

महाराष्ट्र शासन  
इंदिरा गांधी शासकीय वैद्यकीय महाविद्यालय व रुग्णालय नागपूर  
महात्मा ज्योतीबा फुले जन आरोग्य योजना

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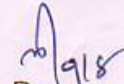
क. इंगाशावैमवस्व/मज्योफुजआयो/जाहीरात क./५११४ /२०१७ दि.०९ .०८ .२०१७

**ADVERTISEMENT**

**INDIRA GANDHI GOVERNMENT MEDICAL COLLEGE & HOSPITAL NAGPUR**

**MAHATMA JYOTIBA PHULE JAN AROGYA YOJANA**

Quotations are invited from the suppliers for the supply of Medicine, Surgical items, Consumables & Implants required for poor patients under Mahatma Jyotiba Phule Jan Arogya Yojana in Indira Gandhi Government Medical College & Hospital Nagpur. All detail information will be displayed on our website [www.iggmc.org](http://www.iggmc.org) on 10/08/2017 For any query you can contact at MJPJAY office.

  
Dean

Indira Gandhi Government Medical College  
& Hospital

## **Terms & Conditions**

1. Please quote your prices for each item on or before date 19.08.2017 upto 5.00 PM. in a sealed envelope. Unsealed or improperly sealed quotation will not be accepted. Quotation received after 19.08.2017 will not be accepted.
2. Mention enquiry number of this letter on sealed quotation envelope & submit that in the name of "Dean IGGMC, Nagpur (MJPJAY) between 11.00 AM to 5.00 PM at the office of MJPJAY, IGGMC Nagpur. Sealed envelope will be opened at 12.00 PM on 21.08.2017 at Dean's office IGGMC.
3. Your terms & conditions if any for supply should be mentioned in your covering letter enclosed with the quotation.
4. The serial number of the items should not be changed while quoting rates. You may drop the item if not interested & list should be prepared in printed copy only otherwise it may be rejected.
5. Submit the attested copy of
  - i) TIN/ TAN Number
  - ii) Pan Card
  - iii) Gumastha for 3 years
  - iv) Last year ITR
6. Supplied items should be of good quality, ISI Marked & as per FDA norms. Mention proper specification of goods while quoting the prices.
7. Please note that prices should inclusive of all taxes. Supplier should supply all goods as per these rates for 1 year or till the date of next enquiry whichever is later.
8. Delivery of goods will be accepted at pharmacy section in MJPJAY office. You have to execute supply order in stipulated period only. If not, supply order will be treated as cancelled.
9. Order will be given telephonically by pharmacist in MJPJAY office. Supplier with lowest gross total for respective order will be selected. Supplier should deliver the order within 2 hours with delivery Manual (DM)
10. Suppliers should mention exact name, rate & serial no of item in DM as given in quotation. Patients name, MRD number, MJPJAY approval number should also be mentioned in DM.
11. As the DM is certified, confirmatory order of respective DM from Dean IGGMC will be issued to supplier. Supplier should submit the tax invoice for respective confirmatory order at MJPJAY office within 3 days otherwise payment will be cancelled. Only after submission of tax invoice within 3 days payment be processed.
12. In case of deficiency in service/quality the supplier will be debarred after three complaints for one year & supplier with second lowest rate will be selected for supply.
13. This office reserve the right to cancel the order at any time without showing any reason.

## **Special Terms & Conditions for Orthopedic & Implant Suppliers**

1. Supplier should submit following documents with quotation in sealed envelope.
  - i) GMP Certificate
  - ii) Drug license in form 28
  - iii) ISO Certificate
  - iv) CE Certificate / FDA Certification for Implants.
  - v) SSI Certificate
  - vi) Biocompatibility test of SS and TT material
  - vii) Factory manufacturing license
  - viii) Metallurgy test for testing of materials
  - ix) All documents mentioned in (4) of "Terms & Conditions"
  - x) Make/Model should be mentioned.
  - xi) Authorization certificate is mandatory if supplier is not manufacturer.
2. Supplying agency should have minimum 3 years of experience in the market/institute.
3. Order of implant will be given telephonically by the doctor of orthopedic department. Implants/sets are to be supplied before 4.00 PM on the date before operation. No sets will be accepted after 4.00 PM.
4. Sets are to be checked by doctor on duty of respective unit. Implant supplier & doctor checking the set will be responsible for any deficiency in the set.
5. Issued sets have to be picked up before 3.00 PM on the OT day by supplier. Any loss of implant/instrument has to be reported instantly. Delayed reporting will not be entertained.
6. Supplier should submit the certified copy of DM at MJPJAY office within 7 days from date of supply. Certification of DM should be done only from incharge of respective unit. If supplier fails to submit the certified DM within 7 days, respective order will be treated as cancelled and payment will not processed.
7. Quotations should be given in 2 envelopes. (Technical & Commercial Separately)

