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Corrigendum-IV

Bihar Medical Services and Infrastructure Corporation Limited (BMSICL) had invited E-Bids from the interested parties for Installation, Operation and Maintenance of 128 Slice CT Scan and 3 Tesla MRI Machine Under Public Private Partnership (PPP) Mode at NMCH Patna of Bihar was floated vide Tender No.-BMSICL/2025-26/ME-454. During Pre-bid meeting various suggestions were received from different prospective bidders regarding amendment in Tender clauses and addition of technical specification of equipment, which were discussed and deliberated on by the experts. On the basis of their recommendations certain addition of the technical specification of the equipment have been made which are annexed as **Annexure-I** of this corrigendum. In order to facilitate maximum participation of bidders the tender schedule is being revised as follows:-

Tender Reference No.	BMSICL/2025-26/ME-454
Last date and time of submission of online bids	29th December 2025 till 17:00 Hrs.
Last date and time of submission of original documents of EMD, Tender Fee and Document	30th December 2025 till 14:00 Hrs.
Date, Time and Place of opening of Technical Bid	30th December 2025 (at 15:00 Hrs.) on the website of https://eproc2.bihar.gov.in in the office of BMSICL
Date and time of opening of financial Bids	To be announced later on https://eproc2.bihar.gov.in

Note:-

- 1. Bidders are advised to refer to the Annexure-I of this corrigendum before submission of bid.**
- 2. Those who have submitted their bids are requested to re-submit their bids in accordance With this corrigendum.**

Annexed: - as above

Sd/-
GM (Procurement)
BMSICL

	Annexure-I
No.	Specifications for Latest 3.0 T MRI System
A	TECHNICAL SPECIFICATIONS OF 3.0 T MRI
1	The vendor must supply the latest version of the equipment commercially available at the time of placing the supply order.
2	The quoted model must be FDA & CE approved for clinical use. The aim is to buy the latest equipment with good performance. The Country of Origin shall be US/Europe/Japan.
3	The 3.0 T MRI System quoted must be launched not before 2015.
1	MAGNET SYSTEM
	A) Whole body 3.0 Tesla Magnetic Resonance Imaging system optimized for higher performance in cardiac and neurological examinations with short superconducting magnet, high performance gradients and digital Radio frequency system. The system should have minimum 64 RF channel in one FOV.
	B) Guaranteed Homogeneity of magnet using VRMS Method should be <0.5 PPM @ 40cm DSV.
	C) It should have at least 70 cms or more patient bore with flared opening.
	D) It should have facilities of better illumination, ventilation and designed to avoid patient claustrophobia & with built in 2 way intercom for communication with patient.
	E) The FOV (Field of View) in X, Y & Z directions should be : 45 cms or more.
	F) The scan range for imaging should be 180cms or more.
	G) Magnet should be shielded from external interferences. Smaller fringe field preferred 5 Gauss and 10 Gauss Line in X, Y, Z axis specify yours Quote value for 5 gauss and 10 gauss line. The 5 Gauss line will have to be marked.
	H) Cryogen vessel to be of Helium only with appropriate super thermal shielding and refrigeration facility for minimum Helium boil-off. Specify the Helium tank capacity and boil-off rate.
	I) Display for the physiological parameters of patient on the magnet facade should be there or on the control console.
2	SHIM SYSTEM
	A) High performance, highly stable shim system with global and localized manual shimming for high homogeneity magnetic field required for (MRI / fMRI), single voxel spectroscopy (MRS) and spectroscopic imaging (MRSI), 3D shimming for volume imaging and CSI.
3	GRADIENT SYSTEM
	A) The gradient system should be actively shielded. The Gradient Imaging performance with Maximum Amplitude of 44 mT/m & peak Slew Rate with 200T/m/s should be offered.
	B) The Duty cycle should be 100 percent.
	C) Field of View should be at least 45 cm in all three axis. Specify the minimum and maximum FOV achievable for the quoted MR System.
	D) The Gradient system should have provision for eddy current compensation.
	E) Minimum TE & TR in 2D/3D should be specified in relation to the sequences.

