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| C:\Users\BMSICL\Desktop\bmsicl_logo.jpg | **Bihar Medical Services & Infrastructure Corporation Limited 4th floor State Building Construction Corporation Limited. Hospital Road, Shastri Nagar, Patna 800023, Phone/Fax: +91612 2283287,+ 91612 2283288** |
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**Corrigendum-II**

Bihar Medical Services and Infrastructure Corporation Limited (BMSICL) had invited E-Bids from the interested parties for the procurement, rate contract and the supply of medical equipment for different Govt. Medical Colleges and Hospitals of Bihar vide Notice Inviting Tender No.-BMSICL/2019-20/ME-141. A TSC meeting was held on 19.09.2019. In the meeting some technical specification amendments have been made as per the Annexure-I of this corrigendum. In order to facilitate maximum participation of bidders the tender schedule is being revised as follows:-

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| --- | --- |
| Tender Reference No.  | **BMSICL/2019-20/ME-141** |
| Date and time for downloading of bid document  | **Up to 11th September 2019 till 17:00 Hrs.**  |
| Last date and time of submission of online bids | **12th September 2019 till 17:00 Hrs.**  |
| Last date and time of submission of original documents of EMD, Tender Fee and Document. | **13th September 2019 till 14:00 Hrs.**  |
| Date, Time and Place of opening of Technical Bid | **13th September 2019 (at 15:00 Hrs.) on the website of** [**www.eproc.bihar.gov.in**](http://www.eproc.bihar.gov.in/)**in the office of BMSICL**  |
| Date and time of opening of financial Bids  | **To be announced later on www.eproc.bihar.gov.in**  |

