Amendment No.12

Date: 02.09.2014

Subject: Amendment no.12 to the Tender Enquiry Document

Ref: (i) Tender Enquiry No.: HLL/PCD/PMSSY/AIIMS-II/11/13-14 dated 19.12.2013.
(ii) Amendment No.1 dtd.21.01.2014.
(iii) Amendment No.2 dtd. 10.02.2014.
(iv) Amendment No.3 dtd. 27.02.2014.
(v) Amendment No.4 dtd. 14.03.2014.
(vi) Amendment No.5 dtd. 27.03.2014.
(vii) Amendment No.6 dtd. 16.04.2014.
(viii) Amendment No.7 dtd. 09.05.2014.
(ix) Amendment No.8 dtd. 17.05.2014.
(x) Amendment No.9 dtd. 19.06.2014.
(xi) Amendment No.10 dtd. 21.07.2014
(xii) Amendment No.11 dtd. 16.08.2014

The following changes are incorporated to the referred tender document/ subsequent amendments published thereafter:

SECTION - VI
LIST OF REQUIREMENTS

1)For:-

Part II: Required Delivery Schedule:

a) For Indigenous goods or for imported goods if supplied from India:
75 days from date of Notification of Award to delivery at consignee site. The date of delivery will be the date of delivery at consignee site. Tenderers may quote earliest delivery period.
Installation and commissioning shall be done within 45 days of receipt of the stores/ goods at site or within 45 days of handing over the site for installation, whichever is later.

b) For Imported goods directly from foreign:
90 days from the date of opening of L/C. The date of delivery will be the date of Bill of Lading/Airway bill. (Tenderers may quote the earliest delivery period).
Installation and commissioning shall be done within 45 days of receipt of the stores/ goods at site or within 45 days of handing over the site for installation, whichever is later.

For delayed delivery and/ or installation and commissioning liquidated damages will get applied as per GCC clause 23.

Read As:

Part II: Required Delivery Schedule:

a) For Indigenous goods or for imported goods if supplied from India:
75 days from date of Notification of Award or 30 days from the date of site readiness whichever is later to delivery at consignee site. The date of delivery will be the date of delivery at consignee site. Tenderers may quote earliest delivery period.

Installation and commissioning shall be done within 45 days of receipt of the stores/ goods at site or within 45 days of handing over the site for installation, whichever is later.

b) For Imported goods directly from foreign:

90 days from the date of opening of L/C or 30 days from the date of site readiness whichever is later. The date of delivery will be the date of Bill of Lading/Airway bill. (Tenderers may quote the earliest delivery period).

Installation and commissioning shall be done within 45 days of receipt of the stores/ goods at site or within 45 days of handing over the site for installation, whichever is later.

For delayed delivery and/ or installation and commissioning liquidated damages will get applied as per GCC clause 23.

SECTION - II
GENERAL INSTRUCTIONS TO TENDERERS (GIT)

13.4.2 For goods offered from abroad, the prices in the corresponding price schedule shall be entered separately in the following manner:

1) For:

i) Applicable custom duty with & without CDEC and custom clearance charges ifany, to be quoted in INR.

Read As:

i) Applicable custom duty with & without CDEC and custom clearance charges if any, to be quoted in INR. Bidders will also need to quote HS code of the material offered that will be imported and special exemption if any need to be quoted by the bidder.

Section VII
Technical Specifications

Item No: 02
(Cell Separator) Apheresis Machine

Existing Specification is replaced with the following specification:

