



अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छत्तीसगढ़)
All India Institute of Medical Sciences, Raipur (Chhattisgarh)

खंडन

यह निविदा अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छ.ग.) के लिये बोलीदाताओं/फर्म/एजेंसी इत्यादी से प्रस्ताव नहीं बल्की प्रस्ताव प्राप्त करने का निमंत्रण है संविदात्मक दायित्व तब तक नहीं होगा जब तक औपचारिक अनुबंध पर हस्ताक्षर नहीं किया जाता और चयनित बोलीदाताओं/फर्म/एजेंसी इत्यादी के साथ एम्स रायपुर के विधिवत अधिकृत अधिकारियों के द्वारा निष्पादित किया गया हो।

DISCLAIMER

This tender is not an offer by the All India Institute of Medical Sciences, Raipur, but an invitation to receive offer from bidders/firm/agency etc. No. contractual obligation whatsoever shall arise from this tender process unless and until as formal contract is signed and executed by duly authorised officers of AIIMS, Raipur with the selected bidder/firm/agency.

Tatibandh, G.E. Road, Raipur -492099 (CG),

Tele: 0771- 2577279, 0771-2971307

Website: www.aiimsraipur.edu.in/www.eprocure.gov.in

Email: store@aiimsraipur.edu.in



अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छ.ग.) में
"PACS Workflow System " हेतु निविदा आमंत्रण सूचना

Notice Inviting Tender for
" PACS Workflow System for Nuclear Medicine Department"

At
All India Institute of Medical Sciences, Raipur

CRITICAL DATE SHEET

Published Date	25.01.2019	18:00PM
Bid Document Download / Sale Start Date	26.01.2019	10:00AM
Clarification Start Date	26.01.2019	11:00AM
Clarification End Date	28.01.2019	18:00PM
Pre bid meeting	30.01.2019	15:30PM
Bid Submission Start Date	31.01.2019	11:00AM
Bid Document Download / Sale End Date	14.02.2019	15:00PM
Bid Submission End Date	14.02.2019	15:00PM
Bid Opening Date	15.02.2019	15:30PM

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अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर, छत्तीसगढ़
 All India Institute of Medical Sciences, Raipur (Chhattisgarh)
 Tatibandh, GE Road, Raipur-492 099 (CG)
 Website : www.aiimsraipur.edu.in
 Tele: 0771- 2577279, e-mail: store@aiimsraipur.edu.in

S.No.	Name of the Items	Qty	EMD in ₹
1	PACS Workflow System for Nuclear Medicine Department	01 No	₹ 14,87,000.00

- Online Tender in Two Bids (Technical & Financial) are invited on behalf of Director, All India Institute of Medical Sciences Raipur for “Supply of PACS Workflow System” for Nuclear Medicine Department”. Manual bids shall not be accepted.
- Tender document may be downloaded from AIIMS web site www.aiimsraipur.edu.in (for reference only) and CPPP site <https://eprocure.gov.in/eprocure/app> as per the schedule as given in CRITICAL DATE SHEET as under.
- Bid shall be submitted online at CPPP website: <https://eprocure.gov.in/eprocure/app>.
- Bid documents may be scanned with 100 dpi with black and white option which helps in reducing size of the scanned document.
- Tenderer who has downloaded the tender from the **AIIMS web site www.aiimsraipur.edu.in** and Central Public Procurement Portal (CPPP) eprocurement website <https://eprocure.gov.in/eprocure/app> **shall not tamper/modify the tender form including downloaded price bid template in any manner.** In case if the same is found to be tempered/modified in any manner, tender shall be completely rejected and EMD would be forfeited and tenderer is liable to be banned from doing business with AIIMS Raipur.

The Technical bid should include the detailed specifications of main item/equipment and its accessories. All items should be numbered as indicated in the Annexure-I (Any deviation should be clearly mentioned and supporting document should be submitted).
- Manual bid shall not be accepted in any circumstance.**
- The complete bidding process in online bidding, Bidder should be possession of valid digital Signature Certificate (DSC) for online submission of bids. Prior to bidding DSC need to be registered on the website mentioned above.
- Tenderers are advised to follow the instructions provided in the ‘Instructions to the Tenderer for the e-submission of the bids online through the Central Public Procurement Portal for e Procurement at <https://eprocure.gov.in/eprocure/app>’.**
- Quotations should be valid for 180 days** from the tender due date i.e. tender opening date. The bidder should clearly indicate the period of delivery, CMC & warranty terms etc whichever is applicable.
- Relevant literature pertaining to the items quoted with full specifications should be uploaded, where ever applicable.

11. Tenderer must provide evidence of having supplied government hospital / reputed private hospital organizations in India similar nature of items of at least ₹ **2,47,79,250.00** of Supply of PACS Workflow System of Tender value in the last three years and the copy of the same should be uploaded.
12. The firm should be registered and should have the average annual turnover at least ₹ **4,95,58,500.00** of the bidder in the last three financial years. Copies of authenticated balance sheet for the past three financial years should be uploaded.
13. The tender document must be accompanied by copy of PAN, Certificate of firm/company registration, GST Registration Certificate.
14. The quantity shown against each item is approximate and may vary as per demand of the Institute at the time of placement of order.
15. The bidder must be able to provide the product/items within specified time period as prescribed in the Purchase Order, failing which the EMD will be forfeited. Furthermore on completion of the stipulated time period, Purchase Order will be cancelled and award will be given to another qualified bidder with the negotiated terms & conditions as per Institutes norms.
16. In the event of any dispute or difference(s) between the vendee (AIIMS Raipur) and the vendor(s) arising out of non-supply of material or supplies not found according to the specifications or any other cause what so ever relating to the supply or purchase order before or after the supply has been executed, shall be referred to the Director/AIIMS/Raipur who may decide the matter himself or may appoint arbitrator(s) under the arbitration and conciliation Act 1996. The decision of the arbitrator shall be final and binding on both the parties.
17. The place of arbitration and the language to be used in arbitral proceedings shall be decided by the arbitrator.
18. All disputes shall be subject to Raipur Jurisdiction only.
19. **AIIMS Raipur reserves the rights to accept/reject any bid in full or in part or accept any bid other than the lowest bid without assigning any reason thereof. Any bid containing incorrect and incomplete information shall be liable for rejection.**
20. The Tender/Bid will be opened on Store office at AIIMS Raipur Premises.
 - i) Only those financial bids will be opened whose technical bids are found suitable by the expert committee appointed for the concerned instrument/equipment.
 - ii) No separate information shall be given to individual bidders. In incomparable situation, the committee may negotiate price with the technically and financially qualified bidder before awarding the bid.
21. Copies of original documents defining the constitution or legal status, place of registration and principal place of business of the company or firm or partnership, etc.
22. **Award of Contract**

The Purchaser will award the contract to the bidder whose quotation has been determined to be substantially responsive and who has bid the lowest evaluated quotation price.

- i) Not with standing the above, the Purchaser reserves the right to accept or reject any quotations and to cancel the bidding process and reject all quotations at any time prior to the award of contract.
 - ii) The bidder whose bid is accepted will be notified of the award of contract by the Purchaser prior to expiration of the bid validity period. The terms of the accepted bid shall be incorporated in the purchase order.
- 23.** Normal comprehensive warranty/guarantee and CMC (if applicable) shall be applicable to the supplied goods as per Annexure-I.
- 24.** Rates should be quoted inclusive of packing, forwarding, postage and transportation charges etc.
- 25.** The competent authority reserves all rights to reject the goods if the same are not found in accordance with the required description / specifications/quality.
- 26. A brochure displaying clearly the product is to be attached with the tender if required.**
- 27. Earnest Money:** Earnest money by means of a Bank Demand Draft/ FD, a scanned copy to be enclosed. It is also clarified that the bids submitted without earnest money will be summarily rejected. The DD/FD may be prepared in the name of "All India Institute of Medical Sciences, Raipur (AIIMS RAIPUR)". The EMD cost must reach at officer of the Stores Officer Gate no. 5, Medical College Building, 2nd Floor, AIIMS, Raipur after opening of tender.
- i) No request for transfer of any pervious deposit of earnest money or security deposit or payment of any pending bill held by the AIIMS Raipur in respect of any previous supply will be entertained. Tenderer shall not be permitted to withdraw his bid or modify the terms and conditions thereof. In case the tenderer fail to observe and comply with stipulations made herein or backs out after quoting the rates, the aforesaid amount of earnest money will be forfeited.
 - ii) Tenders without Earnest Money will be summarily rejected.
 - iii) No claim shall lie against the AIIMS Raipur in respect of erosion in the value or interest on the amount of EMD.
 - iv) If MSME firm is registered for above tendered item, then the firm will be exempted for submission of EMD amount. Firm must upload scanned copy of following documents in support of exemption. (1) Small Industries Corporation (NSIC) (2) Directorate of handicraft & Handlooms.
 - v) The earnest money will be returned/refund to the unsuccessful tenderers after the tender is decided.
 - vi) EMD should remain valid for a period of 45 days beyond the final bid validity period. When the tenderer agrees to extend the validity of bid, he shall also extend the validity of EMD suitably.
- 29.** In case the supplier requires any elucidation regarding the tender documents, they are requested to contact to the Store Officer, AIIMS Raipur through e-mail: store@aiimsraipur.edu.in on or before end date of clarification as per critical date sheet.
- 30.** The EMD of the successful bidder will be returned to them without any interest after the submission of Security deposit/PSD.

31. Other terms and condition applicable as per manual for procurement of goods 2017, GFR-2017 etc.

**Stores Officer,
AIIMS, Raipur**

Other Terms & Conditions:**1. Pre-Qualification Criteria:**

- a. Bidder should be the manufacturer/authorized dealer/Distributor/Trader/Supplier. Letter of Authorization from Manufacturer for the same and specific to the tender should be uploaded in the prescribed place.
- b. An undertaking from the original Manufacturer is required stating that they would facilitate the bidder on regular basis with technology/product updates and extend support for the warranty as well. The scanned copy of same to be uploaded.(if applicable).

