

**PRE-BID CLARIFICATIONS / AMENDMENTS IN RESPONSE TO THE QUERIES RAISED BY PROSPECTIVE BIDDERS IN THE PRE-BID MEETING HELD ON DT.17.04.2018 11.00 A.M. AND SUBSEQUENTLY A TECHNICAL COMMITTEE MEETING ON DT.26.04.2018 11.00 A.M. IN THE CONFERENCE HALL, OSMCL FOR PROVISION OF 128 SLICE CT SCAN SERVICE AT SCB MCH, CUTTACK ,MKCG MCH, BERHAMPUR AND AHRCC,CUTTACK IN PPP MODE.
BidRef.No.:OSMCL/2017-18/EQP-PPPCT128/13**

- Total No. of prospective bidders/ representatives present in the pre-bid meeting are: **16(Sixteen)** and **3nos.** of query was received through mail/letter.
- The queries raised by the prospective bidders on the above mentioned tender reference were thread barely discussed on dt.26/04/2018 and the following recommendations were made:

Sl. No	Queries raised by the prospective bidders	Original Technical Specifications	Clarifications /Amendments of specification in response to the queries
1	<p>Page-10 Clause no. 3.1.4 (Validity of Bid) Agreement with the Service Provider may be initially for term of 7 years/8years/10 years and may be extended for another 3years/2years or 5years/5years.”</p>	<p>Agreement with the Service Provider shall be initially for a term of “5 years” and the prices quoted shall remain valid for the entire duration of the agreement. The contract may be extended for another term of “5 years” based on performance and mutual consent.</p>	<p>Amended as Agreement with the Service Provider shall be for a term of “10 years”. However initially the contract shall be signed for 5years and shall be renewed for subsequent another term of “5 years” based on performance and mutual consent.</p>
2	<p>The quoted price cannot be fixed for 5 years. There may be at least 5% increment in price every year or 7% increment in price every year or 10% every alternate year due to inflation in operational expenses.</p>	<p>Page 10 point no 4 Validity of the Bid The prices quoted shall remain valid for the entire duration of the agreement.</p>	<p>Amended as The Single rate for all types of CT procedures as quoted by the bidder shall remain unchanged in the first year of the contract. Thereafter from the second year onwards, cumulative escalation of 3% only per annum upon the quoted rate will be applicable.</p>
3	<p>Page-10 Clause 3.1.5 (Performance Security) Performance bank guarantee of 10% as asked i.e. 2500*60*30*12= 5.4 Cr. may be reduced to 5 % of the value or 2 months of expected payment as Govt. is not investing anything. Day calculation should exclude the Sundays and holidays. Kindly clarify if this is for all the 3 sites or for individual site.</p>	<p>The successful bidder shall furnish a performance security in the shape of a Demand Draft/Bank Guarantee issued by a Nationalized Bank in favour of Tender Inviting Authority for an amount of 10% of the annual contract value. The annual contract value shall be the cost of CT Scan for a year i.e. Approved Rate per CTScan*60 (scans per day) ×30(days)×12 (months) (assuming average 60 scans per day).</p>	<p>Amended as The successful bidder shall furnish a performance security in the shape of a Demand Draft/Bank Guarantee issued by a Nationalized Bank in favour of Tender Inviting Authority for an amount of 5% of the annual contract value. The annual contract value shall be the cost of CT Scan for a year i.e. Approved Rate per CTScan*60 (scans per day) ×30(days) ×12 (months)×3 CT scan units (assuming average 60 scans per day).</p>
4	<p>Please amend that 30 scans per day X 25 days X 12 months. The performance security should be yearly renewable.</p>	<p>The successful bidder shall furnish a performance security in the shape of a Demand Draft/Bank Guarantee issued by a Nationalized Bank in favour of Tender Inviting Authority for an amount of 10% of the annual contract value.</p>	<p>No Change Clarified that performance security shall be valid initially for 5 years and shall be renewed for next 5 years.</p>
5	<p>Pg. No.13, Clause 5.1.3(Scope of Work) Allotted Built up space may be specified or may be of at least 1500 sq. ft. in the hospital premises with complete utilities like electricity and water connection as well as sewerage</p>	<p>The service provider shall be allotted space by the authority and the service provider shall make complete arrangements to make CT scan machine operational including procurement of CT scan machine.</p>	<p>Amended as The Hospital authority will provide built up space complying to AERB norm along with all types of structural civil modifications and the electrical panel box termination till the point of</p>

