...nty of entire system (Spare and labour) including X-ray
...ed by 5 year

JAMMU AND KASHMIR MEDICAL SUPPLIES CORPORATION LTD.

(Public Sector Undertaking of the Government of Jammu and Kashmir)
Corporate Head Office: GMC Complex, Bakshi Nagar Jammu : **Tele:** 0191-2580842
Corporate Office: Opposite Stae Motors Garage near Hajj House ,Behmina Srinagar :
Telefax: 0194-2432008**email:** jkmsclepm@gmail.com **website**: www.jkmscl.nic.in

Corrigendum

Subject: E-bid for the finalization of Rate Contract for the Procurement of "Machinery & Equipments" for establishment of Eye Bank and Spinal Injury Centre.

In light of the decisions taken during the pre-bid meeting held on 10.11.2018 at Corporate Head JKMSCL and recommendations/suggestions made by the technical experts on the basis of representation/discussions made with the prospective bidders, the amendments/incorporations have been made for the following items in the tender document for the finalization of Rate Contract for the procurement of **"Machinery & Equipments" for establishment of Eye Bank and Spinal Injury Centre"** uploaded vide No. NIT/JKMSCL/Mach/2018/300 dated 23.10.2018:

Part A : Establishment of Eye Bank

Item NO. 1. SPECULAR MICROSCOPE (Evaluation on Physical Demonstration Basis)
The item to be read as deleted.

Item NO. 3. Radiated dry heat sterilization chamber (Evaluation on Physical Demonstration Basis)

To be read as -
The chamber uses heat generated by the sterilization cycle, which is 'absorbed' by unique drying plates located in the sterilization chamber. Heat is transferred from the drying plates directly to instruments.

The cassette sterilizers have a biological Effectiveness that has been Proven in tests for hollow and
Solid instruments at many internationally recognized institutes in Canada, the United States, and Europe.

Sterilization cycle description chart

Sterilization cycle	Solid Unwrapped	Hollow Unwrapped	Hollow wrap
Sterilization time & temperature	3.5 min. /134°C	3.5 min. /134°C	3.5 mins. /13
Total cycle time without drying cycle	8:45 mins.	10:50 mins	15:30 mins

Accessories
Cassette complete (with tray, lid & mesh rack)
Seal & lubricant kit
Waste bottle complete
Exhaust tube
Cassette lid
Cassette tray
Air compressor filter
Microbiological air filter
Instrument rack for un wrapped instruments
Instrument rack for wrapped instruments
Stat-Dri plates, pkg. Of 5
Test Strip indicators (box of 250)
Water reservoir cap & filter
Water reservoir filter

...rks followed by 5 year

Specification	
Unit size	L 555 mm x W 415 mm x H190 mm ± **10 mm for all unit dimensions**
Cassette internal dimensions	L 380 mm x W180 mm x H 75mm ± **10 mm for all unit dimensions**
Reservoir capacity	4.0 litres (distilled water)
Weight without water	33 kg
Power consumption	110-120 V, 50/60 Hz, 1300W
Optional internal printer	Type: Thermal printer
Print	20 character/line
Speed	1 line/sec.
Capacity	80 ycles roll

4. **MEDICAL AUTOCLAVES STERILIZER** **(Evaluation on Physical Demonstration Basis)**
To be read as HORIZONTAL

Chamber Diameter (mm)	Chamber Depth (mm)	Chamber Volume (Ltr.)	Steam Generator Capacity (Ltr/Kw)	Floor Space (WidthxDepth)
400	600	81	45/18	990/1800
500	900	185	55/36	1200/2300
500	1200	248	55/36	1200/2700

Quality certification – US FDA/CE/BIS.

Item No. 7 OPTICAL BIOMETER **(Evaluation on Physical Demonstration Basis)**
TO BE READ AS

Should provide highly accurate laser optic measurements for every section of the eye-from the cornea to the retina. With its integrated Olsen formula and the optional Toric Planner featuring the Barrett Toric Calculator, should supply the user with latest technology in IOL prediction for any patient.

