E-TENDER NOTICE FOR supply & installation of Skill Lab Equipment for GGS Medical College and Hospital

# **E-Tender Form**

# (E-Tender enquiry for Supply and Installation of *Skill Lab Equipment* in the GGS Medical College & Hospital, Faridkot

Tender Notification No :	To be provided by the E-procurement portal of the Govt. of Punjab.
Requirement	E-Tender notice for supply and Installation of Skill Lab Equipment
Cost of the tender document:-	Rs.2360/- (Non-refundable) to be deposited through Online Mode Only in favor
	of Registrar, Baba Farid University of Health Sciences, Faridkot.
Tender Processing Fee	To be charged by Govt. of Punjab as per its norms. (Non- refundable)
Earnest Money Deposit (EMD)	As per scope of supply. The Earnest Money Deposit must be submitted in the shape of Online Payment in favor of Registrar, Baba Farid University of Health Sciences, Faridkot on or before due date (Refundable to the Non-successful bidders, without any type of interest or other charges). In case of successful tenderer, it will be returned after receipt of the security amount as per tender terms and conditions.
Date of start of downloading of tender	<b>28.12.2021</b> from the website of the Punjab Government i.e.
documents	https://eproc.punjab.gov.in
Website for downloading of the tender document:-	https://eproc.punjab.gov.in However, the details may also be obtained from the University website i.e. <u>www.bfuhs.ac.in</u> and college website <u>www.ggsmch.org</u>
Last date for downloading of the tender document:-	05.01.2022 up to 12.30 pm
Last date & time for uploading of the	<b>05.01.2022</b> up to 1.30 pm (through online mode only)
tender documents:-	03.01.2022 up to 1.50 pm (through online mode only)
Date, time and venue for opening of the Technical Bids	By the next day from the last date of submission of tenders (by 5:00 p.m.) on the e- procurement portal of the Govt. of Punjab. However the bidder or their authorized agents / representative may attend the tender opening process at the University Procurement & Facility Department, Baba Farid University of Health Sciences, Faridkot on the prescribed time and date.
Date, time and venue for opening of the Price Bids	The opening date of financial bids of the technically qualified bidders will be informed on the university web site, e- procurement portal of the Govt. of Punjab. However the bidder or their authorized agents / representative may attend the tender opening process at the University Procurement & Facility Department, Baba Farid University of Health Sciences, Faridkot on the prescribed time and date. The University authorities will have right to decide any other date and time for the opening of the Financial bids.
Who can be contacted for obtaining	Principal,
more information about the tender.	Guru Gobind Singh Medical College & Hospital, Sadiq Road, Faridkot. 01639-251111, 98773-65600, 94655-13138
	E-mail: procurement@ggsmch.org ggsmc@punjab.gov.in, (on all working days from 9.00 a.m. to 5.00 p.m.)
	(on an working days from 9.00 a.m. to 5.00 p.m.)

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### **NOTICE INVITING E-TENDER**

E-Tenders are invited on or before 05.01.2022 from manufacturers or their authorized agents/distributors for supply and Installation of Skill Lab Equipment required at GGS Medical College & Hospital, Faridkot. The tender document containing detailed terms & conditions may be downloaded from the E-procurement website of the Punjab Government i.e. <u>https://eproc.punjab.gov.in</u> and its detail may also be seen at the University website www.bfuhs.ac.in and college website www.ggsmch.org

#### **TERMS AND CONDITIONS:-**

- 1. The tender must be uploaded on or before the last date/ time of the submission of tender.
- 2. The Tender processing fee should be submitted through Net Banking/Credit card/Online mode only and as per Punjab Govt.
- 3. The <u>tenders will be opened online</u> by the next day on the website i.e. https://eproc.punjab.gov.in at the, Baba Farid University of Health Sciences, Faridkot. The bidder(s) shall be at liberty to be present, in person or through their authorized representative(s) at the time of opening of the tender as specified in the Tender Notice. In case the authorized representatives are to be present, they must furnish the authority letter from the bidder (s), on whose behalf they are representing otherwise they will not be allowed to participate in the process of opening of tender.
- 4. The Price bids of technically qualified bidders will be opened on the website i.e. https://eproc.punjab.gov.in at, Baba Farid University of Health Sciences, Faridkot. In case of any change of date and time it will be notified to the technically qualified bidders through E-mail/telephone.
- 5. The Registrar/Principal reserves all rights to accept or reject any or all the tenders without assigning any reason.

Registrar

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### **INSTRUCTIONS/ GUIDELINES TO THE TENDERERS**

- 1. The bidder needs to register himself/ herself on https://eproc.punjab.gov.in the bidder is also required to obtain Class III digital signature certificates to complete this process.
- 2. Please download the Tender document from the website of e-procurement of the Govt. of Punjab https://eproc.punjab.gov.in Please fill all the relevant blanks on all the pages of the tender document sign along with a stamp/ seal all pages and then a scanned copy of the same may be uploaded on the website at the time of submission of the tender document.
- 3. <u>It should be clearly noted that this tender will be accepted though e-tender mode</u> <u>only.</u> The tenders submitted through offline mode will not be accepted under any circumstances.
- 4. **Tender Fee :** as per Govt. and should be deposited through online mode only
- 5. **Tender Processing Fee:** as per Punjab Govt. (non-refundable) may be deposited through online mode i.e. Net Banking/ Credit Card/ Debit Card only. The tender processing fee will not be accepted through any other mode.
- 6. **Refundable Earnest Money Deposit (EMD): EMD** to be deposited online mode only in favor of Registrar Baba Farid University of Health Sciences, Faridkot.
- 7. <u>Upload</u> signed copy of Technical Bid Compliance Statement (Annexure-I).
- 8. <u>Upload</u> an affidavit regarding Non-Black listing as per proforma given at **Annexure-II** duly attested by an Executive Magistrate or a Notary Public.
- 9. In case the Bidder is Authorized Supplier/Agency, the Authorization Certificate as per the Format given at **Annexure-'III'** (duly filled in), <u>to be uploaded</u>.
- 10. In case the Bidder is Authorized Supplier/Agency, an undertaking/certificate issued by their Principal Manufacturer/Supplier that in case dealership/distributorship is withdrawn after supply of the Instruments then the Principal Manufacturer/Supplier will be responsible for Guarantee/Warranty/AMC/CMC of the Equipments/Instruments. (Annexure 'IV'), to be uploaded.
- 11. **Upload** details of Bank Account for refund of EMD (Annexure V).
- 12. In addition to this, following documents are to be uploaded with Technical Bid:
  - i) Details of registration as Company /Firm/ Establishment.
  - ii) Standard Certification must be uploaded.
  - iii) Copy of Certificate of Registration for service Tax/TIN/TAN/PAN/VAT.
  - iv) A certificate from C.A. regarding Annual Turnover with Balance Sheet for the last 3 (three) financial years i.e. 2017-18, 2018-19 & 2019-20.
  - v) Copy of the IT Returns for three financial years i.e. 2017-18, 2018-19 & 2019-20.
- 15. Price should be quoted and <u>uploaded</u> only in Excel Sheet proforma at Annexure-'VI'.

