

14-05-2019

Amendment No. 6

Ref.: Tender Enquiry: HITES/PCD/MP-09/CT-MRI-PPP/18-19 dated: 12.02.2019. & subsequent amendments.

Sub: Amendment No. 6 to the referred tender enquiry

The following changes are being incorporated in the above referred Tender Enquiry Document

SECTION I**NOTICE INVITING TENDER (NIT)**

Date & Time of 3rd Pre-bid meeting	17.05.2019, 15:00 Office of Principal secretary, Department of Medical Education, 3rd floor , New building, Vallabh Bhawan, Bhopal
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The following changes are being incorporated in to the TED:

Existing	Read as
3. INTENTION	
3.7	
<p>The service provider should ensure the availability of atleast one radiologist at the facility with minimum qualification as defined below:</p> <ul style="list-style-type: none"> ● M.D. in Radiodiagnosis from an MCI recognised Institute with 1 year as Senior Resident in a recognized Medical College. <p>or</p> <ul style="list-style-type: none"> ● DNB from an MCI recognised Institute with 2 years as Senior Resident in a recognized Medical College/ <p>A Fixed Retainership Fee of Rs, 75,000 per month fo only one Radiologist would be paid to the service provider, by the authority till the medical college recruits its own radiologist. The radiologist kept on retainership fees by the authority could be counted (at discretion of Authority on need basis) as faculty during MCI Inspections. The Service Provider / Radiologist shall submit "No Objection Certificate" regarding this while signing the Contract.</p> <p>Telereporting is not allowed.</p>	<p>1) The service provider has to ensure the availability of atleast one radiologist in the facility of GMC where he is the successful bidder with minimum qualification as defined below:</p> <ul style="list-style-type: none"> ● M.D. in Radiodiagnosis from an MCI recognised Institute with 1 year as Senior Resident in a recognized Medical College. <p>or</p> <ul style="list-style-type: none"> ● DNB from an MCI recognised Institute with 2 years as Senior Resident in a recognized Medical College <p>2) A Fixed Retainership Fee of Rs, 75,000 per month for only one Radiologist would be paid to the service provider, by the authority (if the authority utilizes the services of Service provider's radiologist for reporting of Hospital referred patients or till the medical college recruits its own radiologist).</p> <p>3) The radiologist kept on retainership fees by the service provider could be used by the authority for Counting (at discretion of Authority on need basis) as faculty during MCI Inspections. The Service Provider / Radiologist shall submit "No Objection Certificate" regarding this while signing the Contract.</p> <p>4) Telereporting is not allowed</p>

