

Baba Farid University of Health Sciences, Faridkot

**E-TENDER NOTICE FOR Procurement and
signing rate contract of Cardiology Implants at Guru
Gobind Singh Medical Hospital, Faridkot**

E-Tender Form

(E-Tender enquiry for Procurement and Signing Rate Contract for Cardiology Implants material required at GGS Medical College & Hospital, Faridkot)

Tender Notification No :	The tender notification number will be allotted by the portal automatically
Requirement	E-Tender notice for Procurement and signing rate contract of Cardiology Implants Material required at Guru Gobind Singh Medical College & Hospital, Faridkot.
Cost of the tender document:-	Rs.2360/- (Rs. 2000 + 360 (@18%GST) (Non-refundable) to be deposited through Online Mode Only in favor of Registrar, Baba Farid University of Health Sciences, Faridkot.
Tender Processing Fee	To be charged by Govt. of Punjab as per its norms. (Non- refundable)
Earnest Money Deposit (EMD)	Rs. 10,80,000/- (Rupees Ten Lakh Eighty Thousand only) The Earnest Money Deposit must be submitted in the shape of Online Payment in favor of Registrar, Baba Farid University of Health Sciences, Faridkot on or before due date (Refundable to the Non-successful bidders, without any type of interest or other charges). However, it can be adjusted into Performance security in case of successful tenderer and will be returned after successful completion of the contract period.
Performance Security	The performance Security will be Rs. 27,00,000/-. The successful bidder will submitted Performance Security in shape of Demand Draft/FDR/Bank Guarantee in the name of "Medical Superintendent, Guru Gobind Singh Hospital, Faridkot". In case of more than one successful bidders, Performance security from the successful bidder will be got deposited in proportion of total security of Rs. 27,00,000/- in terms of number of item/value of item allocated to them.
Date of start of downloading of tender documents	Immediately from the website of the Punjab Government i.e. https://eproc.punjab.gov.in
Website for downloading of the tender document: -	https://eproc.punjab.gov.in However, the details may also be obtained from the University website i.e. www.bfuhs.ac.in and college website www.ggsmch.org
Last date for downloading of the tender document:-	25.06.2026 up to 01.30 pm
Last date & time for uploading of the tender documents:-	25.06.2026 up to 1.30 pm (through online mode only)
Pre-bid Meeting	A Pre-Bid Conference will be held on 10.06.2026 at 11.00 AM in office of Medical Superintendent, Guru Gobind Singh Medical Hospital, Faridkot. Any prospective bidder can attend the pre-bid conference to seek any clarifications about the tender. The proceedings of the pre bid conference will only be uploaded on the website https://eproc.punjab.gov.in and will form integral part of this tender document. Any clarifications/ Modifications/ Changes notified during the pre-bid conference will be mandatory and binding.
Date of opening of the Technical Bids	By the next day from the last date of submission of tenders (by 5:00 p.m.) on the e-procurement portal of the Govt. of Punjab in, Baba Farid University of Health Sciences, Faridkot
Date, time and venue for opening of the Price Bids	Technically qualified bidders only on the e-procurement portal of the Govt. of Punjab in Baba Farid University of Health Sciences, Faridkot
Who can be contacted for obtaining more information about the tender.	Medical Superintendent, Guru Gobind Singh Medical College & Hospital, Sadiq Road, Faridkot. For any Query related to tender contact:- 01639-250098 E-mail: mspurchase@ggsmch.org (on all working days from 9.00 a.m. to 5.00 p.m.)

NOTICE INVITING E-TENDER

E-Tenders are invited on or **before 25.06.2026** from manufacturers or their authorized agents/distributors **for signing Rate Contract for** Procurement and signing rate contract of Cardiology Implants for Cardiology department at Guru Gobind Singh Medical College & Hospital, Faridkot. The tender document containing detailed terms & conditions may be downloaded from the E-procurement website of the Punjab Government i.e. <https://eproc.punjab.gov.in> and its detail may also be seen at the University website www.bfuhs.ac.in.

TERMS AND CONDITIONS:-

1. **THE TENDER must be submitted online on or before the last date/ time of the submission of tender.**
2. The **tenders will be opened online** by the next day from the last date of submission of tenders (after approval of competent authority) on the e- procurement portal of the Govt. of Punjab in Baba Farid University of Health Sciences, Faridkot on the website i.e. <https://eproc.punjab.gov.in> at the, Baba Farid University of Health Sciences, Faridkot. The bidder(s) shall be at liberty to be present, in person or through their authorized representative(s) at the time of opening of the tender as specified in the Tender Notice. In case the authorized representatives are to be present, they must furnish the authority letter from the bidder (s), on whose behalf they are representing otherwise they will not be allowed to participate in the process of opening of tender.
3. **The Price bids of technically qualified bidders will be opened** on the website i.e. <https://eproc.punjab.gov.in>, in the University Procurement & Facility Department (UPFD), Baba Farid University of Health Sciences, Faridkot. In case of any change of date and time it will be notified to the technically qualified bidders through E-mail/telephone.
4. The Registrar reserves all rights to accept or reject any or all the tenders without assigning any reason.

