

**TERMS, CONDITIONS FOR
SUPPLY AND INSTALLATION OF
INSTRUMENT EQUIPMENT FOR HEALTH AND WELLNESS
CENTRE & OTHER LOGISTICS
2021-22**

Name of the District / Health Institution: CDM&PHO, Nuapada
(HEALTH & F.W. DEPTT., GOVT. OF ODISHA)

Bid Reference No. CDM&PHO/12/HWC/ 2021-22

LAST DATE & TIME OF RECEIPT OF BID DOCUMENTS : 15.11.2021 upto 05.00 PM

DATE & TIME OF OPENING OF COVER-A (Technical Bid) : 16.11.2021 at 11.00 AM

DATE OF OPENING OF COVER-B (Price Bid) : As decided by the purchase committee during technical bid evaluation.

PLACE OF OPENING OF BID DOCUMENTS
AND

ADDRESS FOR COMMUNICATION: O/o Chief District Medical & Public Health Officer,
AND Nuapada

RECEIPT OF BID DOCUMENTS

Tel:

Email: cdmocumdmdnuapada@gmail.com/
dwhnuapada@yahoo.in

OFFICE OF THE CDM&PHO NUAPADA

SECTION -I

SALE OF SHORT TENDER / BID DOCUMENT

The Bidders may download the Tender Documents directly from the district website www.Nuapada.nic.in The Tender paper cost fee of Rs.5000/- (Five Thousand only (Non-refundable) by way of separate Demand Draft drawn in favour of **ZSS NON-NRHM, Nuapada**, payable at SBI Nuapada from any nationalized/Scheduled bank. The Bidders should superscribe, **“Tender for Instrument Equipment under HWC 2021-22” & Tender reference CDM&PHO/12/HWC/2021-22 (DOWNLOADED FROM WEBSITE)”** on the top of the outer envelope containing Technical Bid and Price Bid separately. The Tender cost fee in shape of demand drafts in the technical bid. CDM&PHO, Nuapada shall have no responsibility for any delay / omission on part of the bidder.

The Short tender paper will be rejected if the bidder changes any clause or Annexure of the bid document. The authority reserves the right to accept/reject any or all the tenders without assigning any reason thereof.

ABBREVIATIONS

CDM&PHO : Chief District Medical & Public Health Officer

M.O, I/c : Medical Officer In-charge

S.D.M.O : Sub-Divisional Medical Officer

DHH : District Head Quarter Hospital

SDH : Sub-Divisional Hospital

CHC : Community Health Centre

PHC : Primary Health Centre

ROH : Rural Other Hospital (Area Hospital)

RKS : Rogi Kalyan Samiti

ZSS : Zilla Swasthya Samiti

EMD: Earnest Money Deposit

SECTION -II

IMPORTANT INSTRUCTIONS TO BE NOTED CAREFULLY BY THE TENDERERS

1.	Purchaser	Health & F.W. Department
2.	Indenter	Chief District Medical &Public Health Officer,
3.	Consignee	DHH
4.	Delivery Period	Within 30 days from issue of the work order.
5.	Mode of Delivery	By Air / Road / Rail/by Hand
6.	Guarantee / Warranty	Guarantee / Comprehensive warranty: including spares, maintenance etc. for a period 2(two) years from the date of installation & commissioning.
7.	EMD	Rs.20, 000.00 (Rupees Twenty Thousand) only. The Earnest Money Deposit will be paid in the shape of demand Draft only in favour of ZSS NON-NRHM, Nuapada from any Nationalized/Scheduled Bank payable at SBI Nuapada.

SECTION -III

TERMS AND CONDITIONS FOR SUPPLY AND INSTALLATION OF INSTRUMENT AND EQUIPMENT

- 1.1 Sealed tenders will be received by Dated 15.11.2021 Tender for Supply and installation of instrument, Equipment & Hospital Furniture under **HWC** for the year 2021-22 up to 05.00 PM by the CDM&PHO, Nuapada in the office of the Chief District Medical & Public Health Officer, Nuapada. Any tender received after due date & time will be rejected & returned to the sender unopened. **The tender paper will be received through Regd. Post / Speed Post/ Courier services only.**
- 1.2 The bidder(s) are to submit their tenders in **separate** sealed covered envelopes for **technical bid** and **commercial bid** by super scribing **Cover “A” (Technical Bid) & Cover “B” (Price Bid)** and both the sealed covers should be put into a **third outer Cover**, which should be superscribed as **“Tender for Instrument Equipment for HWC 2021-22” & Tender reference CDM&PHO/12/HWC/2021-22.**
- 1.3 The Sealed tenders “Cover A” (Technical Bid) submitted by the tenderers will be opened by the CDM&PHO, Nuapada in the office chamber of the CDM&PHO, Nuapada at 11AM on 16.11.2021. The tenderer or their duly authorized representatives are allowed to be present during the opening of the tenders if they so like.

ELIGIBILITY CRITERIA

- 2.1 Manufacturing units / Importers/ Suppliers are eligible to participate in the tender provided, they have
 - (i) Valid manufacturing license / Import License. Importers/ Suppliers have to furnish the authorization from the manufacturer/

- (ii) Valid ISO certificate of the item
- (iii) Product must be CE/US FDA/BIS Certified (for electrical items only).
- (iv) Proof of compliance with IEC Certificate for Medical Electrical Equipments
- (v) Proof of Average annual turnover of the manufacturing firm/Authorized supplier/distributor of Rs.03 Crore or more in last three (3) financial years should be submitted duly prepared and certified by a chartered accountant.
- (vi) Manufacturing unit who has been blacklisted either by the Tender inviting authority or by any state Govt. or Central Govt. organization is not eligible to participate in the tender for that item during the period of blacklisting.
- (vii) The tenderer should submit an undertaking that the firm/supplier has not been blacklisted by any authority during the tender process.(as per Annexure –IV)
- (viii) The tenderer must submit valid GST Certificate.
- (ix) Photo copy of PAN must be submitted by the tenderer.
- (x) Photo copy of Registration Certificate of the Manufacturer/Authorized Supplier.

The following documents should be enclosed in Cover “A” (Technical Bid) by the tenderer. All the photocopies are to be attested by self.

TECHNICAL BID :

- 3.1 Checklist with detail of the documents enclosed in Cover “A” (as per Annexure - I) with page number. The document should be *serially arranged* as per this Annexure - I and should be securely tied and bound.
- 3.2 List of Item (s) Quoted with name of the Make & Model of the item (s) (Annexure – II)

- 3.3 Tender document fee of Rs.5000- (Five Thousand)(Non Refundable) in shape of Demand Draft.
- 3.4 Earnest Money Deposit of Rs. 20000 (Rupees Twenty Thousand) only (refundable in case of non selected tenderer) and refundable to the selected tenderer after one year in shape of Demand Draft without interest/ Original demand draft.
- 3.5 Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor / service centre / contract person / office in Odisha **(Annexure - III).**
- 3.6 The declaration form in **Annexure - IV** duly signed by the tenderer before Notary Public / Executive Magistrate.
- 3.7 Manufacturer's Authorization (In case the bidder is not the manufacturer)
- 3.8 Certificate duly filled by the Auditor / Chartered Accountant that the average annual turnover of the bidder is **Rs.03 Crore** or more in the last 3 (three) financial years.
- 3.9 Leaflet/Technical Brochures of the product/item offered.
- 3.10 Copy of Valid ISO certificate.
- 3.11 Copy of Valid CE/USFDA certificate
- 3.12 Copy of Certificate in support of IEC certificate (for Electrical Item)
- 3.13 Copy of up to date GST certificate.
- 3.14 Photo Copy of PAN
- 3.13 Performance Statement (**Annexure - VII**) during the last three years towards proof of supply items to any Govt. organization / Corporate Hospitals / PSU Hospitals / UN Agencies. The copy of Purchase orders and certificate from the user should be furnished in support of the information provided in the performance statement. Minimum 2nos of performance certificate each year should be submitted for last three years.
- 3.14 Deviation/No Deviation Statement from Technical Specification & details of technical specification of the product (**Annexure-VIIIA & B**)
- 3.15 **Leaflet/Brochure of Each item quoted must be submitted at the time of Technical bid which specify the make and model of the big items and sample must be submitted for small items on the tender opening day**

COVER – B (PRICE BID)

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

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

- 4.1 The tenderer may quote price of not more than one qualities of each item
- 4.2 The tender format (Price Schedule) in the prescribed form (as per **Annexure – XII**), hard copy must be submitted in Cover-B. The price of the item should be quoted inclusive of excise duty, insurance, packing, forwarding, freight (door delivery), installation, & warranty for 2 years, the sales tax / GST and entry tax charges (if any).
- 4.3 The Cover “B” of successful tenderers who qualifies in their technical bid, will be opened at the office chamber of the CDM&PHO, Nuapada by the CDM&PHO, Nuapada on the same day/ decided by the purchase committee members in the presence of the tenderers or their authorized representatives.

