to avoid accidental bolus delivery after occlusion incident. 13. Display or information: a) Flow rate, volume limit, accumulated volume, power indicator light, occlusion, empty. b) Display range of totally delivered volume: 0~9999 ml (0.1 ml step, if the value is above 100 ml, the step is 1 ml) 14. ALARM: Pump must trigger following alarms with visual indication:- a) Occlusion Pressure Alarm b) KVO or 3 min pre- alarm c) Syringe empty and volume infused alarm d) Internal malfunction and Battery Charge Low Alarm e) Syringe disengaged and incorrectly placed alarm f) No mains 15. Weight ≤2.5kg, Dimension ≤350mm (Width)× ≤160mm (Height)× ≤150mm (Depth) 16. Operation conditions a) Ambient temperature: +5 - 40℃ , Relative humidity: 20% -- 90% b) Storage conditions: Ambient temperature: -20 to +55℃, Relative humidity:≤95% c) Water proof 17. POWER a) Should have a rechargeable Li ion battery with back up time of minimum 5 hours. b) AC110~230V, 50~60 Hz	02 Nos.

		c) Electrical safety: compliance with the requirements of IEC 60601-1. d) Electric shock protection/class: Class I, CF 18. STANDARDS, SAFETY & TRAINING a) **Should have safety certificate from a competent authority CE / FDA (US) / STQC CB certificate / STQC S certificate or valid detailed electrical and functional safety test report from ERTL.**	
04	Patient Transfer Slide Board	a) Size- Length- 1525 mm; Width- 625 mm; Thickness- min 5 mm b) Light weight- weight <5 Kg c) It should have Smooth Sliding Anterior/ Upper Surface Meant for Patient Shifting or Transfer. Edges and corners must be rounded to avoid injury. d) Load Capacity- 225 Kg e) Material: Made from thick semi-flexible thermoplastic material. f) Radio Translucent g) 12 longitudinal ridges on base to reduce sideways movement of the board. h) Cut out on both sides to assist with transfers and carrying. i) Static Insulation j) Impact Resistant k) Material must not be damaged on cleaning with detergent/ aqueous disinfectant. l) Comprehensive warranty of 2 years from date of supply of product must be offered.	02 Nos.

NOTE:-The suppliers should note the below mentioned points before uploading the quotations:-

a) Should have local service facility .
b) The service provider should have the necessary equipments recommended by the manufacturer to carryout preventive maintenance test as per guidelines provided in the service/maintenance manual.
c) Back to back warranty to be taken by the supplier from the principal to supply spares for a minimum period 7 years.
d) Comprehensive warranty for 2 years and provision of CMC for next 5 years.
e) User Manual in English. List of Equipments available for providing calibration and routine maintenance support as per manufacturer documentation in service / technical manual.
f) Log book with instructions for daily, weekly, monthly and quarterly maintenance checklist. The job description of the hospital technician and company service engineer should be clearly spelt out.
g) Operating manual and demonstration
h) The job description of the hospital technician and company service engineer should be clearly spelt out.

GENERAL INSTRUCTION AND TERMS & CONDITIONS

Tender documents can only be downloaded from the web site (www.eprocure.gov.in). The cost of tender paper amounting to Rs. **500.00 (Rs. Five hundred only)** & EMD amounting Rs**. 40000/-(Rs. Forty thousand only)** which shall have to be deposited by the tenderer directly to the bank account of National Institute for Locomotor Disabilities (Divyangjan), Kolkata through online/ offline mode, on or before the last date of bid submission date of tender. The detail of the Bank Account of National Institute for Locomotor Disabilities (Divyangjan), Kolkata is mentioned below. The original copy of the transaction slip, duly signed by the tenderer, must be up loaded along with tender document.

