# AIIMS RISHIKESH

# INDENT FOR PURCHASE OF STORES

(FORM P-2)

- 1. Please fill a separate form for each item
- 2. Please fill completely in triplicate. Incomplete forms and those with illegible writing may not be accepted.

| Name of items with full specifications & required accessories | Quantity(in figures and words) | Cost per unit<br>(approx) in foreigr<br>currency and<br>Rupees | Total cost<br>(approx)        |
|---|--------------------------------|--|-------------------------------|
| XENON BULB of<br>Stellaris PC Vitrectomy                      | 1 (one)                        | filte Lakhr<br>fifteen thousand                                | five lakes<br>fifteer Thousan |
| machine (BL 3320)   | 1.00                           | and fifty nine<br>hupers only                                  | and fifty nice surpers only   |
|   |                                | ( Ro 5, 15, 959.00)<br>( including tax)                        |                               |
|   | ALE.                           |  |                               |
|   |                                |  |                               |
|   |                                | ***  |                               |
|   |                                |  |                               |

For equipment, please provide the following information

part of already existing vitrecting machine. Old bulb is fused a life ended.

Is the equipment to be used for patient care of research:

100% patient care (vitreo retinal surgery) of the state of the

सह-आचार्य /Associate Professor नेत्र रोग विभाग Department of Opfithalmology एम्म ऋषिकेश /AIIMS Rishikesh

Is this/ similar equipment already available in the department? Life of old bulb When purchased? 19.10.22 Cost at that time: Same Cost Present functional status: Life Tests/ procedures done on this equipment in last year: Vitreo retiral surgeries are writinely performed with vitrectory mechine, for which bulk is exertial for each vitreo retiral surgery, patient pays rupers five thousand in hospital billing splems.

If yes, what is the justification for this purchase?

Justification heationed above (specifical part for retiral surgers)

Is this/similar equipment available in an 1 other department in the Institute? If yes, what is the justification for this purchase? - NA -For Consumables, please provide following information: XENON BULB for Stellaris PC vitrectory machine Description of stocks available
No stocks available When was it last purchased? 19.10.22 In what quantity? One Cost; 65,15,959 Source: Bausch & Lomb ( Proprietary product) Test/ procedures done in this period: Approximately 500 (bive hundred) Vitreo retiral surgeries were performed with Revenue generated in this period: E Approx 500 singery performed; each patient pays to 5,000 in hospital billing system for ... Average annual consumption) ( but has around 400 homes of life. Shelf life Period for which this purchase will last Number of tests likely to be done with this expected to cover approx five hundred surgeries (as per last bulb consumption)

5. For furniture, please provide the following information: Exact location and use NA Existing furniture at that place Justification for this purchase Possible sources (name all sources you know) from where item may be obtained (name, address, phone no, fax no, email, etc of contact person) HEAD OF DEPARTMENT/SECTION Signature Kamen DR. RAMANUT SAMANTI Name PROF SANTEEV K. MITTAL ASSOCIATE PROF, OPHTHALMOLOGY PROFICHOD, Designation... ophthalmology. डॉ. रामानुज सामन्त /Dr. Raiffaffuj Samanta



# Annexure - A

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, RISHIKESH-249201 अखिल भारतीय आयुर्विज्ञान संस्थान, ऋषिकेश- २४९२०१

## ATTACH WITH FORM- P2

Please ensure following points with Form- P2 along with your request letter for procurement:

| SI.<br>No. | Required fields   | Whether<br>fulfilled the<br>criteria | Remark  |
|------------|---|--------------------------------------|---|
| 1          | Manpower availability   | (Yes' No)                            |   |
| 2          | Space availability  | (Yes/No)                             |   |
| 3          | Whether specifications are generic, not of some company or brand specific (should have priority for make in India products)                                     | (Yes/No)<br>Proprietary              | Machine is already existing. Bull is required                 |
| 4          | USFDA and European CE should be replaced with equivalent Indian Standards that is ISO or BIS or same may be written as ISO/BIS/USFDA/European CE or equivalent. | (Yes/No)                             |   |
| 5          | Approved in Assessment Committee or Not.  | (Yes/ No)                            | Machine already<br>existing after approval<br>But is required |
| 6          | If Item cost is above or equal to 30 lacs, specifications should be duly vetted by DGHS nominee/External expert.  | (Yes/No)                             |   |
| 7          | Letter to External Expert & DGHS Should<br>be routed through Director Office only<br>(BME will help in this process).   | (Yes/No)<br>- NA -                   | 3   |
| 8          | Mode of Purchase- GeM availability/non availability should be ensured & verified before procurement by LPC/Tender (Specification should be same).               | (Available/ Not (vailable)           | Not available   |

| NDENTO | )R |  |
|--------|----|--|
|        |    |  |

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|------------|--------------|----|-----|----|-----|---|---|-----|----|---|----|--|
|            | K.           | au | h / | 24 | ııı | ( |   | 2 4 | me | 2 | te |  |
| Signature. |              |    |     |    |     |   |   |     |    |   |    |  |

Name DP. PAMANUT SAMANTA
Designation ASS OCIATE PLOT

Department: OPHTHALMOLOGY

Date: 08.11. 2024

इॉ, रामानुज सामन्त /Dr. Ramanuj Samanta नाचार्य /Associate Professor नेत्र रोग विभाग

Department of Orderholmology

HEAD OD DEPARTMENT/ SECTION

Mobile/Pager: .....

| Signature Signature           |
|-------------------------------|
| Name: PROF SANSEEU. K. MITTAL |
| Designation: PROF & H.O.D.    |
| Department: OPHTHALMOLOGY     |
| Date:                         |

#### P-3 FORM

(to be attached with P-2 form for Proprietary items)

### AIIMS Rishikesh

## PROPRIETORY ARTICLE CERTIFICATE

|      | XENON BULB FOR STELLARIS PC   |
|------|---|
|      | It is certified that the items (VITRECTOMYMACHINE)  |
|      | required in the P-2 form should be purchased from M/s Baux ch. k Lowl To  |
|      | the best of my knowledge M/s. Siya Agercies, ShopNo-10, 1st flow Sanal Shopping Graph nized dealer sole manufacturers M/s. Bausch & Lomb. |
|      | the best of my knowledge M/S. That road, Dehradur   |
| au R | sole manufacturer/agents of the sole manufacturers M/s Bausch K. Low  |
|      | ( Document attached)  |
|      |   |

Similar items manufactured by other firm(s) shall not be suitable for our purpose for the following reasons:-

Xenon Bulb for Stellaris PC Vitrectory machine is a proprietary item.

(Sign of Indenter) (DR. RAMANIO SAMANIA)

Dated

Designation

08.11.2024

ASSOCIATE PROF

1) SSOCIATIE FAUT

Department OPHTHALMOLOGY

डॉ. राघानुज सामन्त /Dr. Ramanuj Samanta सह-आचार्य /Associate Professor

नेत्र रोग विभाग

Department of Ophthalmology एम्स ऋषिकेश /AIIMS Rishikesh

Recommendation:

Signature of Head of Department/Section

N.B.: The indenter before recording the abve certificate should satisfy himself that the article is genuinely of proprietary nature manufactured under patent laws.