Existing	Read as
Clause 3.8 & Clause 15. FINANCIAL PROPOSAL BID	
<p>Bidding Criterion would be Highest Annual premium. All bidders have to compulsorily bid for all GMCs in a particular schedule.</p> <p>Bidders are free to bid for one or more schedules depending up on fulfillment of other prequalification criteria.</p> <p>However first right to match the highest bid of Individual GMC in a schedule would be given to the overall H1 bidder in that particular schedule.</p> <p>In case the overall H1 bidder does not wish to match the Highest bid for a particular GMC(of that schedule), the respective H1 bidder for that GMC would be awarded the contract. Contract would be individually awarded by respective GMC to the respective H1 Bidder, selected as above.</p> <p>Schedules are defined below: Schedule: 1- Sagar, Datia, Ratlam, Vidisha Schedule 2: Jabalpur, Chhindwara, Shahdol Schedule 3: Indore, Shivpuri, Khandwa</p> <p>In case of non acceptance of Notification of Award at any/all of the GMCs by the service provider, all the EMDs submitted by the service provider would be forfeited and all the LoAs issued to the service provider would be cancelled. Further, the service provider would be black listed for a period of 10 years</p>	<p>Bidding Criterion would be Highest Annual premium offered for every GMC in the schedule. All bidders will have to compulsorily bid for all GMCs in a particular schedule.</p> <p>Bidders are free to bid for one or more schedules depending upon fulfillment of other prequalification criteria. However, first right to match the highest bid of Individual GMC in a schedule would be given to the overall H1 bidder for all GMCs taken together in that particular schedule and such overall H1 bidder will be given Notification of award for such GMCs where he has opted to match the highest bid.</p> <p>In case the overall H1 bidder does not wish to match the Highest bid for a particular GMC(of that schedule for which he is the overall highest bidder), the respective H1 bidder for that particular GMC would be given the Notification of award. Contract would be individually awarded by respective GMCs to the respective H1 Bidder, selected as above.</p> <p>Schedules are defined below:</p> <p>Schedule: 1- Sagar, Datia, Ratlam, Vidisha Schedule 2: Jabalpur, Chhindwara, Shahdol Schedule 3: Indore, Shivpuri, Khandwa</p> <p>In case of non acceptance of Notification of Award for any of the GMCs by the successful bidder so selected, all the EMDs submitted by such bidder in other GMCs would be forfeited and all the Notification of Awards issued to the bidder in other GMCs would be cancelled. Further, the bidder would be black listed for a period of 10 years to participate in any bid of Medical Education Department of Madhya Pradesh.</p>
4.ESSENTIAL QUALIFYING CONDITIONS	
4.2	
<p>Financial Status and credibility: The bidder's Hospital/company / Group Radiology center should have minimum annual turnover of Rupees 2 crores in each of the last three financial years (2015-16, 2016-17, 2017-18).</p>	<p>Financial Status and credibility: The bidder's Hospital/company / Group Radiology center should have minimum average annual turnover as mentioned below in each of the last three financial years (2016-17, 2017-18, 2018-19).</p> <p>Schedule: 1- Sagar, Datia, Ratlam, Vidisha: 8 crs. Schedule 2: Jabalpur, Chhindwara, Shahdol: 6 crs. Schedule 3: Indore, Shivpuri, Khandwa: 6 crs.</p> <p>If a bidder quotes for more than one schedule, the turn over criteria will be applicable cumulatively and schedules will be awarded based on maximum benefit to the exchequer.</p>
7.36 EDUCATION & TRAINING ON FACILITY	
Added Clause 7.36-i)	The Service provider will have to provide additional films

Existing	Read as
	<p>required by the Radiology faculty . The faculty can ask for a maximum of 75 Nos of films (inclusive of CT / MRI) per month for teaching purposes</p> <p>These 75 films would be over and above the films given to the patients.</p>
18. PENALTIES & TERMINATION	
18.2 Service penalty B & C	
<p>B) In case of non-working of machines due to breakdown/Preventive maintenance/Up-gradation, the service provider will have to get them functional within 72 hours. In case, the breakdown is not rectified in 3 days then after that Rs 10000.00 (Rs. Ten Thousand only) per day will be charged, as penalty charges. The maximum permissible downtime with penalties is 45 days in a calendar year and maximum 7 days in a month. After this duration the Hospital is free to forfeit the performance security, terminate the full or partial contract agreement and may blacklist the service provider. Preventive Maintenance must be done preferably during weekends with an advance written notice of atleast 48 hours to the Authority. However, if the service provider is arranging CT/MRI scan from other facility (with same specification) in the city in given time(at its own cost including transportation) then this penalty shall not be imposed, however the maximum permissible downtime of 45 days in a year and 7 days in a month shall be applicable for rescinding the agreement..</p> <p>C) The time permissible, without penalty, in a stretch is 3 days and beyond that it shall attract penalties. Summing up all such events of non penalty in a calendar year permissible are 18 days, making an up time of 95 % for the service.. The uptime calculations shall be done every 6 months hence this means that the service should not be down for more than 9 days in every six months, otherwise penalty charges shall apply as per clause 8.2 (B)</p>	<p>B) In case of non-working of machines due to breakdown/Preventive maintenance/Upgradation, the service provider will have to get them functional within 120 hours. In case, the breakdown is not rectified in 5 days then Rs 10000.00 (Rs. Ten Thousand only) per day will be charged, as penalty charges. The time permissible, without penalty, in a stretch is 5 days and beyond that it shall attract penalties. Summing up all such events of non penalty in a calendar year permissible are 18 days, making an up time of 95 % for the service.. The uptime calculations shall be done every 6 months hence this means that the service should not be down for more than 9 days in every six months, otherwise Rs 10,000.00 (Rs Ten Thousand only) per day penalty charges will be applicable .</p> <p>c) The maximum permissible downtime with penalties is 45 days in a calendar year and maximum 7 days in a month. After this duration the Hospital is free to forfeit the performance security, terminate the full or partial contract agreement and may blacklist the service provider. Preventive Maintenance must be done preferably during weekends with an advance written notice of at least 48 hours to the Authority. However, if the service provider is arranging CT/MRI scan from other facility (with same specification) in the city in given time(at its own cost including transportation) then this penalty shall not be imposed.</p>
Clause:7.21	
<p>The service provider should ensure the availability of atleast one radiologist at the facility with minimum qualification as defined below:</p> <ul style="list-style-type: none"> ● M.D. in Radiodiagnosis from an MCI recognised Institute with 1 year as Senior Resident in a recognized Medical College. <p>or</p> <ul style="list-style-type: none"> ● DNB from an MCI recognised Institute with 2 years as Senior Resident in a recognized Medical College/ 	<p>1)The service provider has to ensure the availability of at least one radiologist in the facility of GMC where he is the successful bidder with minimum qualification as defined below:</p> <ul style="list-style-type: none"> ● M.D. in Radiodiagnosis from an MCI recognised Institute with 1 year as Senior Resident in a recognized Medical College. <p>or</p> <ul style="list-style-type: none"> ● DNB from an MCI recognised Institute with 2 years as Senior