i. The bid security will remain valid for a period of 90 days after the date of submission of the bid.
ii. Any tender not accompanied by bid security shall be rejected.
iii. Bid securities of all the bidders will be returned to them after complete of the tender process.
iv. Incase of bidders or tenderers furnish false information their tender/bids will be rejected and their security deposit/EMD will stand forfeited.
v. BANK ACCOUNT DETAIL OF NILD, KOLKATA FOR DEPOSITION OF TENDER COST, EARNEST MONEY

Name of the Account Holder	National Institute for the Orthopaedically Handicapped
A/c No	53015297593
Name of the Bank	State Bank of India
Name of the Branch	NIOH Campus Kolkata
IFSC	SBIN 0030468

Kindly online submit your quotation for the above items in two parts on Central Public Procurement Portal www.eprocure.gov.in

THE FOLLOWING DOCUMENTS SHOULD BE ENCLOSED IN TECHNICAL BID:

1.	Quotation should be enclosed with complete technical details and literature of the product.
2.	Compliance sheet with desired and quoted specifications given in comparative table
3.	Copy of latest and valid Trade license, Income Tax, GST / Sales Tax Clearance certificate etc should be submitted along with quotation
4.	**Warranty as mentioned above**
5.	The biders/tenderers shall clarify /state whether he/they are manufacturer accredited agent or sole representative indicating principals and agent quoting on behalf of their manufacturers / principals with valid document
6.	Bidders / Tenderers should have quality assurance certifications issued by the authorized organization.
7.	In case of bidders or tenderers furnish false information their tender/bids will be rejected and their security deposit / EMD will stand forfeited.
8.	**DO NOT USE THE WORD "Compliance" / "COMPLIED". REMARK SHOULD BE SPECIFIC.**
9.	**SUPPLIERS/FIRMS SHOULD QUOTE THE ITEMS AS PER SPEIFICATION (POINT WISE) ONLY. ANY DEVIATION FROM THE TECHNICAL AND FINANCIAL BID PROFORMA GIVEN IN THE TENDER DOCUMENT MAY ATTRACT CANCELLATION OF THE BID.**
10.	**THE FIRMS ARE INFORMED TO UPLOAD THE CLEAR COLOUR PICTURE OF THE EQUIPMENTS FOR WHICH THEY ARE SUBMITTEING THE BIDS.**
11.	**IN ABSENCE OF COMPLIANCE OF THE POINT NOS. 8, 9 & 10 MENTIONED ABOVE, THE BIDS WILL NOT BE CONSIDERED**
12.	**TENDER DOCUMENT SHOULD BE STRICTLY AS PER FORMAT GIVEN**

Part 2- Financial Bid

1. The price / rates for the item quoted must be valid for **06 months.**
2. Any other relevant information that the bidder may like to furnish so as to add the credibility, financial solvency, client list and past performance of the bidder.

3.SUBMISSION AND OPENING OF QUOTATION:

(A). Telegraphic/ Cabled/ faxed/ e-mail etc, which are exposed Quotation will be summarily rejected.
(B) The Technical bids will be opened first as per Central Govt. GFR.
(C) The Financial bids will be opened of only the firms found technically suitable and after verify their valid document.

4. PRICE:-

(a).The price quoted should be F.O.R. National Institute for Locomotor Disabilities (Divyangjan), **(erstwhile NIOH)** B.T.Road, Bon-hooghly, Kolkata-700090 in **Indian Rupees only**.
Price quoted should never be exceed the Printed / Catalogued MRP of the product and price should be inclusive of all taxes and other charges (If any).
(b). The price quoted should be firm and remain valid for 06 months from the finalization of tender.

5. EARNEST MONEY AND SECURITY DEPOSIT:

All quotations must be accompanied with earnest money deposit as indicated above. Quotations without EMD will be rejected. The EMD will be refunded to the unsuccessful bidders, and shall be adjusted as part of security deposit in case of successful bidder. No interest will be paid on EMD or Security Deposit.

The SD money will be remained in custody of the institute till three months after expiry of warranty period or for a mutually agreed period from the date of installation / commissioning of the ordered materials.