	F) Minimum Slice Thickness in 2D & 3D should be specified in relation to the sequences.
4	RF SYSTEM
	A) A fully digital Dual RF capable of transmitting power of at least 25 KW or more. System should be offered with Multi Transmit / Multi Drive / True shape.
	B) It should also have at least minimum of 64 independent Channel in one FOV with each having bandwidth of 1MHz or more along with necessary hardware to support Quadrature/CP array coils (capability of faster reconstruction, please specify).
	C) It should support Parallel acquisition techniques like ASSET/SENSE/iPAT/Sence/Grappa/DS Sense with a factor of at least 4.
	D) Should allow remote selection of coils and/or coil elements.
5	PATIENT TABLE & COMMUNICATION
	A) The patient table/Type should be Fixed/Dockable Table/Dockable Trolley.
	B) The table should be fully motorized, computer controlled table movements in vertical and horizontal directions.
	C) The table should have facility for manual traction in case of emergency.
	D) Cushions and other patient comfort accessories. All parts of the table should be protected from liquid spill.
	E) A CCTV system with LCD display to observe the patient should be provided.
	F) The table should deliver the protocols for automatic bolus chasing in peripheral angio with automatic table movement.
	G) There should be a hand held alarm for patients.
	H) Table should be able to handle patient weight of 200kg or above.
	I) MR compatible patient shifting trolley should be offered as standard.
	J) ECG triggering, peripheral triggering and respiratory triggering gating to be provided with Wired, Bluetooth or wireless sensors for the same. The Respiratory Sensor/Respiratory Autonavicator, Kinetic Sensor/Autonavigator & BEAT Sensor/ Cardiac Autonavicator should be offered as standard.
6	SYSTEM COIL & RF COIL
	A) The system body Coil integrated to the magnet must be quadrature /CP. In addition to this coil, following Coils (preferably be with equal number of elements as the channels) be quoted. RF coils in addition to main body coil (Transmit / Receive or receive coils) auto tune, array or no tune coils. Coils for the following applications should be available with the system. Coil / RF design should support compatibility to coils manufactured by other manufacturers.
	B) All coil offered should have SENSE / Ipat2 / GEM compatibility. System body coil should be able to do metastasis study for fully Body.
	C) Please offer coils to do high resolution head, neck, spine in one go up to 75cm coverage with parallel imaging techniques.
	D) Head coil 48 Channel or Head Neck 64 Channel for advance brain imaging like Spectroscopy, fMRI.
	E) Neurovascular Imaging (48-channel or more) for neurovascular applications by combination of coils for imaging from Circle of Willis to Arch of Aorta - Single or in Combination.
	F) Spine Array/Matrix Coils for thoracic and lumbar Spine imaging—atleast 32 elements or more.

	G) Body Array/Matrix coil With at least 16 channel or more. "Higher number of elements preferred". Please specify the length of the body coil & no. of elements
	H) Dedicated coil for shoulder and Dedicated Coil for knee - 16Ch or more channel
	I) General purpose wrap around flexible coils (One Qty.) for Elbow, Hip & Wrist (Large and Medium) imaging – the coil elements & channels should be atleast 16 channel or more with parallel imaging capability. Higher elements preferred.
	G) <u>Dedicated Bilateral Breast Coil</u> with at least 8- channel or more with biopsy Compatible.
	I) Coil storage cart
7	APPLICATION SEQUENCES
	All available software's at the time of purchase should be provided in their latest version with software upgrades regularly till the machine is in use. All the routine sequences with complete, neuro suite, orthosuite, cardiac imaging suite, body imaging suite, breast imaging suite and oncology suite should be made available
	A) The system should have basic sequences package with Spin Echo, Inversion Recovery, Turbo Spin Echo with high turbo factor of 256 slice or more. Gradient Echo with ETL of 255 or more FLAIR.
	B) Single Slice, multiple single slice, multiple slice, multiple stacks, radial stack and 3D acquisitions for all applications
	C) Single and multi shot EPI imaging techniques with ETL factor of 255 or more.
	D) Fat suppression for high quality images both STIR and SPIR
	E) The system should acquire motion artifact free images in T2 studies of brain and whole body in restless patients also less sensitive to motions such as CSF and blood flow or flow artifacts, breathing, patient tremor or voluntary movements. Motion artifact free imaging with Diffusion weighted studies and musculoskeletal studied will be added advantage. This application to be compatible with PAT - like Propeller 3.0, Multivane XD, Presto, Snapshot, Blade etc. also offer body navigators
	F) Dynamic acquisition (pre and post contrast scans and time intensity studies) with capability to initiate scan sequences either from the magnet panel or from the console. The number of repeat scans and the delay time (identical or variable) should be selectable
	G) MR Angio imaging : Should have 2D/3D TOF, 2D/3D PC, MTS and TONE, ceMRA, facilities for Accelerated time resolved vascular imaging with applications like Twist/Tracks/Tricks sequences.
	H) Fat and water excitation package. Diffusion Weighted imaging. With at least B value of 5000 or more
	I) Bolus chasing with automatic and manual triggering from fluoro mode to 3D acquisition mode with moving table facility.
	J) Offer all the Non contrast enhanced MR angiography like QISS, Trance, B Trance, Inhance In-Flow IR, Inhance Delta flow, Inhance Velocity
	K) Whole body screening imaging studies for metastasis – head to toe coverage without patient repositioning should be offered.
	L. While body diffusion weighted imaging with background suppression - please specify the techniques used and specify time taken for head to toe coverage.
	M. High resolutions Abdominal and liver imaging in breathhold and free breathing modes with respirator triggered volume acquisitions.