Existing	Read as
<p>A Fixed Retainership Fee of Rs, 75,000 per month for only one Radiologist would be paid to the service provider, by the authority till the medical college recruits its own radiologist. The radiologist kept on retainership fees by the authority could be counted (at discretion of Authority on need basis) as faculty during MCI Inspections. The Service Provider / Radiologist shall submit "No Objection Certificate" regarding this while signing the Contract.</p> <p>Telereporting is not allowed.</p>	<p>Resident in a recognized Medical College</p> <p>2) A Fixed Retainership Fee of Rs, 75,000 per month for only one Radiologist would be paid to the service provider, by the authority (if the authority utilizes the services of Service provider's radiologist for reporting of Hospital referred patients or till the medical college recruits its own radiologist).</p> <p>3) The radiologist kept on retainership fees by the service provider could be used by the authority for Counting (at discretion of Authority on need basis) as faculty during MCI Inspections. The Service Provider / Radiologist shall submit "No Objection Certificate" regarding this while signing the Contract.</p> <p>4) Telereporting is not allowed</p>
Clause 21; OTHER TERMS AND CONDITIONS, Technology Up gradation:	
<p>Review by a Board appointed by Authority for assessing the need for a technology up gradation. Such reviews would be restricted to Software upgrades and should not be made in less than Two(02) years. However, hardware upgradation reviews would be made after the contractual period, i.e, 10 years and the contract renewal/ Extension would be done only after such review.(Also applicable to clause 5.1)</p>	<p>"Review by a Board appointed by Authority for assessing the need for a technology up gradation. Such reviews would be restricted to Software upgrades and Coil upgrades and should not be made in less than Two(02) years. However, hardware upgradation reviews would be made after the contractual period, i.e, 10 years and the contract renewal/ Extension would be done only after such review.(Also applicable to clause 5.1)"</p>

Added Clause:

23. Hospitals/institutions where equipment are installed on PPP basis shall not install competing products within same hospitals/institutions during the Tenure of Agreement.

24. Coils and Accessories:

1) The coils & accessories to be supplied along with 1.5 T Sagar, Datia, Ratlam, Vidisha, Chhindwara, Shahdol, Shivpuri & Khandwa are as below:

- Whole body 1.5 Tesla Magnetic Resonance Imaging system - 32 channels RF system ; as specified-1
- System Body Coil – Quadrature -1
- "Neuro-vascular Coil with 16 or more channels OR Head / Neck neuro-vascular imaging Coil"-1
- Spine Array/Matrix Coils with atleast 32 channels -1
- Body Array/Matrix coil with 18 – 32 channels-1
- "Dedicated 32 channel Peripheral Angio Coil or 32 channel whole body coil with coverage of minimum 80 cm with max combination of 2 coils - 1 no"- 1
- Bilateral Breast Coil with at least 16 channels- 1
- Multi channel (minimum 8 channel) flex loop or rigid type - Large FOV -1
- Multi channel (minimum 8 channel) flex loop or rigid type - SMALL FOV-1
- Shoulder coil: Dedicated Shoulder coil – Multi channel -1
- Dedicated Knee Coil with atleast 12 channels- 1

- High resolution foot / ankle coil – minimum 8 channel -1
- Suitable Coil Storage Cart should be supplied for keeping the all supplied coils.

- Accessories for MRI
 - 1) Chiller (for the cryocooler) and gradient amplifiers.
 - 2) UPS cum Power Conditioner for the entire system including camera and chiller (gradient and cryocooler) to be supplied with backup of minimum 30 minutes.
 - 3) Dual head pressure injector with 500 syringes and 1000 y tubings
 - 4) two dehumidifiers for an area of 700 sq feet.
 - 5) 6 room thermometers for temperature regulation.
 - 6) Two hand held metal detectors for patient safety screening
 - 7) Electronic weighing machine -1
 - 8) Company Onwed additional Dockable trolley or MR compatible Trolley to be provided
 - 9) MR compatible Anesthesia machine with Ventilator should be offered of following specification:
 - 10) Multipara monitor.

- Gas lines for central O2, nitrous and air

2) Following Coils and accessories to be brought in along with 3 T MRI at Indore & Jabalpur:

- Whole body 3.0 Tesla Magnetic Resonance Imaging system - 32 channels RF system ; as specified
 - System Body Coil - Quadrature
 - 32 channels or more HEAD coil-capable of multi frequency MR spectroscopy (H1).
 - NEUROVASCULAR coil - 16 channels
 - SPINE: Phased array coil 32 channels
 - BODY : Phased array coils 32 channels (single or in combination)
 - Suitable Coil / Coil combination (Max 2 no.s) for Peripheral Angiography 32 channels or more
 - BREAST coil - 16 channel or more
 - Shoulder coil: Dedicated Shoulder coil – Multi channel
 - Shoulder coil: Flex coils (Large)
 - Shoulder coil: Flex coils (Small)
 - High resolution foot/ ankle coil – minimum 8 channel
 - High resolution Tx & Rx KNEE coil minimum 8 channel .
- Accessories:
- Storage box for all coils
 - Dual Syringe Pressure injector
 - Dual Syringe Pressure injector syringes
 - Dual Syringe Pressure injector syringe connector
 - MRI Compatible ECG electrodes (disposable)
 - MRI Compatible Anaesthesia Machine with integrated Ventilator, 2 vaporiser, circle absorber
 - MRI Compatible Multiparmeter Vital Signs Patient Monitor of 5000 Gauss Compliance & Slave monitor
 - MRI compatible syringe pump
 - MRI Compatible sets of Laryngoscope : 4 sizes blades- Neonatal, paediatrics, adult, extra large
 - MRI compatible Magill forceps : Adult size-
 - MRI compatible Magill forceps : Paediatric size-
 - Stylet for endotracheal tube : Adult size
 - Stylet for endotracheal tube : Paediatric size

- MRI compatible Clamps : Either towel clip or artery forceps.
- MRI Compatible IV stands
- MRI compatible suction apparatus
- Non-magnetic patient transfer trolleys
- Metal detectors : Handheld

3) The service Provider Should Submit an OEM Certificate on OEM letterhead, stating that it would support the equipment model quoted and would not discontinue the service of the equipment for the next 10 years

4) Both CT & MRI Machines should have dedicated Emergency Life Saving Equipment

5) PACS - For the purpose of image storing and easy access to specialist doctors and radiologist using a VPN

All other contents of the tender enquiry including terms & conditions remain unaltered.

Note:

- i. Prospective Bidders are also advised to check the website regularly prior to the closing date and time of online submission of bids.
- ii. If EMD is submitted in the form of BG, then the validity of the BG should be at least 225 days from the date of tender opening.