



**HAFFKINE BIO PHARMACEUTICAL CORPORATION LIMITED**  
**Procurement Cell**

**( A Government of Maharashtra Undertaking)**

**Regd. Office : Acharya Donde Marg, Parel, Mumbai 400 012 ( INDIA)**

Phone No: 022- 24129320-23

Managing Director :022-24150628

General Manager (Procurement Cell) :022-24100478

Website : <http://www.vaccinehaffkine.com>

E-mail: [procurementcell@vaccinehaffkine.com](mailto:procurementcell@vaccinehaffkine.com)

No.: 2131 / Haffkine/Procurement Cell/E-115/Adult Ventilator/ 2019-20

Date: 29/11/2019

To,

M/s. BIOTRONICS Equipments Pvt. Ltd.

402 Bangashree Tower,

Daji Ramchandra Road, Opp. Pawar

Industrial Estate, Charai,

Thane (W) - 400602.

E-mail: [info@biotronicsindia.com](mailto:info@biotronicsindia.com)

Sub: Supply Order for Adult Ventilator

Ref.: 1 Tender No. E-115/HBPCL/PC/Adult Ventilator /2017-18.

2 Sanction of Tender Approval Committee Meeting Dated 18.12.2018

With reference to the tender cited under reference no 1, you are requested to supply the following goods as per details mentioned below to consignee list enclosed with this order.

Sr.No	Name of the item	Specification of item	Quantity	Unit Rate inclusive of GST (Rs.) and all other Taxes.	Total Amount Rs.
1.	Adult Ventilator Model : Bellavista 1000	As per Annexure I	06	9,75,000/-	58,50,000/-

**Total amount in words:** Rupees Fifty Eight Lakhs Fifty Thousand Only.

**Location of Factory :** M/s. IMT MEDICAL Gewerbestrasse 8, 9470 Buchs SG,  
SWITZERLAND

1. **Forwarding:** Forwarding Free on Road Destination. i.e. door delivery basis.
2. **Delivery Period:** 12 weeks from the date of receipt of order by the supplier to the consignee attached.
3. **Pre-Dispatch Inspection:** Supplier shall make necessary arrangement / facilitate to carry out Pre-Dispatch inspection as per Tender Terms & condition and submit the Inspection report to this office. The Pre-Dispatch inspection cost will be borne by supplier. Machine should be dispatched only after satisfactory Pre-Dispatch Inspection.
4. **Risk purchase clause:** If the bidder fails to supply the stores within the stipulated delivery period, the order will stand cancelled. Undersigned shall be entitled to purchase such stores from any other source at such price which ordinarily should not

be more than 10% of the tender price. The extra expenditure in such cases shall be recovered by Managing Director, Haffkine Bio Pharmaceutical Corporation Ltd.(Procurement Cell), Mumbai from the Supplier.

5. **Payment Terms** : 100 % Payment shall be paid on receipt, Complete Installation (acceptance) of Machine in good conditions by the consignee.
6. **Labelling::** The word "**For use of GOVERNMENT OF MAHARASHTRA NOT FOR SALE**" should be printed on each unit pack in readable Purple or Green Colours.
7. **Acceptance & Receipt:** It should be submitted in Appropriate Format to the purchasing authority.
8. **Delivery Challan** - Should be sent in the name of consignee in duplicate. It should specify Name of Equipment / Mfg. by / packing & quantity.
9. **Invoice Copy** - Should be sent in triplicate on the Name of Managing Director, Haffkine Bio Pharmaceutical Corporation Ltd.(Procurement Cell), Mumbai, along with Bill of Entry and Country of Origin Certificate of the consignment.
10. **Other Terms:**
  - a. **Warranty:** The warranty period shall be for 2 years from the date of commissioning of all equipment supplied as certified by the consignee. Replacement of spares parts thereof due to manufacturing defects during warranty period will be entirely at the supplier's cost.  
The successful tenderer must ensure 95% uptime during warranty period. In case of downtime, warranty period will be extended for period of downtime. If the equipment is not attended within 24 hours for Mumbai and 48 hours for other places the supplier will be liable to pay a penalty of 0.07% of purchase cost for every day of delay. Such penalty will be recovered from the amount of security deposit. Certificate of such uptime / downtime issued by the end user will be binding for the supplier. Replacement of spares parts thereof due to manufacturing defects during warranty period will be entirely at the supplier's cost.
  - b. The user institution will enter to the Comprehensive Maintenance Contract with supplier agency @ 5% of the written down value of the equipment per year for Eight years after completion of warranty period. In case of non-compliance of CMC the supplier will be liable to pay penalty or for appropriate action. Payment of CMC on yearly basis will be made by the user's institution, at the end of the year after satisfactory performance report from the end user.
11. **Contract Agreement:** Bidder should submit Tripartite (Manufacturer, Bidder & HBPCCL) Contract Agreement on non-judicial stamp paper of requisite value.