	N. The system should have basic and advanced MRCP packages including free breathing and 3D techniques
	O. The system should facility for flow quantification of CSF, Vessel flow and hepatobiliary system.
	P. The system should have the hydrogen, Single Voxel spectroscopy, multivoxel, Multislice & Multiangle 2D, 3D Spectroscopy and chemical shift imaging in 2D/3D. The complete processing/post-processing software including color metabolite maps should be available on main console.
	Q. Advanced breast imaging package. Please offer High-resolution 3D isotropic fat-suppressed gradient-echo T1W imaging of both breasts simultaneously - Like Vibrant, Bliss + eThrive. Should be PAT compatible
	R. Perfusion imaging of brain and breast with software for analysis
	S. Susceptibility weighted imaging to detect micro bleeds with phase for differentiation of calcium - Like SWI, SWIP, SWAN
	T. Multi Direction DWI and DTI with min 256 directions, (Fibertrack, Fibertrack Specialist, DTI tractography)
	U. Functional imaging with package for BOLD imaging like, Syngo Bold, Bold Specialist and evaluation line Inline Bold, Iview Bold and spectroscopic imaging and processing package.
	V. Arterial spin labeling sequences of brain with software applications Like 3DASL/ pCASL.
	W. High resolution 3D imaging for inner ear.
	X. High resolution imaging for cartilage and musculoskeletal imaging (CARTIGRAM/ Cartilage Assessment/ MapIT)
	Y. Advanced 3D spine applications package for nerve root analysis/Peripheral nerve imaging
	Z. Please quote to do high resolution 3D isotropic sequences for spine like CUBE, SPACE, VISTA
	AA. Please quote for high resolution time resolved angiography like TRICKS, TWIST, TRACS +Key Hole
	BB. Please quote for in phase/out phase 2D/3D Dual echo sequences for body applications
	CC. Single sequence for Triglyceride Fat and iron .quantification software for Liver should be offered - Like IDEAL IQ, Liver LAB, mDixon Quant . Also quote the iron quantification package for Liver and cardiac
	DD. Small FOV Diffusion like FOCUS/ ZOOMiT should be offered.
8	COMPUTER SYSTEM IMAGE PROCESSOR / OPERATOR CONSOLE
	The vendor should supply the latest computer system along with the MR system to handle all the latest applications available on the MR platform. During the warranty period, any hardware updates that are globally should be supplied and installed
	(a) Computer should be latest in the industry, fast and efficient
	(B) One color console for acquisition, all calculations, post processing etc Console must have full colour with user define protocols with programmable inter scan delay
	(C) Necessary image processor with large RAM for ultra-fast image reconstruction should be provided It should be at least 32 or higher GB RAM. Please specify RAM and reconstruction speed in images per second for full FOV 256 matrix. Higher will be preferred.