Access to full eye data in a single click

Accurate IOL prediction is crucial for patient satisfaction in state of the art cataract surgery. Should provide all measurements needed to take full advantage of the latest generation IOL prediction methods for improved refractive outcomes with one click.

Based on the input parameters axial length (AL), anterior chamber depth (ACD) and corneal curvature (K) it should lead to an accurate IOL power prediction.

Should have latest generation IOL calculation methods such as Olsen and Barrett for excellent power IOL prediction in short, average and long eyes with standard spherical or toric IOLs.

8. CATARACT SETS **(Evaluation on Physical Demonstration Basis) Quality parameters – US FDA/CE**
9. VISION DRUMS **(Evaluation on Physical Demonstration Basis) US FDA/CE/BIS**
10. OPTHALMIC CHAIR UNIT **(Evaluation on Physical Demonstration Basis) US FDA/CE/BIS**
11. AUTOMATIC LENSOMETER **(Evaluation on Physical Demonstration Basis) US FDA/CE/BIS**
12. KERATOPLASTY SETS **(Evaluation on Physical Demonstration Basis) US FDA/CE**

...ty of entire system (Spare and labour) including X-ray
... works followed by 5 year

Part B : Spinal Injury Centre

11. Item Code Spinal 48
Radiolucent Spine Operating Tables with attachments
(Evaluation on Physical demonstration Basis)

1. General specifications of table
   a) The quoted system should be latest state of the art system from a reputed manufacturer that is sturdy, safe and easy to clean.
   b) The height of the table should be as low as possible.
   c) Demonstration of the quoted model is mandatory.
   d) The table must provide a variety of patient positioning for various fields of surgery such as Brain Surgery; Spine surgery and Peripheral Nerve surgery the table must allow comfortable surgery in all positions such as supine, lateral and prone.
   e) The system should be modular and should have mechanically encoded coupling joints.
   f) Table should have radiolucent table top and sufficient sliding to allow for sluroscopy during spine surgeries.
   g) The table base should be mobile on 4 swivel casters.
   h) The table must have a capacity to take patient load of 200 kg or more on table.
   i) The table must be provided with remote control having features of return to level, Trendelenburg, head up, head down, Back section and lateral tilt.
   j) The table must be future ready and all additional available accessories should also be quoted in the technical bid.
   k) The table must be integrable with standard head clamps and operating spine frames.
   l) Buy back offer need to be made for the old existing OT table in the operation theatre along with bid.
   m) Should have access for C-Arm and O-Arm
2. General terms and conditions :
   a) The operating table and all components/accessories must be **CE / USFDA (United** States Food and Drug Administration) approved with current and valid approval.
   b) Any deviation, however minor, from the specifications mentioned below should be expressly and clearly mentioned in the compliance sheet as part of the technical bid. Any attempt at misrepresentation will be treated seriously and will lead to automatic disqualification of the technical bid.
   c) All information in the compliance sheet should be carefully quoted with correct information. Quoting any false information, if so found out be the technical committee will result in the company being immediately disqualified from participating in the tender process.
   d) For every point stated in the compliance certificate, page number for the supporting document (either product brochure/letter from principle) must be provided. The relevant material must be highlighted with a highlighter so that it may be easily viewed by the committee.
   e) Complete information with copies of brochures should be provided to support information given in the compliances table. If the information stated in the compliance certificate is not provided in the brochures, then a certificate to prove this must be provided from the principle.
   f) Prices of all the accessories manufactured for table should be quoted separately in the bid and should be valid for a period of 10 years.
   g) The table should have uptime of 98%. Any down time of more than 2% will be charged with penalty as per the rules of the institute.

h) The principle must also give an undertaking that all the spares will be maintained by them for at least 10 years.
i) Following the tender, a pre bid meeting will be announced which will invite the potential bidders to come and provide their representation.
j) The committee hereby certifies that the specifications to the best of their knowledge are general and broad based.