TENDER CONDITIONS :

- 5.1 The details of the medical equipments with specifications are mentioned in **Section V. The firm must clearly mention their specification, special features, upgraded version (if any) in their tender.**
- 5.2 Tenders should be type written or computerized and every correction in the tender should invariably be attested with signature by the tenderer with date before submission, failing which the tender will be ineligible for further consideration.
- 5.3 Rates inclusive of all taxes, insurance, transportation charges (door delivery), and installation & with 2 years onsite warranty.
- 5.4 The purchaser shall be responsible only after delivery and due verification, installation and commissioning of the equipment.

- 5.5 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 appointed place & time.
- 5.6 To ensure sustained supply without any interruption the tender inviting authority reserves the right to split orders for supplying the requirements among more than one tenderer if the lowest eligible bidder fails to supply in scheduled time the L₂ / L₃ firms for supply the same.
- 5.7 The rate quoted and accepted will be binding on the tenderer for a period of **one year** from the date of approval and on no account any increase in the price will be entertained till the completion of this tender period.
- 5.8 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 five (5) years.
- 5.9. Both Cover-A and Cover-B should have an **index and page number** of all the documents submitted inside that cover.
- 5.10 The requirement of items may increase or decrease depending on the situation.
- 5.11 The supplier have to deposit 10% as bank guarantee / DD of the purchase order value.
- 5.12 90% of the cost of the equipment (excluding CMC Cost)+100% & tax shall be released to the supplier on receipt of stock entry certificate and installation certificate (that it is working) from the consignee. The remaining 10% will be released after satisfactory working certificate received from the consignee after 6 weeks of installation subject to submission of performance security (10% of P.O. Value). For this purpose the supplier will submit two bills, one 90% of the cost of the equipment+tax and the other for the remaining ten percent (10%) of the cost of the equipment.
- 5.13 The supplier have to execute the work order within 30days from issue of the purchase order failing which 0.5% will be deducted thereafter weekly upto maximum 4 weeks of the purchase order value. Thereafter items will not be received and the suppliers will be blacklisted.

TRAINING & OPERATIONAL MANUAL:

- 6.1 The firm / supplier will provide hands on training to two doctors and two technicians in his own cost for operating / handling the medical equipments within 15 days of installation of equipment.
- 6.2 The supplier / firm will provide the operational / maintenance manuals and tools (if required) of all items, equipments & turnkey to the consignee at the time of installation.

COMPREHENSIVE WARRANTY & CMC:

(Undertaking as per Annexure – XI & XII)

- 7.1 The comprehensive warranty will remain valid for 2 years from the date of installation & commissioning of the equipment. The original copy of warranty documents will be submitted to the consignee and photocopy of that to CDM&PHO. Nuapada after installation.
- 7.2 The warranty will cover **all the parts of the machine or item and any replacement or repair required** within the warranty period and will be provided by the supplier free of cost at the destination point (installation point). The supplier will take back the replaced parts / goods at the time of their replacement. No claim whatsoever shall be on the purchaser for the replaced parts / goods thereafter. No traveling allowances or transportation cost will be paid by the purchaser during the warranty period.
- 7.3 The Supplier shall warrant that the Goods supplied under this contract are new, unused, of the most recent or current models and they incorporate all recent improvements in design and materials. The Supplier shall further warrant that all Goods supplied under this contract shall have no defect arising from design, materials or workmanship or from any act or omission of the Supplier that may develop under normal use of the supplied Goods in the conditions prevailing in the place of final destination.
- 7.4 **CMC:** The tenderer shall also commit to provide offer for CMC (**Labour + all spare**) for the next three (3) years after two (2) years of warranty. No extra cost will be paid other than the CMC cost for functioning of the item during

this period. The supplier will provide **two (2)** preventive maintenance in every **six months** during the period of CMC.

7.5 The selected firm should have a service centre in Odisha.

7.6 All the warranty certificates must be handed over to the consignee after installation.

SECTION – IV (PRICE BID)

ITEM LIST

Sl No	Name of the Item with Strength	Name of Manufacturer	Unit Pack	Unit Price	GST	Total Cost
1	Algorithm / flow chart					
2	Allis Forcep (Large)					
3	Allis Forcep (Medium)					
4	Allis forceps (Small)					
5	Ambu Bag (Paediatric size) with Baby mask					
6	Artery Forceps, straight, 160mm Stainless steel					
7	Artery Forceps-Curved					
8	Auroscope /AUTOSCOPE					
9	Auto clave Box(Drum)					
10	Auto Clave (10 Litre)					
11	Bed Pan					
12	Bed side urinal					
13	bedside screen					
14	Biomedical waste bin (medium)					
15	BP instrument(3 size Cuff)-Aneroid					
16	Cervical Traction (manual)					
17	Cheatle's Forceps and its Jar (ss)					
18	Clinical Thermometer					
19	Colour coded Bins (one set)- medium size (foot operated)					
20	Cord cutting Scissors					
21	Cosco Speculum (Medium)					
22	Cusco's/Graves Speculum vaginal bi-valve					
23	Dental Explorer					
24	Dental Probe					
25	Digital adult weighing scale					
26	Digital Haemoglobinometer(without Strip)					
27	Dressing cum observation Table					
28						
29	Dressing Drum with cover 0.945 litres stainless steel					
30	Dressing Forceps (spring type), 160 mm, stainless steel					
31	Ear Speculum – metallic, dull finish					

32	Examination Lamp					
33	Examination table					
34	Exercise Bicycle					
35	Foetal Doppler					
36	Foot step for patient					
37	Gait training apparatus					
38	Gauze Cutting Scissors					
39	Glucometer with strips and lancet					
40	Hanging Weighing Scale(Toddler)					
41	Hemoglobinometer (strip/micro-cuvette)					
42	High flow nasal cannula					
43	Hospital revolving stool					
44	Hub Cutter and Needle Destroyer					
45	I.V Stand					
46	Infantometer					
47	Infrared Lamp					
48	Infrared thermometer					
49	Instrument cabinet					
50	Instrument Sterilizer					
51	Interdental cleaning aids					
52	Jobson-Horne probe					
53	Kelly's Forceps					
54	Kidney tray (large)					
55	Kidney Trey (Medium)					
56	Manual resuscitator (ambu bag) adult / child / infant, for hospital					
57	Measuring Tape					
58	Medicine rack					
59	Mouth Gag					
60	Mouth Mirror					
61	MUAC Tape					
62	Nasal Forecep for Foreign body removal					
63	Nasal Speculum (Large)					
64	Nasal Speculum (Small)					
65	Nasal Speculum (St. Claire's)*					
66	Near vision chart					
67	Nebulizer					
68	Needle holder for Stitching					
69	Otoscope					
70	Oxygen Cylinder					
71	Patient Revolving stool					
72	Patient stretcher					
73	Plain forceps					
74	Plastic Tub with lid (10" base)					

75	Pulse oxymeter fingertips					
76	Scalpel holder					
77	Scalpel with Blade					
78	Set of AMBU Bag (to include Adult, pediatric and neonatal AMBU bag and masks and oral adjuncts)					
79	Shoulder Wheel					
80	Sims retractor/depressor					
81	Sim's Speculum (Large)					
82	Sim's Speculum (Medium)					
83	Sims Speculum vaginal double ended ISS Medium					
84	Sinus Forceps					
85	Snellen Chart (illuminated)					
86	Sphygmomanometer Aneroid 300 mm with cuff					
87	Sponge Holder					
88	Spoon Excavator					
89	Stadiometer (Adult)					
90	Stainless steel bedpan					
91	Steam steriliser					
92	Steam Sterilizer (Medium/Large)					
93	Stethoscope					
94	Stitch cutter					
95	Stopwatch					
96	Surgical Blade					
97	Surgical Instruments					
98	Suture material					
99	T Piece Oxygen Therapy					
100	Tongue Depressor (Metalic)					
101	Tongue Depressor(Disposable)					
102	Tooth Forceps					
103	Torch					
104	Tourniquet (Adult & pediatric)					
105	Tray instrument/Dressing with cover 310 x 195x63mm SS,					
106	Tuning Fork (512 Hz)					
107	Universal tooth extractor					
108	Uterine Sound					
109	Uterine Sound Graduated					
110	Vulsellum Uterine					
111	Walker					
112	Weighing Machine (Adult)					
113	Weighing Scale, Infant (10 Kg)					
114	Wheel chair					

SECTION - V

Technical specifications for Equipment/ Instruments for HWCs

Quality Standard:

