



अखिल भारतीय आयुर्विज्ञान संस्थान(छत्तीसगढ़) रायपुर ,  
All India Institute of Medical Sciences, Raipur (Chhattisgarh)  
Tatibandh,  
Raipur-492 099 (CG)

क्रमांक /No. AIIMS/R/CS/URO/19/67/LPC

दिनांक: 24/05/2019

Notice for inviting Quotation for Advanced Infusion Syringe Pump for Urology Department at AIIMS Raipur.

**कोटेशन सुचना**  
**QUOTATION NOTICE**

Sealed quotations are invited from intending registered Stockiest/ Distributors having GST/ relevant documents for supply of Advanced Infusion Syringe Pump for Urology Department at AIIMS, Raipur should be submitted to Medical College Building, 2nd Floor, Gate no. 05 office of Store Officer up to 3:00 pm on **03<sup>rd</sup> June 2019**, item description as per detailed bellow.

स. क्र. S. N.	सामग्री का विवरण Description of Item	मात्रा Qty.	HSN Code	ब्रांड Make/ Brand/ Model	इकाई दर Unit Price in ₹	कर GST in %	कर सहित इकाई दर Unit Price Incl. GST	कुल रकम Total Price in ₹.
1.	<b>Advanced Infusion Syringe Pump</b> विनिर्देश: (Specification): Detail technical specification as per Annexure-I	02 Set						

**नियम एवं शर्तें:**

**Terms & Condition:**

1. Rate should be mentioned in word and figures both.
2. Taxes/GST, if any (Should be clearly mentioned).
3. Delivery Schedule – within 15 days from the date of issue of PO.
4. No any additional documents related to this NIQ will be entertained after opening of NIQ.
5. Price should be F.O.R. Destination basis (Urology Department).
6. LD @ 0.5% of delayed supply per week or part of week for delay of supply of material subject to maximum up to 10% of delayed supply should be deducted.
7. Quotation No/Name and Due date of opening must be written on top of the envelop.
8. 100% payment against received and acceptance of material.
9. No claim will be entertained regarding interest on any payment.

10. Where there is a statutory requirement for tax deduction at source, such deduction towards income tax and other tax as applicable will be made from the bills payable to the Supplier at rates as notified from time to time.
11. No payment shall be made for rejected stores. Rejected equipment's must be removed by the supplier within two weeks of the date of issue of rejection advice at their own cost & replace immediately. In case these are not removed these will be auctioned at the risk and responsibility of the suppliers without notice.
12. **Brand and make should be clearly mentioned in offer as well as tender/quotation specific authorization may be submit with the offer/Bid.**
13. GST rate applicable on your quoted item may please be confirmed. HSN code for each item should be clearly mentioned.
14. Please confirm if there any change (Upward/Reduction) in your Basic Price structure. And you are also requested to pass the Input Credit as per the following Anti Profiteering Clause of GST.  
**"Upon Implementation of GST, any reduction in the rate of tax on supply of goods or service or the benefit of input tax credit shall be passed on to AIIMS Raipur by way of commensurate reduction in the prices".**
15. The GST registration details may please be furnished.
16. AIIMS Raipur reserves the right to place the order for full or part quantity to one or more items.
17. RTGS detail required for payment purpose.
18. No part supply of part payment will be entertained.
19. Validity of offer should not be less than 90 days.
20. Supply, installation and commissioning will be done by firm (if applicable).
21. The quantity shown in above requirement column are totally tentative, it can be increase and decrease at the time of placement of purchase order.

भंडार अधिकारी  
एम्स रायपुर (छ.ग.)

**Detailed of Technical Specifications of Advanced Infusion Syringe Pump:**

- A. The syringe pump should be programmable, user friendly, safe to use and should have battery backup and comprehensive alarm system.
- B. **Accuracy:** Must work on commonly available standard 5ml/10ml/20ml/50ml/60ml syringes with accuracy of +/-2% or better.
- C. Flow rate: Programmable from 0.1 to 1000 ml/hr or more in steps of 0.1 ml/hr with user selectable flow rate set option.
- D. **Bolus rate:**
1. Should have programmable bolus rate 1 ml/hr to 1500 ml/hr or more in 0.01ml/h steps with infused volume display.
  2. Bolus without volume pre-selection by one key press bolus. Automatic calculation of bolus rate after one key press bolus infusion.
  3. Automatic calculation of bolus rate by input of bolus volume and time.
- E. **Pressure Level:**
1. Configurable for each individual drug.
  2. Pressure adjustable from 0.1 bar-1.2 bar (or mmHg)
  3. Real time display of infusion pressure with clearly defined limits.
- F. **Syringe compatibility:**
1. Syringe Brand Compatibility: Must be compatible to common syringe brands (pre-calibrated with 7 or more frequently used syringe brands with an option to store 6 or more additional user-defined brands)
  2. Automatic detection of syringe size & proper fixing. Must provide alarm for wrong loading of syringe such as disengaged plunger, unsecured barrel etc.
  3. Syringe Brand Detection: Automatic & Manual
  4. Syringe Brand Self Calibration: Automatic & Manual
  5. Syringe Near Empty Detection Alarm: Adjustable from 3 min to 10 min
- G. **Display:** Colour active 2.4" or more TFT display, 240x320 pixels, 262k colours, viewing angle 800 or more.
- H. **Safety:**
1. Fully automatic monitoring of all safety relevant functions through microprocessor system.
  2. Key board locking system for patient safety.
  3. Delivery Monitoring: as LED, Run indicator on display.
  4. Anti-bolus system to reduce pressure on sudden release of occlusion.
  5. Should have comprehensive ALARM package including: Occlusion limit exceed alarm. Near end of infusion pre-alarm & alarm, Volume limit pre-alarm & alarm, KVO rate flow, Low battery pre-alarm and alarm, AC power failure and Drive disengaged alarm.
  6. History log: 1000 records or more.
  7. Software update features.
- I. **Drug Library:** Display of Drug directory of more than 50 drugs, customized & adjustable.
- J. **Mounting device/ Docking Station:**

1. System should have Staking system to carry at least three Syringe pumps at a time.
2. At least three pumps (as per requirement) can be powered with one power cord when mounted on IV pole.
3. Universal Pole Clamp to be supplied with each machine for horizontal & vertical mounting on all standard IV poles & wall mounting systems.

**K. Electrical Power requirement:** 220-240 VAC, 50Hz.

**L. Battery:**

1. Rechargeable Li-Ion Battery having at least 12-hours backup @ 25ml/hr flow rate. Longer battery life and indication of residual life will be preferred.
2. Automatic battery charging during connection to mains.
3. Automatic switchover from mains to battery operation during power failure without data loss or loss of inputs.

**M. Certification requirement:**

Should have BIS/ European CE with four digit notified body number certificate/ US FDA approved for intended use and certificate to be submitted.

**N. Environmental requirement:** The unit shall be capable of stored and operating continuously in ambient temperature of 10-50 degree C and relative humidity of 15-90%.

**O. Ingress Protection requirement:** IP34 or better (water splash from any direction)

**P. Documents required:**

1. Log book with instructions for daily, weekly, monthly and quarterly maintenance checklist. The job description of the hospital technician and company service engineer should be clearly spelt out.
2. User Manual and service manual in English.
3. List of important spare parts and accessories with their part number and costing.

**Q. Warranty:** Five years from date of installation.

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एम्स रायपुर (छ.ग.)