

## Bid Corrigendum

GEM/2024/B/5278916-C3

Following terms and conditions supersede all existing "Buyer added Bid Specific Terms and conditions" given in the bid document or any previous corrigendum. Prospective bidders are advised to bid as per following Terms and Conditions:

### Buyer Added Bid Specific Additional Terms and Conditions

1. If the agency is registered under MSME or NSIC, then EMD exemption certificate needs to be enclosed.
2. Make in india specific authorisation certificate needs to be enclosed.
3. OPTION CLAUSE: The Purchaser reserves the right to increase or decrease the quantity to be ordered up to 50 percent of bid quantity at the time of placement of contract. The purchaser also reserves the right to increase the ordered quantity by up to 50% of the contracted quantity during the currency of the contract at the contracted rates. Bidders are bound to accept the orders accordingly.
4. Buyer Added text based ATC clauses
  1. Pre-bid meeting will be held for this case, All the prospective bidders are advised to kindly go through published bid documents, specifications and suggest modifications/corrections in writing (with justifications) and submit/email ([storeirch160@gmail.com](mailto:storeirch160@gmail.com)) in the office of Stores Officer, Room No.18, Ground Floor, Dr. BRAIRCH, AIIMS, New Delhi - 110029, 48 hrs (Two Day before pre-bid meeting date, in order to increase competition and purchased equipment at best competitive price. Bidders must attend the pre-bid meeting for discussion/justification before committee. The modifications/corrections requests after prescribed date will not be entertained and summarily rejected.
  2. The Purchaser reserves the right to ask for a free demonstration of the quoted equipment after giving reasonable time to the bidder at a pre-determined place acceptable to the purchaser for technical acceptability as per the tender enquiry document specifications before the opening of the Price Bid.
  3. Bidders are requested to upload a scanned copy of the price bid along with price details of all items and price list of all spares, accessories and consumables required for future operation/maintenance of the equipment. The prices of all quoted items will remain valid till the warranty and CAMC period. If the price of all or any of the consumables, accessories, and spare parts required to maintain or run the equipment is not quoted by the bid

der, it will be assumed that the same will be provided by the bidder/firm free of cost for the life cycle i.e. 10 years.

4. To keep the equipment functional and everything except disposable/consumables (if any) shall be provided free of cost during the warranty and CAMC period.
5. It shall be the responsibility of the vendor/OEM to keep the equipment functional during the warranty and CAMC period, anything required shall be provided free of cost including batteries, UPS etc only except consumables.
6. During Warranty and CAMC if there is an upgrade/extra software/update that shall be provided free of cost by the firm.

7. **Most Important:**

- a) This tender is for procurement of "128 Slice CT Scanner with Dual Energy Capabilities under buyback basis - 01 No. on replacement of existing installed equipment.
- b) The minimum buy-back price of **old CT Machine** has been fixed at **Rs 80,00,000/- (Rupees Eighty Lakh Only)** by the condemnation committee of Dr. BRAIRCH, details are under:-

S.No.	Equip. Name	Date of Purchase	Qty.	Minimum Unit Reserve Price	Make and Model
1.	CT Machine	March, 2013	01 No	Rs. 80,00,000/-	Make : Siemens AG, Germany Model : Somaton Definition AS64 Detector

- c) The old machines/equipment will be handed over to the firm only after installation of the new machines.
- d) Therefore, all the firms who are willing to participate in this tender should be quoted the minimum buyback price, failing which or without quoting the Buy-Back Price, their participation in this tender should be summarily rejected.

8. Firm must be submitted the whole tender copy duly signed and stamped by the authorized.
9. The equipment should be quoted with five years complete cover warra

nty and additional five years of comprehensive annual maintenance contract (CAMC).