Item No: 02
Blood Cell Separator/Apheresis machine

1 Continuous Flow Blood Cell Separator.

2 Single/Dual Needle operation. (Optional accessory required for Single Needle)

3	Built in automated protocols for majority (4 of 6) of the below procedures, which all should be US-FDA or European CE approved a. Leukoreduced Plasma Collection b. Therapeutic Plasma Exchange. c. Single or doubleRBC collection and/or RBC Exchange d. Peripheral Blood Stem Cell Collections. e. Granulocyte Collection. f. Leukoreduced platelet collection or plateleapheresis
4	Automatic Pump Loading & Priming of disposables sets.
5	Automated Self test to ensure maximum Donor Safety.
6	Built in Leukoreduction (<5 x 106) for Platelets & Plasma using elutriation (eg LRS chamber) or other patented technology which is NOT based on leukoreduction filter.
7	Automatic Leukoreduction validation of platelets and plasma at the end of procedure.
8	Adjustable product concentration.
9	Separate Anticoagulation pump with custom programming adjustability
10	Safety check to prevent Platelets count droping below safety level for Donor safety.
11	Configurable maximum volume depletion levels either by weight or percentage of Total Blood Volume.
12	Extracorporeal volume less than 250 ml.
13	Built in Access & Return Pressure sensor.
14	Built in air detectors to prevent air embolism.
15	Built in ACD Detector.
16	Built in contamination monitor for monitoring & preventing RBC contaminations in platelet collection and plasma exchange.
17	Audio visual alarms.
18	Periodic Instrument Calibration certificate for the various parameters and QC of the products should be provided/maintained by the vendor
19	European CE or US-FDA approved.

Item No: 03
Hemo Analyser

1. **Existing Specification:**
   Para: WBC count/RBC count 0-400/**0-8.0**

   Read as:
   WBC/RBC count 0-400/**0-7.0**

2. **Existing Specification:**
   Para: Haemoglobin / platelet **0-25**/0-3,000

   Read as:
   Haemoglobin / platelet **0-22.5**/0-3,000

3. **Added Para:**

   The system should be USFDA or European CE approved.

Item No: 04
Vein Illumintion device

Existing Specification should be replaced with the following:

Item No: 04
Vein Illumintion device

1. Should be based on harmless near infra red (NIR) technology.
2. Should be portable, also foldable model for easy handling stand for maintaing for trouble free phlebotomy fro hand free operatimg.
3. The vein imaging device should have the ability to visualize vessels up to 10mm deep, the ideal clinical depth range for PIV options,with provided clinical evidence to substantiate.
4. Vein imaging device should provide different imaging modes: Universal, fine detail me, inverse mode and resize mode. Special max bright mode for using the equipment in non standard lighting conditions or without dimming the room light.
5. Vein imaging device should offer an image appropriate across all skin tones and a method of detecting when image is at the proper focal distance.
6. Should have minimum brightness of 6 lumens and substantiate with technical specifications evidence.
7. Should have an in built camera to capture the real time image of the vasculature under focus area.
8. Vein imaging device should offer an image that provides for the same accuracy and reliability of image regardless of the rotation of the device/ technique for use on the patient.
9. Should provide evidence of real- time imaging and demonstrate ability to visualize blood refill and detect valves.
10. Vein imaging device should provide evidence of real time imaging and demonstrate ability to visualize fluid flushing process for vessel patency to prevent against infiltration and hematoma.
11. Direct projection on surface of skin should not require secondary monitor to interface with technique.
12. Should be a non laser based system and should not have any mandated safety warnings.

13. Clinical evidence minimum requirement.
14. Should provide at least 2-3 peer- reviewed joural in quality.
15. Battery operated: battery life should be 2 hours in active machine. An extra battery should be provided.
16. Should provide a hands free technique with less than 60 seconds setup time from power uo to useable image.
17. Device should not come in contact with skin.
18. Device should not need consumables.
19. Should be able to perform 100-150 viewing procedures in fully charged battery.
20. Shuld have suitable adaptor for charging in indian sockets.
21. 2 S mounts, 2rechargebale batteries, battery charging station, AC power adaptor, USB cable, Trainig DVD And a storage case.
22. System should be European CE or USFDA approved.

Item No: 07
Flow Cytometer

1. **Existing Specification:**
   Para 1: Equipment with solid state 405nm laser (40mW or more), solid state 488nm laser (20mW or more) and solid state 633-642nm laser (50mW or more).