- Should be CE/BIFMA/BIS approved model.
- Manufacturer should have ISO 9001 certification for quality management standards.
- Manufacturer should have ISO 14001 certification for environmental management systems.
- Manufacturer should have OHSAS 18001 certification for occupational health & safety management.
- Should furnish stainless steel grade certificate from Govt/Govt. approved testing laboratory.
- Manufacture should produce test certificate from Govt/Govt. approved laboratory for test procedure like impact test, bend test, salt spray chamber test, epoxy powder coating & phosphate coating for quoted item

Items	Specifications
I.V Stand	<p>Overall approx. size: height – 150cm-230 cm (with telescopic adjustable height)</p> <p>Main Frame: Strong & Sturdy stainless steel tubular construction mounted on four pronged tubular/rectangular base fitted with five swivel rust proof castors of 50mm diameter.</p> <p>Stainless steel rod with double hooks</p> <p>All the Stainless Steel should be of 304 grade</p> <p>Should be pre-treated and epoxy coated finish.</p>
Clinical Material, tools and equipment	
Tray instrument/Dressing with cover 310 x 195x63mm SS,	<p>Instrument Tray with Cover</p> <p>Made of 304 grade Stainless Steel</p> <p>Size: 310 x 195x63mm</p> <p>Manufacturer should be ISO13485 approved</p> <p>Product should be BIS/CE approved</p>
Dressing Drum with cover 0.945 litres stainless steel	<ul style="list-style-type: none"> • Should be made of joint-less stainless steel of 304 grade steel of 0.5mm thickness. • Should have perforated body. • Should have chain locking with clamp to open or close the perforated body. • Size : 0.945 litres • Manufacturer should be ISO13485 approved • Product should be BIS/CE approved
Hemoglobinometer (strip/micro-cuvette)	<p>It should be a point of care instrument to measure hemoglobin.</p> <p>The unit should have LCD screen for instant display of test result.</p> <ul style="list-style-type: none"> • It should be Factory calibrated as per ICSH (International Council for Standardization in Haematology). Needs no further calibration • Self-checking facility should be there between every measurement

Items	Specifications
	<ul style="list-style-type: none"> • Shelf life of the test strip/cuvette should be minimum 90 days from the opening of the packet / box and at least one year from the date of manufacturing. • Measurement Range: 4gm./dL to 20gm./dL • Accuracy should be $\geq 96\%CV < 5\%$ • Sample volume; approximately 10 to 15 μL whole blood;capillary or venous blood • Minimum stored result memory :250 results • USB interface facility should be there for transfer of stored results. <p>Soft keys for user operation. It should communicate through mini-USB connector with a Computer/ laptop. Battery operated; The battery should support at least 500 tests. Each device should supplied with: 1. Cover (Wash Proof) 2. USB Cable for data transfer 3. Other items required for functioning of the machine. The cost of Device, Strips (50 Nos.) & lancets (55 Nos.) should be quoted separately in price BOQ excel format. Operating condition: Capable of operating continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90% in ideal circumstances.</p> <p>Safety & Quality Standard: European CE or USFDA Certified. It should be Factory calibrated as per ICSH (International Council for Standardization in Haematology). The manufacturer should be ISO 13485 certified.</p>
Instrument Sterilizer	<p>Electrically operated. Size ideally: 24x8x6 inch Should have replaceable immersion type heater ISI marked. Body should be made of SS-304 grade steel. (Test report certificate from independent laboratory should be submitted with technical bid.) Power Supply Power input to be 220-240VAC, 50Hz fitted with Indian plug Manufacturer should be ISO13485 approved Product should be BIS/CE approved</p>
Sphygmoma nometer Aneroid 300 mm with cuff	<p>Technical Specification of BP Apparatus(Aneroid)</p> <ul style="list-style-type: none"> • Corrosion resistant shock proof body, chrome plated metal/ stainless steel pressure control valve, scale 0-300 mm hg with accuracy of $\pm 3\text{mmHg}$ • Air release at closed lap with maximum 4mmHg/Minute. • Manual setting of deflation possible upto 2/3mm Hg/sec. From 260mmHg To 15mm Hg in a maximum deflation time of 10 seconds. • Gauge's background in white colour. • Graduated scale for ever/ 2mmhg, every 10 units and every 20units. • Nylon straps cuff with pouch, latex bulb with completely chromium plated valve with regulation of vent-hole air by screw valve. • The cuff is inflated just to fit in the limb for which an inflation bulb is used to control the air pressure within the cuff. • The rubber tubes used should have an internal diameter of $3 \pm 0.5\text{mm}$ and the external diameter should not be less than 8mm; The dial manometer with diameter of 50 mm-60mm

Items	Specifications
	<p>Accessories (mandatory, standard, optional)-adult arm cuffs of size medium & large and paediatric size, inflation bulb, tubing</p> <p>STANDARDS AND SAFETY Manufacturer should be ISO13485; should be USFDA, CE, BIS or UL approved product</p>
Surgical Instruments	<p>Quality standard (Applicable to all surgical instruments): Instruments should be made up of stainless steel medical grade AISI 410 & 420. Test reports should be submitted in the technical bid.</p> <p>Part No. and the CE Mark must be engraved/Embossed on the instrument.</p> <p>Sample demonstration</p> <p>Instrument should cover 2 years replacement warrantee.</p> <p>All the instruments should be autoclavable</p>
Kelly's Forceps	Kelly's hemostat Forceps straight 140 mm
Cheate's Forceps with Holder	Cheate's Forceps 10" with SS Holder
Needle Holder	Needle holder -8inch
Scalpel holder	
Surgical Blade	Size 22,24,
Sponge holder	Sponge holding forceps 8" with double action Jaws
Kidney tray	Kidney tray,8"
Artery Forceps, straight, 160mm Stainless steel	Artery Forceps, straight, 160mm Stainless steel
Stitch cutter	Stitch cutting size with round handle double action jaw of 6 inch.
Allis forceps	Tissue Forceps finger ring, ratcheted forceps straight with 5x6 teeth and an overall length of 7-1/2 inches.
Dressing Forceps (spring type), 160 mm, stainless steel	Dressing Forceps (spring type), 160 mm, stainless steel
Hub Cutter and Needle Destroyer	<ul style="list-style-type: none"> • Should be lightweight, portable & compact. • Housing should be moulded type, shock proof and made of ABS plastic/Stainless steel of 304 Grade. • Should be provided with removable discharge tray for easy disposal of syringe hubs. • Should have provision to burn the needle and cut the syringe tip.

Items	Specifications
	<ul style="list-style-type: none"> • Should have high Carbon Steel cutter to cut the syringe tips. • Should able to cut and destroy the needle up to 18G. • Should able to destroy minimum of 5 injection needles on continuous operation. • Should have heavy duty transformer. • Should have power ON/OFF switch with visual indication. • Should be properly insulated for protection from electric hazards. • Should have fuse protection with 5no.of fuse to be supplied of adequate rating. <p>Power Supply: Power supply should be 220-240 V AC, 50Hz with Indian plug. Manufacturer should be ISO13485 approved Product should be BIS/CE approved</p>
Artery Forceps-Curved	Artery Forceps 5”Curved double action jaw ratcheted with ring handle double action jaws.
Gauze Cutting Scissors	Angled with the lower blade being slightly longer & tip of the lower blade features a flattened blunt nodule to slide between bandages and skin without harming the skin. Size:5”
Examination Lamp	<ul style="list-style-type: none"> • Source of Light: LED light • Illumination(lx) should be LED • Minimum 25,000 Lux at a working distance of .5m • Radial and axial movement of the lamp • Colour temperature: minimum 4000K • Minimum Diameter of the spot 5cm • Flexible Light pipe for easy positioning of minimum length of 1meter. • Lamp Life of minimum 30000 hrs • CRI>90 • Power Requirements-Recharging unit: Input voltage- 220V-240V AC, 50Hz <p>Should be USFDA/CE approved model. Manufacturer should be ISO 13485 certified. Electrical safety conforms to the standards for electrical safety IEC 60601-1General requirements (or equivalent BIS Standard)</p>
Oxygen Cylinder	10 Ltr
Oxygen Cylinder trolley	<ul style="list-style-type: none"> • Frame of the cylinder trolley is made with ms tubular steel. • Framework of the cylinder trolley mounted on two 10cm wheels. • Finish in epoxy powder coated. • Height:- 106Cm.
Stadiometer	<ul style="list-style-type: none"> • The measuring rod can be dismantled into several pieces and can be set easily. • The scale must be printed along the side of the measuring rod. • Measuring range (Both in cm & inch): 20-205 cm and 8 - 81". • Graduation of measuring rod: 1mm / 8inch.