10. Location of Installation of Equipment: Room No. 43, 44 & UPS Room in front, Ground Floor, Dr. BRAIRCH (New Equipment replaced with Existing).
11. During Warranty and CAMC if there is an upgrade, update and extra software that shall be provided free of cost by the firm.
12. One Bid per Bidder: A firm shall submit only one bid either individually or as a partner of a joint venture. A firm that submits either individually or, as a member of a joint venture, more than one bid will cause all the proposals with the firms' participation to be disqualified.
13. One Bid per Manufacturer: An OEM can either participate directly or can only authorise one bidder to quote on their behalf. In case of submission of multiple offers by an OEM, directly or through its authorized agent(s), all such offers are liable to be rejected.
14. In case of any ambiguity, the content given in the TED Document uploaded under buyer-added ATC shall prevail. For amendments (if any) in the tender/bid document, please also refer to [ww.aiims.edu](http://ww.aiims.edu) from time to time.
15. Buyer should comply with all the specifications and Terms & Conditions uploaded on the ATC.

5. Buyer uploaded ATC document [Click here to view the file.](#)

## Disclaimer

The additional terms and conditions have been incorporated by the Buyer after approval of the Competent Authority in Buyer Organization, whereby Buyer organization is solely responsible for the impact of these clauses on the bidding process, its outcome, and consequences thereof including any eccentricity / restriction arising in the bidding process due to these ATCs and due to modification of technical specifications and / or terms and conditions governing the bid. If any clause(s) is / are incorporated by the Buyer regarding following, the bid and resultant contracts shall be treated as null and void and such bids may be cancelled by GeM at any stage of bidding process without any notice:-

1. Definition of Class I and Class II suppliers in the bid not in line with the extant Order / Office Memorandum issued by DPIIT in this regard.
2. Seeking EMD submission from bidder(s), including via Additional Terms & Conditions, in contravention to exemption provided to such sellers under GeM GTC.
3. Publishing Custom / BOQ bids for items for which regular GeM categories are available without any Category item bunched with it.
4. Creating BoQ bid for single item.

5. Mentioning specific Brand or Make or Model or Manufacturer or Dealer name.
6. Mandating submission of documents in physical form as a pre-requisite to qualify bidders.
7. Floating / creation of work contracts as Custom Bids in Services.
8. Seeking sample with bid or approval of samples during bid evaluation process. (However, in bids for [attached categories](#), trials are allowed as per approved procurement policy of the buyer nodal Ministries)
9. Mandating foreign / international certifications even in case of existence of Indian Standards without specifying equivalent Indian Certification / standards.
10. Seeking experience from specific organization / department / institute only or from foreign / export experience.
11. Creating bid for items from irrelevant categories.
12. Incorporating any clause against the MSME policy and Preference to Make in India Policy.
13. Reference of conditions published on any external site or reference to external documents/clauses.
14. Asking for any Tender fee / Bid Participation fee / Auction fee in case of Bids / Forward Auction, as the case may be.

Further, if any seller has any objection/grievance against these additional clauses or otherwise on any aspect of this bid, they can raise their representation against the same by using the Representation window provided in the bid details field in Seller dashboard after logging in as a seller within 4 days of bid publication on GeM. Buyer is duty bound to reply to all such representations and would not be allowed to open bids if he fails to reply to such representations.

\*This document shall overwrite all previous versions of Bid Specific Additional Terms and Conditions.

[This Bid is also governed by the General Terms and Conditions](#)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES  
DR. B.R.A. INSTITUTE OF ROTARY CANCER HOSPITAL**

Ansari Nagar, Delhi – 110091  
Aiims, New Delhi

**Subject: Revised Specifications on the basis of Pre-bid meeting and representations received by the Potential Bidder for “Advanced State of the Art 128 Slice CT Scanner with Dual Energy capabilities” to be installed at Radiodiagnosis, Dr. BRAIRCH, AIIMS, New Delhi on Buy-back basis**

Quotations are invited for an advanced and state-of-the-art Dual Energy 128 sub-mm slices per rotation CT scanner with comprehensive whole-body imaging and dual-energy capabilities for the Department of Radiodiagnosis, IRCH, AIIMS. It should be integrated with the existing PACS system. Specifications mentioned are essential requirements of this equipment and the terms and conditions are mentioned separately. The entire system and software applications should have US-FDA /European CE /BIS/CDSCO certifications.