**Fall Clause**

It is a condition of the contract that all through the currency thereof, the price at which you will the supply stores should not exceed the lowest price charged by you to any customer during the currency of the contract and that in the event of the prices going down below this contract prices you shall promptly furnish such information to us to enable to amend the contract rates for subsequent supplies.

12. The Bidder should submit (within 7 days) amount of 1.5% ie. **Rs. 87,750/-** of order value to meet expenditure of other incidental expenditure and 3% i-e **Rs. 1,75,500/-** as Security Deposit in form of Bank Guarantee, This Bank Guarantee should be valid for 8 years after the expiry date of warranty issued, by any Nationalized / Scheduled Bank.



**Amount to be deposited to following Account:**

Name of Account	Haffkine Bio-Pharmaceutical Corporation Ltd. (Procurement Cell),CESS Account Mumbai.
Name of the Bank & Branch	Canara Bank, Branch-Parel
Account No.	0110201004893
IFSC Code	CNRB0000110

मा. व्यवस्थापकीय संचालक यांच्या मान्य टिपणी नुसार

  
Manager, Account  
HBCL (Procurement Cell)

(Dr. Rajesh Deshmukh)  
Managing Director  
Haffkine Bio Pharmaceutical Corporation Ltd.  
(Procurement Cell), Mumbai.

Copy to:

1. Commissioner Health Services, Mumbai.
2. Director of Medical Education & Research.
3. Account Manager , Haffkine Bio Pharmaceutical Corporation Ltd.(Procurement Cell), Mumbai.
4. Office File.
5. Copy to Consignee. :- Chhatrapati Pramilaraje Sarvopchar Hospital, Kolhapur. As per Tender Condition No. 17 The user Institution should get the Comprehensive Maintenance Contract done with supplier agency @ 5% of the Written down value of the equipment per year for Eight years after Completion of warranty period.

Copy Submitted to: 1) Secretary, Medical Education & Drug Department, Mantralaya, Mumbai.

## Technical Specifications

Sr. No.	Technical Specification for Adult Ventilator.	
1.	<b>General Description</b>	Fully Microprocessor controlled having volume cycled & Time cycled with Volume & pressure preset with invasive and noninvasive modes & facility to monitor respiratory parameters including ETCO <sub>2</sub> .
2.	<b>Application</b>	Adult as well as pediatric application up to minimum 5-6 KG weight.
3.	<b>Power supply &amp; Operation mode</b>	<ul style="list-style-type: none"> <li>a) Electrical with only inbuilt battery backup for minimum 5-6hrs.</li> <li>b) 220V +/-15%;50Hz+/-3%. With inbuilt facility to work over a wide range of voltage fluctuations with True ONLINE UPS with isolation transformer.</li> </ul>
4.	<b>Driving Gas</b>	<ul style="list-style-type: none"> <li>a) In-built/external air source from same manufacturer as that of ventilator with USFDA or European CE approved and not OEM.</li> <li>b) It should either have facility to connect to external central medical compressed air line with auto switchover facility OR facility to connect to central oxygen pipeline through high pressure hose &amp; low pressure oxygen source like O<sub>2</sub> cylinder through flow meter, which is appropriate to the source.</li> <li>c) The compressor based systems should have facility to connect to external central medical compressed air line with auto switchover facility.</li> <li>d) Turbine based system must have both facility to connect to central oxygen pipeline through high pressure hose &amp; low pressure oxygen source like O<sub>2</sub> cylinder through flowmeter. An External central UPS system of at least 3KV per unit with proper wiring to each bed for smooth operation (specific for compressed air systems).</li> <li>e) Air source compressor based (inbuilt/external) from same manufacturer that of ventilator &amp; not OEM and must be FDA approved.</li> <li>f) A trolley should be provided with each unit and the trolley should be of same make as the manufacturer.</li> </ul>
5.	<b>Modes of ventilation</b>	<ul style="list-style-type: none"> <li>A) Invasive modes-               <ul style="list-style-type: none"> <li>a) Control (volume &amp; pressure controlled ventilation)</li> <li>b) Assist-control</li> <li>c) SIMV (volume &amp; pressure control)+PSV</li> <li>d) Spontaneous with CPAP + PSV</li> <li>e) PSV (with adjustable cycling time in percentage and max. insp. Time setting)</li> <li>f) Volume cycle with demand flow in control, A/C, SIMV modes</li> <li>g) PRVC or equivalent with control, A/C, SIMV &amp; with volume limit.</li> </ul> </li> <li>B) Non-invasive modes (NIV) with mask-must be available independent and separate mode.</li> </ul>