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### E-TENDER NOTICE FOR supply & installation of Skill Lab Equipment for GGS Medical College and Hospital

Sr.	Name of Equipment	Approx. Qty. Reqd.	Earnest Money to be Submitted (in Rs.)
1	Multivenous Pediatric iv cannulation	2	3,000/-
2	Multivenous Adult iv cannulation	6	9,000/-
3	IM injection training	6	6,000/-
4	Adult Catheterization simulator	6	13,000/-
5	Skin Suturing simulator	5	5,000/-
6	Breast Examination Simulator	2	2,000/-
7	Obstetric examination with IUCD	2	6,000/-
8	Gynaecological examination simulator	2	6,000/-
9	Episiotomy Simulator	4	3,000/-
10	Neonatal Resuscitation High Fidelity	1	6,000/-
11	Neonatal Resuscitation Low Fidelity	6	4,000/-
12	Neonatal Resuscitation Intubation Head	2	2,000/-
13	Pediatric Resuscitation Intubation Head	3	3,000/-

### SCOPE OF SUPPLY

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14	Pediatrics Resuscitation Trainer	4	12,000/-
15	AED Trainer	6	4,000/-
16	BLS Trainer Low Fidelity Full Body	6	18,000/-
17	Adult Resuscitation Intubation Head	4	4,000/-
18	Full Body Advance general Procedures manikin with simulated patient monitor	1	30,000/-

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### **TECHNICAL SPECIFICATIONS**

#### <u>Specifications for the Simulation Equipment for the Proposed Skill Laboratory at</u> <u>GGSMC, Faridkot</u>

#### General specifications desired for all Mannequins:

- 1. The colour of the mannequin should be Asian simulating Indian babies/adult in medium skin tones.
- 2. The material of the mannequin should be of polyvinyl and silicone rubber, free from any carcinogenicagents.
- 3. The texture of the mannequin should be soft and smooth and close to the feel of baby/adult skin as relevant. The texture must be friction free to demonstrate the desired procedure.
- 4. The internal parts of mannequin must be realistically sculpted, anatomically accurate and feel must be smooth/resilient/bony as relevant and suitable for simulation.
- 5. The mannequins must be portable and any fittings used in mannequins must be of aluminium or polycarbonate or equivalent.
- 6. The mannequin's durability must be of minimum 5years.
- The material of the mannequin should withstand extremes of temperature (up to + 50 degree Celsius)
- 8. The supplier must ensure manufacturer's warranty/guarantee for the specifications and also against manufacturing defects.
- 9. The manufacturing units must have an internal system of quality control and supplier should produce the process and certificate from the manufacturers.
- 10. The supplier will be responsible for service, maintenance, replacement, etc. against any complaints up to the satisfaction of the users, irrespective of the location of manufacturing unit.
- 11. The mannequin should have a module for training including objectives, methods and assessment.

- 12. The Principal Company should have technical person based in the region along with educational support and training expert.
- 13. The principal manufacturer must have an educational person who can help integrate curriculum with the purchased mannequin and Simulators.
- 14. Bidder/Manufacture should have prior experience in setting similar projects in premier institute
- 15. Should be ISO certified
- 16. Bidder/Manufacture should have prior experience in setting similar projects in premier institute

S No	Name	Specifications
1.	Multivenous	The Pediatric Multi-Venous IV Training Arm Kit should be a complete IV therapy
	Pediatric iv	training kit which includes a full-size right arm with replaceable skin and veins
	cannulation	designed for peripheral intravenous therapy.
		The arm should be/have
		Anatomically accurate full pediatric arm model
		Multiple injection sites for IV insertion
		• Dorsal veins of hand (at least 3) including Median vein, Basilic vein, Cephalic vein
		• Realism of the human pediatric arm in appearance, feel and resistance at puncture sites
		• Venipuncture possible in the antecubital fossa and dorsum of the hand
		• Palpable veins which enable site selection and preparation
		• Infusible veins allowing peripheral therapy with IV bolus or push by injection method
		• Replaceable skin and venous system which should ensure longevity of model
		The model should include following accessories:
		• Pediatric Multi-Venous IV Arm with one extra Replacement Skin, and Multi-Vein
		System each
		Blood concentrate three packets
		Blood Bag with Tubing and Connector Clamp & Hook
		• 10 Syringes Carry Case
		Mannequin Lubricant
2.	Multivenous	The Adult IV Training Arm Kit should include a full-size right arm with replaceable
	Adult iv	skin and veins designed for peripheral intravenous therapy.
	cannulation	The arm should be/have
		Anatomically accurate full arm model
		Rotation at deltoid for easier anterior and posterior vein access
		Should have Multiple injection sites for IV insertion
		<ul> <li>Dorsal veins of hand (minimum 3 in number) Median Vein, Basilic Vein, Cephalic Vein</li> </ul>
		<ul> <li>Realism of the human adult arm in appearance, feel and resistance at puncture sites</li> </ul>
		<ul> <li>Palpable veins should enable site selection and preparation</li> </ul>
		<ul> <li>Subcutaneous and intramuscular injections may be performed in the deltoid muscle</li> </ul>
		<ul> <li>Infusible veins which allow peripheral therapy with IV bolus or push injection</li> </ul>
		<ul> <li>Replaceable skin and vein system which should ensure longevity of model</li> </ul>

