All India Institute of Medical Sciences (AIIMS) Bhopal Saket Nagar, Bhopal 462 020

Department: Biochemistry Department, Medical College

Ref:AIIMS/BPL/Biochem/685

Dated: 25/02/2016

Subject: Requirement of Diagnostic Kit for Biochem & immunoassay auto analyzers (Under Category No: 009)

Quotation shall be submitted as a hard copy in a sealed envelope addressed to 'The Director, AIIMS Bhopal', & Kind attention to the office of the Store officer (Central Stores Medical College)
AIIMS Bhopal, latest by 2:00 pm of 18/03/2016

Schedule of requirement & separately.

S. No.	Name of Item	Pack size	Total Requirement			
1	Urine Controls for Clinical Biochemistry-Level 1-(low level) (lyophilized)	12 x 10 ml	120 ml			
2	Urine Controls for Clinical Biochemistry-Level 2 (high level) (lyophilized)	12 x 10 ml	120 ml			
3	Control Serum for Clinical Biochemistry-Level 1-(low level) (lyophilized)	10 to x5 ml OR 20 x 5 ml	250 ml			
4	Controls Serum for Clinical Biochemistry-Level 2 (high level) (lyophilized)	10 x5 ml OR 20 x 5 ml	250 ml			

Specifications of Urine Controls for SI No. 1 & 2

- 1. The controls should be in lyophilized form
- 2. After reconstitution the volume should be at least 2 ml
- 3. Shelf life of the lyophilized form should be minimum One year
- 4. The shelf life of the reconstituted solution should be at least 14 days at -20°C or 2 -8°C
- 5. Assayed values should be given along with the kit

The following parameters should be included in the menu

- 1. Calcium
- 2. Chloride
- 3. Cortisol
- 4. Creatinine
- 5. Glucose
- 6. Microalbumin
- 7. Osmolality
- 8. Phosphorus
- 9. Potassium
- 10. Protein (Total)
- 11. Sodium
- 12. Urea
- 13. Urea Nitrogen
- 14. Uric Acid
- 15.

Specifications of Serum Controls for SI No. 3&4

- 1. Controls should be compatible with Beckman AU 480,680 and 5800 models
- 2. The controls should be in lyophilized form
- 3. After reconstitution the volume should be at least 2 ml
- 4. Shelf life of the lyophilized form should be minimum 1.5 years from date of manufacturing
- 5. The shelf life of the reconstituted solution should be at least 25 days at -20°C or 2 -8°C (Except for Bilirubin)
- 6. Assayed values should be given along with the kit
- 7. The application specialist should come and demonstrate the quality of the controls with the existing reagents.
- 8. The application specialist should be available on phone or in person if needed in case of problems with regards to controls.
- 9. The comparison of prices will be calculated per ml of reconstituted controls

- 10. If the parameters which is mentioned is provided in more than one controls prices of both controls will be added
- 11. If there is more than two levels for any of the parameters that can also be included in the purchasing.

The following parameters should be included in the menu with the following methods

S No.	Parameters	Compatible methods					
1	Albumin	BCG method					
2	ALT	IFCC					
3	AST	IFCC					
4	ALP	IFCC AMP Buffer					
5	Amylase	IFCC-EPS					
6	BUN/Urea	GLDH, Kinetic assy					
7	Total Bilirubin	DPD					
8	Direct Bilirubin	DPD					
9	Calcium	Arsenazo III					
10	Cholesterol	CHOD-POD					
11	СК-МВ	CKIFCC method plus immune inhibition					
12	СК	IFCC NAC activated					
13	Creatinine	Modified Jaffe, Kinetic					
14	Glucose	Hexokinase					
15	GGT	IFCC					
16	HDL-Cholesterol	Enzymatic Immunoinhibition					
17	LDL-Cholesterol	Enzymatic Selective Protection					
18	Lactate	LOD-POD					
19	Lipase	Enzymatic					
20	LDH	LDH (L-P) IFCC					
21	Magnesium	Xylidyl Blue, Colourimetric, Tris-Buffer					
22	Phosphate	Phosphomolybdate Complex					
23	Triglyceride	GPO-POD					
24	Total Protein	Biuret					
25	Iron	ТРТZ					
26	Uric acid	Uricase PAP					

27	UIBC or TIBC	Nitroso-PSAP
28	Sodium	ISE
29	Potassium	ISE
30	Chloride	ISE
31	CRP normal application	Latex Particle Immunoturbidimetric
32	СКМВ	CKIFCC method plus Immuno-inhibition
33	HbA1c	Turbidimetric Immuno-inhibition

Terms & Conditions:

- 1. The quotation is to be submitted only in the format enclosed. Not acceptable in any other form.
- 2. The quotation must be <u>submitted in person in sealed envelope to the office of the Store officer (Central Stores Medical</u> College) AIIMS Bhopal.
- 3. Each page of the quotation must be printed on letter head of the company duly numbered.
- 4. If you are the authorized distributor for more than one manufacturer and empanelled for all such category then, please submit separate quotation for each Manufacturer.
- 5. Quotation of non empanelled companies will not be entertained
- 6. Failure to comply with any of these conditions will lead to rejection of the quotations and the responsibility for the same will lie with the company submitting the quotations.
- 7. **F.O.R.:** Rate quoted shall be fixed and on FOR destination Basis.
- 8. **Tax:** (1) Quotation must contain VAT/TAN/PAN number otherwise it will not be considered.
- 9. (2) Rate of applicable Tax should be shown separately.
- 10. **Delivery Period**: Supply is required immediately from ready stock but maximum within a period of 25 Days.
- 11. **Payment:** Payment will be made within reasonable time from the date of acceptance of supply.
- 12. **Rates Validity:** Rates quoted first time will be valid for one year from the date of Purchase Order.
- 13. **Penalty**: If the supply is not received within the scheduled delivery period, a penalty @ 0.5% per week or part thereof subject t a maximum of 5% shall be imposed which will be deducted from the Invoice.
- 14. **Right of rejection**: The Competent authority reserves all the right to reject any or all quotation without assigning any reason.
- 15. The comparison of prices will be calculated per ml of reconstituted control

FINANCIAL BID FORMAT

Name of supplier:	Date:
Address:	
Contact No:	
E Mail Id:	

	Quotation for supply of Laboratory Plastic Ware, for Microbiology Department Hospital complex AlIMS Bhopal, as per the Enquiry No: 530/03, Dated:17/02/2016													
	Description		Brand/Make	Cat No: *Attach Photo copy of Highlighted Item.	Pack Size as per catalogue.	Pack/Price in Rs.			% of Discount on unit Price in Col:9		Net Per Unit Cost after	VAT		
Sr.No						MRP as printed on Pack	Catalogue Price	Per Unit Cost whichever is less on col:7 & 8	Discount % as per the Empanelment letter.	Current Discount %	discount whichever is higher in Col:10 &11	applicable if any (Not Applicable on M.R.P)	Net Unit cost including All	Total Cost Per pack in Rs.
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	Urine Controls for Clinical Biochemistry-Level 1- (low level) (lyophilized) Pack Size 12 x 10 ml	120 ml												
2	Urine Controls for Clinical Biochemistry-Level 2 (high level) (lyophilized) Pack Size 12 x 10 ml	120 ml												
3	Control Serum for Clinical Biochemistry-Level 1- (low level) (lyophilized) Pack Size(10 to x5 ml OR 20 x 5 ml)	250 ml												
4	Controls Serum for Clinical Biochemistry- Level 2 (high level) (lyophilized) Pack Size(10 to x5 ml OR 20 x 5 ml)	250 ml												

Signature of the vendor with Stamp Date
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