	<p>at the project site. Lecture hall is excluded from this space and that should be built up and separately handed over from authority to bidder and</p> <p>It may be ensured that the proposed room should be according to AERB or OEM requirements leak proof and constructed space. Or Major civil modification should be done by the Hospital Authority</p>		<p>service (at the CT Room) and the other requisites/requirements like room furnishing, cabling, lead lining and electricity distribution required for CT Scan machine commissioning shall be borne by the service provider. However the service provider has to provide necessary guideline for structural civil modifications complying to AERB norm and electricity load requirement.</p>
6	<p><u>Pg. No.13, Clause 5.1.4 (Scope of Work)</u> Need to incorporate point basis L1 system: points for no. of centre, Radiologist in pay roll, No. of Technician, turnover of the company, Radiology image / annum.</p>	<p>The technically qualified bidder with the lowest cost per CT scan with contrast shall be selected.</p>	<p>No Change Clarified that the lowest evaluated rate of technically qualified bidders shall be selected.</p>
7	<p><u>Pg. No.13, Clause 5.1.6(Scope of Work)</u> Please specify the name of reimbursement Authority.</p>	<p>The Service Provider shall not be entitled to levy any charge to the patients.</p>	<p>No Change Clarified that the reimbursement authority shall be the authority of respective medical colleges/institutions.</p>
8	<p><u>Pg. No.14, Clause 5.1.7 (Scope of Work)</u> Please provide the specification of workstation.</p>	<p>The service provider shall also ensure, at its own cost, IT enabled work station at the radiology department.</p>	<p>No Change Clarified that the detail specification of the CT Scan and all hardware has been specified in Section-VII.</p>
9	<p><u>Pg. No.14, Clause 5.1.9 (Scope of Work)</u> Request to delete this point and Reporting time from 6PM to 8AM may be before 12 Noon instead of 10AM And All routine scans be allowed to be reported within 24 hours while scan to be completed within 4 hours of registration. Or The Service provider shall submit the hard soft copies of the report and images to the hospital within the stipulated time after successful uploading of images within 120 minutes (Which would be simultaneously viewed at the Radiology department.</p>	<p>The service provider shall submit the hard soft copies of the report and images to the hospital within the stipulated time mentioned below after successful uploading of images within 45 minutes (which would be simultaneously viewed at the radiology department.</p> <ol style="list-style-type: none"> I. All Head injuries, trauma cases and cases declared as urgent by the referring Hospital within 2 hours. II. All routine scan from 8 AM to 6 PM within 6 hours III. All routine scan from 6 PM to 8 AM before 10 AM 	<p>Amended as The service provider shall submit the hard copies of the report and images to the patient and a copy of the signed report to the hospital within the stipulated time mentioned below,</p> <ol style="list-style-type: none"> I. All Head injuries, trauma cases and cases declared as urgent by the referring Hospital <u>within 2 hours.</u> II. All routine scan from 8 AM to 6 PM <u>within 6 hours.</u> III. All routine scan from 6 PM to 8 AM <u>before 12 Noon.</u>