S.No.	(A) Features	(B) Essential Specifications
<b>1. GANTRY</b>		
1.1.	Aperture	≥ 70 cm
1.2.	Scan field	≥ 50 cm
1.3.	Gantry Tilt	Physical/digital gantry tilt of minimum 20 degrees on either side.
1.4.	Integrated display panel	Gantry front/mobile tablet showing current scan parameters such as kV, mA etc.
<b>2. SINGLE SOURCE DUAL ENERGY</b>		
2.1.	Dual Energy	The system must have dual energy capabilities and a wide range of applications should be available.
2.2.	Dual-energy packages (to be offered)	The system should have dual energy acquisition and processing capabilities. Number of licenses are mentioned individually for each application.
2.2.1.	Virtual NCCT—Brain hemorrhage (1 license)	Differentiation of brain hemorrhage from contrast enhancement.
2.2.2.	Monoenergetic imaging (3 licenses)	Mono-energetic Imaging for beam hardening artifact elimination, Contrast augmentation and tissue visualization with Mono energetic images
2.2.3.	Material density data (3 licenses)	Electron Density and Atomic number visualization and processing.
2.2.4.	Gout Imaging (1 license)	Colour-coded visualization of deposited uric acid crystals in peripheral extremities.
2.2.5.	Calculi Characterization (1 license)	Visualization of the chemical composition of kidney stones.

*[Handwritten signatures and blue official stamps are present at the bottom of the page. The stamps include the name of the Additional Professor, Department of Radiodiagnosis, Dr. B.R.A. IRCH, AIIMS, New Delhi. One stamp is dated 20/11/2011.]*

2.2.6	Lung Analysis (1 license)	Lung isolation, Color coding of affected vessels, Iodine uptake quantification.
2.2.7	Direct Neuro CTA (1 license)	Neuro CTA with accurate bone removal in complex body regions using the dual-energy method.
2.2.8	Contrast vs Blood differentiation (1 license)	Virtual non-contrast CT scan using dual-energy method.
		<b>All other dual energy applications should be quoted as optional.</b>
2.2.9	Vascular Plaque characterization	Vascular Plaque characterization using dual-energy method.
<b>3. X-RAY GENERATOR</b>		
3.1.	Output capacity (actual and not effective)	≥ 70 kW or more
3.2.	mA range	20-600mA or more
3.3.	kV	80- 140 kVp
<b>4. TUBE ASSEMBLY</b>		
4.1.	Tube Voltage	80-140 kV or more
4.2.	Tube current range	600mA or more
4.3.	Anode heat storage capacity	≥7MHU
4.4.	Tube Cooling rate	≥ 1000 KHU per minute
4.5.	Focal spot	1.0 X 1.0 cm or less
<b>5. PATIENT TABLE</b>		
5.1.	Maximum load capacity	≥ 200 kg
5.2.	Scannable range	≥ 1500 mm
5.3.	Longitudinal table speed	≥ 100 mm per sec
<b>6. SCANNING MODES</b>		
6.1.	Spiral scanning	
6.1.1.	Spiral exposure	At least 60 seconds or more
6.1.2.	Scan time for full 360-degree rotation	≤ 0.35 sec
6.1.3.	Bolus triggered/ bolus chase spiral acquisition	The system should be integrated with the injector for auto trigger (care contrast/Xtream injector/ Injector Synchronization / SyncRight equivalent)
6.2.	Axial Scanning	
6.2.1.	Slice Thickness	0.625 – 5 mm variable
6.2.2.	Dynamic Multiscan	It must be possible to do dynamic multiscan for any body part
<b>7. DATA ACQUISITION SYSTEM- LATEST DETECTOR CONFIGURATION</b>		
7.1.	Detector type	Latest detector - (GEMSTONE / STELLAR / NANOPANEL Prism /Quantum or equivalent)