2. Performance Security Deposit:

- a. The successful bidder shall have to submit a performance security deposit (PSD) within 30 days from the date of issue of Letter of Award (LOA). Extension of time for submission of PSD beyond 30 days band up to 60 days from the date of issue of LOA may be given by the competent authority to sign the contract agreement however a penal interest of 15% per annum shall be charged for the delay beyond 30 days. i.e. 31st day after the date of issue of LOA. In case of the contract fails to submit the requisite PSD even after 60 days from the date of issue of LOA the contract shall be terminated duly forfeiting the EMD and other dues if any payable against the contract. The failed contractor shall be debarred from participating in re-tender (if any) for that item.
- b. Successful supplier/firm should submit performance security deposit as prescribed in favour of "AIIMS, Raipur" and to be received in the Store Office, 2nd Floor, Medical College Building, Tatibandh, Raipur (C.G) Pin-492099 before the date of commencement of supply or 30 days from the date of acceptance of the purchase order, whichever is earlier. The performance security deposit to be furnished in the form of Performance Bank Guarantee/FD/DD as per given Proforma of the tender documents, for an amount covering 10% of the contract value.
- c. The Performance Security Deposit should be established in favour of "AIIMS Raipur" through any Schedule Bank with a clause to enforce the same on their local branch at Raipur.
- d. Validity of the performance security deposit shall be for a period of 60 days beyond of entire warranty period from the date of issue of installation & commissioning.
- e. After completing of warranty period a fresh BG/DD/FDR of 10% of CMC cost will be submitted by the supplier for performance security against CMC validity of this new BG/DD/FDR will be 60 days beyond CMC period. After submission of new security deposits, old security deposit will be released.

3. Delivery & Installation (if applicable): The successful bidder should strictly adhere to the following delivery schedule supply, installation & commissioning should be effected within 45 days from the date of purchase order and this clause should be strictly adhere to failing which administrative action as deemed fit under rules will be taken against the defaulter. Otherwise Liquidation Damages will be imposed as per clause no. 4. Purchase order will be placed as required by consignee.

4. Penalty: If the suppliers fails to deliver and place any or all the Equipment or perform the service by the specified date as mention in purchase order, penalty at the rate of 0.5% per week of delayed value of goods subject to the maximum of 10% of delayed goods value will be deducted, afterwards another penalty may be imposed.

- 5. Training and Demonstration (If required):** Suppliers needs to provide adequate training and demonstration at AIIMS Raipur to the nominated person of AIIMS Raipur at their cost. AIIMS Raipur will not bear any training or living expenditure in this regard. The Supplier should arrange for regular weekly visit to the AIIMS, Raipur campus by its technical team and assist in maintenance of the item/equipment within warranty period. Assistance limited to locking companies with manufacturer will not be considered sufficient.
- 6. Right of Acceptance:** AIIMS, Raipur reserves the right to accept or reject any or all/bids tenders/quotations without assigning any reason there of and also does not bind itself to accept the lowest quotation or any tender. AIIMS, Raipur also reserves the rights to accept all the equipment/instruments in the given tender or only part of it in any given schedule without assigning any reason.
- 7. Validity of the bids:** The bids shall be valid for a period of 180 days from the date of opening of the tender. This has to be so specified by the tenderer in the commercial bid which may be extended, if required.
- 8. Risk Purchase & Recovery of sums due:**
 - Failure or delay in supply of any or all items as per Requisition / Purchase Order, Specification or Brand prescribed in the tender, shall be treated as 'non compliance' or 'breach of contract' and the order in part of full be arranged from alternative source(s) at the discretion of the hospital authority and the difference in price has to be recovered from the tenderer as mentioned elsewhere.
 - The amount will be recovered from any of his subsequent / pending bills or performance security Deposit.
 - In case the sum of the above is insufficient to cover the full amount recoverable, the contractor shall pay to the purchaser, on demand the remaining balance due.
- 9. Installation &Warranty Declaration:** Suppliers must give the comprehensive onsite warranty as per Annexure-I as required from the date of successful installation of item/equipment against any manufacturing defects. In the installation report the model number of instrument and all spares parts/ accessories numbers should be in the line of purchase order. And suppliers must be written in the warranty declaration that “everything to be supplied by us hereunder shall be free from all defects and faults in material, workmanship and shall be of the highest quality and material of the type ordered, shall be in full conformity with the specification and shall be completed enough to carry out the experiments, as specified in the tender document.” If any item covered under warranty fails, the same shall be replaced free of cost including all the applicable charges (shipping cost both ways). **Installation must be done within stipulated time period from the date of delivery of the item/ equipment as specified in the purchase order.**
- 10. Communication of Acceptance:** AIIMS, Raipur reserves all right to reject any tender including of those tenderers who fails to comply with the instructions without assigning any reason whatsoever and does not bind itself to accept the lowest or any specific tender. The decision of this Institute in this regard will be final and binding.
- 11. Guarantee/Warranty,Service,Maintenance:** The tenderers must quote for **5 years** onsite warranty from the date of completion of the satisfactory installation as certified by the stipulated committee. The warranty charges shall not be quoted separately otherwise the bid shall be summarily rejected.Also the Bidders should

submit their quote for subsequent **5 years** on site CMC(include free labour,repair other services& spare parts) for PACS Workflow System but it should not be more than 7% per year of quoted unit price other wise offer mar summarily rejected.Failure to comply this condition will entail the rejection of the Bids.The price comparsion shall be made taking into account on basic price and post warranty CMC.The amount of CMC would be released to the supplier on successful completion of the maintenance of that particular year if duly certified by the user department.

12. Insolvency etc.: In the event of the firm being adjudged insolvent or having a receiver appointed for it by a court or any other under the Insolvency Act made against them or in the case of a company the passing any resolution or making of any order for winding up, whether voluntary or otherwise, or in the event of the firm failing to comply with any of the conditions herein specified AIIMS, Raipur shall have the power to terminate the contract without any prior notice.

13. Force Majeure: If, at any time during the subsistence of this contract, the performance in whole or in part by either party of any obligation under this contract is prevented or delayed by reasons of any war or hostility, act of public enemy, civil commotion, sabotage, fire, floods, exception, epidemics, quarantine restriction, strikers lockout or act of God (hereinafter referred to as events) provided notice of happening of any such eventuality is given by party to other within 21 days from the date of occurrence thereof, neither party shall be entitled to terminate this contract nor shall either party have any claim for damages against other in respect of such non-performance or delay in performance and deliveries have been so resumed or not shall be final and conclusive.

Further, that if the performance in whole or in part of any obligation under this contract is prevented or delayed by reason of any such event for a period exceeding 60 days, AIIMS, Raipur party may, at least option to terminate the contract.

14. Breach of Contract: In case of breach of any terms and conditions as mentioned above agreement/contract, the Competent Authority, will have the right to cancel the contract without assigning any reasons thereof and nothing will be payable by AIIMS, Raipur. In that event the performance security deposit shall also stand forfeited.

15. Subletting of contract: The firm shall not assign or sublet the contract or any part of it to any other person or party without having prior permission from AIIMS, Raipur, which will be at liberty to refuse if thinks fit. The tender is not transferable.

16. Right to call upon information regarding status of contract: The AIIMS, Raipur will have the right to call upon information regarding status of contract at any point of time.

17.Payment Terms:

17.1 Payment shall be made subject to recoveries, if any, by way of liquidated damages or any other charges as per terms & conditions of contract in the following manner.

A) Payment for Indeginious Goods.

Payment shall be made in Indian Rupees as specified in the contract in the following manner:

- (a) 70% paymeny of the contract price shall be paid on receipt of goods in good condition at the consignee premises and upon the submission of the following documents:

- i) Four copies of suppliers invoice showing contract number, goods description, quantity, unit price and total amount with revenue stamp.
 - ii) Two copies of packing list identifying contents of each package
 - iii) Certificate of origin and certificate of guarantee and warrantee.
 - iv) Consignee receipt certificate in original issued by the authorised representative of the consignee.
- (b) Balance 30% payment would be made against 'Final Acceptance Certificate' of goods to be issued by the consignees subject to recoveries, if any, either on account of non-rectification of defects/deficiencies not attended by the supplier or otherwise.

B) Payment for Imported Goods:

Payment of foreign currency portion shall be made in the currency as specified in the contract in the following manner:

(a) On Shipment:

Seventy (70)% of the FOR destination price of the goods shipped shall be paid through irrevocable, non-transferable Letter of Credit (LC) in favour of the supplier in a bank in his country in case of Foreign Tenderer and upon submission of documents specified here under:

- (i) Four copies of supplier's invoice showing contract number, goods description, quantity, Unit price and total amount with revenue stamp.
- (ii) Original and four copies of the negotiable clean, on-board Bill of Lading/Airway bill, marked freight pre-paid and four copies of non-negotiable Bill of Lading/Airway Bill.
- (iii) Four copies of packing list identifying contents of each package.
- (iv) Insurance Certificate and a documents also to be submitted for payment of LC confirming that dispatch documents has already been sent to all concerned as per the contract within 24 hours.
- (v) Manufacturer's/Supplier's warranty certificate.
- (vi) Certificate of origin.

(b) On Acceptance:

Balance payment of 30% of net FOR price of goods would be made against 'Final Acceptance Certificate' to be issued by the consignee through irrevocable, non-transferable Letter of Credit (LC) opened in favour of the Foreign Principal in a bank in his country, subject to recoveries, if any.

(c) Payment of Indian Agent Commission:

Indian Agency Commission will be paid to the manufacturer's agent in the local currency for an amount in Indian rupees indicated in the relevant Price Schedule (as per prevailing rate of exchange ruling on the date of contract) and shall not be subject to further escalation/exchange variation. Payment shall be paid in Indian Rupees to the Indian Agent on proof of 100% payment to the Foreign Principal.

(d) Payment for Annual Comprehensive Maintenance Contract Charges:

The consignee will enter into CMC with the supplier at the rates as stipulated in the contract. The payment of CMC will be made on six monthly basis after satisfactory completion of said period duly certified by the consignee on receipt of bank guarantee.