   Read as:
   Para 1: **Equipment with 3 lasers (Violet, Blue, Red).**

2. **Existing Specification:**
   Para 3: Must perform 9 or more fluorensce parameters along with forward and side scatter simultaneously.

   Read as:
   Para 3: **Must perform 8 or more**fluorensce parameters along with forward and side scatter simultaneously.

3. **Existing Specification:**
   Para 4: The acquisition speed and analysis rate of the analyser should be not less than **60,000 events/ sec**, regardless of the number of lasers or fluoresence parameters being used.

   Read as:
   Para 4: The acquisition speed and analysis rate of the analyser should be more than **10,000 events/ sec**, regardless of the number of lasers or fluoresence parameters being used.

4. **Existing Specification:**
   Para 10: Capable of achieving high precision sample flow rate of 140ul per minute or more.

   Read as:

Deleted

5. **Existing Specification:**
   Para 17: Instrument installation requirements including power supply, power backup, flow cutometer space requirement (D x W x H) must be clearly indicated in the offer. Analyser foot print should not be larger than 36 x 36 inches (depth & width)

   Read as:
   Para 17: Instrument installation requirements including power supply, power backup, flow cutometer space requirement (D x W x H) must be clearly indicated in the offer. **Analyser should have a small foot print.**

6. **Added Para:**

   Instrument should be US-IVD or CE-IVD approved.

Item No: 08
ECG Machine

Existing Specification should be replaced with the following:

Item No: 08
12 Lead ECG Machine

1. Twelve channel LCD display for all 12 leads along with on screen details .
2. Recording for 12 channels (3 leads and one user selectable any lead as Rhythm lead).
3. Recording speed selection of 5, 10, 25 & 50 mm/sec.
4. Sensitivity of 2.5,5,10,20 mm /mV. It should also have AGC (Automatic Gain Control)
5. Facility to enter patient information (Name, Age. Sex, Height, Weight, doctor‟ s name, Hospital's name which get updated in system and is recorded on the recorder A4 paper
6. Patient memory function, up to 100 patients.
7. Waveforms can be recorded.
8. Interpretation software.
9. Mains and in built rechargeable Lithium battery.
10. Equipment should be European CE or US FDA approved

Item No: 09
Cardiac Monitor

Existing Specification should be replaced with the following:

Item No: 09
Cardiac Monitor

1 Description of Function

1.1 It should provide monitors of ECG, NIBP and SpO2

2 Operational Requirements

2.1 Comprised of bedside monitors

2.2 Capability of storage of patient data and printing of patient reports.

2.3 Demonstration of the equipment is a must.

3 Technical Specifications

3.1 Minimum 10 inches or more multicoloured TFT display.

3.2 Should have facility to monitor and display - ECG, NIBP and SpO2

3.3 Digital and 2 waveforms/traces display of all parameters. Specification include – monitoring of heart rate in addition to above to make it a complete monitor.

3.4 Multichannel (up to 12 leads) ST segment analysis.

3.5 Automatic arrhythmia detection & alarm for standard and lethal arrhythmia

3.6 Should be suitable for Adult to Neonate usage

3.7 Should be able to measure B.P in automatic, manual and stat mode.

3.8 Motion tolerant NIBP with cuff overpressure protection

3.9 Should be capable of measuring oxygen Saturation even in case of motion artifact.

3.10 Should have audio – visual alarms for all parameters and should display alphanumeric alarm messages

3.11 Trend of at least 48 hours.

3.12 Should have automatic and manual alarm setting for all parameters

3.13 Should have inbuilt 2 Channel thermal recorder with selectable recording speed of 25 & 50 mm /sec

3.14 Battery backup of at least 2 hours, when fully charged.

4 System configuration Accessories, spares and consumables

4.1 ECG: 5 Lead Cable with clip – 2 sets per monitor

4.2 NIBP: Adult cuff- 2nos. per monitor and two sizes of paediatric cuffs- one per monitor (complete Sets). Thigh cuff &extra-large cuff – each one per monitor.