3.	IM injection training Adult Catheterization simulator	<ul> <li>Should articulate to other adult manikins         Adult Multi-Venous IV Training Arm Kit must include:         Adult Multi-Venous IV Arm, 01 Replacement skin and multi-vein system each, 03         Blood concentrate, 01 Blood Bag with Tubing and Connector, 01 Clamp and Hook in         the carry case, 5 Syringes, 01 Manikin Lubricant, 01 Carry Case         It should be ISO certified         The IM injection simulator should be/have:         The soft tissue injection pad should have been designed for practicing intradermal,         subcutaneous and intramuscular tissue injection techniques.</li>         The tissues should feel soft and warm to the touch         The Injection Trainer should have multiple tissue layers representing the epidermis,         dermis, fat and muscle layer, and can easily attach to an arm or thigh to help teach         professional-to-patient communication         The epidermis layer should peel back to quickly release subcuticular liquid.         It should be latex free         It should also have straps for hybrid simulation on standardized patient to teach         communication         It should also have straps for hybrid simulation on standardized patient to teach         communication intramuscular injection         Maintaining aseptic technique, the proper angle and depth of needle insertion         It should be ISO certified         Manikin simulator must have a life-size adult female pelvis with interchangeable male         genitalia.         Urologic and rectal access gastrointestinal care procedures must be practice-able on         manikin,         Manikin should have realistic articulation which enables proper positioning for         Manikin should have realistic articulation which enables proper positioning for         Manikin should have realistic articulation which enables proper positioning for         Manikin should have realistic articulation which enables proper positioning for         Manikin should have realistic articulation which enables proper positioni</ul>
		<ul> <li>indwelling catheter insertion, care, irrigation and removal must be practice able on manikin genitalia when used with urinary connectors and reservoir</li> <li>Enema administration can be facilitated using fluid for realistic return when manikin genitalia is used with anal connectors and colon reservoir</li> <li>Manikin abdominal plate must have single plug valve and interchangeable stoma site</li> <li>Simulation of cystostomy tube care and urinary diversion stoma care must be practiced on manikin.</li> </ul>
		<ul> <li>Reservoir can be pressurized during urinary catheterization procedures</li> <li>Bilateral thigh, dorsal gluteal, and ventral gluteal IM injection must be practice able on manikin</li> <li>It should be ISO certified.</li> <li>Catheterization and Enema Trainer must include: Adult female pelvis with upper thighs Male and female genitalia with six (6) anal and urinary connectors Carry Case</li> </ul>
5.	Skin Suturing simulator	The model should have following features: 1. Soft skin allowing wound stitching multipletimes 2. Scope of new wound creation and suturing

		3. Should be Light and compact
		4. Should have Transparent structures to allow the trainer to observe and access
		traineecompetence
		5. Mechanism or system to represent tissuestrength
		6. Parallel knotting tubes should be elastic for a realistic tissueresponse
		7. Should be Latexfree
		8. 2 perioperative openings represented by: Small, shallow fixed cylinder for tying
		in a smallopening
		9. Large, deep removable cylinder, reversible for angled abdominal and
		gynecological depthtying
		10. Skills to be gained using this model: One-handed reef knot technique,
		Instrument tie, Surgeon's knot slip knot, tying in a small opening, tying at depth
		vertically in a large opening, Tying at depth, at an angle, in a largeopening
(	Durant	11. It should be ISOcertified
6.	Breast Examination	1. Manikin should be having latex free material and also having soft tissues for real like look
	Simulator	2. Manikin should be wearable
	Simulator	3. Hard torso should be supplied with manikin as a standard package for bench top use
		4. The pathologies should be inter changeable and should be
		placeable in various predetermined location points
		5. Clavicular & axilla pads should be there for lymph node placement
		6. OSCEs should be able to be performed
		7. Skills which should be gained:
		- Clinical breast examination techniques
		- Professional-to-patient communication
		- Identification of anatomical landmarks & lymph nodes (axillary, supra &
		infraclavicular)
		- Location & diagnosis of pathologies
		8. List of Pathology accessories should be supplied as a standard package:
		- Carcinomas: 2 cm, 3 cm, 5 cm, cyst, fibrocystic disease, fibroadenoma
		- Simulated carcinoma & fibroadenoma
		- Benign cyst
		- Accompanying carry case
		9. The product should be ISO certified
7.	Obstetric	1. Delivery manikin should be capable to provide training for normal delivery.
	examination with	2. Should have manual mechanical birthing system to enable the user to control the rotation
	IUCD	and speed of fetus delivery etc.
		3. The abdominal palpation mannequin should have an articulating full-term fetus with
		palpable fontanelles, spine, shoulders, elbows, and knees with adaptors to fit with manual
		birthing system.
		4. Should be versatile to change the position of the fetus during the process of birth
		<ul><li>including descend, flexion, extension, internal and external rotation, restitution.</li><li>5. The abdominal palpation mannequin should have upper and lower inflatable cushions</li></ul>
		with independent inflating devices in the abdominal part of the mannequin
		Lower cushion when inflated should raise the fetus to desired position
		• Upper cushion when inflated should rease the redus to desired position
		of pregnancy
	I	