17.2 The supplier shall not claim any interest on payment in any circumstances.

17.3 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 rates as notified from time to time.

17.4 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.

18. Compulsory Enlistment of Indian Agents

As per the Compulsory Enlistment Scheme of the Department of Expenditure, Ministry of Finance, it is compulsory for Indian agents who desire to quote directly on behalf of their foreign manufacturers/principals, to get themselves enlisted with the Department of Expenditure, through the Central Purchase Organization (e.g. DGS&D).

The compulsory enlistment of Indian Agents under the scheme of Ministry of Finance is simpler and differs from the registration of Indian Agents with the Central Purchase Organization (e.g. DGS&D) described in the earlier paragraphs.

The registration of the foreign manufacturer is not a must for enlisting the Indian Agent under this scheme. No Inspection Report in respect of the foreign manufacturer/principal is necessary.

The enlistment under the scheme is not equivalent to the Registration with DGS&D. Such firms do not enjoy the same status as that of DGS&D registered suppliers. A note to this effect is given in the Enlistment Letter to the firm.

19. GST

GST rates applicable on your quoted item may please be informed. Please confirm if there is any (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”.**

20. Custom Duty on Imported Goods

In respect of imported goods, the tenderers shall also specify separately the total amount of custom duty included in the quoted price. The tenderers should also indicate correctly the rate of custom duty applicable for the goods in question and the corresponding Indian Customs Tariff Number. Where customs duty is payable, the contract should clearly stipulate the quantum of duty payable etc. in unambiguous terms. AIIMS, Raipur is exempted from payment of excise duty and is eligible for concessional rate of custom duty. Necessary certificate will be issued as demand. AIIMS, Raipur will not make necessary arrangements for clearance of imported goods at the airport.

21. Custom Duty Reimbursement:

The supplier will pay the customs duty wherever applicable, which will be reimbursed by purchaser as per documentary evidence. The custom duty exemption certificate will be provided to the supplier as and when required.

22.Fall Clause:

1. Prices charged for supplies under Rate Contract by the supplier should in no event exceed the lowest prices at which he bids to sell or sells the stores of identical description to any other State Government/DGS&D/Public Undertaking during the period of the contract.
2. If at any time during the period of contract, the prices of tendered items is reduced or brought down by any law or Act of the Central or State government, the supplier shall be bound to inform Purchasing Authority immediately about such reduction in the contracted prices, in case the supplier fails to notify or fails to agree for such reduction of rates, the Purchasing authority will revise the rates on lower side. If there is a price increase for any product after quoting the rates, the bidder will have to supply the item as per quoted rates. This office will not accept any higher rates afterwards.
3. If at any time during the period of contract, the supplier quotes the sale price of such goods to any other State Govt./DGS&D and Public Undertakings at a price lower than the price chargeable under the rate contract he shall forthwith notify such reduction to Purchasing Authority and the prices payable under the rate contract for the equipment's supplied from the date of coming into force of such price stands correspondingly reduced as per above stipulation.

Any deviation in the material and the specifications from the accepted terms may liable to be rejected and the suppliers need to supply all the goods in the specified form to the satisfaction/ specifications specified in the Purchase order and demonstrate at their own cost.

23. Arbitration:

If any difference arises concerning this agreement, its interpretation on payment to be made there under, the same shall be settled out by mutual consultation and negotiation. If attempts for conciliation do not yield any result within a period of 30 days, either of the parties may make a request to the Director, AIIMS Raipur to settle the dispute by Sole Arbitrator. Sole arbitrator will be appointed by the Director, AIIMS Raipur. In case of such arbitrator refusing, unwilling or becoming incapable to act or his mandate having been terminated under law, another arbitrator shall be appointed in the same manner from among the panel of three persons to be submitted by the claimant. The provision of Arbitration and Conciliation Act, 1996 and the rule framed there under and in force shall be applicable to such proceedings.

24. Legal Jurisdiction:

The agreement shall be deemed to have been concluded in Raipur, Chhattisgarh and all obligations hereunder shall be deemed to be located at Raipur, Chhattisgarh and Court within Raipur, Chhattisgarh will have Jurisdiction to the exclusion of other courts.

25.Rate wise comparison of the quotes will be made and L1* for each item will be determined accordingly. In this context, final decision of the committee will be binding to all and no claim in this regard can be entertained. The quantity indicated is tentative and may vary, and any decision in this regard by Director AIIMS Raipur shall be final.

L1 firm will be decided on the bases of total price of each item including 5 years warranty and 5 years CMC charges.

**Stores Officer,
AIIMS Raipur**

Technical Bid

The following documents are required to upload by the Bidder along with Technical Bid as per the tender document:

- a) Scanned Copy of EMD Cost must be uploaded.
- b) Please mention that the bidder is Manufacture /Distributor /Dealer / Trader/Supplier relevant document should be uploaded.
- c) In case of distributor/dealer/trader/supplier must be upload tender specific authorization certificate from OEM/ manufacturer (Form C) should be uploaded.
- d) Copy of PAN Card should be uploaded.
- e) Firm/Company registration certificate should be uploaded.
- f) The GST registration details may please be furnished.**
- g) Income Tax Return of last three years should be uploaded.
- h) Tenderer must provide evidence of experience/supplied materials as mentioned in tender document should be uploaded
- i) Annual turnover & balance sheet of last three year duly certified by CA as mentioned in tender document should be uploaded.
- j) Necessary Certificates like CE ,FDA and other relevant certificate to be uploaded as mentioned on Annexure-I & Annexure-II.
- k) "Declaration by the Bidder "(Form B) should be uploaded as mentioned in tender document should be uploaded.
- l) Relevant brochure/catalogue pertaining to the items quoted with full specifications etc.
- m) An undertaking of manufacturer as per serial no. 1b of tender document page no. 07 in case of Distributor /Dealer / Trader/Supplier should be uploaded.
- n) Form A with duly filled by bidder should be uploaded.
- o) Technical Specifications Compliance Report.
- p) Have you previously supplied these items to any government/ reputed private organization? If yes, attach the relevant poof. Please provide a certificate on letter head that you have not quoted the price higher than previously supplied to any government Institute/Organisation/reputed Private Organisation or DGS&D rate in recent past. If you don't fulfil this criteria, your tender will be out rightly rejected.

PRICE BID

- (a) Price bid in the form of BOQ_XXXX .xls
- (b) CMC Price Bid in the form of PDF.
- (c) Custom tarrif no.
- (d) Additional Documents

PARTICULARS FOR PERFORMANCE GUARANTEE BOND

(To be typed on Non-judicial stamp paper of the value of Indian Rupees of Two Hundred)
(TO BE ESTABLISHED THROUGH ANY OF THE SCHEDULED BANK (WHETHER SITUATED AT RAIPUR OR OUTSTATION) WITH A CLAUSE TO ENFORCE THE SAME ON THEIR LOCAL BRANCH AT RAIPUR. BONDS ISSUED BY CO- OPERATIVE BANKS ARE NOT ACCEPTED)

To,
The Director
All India Institute of Medical Sciences (AIIMS),
Tatibandh, GE Road, Raipur-492 099 (CG)

LETTER OF GUARANTEE

WHERE AS All India Institute of Medical Sciences (AIIMS) Raipur (Buyer) have invited Tenders vide Tender No.....Dt.....for purchase of.....AND WHERE AS the said tender document requires the supplier/firm(seller)whose tender is accepted for the supply of instrument/machinery, etc. in response there to shall establish an irrevocable Performance Guarantee Bond in favour of "AIIMS Raipur" in the form of Bank Guarantee for Rs.....[10% (ten percent)of the purchase value] which will be valid for entire warranty period from the date of installation & commissioning, the said Performance Guarantee Bond is to be submitted within 30(Thirty) days from the date of Acceptance of the Purchase Order.

NOW THIS BANKHERE BY GUARANTEES that in the event of the said supplier/firm (seller) failing to abide by any of the conditions referred to intender document/purchase order/performance of the instrument/machinery, etc. This Bank shall pay to All India Institute of Medical Sciences (AIIMS) Raipur on demand and without protest or demur (Rupees.....).

This Bank further agrees that the decision of All India Institute of Medical Sciences (AIIMS) Raipur(Buyer) as to whether the said supplier/firm (Seller) has committed a breach of any of the conditions referred in tender document/ purchase order shall be final and binding.

We,.....(name of the Bank& branch) here by further agree that the Guarantee herein contained shall not be affected by any change in the constitution of the supplier/firm(Seller)and/or All India Institute of Medical Sciences (AIIMS) Raipur(Buyer).

Not with standing anything contained herein:

a.Our liability under this Bank Guarantee shall not exceed`..... (Indian Rupees.....only).

b.This Bank Guarantee shall be valid upto..... (date) and claim period should be six months beyond the date of validity of BG.

c.We are liable to pay the guaranteed amount or any part thereof under this bank guarantee only and only if AIIMS Raipur serve upon us a written claim or demand on or before..... (Date)

This Bank further agrees that the claims if any, against this Bank Guarantee shall be enforceable at our branch office atsituated at..... (Address of local branch).

Yours truly,

Signature and seal of the Guarantor

Name of the Bank:.....

Complete Postal Address:

Form-A**PARTICULARS FOR REFUND OF EMD TO SUCCESSFUL/UNSUCCESSFUL BIDDER
RTGS/National Electronic Fund Transfer(NEFT)Mandate Form**

1	Name of the Bidder	
2	Permanent Account No(PAN)	
3	Particulars of Bank Account	
	a) Name of the Bank	
	b) Name of the Branch	
	c) Branch Code	
	d) Address	
	e) City Name	
	f) Telephone No	
	g) NEFT/IFSC Code	
	h) RTGS Code	
	i) 9 Digit MICR Code appearing on the cheque book	
	j) Type of Account	
	k) Account No.	
4	Email id of the Bidder	
5	Complete Postal Address of the bidder	

FORM-B

Declaration by the Bidder:

1. I/We have downloaded the tender from the internet site and I/We have not tampered /modified the tender documents in any manner. In case the same is found tampered/ modified, I/We understand that my/our offer shall be summarily rejected and I/We are liable to be banned from doing business with AIIMS Raipur and/or prosecuted as per laws.
2. I/We have read and fully understood all the terms and conditions contained in Tender document regarding terms & conditions of the contract& rules and I/we agree to abide them.
3. The bidder should not have been blacklisted before at any government organisation
4. No other charges would be payable by Client and there would be no increase in rates during the Contract period.