Items	Specifications
	<ul style="list-style-type: none"> The structure should be made of ABS plastic. The product should be CE certified (certificate to be submitted in technical bid) <p>Warranty : 1 Year</p>
Nebulizer	<p>Should be of Heavy duty compact Nebuliser Heavy duty ,Compact, lightweight, low noise(50dB+ 3dB) Durable long life compressor. Suitable for heavy duty/ institutional (hospital) use, should be able to run uninterruptedly for one hour. Max Pressure = 2.0-2.5 bars Operating pressure:1to1.5bars Compressor Air flow:8Lpm Normal Air Flow:4lpm Should produce particle of size 1-5 micron. Mass median Diameter (MMD) =2.5-3m. Output rate: 500gm/Min. Made of Heavy duty ABS body Power Supply: Power input to be 220-240VAC, 50Hz fitted with Indian plug Should be USFDA/CE approved model. Manufacturer should be ISO 13485 certified. Electrical safety conforms to the standards for electrical safety IEC 60601-1General requirements (or equivalent BIS Standard)</p>
Weighing Scale, Infant (10 Kg)	<ul style="list-style-type: none"> Table top, light and portable, Built in rechargeable battery, Easy to clean baby tray (acrylic), Zero weight adjustment facility, Quick, clear digital read outs with LCD display Measurement does not change with position of baby on the pan; Provision to measure the height of the baby in its laying position. Accuracy: 10g, resolution: 1g, limit: 10gm ~ 10kg Settings-Auto setting to 0.00 once a the machine is switched on or when no external weight has been put on <p>Dimension :Base: 300mm x 265mm x 85mm, Pan: 510mm x 300mm x 85mm/As per IS standard Power Requirements-230 V AC & Battery operated-6V, one hour backup The Scale should be as per BIS specifications. The scale should have ISI mark ie IS: 2489 Or CE/USFDA certified. Should have model approval from Legal Metrology Dept., Govt. of India. The manufacturer shall have the valid license and should have model approval by thelegal metrological Deptt. And the weighing scale must be stamped by the by legalmetrologicalDeptt. In case of distributor, the bidder should have valid distributor andrepair license from legal metrological Deptt., Govt. of Odisha.</p>
Vulsellum Uterine	Vulsellum Uterine Forceps curved 25.5 cm
Cusco's/Graves Speculum vaginal bi-valve	Cusco's/Graves Speculum vaginal bi-valve small size

Items	Specifications
Sims retractor/depressor	Sims retractor/depressor small size
Sims Speculum vaginal double ended ISS Medium	Sims Speculum vaginal double ended ISS Medium size
Uterine Sound Graduated	Uterine Sound Graduated 10-12"
Cord cutting Scissors	Cord cutting Scissors- Size 6 inch double action jaw with round handle. Blunt, curved on flat, 160 mm ss
Foetal Doppler	<p>A portable, hand-held, battery-powered device assembly consisting of a measuring and display unit and an attached probe or interchangeable probes designed to noninvasively detect foetal heart beats using ultrasound/Doppler technology.</p> <ul style="list-style-type: none"> • Water proof probes of 2MHz & 3MHz frequency. • Ultra sound Intensity <10mw/ cm², • Auto Shut Of Facility to save Battery Power • Built –in Speaker, Volume Control Facility and Audio Output for Ear Phone • Heart Rate Range should be from 50 to 200 bpm with accuracy of + /-2%, • Should be Water Proof Body, Should have Facility for FHR Data transfer to PC. • LCD display <p>Power Requirements AA batteries Battery operated AA battery type; Minimum Battery Time of 300 minutes.</p> <p>Accessories:</p> <ul style="list-style-type: none"> ▪ AA battery(rechargeable)-2nos ▪ 2MHz probe-1no <p>STANDARDS AND SAFETY:</p> <ul style="list-style-type: none"> ▪ USFDA or CE(Notified) or UL approved product. ▪ Type B or BF, Performance and safety standards (specific to the device type) ▪ Shall meet IEC-60601-1-2:2007 Medical electrical equipment -- Part 1-2: General requirements for basic safety and essential performance ▪ Local and/or international Manufacturer should be ISO 13485 certified
Ambu Bag (Paediatric size) with Baby mask	<ul style="list-style-type: none"> • Manual resuscitator with transparent face-mask • Child models (750ml, &500ml bag capacity); • Standard 15/22 mm Swivel connector allows connections to all common masks Endo-tracheal Tubes; • Provision to give supplemented oxygen-by-oxygen reservoir providing 100% oxygen; • Non-re breathing valve enabling the patient to inspire oxygen from the reservoir

Items	Specifications
	<p>bag.</p> <ul style="list-style-type: none"> • Should be single hand opera table • Should be easy to disassemble for cleaning and disinfection • Should have pressure release valve at 40cm H2O • Should have silicone oxygen tube 2m length. • 10. It should be upto 40 times autoclavable including bag and washers. • The bag should be made of soft silicone material. • Self-Inflating Resuscitator bag should be of medical grade silicone rubber. • The reservoir should be a PVC bag of 600ml capacity 500ml bag capacity and 1000ml for 750ml bag capacity. <p>1 Accessories (mandatory):- Silicon bellows, Non Rebreathing Valve, 2 meter oxygen tube, Guedel Airway sizes viz 0 and 1, Neonatal Mask of 3 sizes viz 00, 0 and 1</p> <p>STANDARDS AND SAFETY ISO 13485; Manufacturer / supplier should have ISO certificate for quality standard. Should be USFDA / CE (From notified body) approved product or BIS certified should meet ISO 10651-4 standard requirement</p>
Lab Materials	
Items required for providing Speciality services	
Oral Health	
Interdental cleaning aids	Wooden/plastic Triangular Sticks Interproximal Brushes
Dental Probe	Single Ended with round handle.Made of SS,Handle of size 12mm, and Graduated probe.CPI TN/UNC15 typemade of stainless still 410 /420 grade.
Universal tooth extractor	Dental Forceps of standard size for adult use . Straight curvature with Serrated work surface area. Made of Stainless Steel 410 grade. Instrument handle is of Englishparten. The set shall be consists of 12 items of universal dimensions.
ENT	
Torch	LED focusing torch with chrome/steel ribbed body (medium size) with battery
Tongue Depressor	Wooden flat disposable tounge depressor. Box size:100/Box
Mouth Gag	Size-5", Finger ring instrument with grip & locking system.Blades of 1" long &1/4" wide.
Mouth Mirror	Angular mirror-2 pieces To provide indirect vision To retract lips, cheeks, and tongue To reflect light into the mouth.Accurate image from flat surface mirrors, image magnified with concave mirrors. Size of 14mm -22 mm of Plane size.StainlessSteel.Fog free with Flat/round ribbed handle. The mirror shall be made of fiber glass and the handle shall be made of stainless steel 410/420 grade
Tuning fork	Nickel-plated steel, material thickness 8 mm, Frequency: 128 Hz / 512 Hz
Nasal Speculum (St. Claire's)*	Nasal Speculum of length 3" having two 5mm wide x 11mm long blades.

Items	Specifications
Ear Speculum – metallic, dull finish	Ear Speculum – metallic, dull finish
Jobson-Horne probe	Jobson-Horne probe-Curette loop at one end and threaded section at the other end for holding cotton wool Manufactured from carbon filled nylon material to provide better strength and flexibility.
Otoscope	<p>Otoscope</p> <ul style="list-style-type: none"> • GMDN name: Otoscope <ul style="list-style-type: none"> ▪ Clinical purpose: An otoscope or auriscope is a hand-held and battery powered device containing illumination and viewing optics medical device which is used to look into the ears. Health care providers use otoscopes to screen for illness during regular check-ups and also to investigate ear symptoms. An otoscope potentially gives a view of the ear canal and tympanic membrane, or eardrum. ▪ Used by clinical department/ ward: ENT • Technical characteristics (specific to this type of device): <ul style="list-style-type: none"> ▪ Battery (3.5v) operated high efficiency Fiber optic LED otoscope with detachable head and handle with high quality optics. ▪ The viewing window with 3x magnification. ▪ Should have on/off button on the handle for illumination, the handle should be made of Solid metal- chrome slip type shock proof. ▪ The light should have minimum colour temperature of 4000k with CRI >90 for Bright and homogeneous illumination with excellent colour rendering. ▪ Should have rotating knob to control the intensity of the otoscope. ▪ The LED lamp life should be more than 10000 hrs. • User's interface: Manual • Software and/or standard of communication (where ever required) :NA • PHYSICAL CHARACTERISTICS <ul style="list-style-type: none"> ▪ Dimensions (metric): Hand Held Portable ▪ Weight (lbs, kg): NA ▪ Configuration : NA ▪ Noise (in dBA) : NA ▪ Heat dissipation: NA ▪ Mobility, portability : Handheld device • ENERGY SOURCE (electricity) <ul style="list-style-type: none"> ▪ Power Requirements : NA ▪ Battery operated : Yes ▪ Tolerance (to variations, shutdowns): NA ▪ Protection : NA ▪ Power consumption : NA • ACCESSORIES, SPARE PARTS, CONSUMABLES <ul style="list-style-type: none"> ▪ Accessories (mandatory, standard, optional); Spare parts (main ones);