4.3 SpO2: Adult SpO2 sensor with cable- two nos. per monitor and Paediatric SpO2 sensors- one no. per monitor.

4.4 Necessary mounting solution/ mounting on any pendant for monitors

5 Environmental factors

5.1 The unit shall be capable of operating continuously in ambient temperature of 0 -40° C and relative humidity of 15-90%

5.2 The unit shall be capable of being stored continuously in ambient temperature of 20 -60° C

5.3 The supplier shall provide environment friendly furniture and wall fittings for the entire system. Cabling has to be provided by the supplier

6 Power Supply

6.1 Power input to be 220-240VAC, 50Hz fitted with Indian plug

7 Standard Safety And Training

7.1 It should be USFDA or European CE approved product.

7.2 Shall meet the safety requirements as per IEC 60601-2-27: 1994- Medical electrical equipment – Part 2: Particular requirements for the safety of electrocardiographic monitoring equipment.

7.3 Manufacturer/ Supplier should have ISO certification for quality standards.

7.4 Should have local service facility the service provider should have the necessary equipment recommended by the manufacturer to carry out preventive maintenance test as per guidelines provided in the service/maintenance manual.

7.5 Back to back warranty to be taken by the supplier from the principal to supply spares for a Minimum period 10 years.

8 Documentation

8.1 User Manual in English

8.2 Service manual in English

8.3 Must submit user list and performance report within last 5 years from major hospitals at least 500 beds or from any government institutions or medical college.)

8.4 Compliance Report to be submitted in a tabulated and point wise manner clearly mentioning the Page /para number of original catalogue / data sheet. Any point, if not substantiated with Authenticated catalogue/manual, will not be considered.

8.5 List of Equipment available for providing calibration and routine Preventive Maintenance Support. As per manufacturer documentation in service/ technical manual.

8.6 List of important spare parts and accessories with their part number and costing and to be blocked for 5 years.

8.7 Log book with instruction for daily, weekly, monthly and quarterly maintenance checklist. The job description of the hospital technician and company service engineer should be clearly spelt out

Item No: 11
Defibrillator

Existing Specification should be replaced with the following:

Item No: 11
Defibrillator with ECG Monitor

1 Description of Function

1.1 Defibrillator is required for reviving the heart functions by providing selected quantum of electrical shocks with facility for monitoring vital parameters.

2 Operational Requirements

2.1 Defibrillator should be Bi- Phasic, light weight and latest model

2.2 Should monitor vital parameters and display them

2.3 Should print the ECG on thermal recorders.

2.4 Should work on both Manual and Automated external defibrillation (AED) mode up to 200 J or more.

2.5 Should be capable of doing synchronized &asynchronizedcardioversion

2.6 Can be operated from mains as well as battery

2.7 Should have defibrillator testing facility

2.8 Demonstration of the equipment is a must.

3 Technical Specifications

3.1 Should be a Low Energy Biphasic defibrillator monitor with Recorder, having capability to arrest all arrhythmia within a maximum energy of 200 Joules.

3.2 Should monitor ECG through paddles, pads and monitoring electrodes and Defibrillate through pads and paddles. Should have Automatic or Manual Lead switching to see patient ECG through paddles or leads

3.3 Should measure and compensate for chest impedance for a range of 25 to 125 ohms

3.4 Should have a built in 50mm strip printer/ thermal recorder

3.5 Should have charging time of less than 6 seconds for maximum energy. Charging indicator should be there.

3.6 Should have bright LCD / TFT display for viewing messages and ECG waveform of 4 seconds

3.7 "Single Adult and pediatric paddles should be available. Internal paddles should also be available and price to be quoted separately."

3.8 Should have event summary facility for recording and printing at least 250 events and 50 waveforms. Patient data storage 90 mins of ECG and events.

3.9 Should have a battery capable of usage for at least 90minutes or 30 discharges.

3.10 Should be capable of printing Reports on Event summary, configuration, self-test, battery capacity etc

3.11 Should have facility for self-test/check before usage and set up function

3.12 Should have SPO2 and EtCO2 integrated facility.

3.13 Should be capable of delivering energy in increments of 1-2 joules up to 30J and increments of maximum 50J thereafter.