Place:.....

Date:.....

(Signature of Bidder with seal)

Name :

Seal :

Address :

Form-C

MANUFACTURER's / PRINCIPAL's AUTHORIZATION FORM

To
The Stores Officer,
All India Institute of Medical Sciences Raipur

Dear Sir,

TENDER: _____.

we, _____ who are established and reputable manufacturers of _____, having factories at _____ and _____, hereby authorize Messrs. (Authorised Dealer/Sole Distributor/Supplier) _____ (name and address of agents) to bid, negotiate and conclude the contract with you against Tender No. _____ for the above goods manufactured by us. No company or firm or individual other than Messrs. _____ are authorized to bid, negotiate and conclude the contract 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 bided for supply against this tender by the above firm.

The authorization is valid up to _____

Yours faithfully,

(Name)

For and on behalf of M/s. _____
(Name of manufacturers)/Principal

Annexure - I
TECHNICAL SPECIFICATION PACS WORKFLOW SYSTEM
FOR NUCLEAR MEDICINE DEPARTMENT

Special Conditions:-

1. General Product Qualification Criteria

1. The PACS application should be US FDA and CE certified (not more than 4 years old) and fully scalable WS-PACS system.
 - a. Separate FDA Certificate for Radiology/NM/Cardiology Viewer of PACS
 - b. Separate FDA Certificate for Clinician Viewer (ZFP) of PACS
 - c. Separate CE Certificate for Workflow Information System
2. The system should have IHE certification and vendor should provide PACS IHE Integration Statement for the proposed solution with supported Integration profiles as part of the bid.
3. PACS Solution should have been implemented for at least 250 sites either in India or globally which includes two or more 800+ bedded hospitals in India
4. 'Company should be present and operating in India for minimum 10 years or more.'
5. The WS (workflow system)-PACS vendor should have experience integrating the quoted solution to an HIS/ HER/LIS solution for receiving orders and forming DMWL for modalities. It should integrate with the existing HIS solution present in the hospital. The solution should also have an ability to provide/ share the radiology/NM/cardiology reports based on parameters. List of minimum 10 such installations in India to be provided.
6. In addition to the FDA certificate for WS-PACS application, the vendor should offer US FDA certified Zero Footprint viewer capable of displaying full fidelity (diagnostic viewing) DICOM images. The viewer must allow image access from any device (computer, IPAD, Tab, etc) using standard browsers eg. Mozilla, Safari, Internet Explorer. ZFP should be FDA diagnostic approved.
7. Vendor must offer VNA with XDS-I integration profiles for image archive along with PACS system. The vendor should offer associated software as required.
8. The XDS registry & repository should be of the by same vendor who is providing WS PACS S/W. No freeware XDS registry/repository should be offered with the proposed upgrade solution.
9. Non-Dicom data should be stored in native format only. Data format correction/conversion is not acceptable. This is in view of upgrading the existing solution to a Clinical Repository for Non-DICOM Data.
10. **Warranty:** Vendor should provide a solution with 5 Year warranty
11. Lowest bidder financially is decided based on the cost of the solution inclusive of

warranty of 5 years

12. All existing Radiology, cardiology& Nuclear Medicine modalities should be linked to the proposed solution and vendor must ensure integration of any new radiology/NM/cardiology modality in future without any additional cost.

13. Necessary software Updated for the proposed applications software need to be provided as along as system is in warranty or CMC (Total 10 yrs). This is a mandatory requirement.

14. Onsite engineer 24 x 365 days for 1 years for which the expenditure incurred in paying salary, accommodationetc will be borne by the vendor.

2. Vendor Qualification Criteria

- a) The vendor should have a successful track of deploying PACS systems in the country. Vendor should be more than 10 years in PACS business in India
- b) The vendor should have installed and managed a WS& PACS Site for more than 10 Years for at least two hospitals in India
- c) The vendor should have min installation base of 10 PACS systems with minimum 2 installations in more than 800+ Bed hospitals in India
- d) Vendor should have 2 sites in India with load equal or more than 200K cases per annum.
- f) Financial qualification criteria
 - 1. Should be a registered company in the country for last 10 Years
 - 2. Should be doing a turnover of 500 Crore or more for last Financial Year (2017-2018).
- g). All the proposed IT solutions included in this tender should be from single OEM. Third party clinical OEM products used for 3D should not be quoted.
- h) The PACS Vendor should BID directly as OEM. There should be NO third Party which should be bidding on behalf of the PACS OEM
- i) The PACS OEM should offer the latest Version of the Software which is available globally.
- j) The XDS Register and XDS Repository should be from the same vendor who is providing the Enterprise Clinical Data Management Platform. Freeware or 3rd party XDS Register & Repository should not be Provided as part of solution.

Annexure-II**Technical Specifications for PACS and Vendor Neutral Archive for AIIMS, Raipur**

The proposal shall include:	
System pricing.	
Technical description of the product offering and the specific configuration for the hospital.	
Individual responses to each normative requirement using the requirement identification numbers in this RFP.	
Information as required by other requirements in this RFP.	
The proposal shall also be submitted as a PDF File on a CD-ROM.	
The proposal shall explicitly identify every normative requirement of this RFP, which is not met by the vendor's offering. If a requirement will be met in the future, the vendor may provide a schedule of commercial availability for future enhancements, which redress the non-compliance, together with their prices. If a requirement will not be met by a planned enhancement of the system, the vendor may explain the impact of the deficit on overall system functionality.	
Tender document for Digital Healthcare Solution for Radiology Cardiology and Nuclear Medicine Department	
Introduction	
Broad functional specification, configuration and capabilities for the solution is given below. Specifications quoted are essential requirement of this system while terms & conditions are mentioned separately. Cost of the item/feature wherever asked should be quoted in the price bid only. Competitive bids are invited for the Digital Healthcare Solution for Radiology, cardiology and Nuclear Medicine areas for the hospital. System must be optimized for higher and excellent performance. The system should be designed to address the clinical needs of	
Radiologists, Critical Care Doctors, physicians, technicians and other group of hospital personnel and the various clinical areas mentioned where the proposed solutions need to be expanded to. The system should be cost effective, reliable and must provide excellent performance with technical features for clinical imaging and easy operation. When required, additional information should be provided as a separate document referring to the specific section being addressed. When the standard vendor data sheet disagrees with the bid response, Clarification should accompany in the form of letter/certificates from appropriate authority in the absence of which vendor data sheet will prevail for the purpose of evaluation and decision of the technical evaluation committee of the institute which shall be final and binding on the supplier.	
Clinical IT solutions in the hospital space, Electronic Medical Records (EMRs) are an evolving technology requirement and specifications are changing every day due to advances in technology. Newer techniques and technology are being added every now and then. Keeping these changes in mind, the requirements and specifications given here are just the guidelines. Changes may happen at the final order placement. Vendor must be prepared to keep track of latest development in the market and be ready to supply the latest system at the time of order and installation.	

<p>Institute is looking for an enterprise platform for Radiology, cardiology& Nuclear Medicine Clinical Data on a unified platform. The main aim of the requested healthcare IT solution is to achieve more clinical strength, additional clinical and workflow tools, integrated digital workflow, Post Processing and capability to handle DICOM Radiology, cardiology& Nuclear medicine department and consolidate them using a digital healthcare platform. The institute also aims to provide complete film less and paperless services from the</p>	
<p>various department which will be connected to this solution. To support that the hospital seeks a qualified system integrator (Vendor) to install the requested solution to improve access to patient information, reduce operating cost with customer focus and promote the hospital competitive position for improved patient services and increased productivity as well as enhancing the quality of patient care. Vendors shall provide cost effective, solution based, integrated approach proposal for improving the various workflows which are needed as part of the various clinical areas where the solution will be deployed / integrated. The solution should be based on turnkey basis only. Turnkey means that vendor is responsible for meeting all the requirements defined in this document including all performance requirements, system integration, installations, warranty/maintenance, training and system availability/uptime requirements.</p>	
<p>The detailed specification that follows shall be understood to be minimum requirement. Any item not covered under standard set should be quoted separately. Additional technical features suitable to our requirement will be given due preference. There may be repetition in specification at some places; this is mainly to clear the subject.</p>	
<p>The proposed system architecture shall be scalable. It should not only meet the current load requirements (in terms of incoming scans and users) but shall also meet the future requirements (assuming increase of 10% load year on year). In the future if load goes beyond the perceived limits, adding new hardware should meet the performance requirements.</p>	
<p>1. Objectives of the Digital Healthcare solution for Radiology, Nuclear Medicine and Cardiology Area</p>	
<p>a) Total elimination of hardcopy of films needed for reporting in the Radiology, Nuclear Medicine and Cardiology Area.</p>	
<p>b) Integrate Radiology, Nuclear Medicine & Cardiology Modalities from the respective Department.</p>	
<p>c) Add clinical tools for the entire enterprise</p>	
<p>d) Reduction in waiting time of radiological/Nm/cardiology report.</p>	
<p>e) Provide simultaneous consultation with physicians inside and outside the hospital (for registered and not registered patients).</p>	
<p>f) Improve the availability /accessibility of patient data [Radiology/NM image reports).</p>	
<p>g) Optimum use of human resources through a decreased rework (repeats, and an improvement in operational efficiency) and optimal work flow</p>	
<p>h) Expand the scope of the PACS to Nuclear Medicine & Cardiology Areas so that Critical data can be recorded electronically and automatically from NM and PET/CT modalities</p>	
<p>i) Integration of all imaging DICOM modalities and radiology reports (patient data) one to a reliable and accessible digital platform.</p>	
<p>k) To integrate HIS, WS, PACS-WS and the CIS platform for a seamless data exchange platform. Integration should be dynamic and bi-directional.</p>	