<ul> <li>6. Shall have adaptive birth canal to demonstrate corp prologase</li> <li>7. Should have features to demonstrate corp prologase</li> <li>8. Shall allow demonstration and practice of placenta previa</li> <li>9. Should have cervical dilatation attachment for closed os, 4cm, 6cm, 8cm and fully dilated cervix</li> <li>10. Should have features simulating/represent conditions of the cervix and vagina prior to labor, during labor and at birth in a primgravid woman</li> <li>11. The abdominal mannequin should be able accommodate the fetus in vertex, breech, or transverse position</li> <li>12. The abdominal mannequin should have the facility to accommodate the fetus of different gestationalage, demonstrate vertex / Breech / transverse position delivery, and attach the perineum to demonstrate the priotomy repair.</li> <li>13. List of training scenarios which should be three: <ul> <li>Normal delivery</li> <li>Abnormal labour and other complicated deliveries</li> <li>IUCD Insertion</li> <li>Bleeding</li> <li>Uterine masage</li> <li>Uterine compression</li> <li>Uterine compression</li> <li>Uterine masage</li> <li>Uterine masage</li> <li>Uterine the manikin should be lates. Free</li> </ul> </li> <li>15. Digital examination and use of speculum should be possible in mannequin</li> <li>16. Water based lubricant should be soft for realistic antomical examination</li> <li>17. Perineum and labia should be soft for realistic antomical examination</li> <li>18. List of raccessories which should be three:</li> <li>Detachable Manual mechanical birthing system with mounting flange</li> <li>Ome fully articulating fetal baby with adaptors to fit with manual birthing system</li> <li>Elevating existion for Loopoid manocurves</li> <li>6 detachable Valva</li> <li>9 vulvar inserts</li> <li>6 placentabe</li> <li>9 uvlari serts</li> <li>6 placentabe</li> <li>9 uvlari serts</li> <li>6 placentabe Valva</li> <li>9 vulvari inserts</li> <li>6 placentabe Valva</li> <li>9 vulvari inserts</li> <li>6 placentabe Valva</li> <li>9 uvlari serts</li></ul>	<b></b>	
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<ul> <li>9. Should have cervical dilatation attachment for closed os, 4cm, 6cm, 8cm and fully dilated cervix</li> <li>10. Should have features simulating/represent conditions of the cervix and vagina prior to labor, during labor and at birth in a primgravida woman</li> <li>11. The abdominal mannequin should be able accommodate the fetus in vertex, breech, or transverse positions.</li> <li>12. The abdominal mannequin should have the facility to accommodate the fetus of different gestationalage, demonstrate vertex / Breech / transverse position delivery, and attach the perineum to demonstrate the episiotomy repair.</li> <li>13. List of training scenarios which should be there: <ul> <li>Normal delivery</li> <li>Abnormal labour and other complicated deliveries</li> <li>IUCD Insertion</li> <li>Bleeding</li> <li>Utrine bladder catheterization</li> <li>Uterine compression</li> <li>PPH and communication training</li> </ul> </li> <li>14. Material of the manifus hould be latex-free</li> <li>15. Digital examination and use of speculum should be possible in mannequin</li> <li>16. Water based lubricant should be soft for realistic anatomical examination</li> <li>17. Perineum and labia should be soft for realistic anatomical examination</li> <li>18. List of accessories which should be there:</li> <li>Detachable Manual mechanical birthing system with mounting flange</li> <li>One fully articularing fetal baby with adaptors to fit with manual birthing system</li> <li>Elevating cushion for Leopold manoeuvres</li> <li>6 detachable Vulva</li> <li>9 vulvar inserts</li> <li>6 placentas</li> <li>9 unbilical cords</li> <li>One 48hour postpartum uterine activity assembly</li> <li>One opstpartum preincal insert</li> <li>Reusable episiotomy?</li> <li>10 - 12 Weeks Pregnant</li> <li>14 - 16 Weeks Pregnant</li> <li>2 sets cervical dilutation attachment for closed os, 4cm, 6cm, 8cm and fully dilated cervix</li> </ul>		
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<ul> <li>17. Perineum and labia should be soft for realistic anatomical examination</li> <li>18. List of accessories which should be there: <ul> <li>Detachable Manual mechanical birthing system with mounting flange</li> <li>One fully articulating fetal baby with adaptors to fit with manual birthing system</li> <li>Elevating cushion for Leopold manoeuvres</li> <li>6 detachable dilating cervices</li> <li>6 detachable Vulva</li> <li>9 vulvar inserts</li> <li>6 placentas</li> <li>9 umbilical cords</li> <li>One postpartum uterine activity assembly</li> <li>One postpartum perineal insert</li> <li>Reusable episiotomy repair module (set of 5 including median tears, mediolateral tears and standard</li> <li>mediolateral episiotomy)</li> <li>10 – 12 Weeks Pregnant</li> <li>14 – 16 Weeks Pregnant</li> <li>2 sets cervical dilatation attachment for closed os, 4cm, 6cm, 8cm and fully dilated cervix</li> <li>Manikin should come with carry bag</li> </ul> </li> </ul>		15. Digital examination and use of speculum should be possible in mannequin
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· •		
19. ISO certification should be there		• Manikin should come with carry bag
8. Gynaecologicale Manikin should be used for accurate anatomical and tactile representation of the female pelvis	8. Gynaed	ogicale Manikin should be used for accurate anatomical and tactile representation of the female pelvis