Registrar

INSTRUCTIONS/ GUIDELINES TO THE TENDERERS

1. The bidder needs to register himself/ herself on <https://eproc.punjab.gov.in> The bidder is also required to obtain Class III digital signature certificates to complete this process.
2. Please download the Tender document from the website of e-procurement of the Govt. of Punjab <https://eproc.punjab.gov.in> Please fill all the relevant blanks on all the pages of the tender document sign along with a stamp/ seal all pages and then a scanned copy of the same may be uploaded on the website at the time of submission of the tender document.
3. **It should be clearly noted that this tender will be accepted through e-tender mode only.** The tenders submitted through offline mode will not be accepted under any circumstances.
4. **Tender Fee** (non-refundable) may be deposited through online mode Only.
5. **Tender Processing Fee: Through online mode only as per prescribed rates of Govt. of Punjab.**
6. **Earnest Money Deposit (EMD)** Rs. 10,80,000/- (Rupees Ten lakh Eighty Thousand only) The Earnest Money Deposit must be submitted in the shape of Online Payment in favor of Registrar, Baba Farid University of Health Sciences, Faridkot on or before due date.
7. **The bidder must number all the pages of bid document and attached the Index (content with page numbers) of the bid documents.**
8. **Upload** signed copy of *Technical Bid* Compliance Statement (Annexure-I)
9. **Upload** an affidavit regarding Non-Black listing as per proforma given at **Annexure-II** duly attested by an Executive Magistrate or a Notary Public.
10. In case the Bidder is Authorized Supplier/Agency, the Authorization Certificate as per the Format given at **Annexure-‘III’** (duly filled in), **to be uploaded.**
11. In case the Bidder is Authorized Supplier/Agency, an undertaking/certificate issued by their Principal Manufacturer/Supplier that in case dealership/distributorship is withdrawn after supply of the material then the Principal Manufacturer/Supplier will be responsible for supply of the material. (**Annexure – ‘IV’**), **to be uploaded.**
12. **Upload** details of Bank Account for refund of EMD (**Annexure – V**).
13. In addition to this, following **documents are to be uploaded** with Technical Bid:-
 - i) Details of registration as Company /Firm/ Establishment.
 - ii) Certified copy of Valid Certificates/approvals
 - iii) Certificate of Registration for service Tax/TIN/TAN/PAN/GST.
 - iv) A certificate from C.A. regarding Annual Turnover of Rs. 10 crores per year or 30 crores total for the last 3 years for Bidders and Rs. 50 crores per year or 150 crores for the last 03 years alongwith Balance Sheet of bidders for the last 3 (three)financial years.
 - v) Copy of the IT Returns for last three financial years.
15. Price should be quoted and **uploaded** only in Excel Sheet proforma/BOQ available at the e-procurement portal of the Govt of Punjab.

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TECHNICAL- BID

LIST OF ITEMS WITH SPECIFICATIONS (CARDIOLOGY IMPLANTS)

1.	Cardiology Implants Adult femoral introducer sheath 5F – Adult femoral introducer sheath with hemostatic valve in a kit containing puncture needle and 0.038” guide wire. 5F, preferred make Terumo, Medtronic, Cordis
2.	Adult femoral introducer sheath 10 F – Adult femoral introducer sheath with hemostatic valve in a kit containing puncture needle and 0.038” guide wire. 10F, preferred make Terumo, Medtronic, Cordis
3.	Adult femoral introducer sheath 4F – Adult femoral introducer sheath with hemostatic valve in a kit containing puncture needle and 0.038” guide wire. 4F, preferred make Terumo, Medtronic, Cordis
4.	Adult femoral introducer sheath 6F – Adult femoral introducer sheath with hemostatic valve in a kit containing puncture needle and 0.038” guide wire. 6F, preferred make Terumo, Medtronic, Cordis
5.	Adult femoral introducer sheath 7F – Adult femoral introducer sheath with hemostatic valve in a kit containing puncture needle and 0.038” guide wire. 7F, preferred make Terumo, Medtronic, Cordis
6.	Adult femoral introducer sheath 8F – Adult femoral introducer sheath with hemostatic valve in a kit containing puncture needle and 0.038” guide wire. 8F, preferred make Terumo, Medtronic, Cordis
7.	Adult femoral introducer sheath 9F – Adult femoral introducer sheath with hemostatic valve in a kit containing puncture needle and 0.038” guide wire. 9F, preferred make Terumo, Medtronic, Cordis
8.	AICD (Advanced) with DF4 lead –AICD single chamber with all leads & accessories. <ul style="list-style-type: none">• Defibrillator with wireless telemetry without requirement of additional equipment• Should be able to deliver at least 35J energy• Should be DF4 lead compatibility• Ability to withhold shock in cases of RV noise• Should have programmable polarity of leads• Should have capture management in RV• Should audibly alert the patient in case of RV Noise & Lead failure• Should monitor the fluid build-up status in a heart failure patient and audible alert the patient in case its critical.• Should have ATP during charge in VF mode, with an option to make it ATP before charge.• Company must provide at least one programmer exclusively to the department of cardiology.• Company must provide its trained technical person for each implantation and for follow up programming whenever required.• Company must quote only the latest model of devices commercially available.• Should have standard international warranty.
9.	AICD (MRI Conditional) with DF1 lead – AICD single chamber with all leads & accessories. <ul style="list-style-type: none">• Defibrillator with wireless telemetry without requirement of additional equipment.• Should be 1.5T &/or 3T full body MRI conditional preferably without any restriction zone (complete AICD unit including lead should be MRI conditional)• Programmable RV pace and sense vectors.• Algorithm for reduction of shock in cases of RV noise.• Algorithm for reduction of shock in cases over sensing of T-Wave• Programmable energy for each shock independently.• Shock vector independently programmable for each shock.• ATP during charging and ATP before charging.• Should allow morphology discrimination programmable.• Complete capture Management