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7.2.	Detector coverage width	38 mm or more at 1:1 pitch
7.3.	Number of acquired slices per rotation	Minimum 128 slices
7.5.	Number of detector rows or elements	Minimum 64 rows
7.6.	Whole brain perfusion	The system should do whole brain CT perfusion with coverage up to the detector width of the system
7.7	Dynamic CTA	Enabling 4D CT DSA, time-resolved perfusion with a minimum range up to the detector width of the system
7.8	2D intervention scan mode	2D intervention for biopsy needle planning
<b>8. PATIENT COMMUNICATION</b>		
8.1.	Integrated patient intercom	There should be integrated patient intercom
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
<b>9. PATIENT REGISTRATION</b>		
9.1.	Pre-registration	It should be possible to do pre-registration of patients at any time prior to scans
9.2.	Emergency registration	Special emergency registration should be possible
9.3.	HIS & RIS integration	It must transfer patient information from departmental existing HIS & RIS via DICOM Get Worklist
9.4.	PACS/HIS/RIS	It must transfer examination information from the scanner into departmental existing HIS & RIS via MPPS
<b>10. OPERATOR CONSOLE WITH TABLE</b>		
<b>Computer System &amp; image processor</b>		
10.1.	CPU Processor	Minimum quad-core processor, at least 1 TB SSD, at least 16 GB RAM. The best available option to be quoted by the vendor
10.2.	Display	One large minimum 18" high-resolution LCD monitor with a display of 1024X1024 or more
10.3.	Software	Should perform functions like scanning image reconstruction, film documentation, MPR, CT angiography, MIP, 3D VRT, 3D SSD, Fly through, perfusion scanning for stroke imaging
10.4.	CT Angiography and Automated bone removal	Protocols to do CT angiography of anybody region and accurate presentation of subtracted CTA data sets
<b>11. IMAGE POST PROCESSING</b>		
11.1.	Architecture	A Client Server Architecture based solution (Intellispace Portal/Dexus/Syngo Via etc.)
11.1.1.	Minimum number of slices	Software must support minimum of 40,000 slices with data pre-processing
11.1.2.	User licensing scheme	As defined for each application

11.1.3.	Integration	Imaging processing server must be integrated with existing centrality RIS-PACS in the department
11.2.	<b>Server Hardware</b>	
11.2.1.		Dell/HP/IBM server grade (Xeon) 10 core CPU; RAM- 192 GB minimum; Data Disc: RAID level 5; Graphical processing unit: NVIDIA GPU or equivalent; Image storage minimum 10 TB SSD.
11.3.	<b>Client hardware (10 units) specification for each client station (along with reporting console)</b>	
11.3.1.	Monitors	2 monitors per client, each monitor of diagnostic grade (3 MP or more), 5-button mouse, Online continuous UPS of at least 2kVA. Total 20 monitors.
11.3.2.	CPU Unit	Z820 or equivalent CPU unit with six-core processors, Minimum 32 GB RAM, NVIDIA 1 GB or equivalent, 1TB SSD, and dual monitor configuration.
<b>Server S/W</b>		
11.4.	<b>Basic capabilities (10 or more concurrent users for all applications)</b>	
11.4.1.	MPR	Real-time multi-planar reconstruction (MPR) of secondary views, with viewing perspectives in all planes including curved & orthogonal MPR,
11.4.2.	ROI evaluation	Parallel evaluation of multiple ROI in circle, irregular and polygonal forms.
11.4.3.	Statistical Evaluation	Area/ volume, Standard deviation, Mean value, Image annotation and labelling, Angle measurement, Distance measurement, Histogram, Time-intensity curves, Peak-enhancement images, Time-to-peak images
11.4.4.	2D	2-D, including image zoom and pan, image manipulations, including averaging, reversal of grey-scale values, and mirroring etc.
11.4.5.	3D	MIP, Min IP, SSD, VRT and other advanced 3D applications and colour-coding for different tissues
11.4.6.	MR reading	Reading of brain, spine, and neck MR scans
11.5.	<b>Advanced application (3 concurrent users)</b>	
11.5.1.	CT Angio	Automatic table and bone subtraction in CT angiography, Single click bone removal, manual vessel tracking, the ability for a bone-free visualization of the (3 concurrent users), Vessel tracking, Stenosis measurement
11.5.2.	CT perfusion	Software for advanced cerebral perfusion study with stroke protocol and summary maps of the perfused area
11.5.3.	CT Body Perfusion	Multi-slice calculation of blood flow, blood volume, permeability images, tissue assessment of perfusion changes