<p>10</p>	<p><u>Pg. No.14, Clause 5.1.10</u> (Scope of Work) Please amend this to 39 inch and 2 mega pixel</p>	<p>The service provider shall provide a medical grade monitor of at-least 40 inch in the existing lecture hall and arrange to provide parallel viewing facility & access to all scanned images from workstation.</p>	<p>Amended as The service provider shall provide a medical grade monitor of at-least 39 inch of <u>minimum 2 Mega Pixel</u> resolution in the existing lecture hall and arrange to provide parallel viewing facility & access to all scanned images from workstation.</p>
<p>11</p>	<p><u>Pg. No.14, Clause 5.1.10</u> (Scope of Work) Please amend distance should be within 20 ft. & consider for HD Monitor. Or Parallel viewing within the premises of the PPP center may not be possible as there is a post processing which happens and then final images are uploaded. Request for the same to be deleted or amended. Secondly there is no need of a medical grade monitor here. An HD 4K HDTV would suffice. Medical grade monitor of 40 inches would be too expensive.</p>	<p>Clause 5.1.10, Pg. No.14 The service provider shall provide a medical grade monitor of at-least 40 inch in the existing lecture hall and arrange to provide parallel viewing facility & access to all scanned images from workstation.</p>	<p>No Change Clarified that necessary networking for transfer of scan image from console workstation to lecture hall and setup of server system with DICOM compatibility shall be the responsibility of the service provider without degrading the image quality. The service provider shall provide a medical grade monitor of at-least 39 inch of <u>minimum 2 Mega Pixel</u> resolution in the existing lecture hall and arrange to provide parallel viewing facility & access to all scanned images from workstation.</p>
<p>12</p>	<p><u>Pg. No.14, Clause 5.1.11</u> (Scope of Work) Tele-reporting should be and if required radiologist will be available on call prior one day. The Authority/Hospital shall arrange for required consumables and Anaesthetist for providing Radiology services, however in case, the concessionaire arrange Anaesthetist in emergency on call, for which respective rates/charges of consumables and Anaesthetist shall be paid by Patient/Authority/ Hospital to Service Provider. Or No tele-reporting should be allowed</p>	<p>The human resources including in-house Radiologist, Anaesthesiologist, Radiation safety officer, Staff nurse and Radiographer for the CT scan facility shall be the sole responsibility of the service provider.</p>	<p>Amended as The human resources including in-house Radiologist, Anaesthesiologist (on Call basis), Radiation safety officer, Staff nurse and Radiographer for the CT scan facility shall be the sole responsibility of the service provider. No additional cost shall be paid for any on call experts and required consumables.</p>

13	<p><u>Pg. No.14, Clause 5.1.12 (Scope of Work)</u> Having a radiologist available 24 x7x 365 days will be impossible. Or The authority should allow tele-radiology facility also with inhouse Radiology facility.</p>	<p>Service provider shall appoint an in-house Radiologist and shall provide the signed report from qualified Radiologists having a post graduate degree / post graduate diploma in Radiology and imaging. Service provider shall deploy adequately trained Radiologists, Radiographer and Paramedical staff to run the facility round the clock (24x7x365 days)</p>	<p>No Change</p>
14	<p><u>Pg. No.14, Clause 5.1.13 (Scope of Work)</u> Service Provide can adhere to fire safety requirements but Fire Approval of site/building shall be Hospital's responsibility as hospital is going to provide a ready built up area. OR Regarding electricity/water connection/site hand over certificate. Minimum 200 KVA electrical power needed to terminate at CT scanner site and to get fire safety license need help from tender inviting authority.</p>	<p>All the modalities (Manpower, Infrastructure, Fire safety, Security personnel, Housekeeping/Cleaning staffs, Logistic, medical gas, Electricity and any statutory requirements as per AERB guideline etc. required for operating CT Scan services shall be responsibility of the service provider.</p>	<p>Amended as All the modalities (Manpower, Infrastructure, Security personnel, Housekeeping/Cleaning staffs, Logistic, medical gas, Electricity and any statutory requirements as per AERB guideline etc. required for operating CT Scan services shall be the responsibility of the service provider. The hospital authority shall provide fire safety requirements at the CT facilities.</p>
15	<p><u>Pg. No.15, Clause 5.1.15 (Scope of Work)</u> Authority will ensure non-interference in operations by medical students & faculty member.</p>	<p>To set up facility for training to the medical student with research and paramedical staff as part of project. The service provider shall allow access to medical students and faculties/doctors of the institutions for study and research purpose on recommendations of HOD of Radiology Department.</p>	<p>Amended as To set up facility for training to the Post Graduate students of Radio diagnosis department for research purpose as part of the project. The service provider shall allow access to HOD, faculties and Post Graduate students of Radiology Department of the respective institutions.</p>
16	<p><u>Pg. No.15, Clause 5.1.16 Point no.4 (Scope of Work)</u> CT tube is replaced only on damage or as when required. Kindly delete this clause.</p>	<p>The CT tube to be replaced after the CT Tube has completed the required number of procedures as specified in the technical manual of the CT Tube.</p>	<p>Amended as The CT tube to be replaced when found defective during the service period or during periodic calibration resulting deterioration in image quality observed by the HOD Radiologist of the hospital.</p>
17	<p><u>Pg. No.16, Clause 5.1.17 (Scope of Work)</u> It is not possible to store data for 10 years as it shall entail a huge cost to maintain such a big data server. As a practice,</p>	<p>Ensure adequate backup and retrieval of all data relating to tests performed during the agreement period of 10 years and to make the data available as and when demanded by the Authority within</p>	<p>Amended as The service provider have to submit all data relating to tests performed during a year, on quarterly basis and submit it to the hospital</p>