	vomination	for diagnosis of nothalogies and chnormalities
	xamination	for diagnosis of pathologies and abnormalities.
	simulator	Different pelvic modules should be changeable during the training
		1 Abdominal wall should be removable and should be able to make palpation
		2. Material of the manikin should be latex-free
		3 Digital examination and use of speculum should be possible
		4. Water based lubricant should be supplied for examination
		5 Perineum and labia should be soft for realistic anatomical examination
		6. Interchangeableuterinemodulesshould beavailablewith different complications
		7. Different modules should include anus and lower bowel
		8. List of modules should be part of standard set of manikins:
		<ul> <li>Normal Nulliparous Cervix</li> </ul>
		<ul> <li>Large Fibroid – Nulliparous Ectropion Cervix</li> </ul>
		- Small Fibroid – Nulliparous Polyp Cervix
		- Ovarian Cyst – Multiparous Cervix
		- Retroverted - Multiparous Cervix
		9. List of skills to be trained on manikin:
		- Recognition of perineal and pelvic anatomy including bony landmarks
		- Digital vaginal examination
		- Bi-manual examination
		- Cervical smear procedure including use of speculum
		- Digital rectum examination
		10. Carry case should be supplied
		11. ISO certification should be there
9.	Episiotomy	Should be able to allow practice for episiotomy suturing simulation
9.	Simulator	standardmediolateral episiotomy incision, and median incision can be selected
	Sillulator	Tension should be adjustable
		Simulator should be mounted on a plastic sturdy framework
		The simulator should have a real time feel
10	No su stal	Should be ISO certified
10.	Neonatal	1. The model should be used for practicing cardiopulmonary resuscitation (CPR)
	Resuscitation	for a neonate
	High Fidelity	2. The model should be realistic and look like a real term neonate
		3. The model should provide thoracic movement by positive pressure ventilation
		with the help of bag and mask.
		4. Should have following features:
		A. Airway Management
		i. Intubation Head - realistic life-size neonatal intubation trainer with a flexible
		tongue, arytenoid cartilage, epiglottis, vocal cords, trachea, esophagus, and
		simulated lungs
		ii. Positioning the newborn to simulate opening the airway via head tilt, chin lift
		or jaw thrust
		iii. Should provide thoracic movement by positive pressure ventilation with the
		help of self-inflating bag or Flow-inflating bag or T-Piece Resuscitator)
		iv. Airway management by using laryngeal mask and intubation tube
		v. Should allow one-sided lung intubation
		vi. Orogastric tube insertion
		vii. Stomach distension (when ET is misplaced)
		viii. Suctioning (of the nares, nasopharynx, oral cavity and lungs via an ET tube)

		ix. Meconium module for suction removal ( <b>optional</b> )
		x. Realistic rise and fall of the chest with ventilation
		xi. Bilateral and unilateral (with mainstem intubation) chest rise and fall with
		mechanical ventilation
		xii. Pneumothorax – needle thoracentesis left mid-axillary
		B. Cardiac Features
		i. Manual chest compression at appropriate depth (1/3 Antero Posterior) and
		force
		ii. Umbilical pulse – variable via manual pulse bulb
		iii. Determination of heart rate by measuring the beat at the base of umbilical
		cord.
		C. Circulation Features
		i. Umbilical vein/artery catheterization via patent umbilicus
		ii. IO access in left and right lower leg, tibial tuberosity and medial malleolus
		5. The model should be made of silicon rubber and should have similar
		appearance like human neonate.
		6. It should be made of high-quality material that ensure long life.
		7. The head should be rotatable and extendable.
		8. It should be maintenance free
		9. Should be supplied with the following: Newborn Manikin, Meconium Module
		Set(optional), Replaceable Umbilical Cord (1) and clamp, IV Bag Connector Tube,
		Pulse Bulb (manual umbilical pulse), Airway Lubricant, Blood Concentrate, Baby
		Powder, IO Fill/ Empty Syringe, silicon spray and carrying Case.
		10. Original manual and literature to be supplied
		11. The equipment should be USFDA or European CE approved.
		12. Rates of consumables and accessories if any should be quoted separately in the financial bid.
		13. Alarms (Optional) for wrong performance: Jaw alarm when excessive pressure by the laryngoscope on the upper jaw activates an acoustic signal.
		Stomach alarm: activated if an endotracheal tube is placed incorrectly in the
		oesophagus.
11.	Neonatal	ocsopnitgus.
11.	Resuscitation	1. The model should be used for practicing cardiopulmonary resuscitation (CPR)
	Low Fidelity	for a neonate
		2. The model should be realistic and look like a real term neonate
		3. The model should provide thoracic movement by positive pressure ventilation
		with the help of bag and mask.
		4. Should have following features:
		A. Airway Management
		i. Head - realistic life-size neonatal head with a flexible head
		ii. Positioning the newborn to simulate opening the airway via head tilt, chin lift
		or jaw thrust
		iii. Should provide thoracic movement by positive pressure ventilation with the
		help of self-inflating bag or Flow-inflating bag or T-Piece Resuscitator)
		iv. Airway management by using shoulder roll
		x. Realistic rise and fall of the chest with ventilation

		B. Cardiac Features
		i. Manual chest compression at appropriate depth ( $1/3$ Antero Posterior) and
		force
		ii. Umbilical pulse – variable via manual pulse bulb
		iii. Determination of heart rate by measuring the beat at the base of umbilical
		cord.
		C. Circulation Features
		i. Umbilical vein/artery catheterization via patent umbilicus
		5. The model should be made of silicon rubber and should have similar
		appearance like human neonate.
		6. It should be made of high-quality material that ensure long life.
		7. The head should be rotatable and extendable.
		8. It should be maintenance free
		9. Should be supplied with the following: Newborn Manikin, Meconium Module
		Set(optional), Replaceable Umbilical Cord (1) and clamp, Pulse Bulb (manual
		umbilical pulse), Airway Lubricant, silicon spray and carrying Case.
		10. Original manual and literature to be supplied
		To. Original manual and interature to be supplied
12.	Neonatal	
12.	Resuscitation	1. The Neonatal Intubation Head should provide intubation skills as on a new
	Intubation Head	born baby.
	intercution moud	2. It should be robust and realistic and allows undertaking training that is directly
		transferable to the clinical setting.
		_
		3. Should face upwards for standard intubation.
		4. There should be realistic movement of the head, cervical spine and jaw
		simulating relevant anatomical changes during intubation.
		5. Should allow the user to practice oral and nasal intubation
		6. Should allow the user to practice bag and mask ventilation
		7. If the intubation or bag and mask ventilation is done correctly, the lungs should
		expand after air is pumped into the tube or mouth respectively
		8. It should have following features:
		i. Head and shoulders of newborn baby
		ii. Anatomical landmarks including mouth, nostrils, oropharynx, tongue,
		epiglottis, larynx, vocal cords, trachea
		iii. Simulated lungs
		9. It should be mounted on a sturdy base
		10. It should be made of high quality material that ensures long life.
		11. The head should be rotatable and extendable.
		12. It should be maintenance free
		13. Should be supplied with the following
		i. Neonate Airway Management Trainer 1
		ii. Artificial lungs: 2
		iii. Transparent mounting base: 1
		iv. Carrying case: 1
		14. Original literature to be supplied
		15. Rates of consumables and accessories if any should be quoted separately in

