THE ADMINISTRATION OF UNION TERRITORY OF LADAKH.
OFFICE OF THE MISSION DIRECTOR NHM
Health & Family Welfare Department
State Health Society, UT Ladakh
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सत्यमेव जयते

NAME OF PROJECT

Upgradation of Basic Life Support (BLS) Ambulance(s) into Advance Life Support (ALS Ambulance(s)

The Mission Director, NHM UT Ladakh is intending to retrofit the existing 7 BLS, out of which 5 ambulances of TATA Winger and 2 Force Travelers and the same to be upgraded into ALS category of ambulances to implement the 108 National Ambulance Services in the UT of Ladakh.

Desirous Bidders may undertake an Inspection (at their own cost, Department shall only facilitate by allowing such Inspection) of above BLS Ambulances on 29thto 30thday of November 2022 in the premises of SNM Hospital, Leh.

A: ELIGIBILITY CRITERIA OF BIDDER

1. Minimum Cumulative Turnover in the last three financial years should be Rs.3.00 crore. The bidder is required to submit the turnover certificate duly issued by a Chartered Accountant with UDIN number.
2. Bidders should have at-least fabricated similar type of Advance Life Support Ambulance in the last three financial years: 10 Nos. The bidder is required to upload the work completion certificate duly issued by a government department.
3. Bidders must show the satisfactory report from the Government Institution where the similar kind of fabrication/retrofitting of ambulances is done.
4. Authorization letter from the OEM for the equipments to be fitted in the ambulances.

B. SCOPE OF WORK/SUPPLY: - Post Retrofitting / Upgradation, The- Resultant ALS Ambulance Shall Comply With Following Technical Specifications And Standards:-

TYPE -D ADVANCED LIFE SUPPORT (ALS) AMBULANCE as per AIS-125 Norms (In case ofdeviation/conflict in any specs mentioned herein, with AIS-125 Norms, AIS -125 Norms shall prevail & should be adhered to), further if required Bidder has toundertakeall necessary amendments / suitable retrofitting medical equipmentat **Leh, UT of Ladakh**, so that the current BLS is upgraded & is in conformity to AIS-125 Norms with upto date amendments that are applicable to ALS Ambulance including but not limited to below: -

1. The interiors should have reinforced fixtures for holding medical, communication and extraction equipment.

2. Proper mounting(s) of defined Special Equipment inside the vehicle will be ensured by Bidder, while retaining the finish of internal trim. In case Internal trim is being opened for providing mounting, then it shall finish the same as per original vehicle finish or better than that.

3 Flooring should be as per AIS 125.

Flooring as per AIS 125 & should be retained as same, unless & until damaged during conversion work.

4. Electrical (As per AIS 125).

Bidder shall ensure electrical provision for all the equipment to be equipped in Ambulance. Minimum no of sockets required as per AIS 125 will be ensured. Electrical wiring harness will be ensured to take load of these equipments safely. Circuit diagram needs to be provided for the electrical connections.

Heater in patient cabin:-

Required Heating equipment are to be retrofitted in the patient cabin as well as pilot cabin of Basic Life Support (BLS) Ambulances as per AIS-125 Norms.

Area of retrofitting / up-gradation:-

The following are required for upgradation of Basic Life Support (BLS) into Advance Life Support (ALS)

1. Upgradation of Interior Fabrication so as to accommodate all necessary incorporations mandated for Advance Life Support Ambulance.

2. Proper Fitment of Specified Medical Devices & allied items Post modifications of Interior's as per point 1.

The Bidder at his own expense, if required, may collect the BLS Ambulances from Designated Authority at Leh, transport the same to their respective Plant for Suitable Changes in Interiors (Fabrication) and after required modification of the ambulance, transport back to designated authority at Leh within 15 Days from date of issue of Work Order, subsequently the Bidder shall retrofit all the specified Medical Equipment at Leh only & Payments shall be released after verification of such works in-toto.

The bidder shall execute the changes in interiors (fabrication) of the ambulances at their respective plants in two phases. In first phase the bidder shall transport 4 ambulances to their respective plant and rest of the ambulances can be transported after the completion of fabrication of the ambulances transported in first phase.

The bidder shall ensure the proper execution of Interior Fabrication, so that the resultant product meets all specifications of ALS Ambulance & provide optimum patient care for years to come.

