Amendment No. 6

20.12.2018

Sub: Amendment to the Bidding Document

Ref.: Notice Inviting Bid ref. HITES/PCD/NCI-AIIMS/28/18-19 dated 10.08.2018 read with its Amendment no. 1, 2, 3, 4 & 5 dated 20.08.18, 13.09.18, 08.10.18, 29.10.18 & 29.11.18.

The following changes have been authorised and are being incorporated in the above referred Bidding Document.

SECTION - I

NOTICE INVITING BIDS (NIB)

| Description | Existing | Amended as |
|--|-----------------------------|---------------------------------|
| Last date and time of online submission of tender | 21.12.2018 at 12:00 noon | 10.01.2019 at 12:00 noon |
| Last date and time of physical submission of EMD, Tender processing Fee, any other document specified in the Bidding Document | 21.12.2018 at 2:00 pm | 10.01.2019 at 2:00 pm |
| Date of tender Opening | 21.12.2018 at 2:30 pm | 10.01.2019 at 2:30 pm |

SECTION - III

SPECIAL INSTRUCTIONS TO BIDDERS (SIB)

34. Additional Factors and Parameters for Evaluation and Ranking of Responsive Tenders

34.1 Further to GIB Clause 33 above, the purchaser's evaluation of a bid will include and take into account the following (added para):

Existing:

iii) The items under this tender enquiry are intended to be specifically delivered and installed for use at National Cancer Institute, AIIMS (Jhajjar Campus) which is a Research cum Cancer Institute. Accordingly, custom duty, cess, IGST, payable at

the time of Import in the name of the Institute shall be applicable as per Custom Notification No. 51/96-Cus dated 23.07.1996 and its subsequent amendments, if any. Similarly, CGST/SGST payable at the time of supplies in the name of the Institute from Indian suppliers shall be applicable as per notification no. 47/2017-Integrated Tax (Rate) dated 14.11.2017 issued by Department of Revenue, Ministry of Finance, GOI. The ranking of bids shall also be made by taking into such rates of taxes & duties for those items as mentioned in the said notifications.

Amended as: **Deleted**

SECTION - VII

TECHNICAL SPECIFICATION AND GENERAL POINTS

A. TECHNICAL SPECIFICATION:

Item No. 1 (Rfx/Event number 3000003282) Blood Bank

| S1. No. | Ref. to the Bidding Document | Existing Tender Specification | Amended as |
|------------|------------------------------------|--|---|
| S1. N | o 2. Blood Co | llection Monitor | |
| 1 | Page 48, Point 8 | Oscillation 16 +/-(2) rpm | Oscillation 12 - 16 rpm |
| 2 | Page 48, Point 11 | Every Bio-mixer should be provided with carry box with handle. | Every Bio-mixer should be provided with manufacturer provided carry box with handle. |
| 3 | Page 49, Point 14 | Should be USFDA or European CE approved product. | It should have USFDA or European CE certification |
| 4 | Page 48 | Added Para. 16 | The biomixer should be able to integrate with LIS for data management. |
| Item | at Sl. No 3. I | Blood Donor Couch | |
| 5 | Page 49 | Heading "Blood Donor Couch" | Portable Blood Donor Couch |
| 6 | Page 49, Point 12 | Should be provided with transportation trolley to hold maximum 5 couches | Deleted |
| 7 | Page 49, Point 13 | Cost of transportation trolley should be quoted separately | Deleted |
| 8 | Page 49, Point 15 | It should meet IEC-60601-1-2 (Or Equivalent BIS) General Requirements of Safety. | Deleted |