3. The table should be supplied with following accessories
   a) Arm Board-2 piece
   b) Anaesthesia Screen Frame with Side Rail Clamps
   c) IV pole with Clamp (four hooks)- 2 pieces
   d) Body Strap (2 pcs)
   e) Body support with Bar Clamp -3 pieces
   f) Side Rail Clamp, multi-type-4 pieces
   g) Radiolucent Wilson Frame (1 pc)
   h) Head Arm Base -1 Piece
   i) U frame for skull clamp base attachment for sitting position
   j) All additional accessories necessary for lateral, sitting, prone and knee chest position must be provided.
   k) 3 point head clamp for cranial fixation with reusable skull pins (2 sets of 3 pins) with full table attachments.
   l) Horse shoe head rest with gel pads with its full attachments.
   m) Articulating instruments tray with side rail clamp (dimensions – 350mm x 500mm) fixable on the table itself.

Height (mm) should be adjustable	**Maximum**	**1000 mm and above**
	Minimum	420 mm-540 mm
Trendelenburg (degrees)	Head	45 degree
	Down	
	Head up	20 degree
Tilt (degrees)	Right/left	25 degree
Head (degrees)	Up	60
	Down	90
Back (degrees)	Up	90
	Down	30
Leg (degrees)	Up/Down	50 degree Up/45 degree down
Battery		Should have battery back up in case of power supply failure for at ½ hour or more
Remote Control	Cord/cord less	Should have remote control
Auxillary Control		Should have auxiliary control
Return to level		Should be there on table as well as on remote control
Foot Switch		Optional
Manual Brake Release		Should have manual brake released
Horizontal Slide		200 mm

12. Item Code Spinal 49
(Evaluation on Catalogue Basis)
C-Arm

1. System should be **ECE / US FDA approved.**
2. AERB approved.
3. Having ISO Certificate.
4. The C arm should have rotational movements and all the movements should be counter balanced.
5. The continuous fluoroscopy, digital pulsed fluoroscopy and digital radiography operating modes are to be supported.
6. The C arm should have the facility to produce instantaneous **coronal,** saggital and axial images of the scanned parts as per case.
7. Should have technology to produce optimal high image even if the region of interest is not in the centre of image intensifier i.e. multiple matrixes.
8. It should be possible to Display dose reporting also.
9. The camera system should be based on maintenance free CCD technology with a digital imaging system for fluoroscopy and radiography with TV matrix at least 1K2 & digital image rotation of 360 Degrees.
10. Image archiving on USB & DVD (DVD read/write) with it's genuine viewer software and image storage of at least 10000 or more images is mandatory – give details of storage of 2D images.
11. It must be equipped with **atleast** DICOM interface (view, store, print, worklist)
12. System should be ready to connect with HIS/PACS.
13. Noise filter with on screen indicator.
14. Should be capable of integration with leading neuronavigation systems –(eg Brain lab/Medtronics)
15. Entire system should be computer controlled and software upgradable.
16. There should be programs to reduce dose during fluoroscopy, patient dose should be displayed on the monitor.
17. It should be possible to carry out continuous fluoroscopy for prolonged procedures.
18. Cassette exposures should also be possible.
19. The C arm should have the following movements:

a) Motorized Vertical Movement: 40 cm or more.
b) Horizontal travel : 20 cm or more.
c) Angulation: +90, -25 degrees or more.
d) Orbital movement: 170 degrees or more movement. Motorised movements during 3D is preferable.
e) Source -1.1 distance 95 cm or more.
f) Vertical free space -75 cm or more.
g) Beside above give details of depth and swivel angles.
h) X-ray generator.

The X-ray generator should use high frequency technology should be controlled by microprocessor and the output should be 15 Kw or more.
Pulse fluoroscopy should be offered as a standard. The output should be as follows:

a) Pulsed Fluoroscopy: 110 kV or more and 40 mA or more
b) Digital Radiography: 110 kV and greater than 75 mA.
c) Organ specific user programs should be present.
d) Possibility to have various dose options during fluoroscopy
e) Automatic Dose Rate controlling should be done to prevent over exposure. Laser based targeting devices should be present to reduce radiation during centring on **IITV and tube side.**

21. X-ray tube:
    Rotatory anode X-ray tube with dual focal spots. The focal spot size should be 0.3 mm or less for small focal spot and 0.6 mm or less for large focal spot. Inherent filtration 3.0 mm Al or better. The tube should have over load protection.
22. Collimation:

Iris collimation should be present and it should be possible to operate the collimator without radiation 360 degree rotation should be possible: indication for LIH.