	data is transferred to the hospital every month/year. Also, there is no legal requirement of storing radiology data for more than 2 years except for medico-legal cases.	24 hours	authority in a hard disk which should be retrievable at any time during requirement and as well as agreement period.
<u>18</u>	<u>Pg. No.16, Clause 5.1.18 (Scope of Work)</u> Cylinder medical gas to be allowed and PNG if available of the hospital should be offered to the service provider.	The service provider is responsible for provision of medical gas in the CT scan centre and shall bear the cost in this context.	Amended as The service provider is responsible for provision of medical gas cylinders (Oxygen/Nitrous Oxide) and shall bear the cost in this context.
<u>19</u>	<u>Pg. No.16, Clause 5.1.19 (Scope of Work)</u> During the lean hours (after the OPD hours) the service provider be allowed to serve outside (non-referred) private patient at market rates/approved rates.	The service provider shall provide the CT scan service to patient only referred by the hospital authority.	No Change
<u>20</u>	<u>Pg. No.16, Clause 5.2(Facilities to be provided by the hospital authorities)</u> Minimum 2500 sqft. Space is required for the commissioning of service. The additional cost of transformer if required will be the responsibility of authority.	5.2.1 Built up space for the complete mode of operation as specified 5.2.2 The Authority will provide electricity till the point of services. 5.2.3 Water and Sewage supply	No Change Clarified that The Hospital authority will provide built up space complying to AERB norm along with all types of structural civil modifications and the electrical panel box termination till the point of service (at the CT Room) and the other requisites/ requirements like room furnishing, cabling, lead lining and electricity distribution required for CT Scan machine commissioning shall be borne by the service provider. However the service provider has to provide necessary guideline for structural civil modifications complying with AERB norm and electricity load requirement.
<u>21</u>	<u>Pg. No.16, Clause 5.3 (Operational Rooms)</u> Please specify the given area. Specification required for student hall (how many students, AC , Furniture, Work station, Projector etc.)	Operational rooms as specified in the clause.	No Change Clarified that The lecture/student hall shall have to be furnished in the existing lecture hall at all three locations providing basic sitting facilities, projector and AC. For this the service provider shall have to visit the site for need