3.14 Should have user friendly 1,2,3 color coded operation.

3.15 Voice prompts on AED mode

3.16 Printing reports of events summary configuration/set test/ battery capacity

3.17 Optional noninvasive pacing/ transcutaneous pacing

4 System Configuration Accessories, spares and consumables

4.1 Defibrillator -01

4.2 Paddles Adult/Paediatric (pair) -01

4.3 Paddles –Internal (pair) -01

4.4 Patient cable -02

4.5 ECG Rolls -50

4.6 Disposable pads-10 nos.

4.7 "Reusable SPO2 Finger Probe-Adult -02, Reusable SPO2 Paediatric Finger Probe - 02"

4.8 Complete set of ECG Leads- 02

5 Environmental factors

5.1 The unit shall be capable of operating continuously in ambient temperature of 10 -400 C and relative humidity of 15-90%

5.2 The unit shall be capable of being stored continuously in ambient temperature of 0 -500 C and relative humidity of 15-90%

5.3 Shall meet IEC-60601-1-2: 2001(Or Equivalent BIS) General Requirements of Safety for Electromagnetic Compatibility.

6 Power Supply

6.1 Power input to be 220-240VAC, 50Hz

6.2 Resettable overcurrent breaker shall be fitted for Protection

7 Standards, Safety and Training

7.1 Should be USFDA and European CE approved product

7.2 Electrical safety conforms to standards for electrical safety IEC-60601-1 General Requirements and IEC-60601-2-25 Safety of Electrocardiograms. (OR EQUIVALENT BIS Standard)

7.4 Should conform to international test protocols on exposure to shock forces and to vibration forces. The standard should be documented.

7.6 Should meet IEC 529 Level 3 (IP3X)(spraying water) for enclosure protection, water ingress.

7.7 Should have local service facility. The service provider should have the necessary equipments recommended by the manufacturer to carry out preventive maintenance test as per guidelines provided in the service/maintenance manual.

8 Documentation

8.1 User Manual in English

8.2 Service manual in English

8.3 List of important spare parts and accessories with their part number and costing

8.4 Certificate of calibration and inspection from factory.

8.5 Log book with instruction for daily, weekly, monthly and quarterly maintenance checklist. The job description of the hospital technician and company service engineer should be clearly spelt out.

8.6 List of Equipments available for providing calibration and routine maintenance support as per manufacturer documentation in service / technical manual.

8.7 Compliance Report to be submitted in a tabulated and point wise manner clearly mentioning the page/Para number of original catalogue/data sheet. Any point, if not substantiated with authenticated catalogue/manual, will not be considered.

8.8 Must submit user list and performance report within last 5 years from major hospitals

Item No: 12-A
Advance High Energy Linear Accelerator System

1. Existing Specification:

Para: 19- Multi Leaf Collimator (MLC)

a) No. of Physical Leaves- 40 pairs or more (80 leaves at least 2.0cm/sec speed including the leaf guide speed but excluding carrier speed) MLC with combination of **10mm leaves, which shall provide maximum of 40cm X 40cm2 field size.**

b) Independent drives for each leaves.

c) Leaf width at isocentre **10mm** for lateral leaves in 80 leaf combinations shall be capable of performing conformal therapy procedures.

Read as:

Para: 19- Multi Leaf Collimator (MLC)

a) No. of Physical Leaves- 40 pairs or more (80 leaves at least 2.0cm/sec speed including the leaf guide speed but excluding carrier speed) MLC with combination of **5mm or less leaves, for a field size of 10cm X 10cm.**

b) Independent drives for each leaves.

c) Leaf width at isocentre**5mm or less** for lateral leaves in 80 leaf combinations shall be capable of performing conformal therapy procedures.