	(D) Computational Speed to match the single shot Echo Planar Imaging (EPI). Interactive angiogram, multi-planar three dimensional (3D) reconstruction, surface rendering, dynamic Imaging, vascular Imaging/angiography, functional imaging, DTI etc. The main host computer should have at least 18-inch or more TFT/LCD type color monitor.
	(E) The main console should have facility for music system for the patient in the magnet room.
	(F) Filming and adequate storage for images and other applications.
	(G) Total hard disk memory to be sufficient to store at least 250,000 images of 256 x 256 matrix data size.. Systems offering higher storage will be preferred. The system should have CD/DVD archiving facility on the main console and work station.
	(H) Dual DVD write/CD Read/Rewrite drive for writing of images, spectra and raw data along with the necessary software for reading the Images and spectra on DVD/CD storing capabilities. Provision for archival of k-space data and raw (unprocessed) images.
	(I) There should be a provision of retrieval of the reconstruction data (raw files) in an user friendly manner.
	(J) DICOM interface to hook DICOM dry/laser camera capable of storing printing 1024 x 1024 matrix size images at least in 16 format without loss of digital resolution.
	(K) The system should be capable to connect to PACS through RIS/HIS at no extra cost. Highest version of DICOM connectivity be provided.
	(L) Remote diagnosis
9	OEM Independent Workstation
	(A) Dedicated OEM Independent Workstation is required with the availability of all necessary software including basic post processing software including MIP, MPR, Surface reconstruction and volume rendering technique advanced post processing offered applications like exam preparation & processing, package, including perfusion quantification, MTT, TTP, Advanced diffusion and DTI, Processing 2D/3D CSI data, with color metabolite mapping, diffusion color maps, quantification of CSF flow data, vascular analysis package, fusion, breast analysis.
10	Latest Advanced Technologies
	(A) Latest AI Techniques for scan time reduction should be offered like AIR Recon/ Deep Resolve/SMARTSpeed.
	(B) Latest Deep Learning Technologies with Neural Network based for SNR Improvement & Scan Time reduction should be offered like AIR Recon DL/ Deep Resolve Boost & SWIFT Brain.
	(C) Latest Time Reduction techniques like Turbo Suite Excellence / Hyperworks should be offered.
11	SAFETY FEATURES
	A) The magnet system should include an Emergency Ramp Down unit ERDU for fast reduction of the magnetic field with Ramp Down time below 3 minutes
	B) The magnet should have quench bands that contain the fringe fields to a specified value in the event of a magnet quench
	C) Real time SAR calculation should be performed by software to ensure that RF power levels comply with regulatory guidelines and are displayed on each image
	D) The system shall have manual override of the motor drive for quick removal of the patients from the magnet bore

	E) Temperature sensor (built in) for magnet refrigeration efficiency must be provided
12	SUITABLE RF ENCLOSURE
	A) RF cabin: The system should be supplied with RF cabin & RF room shielding, RF Door screen, and interiors for the same should be carried out suitably
13	ACCESSORIES
	A) Water chiller for Cold Head/Gradients
	B) Non-ferromagnetic patient transfer trolley of international make should be provided (2 nos.)
	C) 3 T MR compatible music system
	D) MR Compatible Wheel Chair
14	<u>Training</u>
	Onsite training : The application specialist of the company will stay on the site of installation for training the utilization of the equipment for a total period of Two months for the faculty and Radiographers.
15	Power Dual head Injector for MRI
	Tender specifications for 128 slice Computed Tomography Scanner with AI Automatic patient positioning
	State of the art Whole body & Cardiac 64rows, 128-slice CT scanner with 38mm or more physical detector Z axis dimension. The quoted model should be with iterative reconstruction technology for dose reduction. The system should be able to position patient automatically with FAST AI 3D Camera.
Sl. No	Specification
1	Gantry
1.1	Aperture ≥ 70 cm
1.2	Scan field of view ≥ 50 cm
1.3	Integrated display panel on Gantry front showing patient and/or machine information.
1.4	Laser Lights: The gantry should have 3D positioning Laser lights
1.5	Tilt: ± 30 degree Physical/digital tilt or better
2	X-RAY GENERATOR
2.1	Output capacity (actual): ≥ 72 KW
2.2	Continuous helical time: ≥ 100 s
3	TUBE ASSEMBLY
3.1	Tube Voltage (actual): 80-140 kV or better (mention kVp steps)
3.2	Max. Tube current range (Actual): 20-600 mA or better
3.3	Mention the Dual Focal spot size (as per IEC 60336: 2005)
3.4	Tube Anode Heat capacity (actual): ≥ 7 MHU
3.5	Scan time for full 360-degree rotation for cardiac & whole body: ≤ 0.35 sec
4	DETECTOR
4.1	Number of physical rows: ≥ 64 physically distinct rows