			assessment of the site in consultation with the HOD Radiology of respective institutions.
<u>22</u>	<u>Pg. No.17, Clause 5.3.12 (Operational Rooms and sets required)</u> For DG set installation, Site to be given by Authority near the facility.	DG set for power backup to all operation	No Change Clarified that the feasibility of DG set location shall have to be provided by the authority near the facility.
<u>23</u>	<u>Pg. No.17, Clause 5.4.3 (Pre qualification of bidder)</u> Doctors / panel of doctors having experience of more than three years in the relevant specialist / subspecialty from organizations of repute should also be considered.	The Bidder shall have minimum three years of experience in carrying out similar type of assignment / service in private or public sector. In support of this, a statement regarding assignments of similar nature successfully completed during last three years should be submitted as per proforma in Format T11.	No Change
<u>24</u>	<u>Pg. No.17, Clause 5.4.3 (Pre qualification of bidder)</u> Please reduce the requirement to at least 3 or 2 CT scans operational. Also for last year the CT scans (or CT scans + MRI reported) reported should be at least 15,000 per year or 1lakh per year. Or 1 CT scans operational. Or 10 CT scans operational. Or 2 CT Scan Centre (one is private and another is under PPP with the Govt. Of India) Or This clause may be mitigated in case the company is owned by a Radiologist as the training of Radiology involves handling of CT	The Bidder shall have at least five CT Scan Diagnostics Service Centres (with fully trained service personnel) and provides reports for a minimum of 5,000 radiology images per annum in one or more States of India (Information to be provided in Format T4)	Amended as The Bidder should have at least Two Diagnostic centres (CT Scan of 16 slices or more or PET CT) owned by self or in PPP mode and must have provided reports for a minimum of 5,000 radiology images per year in one or more states in India (with fully trained service personnel) (Information to be provided in Format T4).The bidder having only MRI centres is not to be considered as the number of CT scan centre.
<u>25</u>	<u>Pg. No.17, Clause 5.4.6 (Pre qualification of bidder)</u> Provisional statement of accounts shall be considered only for 2017-18”	The bidder shall have an annual turnover of Rs.10 Crores or more in last three financial years i.e. 2015-16, 2016-17, and 2017-18. The bidder shall submit proof of the same (notary attested audited copy of audited accounts, balance sheet, annual report, etc.). Provisional statement of accounts shall not be considered.	Amended as The bidder shall have to furnish the requisite annual turnover report in last three financial year i.e. 2014-15, 2015-16, 2016-17 or 2015-16, 2016-17 and 2017-18 (if audited). The bidder shall submit proof of the same (notary attested copy of audited accounts, balance sheet, annual report, etc.). Provisional statement of accounts for 2017-18 shall not be considered.