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	<ul style="list-style-type: none"> • Wireless Remote monitoring capable with full data transmission. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case it's critical. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required • Company must quote only the latest model of devices commercially available. • Should have standard international warranty.
10.	<p>AICD (MRI Conditional) with DF4 lead –AICD single chamber with all leads & accessories.</p> <ul style="list-style-type: none"> • Defibrillator with wireless telemetry without requirement of additional equipment. • Should be 1.5T &/or 3T full body MRI conditional preferably without any restriction zone (complete AICD unit including lead should be MRI conditional). • Programmable RV pace and sense vectors. • Algorithm for reduction of shock in cases of RV noise. • Algorithm for reduction of shock in cases over sensing of T-Wave • Programmable energy for each shock independently. • Shock vector independently programmable for each shock. • ATP during charging and ATP before charging. • Should allow morphology discrimination programmable. • Complete capture Management • Wireless Remote monitoring capable with full data transmission. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case it's critical. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required • Company must quote only the latest model of devices commercially available. • Should have standard international warranty
11.	<p>AICD Dual Chamber with DF1 lead (MRI Conditional) –</p> <ul style="list-style-type: none"> • dual chamber AICD with all leads & accessories. • Defibrillator with wireless telemetry without requirement of additional equipment. • Model should be DF1 lead compatible • Should be 1.5T &/or 3T full body MRI conditional preferably without any restriction zone (complete AICD unit including lead should be MRI conditional) • Should be able to minimize RV pacing. • Should be able to deliver at least 35J energy. • Should have capture management in RA and RV. • Ability to withhold shock in cases of RV noise. • Ability to withhold shock in cases of T-Wave oversensing. • Should have algorithms to manage and treat Atrial arrhythmias. • Should have Rate Drop Response to counter Neurocardiogenic Syncope. • Should audibly alert the patient in case of RV Noise & Lead failure. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case its critical. • Should have ATP during chare in VF mode with an option to make it ATP before CHARGE. • Should have standard international warranty
12.	<p>AICD Dual Chamber with DF1 lead - dual chamber AICD with all leads & accessories.</p> <ul style="list-style-type: none"> • Must have shock reduction technology • All basic programmable parameters with preferably autosensing and auto capture/output management facilities. • Must monitor the lead integrity and notify in case of suspected failure.

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	<ul style="list-style-type: none"> • RV lead must be 9F or less • Model must be DF1 lead compatible. • Must have all SVT discrimination in VF zone • Must have morphological based SVT discrimination. • Must have remote patient management capability. • Lead should be steroid eluting • Should have both active and passive fixation leads. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Should have standard international warranty.
13.	<p>AICD Dual Chamber with DF4 lead (MRI Conditional) –</p> <ul style="list-style-type: none"> • dual chamber AICD with all leads & accessories. • Defibrillator with wireless telemetry without requirement of additional equipment. • Model must be DF4 lead compatible. • Should be atleast 1.5T & or 3T full body MRI Conditional without any restriction zone (Complete AICD unit including leads should be MRI conditional) • Should be able to minimize RV pacing • Should be able to deliver at least 35J energy • Should have capture management in RA and RV • Ability to withhold shock in cases of RV noise • Ability to withhold shock in cases of T-Wave oversensing • Should have algorithms to manage and treat Atrial arrhythmias • Should have Rate Drop Response to counter Neurocardiogenic Syncope • Should audibly alert the patient in case of RV Noise & Lead failure. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case its critical. • Should have ATP during charge in VF mode, with an option to make it ATP before charge. • Should have standard international warranty.
14.	<p>AICD Dual Chamber with DF4 lead</p> <ul style="list-style-type: none"> • dual chamber AICD with all leads & accessories. • Must have shock reduction technology. • All basic programmable parameters with preferably autosensing and auto capture/output management facilities. • Must monitor the lead integrity and notify in case of suspected failure. • RV lead must be 9F or less. • Model must be DF4 lead compatible. • Must have all SVT discrimination in VF zone. • Must have morphological based SVT discrimination. • Must have remote patient management capability • Lead should be steroid eluting. • Should have both active and passive fixation leads. • Company must provide at least one programmer exclusively to the department of cardiology • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Should have standard international warranty.
15.	<p>AICD with DF1 lead</p> <ul style="list-style-type: none"> • Single chamber AICD with all leads & accessories. • DF1 RV lead must be 9 F or less. • Model should be DF1 lead compatible.

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	<ul style="list-style-type: none"> • All basic programmable parameters with preferably autosensing and auto capture/output management facilities. • Must have morphological based SVT discrimination. • Must monitor the lead integrity and notify in case of suspected failure. • Lead should be steroid eluting. • Should have both active and passive fixation leads. • Should have standard international warranty. • Company must provide at least one programmer exclusively to the department of cardiology • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available.
16.	AMPLATZ LEFT DIAGNOSTIC CATHETER 4F, 5F, 6F all curves.
17.	AMPLATZ RIGHT DIAGNOSTIC CATHETER 4F, 5F, 6F all curves.
18.	Amplatzer super stiff guide wire, long length of 260 cm to 300 cm of 0.035" size, preferred make Boston, medtronic, cordis, Terumo
19.	Amplatzer super stiff guide wire, long length of 260 cm to 300 cm of 0.038" size, preferred make Boston, medtronic, cordis, Terumo
20.	Angiographic Guide wire PTFE coated, 'J' tip, diameter 0.025", Extra- Length (250-260 cm), preferred make Terumo, Medtronic, Cordis
21.	Angiographic Guide wire PTFE coated, 'J' tip, diameter 0.032", Extra- Length (250-260 cm), preferred make Terumo, Medtronic, Cordis
22.	Angiographic Guide wire PTFE coated, 'J' tip, diameter 0.035", Extra- Length (250-260 cm), preferred make Terumo, Medtronic, Cordis
23.	Angiographic Guide wire PTFE coated, 'J' tip, diameter 0.038", Extra- Length (250-260 cm), preferred make Terumo, Medtronic, Cordis
24.	Angiographic Guide wire, PTFE coated, 'J' tip, diameter 0.021", Extra- Length (250-260 cm), preferred make Terumo, Medtronic, Cordis
25.	Angiographic Guide Wire; PTFE coated; Straight tip; diameter 0.038" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
26.	Angiographic Guide Wire; PTFE coated; 'J' tip ; diameter 0.038" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
27.	Angiographic Guide Wire; PTFE coated; 'J' tip ; diameter 0.038" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
28.	Angiographic Guide Wire; PTFE coated; 'J' tip; diameter 0.035" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
29.	Angiographic Guide Wire; PTFE coated; 'J' tip; diameter 0.021" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
30.	Angiographic Guide Wire; PTFE coated; 'J' tip; diameter 0.025" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
31.	Angiographic Guide Wire; PTFE coated; Straight tip; diameter 0.021" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis

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32.	Angiographic Guide Wire; PTFE coated; Straight tip; diameter 0.025" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
33.	Angiographic Guide Wire; PTFE coated; Straight tip; diameter 0.032" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
34.	Angiographic Guide Wire; PTFE coated; Straight tip; diameter 0.035" ; Regular length 120-150, preferred make Terumo, Medtronic, Cordis
35.	Balloon tipped thermolysis triple lumen catheter (Swan Ganz type), 6F, 7F,
36.	Balloon-Flow Assisted Bipolar Temporary Pacing Electrode Catheter: Must have marking on catheter, Must be NBIHTM standard, non-Heparin Coated, sizes-5 French, with depth marker.
37.	Cannula fixator, dynaplast type
38.	Carotid Sheaths (90cm) All sizes
39.	Carotid stents –Non tapered cylinder 0.014" wire rapid exchange (Self-expanding), all sizes
40.	Carotid stents- Tapered cylinder 0.014" wire rapid exchange (self expanding), all sizes
41.	IVC Filter a) Temporary/Retrieval b) Permanent (MRI & Non MRI compatible)
42.	PTCA pre-dilatation semi-compliant over the wire balloon With short balloon taper, low entry profile ($\leq 0.016''$). Diameter – 1.2/1.25, 1.5, 2.0, 2.5, 3.0 mm or more length – minimum 6-8mm to 20mm.
43.	Closure Device for vascular access site (Angioseal type) – Vascular Closure Device for vascular access site (non suture mediated)
44.	Closure Device for vascular access site (Proglide type) – Vascular Closure Device for vascular access site (suture mediated)
45.	Cobalt chromium base Everolimus coated drug eluting coronary stent – Cobalt Chromium base Everolimus coated drug eluting coronary stent (All sizes & diameter)
46.	Cobalt chromium base Sirolimus coated drug eluting coronary stent – Cobalt chromium base Sirolimus coated drug eluting coronary stent (All sizes & diameter)
47.	Cobalt chromium base Zotarolimus coated drug eluting coronary stent – Cobalt chromium base Zotarolimus coated drug eluting coronary stent (All sizes & diameter)
48.	Contralateral Sheath (All Sizes)
49.	Contrast injecting luer lock controlled syringe 5 cc without finger grip.
50.	Coronary microcatheter Coronary microcatheter with distal diameter of 1.8 Fr or less, proximal diameter 2.6F, PTFE coated inner layer, and distal hydrophilic coating at the outer layer, flexible tip with outer and inner taper with marker at distal tip for enhanced distal visibility to cross difficult lesions. a) 130-135 cm long, b) 150-160 cm long
51.	COURNAND CATHETER 5F woven dacron.
52.	COURNAND CATHETER 6F woven dacron.
53.	Covered stent for coronary use (balloon expandable) All sizes
54.	Covered Stent for peripheral (Self expanding) All sizes
55.	Covered Stent for peripheral use (balloon expandable) All sizes

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56.	CP stent for coarctation of aorta (covered) with delivery system
57.	CP stent for coarctation of aorta (Non- covered) with delivery system
58.	<p>CRT-D (Advanced)</p> <ul style="list-style-type: none"> • biventricular pacemaker with atrial, DF4 RV and Quadripolar LV leads and all accessories. • Must have multipoint pacing options. • Wireless Telemetry • Ability to automatically select the best pacing vector. • Should be able to minimize RV pacing. • Should be able to deliver at least 35J energy • Should have capture management in RA, RV and LV • Ability to withhold shock in cases of RV noise. • Ability to withhold shock in cases of T-wave over sensing • Should have algorithms to manage and treat Atrial arrhythmias. • Should have Rate Drop Response to counter Neurocardiogenic Syncope. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case its critical. • Should audibly alert the patient in case of RV noise & Lead failure. • Should have ATP during charge in VF mode, with an option to make it ATP before charge. • Should have standard international warranty.
59.	<p>CRT-D (MRI Conditional)</p> <ul style="list-style-type: none"> • biventricular pacemaker with atrial, DF4 RV and Quadripolar LV leads and all accessories • Must have multipoint pacing options. • Wireless Telemetry • Should be 1.5T and/or 3T Full body MRI Conditional (Complete unit including leads should be MRI conditional). • Ability to automatically select the best pacing vector. • Should be able to minimize RV pacing. • Should be able to deliver atleast 35J energy • Should have capture management in RA, RV and LV. • Ability to withhold shock in cases of RV noise • Ability to withhold shock in cases of T-Wave over sensing • Should have algorithms to manage and treat Atrial arrhythmias • Should have Rate Drop Response to counter Neurocardiogenic Synope • Should audibly alert the patient in case of RV Noise & Lead failure. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case its critical. • Should have ATP during charge in VF mode, with an option to make it ATP before charge. • Should have standard international warranty.
60.	<p>CRT-D</p> <ul style="list-style-type: none"> • biventricular pacemaker with atrial, DF1 RV and Bipolar LV leads and all accessories. • Wireless Telemetry • Should be able to deliver at least 35J energy • Should have capture management in LV • Ability to withhold shock in cases of RV noise • Ability to withhold shock in cases of T-Wave over sensing • Should have algorithms to manage and treat Atrial arrhythmias. • Should have Rate Drop Response to counter Neurocardiogenic Synope • Should audibly alert the patient in case of RV noise & Lead failure • Should have ATP during charge in VF mode, with an option to make it ATP before charge • Should have standard international warranty.