4.2	Number of slices: Ability to acquire or generate 128 slices or better per 360-degree rotation
4.3	Z axis axial coverage in 360-degree rotation with 1:1 pitch: $\geq 38\text{mm}$ for all scan mode
4.4	Pitch: Pitch should be freely selectable between 0.5-1.5 or more
4.5	Range of acquisition & visualization slice thickness (Axial mode & Helical mode): 0.625 — 5 mm or better
5	PATIENT TABLE
5.1	Maximum load capacity: $\geq 200\text{ kg}$
5.2	Scannable range (Axial & Helical): $\geq 1500\text{ mm}$
5.3	Longitudinal table speed: $\geq 150\text{ mm per sec}$
5.4	Table Positioning: Reproducibility of table positioning (mm) should be $\pm 0.25\text{ mm}$
5.5	Table dimensions: Specify the width and length of the table, distance between gantry front and table base (minimum and maximum should be specified)
6	SCANNING ACQUISITION FEATURES ON CONSOLE
6.1	Dedicated metal artifact reduction for plain & contrast studies with single exposure:
6.2	Dual Energy Scan acquisition & processing: renal stone characterization, gout & metal artifact removal
6.3	Temporal resolution: Must be 44 msec or lower
6.4	Acquisition of gated & non-gated study in same sequence & display in same image
6.5	Pulmonary Angio: Free Breathing pulmonary/dynamic angio of coverage 30 cm or more
6.6	ECG Gating: Prospective ECG trigger facility
6.7	ECG Editing: Facility for ECG editing for removing irregular or ectopic beat (Retrospective)
6.8	Dynamic Neuro perfusion: 4D Perfusion coverage of 8 cm or better
6.9	Artificial Intelligence (AI) 3D Camera based automatic patient positioning system to be offered as standard. The offered system should be able to adjust the patient centering automatically in x-y-z with the help of 3D camera & position a patient for a particular protocol.
7	PATIENT REGISTRATION
7.1	It should be possible to do pre-registration of patient at any time prior to scans
7.2	Special emergency registration should be possible without interacting with console computer
7.3	System must transfer patient information from departmental existing RIS & HIS via DICOM Work list
	System must transfer examination information and Images from scanner into departmental existing HIS & RIS and PACS
8	PATIENT COMUNICATION
8.1	There should be Integrated patient two-way communication system capable of playing recorded audio
8.2	Automatic Patient instruction: A standard set of commands for patient communication before, during, and after scanning should be available In the English and Hindi language
9	OPERATOR CONSOLE WITH TABLE

9.1	Operator console should be supplied with Console Table, Chair & monitor adjusting bracket/stand etc
9.2	Minimum of 4,00,000 \$12x\$12 images should be able to store on console
9.3	Dual 19" high resolution monitors with a display on 1024X1024 or better
9.4	System should be able to export DICOM format with DVD/CD/USB other than png, jpg, avi, movie etc
10	PROCESSING APPLICATION ON CONSOLE
10.1	MPR: Real-time multi-planar reconstruction (MPR) of secondary views, with viewing perspectives in all planes including curved & orthogonal MPR
10.2	ROI Parallel evaluation of multiple ROI In circle, irregular and polygonal forms. Evaluation:
10.3	Statistical Area/ volume, Standard deviation, Mean value, Image annotation and labeling, Angle measurement, Distance measurement Histogram, rime intensity curves, Peak enhancement images, Time-to-peak images. Evaluation:
10.4	2D: including image zoom and pan, image manipulations, including averaging, reversal of grey-scale values, and mirroring; image filter functions, including advanced smoothing algorithm and advanced bone correction
10.5	3D: MIP, Min IP, VRT and other advanced 3D applications and color-coding for different tissues.
10.6	Comparison: Able to compare exams with prior studies including oncology cases, neuro cases, body imaging, comparison according to RECIST criteria, PETCT cross time point evaluation.
10.7	CT Automatic table and bone subtraction in a angiography. Single click bone removal, manual and automatic vessel tracking, Carotid Stenosis measurement, Single energy calcium removal Angiography:
10.8	CT brain perfusion: Software for advanced cerebral perfusion study with stroke protocol and summary maps of the perfused area
10.9	CT Colonoscopy & Endoscopy: CT Colonoscopy & Endoscopy with virtual navigation
11	IMAGE POST PROCESSING
11.1	Platform: Latest OEM Workstation with multi-modality processing capabilities (syngo.via VB70 or later/ISP 12/AW 4.7/similar
12	Software licenses
12.1	MPR Real-time multi-planar reconstruction (MPR) of secondary views, with viewing perspectives in all planes including curved & orthogonal MPR.
12.2	ROI Parallel evaluation of multiple ROI In circle, irregular and polygonal forms. Evaluation

