

Invitation of quotation
For
Neonatal Passive Cooling System for Therapeutic
Hypothermia

At

All India Institute of Medical Sciences, Jodhpur

Inquiry No.: : Admn/Gen/03-09/2018-AIIMS.JDH

Inquiry Issue Date : 27th December, 2018

Last Date of Submission : 28th December, 2018 at 05:00 PM.



All India Institute of Medical Sciences, Jodhpur

Basni Phase - II, Jodhpur – 342005, Rajasthan

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Invitation of quotation for Supply of Neonatal Passive Cooling System for Therapeutic Hypothermia at AIIMS Jodhpur

Sealed Quotations are hereby invited by the undersigned on behalf of the Director, AIIMS Jodhpur for Supply of Neonatal Passive Cooling System for Therapeutic Hypothermia for the Institute as per terms & conditions mentioned below. The filled quotations along with the entire required document must reach in the office of the undersigned on or before 28.12.2018 05.00 PM. The Envelope containing the quotation would please be sealed and super scribed as under:-

“QUOTATION FOR SUPPLY OF NEONATAL PASSIVE COOLING SYSTEM FOR THERAPEUTIC HYPOTHERMIA AGAINST INQUIRY NO. ADMN/GEN/03-09/2018-AIIMS.JDH” DUE ON 28.12.2018 05.00 PM

1. Terms & Conditions:

- A) The quotations received after this deadline & unsealed shall not be entertained under any circumstances whatsoever. In case of postal delay this Institute will not be responsible. **The offer Submitted Fax/Email shall not be considered and no correspondence will be entertained in this matter.**
- B) Quotations must be in the enclosed prescribed Performa on the letter head of the firm duly signed by the Proprietor/ Partner/ Director or their authorized representative, In case of signing of quotation by the authorized representative letter of authorization must be attached with the quotation. Quotation must be dropped in “**Quotation Box**” located in Administration Block of AIIMS, Jodhpur.
- C) Rates must be quoted in **Indian rupees** and as per the format specified taxes extra if any must be written separately.
- D) Rates must be quoted FOR basis (including Freight charges, Insurance, installation etc.)
- E) No overwriting or cutting is permitted in the rate. If found, the quotation shall be summarily rejected.
- F) The rates quoted must be valid for 60 days minimum from the date of opening of the quotation and silence of any tendered on this issue shall be treated as agreed with this condition.
- G) Becoming L1 will not be the criteria for awarding of purchase order unless the rates are reasonable & justified.
- H) RTGS/NEFT details need to be furnished by the supplier with the quotation on the letter head of supplier/firm/agency.
- I) The firm/agency may satisfy the following conditions and attach self-attested copy of the same (Mandatory) with the quotation:
- Firm shall be registered with the Government of Rajasthan / Central Government.
 - The firm shall have valid GSTIN and IT PAN.
 - **The firm should not be black listed by any Govt. Agency/Dept.**

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- J) Quotations qualified by such vague and indefinite expressions such as “subject to prior confirmation”, “subject to immediate acceptance” etc. will be treated as vague offers and rejected accordingly. Any conditional quotation shall be rejected summarily.
- K) **Delivery Period** –within30 days from Purchase order.
- L) **Liquidated Damage:** - If the supplier fails to deliver the material on or before the stipulated date, then a penalty at the rate of 0.5 % per week of the total order value shall be levied subject to maximum of 10% of the total order value.
- M) **Payment Terms:** Payment will be only after satisfactorily delivery / commissioning of material and after inspection by the AIIMS Jodhpur.
- N) **Disputes:** -In the event of any dispute or disagreement arising between the contractors and any other department of AIIMS Jodhpur with regards to the interpretation of “Terms & Conditions” of this inquiry, the same shall be referred to the Director, AIIMS Jodhpur whose decision will be final and binding upon the contractor.
- O) AIIMS, Jodhpur reserves the right to increase or decrease quantity and / or amount of work. Decision of Quantity of material in the AIIMS, Jodhpur will be final in this regard.
- P) AIIMS, Jodhpur reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of the AIIMS, Jodhpur will be final in this regard.