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61.	<p>CRT-P (Advanced)</p> <ul style="list-style-type: none"> • biventricular pacemaker with atrial, RV and Quadripolar LV leads and all accessories. • Must have multipoint pacing options. • Should have Ventricular Sense Response. • Should have algorithm in order to ensure 100% CRT Therapy. • Should have capture management in RA, RV and LV. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case it's critical. • Must have separate programmable RV, LV lead amplitude, pulse width and VV delay. • The size of RA, RV & LV leads should be 7F or less • The leads should be steroid eluting and should be bipolar and unipolar configuration. • Should have both active and passive fixation RA & RV endocardial leads. • Should have facility for active fixation of LV lead in CS with both screwing and/or deployable lobes with anchor mechanism. • Should have facility for epicardial LV lead implantation. • Monitor the integrity of lead and switch polarity in case of issue. • Must have remote patient management capability. • Should have standard International warranty.
62.	<p>CRT-P (Advanced, MRI Conditional)</p> <ul style="list-style-type: none"> • biventricular pacemaker with atrial, RV and Quadripolar LV leads and all accessories. • Should be 1.5T and/or 3T Full Body MRI conditional (complete unit including leads should be MRI conditional.) • Must have multipoint pacing options. • Should have Ventricular Sense Response. • Should have algorithm in order to ensure 100% CRT Therapy. • Should have capture management in RA, RV and LV. • Should monitor the fluid build-up status in a heart failure patient, and audible alert the patient in case it's critical. • Must have separate programmable RV, LV lead amplitude, pulse width and VV delay. • The size of RA, RV & LV leads should be 7F or less. • The leads should be steroid eluting and should be bipolar and unipolar configuration. • Should have both active and passive fixation RA & RV endocardial leads. • Should have facility for active fixation of LV lead in CS with both screwing and/or deployable lobes with anchor mechanism. • Should have facility for epicardial LV lead Implantation. • Monitor the integrity of lead and switch polarity in case of issue. • Must have remote patient management capability. • Should have Standard International Warranty.
63.	<p>CRT-P (MRI Conditional)</p> <ul style="list-style-type: none"> • biventricular pacemaker with atrial, RV and LV leads and all accessories. • Should be 1.5T and/or 3T Full Body MRI conditional (Complete unit including leads should be MRI conditional). • Must have separate programmable RV, LV lead amplitude, pulse width and VV delay. • The size of RA, RV & LV leads should be 7F or less. • The leads should be steroid eluting and should be bipolar and unipolar configuration. • Should have both active and passive fixation RA & RV endocardial leads. • Should have facility for active fixation of LV lead in CS with both screwing and/or deployable lobes with anchor mechanism. • Should have facility for epicardial LV lead implantation. • Monitor the intergrity of lead and switch polarity in case of issue. • Must have RA, RV and LV capture Management. • Should have Standard International Warranty.

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64.	<p>CRT-P</p> <ul style="list-style-type: none"> biventricular pacemaker with atrial, RV and LV leads and all accessories. Must have separate programmable RV, LV lead amplitude, pulse width and VV delay. The size of RA, RV & LV leads should be 7F or less. The leads should be steroid eluting and should be bipolar and unipolar configuration. Should have both active and passive fixation RA & RV endocardial leads. Should have facility for active fixation of LV lead in CS with both screwing and/or deployable lobes with anchor mechanism. Should have facility for epicardial LV lead implantation. Monitor the integrity of lead and switch polarity in case of issue. Must have RA, RV and LV capture management. Should have Standard International Warranty.
65.	Cobalt chromium base Everolimus coated drug eluting coronary stent (All sizes & diameters)
66.	Cobalt chromium base Sirolimus coated drug eluting coronary stent (All sizes & diameters)
67.	Cobalt chromium base Zotarolimus coated drug eluting coronary stent (All sizes & diameters)
68.	Platinum chromium base Everolimus coated drug eluting coronary stent (All sizes & diameters)
69.	Platinum chromium base Sirolimus coated drug eluting coronary stent (All sizes & diameters)
70.	Platinum chromium base Zotarolimus coated drug eluting coronary stent (All sizes & diameters)
71.	PTCA pre-dilatation semi-compliant over the wire balloon With short balloon taper, low entry profile ($\leq 0.016''$). Diameter – 1.2/1.25, 1.5, 2.0, 2.5, 3.0 mm or more Length – minimum 6-8 mm to 20mm.
72.	Stainless steel base Everolimus coated drug eluting coronary stent (All sizes & diameters)
73.	Stainless steel base Sirolimus coated drug eluting coronary stent (All sizes & diameters)
74.	Stainless steel base Zotarolimus coated drug eluting coronary stent (All sizes & diameters)
75.	<p>DDD pacemaker with International standard warranty</p> <ul style="list-style-type: none"> pacemaker with lead & accessories. All pacing modes and basic pacing programmable parameters including hysteresis with preferably autosensing and autocapture/output management facilities. Must have Ventricular and Atrial Capture management. Must minimize ventricular pacing by optimizing AV delay automatically. Monitor the integrity of lead and switch polarity in case of issue. The size of lead should be 7F or less. The lead must be steroid eluting and should be both bipolar and unipolar configuration. Must have both active and passive fixation endocardial leads available. Company must provide at least one programmer exclusively to the department of cardiology. Company must provide its trained technical person for each implantation and for follow up programming whenever required. Company must quote only the latest model of devices commercially available. Model with International standard warranty (at least 7 years or more).
76.	<p>DDDR (AT/AF management, 1.5T MRI Conditional) with International standard warranty</p> <ul style="list-style-type: none"> MRI conditional pacemaker with lead & accessories (Complete pacemaker unit including generator & lead must be MRI conditional) Evaluate threshold of atrial & ventricular lead to adjust atrial & ventricular output on daily basis. Automatically adjust sensitivity to maintain adequate sensing margins. Dual zone rate response, one for normal response and other for response during exercise. Mode based Physiological Pacing Algorithm to promote intrinsic conduction. Atrial intervention for AF prevention by constantly overdriving Atrium.