| 9 | Page 49 | Added Para. 16 | Equipment should have USFDA or CE certification |
|--------|-----------------------|---|---|
| S1. No | 5. Dielectri | c Tube Sealer - Handheld | |
| 10 | Page 50, Point 2.1 | Manufacturing should be compliant with ISO 13485, and both manufacturer and distributor/service provider should be ISO 9001:2008 compliant. | Equipment should have ISO 13485 certification and Manufacturer should have ISO 9001 certification. |
| 11 | Page 50, Point 5 | Should be rechargeable battery operated compact (less than 3 Kg) hand held type, not bench top type. | Should be rechargeable battery operated compact (less than 3 Kg) hand held type, not bench top type. It should have a portable hand unit with coaxial cable of 1.5 - 2 meter. |
| 12 | Page 50, Point 6 | Sealing time should not be >2 sec | Sealing time should not be >2 sec. It should be able to make 50-60 seals/ hr. and with No warm-up time. |
| 13 | Page 50, Point 11 | No. of seals per charge should be more than 1200 continuous seals from a fully charged battery. | No. of seals per charge should be 500-700 continuous seals from a fully charged battery. |
| 14 | Page 50, Point 12 | Charger should be compatible with Input voltage: 240 V 50 Hz Single phase AC. | Charger should be compatible with Input voltage: 240 V 50 Hz Single phase AC. It shall meet IEC-60601-1-2 (Or Equivalent BIS) General Requirements of Safety for Electromagnetic Compatibility. |
| S1. No | o 6, Blood Ba | nk Refrigerator - 700 L | |
| 15 | Page 50 | Heading: Blood Bank Refrigerator - 700 L | Blood Bank Refrigerator - 400 L |
| 16 | Point 1, Page 50 | Storage Capacity: Should be at least 700 Liters capacity and should be able to accommodate minimum 350 triple bags of 350 ml and 450 ml capacity. | Storage Capacity: Should be at least 400 Liters capacity and should be able to accommodate minimum 350 triple bags of 350 ml and 450 ml capacity. |
| 17 | Point 14, page 51 | While in operation, the noise level must not exceed 60 dB. | While in operation, the noise level must not exceed 90 dB . |
| 18 | Point 18, Page 51 | Should be USFDA or European CE approved product. | Equipment should be USFDA or European CE certified. |
| S1. No | 8. Refrigera | ated Blood Bag Centrifuge - 12 ba | gs |
| 19 | Point 19, page 53 | Should be USFDA or European CE approved product. | Equipment should be US-FDA or European CE certified . |

| 51. 140 | J. Reiliger | ated Blood Bag Centrifuge - 16 ba | gs |
|----------------|--|--|---|
| 20 | Point 19, | Should be USFDA or European | Equipment should be US-FDA or |
| | Page 55 | CE approved product. | European CE certified. |
| | | Platelet Agitator cum Incubator donor platelet units) | (Upright Model) |
| 21 | Point 3e, Page 56 | Design of shelves : The agitator must be noiseless (< 60 db) | While in operation, the noise level must not exceed 90 dB. |
| 22 | Page 57 Point 15 | Should be US-FDA or European CE approved product. | Deleted. |
| | | et Agitator cum Incubator (Uprigh platelet units) | nt Model) |
| 23 | Page 58 Point 15 | Should be USFDA or European CE approved product. | Equipment should have USFDA or European CE certification . |
| S1. No | o 12. Plasma | Thawing Bath | |
| 24 | Point 4, page 59 | Should give an alarm when the plasma bags are thawed | Deleted |
| 25 | Point 16, Page 59 | The quoted model should have FDA or CE or ISO certificate and copy of the same should be enclosed along with the technical bid. | Equipment should have USFDA/ CE/ISO certification. |
| S1. No | o 13. Water I | Bath | |
| 26 | Page 60 | Added Para. 5 | Equipment should have USFDA or European CE certification. Manufacturer should have ISO certification. |
| S1. No | o 14. Electro | nic Double Pan Component Balan | ce |
| | | - | |
| 27 | Page 61 Point 13 | <u>-</u> | Equipment should have USFDA or European CE certification . |
| | Page 61 Point 13 | Should be USFDA or European | |
| | Page 61 Point 13 | Should be USFDA or European CE approved product. | |
| S1. No | Page 61 Point 13 Deep F | Should be USFDA or European CE approved product. reezer (-40°C) 700 L Heading "S. No:-15 Deep Freezer (-40°C) 700 L" Upright model with internal capacity 700 liters or more. | or European CE certification . S. No:-15 Deep Freezer (-40° C) 400 L Upright model with internal capacity 400 liters or more. |
| S1. No | Page 61 Point 13 Page 61 Page 61 Point 3, | Should be USFDA or European CE approved product. reezer (-40°C) 700 L Heading "S. No:-15 Deep Freezer (-40°C) 700 L" Upright model with internal | or European CE certification . S. No:-15 Deep Freezer (-40° C) 400 L Upright model with internal |
| 28 29 30 | Page 61 Point 13 Page 61 Page 61 Point 3, Page 61 Point 18 Page 61 Point 26, Page 62 | Should be USFDA or European CE approved product. reezer (-40°C) 700 L Heading "S. No:-15 Deep Freezer (-40°C) 700 L" Upright model with internal capacity 700 liters or more. System should have minimum vibrations, and noise level should not exceed 70 db. Should be USFDA or European CE approved product. | or European CE certification . S. No:-15 Deep Freezer (-40° C) 400 L Upright model with internal capacity 400 liters or more. System should have minimum vibrations, and noise level should not exceed 90 db. |
| 28 29 30 | Page 61 Point 13 Page 61 Page 61 Point 3, Page 61 Point 18 Page 61 Point 26, Page 62 | Should be USFDA or European CE approved product. reezer (-40°C) 700 L Heading "S. No:-15 Deep Freezer (-40°C) 700 L" Upright model with internal capacity 700 liters or more. System should have minimum vibrations, and noise level should not exceed 70 db. Should be USFDA or European CE approved product. reezer(-80) 800 L | S. No:-15 Deep Freezer (-40° C) 400 L Upright model with internal capacity 400 liters or more. System should have minimum vibrations, and noise level should not exceed 90 db. Equipment should have USFDA or European CE certification. |
| 28 29 30 | Page 61 Point 13 Page 61 Page 61 Point 3, Page 61 Point 18 Page 61 Point 26, Page 62 | Should be USFDA or European CE approved product. reezer (-40°C) 700 L Heading "S. No:-15 Deep Freezer (-40°C) 700 L" Upright model with internal capacity 700 liters or more. System should have minimum vibrations, and noise level should not exceed 70 db. Should be USFDA or European CE approved product. | S. No:-15 Deep Freezer (-40° C) 400 L Upright model with internal capacity 400 liters or more. System should have minimum vibrations, and noise level should not exceed 90 db. Equipment should have USFDA |