Items	Specifications
	<p>Consumables / reagents (open, closed system)</p> <ul style="list-style-type: none"> ✓ Battery -2nos ✓ Reusable EAR specula of 2mm, 3mm, and 4mm three from each. The specula should be autoclavable. ✓ Storage case (rigid and steady) <ul style="list-style-type: none"> ● ENVIRONMENTAL AND DEPARTMENTAL CONSIDERATIONS: <ul style="list-style-type: none"> ▪ Atmosphere / Ambiance (air conditioning, humidity, dust ...) <ul style="list-style-type: none"> ✓ Operating condition: Capable of operating continuously in ambient temperature of 10 to 40 deg C and relative humidity of 15 to 90% in ideal circumstances. ✓ Storage condition: Capable of being stored continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90%. ▪ User's care, Cleaning, Disinfection & Sterility issues Disinfection:Parts of the Device that are designed to come into contact with the patient or the operator should either be capable of easy disinfection or be protected by a single use/disposable cover. ● STANDARDS AND SAFETY <ul style="list-style-type: none"> ▪ Certificates (pre-market, sanitary, ..); Performance and safety standards (specific to the device type);Local and/or international <ul style="list-style-type: none"> ✓ Product should be USFDA/CE approved ✓ Should have IEC 60601-1/IEC 60601-1-2/CE (EU) certificate; ✓ Manufacturer / supplier should have ISO 13485 certificate for quality standard; ● TRAINING AND INSTALLATION <ul style="list-style-type: none"> ▪ Pre-installation requirements: nature, values, quality, tolerance:NA ▪ Requirements for sign-off Certificate of calibration and inspection from the manufacturer ▪ Training of staff (medical, paramedical, technicians) <ul style="list-style-type: none"> ✓ Training of users on operation and basic maintenance; ✓ Advanced maintenance tasks required shall be documented ● WARRANTY AND MAINTENANCE <ul style="list-style-type: none"> ▪ Warranty: 3 years including bulb ▪ Maintenance tasks <ul style="list-style-type: none"> ✓ Maintenance manual detailing; ✓ Complete maintenance schedule; ▪ Service contract clauses, including prices: <ul style="list-style-type: none"> ✓ The spare price list of all spares and accessories required for maintenance and repairs in future after guarantee / warranty period should be attached. ✓ Free servicing (min. 2/year) during warranty period ● DOCUMENTATION

Items	Specifications
	<ul style="list-style-type: none"> ▪ Operating manuals, service manuals, other manuals Should provide 2 sets(hardcopy) of:- <ul style="list-style-type: none"> ✓ User, technical, maintenance and service manuals to be supplied along with machine diagrams; ✓ List of equipment and procedures required for local calibration and routine maintenance; ✓ Certificate of calibration and inspection; ▪ Other accompanying documents List of important spares and accessories, with their part numbers and cost; • NOTES <ul style="list-style-type: none"> ▪ 11.1 Service Support Contact details (Hierarchy Wise; including a toll free/landline number):Contact details of manufacturer, supplier and local service agent to be provided; ▪ Any Contract (AMC/CMC/add-hoc) to be declared by the manufacturer; ▪ Recommendations or warnings: Any warning signs would be adequately displayed
Communicable Diseases	
NCD	
Glucometer with strips and lancet	<p style="text-align: center;"><u>GLUCO METER</u></p> <p>Description of Function:</p> <p>A glucose meter (or glucometer) is a medical device for determining the approximate concentration of glucose in the whole blood.</p> <p>Product Quality Standards:</p> <ul style="list-style-type: none"> • Should be USFDA/CE (Notified) of the quoted model • Manufacturer should be ISO certified for quality standards. <p>Technical Specifications</p> <ul style="list-style-type: none"> • Small, portable and user friendly device is required. Blood should not go into the glucometer while measurement. • It should be able to measure whole blood in capillary mode. • Minimum analytical range: 30 – 600 in mg/dl. • Accuracy should be as per International Standard ISO 15197-Requirements for blood-glucose monitoring systems for self-testing in managing diabetes mellitus. • Reproducibility/Precision: +/- 5% • Display should be 43mm± 5 mm measured diagonally. • It should be battery operated electronic system and the battery life should be for at least 1000 tests. • Shelf life of strips: Minimum 12 months at the time of delivery to consignee. • Packing of strips: not more than 50 strips in a pack. Strips should work min. 3 months after opening of strips pack. • Control solution for checking reliability of strips will be supplied free of cost

Items	Specifications
	<p>as & when required.</p> <ul style="list-style-type: none"> • Ready availability of reagent test strips, battery & other consumables across Odisha for at least 5 years. • Machine should be supplied with lancing device of 2nos. • Machine should have 4 yrs. of replacement warranty. <p><u>Equipment Configuration:</u></p> <p>1-Glucometer-1no 2-Lancing Device-2no 3-Standard batteries-1Set 4-Carrying case-1 5-Instruction manual 6-Warranty card</p> <p>Consumables:</p> <p>1. 115 nos. single use auto-disabled lancets in multi packs. 2. Test strips -100 nos. in two packs 3. Control strip.</p>
Ophthalmic services	
Snellen vision chart	Snellen vision chart
Near vision chart	Near vision chart
Stethoscope	<p>Components: Chest piece with two cups: flat and conical. Y-shaped tube Adjustable arms with flexible spring. Two earpieces.</p> <p>Materials: Pivoting chest piece: aluminium, stainless steel or chrome plated brass. All-frequency diaphragms in high-resolution epoxy glass. Y-tube: treated rubber (vinyl). Arms and spring: stainless steel. Earpieces: plastic.</p> <p>Specifications: Instrument used for sound auscultations within the body. Binaural stethoscope with a receiving plate into which the two flexible ear-tubes converge. Double cup stethoscope with pivoting chest piece: one side of the cup is large and flat-shaped and the other small and conical-shaped (bell). Arms with spring, designed to retain constant springiness and maximum reliability and comfort. Screw-on replaceable earpieces. Y-tube with large diameter: 10mm.</p> <p>Can be used for adults (large side) and in paediatrics (bell side) Size: adult 43mm, paediatric 28mm, overall length +/- 77cm Sensitivity 3.2dB, ranging from 50 to 500Hz for cardiology. Sensitivity 8.1dB, ranging from 600Hz to 1500Hz for pneumo</p> <p>Paediatric size: flat 35mm, bell 28mm, overall length 76.5cm baby Frequency analysis: 20Hz to 100 Hz max. 3.85dB at 100Hz 100 Hz to 1500Hz max. 14.3dB at 300Hz</p>

Items	Specifications												
	<p>Neonatal size: flat: 28mm, bell 21mm. Overall length: 76cm Duplex neonatal: Frequency analysis: 20Hz to 100Hz max. 1.2dB at 55Hz 100Hz to 1,500Hz max. 8.5dB at 300Hz</p>												
Steam steriliser	<p>Features:</p> <ul style="list-style-type: none"> • Construction of stainless steel • For steam sterilization/disinfection of surgical materials/instruments • With handles for lid and base • Available in various sizes, custom sizes can be made on request • Electrically operated with immersion heater, power source 220v/50Hz 												
Stopwatch	<ul style="list-style-type: none"> • Square design, plastic construction and LCD display • Professional sports chronograph digital timer stopwatch show hour, minute, second, AM / PM indicator, month, date, and day of the week • You can select 12 or 24 hour user with chronograph stopwatches 1/100 second chronograph up to 23 hours, 59 minutes, 59 seconds - Timer stopwatches alarm with 4 minutes snooze • Powered by one AG13 button cell (included) • Hourly chime function and alarm function are included • It comes with a nylon fabric neck strap for easy carrying • SPLIT / RESET, MODE and START / STOP buttons for convenient operation • Dial Window Material Type: Plastic • Dial Display: Digital • Style: Sport • Color: Black • Size(L x W x H): 78 x 63 x 18mm • Net Weight: 46g 												
Digital adult weighing scale	<ul style="list-style-type: none"> • Leather look with ABS platform • Large LCD with white backlight display • Strain Gauge Sensor • Auto-step-on feature • Low battery / Error / Overload indicator • 18 months warranty from the date of purchase 												
Manual adult weighing scale	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Usage/Application</td> <td>Home, Hospital</td> </tr> <tr> <td>Mode Of Operation</td> <td>Manual</td> </tr> <tr> <td>Display Type</td> <td>Analog</td> </tr> <tr> <td>Capacity</td> <td>150 Kg</td> </tr> <tr> <td>Material</td> <td>ABS Plastic</td> </tr> <tr> <td>Shape</td> <td>Square</td> </tr> </table>	Usage/Application	Home, Hospital	Mode Of Operation	Manual	Display Type	Analog	Capacity	150 Kg	Material	ABS Plastic	Shape	Square
Usage/Application	Home, Hospital												
Mode Of Operation	Manual												
Display Type	Analog												
Capacity	150 Kg												
Material	ABS Plastic												
Shape	Square												
Walker	<ul style="list-style-type: none"> • 1 second converts from fixed- walker to reciprocal walker • Frame : Elliptical Frame. • Foldable Walker. • Seat Height Adjustable Machine • Light Weight Walker. 												