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	<ul style="list-style-type: none"> • Rate drop response for syncope management with ability to detect both drop rate and drop size. • ATP therapies to terminate high rate atrial tachyarrhythmia episodes. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Must have rate response which allows rate profile optimization. • Company must provide at least one programmer exclusively to the department of Cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Should allow full body at 1.5T MRI scan without any restriction zone with International standard warranty (at least 7 years or more)
77.	<p>DDDR (AT/AF management, 3T MRI Conditional) with International lifetime warranty</p> <ul style="list-style-type: none"> • MRI conditional pacemaker with lead & accessories (complete pacemaker unit including generator & lead must be MRI conditional) • Evaluate threshold of atrial & ventricular lead to adjust atrial & ventricular output on daily basis. • Automatically adjust sensitivity to maintain adequate sensing margins. • Dual zone rate response, one for normal response and other for response during exercise. • Mode based Physiological Pacing Algorithm to promote intrinsic conduction. • Atrial intervention for AF Prevention by constantly overdriving Atrium. • Rate drop response for syncope management with ability to detect both drop rate and drop size. • ATP therapies to terminate high rate atrial tachyarrhythmia episodes. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Must have rate response which allows rate profile optimization. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Should allow full body at 3T MRI scan without any restriction zone with International lifetime warranty.
78.	<p>DDDR (AT/AF management, 3T MRI Conditional) with International standard warranty</p> <ul style="list-style-type: none"> • MRI conditional pacemaker with lead & accessories (Complete pacemaker unit including generator & lead must be MRI conditional) • Evaluate threshold of atrial & ventricular lead to adjust atrial & ventricular output on daily basis. • Automatically adjust sensitivity to maintain adequate sensing margins. • Dual zone rate response, one for normal response and other for response during exercise. • Mode based Physiological Pacing Algorithm to promote intrinsic conduction. • Atrial Intervention for AF Prevention by constantly overdriving Atrium. • Rate drop response for syncope management with ability to detect both drop rate and drop size. • ATP therapies to terminate high rate atrial tachyarrhythmia episodes. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Must have rate response which allows rate profile optimization. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Should allow full body at 3T MRI scan without any restriction zone with International standard warranty (at least 7 years or more).

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79.	<p>DDDR pacemaker with International lifetime warranty</p> <ul style="list-style-type: none"> • pacemaker with lead and accessories. • All pacing modes and basic pacing programmable parameters including hysteresis with preferably autosensing and autocapture/output management facilities. • Must have Ventricular and Atrial Capture management. • Must minimize ventricular pacing by optimizing AV delay automatically. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Model with international lifetime warranty.
80.	<p>DDDR pacemaker with International lifetime warranty, 1.5 T Conditional</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All pacing modes and basic pacing programmable parameters including hysteresis with preferably autosensing and autocapture/output management facilities. • Must have Ventricular and Atrial Capture Management. • Must minimize ventricular pacing by optimizing AV delay automatically. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Should allow 1.5T full body MRI scan without any restriction zone, with international lifetime warranty.
81.	<p>DDDR pacemaker with International lifetime warranty, 3 T MRI Conditional</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All pacing modes and basic pacing programmable parameters including hysteresis with preferably autosensing and autocapture/output management facilities. • Must have Ventricular and Atrial Capture Management. • Must minimize ventricular pacing by optimizing AV delay automatically. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of Cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Should allow 3T full body MRI scan without any restriction zone, with International lifetime warranty.
82.	<p>DDDR pacemaker with International standard warranty</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All pacing modes and basic pacing programmable parameters including hysteresis with preferably autosensing and autocapture/output management facilities. • Must minimize ventricular pacing by optimizing AV delay automatically.

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	<ul style="list-style-type: none"> • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Model with International standard warranty (at least 7 years or more).
83.	<p>DDDR pacemaker with International standard warranty, 1.5 T MRI Conditional</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All pacing modes and basic pacing programmable parameters including hysteresis with preferably autosensing and autocapture/output management facilities. • Must have Ventricular and Atrial Capture Management. • Must minimize ventricular pacing by optimizing AV delay automatically. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Should allow 1.5T full body MRI scan without any restriction zone, with International standard warranty (at least 7 years or more)
84.	<p>DDDR pacemaker with International standard warranty, 3 T MRI Conditional</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All pacing modes and basic pacing programmable parameters including hysteresis with preferably autosensing and autocapture/output management facilities. • Must have Ventricular and Atrial Capture management. • Must minimize ventricular pacing by optimizing AV delay automatically. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Should allow 3T full body MRI scan without any restriction zone, with International standard warranty (at least 7 years or more)
85.	DOC Extension wire compatible with 0.014 inch ptca guidewire
86.	Embolic Protection device (Peripheral) A. Proximal protection B. Filter type C. Balloon occlusion type
87.	Exchange length (260cm and above) 0.018" peripheral intervention guide wire
88.	EXTRALONG (more than 150 cm) pigtail catheters for illiac angiography from radial

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89.	EXTRALONG (more than 150 cm) pigtail catheters for illiac angiography from radial
90.	Flexible delivery sheaths with steerable and defelctable introducer systems (60 cm and above long) Should be CE/DCGI approved.
91.	Foreign body retrieval snares (Coronary) All sizes, A. Amplantz type, B. Basket type, C. Cook-angled type, D. Wire loop type.
92.	Foreign body retrieval snares (Non-Coronary) All sizes, A. Amplantz type, B. Basket type, C. Cook-angled type, D. Wire loop type.
93.	Guide catheter extension system 6F,7F compatible, rapid exchange with 145-150 cm working length, tip radiopaque marker.
94.	High pressure Injector line to withstand pressure up to 1200 psi 120-150 cm length with luer lock male port and rotator.
95.	High pressure Injector line to withstand pressure up to 1200 psi 60-75 cm length with luer lock male port and rotator.
96.	Hydrophilic Guidewire 150 cm- Angled tip, 0.018" (Terumo Type)
97.	Hydrophilic Guidewire 150 cm- Angled tip, 0.025" (Terumo Type)
98.	Hydrophilic Guidewire 150 cm- Angled tip, 0.032" (Terumo Type)
99.	Hydrophilic Guidewire 150 cm- Angled tip, 0.035" (Terumo Type)
100.	Hydrophilic Guidewire 150 cm- Angled tip, 0.038" (Terumo Type)
101.	Hydrophilic Guidewire 150 cm- Straight tip, 0.018" (Terumo Type)
102.	Hydrophilic Guidewire 150 cm- Straight tip, 0.025" (Terumo Type)
103.	Hydrophilic Guidewire 150 cm- Straight tip, 0.032" (Terumo Type)
104.	Hydrophilic Guidewire 150 cm- Straight tip, 0.035" (Terumo Type)
105.	Hydrophilic Guidewire 150 cm- Straight tip, 0.038" (Terumo Type)
106.	Hydrophilic Guidewire 260 cm- Angled tip, 0.018" (Terumo Type)
107.	Hydrophilic Guidewire 260 cm- Angled tip, 0.025" (Terumo Type)
108.	Hydrophilic Guidewire 260 cm- Angled tip, 0.032" (Terumo Type)
109.	Hydrophilic Guidewire 260 cm- Angled tip, 0.035" (Terumo Type)
110.	Hydrophilic Guidewire 260 cm- Angled tip, 0.038" (Terumo Type)
111.	Hydrophilic Guidewire 260 cm cm- Straight tip, 0.025" (Terumo Type)
112.	Hydrophilic Guidewire 260 cm- Straight tip, 0.018" (Terumo Type)
113.	Hydrophilic Guidewire 260 cm- Straight tip, 0.032" (Terumo Type)
114.	Hydrophilic Guidewire 260 cm- Straight tip, 0.035" (Terumo Type)
115.	Hydrophilic Guidewire 260 cm- Straight tip, 0.038" (Terumo Type)
116.	Hydrophilic Stiff Guidewire 150 cm- Angled tip, 0.035" (Terumo Type)
117.	Hydrophilic Stiff Guidewire 150 cm- Angled tip, 0.038" (Terumo Type)