1) Performance of the solution should be consistent and 98% uptime of the working of the system should be ensured.	
The proposed enterprise system should deliver High Uptime (Reliability / Robustness): The solution should deliver an uptime of 98 %. The solution should incorporate network Load Balancer and active-active replication for all applications proposed	
The archive should be VNA (Vendor Neutral Archive). All the images shall be independently managed by the VNA server and PACS-WS should keep only short-term data. The architecture shall ensure that there should not be any data migration, if hospital decides to change the PACS-WS system. The new PACS-WS system shall be able to work seamlessly with VNA.	
SCHEDULE – A	
2. Technical requirement for requested Digital Healthcare Solution	
System and Technical Requirements for Workflow Information System (WS)	
I. General Requirements	
a) WS shall support all the standard Modules i.e. Patient Registration, Appointment/Scheduling, Modality Worklist, Radiologist/NM/cardiologyWorklist and Reporting.	
b) The system shall support scanning of hardcopy request forms and other documents and attach with a patient.	
c) The system shall be integrated with HIS. It shall be Dynamic and bi-directional integration.	
d) System shall support workflow for radiology orders which do not require scheduling (ex. X-Rays).	
e) The patient consent forms should be able to be scanned and attached into the system	
f) The system shall have an ability to insert a flag for attention for an examination. The flag shall be visible in all various worklists. The user typed comments shall also be visible.	
g) The system shall support sticky notes function. The sticky notes shall open as popup when a scan is opened.	
h) The system shall provide instant messaging functionality for users to communicate via system.	
i) It should be possible to view the details of personnel involved with the Order ie. who created the order, who scheduled/rescheduled it, scanning technician, draft radiologists and final report signoff radiologist.	
j) If the hospital has EMR, the WS shall be integrated with it so that with a click clinicians can see other details of the patient.	
k) The system shall provide the section where all standard documents related to operations, policies; standard forms can be uploaded and kept for users to access it.	
l) System shall support multiple department workflows where multiple department users can work without being able to access other department data. For ex. Front Office of one department shall not be able to schedule cases of other departments. Cross department access shall be limited and shall be available only to limited users.	
m) System shall support setting up Master Data from the Admin interface ex. Procedures List, Reporting Templates.	
n) System shall support transfer of orders from one department to another.	
o) System shall support multiple user profiles which includes the	

following but not limited to	
1. Junior Resident	
2. Senior Resident	
3. Radiologist /NM Physician/Cardiologist	
4. Transcriptionist	
5. Radiographer /NM technician/Cardiology technician	
6. Patient Service clerk & supervisor	
7. Radiology/Nm/cardiology Nurse	
8. Administrator	
p) The system shall allow creating user groups and assigning users to groups. It should allow managing access rights both at group and individual user level.	
II. Patient Registration & Service Request	
a) Shall allow Patient registration with few details as mandatory. System shall be able to use the Hospital generated Medical Record Number (UHID).	
b) System shall be able to pull the patient details from the hospital HIS.	
c) System shall allow marking Patient Arrival status in WS.	
d) The system shall support Patient Merge workflow.	
e) System shall capture and display health alerts.	
f) Able to scan various consent forms ex. Request Form, Consent Forms, Pregnancy Declaration forms etc.	
g) The document scanner shall be integrated with WS.	
h) The system should support Pre-vetting capabilities.	
i) The system should support ability to order orders which should be sent to HIS.	
j) Allow the creation of a protocolling worklist for radiographers or radiologists with options to select standard performing protocols and free text field to document additional performing instructions to radiographers or communications with clinicians that will be visible to the radiographer when performing the study.	
k) System should be able to audit and track protocolling workload per user.	
l) Support more than 1 level of vetting e.g. Radiographer or trainee performs vetting and with option to send to Radiologist to verify.	
m) Support seamless paperless communication between clerk, radiologist and radiographer during the vetting process.	
n) Have a means to support rejection of requests sent for vetting.	
o) Requested procedures or Imaging Requests that need clarification can be flagged for follow-up from Request creation.	
p) List of Requested Procedures or ISRs.	
q) Able to filter by Date/Time, Modality, Priority, Patient Type, Medical Service, Referral Location, Patient Class.	
r) Option to search for list of Requested Procedures by Patient ID, Patient Name, exam order ID.	
s) Print out Porter Slip with information like Patient ID, Patient Location	
t) Ability to sort list by different fields and select specific fields for display.	
u) Choice of giving an appointment or starting the procedure from the request list. For example:	
1. For general Investigations, select procedure and start procedure. No need to book an appointment slot before starting the procedure.	

2. For specialized Investigations like CT or MRI, PET-CT, SPECT, Cardiology investigations book appointment, indicate arrival of the patient on appointment day, generate bill and continue workflow.	
v) Able to restrict cancellation of confirmed/performed orders to defined, configurable users/group.	
w) The system should support printing of Radiology/NM/ cardiology Request orders created in WS or electronic radiology orders from EMR with relevant clinical and health information.	
III. Appointment / Scheduling	
a) Graphical representation of booking slots with comments and/or colour code showing reservation of slots for different types of procedures.	
b) Able to define slots in a room based on certain constraints e.g. urgent cases only, inpatient or outpatient. System should be able to use these constraints and rules to facilitate giving an appointment.	
c) Appointment diary to display available slots according to the procedure time. This improves utility of resource and eliminates waste gaps in appt time slots. Visually the schedulers can identify appointment time slots readily.	
a) Able to customize the number of booking slots available per day as duration of the procedures varies for different types of examinations. The system should allow reservation of appointment slots for specific procedures, by patient type (e.g. inpatient, outpatient), patient class, etc. This should be easily visible to assist users in scheduling.	
b) Able to "suggest" an appropriate appointment date/time for patient based on certain rules and constraints, bypassing slots that do not meet the constraints for the patient.	
c) Ability to separate appointment resources by department and yet enable cross-checking and alert if patients have the same exam/other already performed in own/other department recently or already has an appointment made in different department within a specified number of days.	
d) Able to alert and prompt alternative appointments for multi-exam procedures requiring more than one procedure rooms.	
e) Able to define specific appointment slots for viewing and scheduling for certain category of users. Able to restrict booking into certain appointment slots in the scheduling book.	
f) Able to control rights for overbooking to authorized users. Configurable in terms of resource allowed overbooking, number of overbooking & types of procedures, etc.	
IV. Patient Check-in and Order Creation	
a) Support mapping of a specific procedure to different service code base on patient type, referring location, facility, performing department, procedure code etc. Example:	
b) Able to assign unique numbers (accession and order numbers) to identify the procedures and provide the link of results/ to images in PACS-WS.	
c) Able to trigger charge or credit transaction to billing system(s) upon order entry or cancel or replace procedure respectively using HL7 protocol for communication.	
d) Able to capture the reasons for cancellation of procedures or no charge procedures or waiver of professional fees for audit purpose.	
e) Produce sticky labels with patient, visit, billing code and order related information upon check-in or order entry:	
1. to show waiting/procedure room	

2. to display accession/order number for identifying procedures for modality worklist and reporting	
3. to paste on film envelope for film tracking and dispatching of films to GP referrals, non-resident patients, clinics, etc.	
f) System should have an easy way to do adhoc re-reprint of additional patient labels.	
V. Service Recording and Tech Module	
a) Filterable Worklist for scheduled/ordered procedures based on room, modality or location e.g waiting area. Able to configure fields and filters based on user preference. The system should have an option to save the user-defined worklist. Ability to print and export list.	
b) Be able to select multiple procedures from the worklist, and perform the same operation in one instance e.g start or complete procedure or assign reporting radiologist.	
c) Track procedure duration based on procedure start and complete times	
d) Track radiographer(s)/NM technician who performed the procedure. Able to easily add additional operators.	
e) Track radiologist, cardiologist or NM physician(s) who performed the procedure.	
f) Track other personnel's involved in the procedure e. g nurses, patient's care-giver.	
g) Allow technologists of said departments to enter technical comments for procedures performed to capture examination information e. g. Contrast usage, sequences performed, sonographic findings.	
h) Able to order/cancel/remove procedures. There should be a security object that controls cancellation of procedures that have been started or have images or reports.	
i) Exam status should include suspend and confirmed statuses or equivalent.	
j) Able to trigger messages to EMR/HIS for order/cancel/remove of procedures when applicable using HL7 protocol for communication	
k) MPPS from modality to WS/PACS-WS (including sequences) to plan examinations based on protocol.	
l) Reuse protocols from previous examinations when planning follow-up examinations at the same modality and for the same organ.	
m) To trigger a message to EMR/HIS upon examination started/completion.	
n) To alert referring clinicians through email or SMS upon examination completion if applicable.	
o) To allow radiographer/NM technologist to group/link 2 or more procedures to be reported together. Splitting of grouped procedures should also be possible prior to reporting.	
p) Allow radiographers to update reporting priority.	
VI. Reporting	
a) Able to import patient history into the Radiology/NM/Cardiology report.	
b) An efficient way to assign a list of pending reporting tasks to a particular radiologist to report.	
c) Able to view at a glance outstanding reporting tasks based on each worklisteg. MRI (2) i. e. 2 MRIs not reported.	
d) Reporting templates and canned text should have both public and private options	
e) Standard word processing capabilities with spell checking function, formatting e.g. bold underline, italic and medical dictionary.	