2. Special Terms &Conditions:

- A) **Bidder must quote the product as per specification provided in Annexure 1.**
- B) **The supplier may be asked to submit the sample of quoted make for technical evaluation, to the AIIMS Jodhpur, if required. The expenditure incurred for demonstrating the items will be borne by the supplier.**
- C) **Inspection committee will check the products thoroughly, if somehow inspection committee found any discrepancy and is not satisfied with the final product (final product should be same as reviewed ones at the institution) then AIIMS, Jodhpur has the right to reject the supply and cancel the order, and no claim for payment in this regard will be entertained**

Administrative Officer

Encl.: Annexure 1 (Specification)
Annexure 2 (Format of price bid)

Annexure 1
Specification

S.No	Item Name	Qty
1.	Neonatal Passive Cooling System for Therapeutic Hypothermia	01 Unit

Note: Supplier must be asked for Manufacturer Authorization Certificate.

Technical Specifications -

1. Neonatal Cooling Device based on advanced save Phase Change Material (PCM) technology.
2. Should be able to cool the baby up to 33[^]c.
3. Should use a cascade system of Phase Change materials- Combination of save FS-29 PCM and save FS-21 PCM.
4. Should have specially designed Conduction mattress for better conduction of heat from the baby to the PCM.
5. Insulated cradle should give enough protection for the PCM to last for the complete 72 Hours treatment process.
6. Both save FS-29 PCM and save FS-21 PCM should not take more than 6-8 hours to freeze in the refrigerator and are then ready for use.
7. Both save FS-29 PCM and save FS-21 PCM should be able to stored in the bottom part of the refrigerator.
8. The whole device should be able to placed in the bassinet of a regular radiant warmer which measure at least 66x47 cm.
9. Temperature indicator should be provided on the save FS-29 units. The temperature indicator should change color as the temperature changes and the temperature display should be from 23-31[^]c.
10. The temperature indicator should be usable for at least one year from the date of first use.
11. The PCMs should have the capability to have been manufactured to last 500 times from the date of first use.
12. At least six units of Save FS-29 and the two units Save FS-29 of should be provided along with one device. Three units are used at a time and three units are standby to avoid any possible risk.
13. Four reusable rectal temperature probes should be provided to measure infant's temperature and should be compatible with our existing multipara monitors.
14. It should be European CE certified.

[On the letterhead of firm]

ANNEXURE "2"
PRICE BIDFORM

To,

Administrative Officer,
AIIMS, Jodhpur.

Dear Sir,

1. I/We Submitted the quotation for Enquiry No. "QUOTATION FOR SUPPLY NEONATAL PASSIVE COOLING SYSTEM FOR THERAPEUTIC HYPOTHERMIA AT AIIMS AGAINST THE INQUIRY NO. Admn/Gen/03-09/2018-AIIMS.JDH" DUE ON 28.12.2018 05.00 PM for Neonatal Passive Cooling System for Therapeutic Hypothermia at AIIMS Jodhpur".

2. I/We thoroughly examined, understood and accepted terms & conditions given in the enquiry document, failing which my quotation will be rejected out rightly.

3. I/We hereby offer to supply at the following rates.

S. No	Particular	Qty	Quoted Make	Price/ Unit Exclusive of TAX (INR)	GST/ VAT/ CST/ST/ Other taxes	Price/ Unit Inclusive of TAX (INR)	Total Amount Inclusive of TAX (INR)	MRP
1.	Neonatal Passive Cooling System for Therapeutic Hypothermia	01 Unit						

Note:

1. The supplier may be asked to submit the sample of quoted make for technical evaluation, to the AIIMS Jodhpur, if required. The expenditure incurred for demonstrating the items will be borne by the supplier.

Date _____

Place _____

(Signature of Authorized Person) _____

(Name) _____

Name of Firm/Company/Agency _____

Phone No. _____

Email: _____