Period for completion of Retrofitting:-

The bidder shall execute the fabrication / interior changesin the all the ambulances in two phases and the bidder shall have only 15 days each for both the phases. Hence, the bidder must accomplish the fabrication of all the ambulances within 31 days. After the duly

fabrication / interior changes of the ambulances, the bidder shall retrofit all required equipments within 60 days from the date of issue of work order and shall handover the ambulance to the department within stipulated time period.

Keeping in view of urgent need of upgradation of Basic Life Support (BLS) into Advance Life Support (ALS) Ambulances and furthermore, the closure of Leh – Srinagar and Leh – Manali Highway. The bidder shall retrofit the ambulances as per the specification of Advance Life Support Ambulances within stipulated time period.

Penalty for delay in completion of project:-

If the successful bidder fails to handover the ambulance within stipulated time period the departments shall impose penalty as per below mentioned quantum.

1. Delayed 20 Days from the stipulated time period an amount of Rs.5000/- per ambulance per day shall be imposed.
2. Delayed 21 to 44 Days from the stipulated time period an amount of Rs.7000/- per ambulances per day shall be imposed.
3. Delayed beyond 45 Days the contract shall be terminated and the bidder shall also be blacklisted and the tender refloating charges shall be imposed on the bidder and the damages caused due to failure to perform the contract by the successful bidder.

Arbitration:

Governing Law: The contract shall be governed by and construed in accordance with the laws of India as applicable to the Union Territory of Ladakh.

i. If the parties fail to resolve their dispute or difference by such mutual consultations within thirty days of commencement of consultations, then the dispute shall be referred to Secretary, Health and Medical Education Department, Union Territory of Ladakh for its reference to arbitration.

ii. **Dispute Resolution**: Any dispute arising out of contract with regard to the interpretation, meaning and breach of the terms of the contract, the matter shall be referred to the Secretary, Health and Medical Education Department, Union Territory of Ladakh who will appoint his senior most officer as sole Arbitrator of the dispute, who shall not be related to this contract or shall not have any interest in the contract and whose decision shall be final and binding on both the parties. The Arbitrator proceedings shall be governed by the Arbitration and Conciliation Act, 1996 as amended from time to time.

iii. **Venue of Arbitration**: The venue of arbitration shall be at Leh, Union Territory of Ladakh.

Applicable Law and Jurisdiction of Court:

The Contract shall be governed by and interpreted in accordance with the laws of India for the time being in force. The Court of Leh, Union Territory of Ladakh and High Court of Jammu and Kashmir and Ladakh shall have jurisdiction to decide any dispute arising out of in respect of the contract and it is mutually agreed by the parties.

B)Equipment Details

(ALL MEDICAL DEVICES(SPECIAL EQUIPMENT MENTIONED HEREIN) SHOULD COMPLY/ADDRESS AIS -125(PART-2) DEFINED MECHANICAL STRENGTH REQUIREMENTS (VIBRATIONS/BUMP ETC.)

1 **SPECIAL EQUIPMENTS: MANUFACTURERS (OEM) AUTHORISATION NEEDS TO BE PROVIDED**

S.No	Name of the Equipment	Details
1	**Defibrillator cum Multi Para monitor Patient Monitor** **Qty - 01 nos**	1) Unit should be lightweight compact and portable (notExceeding 6.5Kg – 7 Kg.) 2) Should have screen size of atleast 8.4inches. 3) Unit should have facility for Automatic External Defibrillationand manual defibrillation & External pacing. 4) Should be able to deliver shock from 5J to 200J in stepsin biphasicmode. 5) Should have an inbuilt Thermalrecorder. 6) Should have battery backup for 50 dischargesof 200J. 7) Should have adult and paediatric paddles integrated onsame handle. 8) Should have ECG inputs through paddles or 3 lead ECGcables. 9) Should have facility for adult, pediatric and neonatalpatient monitoring. 10) Should be Modular having **5 lead ECG, SPO2, NIBP, Respiration rate, Temperature and ETCO2 Module.** 11) Should be provided Battery backup for minimum twohours. 12) Accessories basket should beprovided. 13) Should have facility to add 2 XIBP, if required in future. 14) USFDA /European CE approved model should beoffered. Should be offered with Reusable ECG 5 Lead Wire – 05 Nos. & Disposable AED Pads – 10 Nos Adult, 10 nosPaeditrics&Pacing Lead – 02nos. Pulse Oximeter probe : Reusable Adult – 5 nos, Reusable Pediatric3 nos& Disposable neonatal – 03nos. NIBP Cuff's : Adult, Pediatric & Neonatal – Each 02nos. Temperature Skin & Rectal probes – Each 2nos. ETCO2 Disposable Accessories for monitoring ofat-least 10 patients. 15) It should be EN-1789 Compliant.
2	**Syringe pump**	1. Must be user-friendly with simple menu drivenoperation 2. Must have flow rate programmable from 0.1 to1200ml/hr 3. Should accept standard disposablesyringe(5--50ml) 4. Automatic detection of syringe size and proper fixing.Must provide alarm for wrong loading ofsyringe. 5. Selectable occlusion pressure trigger level Low, Medium & High to allow use over a range of applications. 6. Should have comprehensive package including occlusion