26	<p><u>Pg. No.17, Clause 5.4.6 (Pre qualification of bidder)</u> Please amend annual average turnover as 7 Crores or 5 Crores or 10 Crores or 15 Crores or 30 Crores Or The bidder shall have total turnover of Rs.5 Crores or Rs. 7 to 10 Crores in last 3 year</p>	<p>The bidder shall have an annual average turnover of Rs. 10 Crores or more in last three financial years i.e. 2015-16, 2016-17, and 2017-18. The bidder shall submit proof of the same (notary attested audited copy of audited accounts, balance sheet, annual report, etc.). Provisional statement of accounts shall not be considered.</p>	<p>Amended as The bidder shall have an average annual turnover of Rs. 5 Crores or more in last three financial year i.e. 2014-15, 2015-16, 2016-17 or 2015-16, 2016-17 and 2017-18 (if audited). Provisional statement of accounts for 2017-18 shall not be considered.</p>
27	<p><u>Pg. No.19, Clause 5.4.8(Pre-qualification of bidder)</u> In case of Consortium individual non lead member should not be asked to individually meet the technical eligibility criteria (Clause no 5.4.1 to 5.4.5)</p>	<p>In case of Consortium, the lead member should independently meet the technical eligibility criteria (Clause no.5.4.1 to 5.4.5). However in case of consortium, if the lead member does not meet the annual turnover criteria and minimum no. of CT scan service centre criteria, then financial turnover (Clause no.5.4.6) and minimum no. of CT scan service centre criteria (Clause no.5.4.3) of only those bidders would be collectively considered who individually meet the technical eligibility criteria.</p>	<p>No Change</p>
28	<p>Since the CT scan would be installed in tertiary care centres we would request the bidder to ensure presence of a intervention radiologist to carry out CT guided procedures. We already have a intervention radiologist for delivery of services.</p>		<p>Amended as Since the CT scan would be installed in tertiary care centres the service provider shall arrange the intervention radiologist to carry out CT guided procedures (on call basis as and when necessary).</p>
29	<p><u>Pg. No.19, Clause 5.5.3 (Special Conditions)</u> Request the clause to be changed to, "The service provider shall commission the CT scan facility within 90 days from site handover along with water and electricity on site.</p>	<p>The service provider shall commission the CT scan facility within 90 days of the signing of the contract by both parties</p>	<p>Amended as The service provider shall commission the CT scan facility within 90 days of the signing of the contract by both parties, provided the required space and termination of electrical panel box is allocated in the CT scan room.</p>
30	<p><u>Pg. No.19, Clause 5.5.7 (Special Conditions)</u> Space modification by Hospital Authority</p>	<p>Space modification</p>	<p>No Change Please refer to the clarification in Sl. No -20</p>
31	<p><u>Pg. No.20, Clause 5.5.11 (Special Conditions)</u> Request to release the payment within 15 days from submission bill. Or</p>	<p>State authority shall make payment to the service provider for its services on Monthly basis through ECS for all invoices raised for the previous month.</p>	<p>No Change</p>

	There is no mechanism to check non-payment/delay of payments by purchaser to the service provider. We suggest to add a penalty clause with SBI rates+2% interest in case there are delayed payments for more than 60 days.		
32	<u>Pg. No.23, Clause 5.6.3 (Special Conditions)</u> Some parts of the equipment have to be brought from outside the country so request 24 hours be changed to 72 hours or 96 hours, after which the bidder will take all the patients to a nearby centre for scans	Clause 5.6.3, Pg. No.23 Service Provider shall make alternative arrangements for provision of CT scan (including free transportation of patients) in case the machine is out of order/ broken down for period greater than 24 hours.	Amended as Service provider shall make alternative arrangements for provision of CT scan (including free transportation of patients) in case the machine is out of order/ broken down for period greater than 24 hours in case of emergency patients and 48 hours for regular patients.
33	<u>Pg. No.23, Clause 5.6.5 (Special Conditions)</u> The penalty related to average TAT is provided in the table below: 10%= No penalty 20%= 10% penalty >20%=20% penalty Or Should be omitted as the bidder is also not paid interest on delayed payment. If not acceptable then a maximum penalty of 5 % or 7% can be levied.	Report of CT scan should be provided by service provider to the hospital within the stipulated time mentioned above at clause no-5.1.9 . In delayed reporting penalty of 20% of Cost per CT scan for the delayed reports shall be imposed to the service provider	No Change
34	Section- VI (General Conditions of Contract) Pg. No.24, Clause no. 6.2.4.7 (General guidelines) Separate rate may be asked for special procedures such as Cardiac Angio, Dual energy scanning and paediatric cardiac cases for which the rates are higher. It should be asked multiple of the base quoted rate for normal scans. Suggested that 1.for <u>cardiac scanning (angio) and paediatric cardiac</u> : 2 or 4 times of base rate 2.for <u>dual energy scanning</u> : 3 times the base rate 3.for <u>Onco applications</u> : 2 times of base rate	A single rate per CT scan for all types of procedures including contrast quoted by the Bidder shall be fixed during the bidder's performance of the contract and not subject to variation on any account. A bid submitted with an adjustable/variable price quotation will be treated as non - responsive and rejected.	No Change
35	Section- VI (General Conditions of Contract) Pg.	Copy of the GST registration	Amended as GST Registration of the bidder