  
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11.5.4.	Integrated fusion	Multi-modality fusion- fusion between PET-CT, PET-MR, CT-MR, MR-SPECT, MR-MR etc.
11.5.5.	CT segmentation	Automated segmentation of lung lesions and analysis
11.5.6.	Colonography	Noninvasive evaluation of the entire colon
11.5.7.	Fly Through	Internal (endoscopic) views using multiple-colour surface shaded display blended with the 3D volume-rendered image
11.5.8.	Liver Analysis	3D mapping of vascular supply areas onto liver tissue, Virtual dissection planes and subsequent volumetric calculation
11.5.9.	Dental	Prepare dental images with CT imaging for implant planning
11.5.10.	Pulmo3D software or equivalent	For evaluation of lung volume
11.5.11	Neuro DSA	For evaluating cranial arteries by single click bone subtraction
11.5.12	Comparison	Able to compare exams with prior studies including oncology cases, neuro cases, body imaging, comparison according to RECIST criteria, PET CT cross time point evaluation, quantification of tumour growth rates, min.4 time points
11.5.13	Workstream 4D	4D workflow with direct generation of axial, sagittal, coronal or double-oblique images from standard scanning protocols
11.5.14	Automatic spine reconstruction	Automatic reconstruction of CT spine, automatic spine labelling immediately after acquisition and labelling (3 concurrent users)
11.5.15	Bone reading	Diagnostic bone assessment in radiological in radiological CT datasets. The spine and ribs should be displayed in one plane.

## 12. IMAGE RECONSTRUCTION

12.1	Recon speed	Minimum 35 images/sec
12.2.	Recons Field of View	5 to 50 cm continuous
12.3.	Recon Matrix	512 X 512
12.4.	Real-time display	Real-time display (512 x 512) during spiral acquisition

## 13. IMAGE QUALITY

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13.1.	High contrast Spatial Resolution for the entire width of the detector	>15 Lp/cm @ cut-off
13.2.	Low-contrast resolution	At least 5 mm at 3.0 HU. Measurement to be based on 20 cm CATPHAN

#### 14. DOSE REDUCTION TECHNIQUES

14.1.	Radiation dose	There should be radiation dose calculation and display during the procedure; DICOM structured dose report, dose notification, dose alert
14.2.	Pre-patient collimation	There should be pre-patient collimation to reduce unnecessary doses to the patient
14.3.	Model-based Iterative reconstruction (software & hardware)	Model-based Iterative reconstruction technology or equivalent technology which will provide dose reduction without compromising on contrast resolution and SNR for all imaging protocols including brain including hardware and software (SAFIRE / ACER-V / IMR or other equivalents)
14.4.	Pediatric & infant protocol	Low-dose CT protocols must be provided
14.5.	Minimum recon speed using Model-based Iterative Reconstruction	8 images/sec







#### 15. DOSE PERFORMANCE DATA (USING IEC STANDARD PHANTOMS)

15	Radiation Dose	
15.1.	Head	Not more than 20 mGy / 100 mAs
15.2.	Body	Not more than 10 mGy / 100 mAs

#### 16. NETWORKING

16	DICOM compliance	
16.1.		DICOM Storage (Send/Receive)
16.2.		DICOM Modality Worklist User
16.3.		Modality Performed Procedure Step (MPPS)
16.4.		DICOM Print User
16.5.		Query/Retrieve User and Provider
16.6.		DICOM 3 compliance
16.7.	Integration with RIS/PACS/HIS	Integration with departmental RIS and PACS and institution HIS must be done. Any licenses or software needed for the same is to be provided. Vendor is responsible for integrating the scanner with any of the existing and future PACS/RIS/HIS systems.

#### 17. ARCHIVING

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 आचार्य/Professor  
 विकिरण-निदान विभाग/Dept. of Radio-diagnosis  
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17.1.		Fully DICOM 3.0 compliant including capability from HIS- RIS interface
17.2.		Service Class User & Provider (CT, MR, NM, Secondary Capture)
17.3.		Storage Commitment User
17.4.		Removable Media
17.5.		DVD-ROM archive
17.6		DICOM CD Writer. Specify the minimum number of uncompressed and compressed images that it can store per disc. Option of viewing these discs on any PC without a DICOM viewer should be available. Warranty of the system should protect against the obsolescence of this device.
17.7		1000 writable CDs.