| | D.: 05 | Ol 1.1.1 LIGED A E | Barrela are and all are 1.1.1. LICEDA |
|--------|--------------------|-----------------------------------|---|
| 34 | Point 25, | Should be USFDA or European | Equipment should have USFDA |
| | Page 63 | CE approved product | or European CE certification . |
| SI. No | 17. Dielecti | ric Tube sealer (Bench top) | |
| | | The sealing time should be | The sealing time should be |
| 35 | Point 3, | between 0.5-2 seconds. It | within 2 seconds. It should be |
| | page 63 | should be able to make 70-80 | able to make at least 40 |
| | | seals/ hr. | seals/hr. |
| 36 | Point 12, | Should be light weight not more | Should be light weight not more |
| | page 63 | than 6 Kg. | than 8 Kg. |
| | point 13, | It should give alarm in case of | |
| 37 | page 63 | detection of wet tube, leakage | Deleted. |
| | page oo | and sealing defect | |
| S1. No | o 18. Manual | Plasma Extractor | |
| | Dogo 64 | Certifications: Product | It should have Furancen CF |
| 38 | Page 64 Point 6 | certification: CE class IIA or US | It should have European CE class IIA or US FDA certification" |
| | Foilit 0 | FDA certified. | class IIA of OS FDA certification |
| S1. No | 20. Blast Fr | eezer | |
| | | | Equipment should be USFDA |
| 39 | Page 66 | Added Para. 38 | or European CE certified. |
| SI No | 22 Biologic | cal X-ray based blood irradiator | • |
| S1. NC | J ZZ. Biologic | <u> </u> | |
| | Page 67, | The system MUST have X-ray | The system MUST have X-ray |
| 40 | Point 3 | tube output limits up to 220 kV, | tube output limits up to 160 |
| | | 30 mA and/or 3 kW. | kV, 26 mA and/or 3 kW. |
| | Page 67, | The X-ray tubes should have life | The X-ray tubes should have life |
| 41 | Point 4 | span of at least 5 years/5000 | span of at least 5 years. |
| | | hours. | - |
| | D 67 | It must have self-contained | It should have self-contained / |
| 42 | Page 67, | cooling system without | external cooling system with or |
| | Point 7 | requirement of external water | without requirement of external |
| | | supply. | water supply. |
| | Da 67 | Canister volume should be able | Canister volume should be able |
| 43 | Page 67, | to accommodate a minimum of 6 | to accommodate a minimum of |
| | Point 8 | to 8 blood bags each of 300 ml | 3 to 6 blood bags each of 300 |
| | | at a time | ml at a time. |
| 44 | Page 67, | The system MUST include a | The system may include a |
| 44 | Point 10 | positioning function for beam | positioning function for beam |
| | | and specimen alignment. | and specimen alignment. |
| 45 | Page 67 | Added Para. 26 | Equipment should be USFDA or |
| | _ | | European CE certified. |
| S1. No | 23. Fully A | utomated Random Access Chemil | uminescence |
| 46 | Page 70 | Added Para. 14 | Equipment should be European |
| +0 | rage 10 | Audeu Fara. 14 | CE or USFDA certified. |
| S1. No | 24. Table To | op Centrifuge | |
| 47 | Point 18, | Should be USFDA or European | Equipment should have USFDA |
| 41 | Page 71 | CE approved product. | or European CE certification. |
| S1. No | 25. Reagent | t Refrigerator | |
| 40 | Page 71 | Should be USFDA or European | Equipment should have USFDA |
| 48 | Point 16 | CE approved product. | or European CE certification. |
| | | | |