		the financial bid.
		17. Alarms (Optional) for wrong performance: Jaw alarm when excessive
		pressure by the laryngoscope on the upper jaw activates an acoustic signal.
		Stomach alarm: activated if an endotracheal tube is placed incorrectly in the
		oesophagus.
		18. Should allow the user to practice insertion of laryngeal mask airway in a
		neonate (Optional).
3.	Pediatric	The Pediatric Intubation Trainer should be a life-like reproduction of a six-year-old
	Resuscitation	child's torso designed to teach pediatric airway management skills.
	Intubation Head	- Realistic pediatric life-size intubation trainer with a flexible tongue, arytenoid
		cartilage, epiglottis, vallecula, vocal cords, trachea, esophagus, and simulated lungs
		- Head can be tilted forward, backward, or rotated 90 degrees to either side
		- Anatomically accurate airway allows sizing and insertion of various airway adjuncts
		- The following skills can be practiced:
		- Oral Intubation
		- Nasal Intubation
		- Oropharyngeal Airway
		- Nasopharyngeal Airway
		- Basic Airway Management
		- Suctioning Techniques
		- Bag-Valve Mask Ventilation
		- Realistic rise and fall of the chest
		- Closed chest compressions
		Pediatric Intubation Trainer Includes:
		Lubricant
		Clothing
		Carry Case
14.	Pediatrics	The manikin should be realistic in appearance with half body child torso.
4.	Resuscitation	<ul> <li>The manikin should be realistic in appearance with nan body clinic torso.</li> <li>The manikin should have a soft nose which can be occluded using the nose</li> </ul>
	Trainer	pinch technique.
	Trainer	
		• The manikin should be able to facilitate a head tilt/chin lift technique to open the simulation and the simulation is to facilitate a manified is the structure of the simulation of the simul
		the airway and have an articulating jaw to facilitate a modified jaw thrust manoeuvre.
		• The manikin should have visible chest raise and wireless feedback during
		ventilation.
		• The manikin should have a disposable lower airway with an integral one-way
		valve.
		• The manikin should have a compression clicker which provides audible
		feedback.
		Feedback
		The pediatrics BLS Torso should be able to connect with wireless tablets, smart
		phones and/or LCD wired feedback providing both student and instructor feedback.
		Wireless Instructor Feedback –
		Software shall be available for free downloads as many times as required providing
		real-time wireless feedback on compressions and ventilations
		• It shall be able to monitor and connect to get the live feedback from more than 5
		individual BLS Torso mannequins simultaneously for group training.
		It shall help provide improvement tips based on CPR performance
		Commenced and and allow time and that commenced for the
		<ul> <li>Compression depth, rate release, time and chest compression fraction</li> </ul>

		<ul> <li>Wireless Student Feedback –</li> <li>Wireless Student Feedback Software shall also be available for free downloads as many times as required providing real-time wireless feedback on compressions and ventilations, students can view and monitor their own performance for the following points</li> <li>Compression Depth and Rate</li> <li>Incomplete Release</li> <li>Ventilation volume <ul> <li>It also provides with a summative feedback on the:</li> <li>Overall CPR score</li> <li>Improvement suggestions</li> <li>CPR duration</li> </ul> </li> </ul>
15.	AED Trainer	<ul> <li>It should be able to teach and educate a lay person and healthcare provider the effective use of an automated externaldefibrillator</li> <li>It should be latest AHAGuidelines-compliant</li> <li>It should have flexible configuration with more than 7 real world scenarios which should be recognized by internationally responderprogram</li> <li>Trainer should comply latest AHA and ERC latestguidelines</li> <li>Language of voice prompt should be change by touchbutton</li> <li>It can be controlled and operated through optional remote-controlleddevice</li> <li>Should be used for adult and pediatrics trainingboth</li> <li>Weight: Less than 900grams</li> <li>Ruggedness:         <ul> <li>10 cm drop without operationinterruption</li> <li>It should be ISOcertified</li> <li>Battery:</li> <li>Type: AA Alkaline (anybrand) with life more than 10 hours</li> </ul> </li> </ul>
16.	BLS Trainer Low Fidelity	ADULT CPRMANNEQUIN <ul> <li>Full Body mannequin</li> <li>AdultCPRmannequinshouldhaverealistic featurestodemonstrateopeningofairway,headtilt/chinliftand jaw thrusttechniques.</li> <li>Adult CPR mannequin should have disposableairways</li> <li>Adult CPR mannequin should have removable, reusablefaces</li> <li>AdultCPRmannequinshould haveamechanismwhichconfirmscorrectcompressiondepth, rate, incomplete release</li> <li>Chest rise should be seen with correct ventilations</li> <li>Anatomically correct landmarks and sternal notch should allow the student to practice identification of all anatomical landmarks relevant to adult CPR.</li> </ul>

<u> </u>	
<ul><li>Adult CPR man</li></ul>	have compression springfor consistent resistance
<ul> <li>AdditionalAcce</li> </ul>	
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<ul> <li>AdditionalAccessories:</li> </ul>	
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	anikin designed to teach all skills from basic paties
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signs monitor.	
	n administration, and removal
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	man catheter openings (placement only)
	ateralis IM injections possible
<ul> <li>Insertion, securing</li> <li>Tracheostomy care</li> <li>Various oxygen de</li> <li>NG tube insertion,</li> <li>Gastric lavage and</li> <li>Nasoenteric and es</li> <li>Subclavian, jejunce</li> <li>Manually generated</li> </ul>	dotracheal tubes actioning es on administration, and removal nsertion, care, and removal

