

**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 form 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.)
<b>Item No. 1.</b> Endoscopic Suturing System (Per box 3 Units)	01	5 Lakhs	<b>12 Lakhs Approx.</b>
<b>Item No. 2.</b> Overtube Endoscopic Access System	01	50 Thousand	
<b>Item No. 3.</b> Helical Tissue Grasping Device (Per box - 6 units).	01	2.5 Lakhs	
<b>Item No.4</b> Suture with anchor for Endoscopic Suturing System (Per box - 12 Units).	02	02 Lakhs	
<b>Item No. 5.</b> Suture Cinch for Knotless Fixation (Per box - 6 Units).	01	01 Lakhs	

**3. For equipment, please provide the following information: N/A**

Detailed description of the actual use of the equipment

Is the equipment to be used for patient care or research.

Is this /similar equipment already available in the department?

When purchased?

Cost at that time:

Present functional status:

Test / 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?

If yes, what is the justification for this purchase?

**4. For Consumable, please provide following information: Yes**

Description of stocks available: No

When was it last purchased?

In what quantity?

Cost:

Source

Test/ procedures done 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: N/A**

Exact location and use

Existing furniture at that place

Justification for this purchase

Possible source (name all source you know) form where item may be obtained (name, address, phone no, fax no, email, etc. of contact person)

**INDENTOR**

डॉ० इतिश पटनायक / Dr. Itish Patnaik  
सह- आचार्य / Associate Professor  
जठरांत्र विभाग / Department of Gastroenterology  
एम्स, रीशिकेश / AIIMS RISHIKESH

Signature.....

Name- Dr Itish Patnaik

**HEAD OF DEPARTMENT/ SECTION**

डॉ. रोहित गुप्ता / Dr. Rohit Gupta  
अपर आचार्य / Additional Professor  
जठरांत्र विभाग / Department of Gastroenterology  
एम्स रीशिकेश / AIIMS, Rishikesh

Signature.....

Name- Dr Rohit Gupta

94733/2024/17

Designation – Associate Professor

Designation - Additional Professor &amp; Head

**All India Institute of Medical Sciences, Rishikesh-249201**

अखिल भारतीय आयुर्विज्ञान संस्थान, ऋषिकेश 249201

**ATTACH WITH FORM – P2**

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

S. No.	Required fields	Whether fulfilled the criteria	Remark
1.	Manpower availability	(Yes/No)	Yes
2.	Space availability	(Yes)	Yes
3.	Whether specifications are generic, not of some company or brand specific (should have priority for make in India products)	(Yes/No)	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)	Yes
5.	Approved in Assessment Committee or Not	(Yes/No)	Yes
6.	If Item cost is above or equal to 30 lacs, specifications should be duly vetted by DGHS nominee/External expert.	(Yes/No)	N/A
7.	Letter of External Expert & DGHS Should be routed through Director Office only ( BME will help in this process).	(Yes/No)	N/A
8.	Mode of purchase GeM availability /non availability should be ensured & verified before procurement by LPC/Tender (Specification should be same).	(Yes/No)	No

INDENTOR

Signature.....

Name- Dr Itish Patnaik

Designation - Associate Professor

Department – Gastroenterology

Date.....

20/12/2023

डॉ० इतिश पटनायक / Dr. Itish Patnaik  
सह-आचार्य/ Associate Professor  
जठरांत्र विभाग/ Department of Gastroenterology  
एमएस ऋषिकेश / AIIMS RISHIKESH

HEAD OF DEPARTMENT/ SECTION

Signature.....

Name- Dr Rohit Gupta

Designation - Additional Professor &amp; Head

Department- Gastroenterology

Date.....

डॉ० रोहित गुप्ता / Dr. Rohit Gupta  
अपर आचार्य / Additional Professor  
जठरांत्र विभाग / Department of Gastroenterology  
एमएस ऋषिकेश / AIIMS, Rishikesh

## P-3 FORM

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

AIIMS Rishikesh

## PROPRIETARY ARTICLE CERTIFICATE

It is certified that the following items required in the P-2 form should be purchased from M/s Boston Scientific India Pvt. Ltd, to the best of my knowledge Apollo Endosurgery, Inc. USA is the sole manufacturer/agent of the sole manufacturers and the Boston Scientific Corporation is an authorized distributor of the product. M/s Boston Scientific India Pvt. Ltd is a subsidiary of Boston Scientific Corporation, USA.

S.No	Name of the Item
1.	Overstitch Endoscopic Suturing System
2.	Overstitch Suture Helix
3.	Filbloc Permanent Overstitch Sutures
4.	Overstitch Suture Cinch
5.	Overtube Endoscopic Access System

Similar items manufactured by other firm (s) shall not to suitable for our purpose for the following reason: - **this is a proprietary item and no alternatives were suitable for our needs.**

डॉ० आनंद शर्मा / Dr. Anand Sharma  
सह-आचार्य / Associate Professor  
पदसंरक्षक / Head of Department  
विभाग / Department of Gastroenterology  
एम्स, रीशिकेश / AIIMS RISHIKESH

Name : Dr. Anand Sharma

Designation : Assoc. Professor

Department : Gastroenterology

Date : 24/09/2024

डॉ० इतिश पटनायक / Dr. Itish Patnaik  
सह-आचार्य / Associate Professor  
पदसंरक्षक / Head of Department  
विभाग / Department of Gastroenterology  
एम्स, रीशिकेश / AIIMS RISHIKESH

Name : Dr. Itish Patnaik

Designation : Assoc. Professor

Department : Gastroenterology

Date : 24/09/2024

डॉ० रोहित गुप्ता / Dr. Rohit Gupta  
अपर आचार्य / Additional Professor & Head  
पदसंरक्षक / Head of Department  
विभाग / Department of Gastroenterology  
एम्स, रीशिकेश / AIIMS RISHIKESH

Name : Dr. Rohit Gupta

Designation: Add. Professor &amp; HOD

Department : Gastroenterology

Date : 24/09/2024

Recommend at On:

Signature of head of Department /Section

डॉ० रोहित गुप्ता / Dr. Rohit Gupta  
अपर आचार्य / Additional Professor & Head  
पदसंरक्षक / Head of Department  
विभाग / Department of Gastroenterology  
एम्स, रीशिकेश / AIIMS RISHIKESH