### 18. DUAL HEAD PRESSURE INJECTOR

18.1.	Dual head pressure injector	Dual head pressure injector with dual flow
18.2.	Disposable syringes with minimum 100 cm length tubings	250 syringe sets (2 syringes in one set with a J tube) and 250 tubing (100 cm length) per year for the first 5 years (total 1250 complete sets)

### 19. AIR CONDITIONING

19.1.		A multi-split air –conditioning system should be provided for the CT area including the equipment/ examination room, reading room and control room where the temperature requirement is 21 + 2 degrees. The indoor units should be ceiling-mounted. The control unit should be wired and fixed on the wall in the examination and console room. Minimum 10-ton AC with temperature control. <b>Make( Bluestar/Daikin/equivalent)</b>
19.2.		Mention the Heat load.
19.3.		<b>Two 2T AC split units in the server room for image processing server with backup</b>

### 20. UPS (Emerson or APC)

20.1.	Power	Minimum 160 kVAUPS (Emerson /PCI / or equivalent)
	Minimum full system backup time	Minimum 30 min back for the full system including image processing server

### 21. DRY LASER CAMERA

21.1.	Resolution	16 bits / 500 dpi
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21.2.	Port	Min 3
21.3.	Number of film trays	Minimum 3
21.4.	Support film sizes	17X 14, 10X12 and others
<b>22. MISCELLANEOUS</b>		
22.1.	Chairs (4) in CT console room	Chairs (4 in number) with rubberized swivel wheels, Steel base, height adjustable; Godrej or equivalent make. after approval from the department
22.2.	Modular drug trolley	Minimum 2 drawers with dividers suitably designed for keeping medicines, Minimum 3 Multipurpose drawers, Equipped with Waste bin, needle disposable container, file cassette & guard rails, equipped with lock key system, swivel noiseless caster with brakes
22.3.	Standard Patient positioning accessory and restraining device	All standard Accessories pertaining to patient comfort and desired study like patient restraint kit, elevated head holder, table extension, coronal headrest, table pad, armrest, cushions and pads, IV poles and infant cradle.
22.4.	Miscellaneous	A complete set of operator manuals incorporating the newer applications (soft copies)  Good quality wrap-around ultra lightweight zero lead aprons (4 No.) along with a stand for the aprons.
22.5.	Remote Diagnostics Service	Software for Remote Diagnostics Service over a telephone line. Telephone line is to be provided and maintained by the vendor.
22.6.	Patient address system	Slim Hand free microphones and loudspeakers to communicate between patients in the waiting area and CT console room
22.7.	Lead Glass	Lead Glass of 200 X 100 cm
22.7.	Fire detection system in equipment room, scanning room and console room	Fire detection system is to be provided in the area unsting photoelectric smoke detectors on the ceiling and will be connected will be the main panel of the center as per the requirements of IS/ BIS /national/ international code.
22.8.	Fire extinguisher (2)	Minimum 2.0 kg of portable Carbon dioxide (CO2) and other clean agents containing fire extinguishers) to be provided at suitable locations for fire fighting in CT room and reading room
<b>23. CIVIL WORK</b>		

23.1.	Site preparation, installation, maintenance (Turnkey)	The project should be executed on a turnkey basis. The vendor must take full responsibility for site preparation (including civil, electrical, air-conditioning and fire safety work) of the earmarked area, in consultation with the Engineering Department of AIIMS. The vendor must visit & assess the site before submitting their quote for the turnkey. The vendor must lay ducts for central AC in the examination and console room; and connect the site to the AC ducts of central air conditioning. The examination room and console room should have glossy 100% waterproof high-quality glossy glass panelling till the false ceiling. THE quoted system should have AERB-type approval and NOC. Vendors should provide all the necessary approval for the same.
23.2.		The layout plan should be made in consultation with the user.
23.3.		The turnkey work including installation/commissioning of the project should be completed within 3 months. Total project duration should not exceed 6 months (Turnkey and CT installation) from the date of LC/ and site handover whichever is later.
23.4.		Certification to effect that the work has been executed as per the specifications will be by the Engineering Department of the institute.
		Logical workflow and radiation safety norms should be adhered to in the proposed plan.
	Furniture	<ol style="list-style-type: none"> <li>1) Cupboard for storage – No. 3</li> <li>2) Instrument (medicine) trolley – No. 2</li> <li>3) Godrej swivel chairs with armrests – No. 5</li> <li>4) Tables – No. 4</li> <li>5) Examination stool - 1</li> <li>8) Footstep for the patient- No. 2</li> </ol>