- Full range of motion for realistic	patient handling
- Interchangeable stomas depict co	lostomy, ileostomy and suprapubic cystotomy
- Colostomy may be irrigated and	will retain an indwelling catheter
- Fingers and toes are spread to all	ow bandaging
Interchangeable Male and Fem	ale Genitalia
- Complete urinary cathet	erization
- Can beattached to urinat	ry and colon reservoirs via connector valves
- Female genitalia capable	
- Will retain indwelling o	
	be performed using fluid for realistic return
· · ·	n, fluid may be used for realistic return
	natural resistance felt when catheterizing
- Anal valves simulate the	-
Circulatory Skills and IV Drug	*
	with replaceable skin and infusible vein system
allows peripheral intravenou	
- Venipuncture possible in the antecubi	
<ul> <li>Accessible veins include median, bas</li> </ul>	
Wireless Color Touch Screen C	Control Unit Canabilities
Sounds Capabilities:	control onit capabilities
I.Heart sounds synchronized with	programmable ECG
II.Auscultated lung sounds synchro	
III.Individual lung or bilateral sound	-
IV.Normal or abnormal bowel sound	
V.Vocal sounds – computer-genera	— — — — — — — — — — — — — — — — — — — —
Heart Sounds Capabilities:	Lung Sounds Capabilities:
Synchronized with programmable ECG	Synchronized with breathing rate, $0 - 60$
- Aortic Stenosis	Individual lung / bilateral sound
- Friction Rub	- Coarse Crackles
- Austin Flint Murmur	- Fine Crackles
- Diastolic Murmur Mi Stenosis	- Normal Breath Sounds
- Systolic Murmur	- Pneumonia
- Mitral Valve Prolapse	- Stridor
- Normal Heart Sounds – Apex	- Wheeze
- Opening Snap Msec	- Pleural Rub
- Ventricular Septal Defect	- Rhonchi
- Atrial Septal Defect	
- Pulmonary Stenosis	Vocal Sounds Capabilities:
- Stills Murmur	sounds, mixed with voice input
Normal and abnormal bowel sounds	- Cough
-Borborygmus	- Vomit
-Fetal Tones	- Moan
-Hyperactive Bowel	- Scream
-Hypoactive Bowel	- SOB Breathing
-Normal Bowel	- Yes
<b>Bowel Sounds Capabilities:</b>	- No
Normal and abnormal bowel sounds	- Hiccup (infant)
-Borborygmus	- Cry (infant)
-Fetal Tones	

### E-TENDER NOTICE FOR supply & installation of Skill Lab Equipment for GGS Medical College and Hospital

	-Hyperactive Bowel		
	-Hypoactive Bowel		
	-Normal Bowel		
	Blood Pressure / Pulses Capabilities:		
	- Articulating blood pressure arm for auscultated and palpated blood pressure		
	simulation		
	- Korotkoff sounds synchronized with ECG		
	- Korotkoff sounds volume control in 10 steps, 0-9		
	- Systolic and diastolic pressure may be set individually in steps of 2mmHG		
	- Systolic 0-300mmHG, Diastolic 0-300 mmHG		
	- Auscultative Gap, with on/off feature		
	- Pressure accuracy +/- 2mmHG		
	- Calibrate function to adjust pressure sensor and cuff gauge		
	- Palpated pulse simulator controls brachial and radial pulses		
	- Pulses only active when palpated		
	- Pulses synchronized with programmable ECG		
	- Pulse strengths dependent on Blood Pressure		
	Cardiac Capabilities		
	- 1100+ rhythm variations		
	- Programmable waiting rhythm		
	Logging / Scenario Function		
	- Control unit can be connected to PC using USB cable for:		
	- logs for "after action" review/debriefing.		
	Mastastanay Madula Namual anatanay of a mastanayative left total mastastanay		
	<ul> <li>Mastectomy Module Normal anatomy of a postoperative left total mastectomy</li> <li>Surgical area skin closed with staples</li> </ul>		
	<ul> <li>Drain tube placed just under skin</li> </ul>		
	- Drain tube praced just under skin		
	Patient Monitor -		
	should provide concise clinical feedback and simulates physiological parameters		
	including wave form and value display for HR, ECG, SpO2, BP, RR, Temperature,		
	etCO2, as in a real patient monitor.		
l			

Guarantee/Warranty	03 years including accessories
CAMC	05 years after expiry of Guarantee / Warranty

### <u>NOTE</u>: -

- All accessories like UPS / Stablizer or any other which are required for machine should be supplied by the L1 bidder.
- Compliance report to be submitted in a tabulated and point-wise manner (as per technical specifications), clearly mentioning the page/ para number with authenticated catalogue / manual, without which it will not be considered. Points

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not covered in the brochure must be specifically addressed in a separate certificate.

- User list from Govt sector and good repute private hospitals should be provided.
- Certificate (s) regarding standard in quality must be uploaded.
- Expected delivery & Installation time: Within 45 days after issue of supply order.

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#### TERMS AND CONDTIONS

# FOR SUPPLY AND INSTALLATION of *SKILL LAB EQUIPMENT* REQUIRED AT GGS MEDICAL COLLEGE & HOSPITAL, FARIDKOT.

#### **ELIGIBILITY**

- The sole manufacturers of equipments or their authorized agents/distributors may quote their rates.
- In case of Authorized Supplier/Agency/Distributor, the Authorization Certificate as per the Format given at Annexure-'III' should be uploaded.
- In case the Tenderer is authorized dealer/supplier an undertaking/certificate issued by their Principle Manufacturer/Supplier that in case dealership/distributorship is withdrawn after supply then the Principle responsible Manufacturer/Supplier will be for Guarantee/Warranty/AMC/CMC. (Annexure - 'IV').
- 1. This institution reserves the right to reject tenders without assigning any reason and increase or decrease the quantity of the articles tendered.
- 2. If the supply and installation is not made within the stipulated period then late delivery charges @2% will be imposed on the total amount of Supply Order up to delay of 30 days and thereafter @ 4% for another 30 days after which Supply Order will be deemed cancelled & security/earnest money will be forfeited and company will be black-listed for future.
- 3. Payment Terms: 80% Payment will be released after satisfactory Installation of the Equipment and balance 20% will be made after 60 days of the Installation and satisfactory working of the equipment.
- 4. In-complete or conditional offers incorporating price variation will not be entertained.
- 5. The firm should have been in existence for at- least **three years** and it should have turnover of **Rs.2,00,00,000/- per year.**
- 6. The successful bidder shall deposit performance security @ 10% of the basic cost of the equipment/s in the shape of **Demand Draft only** and will be returned after receipt of CAMC security.