| S1. No | o 26. Micro p | ipette set (Manual adjustable) | |
|--------|------------------------|---|---|
| 49 | Page 72 | Should be US FDA or European | Equipment should have USFDA |
| 49 | Point 14 | CE approved. | or European CE certification. |
| S1. No | o 27. Multic | hannel Pipette | |
| 50 | Page 73 | Added Para. 15 | Equipment should have USFDA or European CE certification. |
| S1. No | o 28. Digital | pH Meter | |
| 51 | Page 73, | Should be USFDA or European | Equipment should have USFDA |
| 31 | Point 14 | CE approved product. | or European CE certification. |
| S1. No | o 29. Walk-ii | n modular cold room | |
| 52 | Page 76 | Added Para. 28 | Equipment should have USFDA or European CE certification. |
| S1. No | o 30. Fully A | utomated Immuno-Haematology (| (IH) platform |
| 53 | Page 77 Point 13 | Should be USFDA or European CE approved product. | Equipment should have USFDA or European CE certification. |
| S1. No | o 32. Apheres | sis Machine | |
| 54 | Point 1, page 78 | Continuous Flow Blood Cell Separator. | Continuous and/or Intermittent Flow Blood Cell Separator. |
| 55 | Point 20. a Page 79 | Disposable platelet pheresis kits should be provided with the system | Deleted. |
| S1. N | o 35. Bio-Safe | ety Cabinet | |
| 56 | Page 82, Point 1. | Floor model, horizontal flow, well lighted, work space, low vibration and noise. Easy to maneuver due to caster wheel provision. Overall dimension of workspace should be approximately 1200 mm x 600 mm x 600 mm. Class 2A type. | Tabletop model, well lighted, work space, low vibration and noise. Easy to maneuver due to caster wheel provision. Overall dimension of workspace should be approximately 1200 mmx 600 mm x 600 mm. Class 2A type. |

Annexure – 3 Turnkey works for Blood Bank

| S1 No | Ref. to the Bidding Document | Existing Tender Specification | Amended as |
|----------|------------------------------------|---|--|
| 1 | Page 100 Point 13. a | Provision of 2ft x 2ft LED lights to provide illumination of 500 lux in all areas. LED lights to be flush mounted to the false ceiling. | Provision of 2ft x 2ft LED lights to provide illumination of 300-350 lux in all areas. LED lights to be flush mounted to the false ceiling. |
| 2 | Page 100 Point 13.b | Toughened glass sealed windows with curtains to be provided to allow natural sun light wherever possible. | Toughened glass sealed windows to be provided to allow natural sun light wherever possible. |