	No.35, Clause no. 6.17.17 Copy of GST Registration is not mandatory as per government notification number 9/2017 dated 28 th June 2017.	certificate shall be uploaded in the technical bid shall also to be submitted along with the Original EMD (DD / BG) & Tender document Cost (DD).	is not mandatory.
36	Section- VI (General Conditions of Contract) Pg. No.35, Clause no. 6.17.17 Date has to be specified for Hard Copy submission	A Copy of the all the above documents uploaded in the technical bid shall also to be submitted along with the Original EMD (DD / BG) & Tender document Cost (DD) will only be received after the closing date of online bid submission and within the date and time of opening of online technical bid, falling which the bid shall be rejected. However, the copy of all documents to be submitted should be exactly the same as uploaded in e-tender portal. Copy of the documents to be submitted shall be only for the purpose of clarity / better visibility of the documents uploaded in case of any scanned documents uploaded (like product catalogues etc.) is not clear. In that case, the documents shall be considered for evaluation only if the scan copy of the same is uploaded.	Clarified A Copy of the all the above documents uploaded in the technical bid shall also to be submitted along with the Original EMD (DD / BG) & Tender document Cost (DD) will only be received after the closing date of online bid submission and within the date and time of opening of online technical bid.
37	Section- VI (General Conditions of Contract), Clause no. 6.44.5 This Clause is to be deleted Or Adequate compensation will be given to the bidder in case of termination of contract without assigning any adequate reason. This clause may be added.	Termination for convenience:- The Tender Inviting Authority/User Institution reserves the right to terminate the contract, in whole or in part for its (Tender Inviting Authority's/User Institution's) convenience, by serving written notice on the successful bidder at any time during the currency of the contract. The notice shall specify that the termination is for the convenience of the Tender Inviting Authority/User Institution. The notice shall also indicate interalia, the extent to which the successful bidder's performance under the contract is terminated, and the date with effect from which such termination will become effective.	No Change
39	Section-VII (Technical Specification) 1. Gantry: Minimum scan time in cardiac mode should be equivalent to 0.4 sec. (400 mili sec.). or less Or	1. Minimum scan time for a 360° rotation should be less than or equal to 0.4 sec. (400 mili sec.). 2. Should be high frequency having at least 70 kW output or more 3. The mA range available should	No Change

	<p>Kindly delete “400 milli seconds” in brackets as our machine has a scan time of 0.42 sec.</p> <p>2. X-ray generator: At-least equivalent to 70KW or amend this to 65KW output or more</p> <p>3. mA range: Equivalent to between 20 to 600mA or more and Tube voltage 80 to 130KV. Or Kindly amend the requirement that 600mA should be delivered in all modes of operation both spiral and axial.</p> <p>4. X-ray tube: Anode heat storage capacity should be equivalent to 7MHU or more and peak heat dissipation rate of at-least 800KHU/min or Anode heat storage capacity is to be minimized to below 5 MHU and based as per Elora guidelines (as low as low radiation)</p> <p>5. Image reconstruction of 20 images/sec or more at 512 ×512 matrix.</p>	<p>be between 20 to 600mA or more and Tube voltage: 80 to 135 kV</p> <p>4. The anode heat storage capacity should be of at-least 7 MHU or more and Peak heat dissipation rate of anode should be at least 1000 KHU/min</p> <p>5. Real time reconstruction speed: 20 images per second or more at 1024×1024 matrix.</p>	
	<p>Section-VII (Technical Specification)Pg no-15 (b) Should be provided with one workstation instead of two work stations with 19 inch medical grade monitor and fully DICOM compatibility and complete post processing softwares. Second work station with medical grade monitor of atleast 26 inch for reporting and viewing purpose need to be installed at the HOD, Radiologist office for examination and study.</p>	<p>Should be provided with two independent workstations as a client server based solution with minimum 15,000 slices with minimum 16GB RAM, 1TB storage, 19 inch medical grade LCD dual monitor and fully DICOM compatibility and complete post processing softwares.</p>	<p>No Change</p>
<p>40</p>	<p>Section-VII (Technical Specification)Pg no-15 (d),(e) & (f) Second work station with medical grade monitor of atleast 26 inch for reporting and viewing purpose need to be installed at the HOD, Radiologist office for</p>	<p>a) One workstation should be installed in the console room capable of simultaneous viewing with all post processing applications & operations independently without help of main console provided with Two 19 inch medical grade LCD color monitor.</p>	<p>No Change</p>