		<ul style="list-style-type: none"> <li>a) Control, Assist control, SIMV + PSV, CPAP + PSV</li> <li>b) Biphasic with PSV on both levels &amp; with adjustable patient synchrony.</li> </ul>
6	<b>Parameter settings with respective ranges</b>	<ul style="list-style-type: none"> <li>a) Fio2: Adjustable (21-100%) with 100% oxygen flush</li> <li>b) ETCO2 with digital value &amp; waveforms</li> <li>c) I:E Ratio: Adjustable (1:4 -4:1)</li> <li>d) Insp. Tidal Volume :50-1500ml</li> <li>e) Resp. Rate: 5 to 70 BPM.</li> <li>f) Inspiratory Time: 0.3-7 sec</li> <li>g) Insp. pause time for X-ray facility: 0.1-2 sec. (Auto) &amp; max 6sec (Manual)</li> <li>h) Insp. Flow rate: 10 to 130 LPM &amp; demand flow upto 180 LPM</li> <li>i) Insp. Flow waveform: User selectable square &amp; decelerating.</li> <li>j) Pressure control: 0-80 cmH2O</li> <li>k) Pressure support : 0-60 cmH2O</li> <li>l) Flow cycled ventilation: Adjustable for pressure control, PRVC, PSV, &amp; Non-invasive modes.</li> <li>m) Flow cycle for PSC &amp; PC : 0.5 to 30% 5-70</li> <li>n) Bias flow: User adjustable (10-20 LPM)</li> <li>o) Apnea Back-up: Automatic &amp; Interactive, user adjustable with selectable apnea back up time &amp; rate</li> <li>p) Apnea time: 10 to 40 sec</li> <li>q) Apnea Back Rate: 12 BPM onwards</li> <li>r) PEEP: 0-35 cm H2O</li> <li>s) Sigh Rate &amp; Volume: 1 per 100 breaths &amp; 1.5 times the set T.V.</li> <li>t) Pressure limit: (pop off): 20-120 cm H2O</li> </ul>
7.	<b>Ventilatory Maneuvers</b>	<ul style="list-style-type: none"> <li>a) Expiratory hold</li> <li>b) Manual Breath</li> <li>c) Negative Inspiratory Force Maneuver.</li> </ul>
8.	<b>Monitored parameters &amp; Trends on Display</b>	<ul style="list-style-type: none"> <li>a) Driving gas supply pressure (Air Maneuver)</li> <li>b) Fio2</li> <li>c) EtCO2</li> <li>d) Resp. Rate: Ventilator &amp; Patient</li> <li>e) Time: Inspiratory, Expiratory, I:E Ratio</li> <li>f) Inspired Tidal Volume : Ventilator &amp; Patient</li> <li>g) Expired Tidal Volume : Ventilator &amp; Patient</li> <li>h) Minute Volume : Ventilator &amp; Patient</li> <li>i) Airway Pressures : Pmax, Pmean &amp; Pplateau.</li> <li>j) PEEP</li> <li>k) Auto PEEP</li> <li>l) Apnea</li> <li>m) Sigh</li> <li>n) Compliance-Static</li> <li>o) Circuit Resistance</li> <li>p) Rapid/Shallow Breathing Index</li> <li>q) Events Log Sheet page.</li> <li>r) Each minute trend of all above mentioned parameters for last 24hrs</li> <li>s) Alarm log time &amp; date stamped</li> </ul>
9.	<b>Display Characteristics</b>	<ul style="list-style-type: none"> <li>a) In Built &amp; incorporated min. 12" Active Touch Screen and with TFT</li> </ul>

### Consignee Details.

BIOTRONICS Equipments Pvt. Ltd.		
Adult Ventilator Make : M/S. IMT Medical, Switzerland Model: Bellavista 1000		
Delivery Period	12 Weeks.	
PO Reference No.	2131 /Haffkine/Procurement Cell/E-115/Adult Ventilator/2019-20 Date: 29/11/2019	
Sr. No.	Name & Address of the Consignee	Qty.
1.	Chhatrapati Pramilaraje Sarvopchar Hospital, Kolhapur.	06
Total:		06

(Dr. Rajesh Deshmukh)

Managing Director

Haffkine Bio Pharmaceutical Corporation Ltd.

(Procurement Cell), Mumbai.

म. व्यवस्थापकीय संचालक यांच्या मान्य टिपणी नुसार

*PooLamukh*  
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