SPECIFICATION FOR FULLY AUTOMATED FLEXIBLE COVER SLIPPING WORKSTATION

- 1. Should be a reliable and high-quality air bubble-free tape cover-slipping system
- 2. A microcomputer should control the mechanical movements, as well as the positioning and length of the cover slipping film.
- 3. Should have a throughput of a minimum of 500 slides per hour with a loading capacity of up to 60 slides at a time
- 4. Slides are positioned in the same order in drying racks as in the corresponding slide basket.
- 5. Should have fume control Activated carbon filters to minimize hazardous fumes and an Optional external exhaust
- 6. Should be compatible with any existing auto Stainer and be able to integrate with Stainer from the same manufacturer
- 7. Should accept microscopic slide Width: 24.7 ~26.5 mm and Length: 74.7~76.5 mm and 0.9 to 1.2 mm thickness
- 8. Should be able to remove the cover slipping film from the slide for any reason without damaging the tissue
- 9. Should have selectable cover slipping lengths45, 50, 55, and 60 mm
- 10. Should have an LCD visual display of selectable options and instrument status.
- 11. Machine should supply standard FOC reagents for the validation.
- 12. Should have a minimum battery backup of 30 minutes.
- 13. Should have machine installation in any reputed Govt Hospital in India.
- 14. Annual requirement is around 40000 coverslips with the current workload. The cost of coverslips and other consumables should be offered in ATC 1/2, as a percentage of the cost of the system.
- 15. Cost of coverslips and other consumables— 10000 units should be included along with the system and supplied with the system

Conditions for tenderer:

- 1. All accessories should be from the same Original Equipment Manufacturer for the main unit.
- 2. Instruments must be ISO certified and a copy should be enclosed. (The ISO Certificate must be issued by any organization accredited by the Bureau of Indian

Prof. Avinash Agrawal
MD, IDCC, PCCM, FICCM, FIACCM, FOCP (USA)
Head, Department of Critical care,
King George's Medical University, UP, Lho

hy Di-

Standard or accredited by the international accrediting forum "IAF" (Certificate to be attached).

- 3. Should be USA FDA and/orEuropean CE be approved by 4 digits notified body.
- 4. Other necessary certifications if any required will be provided by the bidder for the smooth functioning of the machine.
- 5. Installation process should be performed by O.E.M trained service engineers/ service representatives on OEM letterhead or Service Report within 15 days of supply, with the mandatory provision of providing preventive services visit of OEM trained Service Engineer/ Service Representative quarterly per year till the completion of warranty period (i.e., 20 visits for the first 05 years) & further quarterly visits (04 visits/year) year till the completion of CMC period.
- 6. The equipment should have a Brand name/ Model Number embossed/etched on the equipment.
- 7. All the technical specifications in the compliance statement must be supported by Original Literature from the firm/ O.E.M with highlighting Numbering & flagging of all technical certificates.
- 8. Offered Equipment should have a strong Government Installation base.
- 9. Offered Equipment should have a Regional Sales Service Centre of the Original Equipment Manufacturer in the region for a 95 % uptime guarantee.
- 10. For the offered main unit, the essential, optional required consumables'/accessories' shelf life should be declared on the Original Equipment Manufacturer's letterhead.
- 11. In case of technical snag/failure/breakdown the response time for the inspection should be within 24 hours and repair within 05 days otherwise provide a service machine/ alternate arrangement to be made till the period of recovery of the breakdown of the unit, failing which attracts penal action as per the decision of institute/ hospital.
- 12. For offered equipment the Training of technical staff and users should be performed by Original Equipment Manufacturer trained Service Engineers at the proper designated place- at bidders' cost.
- 13. Company should quote their latest model and need to provide an affidavit for the same.
- 14. As a tendering process the Demonstration of the offered Equipment is Mandatory at hospital/institute premises or other designated places at the bidder's cost.

Prof. Avinash Agrawal

MB, DCC, IFCCM FIGCM FILE AM, FCC

Head, Department of Children

Fig. Casassel Medical

King George's Medical

- 15. The bidder must comply with the General Financial Rules and their modifications if any issued by the Government of India- 2017.
- 16. Any bidder from a country that shares a land border with India will be eligible to bid in the tender only if the bidder is registered with the Competent Authority (i.e., Registration certificate issued by the Ministry of Commerce and Industry (Department for Promotion of Industry and Internal Trade- DPIIT after October 2020). If any such bidder is not registered with DPIIT they will be liable for technical disqualification.
- 17. Principal (OEM) must authorize only one agent to be quoted in the bid otherwise multiple quotes through different agents in the same bid will be canceled.
- 18. The Bidder and its OEM both have to submit a notarized affidavit on the Indian Non-Judicial Stamp Paper of Rs.100/- that the bidder has not quoted the price higher than the current financial year and last financial year supplied to any government Institute/ Organization/ reputed Private Organization. OEM also has to submit that the price quoted by the bidder in the bid is on its behalf and the lowest in the current and last financial year in the country. Therefore, if at any stage it has been found that the supplier and its OEM have quoted lower rates than those quoted in this bid; the Institute (the purchaser) would be given the benefit of lower rates by the Supplier and any excess payment if any, will become immediately payable to the Institute (the purchaser). If such an affidavit is not submitted, the bid will be outrightly rejected. (Part of technical bid).
- 19. Guarantee / Warranty Period: Separate offers of Comprehensive Maintenance Contract (CMC on main equipment) and Annual Maintenance Contract (AMC on main equipment) for further 5 years after expiry of 5 years of warranty (i.e., 6th, 7th, 8th, 9th and 10th years) in rupees only (and on basis of percentage of price) should be included in a financial bid in the absence of which the offer is liable to be rejected. Payment for CMC/AMC shall be made only after the expiry of the warranty of 5 years, in case the Institute (the purchaser) decides for availing of CMC/AMC services. Contract for CMC/AMC shall be decided on expiry of warranty but rates (not more than 5% inclusive of all taxes for 6th to 10th year) will be frozen at the price of an issued purchase order before the release of payment by the Institute (the purchaser). However, the Institute (the purchaser) may decide not to enter into any CMC/AMC contract without assigning any reason for the same, which shall be binding upon the bid.

20. Should provide 5-year CMC. CMC cannot be more than 5% of the contract value.

Prof. Avinash Agrawal
MD, IDCC, IFCCL Prage 3 of 4M, FCCP (USA)
Head Department of Children Care,
King George's Medical University, UP, Lko.

12 Deser

- 21. System configured application-specific educational video tutorials shall be provided as standard with the system.
- 22. Details of service outlet in India to render services during 5 years warranty period.
- 23. The principals must give a certificate if the supplier/vendor is changed during the course of the guarantee/warranty period, the principals would be responsible for the upkeep/maintenance of the quote/supplied equipment, besides honouring all the terms and conditions of CMC/AMC in letter and spirit.

As the

Prof. Avinash Agrawal
MD, IDCC, IFCCM, FICCM, FIACCM, FCCP (USA)
Head, Department of Critical care,
King George's Medical University, UP, Lko.

Do

Jul