g) Able to correct reports (alter original report text) after final/verified i.e remove original content but with history of original versions kept (versioning).	
h) Able to amend reports after finalized/verified as addendum i.e additional text on top or bottom of original report but leaving the original report text untouched.	
i) Allow specification and flagging of levels of abnormal reports.	
j) Allow the doctor to alert referring clinicians for abnormal and amended report i.e., either through email	
k) Flexibility to control printing of preliminary and final reports.	
l) The printed radiology/NM/Cardiology report should have the time stamp of when the report was printed.	
m) Option to automatically utilize pre-defined fields of data captured in the acquisition notes or technical comments (input by technologist) to pre-populate to the radiology/NM/Cardiology report.	
n) Cases reported by the resident should route to the radiologist's/Nm Physician's/Cardiologists work-list for verification regardless of mode of report creation.	
o) Cases awaiting verification by the resident will auto-route to the radiologist's/Nm Physician's/Cardiologists work-list for verification after user specified time frame.	
p) Allow more than one doctor to verify a report (co-read).	
q) Able to track both the reporting and verification radiologist/doctor and easily determine the person that needs to verify the report or perform an action that will allow the report to be finalized.	
r) Able to print a verified radiology/NM/Cardiology report with name(s) of reporting and verifying doctors, date/time of verification in a format acceptable to the institution. If preliminary reports can be printed, specify if there are distinguishing factors that differentiate it from a verified report e. g a watermark.	
s) Allow to print a verified report on an adhoc basis.	
t) Able to distribute verified reports by sending of reports by email.	
u) Reporting module should have a lock feature that prevents radiologist from starting a report on an examination that has already been opened for reporting by another radiologist regardless of screen refresh.	
v) If reporting module supports viewing of more than 1 patient's images at a time, then the module should have a warning feature that alerts the radiologist if starting to report or saving / verifying a report for a procedure when another patient's images are opened for viewing; e. g. Patient 1 images and report editor are open for reporting. Patient 2 images are opened for a quick review with clinician without closing Patient 1 report editor and or images. Subsequent with patient 2 images still open, clinician wishes to Save or Verify patient 1 images, warning message should appear.	
3. System and Technical Requirements for Enterprise Digital Healthcare Platform for Radiodiagnosis, Nuclear Medicine & Cardiology	
I. General Requirements	
The below mentioned specifications of each component of hardware and software are the minimum required. However, may quote an equivalent or advanced version that is commercially available or likely to be commercially available at the time of purchase. Further the compatibility of the quoted items with each other and with the existing system if any is an essential requirement.	

The vendor should take an overall responsibility of both the software and hardware components including all licenses for complete maintenance for time of warranty. It is the duty of the vendor to visit the site and study the existing workflow that can be utilized for their proposed solution and quote in the tender (if anything extra required) for the optimum and consistent functioning of the proposed digital solution.	
It will be the responsibility of the vendor to demonstrate capabilities/functions quoted to the technical evaluation committee onsite if required.	
a) Fully integrated Digital Solution for Radiology and Nuclear Medicine Devices	
b) Easily Deployable with simple web based interface.	
c) Multimodality connectivity, advanced work list, image processing tools for Radiology, Nuclear Medicine and Cardiology	
d) Should provide connectivity to DICOM devices from Radiology, Nuclear Medicine and Cardiology Department	
e) ZFP module allowing access of images remotely with all tools using low internet bandwidth.	
f) DICOM Film Print support.	
g) CD /DVD writing support with embedded DICOM viewer.	
h) Archiving Module.	
i) HIPAA & HL7 Compliant.	
j) Stat reads highlighted and automatically takes priority.	
k) Search criterion on various parameters like Patient ID, Name, Accession No, Date Hospital Name, Referring Physicians etc.	
l) Compressed image support for faster downloads.	
m) Perfect option to download priors automatically reducing waiting time for the radiologists.	
n) Ability to load different studies, side by side for comparison.	
o) PACS-WS Solution should be Truly web based with all features like CD/DVD Writing, Film printing, Image viewer and Reporting module available through browser from any station. No installable software should be required to use these functions from any station.	
p) It should be possible to import images from external CD/DVD directly into the system without any external software/workstation.	
q) Report text search engine should be available.	
r) Should support DICOM MWL integration with all modalities. It should be possible to view the DSA images in the subtracted mode either in cine or photo file modes.	
s) Roaming profile – user definable settings.	
The study list page and any query on that should display results in less than 2 secs.The First Image Display (FID) for any exam should be not more than 2 seconds. X-ray image should be loaded in less than 2 seconds.Loading CT scan with 2500 images should not take more than 10 seconds to display the FSL on the Diagnostic Reporting workstation.	
II. Image Processing Tools should be available in the Imaging Viewer	
a) Window / Level – Manual or Pre-sets.	
b) Image Scroll on Mouse.	
c) Pan and Zoom.	
d) Flip, Rotate, Invert.	
e) Crop – Elliptical, Rectangular or Freehand.	
f) Cross Reference Lines.	
g) Movie mode with speed control.	

h) Measurement: Linear, Angular, Cobbs Angle tool.	
i) Annotations like text, pointer, line etc.	
j) HU Value display – Point and average.	
k) Multi-frame image display support should be available	
l) Image display Matrix 1 x 1, 2 x 2, 3 x 3 etc.	
m) Series Display 1 x 1, 2 x 2, 3 x 3 etc.	
n) Image Linking – Interlink series for synchronized scrolling of images.	
o) Spine labeling tool – Automatically labels Vertebral Bodies or Disc space with just a mouse click.	
p) Magic Slice – Allows the Reporting Doctors to click on any part and see the corresponding slice.	
q) MIP, MPR, 3D, Volume Rendering tool is required for every Diagnostic user and it must be browser based. Volume render application should be from same PACS-WS OEM.	
r) Curved Planar Reformats (CPR) tool is required for every Diagnostic user	
s) Automatic Image Registration and Fusion tool is required for every Diagnostic user	
t) Inbuilt chat module is required	
u) Image export to JPEG/BMP/TIFF formats	
v) Auto Edge detection on image	
w) Ability to create Key series/merge 2 studies/split a study	
x) Embedded MIP	
y) Embedded MPR	
z) Basic Measurements	
1. spine labeling	
2. cobb angle	
3. Leg length difference	
4. horizontal alignment	
5. vertical alignment	
III. Following Hanging Protocols Tools should be available in the viewer	
a) Provide easy access to a gallery of prepared hanging protocols from which the user can choose.	
b) Support the option to create hanging protocols by drag and drop actions.	
c) Support the functions to have both user and system level hanging protocols	
d) Upon opening a study, provide the correct hanging protocol should immediately be used to display the images. This automatic selection should be based on:	
1. body parts	
2. modality Types	
3. procedure codes	
e) Allow to create a display workflow based on hanging protocols. Each hanging protocol can contain one or more presentation groups and the user shall be able to easily and intuitively navigate through all presentation groups that are part of the hanging protocol. It shall be possible to have the system automatically select a correct hanging protocol and/or presentation group based on body part, modality type or procedure code	
f) Support the functionality to have dedicated hanging protocols for comparison of studies	
g) Allow the user to Interactively change the layout:	

1. viewport tiling	
2. full screen layout	
3. add/merge viewport	
h) Allow for dynamic hanging protocols where:	
1. the renderer (3D, MIP/MPR, ...) can be changed in each viewport on the fly	
2. viewports can be added on the fly	
3. Images can be added by drag and drop from the clinical sidebar	
4. comparison with prior studies can be made	
i) Within the image area, provide a list of all studies for the active patient. This list should allow the user to select additional studies to display without the need for major mouse movements	
j) Support the creation and usage of Multi-modality hanging protocols	
k) Provide auto combine of series:	
1. US single frame	
2. CR/DX	
3. RF	
IV. Following features should be available in the ZFP Diagnostic viewer	
a) FDA Approved for Diagnostic Reading	
b) Basic Measurements	
1. Angle	
2. Distance	
3. Cobb Angle	
c) MIP	
d) MPR	
e) Multi Monitor Support	
f) Ability to see Images & Report	
Security	
All user access (ex. login, study access, report access) should be saved into database as AUDIT TRAIL and this should be accessible/searchable by Administrator	
4. Software Licenses	
License requirement for Workflow & Imaging Solution	
Unlimited Modality connectivity including for MRI, CT, PET, SPECT, NM, X Ray, US (as and when needed)	Unlimited Modality Connection
WS User Licenses (for Reception/Technologists, Transcriptionist/Radiologist / Nuclear Medicine/cardiologist) for WS Application	100 concurrent user licenses
250K Exams per year license for Radiology, Cardiology & Nuclear Med Viewer with unlimited user license	250K per year
250K Exams per year license for Clinical ZFP FDA Diagnostic Approved Viewer with unlimited user license.	250K per year
250K Exams per year license for PACS-WS VNA and XDS Registry & XDS Repository	250K per year
250K Exams per year license for Mobility Viewer on Tablet with unlimited user license for iPad/TAB viewing licenses	250K per year
3D post processing applications should be from the same OEM who is providing the PACS-WS. Third party 3D post processing applications should not be quoted.	
3D post processing applications should have a common database with the PACS-WS. There should be no separate storage needed for the 3D post processing applications.	

The 3D post processing capability should be embedded inside the PACS-WS viewer	
3D Post processing License for 150k Exams per year for and below application available on all Radiology Workstations - Pre Processing - Volume Rendering - Auto Bone Removal - Multi Modality Fusion	250K per year
Advanced 3D post processing Tools needed on Concurrent user basis which are embedded with PACS-WS Viewer	
The 3D post processing capability should share the same Database as PACS-WS and should not needs its own separate storage	
Stroke Analysis Software	3 concurrent user licenses
Lung Nodule Visualization and Analysis Software	3 concurrent user licenses
PET Lesion Management Software including RESIST, WHO & Functional PERCIST	3 concurrent user licenses
Extract CT angio data from CT Perfusion Exams	4 concurrent user licenses
MR Elastography Tools	3 concurrent user licenses
MR Tools for ADC, DTI, Spectroscopy and Fusion	3 concurrent user licenses
MR Multi Parameter imaging for Body and Breast	3 concurrent user licenses
MR Multi Parameter imaging for Brain	3 concurrent user licenses
Quantified MR image analysis to help enable accurate, confident diagnosis.	3 concurrent user licenses
Advanced tools for neuro analysis: 3D ASL, BrainSTAT AIF and GVF, and FiberTracking.	3 concurrent user licenses
FMRI post processing that provides clinical and research tools, in addition to structured reporting	3 concurrent user licenses
Analysis of T1 over T2 contrast and positive/negative enhancement	3 concurrent user licenses
CT Vessel analysis with automated real time tracking and labelling	3 concurrent user licenses
MR Tools for Vessel assessment	3 concurrent user licenses
Cardiac anatomical, functional and perfusion information	3 concurrent user licenses
CT Perfusion for complete perfusion assessment for Multiple Organ	3 concurrent user licenses
CT Perfusion for complete perfusion assessment for Brain	3 concurrent user licenses
An integrated, whole-body application for efficient PET/CT reading and advanced lesion management for NM and PET images	3 concurrent user licenses
Automated solution for analysis and quantification of FDG and beta amyloid brain scans for NM and PET images	3 concurrent user licenses
A comprehensive view of myocardial perfusion and function for NM and PET images	3 concurrent user licenses
Reliable lesion localization and accurate quantitative assessment for	3 concurrent