	examination and study	<p>b) One true medical grade monitor of at least 40 inch need to be installed in the Lecturer room for educational & study purpose having facility of showing all acquired and post processed images which to be connected with console.(as specified in the scope of work section)</p> <p>c) Second workstation with medical grade monitor of at-least 26 inch having all post processing applications need to be installed at the HOD, Radiologist office for examination and study.</p>	
	<p>Section-VII (Technical Specification) Technical specification should not be changed as it will degrade or dilute the specification.</p>	As specified in tender	No Change
41	<p>Section-VII (Technical Specification) Technical Specification of 128 slice CT Scan machine should be capable to do all CT procedures. We appreciate for defining quality by asking both FDA & CE certification of the quoted model, also you clearly mentioned the clinical requirements or outcomes from the said model. After having done so, we may request you to make the technical configuration more broad based allowing us to have more choices on available competent models in the market without compromising the final outcome of the machine. Or We would request to remove pg no-53 point no-1 to page no-54 point no-13. Since all the clinical and quality requirements has been provided on page no-52.</p>		<p>No Change Clarified that the quoted model of 128 slice CT Scan machine should be of same specification as per tender document.</p>
42	Authority should guarantee/ assured a minimum patient load of 1800 per centre and per month.		Clarified that No guarantee/ assurance can be committed regarding patient load for this contract.
43	Please provide the details of IPD/OPD data of all hospitals.		The service provider may obtain the information from

			the respective centres prior to submission of the bid.
44	The PPP partner should be protected for the tenure of the contract against any policy of government changes.		The detailed scope, terms & conditions, agreement format are clearly defined in the document.
45	Kindly clarify whether this tender & contract need to be executed under article 299 of constitution of India? Where it is mandatory to expressly mention the name of Governor or on behalf of Governor.		The detailed scope, terms & conditions, agreement format are clearly defined in the document.
46	Once the CT machine is installed by the PPP player what will happen of the already existing 16 slice CT machine in SCB and MKCG MCH. There would be conflict of interest in the 2 equipment and this would lead to unfair flow of cases on the machines. The bidder should be provided exclusivity and the existing machine should be shifted to other medical colleges. There should also be no future procurement of CT machines by the 3 colleges.		Clarified that No assurance can be committed in this regard by the tender inviting authority.

N.B:-

1. The amendments mentioned above are to be treated as amendments in the general term(s) and condition(s) and scope of work of the above tender reference. All other terms conditions remain unchanged.
2. Since any text in the price BOQ can't be changed in the e-tender portal, the amendments mentioned above are to be treated as amendments pertaining to price bid/ BOQ (if applicable).
3. Bidders shall submit any query or observation or representation on uploaded technical bids within 7 days of opening of Technical Bid. Bidders can submit their queries or observations or representations for their quoted items through email: proc.osmcl.od@nic.in or at OSMCL office. The query or observation or representation submitted must be supported with the letter from the principal manufacturer for the respective items along with supporting documents justifying their claims. **No representations shall be entertained by the Tender Inviting Authority after 07 days of Technical bid opening.** The Tender Inviting Authority may at its discretion accept or reject the representation and the decision of the Tender Inviting Authority shall be final and shall be binding on all bidders participating in this bid.

Amendment: The last of submission has been extended and revised dates are as follows:

Amended Last date for online technical bid submission – 22.05.2018, 5PM

Amended Last date for online technical bid opening – 26.05.2018, 11AM

Sd/
Managing Director
OSMC