6. RESPONSIBILITIES FOR EXECUTION OF CONTRACT:

The supplier is to be entirely responsible for the execution of the contract in all respect in accordance with the terms and conditions as specified in the acceptance of quotation and lawfully responsible for the supply at site and will replace any part or full, whatever the case may be, if found not in conformity with the specification as laid down. Non-fulfillment of contract as per terms and condition as stipulated shall cause forfeiting of EMD/Security deposit.

7. DELIVERY SCHEDULE:

Delivery should be free at site, Main Store of NILD, KOLKATA, If the supplier fails to deliver the stores or any part thereof within the stipulated date of delivery, the competent authority of the Institute (NILD) will be entitled at their discretion to either:
(a). purchase the store from elsewhere, at the cost and risk of the supplier or
(b) **Recover from the supplier liquidated damages liability @ 0. 5% per week of the order value**.

8. REMOVAL OR REJECTION:

Any stores rejected by our quality control officer/expert must be removed by the supplier and replacement made within two weeks from the date of receipt of such intimation at his risk and cost.

9. CREDIBILITY OF FIRM/SUPPLIER:

All the bidders are required to submit "Letter of Authorization from the Manufacturer verifying them as their authorized agent in India" **The bidder should have its office/representative/service provider within a reasonable distance from the institute in Kolkata and have sales/ service installations in Kolkata** preferably

10. BILLING & TERMS OF PAYMENT:

Bills in Triplicate along with the Original receipted challan must be submitted to the Director, NILD, B.T.Road, Bon-hooghly, Kolkata-700090, duly pre-receipted by affixing revenue stamp and official seal. Admissible payment will be made after final commissioning/installation and satisfactory installation certificate.

11. SETTELEMENT OF DISPUTES:

All disputes or differences of any kind whatsoever arising out of or in connection with execution of this contract, whether during the progress of the supply or after their completion, shall be referred by the supplier to the Director of the Institute and the competent authority of the institute shall within reasonable time shall examine the case on its merit and on basis of any representation made in this context and notify decisions thereon in writing. The decision of the Director of the Institute shall be binding upon the supplier. If the supplier is not satisfied with the decision of the competent authority of the Institute, on any matters in question, dispute/difference to be arbitrated upon shall be the jurisdiction of the High Court at Kolkata.

The High Court of Kolkata will only be the jurisdiction to deal with and decide on any dispute whatsoever arising out of this tender.

The Director of the National Institute for Locomotor Disabilities (Divyangjan), reserves the right to reject any or all the tenders without assigning any reasons or giving any explanation thereof. No claim for damages will be entertained in this regard.

In addition to above, all others terms & conditions will also be binding as applicable in Govt. of India Purchase Rule.

The above conditions are stipulated without any prejudice.

DIRECTOR

NILD,KOLKATA

ANNEXTURE-I

CHECKLIST OF SUBMITTING DOCUMENTS - (TO BE FILLED BY THE TENDERER)

SL. NO:	DOCUMENTS	PLEASE MARK " √ " IF DOCUMENT SUBMITTED*
1	Tender document, downloaded from the web site Web: www.eprocure.gov.in	
2	Warranty of the items.	
3	Delivery period:-	
4	Validity of the quotation should not be less than 06 months.	
5	Signed photo copy of latest and valid Trade license, Income Tax, GST / Pan card/ Sales Tax Clearance certificate / Partnership Deed (in case of Partnership firm must be submitted with the Quotation documents.	
6	Valid documents stating that bidder/ tendered is/are manufacturer accredited agent or sole representative indicating principals and agent quoting on behalf of their manufacturers / principals with valid documents.	
7	Quality assurance certifications issued by the authorized organization.	
8	Brand of the product:-	
9	Details of service centre:-	
	Any other documents submitting by the Tenderer, to be mentioned here:	

***Mention "Not Applicable" if the document is irrelevant.**