enhanced diagnostic confidence and optimized therapy planning for NM and PET images	user licenses
Calculate regional activity concentrations. Advanced & automated segmentation tools to provide 2D and 3D organ and lesion characterization for baseline and longitudinal studies for NM Studies	3 concurrent user licenses
Visual evaluation and quantification of DaTscan™ images. May assist in detection of loss of functional dopaminergic neuron terminals in the striatum, which is correlated with Parkinson's disease for NM Studies	3 concurrent user licenses
Diagnosis of PE, COPD, Emphysema and other lung deficiencies. Assess the fraction of total lung function provided by a lobe or whole lung for Lung cancer resection for NM Studies	3 concurrent user licenses
Quantify changes in radiopharmaceutical uptake over time and calculate residence time per organ for Radio-Isotope Therapy (RIT) treatment planning purposes for NM Studies	3 concurrent user licenses
Visualize and quantify relative changes in the brain's metabolic function or blood flow activity which may be resulting from Epileptic seizures, dementia, inflammation, Traumatic Brain Injury, etc. for NM Studies	3 concurrent user licenses
Quantification of Myocardial Blood Flow (MBF) and Coronary Flow Reserve (CFR) indices. May add information to physicians using Myocardial Perfusion Imaging for the diagnosis of Coronary Artery Disease (CAD), such as evidence of MVD or microvascular disease for NM Studies.	3 concurrent user licenses
5. Imaging Reporting Workstations - Radiodiagnosis	Qty
Imaging reporting workstation with 6MP FDA Approved Monitor and Single Clinical Monitor	2
<p>Fusion 6MP LED can be used as two seamless 3MP heads or one wide-screen 6MP display. Screen technology TFT AM Color LCD Dual Domain IPS-Pro and LED backlight. Active screen size (diagonal) 772 mm (30.4") Pixel pitch 0.1995 mm, color and grey scale imaging. Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technology and I guard sensor Maximum Luminance 1050cd/m2, DICOM calibrated at 600cd/m2 with Contrast ratio of 1500:1. Screen protection Protective, non-reflective glass cover Response time 18ms, Video input signals DVI-D Dual Link (2x), Display Port (2x) Display Card for proposed monitor System should come with a touch pad and should have features like Spot view, dim view and profile setting function for Radiologist</p> <p>Screen technology TFT color LCD, Active screen size (diagonal) 541 mm (21.3) Pixel pitch 0.270 mm, color and grey scale imaging. Features to improve and maintain image quality such as Ambient light compensation Maximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1. Video input signals DVI-D, Display Port Display Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16</p>	

<p>GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	
<p>Imaging reporting workstation with Dual 3MP Monitor and Single Clinical Monitor</p> <p>Screen technology TFT LCD IPS.Active screen size (diagonal) 540 mm (21.3)Pixel pitch 0.2109 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technology Maximum Luminance 900cd/m2, DICOM calibrated at 500cd/m2 with Contrast ratio of 1400:1.Screen protection Protective, non-reflective glass coverResponse time 20ms, Video input signals DVI-D Dual Link, Display PortDisplay Card for proposed monitor</p> <p>Screen technology TFT color LCDActive screen size (diagonal) 541 mm (21.3)Pixel pitch 0.270 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display Port. Display Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB, Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	2
<p>Imaging reporting workstation with Single 3MP Monitor and Single Clinical Monitor</p> <p>Screen technology TFT LCD IPS.Active screen size (diagonal) 540 mm (21.3)Pixel pitch 0.2109 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technology Maximum Luminance 900cd/m2, DICOM calibrated at 500cd/m2 with Contrast ratio of 1400:1.Screen protection Protective, non-reflective glass coverResponse time 20ms, Video input signals DVI-D Dual Link, Display PortDisplay Card for proposed monitor</p> <p>Screen technology TFT color LCDActive screen size (diagonal) 541 mm (21.3)Pixel pitch 0.270 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display Port. Display Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB, Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	4
<p>Imaging reporting workstation with Dual 2MP Monitor and Single Clinical Monitor</p>	2

<p>Screen technology LED IPS-Pro.Active screen size (diagonal) 540 mm (21.3)Pixel pitch 0.27 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technologyMaximum Luminance 800 cd/m2, DICOM calibrated at 500cd/m2 with Contrast ratio of 1400:1.Response time 10ms, Video input signals DVI-D (1x), Display Port (1x)Display Card for proposed monitor</p> <p>Screen technology TFT color LCDActive screen size (diagonal) 541 mm (21.3)Pixel pitch 0.270 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display Port. Display Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB, Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	
6. Imaging Reporting Workstations -Nuclear Medicine	Qty
Imaging reporting workstation with 4MP FDA Approved Monitor and Single Clinical Monitor	2
<p>Fusion 4MP LED can be used as two seamless 2MP heads or one wide-screen 6MP display.</p> <p>Screen technology TFT AM Color LCD Dual Domain IPS-Pro and LED backlight.Active screen size (diagonal) 772 mm (30.4)Pixel pitch 0.256 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technology and I guard sensorMaximum Luminance 1050cd/m2, DICOM calibrated at 600cd/m2 with Contrast ratio of 1500:1.Screen protection Protective, non-reflective glass coverResponse time 18ms, Video input signals DVI-D Dual Link (2x), Display Port (2x)Display Card with support for 4 displays – Online QA softwareSystem should come with a touch pad and should have features like Spot view, dim view and profile setting function for Radiologist</p> <p>Screen technology TFT color LCD, Active screen size (diagonal) 541 mm (21.3) Pixel pitch 0.270 mm, color and grey scale imaging. Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display PortDisplay Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	

<p>Imaging reporting workstation with Dual 2MP Monitor and Single Clinical Monitor</p> <p>Screen technology LED IPS-Pro.Active screen size (diagonal) 540 mm (21.3)Pixel pitch 0.27 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technologyMaximum Luminance 800 cd/m2, DICOM calibrated at 500cd/m2 with Contrast ratio of 1400:1.Response time 10ms, Video input signals DVI-D (1x), Display Port (1x)Display Card for proposed monitor</p> <p>Screen technology TFT color LCDActive screen size (diagonal) 541 mm (21.3)Pixel pitch 0.270 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display Port. Display Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB, Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	2
7. Imaging Reporting Workstations –Cardiology Department	Qty
<p>Imaging reporting workstation with Dual 2MP Monitor and Single Clinical Monitor</p> <p>Screen technology LED IPS-Pro.Active screen size (diagonal) 540 mm (21.3)Pixel pitch 0.27 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technologyMaximum Luminance 800 cd/m2, DICOM calibrated at 500cd/m2 with Contrast ratio of 1400:1.Response time 10ms, Video input signals DVI-D (1x), Display Port (1x)Display Card for proposed monitor</p> <p>Screen technology TFT color LCDActive screen size (diagonal) 541 mm (21.3)Pixel pitch 0.270 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display Port. Display Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB, Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	1
8. Speech Magic Voice Recognition Software to be quoted separately	
Nuance Speech Magic - 3 Concurrent User and 9 Voice Profiles with 3 Speech Mics with 3 Speech Mics	1

9. Hardware requirement for new Digital Healthcare Solution	
The proposed hardware should be deployed and configured in a virtualized environment using VmwareESXi Hypervisor and Network Load Balancer using Database Replication. Below mentioned architecture is provided for reference.	
I. Specification for the Healthcare Digital Solution Infrastructure	
VRTX Blade Servers Chassis	2
4 Blades Server: 2x12 Core, 128 GB RAM per Blade, 25x1.2 TB 10K HDD, Dual Port FC on Chassis, CMC Management, 2xQuad Port PCI 1G NIC Card, 4 Power Supplies	2 Per Blade Chassis
II. Specification for the Healthcare Primary Storage	
Configuration of Storage to be offered – Primary Storage - DELL EMC Unity 300	1
4 FC ports, 4 iSCSI Ports, redundant Power Supply, FC connectivity, NAS Connectivity, CIFS Connectivity, 100TB Usable on 10K RPM HDD for Image Storage. Storage should be expandable to 1PB capacity. Storage with Dual Controller and Dual port SAS connectivity per controller	
III. Specification for the Healthcare DR Storage - DELL EMC Unity 300	
Configuration of Storage to be offered – DR Storage - DELL EMC Unity 300	1
DELL EMC Unity 300 Unified Storage or Equivalent, 4 FC ports, 4 iSCSI Ports, redundant Power Supply, FC connectivity, NAS Connectivity, CIFS Connectivity, 100TB Usable on 7.2K RPM HDD for Image Storage. Storage should be expandable to 1PB capacity.	
IV. Specification for the Network Load Balancer	
F5 Network Load Balancer	2 Units
F5 Load Balancer 2200s or Equivalent	
V. Reference Solution Architecture	
<p>The diagram illustrates a two-rack architecture. Rack 1 (left) contains an F5 Load Balancer at the top, VRTX 1 with 4 Blade Servers in the middle, and Primary Storage (High Performance) at the bottom. Rack 2 (right) contains an F5 Load Balancer at the top, VRTX 2 with 4 Blade Servers in the middle, and Secondary Storage (DR Copy) at the bottom. A horizontal line labeled 'FC Connection' connects the two racks between the VRTX components.</p>	

Lifelong data back up required.