Items	Specifications	
	<ul style="list-style-type: none"> • Easy to manage and travel purposes. Specification of Product	
	Width of Walker	58cm
	Weight Capacity	110 to 120 Kilo Grams
	Colour	Silver
	Height Length	73 to 90 Centi Meters
	Item Weight	2.7 Kilo Grams
Tourniquet	Rubber Type	Natural rubber (latex) Synthetic polyisoprene (latex-free)
	Standard Sizes	25 mm (1") wide, 0.5mm (0.020") thick, 457 mm (18") long 19 mm (3/4") wide, 0.5 mm (0.020") thick, 457 mm (18") long 18 mm wide, 1.2 mm thick, 750 mm long (1/16 wide, 0.047" thick, 30" long) Custom sizes by special order
	Surface	Plain Textured
	How Supplied	Rolled and banded with a latex or latex-free rubber band Rolled and tabbed, Perforated
	Surface Treatment	Talc Silicone Note: Tourniquets with a textured surface are not surface treated.
	Latex-Free Tourniquet Colors	Blue and White Latex tourniquet is available in color Custom colors by special order
	Latex Tourniquet Colors	Straw (Beige)
	Packaging	250 strips cut to 18" length in a polybag Cut to 18" length, rolled and banded 25 strips rolled on a core with perforation at 18" length
	Customization	Customized color, packaging and labeling are available on a special order basis
Spoon excavator	Cleaning Type	Autoclavable
	Type of Dental Equipment	Dental Hand Instruments
	Usage/Application	Surgical Instruments
	Material	Metal
	Operation Mode	Manual
	Usage	Laboratory
Autoclave 10lts	<ul style="list-style-type: none"> • Size (D x H): 220mm x 230mm + 38mm Approximate Capacity : 10 Ltrs. With lid. • Suitable for 8"x8" Sterilizing / Dressing Drum (Drum in Extra Cost), Power • Source:Electricity 220V. 50Hz. Single Phase. [1kw]. Supplied with inner & 	

Items	Specifications
	outer stand.
Manual resuscitator (ambu bag) adult / child / infant, for hospital	Application Hospital
	Usage Hospital, Clinic
	Color White
	Material Silicone, PC, PVC, PE
	Size Adult, Pediatric (Child) & Infant
	Bag Volume 1600ml &2000ml
	Stroke Volume infant-150ml, Pediatric - 400ml & Adult -800
	Volume Infant - 280ml, Pediatric - 600ml & Adult- 1
	Weight Infant - 350g, Pediatric - 410g & Adult -600
	Each set includes
	<ul style="list-style-type: none"> • Silicone bag 1500 ml for Adult • W / pop-off 60 cmH2O • Intake valve set • Silicone Mask for Large Adult (HS-1015) • Reservoir valve set • PVC/ PE reservoir bag 2500 ml • Oxygen tubing 2M (HS-30100) • Autoclave up to 134 or 273
	Note We are dealing for Infants also.
	Resuscitator Child 6211
	Each set includes
	<ul style="list-style-type: none"> • Silicone bag 550 ml for Child • W/ pop-off 40 cmH2O • Intake valve set • Silicone Mask for Child (1013) • Reservoir valve set • PVC / PE reservoir bag 2500 ml • Oxygen tube 2M (30100) • Autoclave up to 134 or 273
Resuscitator Infant 6311	
Each set includes	
<ul style="list-style-type: none"> • Silicone bag 280 ml for Infant • W / pop-off 40 cmH2O • Intake valve set • Silicone Mask for Infant (1011) • Reservoir valve set • PVC/ PE reservoir bag 600 ml • Oxygen tube 2M (30100) • Autoclave up to 134 or 273 • 	
Shoulder wheel	Revolves smoothly for shoulder exercising. Fitted with resistance mechanism at 360°.

Items	Specifications	
	<p>Arc of motion adjustable from 10° to 39°.</p> <p>Resistance controlled from 0 to maximum.</p> <p>Gives immediate degree of revolution feedback.</p> <p>Made of tubular steel (wheel), stainless steel (channels), laminated hardwood (wall boards), chrome plating (all metal parts) and powder-coated finish.</p> <p>Wheel size: 37" in diameter.</p> <p>Adjustable height: 26".</p> <p>Wall-mounted.</p>	
Plastic tub with lid, 10" base	Size	10 Inch base
	Material	Plastic
	Pattern	Plain
	Capacity	10.5 Ltr
	Shape	Round
Pulse oxymeter fingertips	<ul style="list-style-type: none"> • SpO2 Range: 70% - 100% • SpO2 Resolution: ±1% • Accuracy: ±2% • Pulse Rate Range: 30-240bpm • Pulse Rate Resolution: ±1bpm • OLED Display • Infra-red Absorbance 	
Excercise bicycle	Display Type	LCD
	Included Components	1 Exercise Upright Bike
	Maximum Height Recommendation	6 Feet
	Meter	Speed, Time, Distance
	Style	Exercise Upright Bike
Stainless	<ul style="list-style-type: none"> • Flywheel Size: Diameter 220MM / 4.0KGS with 1 PC Crank & One Way Bearing, Maximum User Weight :100Kgs / Height : 150-195cm • Operating Technology: Magnetic System, Resistance Level:8-Level, Brake system: Magnetic • Resistance Level:8 levels magnetic resistance help you to Intensify your exercise. With a simple twist, you can increase or decrease the Level of magnetic resistance • 	
	Material	Stainless Steel

Items	Specifications	
steel bedpan	Usage/Application	Hospital
	Grade	SS 304
	Size	37 x 31 x 7 cm
	Weight	200 gm
	Minimum Order Quantity	50 Piece
Cervical traction	<p>Traction Force: Direct Pulling 5 to 45 kgs. With Doubler upto 90 kgs. *Hold Time: 20, 40, 60 & 80 seconds. *Rest Time: 1, 5, 10 & 20 seconds. *Treatment Time: 60 mins. With digital display. *Alarms: At the end of treatment time. *Safety: Patient safety switch. *Mounting: Table or Wall mounts. *Accessories: Cervical Head Holder with Bar, Lumber Traction Belts with Bar, Main Cord & Pulley Doubler</p>	
Dental explorer	Application	Filling, Surgical Instruments, Cleaning
	Type of Dental Equipment	Explorer
	Usage	Hospital, Clinical
	Material	SS
	Length	10-12 cm
Dressing cum observation table	Size	1830 L x 600 W x 810 H mm
	Finishing	Epoxy Powder Coated
	Pelvic Position	Up to 120 mm
	Arm Rest	Available
	Features:	<ul style="list-style-type: none"> • Heavy duty tabular frame work on smooth • running castors with brakes • Five section top with mattress • Back section adjustable on pneumatic pump • Trendelenburg and reverse Trendelenburg by crank mechanism • Table can be positioned as chair and lithotomy • Table equipped with arm rest • Anesthetic screen • Leg rest with strap • Movable on castors • Pre-treated
Gait training apparatus	<p>Parameter Dimension : (cm) 85x71x58 The upright column adjustment rang : 0~30cm The handrail adjustment rang : 60~120cm Handrail height : 50cm</p>	
Hanging scale toddler	<p>Baby Spring Balance</p> <p style="text-align: right;">Hanging Type</p>	