**Note:-**Please refer to the **Annexure-I** of this corrigendum before submission of bid.

 **Sd/-**

**GM (Procurement)**

 **BMSICL**

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| **Annexure-I** |
| **Sl no.**  | **Technical Specification before amendments** | **Technical Specification after amendments**  |
| **1. Technical Characteristics (specific to this type of device)** |
| 1 | Five part differential | System should be 5 part differential with absolute and percentage counts for reticulocytes and individual WBC differentials along with atypical parameter like Blast 5% &# and atypical lymphocytes % &#  |
| 2 |  24 parameters, all different WBC’s should be measured directly. |  24 parameters, all different WBC’s should be measured directly along with added accuracy, reliability and interpretation through following advantages: a) Reticulocyte count # and % availability with facility to consume reagent only when reticulocyte test is ordered and not in all CBC tests and ON/OFF. B)Scattergram and histogram for RBCs as well as platelets. c) ability to detect atypical scattering due to malaeial parasitic infection along with flag. Proposed change:-24 parameters, all different WBC’s should be measured directly along with optical method used for PLT and RBC, system shall be able to detect and flag samples with malarial parasite.  |
| 3 | Advanced, integrated self –cleaning system. | Advanced, integrated self –cleaning system.using not more than 4 reagents for measurement (including reticulocyte) and cleaning should have off board reticulocyte reagent. |
| 4 | On –screen patient results trending. | No change |
| 5 | Stores 5,000 test results with histograms and scatter grams | No change |
| 6 | Integrates with common practices management systems. | No change |
| 7 | Maximum sample required 100 micro liter sample size permits whole blood analysis from venous collections. | No change |
| 8 | Parameters Total leukocytes (White Blood Cells) and Differential (In absolute numbers and %) for: | No change |
| 9 | Sample Material Capillary or venous (EDTA) whole blood. | No change |
| 10 |  Linearity of all parameters. | No change |
| 11 |   Measuring time within 60 sec. | No change |
| 12 | System must have throughput of at least 60 samples per hour in all discrete modes. |   System must have throughput of at least 75 samples per hour in all discrete modes. |
| 13 |  Manual mode. | No change |
| 14 |  Stat mode. | No change |
| 15 | Pre-diluted mode and whole blood mode. | No change |
| **2. User’s Interface** |
|   | Printer, Keyboard, barcode reader, PC. | No change |
|   | **3. Software and/or standard of communication (where ever required)- NA** |
| **3. PHYSICAL CHARACTERISTICS** |
| 3.1 | Dimensions (metric) | Deleted  |
| 3.2 | Weight (lbs, kg) | Deleted  |
| 3.3 | Noise (in dBA) | Deleted  |
| 3.4 | Heat Dissipation: Should maintain nominal Temp and the heat should be disbursed through an cooling mechanism. | No change |
| 3.5 | Mobility, portability | No change |
| **4. ENERGY SOURCE (electricity, PS, solar, gas, water, C02…)** |
| 4.1 | Recharging unit: Input voltage- single/3-phase. | Recharging unit: Input voltage- single/3-phase. |
| 4.2 | Battery operated | Deleted  |
| 4.3 | Tolerance (to variations, shutdowns)= +-10% | No change |
|
| 4.4 | Pressure gauge | Deleted  |
| 4.5 | Operating temperature | Analyzer: 4-50C degree (39-122 F degree). |
| Capillary samples from finger stick: 18-25 C degree (67-77 F degree). |
| 4.6 | Protection | N/A |
| 4.7 | Power consumption | Upto 500VA |
| **5. ACCESSORIES, SPARE PARTS, CONSUMABLES** |
| 5.1 |  2D- Barcode Scanner | No change |
|
| 5.2 | Reagents: All the reagents required for 1000 tests should be supplied with the equipment along with one set of tri level control. | Reagent consumption chart for 50 tests per day (including two times ON/OFF) should be provided and price evaluation will be done on the basis of cost of equipment + Cost of CMC + Cost of Reagent. |
| 5.3 | Closed System rates to be closed for all test. |
| 5.4 |   Online UPS System for 30 minutes back up. | No change |
| **BIDDING/PROCUREMENT TERMS/DONATION REQUIREMENTS** |
| **6. ENVIRONMENTAL AND DEPARTMENTAL CONSIDERATONS** |
| 6.1 | Operating condition: Capable of operating continuously in ambient temperature of 10 to 50 deg C and relative humidity of 15 to 90% in ideal circumstances. | No change |
| 6.2 | Storage condition: Capable of being stored continuously in ambient temperature of 0 to 50 deg C and relative humidity of 15 to 90% | No change |
| 6.3 | Disinfection: Parts of the Device that are designed to come into contact with the patient or the operator should either be capable of easy disinfection or be protected by a single use/disposable cover. | No change |
| 6.4 | User’s care, Cleaning, Disinfection  | No change |
| **7. STANDARDS AND SAFETY** |
| **7.1** | Should be FDA/CE/BIS approved product. |  Should be FDA &CE (with notified body) approved product. |
| **7.2** | Manufacturer and Supplier should have ISO 13485/US(FDA)/EU(CE) certification for quality standards. |  Should be FDA &CE (with notified body) approved product. |
| **7.3** | Shall meet internationally recognized for Electromagnetic Compatibility (EMC) for electromedical equipment: 61326-1. | No change |
| **7.4** | Certified to be compliant with IEC 61010-1, IEC 61010-2-281, 61010-2-101 for safety. | No change |
| 7.5 | Manufacturer/Supplier should have ISO certificate for quality standard. | No change |
| **8. TRAINING AND INSTALLATION** |
| 8.1 | Pre-installation requirements: nature, values, quality, tolerance | No change |
|
| 8.2 | Certificate of calibration and inspection from the manufacturer. | No change |
| 8.3 | Training of staff (medical, paramedical, technicians) | No change |
| No change |
|   | **9. WARRANTY AND MAINTENANCE :-** |
|   | 3 Years, including all spares and calibration. | No change |
|   | **10. Documentation** |
|   | **10.1 Operating manuals, service manuals, other manuals.** |
|   | Should provide 2 set ( hardcopy and soft-copy)  |
|   | 1)      User, technical and maintenance manuals to be supplied in English/Hindi language along with machine diagrams; | No change |
|   | 2)      List of equipment and procedures required for local calibration and routine maintenance. | No change |
|   | 1)      Service and operation manual (original and copy) to be provided. | No change |
|   | 2)      Advanced maintenance tasks documentation. | No change |
|   | 3)      Certificate of calibration and inspection. | No change |
|   | **10.2 Other accompanying documents** |
|   | List of important spares and accessories, with their part numbers and cost. |
|   | **11. Notes** |
|   | **11.1 Service support contact details (Hierarchy wise; including a toll free/landline number)** |
| 11.1a | Contact details of manufacturer, supplier and local service agent to be provided. | No change |
| 11.1b. | Any contract (AMC/CMC/add-hoc) to be declared by the manufacturer; | Three Years Comprehensive warranty and Seven Years CMC  |
|   | **11.2 Recommendation or warnings** |
| 11.2a | Any warning signs would be adequately displayed.  | No change |