2. Existing Specification:

Option-6

HIGH END PATIENT POSITIONING SYSTEMON LINEAR ACCELERATOR MEANT FOR REAL TIME IMAGE GUIDED RADIOTHERAPY, FRAMELESS RADIOSURGERY & STEREOTACTICBODY RADIOTHERAPY TREATMENT

Room based KV imaging system. Two Linac independent Kv X-Ray units floor mounted and two ceiling mounted flat panel detectors combined with IR tracking to monitor patient's position throughout treatment delivery and error in both coplanar & non- coplanar couch position by entering the values in the **iGuide system.**

Read as:

HIGH END PATIENT POSITIONING SYSTEMON LINEAR ACCELERATOR MEANT FOR REAL TIME IMAGE GUIDED RADIOTHERAPY, FRAMELESS RADIOSURGERY & STEREOTACTICBODY RADIOTHERAPY TREATMENT

Room based KV imaging system. Two Linac independent Kv X-Ray units floor mounted and two ceiling mounted flat panel detectors combined with IR tracking to monitor patient's position throughout treatment delivery and error in both coplanar & non- coplanar couch position by entering the values in the **Imaging system.**

3. Existing Specification:

Option-6

HIGH END PATIENT POSITIONING SYSTEMON LINEAR ACCELERATOR MEANT FOR REAL TIME IMAGE GUIDED RADIOTHERAPY, FRAMELESS RADIOSURGERY & STEREOTACTICBODY RADIOTHERAPY TREATMENT

It should have seamless interaction with the existing **MOSAIQ** Record & Verify System.

Read as:

Option-6

HIGH END PATIENT POSITIONING SYSTEMON LINEAR ACCELERATOR MEANT FOR REAL TIME IMAGE GUIDED RADIOTHERAPY, FRAMELESS RADIOSURGERY & STEREOTACTICBODY RADIOTHERAPY TREATMENT

It should have seamless interaction with the existing Record & Verify System.

4. **Existing Specification:**

Option-6

HIGH END PATIENT POSITIONING SYSTEMON LINEAR ACCELERATOR MEANT FOR REAL TIME IMAGE GUIDED RADIOTHERAPY, FRAMELESS RADIOSURGERY & STEREOTACTICBODY RADIOTHERAPY TREATMENT

Interaction with Robotic Couch Top; The system should have the capability to calculate and generate the shift values, which can then be entered into robotic couch top for 6D corrections **to happen based on these values with the existing hexapod system.**

Read as:

Option-6

HIGH END PATIENT POSITIONING SYSTEMON LINEAR ACCELERATOR MEANT FOR REAL TIME IMAGE GUIDED RADIOTHERAPY, FRAMELESS RADIOSURGERY & STEREOTACTICBODY RADIOTHERAPY TREATMENT

Interaction with Robotic Couch Top; The system should have the capability to calculate and generate the shift values, which can then be entered into robotic couch top for 6D corrections.

5. **Added para:**

Added Para under turn key: The scope of work as per regulatory gudelines will be provided and finalised by HLL and respective AIIMS . The bidder should inspect the site and submit the requiresd structural and architectural drawings along with the bid.

The bidder has to work in conjunction with the AIIMS to facilitate local approvals.

All software provided should be latest version with free updates within the warranty period. This line is to be added to the general terms and conditions.

QA tools: One Pressurised ION Chamber to be added.

Meeting the specification latest model should be quoted.

Item No: 12-A
Low Energy Linear Accelerator System

Added Para under turn key:

The scope of work as per regulatory gudelines will be provided and finalised by HLL and respective AIIMS . The bidder should inspect the site and submit the requiresd structural and architectural drawings along with the bid.

Added Para: Meeting the specification latest model should be quoted.