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118.	Hydrophilic Stiff Guidewire 260 cm- Angled tip, 0.035" (Terumo Type)
119.	Hydrophilic Stiff Guidewire 260 cm- Angled tip, 0.038" (Terumo Type)
120.	Inflation device with manometer upto 15 atmosphere, 60 cc (easy to operate with luminescent dial)
121.	Inflation device with manometer upto 30 atmosphere, 20 cc (easy to operate with luminescent dial)
122.	Inflation device with manometer upto 45 atmosphere, 25 or 30 cc (easy to operate with luminescent dial)
123.	Inflation device with manometer upto 55 atmosphere (easy to operate with luminescent dial)
124.	INTERNAL MAMMARY ARTERY DIAGNOSTIC CATHETER 4F, 5F, 6F all curves.
125.	Iso-osmolar non-ionic 320, IODIXANOL (20ml, 50ml & 100ml)
126.	Iso-osmolar non-ionic 350, IOHEXOL INJECTION (20, 50ml & 100ml)
127.	IVC Filter a) Temporary/Retrieval, b) Permanent (MRI & Non MRI compatible) IVC Filter
128.	JUDKINS LEFT DIAGNOSTIC CATHETER 4F, 5F, 6F all Curves.
129.	JUDKINS RIGHT DIAGNOSTIC CATHETER 4F, 5F, 6F all Curves.
130.	LEFT CORONARY BY PASS DIAGNOSTIC CATHETER 4F, 5F, 6F all Curves.
131.	Lignocaine spray 10%, 50 ml with spraying nozzle
132.	Lunderquist type high support exchange length 0.035" (260cm and above) short and long tip guide wire.
133.	Manifold - Three ports with knobs to turn "Right" when open.
134.	Manifold - Two ports with knobs to turn "Right" when open.
135.	MARKER PIGTAIL CATHETER 5F. Should be
136.	MARKER PIGTAIL CATHETER 6F. Should be
137.	Mitral Valvuloplasty Balloon (Non-Inoue) All sizes with accessories,
138.	Mullins sheath (all sizes)
139.	MULTIPURPOSE CATHETER A1,A2,B1,B2.
140.	<p>Pacemaker DDDR (AT/AF management, 1.5T MRI Conditional) with International lifetime warranty</p> <ul style="list-style-type: none"> • MRI conditional pacemaker with lead & accessories (complete pacemaker unit including generator & lead must be MRI conditional) • Evaluate threshold of atrial & ventricular lead to adjust atrial & ventricular output on daily basis. • Automatically adjust sensitivity to maintain adequate sensing margins. • Dual zone rate response, one for normal response and other for response during exercise. • Mode based physiological pacing algorithm to promote intrinsic conduction. • Atrial intervention for AF Prevention by constantly overdriving Atrium. • Rate drop response for syncope management with ability to detect both drop rate and drop size.

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	<ul style="list-style-type: none"> • ATP therapies to terminate high rate atrial tacharrhythmia episodes. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have rate response which allows rate profile optimization. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Should allow full body at 1.5T MRI scan without any restriction zone with International Lifetime warranty.
141.	Pacemaker Lead Extraction Device. a. Lead Locking Device. b. Mechanical rotating Dilator c. Manual Dilator. d. Bridge Balloon.
142.	Paclitaxel coated coronary drug eluting balloon (all sizes)
143.	Peripheral Angioplasty Balloon, hydrophobic coating A. 0.014" wire compatible, Monorail & OTW 5-12 mm B. 0.035" wire compatible Monorail & OTW 5-12 mm C. 0.035" wire compatible, Monorail & OTW 14-25 mm.
144.	Peripheral balloon expandable Cobalt Chromium Stents all sizes both OTW and monorail
145.	Peripheral balloon expandable Nitinol Stents all sizes both OTW and monorail.
146.	Peripheral balloon expandable Stainless-Steel Stents , all sizes both OTW and monorail.
147.	Peripheral Cobalt Chromium Stent all sizes both OTW and monorail.
148.	Peripheral Drug eluting balloon, , all sizes, quote separately
149.	Peripheral Nitinol Stent , all sizes both OTW and monorail.
150.	Peripheral self-expanding stents all sizes.
151.	PIG TAIL CATHETERS 5F.
152.	PIG TAIL CATHETERS, 6F.
153.	PIG-TAIL CATHETER PEDIATRIC 4 F.
154.	Plastic luer lock syringe, 10 cc with finger grip. Sterile Plastic Contrast injecting luer lock controlled syringe 10 cc with finger grip.
155.	Plastic luer lock syringe, 10 cc without finger grip. Sterile Plastic Contrast injecting luer lock controlled syringe 10 cc without finger grip.
156.	Plastic luer lock syringe, 12 cc with finger grip. Sterile Plastic Contrast injecting luer lock controlled syringe 12 cc with finger grip.
157.	Plastic luer lock syringe, 12 cc without finger grip. Sterile Plastic Contrast injecting luer lock controlled syringe 12 cc without finger grip.

