

## 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:

Sl. No.	Required fields.	Whether fulfilled the criteria (Yes/ No)	Remark
1	Manpower availability	(Yes/ No)	Yes
2	Space availability	(Yes/ No)	Yes
3	Whether specifications are generic, not of some company or brand specific (should have priority for make in India products)	(Yes/ No)	Yes
4	ISFDA and European CE should be replaced with equivalent Indian Standards that is ISO or BIS or same may be written as ISO/BIS/ SFDA/European CE or equivalent.	(Yes/No)	Yes
5	Approved in Assessment Committee or Not.	(Yes/ No)	NA
6	If Item cost is above or equal to 30 lacs, specifications should be duly vetted by DGHS nominee/External expert.	(Yes/ No)	No
7	Letter to External Expert & DGHS Should be routed through Director Office only (BME will help in this process).	(Yes/ No)	No
8	Mode of Purchase- GeM availability/non availability should be ensured & verified before procurement by L1/PC/Tender (Specification should be same).	(Available/ Not available)	Not Available (Proprietary item)

INDENTOR

Signature

Name

Designation

Department

Date

Mobile No. /Pager

HEAD OF DEPARTMENT/ SECTION

Signature

Name

Designation

Department

Date

Mobile/Pager

डॉ. पूनम सिंह / Dr. Poonam Singh  
सह आचार्य, नवजात शिशु रोग  
Associate Professor of Neonatology  
एमएस, ऋषिकेश / AAIMS, Rishikesh

डॉ. मयंक प्रियदर्शी / Dr. Mayank Priyadarshi  
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Assistant Professor / Department of Neonatology  
एमएस, ऋषिकेश (उत्तराखण्ड) / AAIMS, Rishikesh (Uttarakhand)

डॉ. श्रीपत्नी बासु / Dr. Shripama Basu  
आचार्य एवं निवृत्त/नवजात शिशु रोग विभाग  
Professor & Head of Neonatology  
एमएस, ऋषिकेश (उत्तराखण्ड) / AAIMS, Rishikesh (Uttarakhand)

**INDENT FOR PURCHASE OF STORES****(FORM P-2)****Neonatal Specific Surgical Consumables**

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 (approx) in INR Rupees	Total cost (approx)
Peripherally inserted central venous polyurethane catheter (PICC with stylet)- 1FR x 28G	200nos. (two hundred)	6000/- (six thousand)	12,00,000/- (twelve lakh)
Peripherally inserted central venous polyurethane catheter (PICC)- 2FR X 24G	250nos.(twenty five hundred)	4000/- (four thousand)	10,00,000/- (ten lakh)
Polyurethane Umbilical Catheter 3.5FR	300nos.(three hundred)	1030/- (one thousand and thirty)	3,09,000/- (three lakh Nine thousand)
Polyurethane Umbilical Catheter 4FR	500nos.(five hundred)	650/- (six hundred fifty)	3,25,000/- (three lakh twenty five thousand)
Polyurethane Umbilical Catheter 5FR	500nos.(five hundred)	650/- (six hundred fifty)	3,25,000/- (three lakh twenty five thousand)

**For equipment, please provide the following information**

Detailed description of the actual use of the equipment:

Is the equipment to be used for patient care of research: Can be used simultaneously as a tool for patient care as well as research.

If both, state % of time to be used for patient care: 50%

% of time to be used for research: 50%

Is this/ similar equipment already available in the department? No

When purchased? no Cost at that time: Present functional status: Tests/ procedures done on this equipment in last year:

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डॉ. श्रीपामा बासु / Dr. Sripama Basu  
आचार्या एवं विभागाध्यक्षा / नवजात शिशु रोग विभाग  
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Revenue generated by this equipment in last year:

If yes, what is the justification for this purchase?

Is this/similar equipment available in any other department in the Institute? No  
If yes, what is the justification for this purchase?

**4. For Consumables, please provide following information:**

Description of stocks available: Nil

When was it last purchased?

In what quantity?

Cost;

Source

Test/ procedures done in this period:

Revenue generated in this period:

Average annual consumption

Shelf life

Period for which this purchase will last Number of tests likely to be done with this quantity:

**5. For furniture, please provide the following information:**

Exact location and use

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)

INDENTORS

Signature.....

Name: Dr. Poonam Singh

Designation: Associate Professor

Department: Neonatology

Date.....

Signature.....

Name: Dr. Mayank Priyadarshi

Designation: Associate Professor

Department: Neonatology

Date.....

डॉ. मयंक प्रियदर्शी / Dr. Mayank Priyadarshi  
सहायक आचार्य / नवजात शिशु रोग विभाग  
Assistant Professor / Department of Neonatology  
एम्स, ऋषिकेश (उत्तराखण्ड) / AIIMS, Rishikesh (Uttarakhand)

HEAD OF DEPARTMENT/SECTION

Signature.....

Name: Prof. Sriparna Basu

Designation: Professor & Head

Department: Neonatology

Stamp.....  
Phone/Pager: 9935340260

Phone/Pager: 9935340260

## P-3 FORM

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

AIIMS Rishikesh

## PROPRIETARY ARTICLE CERTIFICATE

It is certified that the items (Premicath z stylet-1fr/28G; Polyurethane umbilical catheter Fr 3.5, 4 and 5; Epicutaneo-cave catheter-2Fr/24G) required in the P-2 form should be purchased from M/s. Vygon India Pvt. Ltd. To the best of my knowledge M/s. Vygon GMBH CO. & KG are the sole manufacturer/agents of the sole manufacturers M/s. ....

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

- (i) Items "Premicath z stylet-1 Fr/28G" and "Epicutaneo-cave catheter-2Fr/24G" are specially designed 'peripherally inserted central catheters' (PICC) for neonatal use. The available catheters in the market are not suitable for neonatal use and giving long-term venous access.
- (ii) Umbilical catheter Fr 3.5, 4 and 5 provide venous access through umbilical vein and artery in neonates. Hence, these catheters are specific for neonatal use, and no similar product is available in the market.

(Sign of Indenter)

Dated

04-09-24

Designation

Associate Prof.

Department

Neonatology

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सहायक आचार्य / नवजात शिशु रोग विभाग  
Assistant Professor / Department of Neonatology

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Recommendation:

Signature of Head of Department/Section

डॉ. श्रीपत्नी बासु / Dr. Sripama Basu  
अध्यक्ष एवं प्रिंसिपल / नवजात शिशु रोग विभाग  
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N.B.: The indenter before recording the above certificate should satisfy himself that the article is genuinely of proprietary nature manufactured under patent laws.