Items	Specifications	
	Caliberated to weigh	0-5 kg
	Graduation with Tricolor Coding	100 gm
	Length of the Scale	17.5 along with a sling for new born babies
	Nylon casing	Yes with Zero Adjustment
Infantometer	<ul style="list-style-type: none"> • A space saving, easy and accurate solution for baby length measuring • Measuring range - 0 to 99 cm • Dimension - 95 x 25 x 10 cm • Washable material • Sizes Available : 5", 7" (inches) • Fully foldable 	
Infrared lamp	Voltage Volt	AC 220~240V
	Usage/Application	For Heat Therapy
	Rated power of IR bulb	275W
	Structure	Flexible Bracket/Arm
	Base	Sand injection or water injection, combined design
Mouth mirror	Cleaning Type	Manual
	Type Of Dental Equipment	METAL
	Material	Stainless Steel
	Usage/Application	Hospital
	Product Name	DENTAL MOUTH MIRROR
	Finishing	POLISH
	Head Shape	ROUND
Muac tape	Tape Length	STANDARD
	Tapes Type	PLASTIC
	Usage/Application	Measurement
	Application	Hospital
	Model	TDP-024
	Color	WHITE
	Features	LATEST
	Tape Width	STANDARD
Foot step for patient	Material	Stainless Steel
	Number Of Steps	2
	Usage/Application	Hospital
	Finishing	Epoxy Powder Coated
Hospital revolving stool	Color	white
	Size	19x19x22

Items	Specifications	
Examination table	Usage/Application	Hospital, Clinic
	Size	1830 x 680 x 750 mm
	Frame Material	SS, MS
	Is It Adjustable	Yes
	Load Capacity Kilogram	100 - 150 kg
	Number Of Legs	4
	Back Rest Adjustable	Yes
Instrument cabinet	Door Type	Single Door
	Height	7 ft
	Material	Stainless Steel
	Surface Finish	Color Coated
Medicine rack	Material	Stainless Steel
	Usage/Application	Pharmacy
	Mount Type	Free Standing Unit
	No. Of Shelves	7 Shelves
	Height (In Feet)	7 Feet
	Size	8ft x 3ft
Infrared thermometer	Usage	Non-Contact/Medical
	Measuring Range	32 - 42.9 Degree C
	Warranty	12 Months
	Material	ABS
	Color	White
	Feature	Gun
	Type of Display	LCD
	Country of Origin	Made in India
	Memory	20 Groups
T piece oxygen therapy	Material	PVC
	Oxygen concentration	40%
	Length	200 cm
Patient stretcher	Type	Manual
	Size	1980mmL*560mmW*820mmH cms
	Frame Material	Stainless Steel
	Material	Stainless Steel
	Steel Grade	316
	Width	733 mm
	Length	1650 mm

Items	Specifications	
	Portable	Yes
Wheel chair	Type of Product : Front Wheels Size : Seat width : Features :	Wheel Chair 6 inch 19 inch Self Propelled Wheelchair
Biomedical waste bin	Capacity Material Structure Usage Quality Assurance	15, 30 and 50 Litre 100% Virgin pure HDPE PP Foot Pedal Hospital, Hospitals, hotels, industries and institutes for garbage segregation and collection ISO 9001-2015 and International DIN EN 840 quality certified

SECTION –VI

ANNEXURES

**(Technical Bid, Price Bid, Agreement,
Undertaking for Comprehensive Warranty)**

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

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

Please put ✓ in the respective box

COVER – A (TECHNICAL BID)

DOCUMENTS : SUBMITTED OR NOT

Sl No		Yes	No	Page No
1	Tender Paper Cost Rs. 5000/-			
2	EMD Rs.20000/-			
3	List of Item Quoted with name, make & model Annexure – II			
4	Detail Name, address, telephone number, fax, email of the manufacturer/ authorised distributor/ service centre/ contact person/office in Odisha (Annexure – III)			
5	Declaration form duly signed by the tenderer before Notary public/Executive Magistrate (Annexure – IV)			
6	Manufacturer’s Authorization (in case bidder is not the manufacturer.			
7	Average Annual Turn over Three crore or more in the last 3 financial year duly filled by the auditor/chartered accountant			
8	Copy of valid ISO Certificate			
9	Copy of valid CE/USFDA certificate			
10	Copy of certificate in support of IEC Certificate (for electrical Item)			
11	Copy of upto date GST Certificate			
12	Copy of PAN			
13	Performance Statement (Annexure – VII) item wise			
14	Deviation / No deviation statement (Annexure – VIII)			
15	Leaflet/ Brochure of item quoted			
16	Sample of small items			
17	Original Tender Paper			

Annexure II

(To be submitted in Cover A -Technical Bid)

DETAILS OF THE TENDERER & LOCAL CONTACT PERSON

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

**Signature of the Tenderer :
with seal**

Date :

Official Seal :

ANNEXURE – IV

(To be submitted in Cover A -Technical Bid)

DECLARATION FORM

I / Wehaving My /
ouroffice
at.....do declare that I / We have carefully
read all the terms & conditions of tender of the _____, 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 (NSQ) items / non-supply.

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

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

Signature of the bidder :

Seal Date :

Name & Address of the Firm:

Affidavit before Executive Magistrate / Notary Public.

ANNEXURE – V

(To be submitted in Cover A -Technical Bid)

MANUFACTURER’S AUTHORISATION FORMAT

To

The CDM&PHO , Nuapada
Deptt. of Health & Family Welfare
Govt. of Odisha.

Ref: Tender No. _____ Dated _____ for _____.

Dear Sir,

We _____ are the manufacturers of _____

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

1. Messrs _____ (name and address of the agent) is our authorized agent for sale and service of _____ (name of equipment(s)

2. We confirm that Messrs. _____ (name of the above agent) is authorized to submit a tender, and enter into a contract with for the above goods manufactured by us.

3. We also extend our full guarantee / warranty and also full back-up support for AMC/CMC if required by the purchaser.

Yours faithfully,

(Signature with date, name and designation)

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

Seal

Note :

1. This letter should be on the **letterhead** of the **manufacturer/Supplier** and should be signed by a person having the power of attorney to legally bind the manufacturer.
2. Original letter shall be attached to the technical bid.

(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 Equipment products of M/s _____ **who is a manufacturing unit/ Authorized unit** for the last _____ years are given below and certified that the statement is true and correct.

<i>Sl.No.</i>	<i>Year</i>	<i>Turnover in Crores (Rs.)</i>
1.	2017-18	-
2.	2018-19	-
3.	2019-20	

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

Date: _____
Place: _____

Signature of Auditor/
Chartered Accountant
(Name in Capital)

Seal _____ Membership No.- _____
Registration No. of Firm _____

Note:

a) *To be issued in the **letter head** of the Auditor/Chartered Accountant.*

Separate certificates should be furnished for different manufacturer in case the bidder is quoting products of different manufacturers.

(To be submitted in *Cover A - Technical Bid*)
Annexure VII (Refer Clause no. 3.13)
PROFORMA FOR PERFORMANCE STATEMENT
(For the period of last **three years**)

Tender Reference No. :

Name of Tenderer :

Name of Manufacturer :

Name of the Item (s) :

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

Signature and seal of the Tenderer

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

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

Annexure VIII A
(Refer Clause No. 3.14)

STATEMENT REGARDING DEVIATIONS FROM TECHNICAL SPECIFICATIONS (IF ANY)

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

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

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

Signature of the Bidder

Name :

Date :

Place :

Seal

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

Annexure VIII B
(Refer Clause No. 3.14)

DETAILS OF TECHNICAL SPECIFICATION OF THE PRODUCT OFFERED BY THE BIDDER

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

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

Signature of the Bidder

Name :

Date :

Place :

Seal

AGREEMENT

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

BETWEEN

Name of the Supplier
with full address

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

AND

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

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

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

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

Name of the Item:

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

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

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

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

1. Insurance
2. Freight
3. Transportation
4. Customs duty / Excise duty
5. Charges for documents, instructions manual, tools
6. F.O.R. at the destinations mentioned in the consignee list
7. Training to doctors & technicians.

8. Maintenance of the system includes all accessories supplied and their spare parts required during comprehensive warranty period of two year at free of cost from the date of successful installation and satisfactory functioning of the system at the site.
9. Installation and commissioning of the system by the Supplier's engineer at site.
10. Any other charges including loading & unloading, packing & forwarding etc. will be paid by the Supplier(s) till the completion of the installation and turnkey job if any.

CMC cost for next 3 (three) years after the warranty period shall be paid after completion of the warranty period (on a six monthly basis).

TERMS AND CONDITIONS:-

PRICE :

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

TERMS FOR PAYMENT :-

A. The payment(s) shall be made by purchaser in Indian currencies No advance payments towards cost of Instruments and Equipments etc. will be made to the tenderer. No payment will be made to the supplier if he has not deposited the unconditional performance security in shape of Bank draft amounting to 10% of greater than Rs.10000/- items which will be deposited in [ZSS NON-NRHM Nuapada](#) with the warranty for 2 years agreement to the consignee.

90% of the cost of the equipment (excluding CMC Cost)+100% & tax shall be released to the supplier on receipt of stock entry certificate and installation certificate (that it is working) from the consignee. The remaining 10% will be released after satisfactory working certificate received from the consignee after 6 weeks of installation subject to submission of performance security (10% of P.O. Value). For this purpose the supplier will submit two bills, one 90% of the cost of the equipment+tax and the other for the remaining ten percent (10%) of the cost of the equipment.