	Qty – 02 no's (Pole Mounted)	pressure, pre-alarm and alarm, end of infusion alarm, low battery pre alarm and alarm, maintenance reminder alarm, near empty alarm,syringe disengaged alarm, etc. (with highsensitivity). 7. Battery backup o 6-8 hours or more when fully charged with provision to display residual battery life in hours andminutes. 8. History / memory for at least last few patients with alarmclock records. 9. Comprehensive safety check, with clear alarmmessages. 10. AC mains (100 - 240V) and battery (lead acid)powered. 11. USFDA. /European CE approved model should beoffered. 12. Should be EN-1789 Compliant.
3	**Transport Ventilator** **Qty required – 01 nos.**	Should be light weight (less than 4 kg.), robust (drop and water resist) and user friendly. Time-cycled, Volume & Pressure controlled Ventilator, suitable for adults, children and infant above 2 kg. Microprocessor controlled, electrically controlled, pneumatically driven ventilator, provided with integrated battery for at-least 4 hours backup. Display Screen Size 4 inches or more. Types of Ventilation : Volume & Pressure. Modes of ventilation 1) CMV – Pressure,Volume 2) Assist Control – Pressure,Volume 3) SIMV – Pressure,Volume. 4) NIV – Pressure Supported 5) PEEPfacility 6) Separate control for inspiratory, expiratory Hold,Manual Ventilation, flow rate autoadjustable. Monitoring Waveform : Pressure-Paw & Insp Flow. 7) Adjustable pressure limit to safely cope withall patients. 8) Low/High inflation pressure/Volume/Frequencyalarm. 9) Pneumatic Source : Compressed air /oxygen 10) ControlSettings: a). Tidal Volume, b). Insp. Pressure, c). Adjustable Inspiratory time: 0.5 - 5 Sec with above controls one should be able to deliver I:E ratio from 2:1 to1:5. 11) FI02: Adjustable from 40% to 100%oxygen. 12) Should deliver Tidal Volume of20-2000ml. 13) Equipment should be complete with carry bag, patient circuit (Adult – 3 nos Reusable, Pediatric- 5 nos Disposable, Neonatal- 5 nosDisposable)and relief valve, pressure regulator for attaching portable oxygen cylinder. 14) Should have airway pressuremonitor 15) Should have a disconnect alarm. (Visual and audible) 16) USFDA. /European CE approved model should beoffered 17) It should be EN-1789 Compliance.

2. Basic Equipment: -OEM Authorization Exempted, However, Make, Model & Catalogue to be provided by Bidder for evaluating Technical Compliances. Unless specifically mentioned Qty required is 1 no's only.

S. No	Name of the Equipment	Details

1	Laryngoscope with blades	1) Standard equipment in metal with 3 standard sizecurved blades and one extra large blade (Adult&Child). 2) Handle should have comfortablegrip. 3) Good quality light source (Fibreoptic/conventional)
2	Canvas Stretcher Folding	1) Should be lightweight and made up oftubular aluminum alloy. 2) Should be easyto carry. 3) Weight less than6kg. 4) Size: 200 to 210 cm L , 50 to 60cm Width and 15-20cm baselevel. 5) Should berugged. 6) Should be compact &foldable. 7) Should have automatic locking, which does not foldin automatically.
3	Emergency scissors/Gauze Cutter	Emergency scissors with thermoplastic handle and steel blade to cut clothes.Length should be 18 cm.
4	Artery Forceps	Standard equipment in stainless steel 14 cm
5	Magils forceps	Standard equipment in stainless steel. Adult,Child and Pediatric.
	First Aid Bag	The bag should be possible to carry via a shoulder strap and also by handles and as a back pack to suit the convenience of the user. It should be resistant to wear and tear. It should be waterproof. There should be space for multiple colour coded pouches which should be possible to arrange as relevant to Airway, Breathing, Circulation, Disability management and carrying essential Injectable medicine vials or fluid. It should not have less than 4 external pockets and not less than 5 detachable colour coded compartments / pouches with transparent windows to enable user to see the contents without opening them. The bags should also have space to safely store used needles, blades etc. Less than 3kg, should sustain minimum 10kg. wt.equipment, medicines andaccessories.
7	**Additional Items** **a.** Extended upper spinal immobilization, extrication device or short spinal board **b.** Foetaldoppler; portable, hand-held, battery-powered device. Water proof probes of 2.5MHz, , Auto Shut Off Facility to save Battery Power, Built-in Speaker, Volume Control Facility and Audio Output for Ear Phone, Heart Rate Range should be from 50 to 210 bpm with accuracy of + /-2%, Should be Water Proof Body **c.** Pig Tail Catheter **d.** I.V Cut Down Set	