## **Special Terms & Conditions for ENT Implant Suppliers**

The implant should be in a pre-autoclaved pack, good quality, ISO certified company.

  
Dean

Indira Gandhi Government Medical College  
& Hospital Nagpur

MJPJAY, IGGMC NAGPUR.

REQUIREMENT OF ENT DEPARTMENT				
SR. NO.	NAME OF CONSUMABLES	SIZE	RATES (RS) ( INCLUSIVE OF ALL TAXES)	REMARK
1	GROMMET	-		
2	TOTAL OSSICULAR RECONSTRUCTION PROSTHESIS (TORP)	-		
3	PARTIAL OSSICULAR RECONSTRUCTION PROSTHESIS (PORP)	-		
4	TEFLON PISTON	-		

SR. NO.	NAME OF CONSUMABLES	SIZE	RATES (RS) ( INCLUSIVE OF ALL TAXES)	REMARK
1	CHISEL	1MM		
2	CHISEL	2MM		
3	STAINLESS STEEL MINI PLATE 2MM	2MM		
4	TITANIUM MINI PLATE 2MM	2MM		
5	TITANIUM SCREW SIZE 2.4MM-2.8MM	2.4-2.8MM		
6	STAINLESS STEEL SCREWS 2.4MM - 2.8MM	2.4-2.8MM		
7	ADAPTOR FOR SUCTION CANNULAE 10CM	1		
8	CANNULAEVERHOEVEN 17G - 26G	1		
9	TUNGSTEN CARBIDE CUTTING BURR SIZE 0.6 - 7 MM	12SIZES		
10	TUNGSTEN CARBIDE DIAMOND BURR SIZE 0.6 - 7 MM	12SIZES		
11	BELLUCCI MICRO EAR SCISSORS	-		
12	MICROEARHARTMANN'S FORCEPS	-		
13	26 G LONG NEEDLE 1.5 INCH	EACH NEEDLE		
14	JOBSON HORNE PROBE WITH RING CURETTE	-		
15	DISPOSABLE UNIPOLAR CAUTERY	EACH		
16	DISPOSABLE BIPOLAR CAUTERY	EACH		
17	SIALISTICSHEET SIZE 0.005 INCH THICKNESS,	SIZE 2X1		
18	MONTGOMERY T. TUBE	1		
19	FLEXOMETALIC ET TUBE	6 NO		
20	FLEXOMETALIC ET TUBE	6.5 NO		
21	FLEXOMETALIC ET TUBE	7 NO		
22	FLEXOMETALIC ET TUBE	7.5 NO		
23	FLEXOMETALIC ET TUBE	8 NO		
24	FLEXOMETALIC ET TUBE	8.5 NO		
25	MAXILLARY SINUS FORCEPS	1		
26	MEROCELE	8CM		
27	MEROCELE	10CM		
28	ABSORABLE GELATIN SPONGE	-		

*[Handwritten Signature]*  
9/8/17 (1)

MJPJAY, IGGMC NAGPUR.

29	SOFT COTTON ROLL	200GM		
30	ABSORABLE HEMOSTAT (FIBRILLAR)	-		
31	CORRUGATED RUBBER DRAIN	-		
32	PERCUTANEOUS TRACHEOSTOMY SET	-		
33	METALLIC TRACHEOSTOMY TUBES (CUVELLIER JACKSON TYPE)	ALL SIZES		

SR. NO.	NAME OF CONSUMABLE	SIZE	RATES (RS) ( INCLUSIVE OF ALL TAXES)	REMARK
1	HEARING AID.	-		

*[Handwritten Signature]*  
9/5/19