

P-3 FORM**(to be attached with P-2 form for Proprietary items)****AIIMS Rishikesh****PROPRIETARY ARTICLE CERTIFICATE**

It is certified that the items (Folic acid Chemiluminescent Immunoassay (CLIA) kit) required in the P-2 form should be purchased from M/s SA Diagnostic, Rishikesh. To the best of my knowledge, M/s SA Diagnostic, Rishikesh, Chennai are the agents of the sole manufacturers M/s CPC Diagnostics PVT LTD, Chennai

Similar items manufactured by other firm(s) shall not be suitable for our purpose for the following reasons: -M/s. CPC Diagnostics Pvt Ltd have installed iFlash instruments for Chemiluminescent Immunoassay of folic acid in our institute and proprietary certificate has been attached.

Prateek Kumar Panda

(Sign of Indenter)

Dated: 06/10/2023

Designation: Assistant Professor

Department: Paediatrics

Prateek Kumar Panda

Signature of Head of Department/Section

(PI)

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 (approx) in foreign currency and Rupees	Total cost (approx)
1. Folic Acid Chemiluminescent Immunoassay (CLIA) Kit (2x50T/Kit) with Reaction cuvette and Wash buffer	1	Rs50,000/-	Rs 50,000/-

3. For equipment, please provide the following information

Detailed description of the actual use of the equipment:

The Folic Acid Chemiluminescent Immunoassay (CLIA) Kit (2x50T/Kit) with Reaction cuvette and Wash buffer will be used solely for the ICMR funded extramural project titled "To evaluate the efficacy of oral Folinic acid supplementation in children with Autism Spectrum disorders (ASDs): a randomized double blind, placebo controlled trial", to determine one of the secondary outcomes (Principal Investigator: Dr Prateek Kumar Panda, Assistant Professor, Department of Pediatrics). The project and budget requirement has been approved by ICMR, New Delhi and Institute Ethics Committee.

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

If both, state % of time to be used for patient care: Not Applicable

Is this/ similar equipment already available in the department?

No

Prateek

87603/2023/29 When purchased?

Cost at that time:

Present

functional status: Tests/ procedures done on this equipment in last year:

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? Not Applicable

4. For Consumables, please provide following information:

Description of stocks available: Not available currently in department

When was it last purchased? Never purchased before for this project

In what quantity? Cost:

Source

Test/ procedures done in this period:

Revenue generated in this period:

Average annual consumption: Never procured before

Shelf life: 6 months

Period for which this purchase will last: 6 months

Number of tests likely to be done with this quantity: 100

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)

INDENTOR

Signature..... Prateek

Name: Dr Prateek Kumar Panda

Designation: Assistant Professor

Department of Paediatrics

Date: 05/10/2023

Phone/Pager: 9650149735

HEAD OF DEPARTMENT/SECTION

Signature: Prateek

Name: Dr Prateek Kumar Panda

Designation: Assistant Professor

Department of Paediatrics and PI

Stamp.....

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	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)	
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)	NA (Research Project)
6	If Item cost is above or equal to 30 lacs, specifications should be duly vetted by DGHS nominee/External expert.	(Yes/ No)	NA
7	Letter to External Expert & DGHS Should be routed through Director Office only (BME will help in this process).	(Yes/ No)	NA
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) ✓	

INITIATOR

Signature: Prateek
Name: Dr. Prateek Kumar Panda
Designation: Assistant Professor
Department: Pediatrics
Date: 10/10/23
Mobile No./Pager: 9650149735

HEAD OF DEPARTMENT/ SECTION

Signature: Prateek
Name: Dr. Prateek Kumar Panda
Designation: Assistant Professor
Department: Pediatrics
Date: 10/10/23
Mobile/Pager: 9650149735