S. No	Description of items Required as per Approved Proto Type	
	Vehicle Type and Compliance	
1	Tata Winger and Force Traveller ambulance should meet all the requirement as per AIS 125	The ambulance will be provided by the department.
2	**Patient Compartment**	
2.1	The patient compartment shall have the provisions for housing:	The patient compartment has to be fabricated/retrofitted as to meet the required provisions of space for all the items.
2.2	a wash basin with foot operated tap.	
3	**Medical Equipments**	**Quantity**
3.1	Scoop Stretcher	1 Unit
3.2	Spine board with straps and Head Blocks	1 Unit
3.3	Wheelchair	1 Unit
3.3	Oxygen cylinder portable	1 Unit
3.4	Oxygen Key	1 Unit
3.5	Nebulizer Machine	1 Unit
3.6	Suction System-Hand Held Manual	1 Unit
3.7	AC/DC/Foot Opearted -Suction Pump	1 Unit
3.8	Pulse Oxymeter	1 Unit
3.9	Glucometer	1 Unit
3.10	Cool and warm box for Medicines and Blood	1 Unit
4	**Other Medical equipment/ supplies**	
4.1	Infant Self-inflating Resuscitation bag	1 Unit
4.2	Adult Resuscitation Bag	1 Unit
4.3	Sphygmomanometer	1 Unit
4.4	Adult Stethoscope	1 Unit
4.5	Digital Thermometer	1 Unit
4.6	Weighing Machine	1 Unit
4.7	Paramedic scissors for cutting clothing, belts and boots	1 Unit
5	**Extrication Tools**	
5.1	Spanner Kit	1 No
5.2	Screw Drivers (flat and Phillips head)	1 No
5.3	Pliers	1 No
5.4	Axes (pry, fire)	1 No
5.5	Ropes/ Chains	1 No
5.6	Reflectors/ flares	1 No
5.7	Hard hats	1 No
5.8	Fireproof Blanket	1 No
5.9	Leather Gloves	1 No
5.10	Safety Gumboot pair	3 No
5.11	Shovel	1 No

5.13	Video Camera (One each in patient and driver) compartment with drive recorder and 15 days data storage	1 No
5.14	Internal Phone within patient compartment for communication with driver	1 No

Documents to be submitted under technical bid:-

1. Turnover Certificate duly issued by a Chartered Accountant with UDIN.
2. Experience certificate:- Work completion certificate duly issued by a government department.
3. Authorization certificate from OEM for equipments.
4. GST registration certificate.
5. PAN Card.
6. Company registration certificate under relevant act.

Financial Bid:-

The financial bid shall only be mentioned in the devised BoQ excel format. Bidders are instructed to not to change the name of the BoQ file. The quoted rate shall inclusive of all taxes and levies including GST.

Critical Dates:-

1. Date of publish of tender — **26th of November 2022.**
2. Last date of submission of tender — **06thof December 2022.**
3. Opening of technical bid — **07thof December 2022.**
4. Opening of Financial bid — **shall be informed separately**

No:SHS/UTL/FMG/108 Amb./2849-51
Dated:- 26th November 2022

Sd/-
Dr. Iftakhar Ahmed Chowdhry (IRS)
Mission Director,
National Health Mission
Union Territory Ladakh.

Copy to:-

1. IEC Consultant for mass publication on social media platform and to display on notice board.
2. IT Consultant, PMJAY for uploading the NIT on NHM website.

State Accounts Officer,
NHM, UT Ladakh.