Item No: 12-A
High Dose Rate Brachytherapy System

1. Existing Specification:
Para: General Specifications:
The HDR system manufacturer should have an **ISO 9001 and FDA certification and must conform to EMC directives.**

Read as:
Para: General Specifications:
The HDR system manufacturer should have **an ISO 9001 and US FDA OR European CE certification.**

2. Existing Specification:

Para: Radiation Source and Transfer Mechanism:
The source cable must be able to negotiate treatment curvature of **1cm radius**

Read as:

Para: Radiation Source and Transfer Mechanism:
The source cable must be able to negotiate treatment curvature of **1.3cm or less radius**

3. Existing Specification:
Para: Radiation Source and Transfer Mechanism:
The source transfer guarantee must be enhanced in such a way that each source must be utilized for an extended period of time. **Iridium source shall be supplied for a period of 5 years taking into account the source transfer guarantee possible by the source.**

Read as:

Para: Radiation Source and Transfer Mechanism:
The source transfer guarantee must be enhanced in such a way that each source must be utilized for 6 months. Iridium source shall be supplied for a period of 5 years taking in to account the source transfer guarantee possible by the sources.

Item No: 13
CT Simulator System

1. Existing Specification:
1.2.5 The raw data memory of the computer for storage of images should be at least **2TB**

Read as:
Para: 1.2.5 The raw data memory of the computer for storage of images should be at least **1 TB or more.**

2. Existing Specification:
Para: 1.2.11 The X-ray generator should be high frequency generator with at least **50kW** power

Read as:
Para: 1.2.11 The X-ray generator should be high frequency generator with at least **80kW power**

3. Existing Specification:
Para: 1.2.18 **Pressure injector should be supplied along with 500 disposable syringes**

Read as:
Para: 1.2.18 **Should supply dual-head type of pressure injector, along with 500 disposable syringes.**

4. Existing Specification:
1.4 Computer workstation:
An additional workstation should be provided in the Treatment Planning System room. Colour printer should be added with each workstation.

Read as:
1.4 Computer workstation:
Computer workstation:
An additional workstation capable of handling all the post processing features of the main system should be provided in the Treatment Planning System room. Colour printer should be added with each workstation.

5. Existing Specification:
Para: 1.8 Lead Glass: **200 cm x 150 cmor more** with lead equivalent to meet the radiological safety requirement of AERB

Read as:
Para: .8 Lead Glass: 200 cm x 100 cm or more with lead equivalent to meet the radiological safety requirement of AERB

6. Existing Specification:
Para: 1.9 4D CT Scanning facility: 4D CT Scan software with 4D phantom for QA shall be provided and separately there shall be 4D CT Respiratory Gating hardware price provided if the main equipment needs such hardware.

Read as:
Para: 1.9 4D CT Scanning facility: 4D CT Scan software with 4D phantom for QA shall be provided and separately there shall be 4D CT Respiratory Gating hardware price provided if the main equipment needs such hardware.

Added: The CT simulator vendor should quote systems compatible to 4D of both LINAC principal separately, in different envelopes; so as to evaluate on the basis of the L1 vendor of Principal LINAC system.

Added Para under turn key:

The scope of work as per regulatory gudelines will be provided and finalised by HLL and respective AIIMS . The bidder should inspect the site and submit the requiresd structural and architectural drawings along with the bid.

Added Para: Meeting the specification latest model should be quoted.

Added Para:

General points :-

1. It will be the responsibility of the principal vendor/ supplier of system A to coordinate with the regulatory authorities to ensure statutory clearances of all the systems. The necessary papers will be however given to the firm on request by the user.

2. An institution is expected to have full HIS and PACS. This should be kept in mind for integrating the imaging, Oncology and all allied branches.

3. It is the responsibility of the principal vendor to coordinate with the other vendors and ensure that the integration/networking (including Hardware& Software etc) of all the systems are seamlessly and successfully carried out and maintained for at least 10 years.

4. Each of the participating firms of all items specifically System A and System B must provide compliance statement point by point in an excel sheet in a CD and also a hard copy duly signed.

5. The supplier of all systems shall bear all the cost of accessories and consumables required for complete installation and demonstration of equipment.

6. UPS (at least 45 minutes backup/CVT/Stabilizer or any other electrical appliances required for the functioning of all the equipments shall be provided by the supplier.

7. The supplier of all equipments including System A and System B shall bear all responsibilities and expenditures relating to insurance, transportation, custom clearance, loading, unloading of the equipment till handing over the machine to the hospital authority in complete working condition and commissioning (First Patient treatment).