**24. WARRANTY**

24.1.	First 5 years	The equipment with all its components should be guaranteed for a period of 60 months from the date of handing over the fully functional unit and all the accessories supplied (main unit including CT tube, workstations, Air conditioner, UPS including batteries etc.) to the Institute, against manufacturing defects of material and workmanship. Everything irrespective of its nature that is supplied by the vendor will be under guarantee. Periodic AERB-mandated QA tests and corresponding certifications are to be provided free of cost for the entire life cycle of the machine.
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24.2.	Up time first 5 years	During the guarantee period, the desired uptime of 95% of 365 days (24 hrs. basis) will have to be ensured, with a maximum of 5 working days of downtime at a stretch. The condition of max 5 days downtime at a stretch doesn't include the time required for custom clearance of any part, if required. In case the down time exceeds the 5% limit in a year or more than 5 days at a stretch (whichever is applicable), extension of the warranty period by double the excess down time period will be carried out.
24.3.	Beyond 5 years	The post-guarantee (after 5 years) CMC should be comprehensive for all its' components as in warranty.(everything irrespective of its nature which is supplied by the vendor will be under guarantee) and should include but not limited to UPS along with batteries (repair and/or replacement) + labour + spares for the complete system which includes all the accessories supplied such as UPS, AC, etc. (consumables included) and maintenance for another 5 years.
24.4.	Up time beyond first 5 years	If downtime exceeds 05 % (i.e. against 95% uptime guarantee on whole year 365 days time basis) double the amount of time shall be extended in the warranty/ AMC period.
24.5.		The warranty shall be inclusive of the X-ray tube and all other items including all consumables like UPS batteries, ACs etc. necessary for working and maintenance of the machine.
24.6.		In case any component of the CT system is not functional, the machine will be considered to be down irrespective of whether patient studies are being performed or not.
24.7.	Software updates	All future software updates compatible with supplied hardware shall be free of cost during warranty and CMC period.
24.8.	Onsite training	Onsite training for CT technicians & doctors for a period of 4 weeks on the application of the system
<b>25. SPECIAL CONDITIONS</b>		
25.1.		Technical specifications offered in the technical bids may be verified to be in the claimed working specifications on the same quoted model working reliably in India or abroad. In case of adverse verification report by the verification team, even though the technical bid qualifies technically on paper, that technical bid shall be treated as disqualified.
25.2.	L1 calculation	CMC, AMC, Custom duty, GST etc. will be included for L1 comparison.

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25.3	General instructions	<p>a) Two-bid system: vendors are required to make separate bids for technical and price components.</p> <p>b) Please note that all technical features, facilities and accessories mentioned in the tender document are standard requirements and hence, these should be offered as the standard feature. None of these should be offered as optional items.</p> <p>c) In the price bid, the cost of locally supplied items must be quoted separately in Indian currency. <b>The buyback price of the EXISTING CT should be quoted separately</b></p> <p>d) Please respond to each specification in the same format and order as mentioned in the tender document and specify/ indicate the verification document from the product data-sheet against each column.</p> <p>e) Original product data sheets, complete manuals and other necessary documents should be provided. Photocopies of these documents or printouts of the email/ web pages will not be accepted.</p> <p>f) When required, information other than those in the data sheets should be provided as a separate document from the principals only and should refer to the specific sections being addressed. When a standard vendor data sheet disagrees with the bid response (offer/ compliance statement), clarification should accompany in the form of certificate from the principals only. In the absence of this, the vendor data sheet will prevail for the purpose of evaluation and the decision of the technical committee shall be final and binding on the supplier.</p> <p>g) The vendor has to station one application specialist and service engineer at the site for a period necessary to familiarize the medical and technical staff to the scanner protocols and enable them to achieve fast and efficient service.</p>
	<p><b>Additionally: -</b></p>	<p>Note:</p> <ol style="list-style-type: none"> <li>1. The delivery period may be considered as 90 days from the date of handing over the site.</li> <li>2. For buyback, an undertaking has to be given along with the technical bid where the assurance of minimum fixed buyback price has to be given and the same has to be uploaded separately in the window that will provided to upload financial documents in the price bid.</li> </ol>

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