12.3	Statistical Evaluation Area volume, Standard deviation, Mean value, Image annotation and labeling, Angle measurement, Distance measurement Histogram, time intensity curves, Peak enhancement images, Time-to-peak images.
12.4	2D 2-D, including image zoom and pan, image manipulations, including averaging, reversal of grey-scale values, and mirroring; image filter functions, including advanced smoothing algorithm and advanced bone correction
12.5	3D MIP, Min IP, VRT and other advanced 3D applications and color-coding for different tissues.
12.6	Comparison Able to compare exams with prior studies including oncology cases, neuro cases, body imaging, comparison according to RECIST criteria, PETCT cross time point evaluation.
12.7	CT Angiography: Automatic table and bone subtraction in a angiography, Single click bone removal, manual and automatic vessel tracking, Carotid Stenosis measurement, Single energy calcium removal
12.8	CT perfusion brain Software for advanced cerebral perfusion study with stroke protocol and summary maps of the perfused area
12.9	Body CT perfusion Multi-slice calculation of blood flow, blood volume, permeability images, Vol measurement tools for perfusion characteristics
12.1	Fusion rigid registration with two different volumes for multi-time point compare
12.11	Lung Nodule analysis & segmentation lung nodule segmentation and analysis, lung segmentation with parenchyma analysis
12.13	Multi time point compare with WHO & RECIST Should be offered as standard
12.15	Cardiac Function analysis Cardiac analysis including LV & RV Analysis with EF & bulls eye
12.16	Automated spine labelling software:
12.17	Software to generate, adjust and export meshes for 3D printing purposes
12.18	TAVI planning software
13	IMAGE RECONSTRUCTION
13.1	Recon speed: Minimum 40 frames per second
13.2	Recon Matrix: 1024 x 1024
13.3	Real time display speed: 50 fps or better
14	IMAGE QUALITY
14.1	High contrast Spatial Resolution obtained with entire width of the detector: It should be not less than 18 lines pair per cm or better maximum at 0-2% MTF X-Y axis acquired with beam collimation not less than 38cm on Catphan Phantom

14.2	Low-contrast Mention the values	resolution:
14.3	Spatial resolution: ≤ 0.30 mm	
16	DOSE REDUCTION TECHNIQUES	
	16.1 Input	
	Input: Basic Iterative Recursive/Exact - type: HIS, or more done reducing software	
	RIS : <2% ADMIT: FIRST or similar	
	16.2 Profile Settings	
	Perspective rating should be provided for dose reduction	
	16.3 Organ Dose modulation:	
	Advanced dose limiting for critical organs using ODM / xCARE or equivalent should be inferred as standard	
	16.4 Doze Modulation of tube current along X-Y & Z-axis for different patient size and organs should be offered as standard	
	16.5 Pediatric & infant Imaging protocols with Low dose BMI based protocols must be provided	
	17 NETWORKING	
17.1	DICOM Storage (Send/Receive)	
17.2	DICOM Modality Worklist User	
17.3	Modality Performed Procedure Step (MPPS)	
17.4	DICOM Print User	
17.5	Query/Retrieve User and Provider	
17.6	DICOM 3 compliance	
17.7	Integration with departmental RIS and HIS must be done. Any licenses or software needed for the same is to be provided by the vendor	
18	LOCAL ARCHIVING/Saving	
18.1	Removable Media	
18.2	DVD-RAM archive	
18.3	DICOM CD Writer	
19	ACCESSORIES	
19.1	DUAL HEAD PRESSURE INJECTOR	
19.1.1	Dual head Pressure injector with 20 syringes and extension tubes	
19.3	UPS	
19.3.1	Power: Full System UPS for 15 min backup with maintenance free batteries	
19.4	LEAD GLASS: Lead glass of size 6ft x 3ft should be installed between examination room and console room	
19.5	Dual Head Injector for C.T	