23. Image intensifier system:

    12 inch image high resolution intensifier with triple field zoom. Image rotation should be possible without giving radiation to the patient. Input screen should be cesium iodide for excellent resolution and minimum noise. Electron optics should allow consistent high resolution across the entire image field – Give details.
    Give details about the grid.

24. Patient data Management

    It should be possible to maintain a complete data base of the patient with easy retrieval. It should be possible to make additions or make changes to the patient data at a later stage.

25. Monitors:

    2 no. Medical grade TFT monitors with diagonal size of 19 inch or more. The display should be of 1K matrix with 256 gray shades. Resolution min 1024 x 1024 or better wide viewing angle.

26. Image display:

    It should be possible for having 2 nos. Screen displays (give details). Last image hold should be standard. Simultaneous display of old and new reference images.

27. Image processing
    a) Manual contrast and brightness adjustment. Edge enhancement zooming digital image rotation, horizontal and vertical flip.
    b) Alphanumeric keyboard for entering patient data and for image annotation etc.
    c) Digital Shutters (Image cropping).
    d) Digital measurement functions for distances & angle measurement (post processing).
    e) Annotation should be possible.
    f) Save and auto-save feature.
    g) Swap and auto-swap feature.

28. The machine should be capable of real time Digital Subtraction Angiography (DSA) with the following features:
    a) Acquisition frame rate: 25 frames/sec or more
    b) Storage rate: 10 fps or more.
    c) Auto request for contrast injection.
    d) Roadmap technique for dilatation.
    e) Pixel shift, variable landmark and remasking should be possible
    f) Peak opacification
    g) Movie function with START/STOP function
    h) Loop function.
    i) Magnifying glass.
    j) Interactive zoom

29. Accessories to be supplied.
    a) Lead free light-weighted aprons for radiation protection (all round protection) with 0.5 mm lead equivalence certified by BARC/AERB & ISO-08.
    b) Lead-free light-weighted aprons for radiation protection (front protection) with 0.5 mm lead equivalence certified by BARC/AERB & ISO-08.
    c) Thyroid shields – 08
    d) Lead aprons hanger – 01.
    e) Any other required accessory for DSA imaging.
    f) Lead Google – 08 nos.
    g) Gonad Shield : 08 nos.

30. Onsite comprehensive training for staff for a period of three months from date of installation or till the time staff is trained in usage as well as maintenance of equipment.

31. Warranty & CMC

a) 5 year comprehensive onsite warranty of entire system (Spare and labour) including X-ray tube and all accessories and civil, electrical and air conditioning works followed by 5 year CMC.
b) Company should confirm the availability of spare parts for 10 years from the date of supply of the equipment.
c) Company should have 24 x 7 call support facility.
d) List of spare parts will cost must be provided.

Item No. 10 : <u>Physiotherapy and Rehabilitation Equipments</u> : Kept withheld till Technical Specifications be uploaded with the list of equipments.

Item No. 11 : Instruments for Spinal Injury Centre at GMC Jammu : To be read as deleted

Please Note :

1. ***Those firms/bidders who have already uploaded his/her bid are required to re-uploaded their bids as per the amendments and corrigendum issued thereof.***
2. ***Only technical/financial bids uploaded as per revised corrigendum shall be considered for evaluation***

All the bidders are requested to keep themselves updated & submit their e-bids through e-portal **<u>www.jktenders.gov.in</u>** as per specifications & BOQs. The amendments/modifications shall be available on <u>www.jktenders.gov.in</u> .

Sd/-
(Shiv Kumar Gupta) KAS
Managing Director (JKMSCL)

Copy for information to the:-
1 Managing Director, JKMSCL
2 General Manager-K (P&S, I.T), JKMSCL.

No.: JKMSCL/Corg/2018/ 3734-35

Dated: 16.11.2018

16-11-18

General Manager (Adm),
JKMSCL