Price of below mention Reporting Workstation to be Quote Separately

10. Reporting Workstations -	Qty
<p>Unit Price of below mention Reporting Workstation to be Quote Separately</p> <p>Imaging reporting workstation with 4MP FDA Approved Monitor and Single Clinical Monitor</p> <p>Fusion 4MP LED can be used as two seamless 2MP heads or one wide-screen 6MP display. Screen technology TFT AM Color LCD Dual Domain IPS-Pro and LED backlight.Active screen size (diagonal) 772 mm (30.4)Pixel pitch 0.256 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technology and I guard sensorMaximum Luminance 1050cd/m2, DICOM calibrated at 600cd/m2 with Contrast ratio of 1500:1.Screen protection Protective, non-reflective glass coverResponse time 18ms, Video input signals DVI-D Dual Link (2x), Display Port (2x)Display Card with support for 4 displays - Online QA softwareSystem should come with a touch pad and should have features like Spot view, dim view and profile setting function for Radiologist</p> <p>Screen technology TFT color LCD, Active screen size (diagonal) 541 mm (21.3) Pixel pitch 0.270 mm, color and grey scale imaging. Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display PortDisplay Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	1
<p>Unit Price of below mention Reporting Workstation to be Quote Separately</p> <p>Imaging reporting workstation with Dual 2MP Monitor and Single Clinical Monitor</p> <p>Screen technology LED IPS-Pro.Active screen size (diagonal) 540 mm (21.3)Pixel pitch 0.27 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensation, Uniform Luminance technologyMaximum Luminance 800 cd/m2, DICOM calibrated at 500cd/m2 with Contrast ratio of 1400:1.Response time 10ms, Video input signals DVI-D (1x), Display Port (1x)Display Card for proposed monitor</p> <p>Screen technology TFT color LCDActive screen size (diagonal) 541 mm (21.3)Pixel pitch 0.270 mm, color and grey scale imaging.Features to improve and maintain image quality such as Ambient light compensationMaximum Luminance 440cd/m2, DICOM calibrated at 250cd/m2 with Contrast ratio of 1500:1.Video input signals DVI-D, Display Port. Display Card for proposed monitor.</p> <p>Workstation CPU - One Processor - Intel Xeon 6 Core, Memory - 16 GB, Hard drive - 512GB SSD or 1TB SATA, NIC - 1GB, Display Card - 2GB Card, Operating System - Windows 7 Professional 64 bit, DVD - DVDRW media drive, Power Supply - Single Power Supply, Software License - Necessary software for integration</p>	1

Warranty and CMC:

- Should provide Warranty period: As per mentioned on the Annexure and 5 yrs CMC after warranty as per mentioned on the Annexure.
- Availability of spares for at least 10 years after date of installation.
- Comprehensive warranty would include all parts-plastic, metallic, glass, batteries and rubber (without any exclusion) except the consumable accessories listed above.
- Comprehensive warranty would include periodic checking and periodic calibration of all parameters strictly as per manufacturer's recommendations (at least every 6 month) and any spares or standards required for that.
- Should have online and telephonic registration of the complaints.
- Should have resident service engineer available in Raipur within 24 hrs to solve the complaints.
- Down time of the equipment will start from the time of lodgement of first complaint.
- The company must ensure that the machine remains FULLY functional all the time for the period of warranty and CMC.
- No request in this regard will be entertained on the pretext of on availability of items with the supplier/company.
- Prices of all Equipments and CMC should be quoted separately and frozen for the period including warranty and CMC.
- Should have local service facility and should have the necessary equipment's to carry out preventive maintenance test.
- Onsite physical demonstration and training of the equipment to all the end users with all the requested facilities will be mandatory.
- Original literature, and not the photocopy, to be supplied with the quotation.
- Company should certify that model quoted is latest and not obsolete, and spares are available for minimum 5 years after warranty (5 years).
- Warranty and CMC should be provided by company and accessories should be included in warranty and CMC.
- Should provide the preventive maintenance in every 6 month and also calibrate the machine at the time PM if required.

Instructions for Online Bid Submission:

The bidders are required to submit soft copies of their bids electronically on the CPP Portal, using valid Digital Signature Certificates. The instructions given below are meant to assist the bidders in registering on the CPP Portal, prepare their bids in accordance with the requirements and submitting their bids online on the CPP Portal.

More information useful for submitting online bids on the CPP Portal may be obtained at: <https://eprocure.gov.in/eprocure/app>.

REGISTRATION

- 1) Bidders are required to enroll on the e-Procurement module of the Central Public Procurement Portal (URL: <https://eprocure.gov.in/eprocure/app>) by clicking on the link "Online bidder Enrollment" on the CPP Portal which is free of charge.
- 2) As part of the enrolment process, the bidders will be required to choose a unique username and assign a password for their accounts.
- 3) Bidders are advised to register their valid email address and mobile numbers as part of the registration process. These would be used for any communication from the CPP Portal.
- 4) Upon enrolment, the bidders will be required to register their valid Digital Signature Certificate (Class II or Class III Certificates with signing key usage) issued by any Certifying Authority recognized by CCA India (e.g. Sify / nCode / eMudhra etc.), with their profile.
- 5) Only one valid DSC should be registered by a bidder. Please note that the bidders are responsible to ensure that they do not lend their DSC's to others which may lead to misuse.
- 6) Bidder then logs in to the site through the secured log-in by entering their user ID / password and the password of the DSC / e-Token.

SEARCHING FOR TENDER DOCUMENTS

- 1) There are various search options built in the CPP Portal, to facilitate bidders to search active tenders by several parameters. These parameters could include Tender ID, Organization Name, Location, Date, Value, etc. There is also an option of advanced search for tenders, wherein the bidders may combine a number of search parameters such as Organization Name, Form of Contract, Location, Date, Other keywords etc. to search for a tender published on the CPP Portal.
- 2) Once the bidders have selected the tenders they are interested in, they may download the required documents / tender schedules. These tenders can be moved to the respective 'My Tenders' folder. This would enable the CPP Portal to intimate the bidders through SMS / e-mail in case there is any corrigendum issued to the tender document.
- 3) The bidder should make a note of the unique Tender ID assigned to each tender, in case they want to obtain any clarification / help from the Helpdesk.

PREPARATION OF BIDS

- 1) Bidder should take into account any corrigendum published on the tender document before submitting their bids.
- 2) Please go through the tender advertisement and the tender document carefully to understand the documents required to be submitted as part of the bid. Please note the
- 3) Number of covers in which the bid documents have to be submitted, the number of documents - including the names and content of each of the document that need to be submitted. Any deviations from these may lead to rejection of the bid.
- 4) Bidder, in advance, should get ready the bid documents to be submitted as indicated in the tender document / schedule and generally, they can be in PDF / XLS / RAR / DWF/JPG formats.

Bid documents may be scanned with 100 dpi with black and white option which helps in reducing size of the scanned document.

- 5) To avoid the time and effort required in uploading the same set of standard documents which are required to be submitted as a part of every bid, a provision of uploading such standard documents (e.g. PAN card copy, annual reports, auditor certificates etc.) has been provided to the bidders. Bidders can use "My Space" or "Other Important Documents" area available to them to upload such documents. These documents may be directly submitted from the "My Space" area while submitting a bid, and need not be uploaded again and again. This will lead to a reduction in the time required for bid submission process.

SUBMISSION OF BIDS

- 1) Bidder should log into the site well in advance for bid submission so that they can upload the bid in time i.e. on or before the bid submission time. Bidder will be responsible for any delay due to other issues.
- 2) The bidder has to digitally sign and upload the required bid documents one by one as indicated in the tender document.
- 3) Bidder has to select the payment option as "offline" to pay the tender fee / EMD as applicable and enter details of the instrument.
- 4) Bidder should prepare the EMD as per the instructions specified in the tender document. The original should be posted/couriered/given in person to the concerned official, latest by the last date of bid submission or as specified in the tender documents. The details of the DD/any other accepted instrument, physically sent, should tally with the details available in the scanned copy and the data entered during bid submission time. Otherwise the uploaded bid will be rejected.
- 5) Bidders are requested to note that they should necessarily submit their financial bids in the format provided and no other format is acceptable. If the price bid has been given as a standard BoQ format with the tender document, then the same is to be downloaded and to be filled by all the bidders. Bidders are required to download the BoQ file, open it and complete the white coloured (unprotected) cells with their respective financial quotes and other details (such as name of the bidder). No other cells should be changed. Once the details have been completed, the bidder should save it and submit it online, without changing the filename. If the BoQ file is found to be modified by the bidder, the bid will be rejected.
- 6) The server time (which is displayed on the bidders' dashboard) will be considered as the standard time for referencing the deadlines for submission of the bids by the bidders, opening of bids etc. The bidders should follow this time during bid submission.
- 7) The documents being submitted by the bidders would be encrypted using PKI encryption all techniques to ensure the secrecy of the data. The data entered cannot be viewed by unauthorized persons until the time of bid opening. The confidentiality of the bids is maintained using the secured Socket Layer 128 bit encryption technology. Data storage encryption of sensitive fields is done. Any bid document that is uploaded to the server is subjected to symmetric encryption using a system generated symmetric key.
- 8) Further this key is subjected to asymmetric encryption using buyers/bid opener's public keys. Overall, the uploaded tender documents become readable only after the tender opening by the authorized bid openers.
- 9) The uploaded tender documents become readable only after the tender opening by the authorized bid openers.
- 10) Upon the successful and timely submission of bids (ie after Clicking "Freeze Bid Submission" in the portal), the portal will give a successful bid submission message & a bid summary will be

displayed with the bid no. and the date & time of submission of the bid with all other relevant details.

- 11) The bid summary has to be printed and kept as an acknowledgement of the submission of the bid. This acknowledgement may be used as an entry pass for any bid opening meetings.

ASSISTANCE TO BIDDERS

- 1) Any queries relating to the tender document and the terms and conditions contained therein should be addressed to the Tender Inviting Authority for a tender or the relevant contact person indicated in the tender.
- 2) Any queries relating to the process of online bid submission or queries relating to CPP Portal in general may be directed to the 24x7 CPP Portal Helpdesk number 0120-4200462, 0120-4001002.