B. Before release of payment the supplier has to submit the signed agreement, warranty documents of equipment and turnkey job to the consignee. The undertaking as per **Annexure – XI & XII** will also be submitted to the consignee with photocopies to the purchaser.

C. The payment of CMC will be made on six monthly basis after expiry of the warranty period and signing of the CMC agreement.

INSTALLATION AND DEMONSTRATION :

The installation and demonstration of the equipment shall be done by the Supplier(s) at free of cost at the installation site of the respective institutions.

TRAINING :

Supplier(s) shall impart adequate training to 2 doctors and 2 technicians at the site / his / their factory / workshop inside / outside India as the case may be at the Supplier(s) cost.

COMPREHENSIVE WARRANTY :

This warranty shall remain valid for two (2) years from the date of installation & commissioning of the machine / item & must be submitted at the time of installation to the consignee with a photocopy to the purchaser.

The warranty will cover all the parts of the machine or item and any replacement or repair required within the warranty period will be provided by the supplier free of cost at the destination point (Installation point). The supplier will take back the replaced parts / goods at the time of their replacement. No claim whatsoever shall be on the purchaser for the replaced parts / goods thereafter. No traveling allowances or transportation cost will be paid by the purchaser during warranty period.

The Supplier warrants that the Goods supplied under this contract are new, unused, of the most recent or current models and they incorporate all recent improvements in design and materials (even if the advanced facilities are not mentioned in our product specification) . The Supplier further warrants that all Goods supplied under this contract shall have no defect arising from design, materials or workmanship (except when the design and / or material is required by the Purchaser's Specifications) or from any act or omission of the Supplier, that may develop under normal use of the supplied Goods in the conditions prevailing in the place of final destination.

The Purchaser / consignee shall promptly notify the Supplier in writing / Fax / Telephone of any claims arising under this warranty.

Upon receipt of such notice, the Supplier shall with all responsible speed will repair or replace the defective goods or parts thereof without cost to the purchaser to maintain its UP TIME offered in the beginning of purchase otherwise penal provisions shall apply if the supplier fails to keep up its UP TIME.

If the Supplier, having been notified, fails to remedy the defect(s) within 10 days, the Purchaser may proceed to take such remedial action as may be necessary, like forfeiture of EMD or recovery from security deposit the amount of loss (which will be decided by CDM&PHO/C.M.O / S.D.M.O) incurred by the purchaser.

DELIVERY OF DOCUMENT :

Three (3) copies of the Supplier invoice / bills showing purchase order number, good's description, quantity, unit price, total amount with stock entry certificate by the consignee.

Photocopy of the Insurance Certificate if any (The Original Certificate is to be given to the Consignee).

Attested Photocopy of Manufacturer's / Supplier's warranty certificate. (The original warranty certificate is to be submitted to the consignee at installation point).

INSURANCE :

For delivery of goods at site, the insurance shall be obtained by the Supplier(s) in an amount equal to 110% of the value of goods from “Warehouse” (final destination) on “All Risks” basis including natural calamities.

PACKAGING :

The supplier shall provide such packaging of the goods as is required to prevent their damage or deterioration during transit to their final destination. The packaging shall be sufficient to withstand without limitation rough handling during transit and exposure to extreme temperature, salt and precipitation during transit and upon storage. All primary packaging containers which come in contact with the item should strictly protect the quality and integrity of the Instruments & Equipments. Packing case size and weights should be taken into consideration, in case of remoteness of final destination and the absence of heavy handling facilities at all points in transit.

The packaging marking shall show the description of quantity of contents, the name of the consignee and address, the gross weight of the packages, the name of the supplier with a distinctive number of mark sufficient for purposes of identification. Each package shall contain:

- a. a packaging note quoting the name of the purchaser
- b. the number and date of order
- c. nomenclature of the goods
- d. schedule of parts for each complete equipment giving part number with reference to assembly.
- e. Name & address of the consignee
- f. Name & address of the supplier.

TERMS OF CONTRACT :

The **CDM&PHO** will be at liberty to terminate the contract either wholly or in part without assigning any reason. The tenderers will not entitled to any compensation whatsoever in such terminations.

PENALTIES :

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

If any articles or things supplied by the tenderer have been partially or wholly used or consumed after supply and are subsequently found to be in bad order, unsound, inferior in quality or description or are otherwise faulty or unfit for consumption / use & rusted then the contract price or

prices of such articles on full will be recovered from the tenderer, if payment had already been made to him or the tenderer will not be entitled to any payment for that item & no further order will be given to him. For infringement of the stipulations of the contract or for other justifiable reasons, the contract may be terminated by the **CDM&PHO** and the tenderer shall be liable for all losses sustained by the **CDM&PHO** in consequence of the termination which may be recovered from the Security Deposit made by the tenderer or other money due or become due to him.

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

ARBITRATIONS :

In the event of any dispute out of the contract, such dispute should be subject to the Jurisdiction of the Civil Court, [Dist.NUAPADA](#) or High Court, Odisha.

CHANGE OF TERMS AND CONDITIONS :

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

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

Executed by Purchaser (s) / Consignee

Executed by Supplier(s)

In presence of (Witness)

In presence of (Witness)

**WARRANTY / GUARANTEE /CMC UNDERTAKING
(to be submitted on Rs.50/- stamp paper)**

Tender ref. No. _____

Name of the equipment:

Date of Installation:

Name of the Consignee:

Name of the purchaser:

I / we / M/s _____

hereby declare that

- i. I / we do accept / Agree for the warranty / guarantee (2 years Warranty followed by 3 years CMC (Spares + Labour) as per this tender clause No. 7.1 to 7.6.
- ii. I / we will not charge / quote any extra price on account of the above said warranty / guarantee.
- iii. The 2year comprehensive warranty is valid from dt. _____ to dt. _____.
- iv. The 3 year CMC is valid from dt. _____ to dt. _____.

Date:

Signature of the competent authority

Place:

on behalf of the company / firm.

Seal of the firm.

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

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

UNDERTAKING

(to be submitted on Rs.50/- stamp paper)

Tender ref. No. _____

Name of the equipment:

Date of Installation:

Name of the Consignee:

Name of the purchaser:

Sir,

I / we _____ hereby
declare that

1. I / we am / are the manufacturers / authorized agents / distributors of _____
_____.
2. I / we do accept / agree for the all clauses including the warranty 2 years followed by 3 years CMC) and payment terms and conditions of this tender.
3. I / we do hereby confirm that the prices / rates quoted are fixed and are at par with the prices quoted by me / us to any other Govt. of India / Govt. of Odisha Hospitals / Medical Institutions. I / we also offer to supply the stores at the prices and rates not exceeding those mentioned in the price bid.
4. I / we agree to abide by my / our offer for a period of 365 days from the date of approval of the tender.
5. I / we have necessary infrastructure for the maintenance of the equipment and will provide all the accessories / spares as and when required.
6. I / we also declare that in case of change of Indian Agent or for any other change, merger, dissolution solvency etc. in the organization of our foreign principles, we would take care

of the Guarantee / warranty / maintenance of the machinery / equipment and have provided written confirmation for the same.

7. I / we shall provide assistance to the consignee in clearance and delivery of store at consignee's stores / premises.
8. The demurrage / storage charges, if any, payable to the customs department, due to non-receipt of required documents in time by the hospital / delay due to incorrect entries, mistakes to the documents etc. shall be borne by me / us.
9. I / we have carefully read and understood all the terms and conditions of the tender and shall abide by them.
10. I / we undertake to get the equipment's repaired within 48 hours of receiving of the complaint from the indenting hospital / consignee failing which a penalty @ 1% of the cost may be recovered from the performance security before releasing the same to us after 5 years.

Signature of the witness
Name & address

Signature of the Tenderer
Name & address

Dated

Seal of the firm.

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

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

ANNEXURE

(To be submitted in COVER B - PRICE BID)

Sl No	Name of the Item	Specification	Unit	Name of the Manufacturer/Make & Model	Price quoted inclusive of all Taxes (Door Delivery)	Cost of AMC/CMC year wise (excluding service tax) for three years after expiry of 2 year comprehensive warranty
1	Interferential Current therapy Unit (Combo) with Trolley	As per Sec V				
2	Paraffin Wax Bath Unit	As per Sec V				
3	Quadriceps training unit including weight cuffs & dumbbells	As per Sec V				
4	Hand rehabilitation Therapy unit	As per Sec V				
5	Pulse Oxymeter (for Finger)	As per Sec V				
6	Infrared Radiation Lamp	As per Sec V				

+

Signature & Seal of the Bidder

Chief District Medical & Public Health Officer