| | | | Turnkey works of Blood Bank have been executed to a large extend. The bidders are required to visit the site and conduct a detailed assessment with regard to any Civil, Electrical & HVAC changes required in Blood Bank area as per tender requirements. The bidder should quote for turnkey works only for the additional/differential works |
|---|----------|---|---|
| 2 | Page 116 | Added Para (In turnkey works Annexure-3) | required in the blood bank area to meet the tender requirements. |
| | | | Any makes and models given in the tender are to be used by the bidder while executing turnkey works identified after site visit. However, no additional turnkey work should be quoted for on account of a different make and model already used at the existing Blood Bank site. |

Annexure – 4 BOQ FOR SUPPLY AND INSTALLATION OF BLOOD BANK EQUIPMENT

| S1 No | Ref. to the Bidding Document | Existing Tender Specification | Amended as |
|----------|------------------------------------|--|---|
| 1 | Page 116 Sl. No 2 | Blood Collection Monitor – Qty 12 Nos | Blood Collection Monitor – Qty 8 Nos |
| 2 | Page 116 Sl. No 3 | Blood Donor Couch – Qty 13 Nos | Blood Donor Couch – Qty 14 Nos |

SECTION - VIII

QUALIFICATION CRITERIA

3. Minimum Work of Similar Nature:

Existing:

Eligible bidder(s) should have in the past 5 (five) years prior to closing of bid submission, successfully supplied and executed order(s)** to hospital(s) (with minimum 200 bed), like any Govt. hospitals/institutes of national importance or at any other reputed hospitals/institutes globally as detailed below.

**The order(s) individually or in combination should include the following:

- a. Apheresis machine- 3 (three) nos.
- b. Chemiluminescence- 1 (one) no.
- c. Blood donor couch- 4 (four) nos.
- d. Blast freezer- 1 (one) no.

Amended as:

Eligible bidder(s) should have in the past **7 (seven)** years prior to closing of bid submission, successfully supplied and executed order(s)** to hospital(s) (with minimum 200 bed), like any Govt. hospitals/institutes of national importance or at any other reputed hospitals/institutes globally as detailed below.

**The order(s) individually or in combination should include the following:

- a. Apheresis machine- 3 (three) nos.
- b. Chemiluminescence- 1 (one) no.
- c. Blood donor couch- 4 (four) nos.
- d. Blood Bag Refrigerator- 1 (one) no.

PROFORMA 'A'

Existing:

(For the period of last five years)

Amended as:

(For the period of last **seven** years)

SECTION - XIII

MANUFACTURER'S AUTHORIZATION FORM

Existing 'Manufacturer's Authorization Form' in the Bidding Document is superseded by the new 'Manufacturer's Authorization Form:

The CEO HLL Infra Tech Services Limited B-14A Sector-62 Noida, Uttar Pradesh-201307

Dear Sir,

| Ref: Your TE document No dated |
|---|
| We, who are proven and reputable manufacturers of (name and description of the goods offered in the bid) having factories at, hereby authorise Messrs (name and address of the agent) to submit a bid, process the same further and enter into a contract with you against your requirement as contained in the above referred TE documents for the above goods manufactured by us. |
| We also state that we are not participating directly in this bid for the following reason(s): (please provide reason here). |
| We also hereby extend our full warranty, CAMC as applicable as per clause 15 of the General Conditions of Contract, read with modification, if any, in the Special Conditions of Contract for the goods and services offered for supply by the above firm against this TE document. |
| We also hereby confirm that we would be responsible for the satisfactory execution of contract placed on the authorized agent and the spares for the equipment shall be available for at least 10 years from the date of supply of equipment. |
| We also confirm that the price quoted by our agent shall not exceed the price which we would have quoted directly" |
| Yours faithfully, |
| [Signature with date, name and designation] for and on behalf of Messrs |
| [Name & address of the manufacturers] |

Note:

- 1. This letter of authorisation should be on the letter head of the manufacturing firm and should be signed by a person competent and having the power of attorney to legally bind the manufacturer.
- 2. Original letter may be sent.

All other contents of the Bidding Document including terms & conditions remain unaltered.