8. Any item/items which is/are required for efficient and faultless running of all the functions and features of the tendered systems as per AERB requirements(wherever applicable) for at least 10 years, but not specifically mentioned din the specifications shall be supplied by selected vendor of the particular system with any additional cost.

9. Irrespective of the specification mentioned it shall be the sole responsibility of the firm quoting System A to physically inspect the site in detail, the pending job to be done at the

site where above two systems are to be installed at AIIMS as per regulatory guidelines. All the participating vendors for both the systems shall inspect the sites to access the pending work of their respective areas. The list of work (price) shall be compiled by the principal vendor in consultation with the user. The supplier of each of the systems shall coordinate with each other and the user such that their system arrives at the site only after the site is ready to accept the system and the **machines do not lie idle.**

Turnkey:-

Added Para

Principal Vendor (Supplier of System A) will be responsible for quoting for turnkey for both the systems even though the System B is not supplied by them. Principal vendor must inspect the site for both the systems and quote for the necessary turnkey requirements including civil, electrical, air-conditioning and networking/interface. This will include required hardware, software and labour.

Finishing, furnishing and interiors shall be done as per the user requirement by vendor supplying System A, conforming to the best industry standards. Layout and BOQ's shall accordingly be prepared and finalised by the principal vendor in consultation with the user.

SECTION – XI PRICE SCHEDULE

For:

B) PRICE SCHEDULE FOR GOODS TO BE IMPORTED FROM ABROAD

Read as:

SECTION – XI PRICE SCHEDULE

B) PRICE SCHEDULE FOR GOODS TO BE IMPORTED FROM ABROAD

1	2	3	4	5									6		
Item S.No	Brief Description of Goods (With make and Model)	Country of Origin	Quantity (Nos.)	Price per unit (Currency) (Pl see GIT clause 12 and 13 of SECTION II)									Unit price on DDP basis at consignee site		
				FOB price at port/ airport of Lading (Inclusive of Agency Commission)	Amount and percentage of Agency Commission	FOB Price (Excluding Agency Commission)	Insurance & Freight)	CIP by Air/Sea at the port of Entry (e)=c+d	Custom Duty amount as % of CIP (HS Code of the item and special exemption if any need to be quoted by the bidder) **	Custom Clearance & Handling charges. **	Loading/unloading inland transportation, insurance as per clause 11 of GCC & incidental cost till consignee site. **	Installation commissioning, supervision. Demonstration & training at consignee site. **	In foreign currency A= (e)	In Indian rupees B = (f)+ (g)+ (h) + (i)	Agency Commission in Indian rupees (C)
				(a)	(b	(a)	(d)	(e)	(f)	(g)	(h)	(i)	(A)	(B)	(C)

** To be paid in Indian Currency (Rs.)

Total price at consignee site

(A) In foreign currency: Column (4xA) _____(in figures and words) plus

(B) In Indian Rupees: Column (4xB) _____(in figures and words)

(C) In Indian Rupees: Indian Agent Commission Column(4XC)

Note: -

1. The tenderer will be fully responsible for the safe arrival of the goods at the consignee site in good condition as per terms of contract.
2. The bidders breakup of prices under various columns are for comparison of prices up to delivery of goods at consignee's site for tender evaluation.
3. The quoted price should be supported with original proforma invoice from the foreign manufacturers. The proforma invoice should indicate the percentage of agency commission included in the FOB prices. Indian agent to be paid in Indian Currency.
4. All the components of the DDP price will be paid by the tenderer. The purchaser will make the payment of DDP price after receipt of goods at consignee's site in good condition as per payment terms in the contract.
5. The price quoted in foreign currency in column (e) shall be converted in rupees at the rate of exchange applicable on the date of price tender opening. .

Name_____

Place:_____ **Business Address**_____

Date:_____ **Signature & Seal of the tenderer**

All other terms and conditions of the tender enquiry remain unaltered.