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### Annexure-I

#### TECHNICAL BID COMPLIANCE STATEMENT

Name and Address of the applicant / firm\_\_\_\_\_

Specify whether Manufacturer/Dealer/Distributor:

Sr. No.	. Particulars	
1.	Tender Fee of <b>Rs.2360/-</b> through Online Mode only on or before due date.	
2.	Tender Processing fee charged by Punjab Govt. as per their norms. (Non-refundable).	
3.	Earnest Money as mentioned, in favor of Registrar Baba Farid University of Health Sciences, Faridkot through online mode only.	
4.	Technical Bid Compliance Proforma uploaded (Annexure-I).	Yes/No
5.	Whether an affidavit regarding Non-Black listing as per proforma given at <b>Annexure-II</b> duly attested by an Executive Magistrate or a Notary Public uploaded.	
6.	In case the bidder is Authorized Supplier/Agency, the Authorization Certificate as per the Format given at <b>Annexure-'III'</b> uploaded.	
7.	In case the Tenderer is Authorized Supplier/Agency, an undertaking/certificate issued by their Principle Manufacturer/Supplier that in case dealership/distributorship is withdrawn after supply then the Principle Manufacturer/Supplier will be responsible for Guarantee/Warranty/AMC/CMC (Annexure – 'IV') uploaded.	
8.	Details of Bank Account for refund of EMD (Annexure – V) uploaded.	
9.	Price Bid in the prescribed format in Excel Sheet (Annex – VI uploaded.	Yes/No
10.	Copy of Certificate of Registration for service Tax/TIN/TAN/PAN uploaded.	
11.	A certificate from C.A. regarding Annual Turnover with Balance Sheet for the last 3 (three) financial years i.e. 2017-18, 2018-19 and 2019-20 uploaded.	
12.	Copy of the IT Returns for three financial i.e. 2017-18, 2018-19 and 2019-20 uploaded	Yes/No
13.	Certificate regarding standard in quality as per required in specifications	Yes/No
14.	Compliance sheet, point wise, as per specifications uploaded	
15.	E-mail ID	

#### Signature & seal of bidder

#### Place: Date :

Note: <u>Please upload Catalogue/Brochure/Pamphlets with complete specifications of quoted</u> <u>model only.</u>

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### **Annexure-II**

(To be furnished on non-judicial stamp paper worth Rs.100/- duly attested by Executive Magistrate or Notary Public).

### **AFFIDAVIT**

I/We

partner/sole proprietor (Strike out which is not applicable) of (Name & Address of Firm) \_\_\_\_\_\_ do hereby declare and solemnly affirm:-

- a) That the individual/firm/ companies are **not debarred or black- listed** by any department of Union/ State Government or any autonomous institute.
- b) That no partner or shareholder, directly or indirectly connected with the applicant who has been debarred or blacklisted by any department of Union Govt./State Govt./Autonomous Institute.
- c) And that the terms and conditions for supply and Installation of Equipments at GGSMCH, Faridkot, are acceptable to me/us. I/We shall abide by them in letter and spirit.

Date:

Place:

#### DEPONENT

#### VERIFICATION

I/We do hereby solemnly declare and affirm that the above declarations are true and correct to the best of my/our knowledge and beliefs. No part of it is false and nothing has been concealed therein.

Date:

Place:

DEPONENT

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### **Annexure- III**

#### MANUFACTURER'S/PRINCIPAL AUTHORIZATION FORM

TO

The Registrar Baba Farid University of Health Sciences, Faridkot -151203

Ref. No..... Dated:

Sub: Authorization Certificate in favour of M/s..... (Name of equipment)

No company or firm or individual other than M/s..... are authorized to bid, negotiate and conclude the tender formalities in regard to this business against this specific tender.

We, hereby extend our full guarantee and warranty as per the conditions of tender for the goods offered for supply against this tender by the above firm.

Yours faithfully,

(Name)

For and on behalf of M/s\_\_\_\_\_\_(name of manufacturer/Principal)

Note: This letter should be signed by a person competent and having authority to sign on behalf of manufacturer, and should be on manufacturer Letter Head and same will be uploaded with Technical Bid.

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### Annexure - IV

#### UNDERTAKING BY MANUFACTURER/PRINCIPAL SUPPLIER

ТО

The Registrar Baba Farid University of Health Sciences, Faridkot -151203

Ref. No..... Dated:

#### Sub: Undertaking for after sales service

We, M/s....., who are established and reputable manufacturers of ......(name of equipment) have authorized M/s.....(name and address) to bid, negotiate and conclude the Tender formalities with you against Tender No...... for the above equipment(s).

Further, we undertake that in case dealership/distributorship is withdrawn after supply of equipment then we shall be responsible for after sales service till the date of guarantee/warranty of the equipment and afterwards for a period of 10 years.

Yours faithfully,

(Name)

For and on behalf of M/s\_\_\_\_\_\_(name of manufacturer/Principal)

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### Annexure- V

### Details of Bank Account of the firm who has deposited EMD

Name of the firm:

Sr. No.	Particulars	Detail	
1.	Account No.		
2.	Name of Bank		
3.	Branch Name		
4.	IFSC Code of Bank		
5.	Name of Operator		

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ANNEXURE - VI

# **PRICE BID**

<u>TO BE UPLOADED in Printed/Computerized format in Excel Sheet Attached for all Equipments.</u>