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158.	Plastic luer lock syringe, 2 cc without finger grip. Sterile Plastic Contrast injecting luer lock controlled syringe 2 cc without finger grip.
159.	Plastic luer lock syringe, 20 cc with finger grip. Sterile Plastic Contrast injecting luer lock controlled syringe 20 cc with finger grip.
160.	Plastic luer lock syringe, 20 cc without finger grip. Sterile Plastic Contrast injecting luer lock controlled syringe 20 cc with finger grip.
161.	Platinum chromium base Everolimus coated drug eluting coronary stent (All sizes and diameters),
162.	Platinum chromium base Sirolimus coated drug eluting coronary stents (All sizes & Diameters)
163.	Platinum chromium base Zotarolimus coated drug eluting coronary stents (All sizes & Diameters)
164.	Platinum chromium based Everolimus coated drug eluting coronary stent (All sizes & Diameters)
165.	PTA guide wire steerable PTA guide wire with floppy tip, scitanium stainless steel alloy core, extra-support of 0.018" diameter ≥300cm long. A) Tip Non-hydrophilic, B) Tip Hydrophobic.
166.	PTA high support guide wire , steerable PTA high support guide wire of 0.018", body PTFE/hydrophobic coated, distal hydrophilic coating, distal radiopacity of 2 cm, a) 180-190 cm long, b) ≥300cm long.
167.	PTCA accessories kit containing with spring type push and release mechanism Y Connector PTCA accessories kit containing a) Y-connector hemostatic valve with spring type push and release mechanism (Touhy borst system). b) Torque device & c) Introduce needle.
168.	PTCA accessories kit with rotating type Y connector , PTCA accessories kit containing a) Y-connector hemostatic valve with rotating mechanism (Touhy borst system). b) Torque device & c) Introduce needle.
169.	PTCA balloon high pressure non-compliant high pressure non-compliant balloon smooth, rounded distal tip and non edge over-dilatation at higher pressure; with least balloon overhand at the edges. Diameter (mm): 2.5, 2.75, 3.0, 3.25, 3.5, 3.75, 4, 4.5, 5.0 Length (mm) minimum 6-8mm to ≥20 mm.
170.	PTCA extra support guidewire with durasteel core material , steerable PTCA extra support guide wire with durasteel core material, core to tip design, floppy tip, standard size a) With hydrophobic coating, b) with hydrophilic coating.
171.	PTCA extra-support guide wire. , PTCA extra-support guide wire with PTFE coating over shaft, tip load of 0.7 gm , tip size of 0.014", and tip radiopacity of 4 cm. a) 180-190 cm long, b) 280-300 cm long.
172.	PTCA guide wire for CTO with extra-support PTCA guide wire for CTO with extra-support, tip load of 9 gm, tip size of 0.009", length 180-190 cm, with a) spring coll and tip radiopacity of 11 cm. b) Spring coll and tip radiopacity of 20 cm.
173.	PTCA guide wire for CTO with PTFE coating over shaft PTCA guide wire for CTO with PTFE coating over shaft, tip size of 0.014", tip radiopacity of 11 cm and length of 180-190 cm Tip load of a) 2-3 gm. B) 4-5 gm. C) 6-7 gm. D) 12-13 gm.

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174.	PTCA guide wire with floppy tip, hydrophilic coating , steerable PTCA guide wire with floppy tip, elastin core, soft shaping ribbon tip and hydrophilic coating. a) 180-190 cm. b) 280-300 cm.
175.	PTCA guide wire with floppy tip, hydrophobic coating , steerable PTCA guide wire with floppy tip, elastin core, soft shaping ribbon tip and hydrophobic coating. 180-190 cm. b) 280-300 cm.
176.	PTCA guide wire with PTFE coating over shaft , PTCA guide wire with PTFE coating over shaft, tip load of 0.8 gm, tip size of 0.014", tip radiopacity of 3 cm. a) 180-190 cm long. b) 280-300 cm long.
177.	PTCA guide wire with PTFE coating over shaft, tip radiopacity of 16 cm. , PTCA guide wire with PTFE coating over shaft, tip load of 0.8 gm, tip size of 0.009", tip radiopacity of 16 cm. a) 180-190 cm long. b) 280-300 cm long.
178.	PTCA guide wires, 0.014", 180-190 cm long, Nitinol distal super elastic core for kink resistance and shape retention, Silicon coating for distal 2 cm and hydrophilic coating of rest of the wire length, a) Tip load of 0.9-1.0 gm, b) Tip load of 0.6-0.8 gm, c) Tip load of 3.5-4.0 gm.
179.	PTCA guidewire joint less spring coil 0.014" joint less spring coil 0.014" one piece core PTCA guide wire with tip radiopacity 3 cm, length 180 cm. a) Tip load 0.7-0.8 gm. b) Tip load 0.5-0.6 gm.
180.	PTCA guiding catheters , PTCA guiding catheter, ≥100 cm long. It should be large lumen braided, inner layer coated with PTFE. It should have atraumatic soft tip with radio opaque marker band at the tip. a) Judkins left without side holes (Cures 3, 3.5, 4, 5 cm), size 5F/6F/7F/8F. b) Judkins left with side holes (Cures 3, 3.5, 4, 5 cm), size 5F/6F/7F/8F. c) Judkins left with short tip (Cures 3, 3.5, 4, 5 cm), size 5F/6F/7F/8F. d) Judkins right without side holes (Cures 3, 3.5, 4, 5 cm), size 5F/6F/7F/8F. e) Judkins right with side holes (Cures 3, 3.5, 4, 5 cm), size 5F/6F/7F/8F. f) Judkins right with short tip (Cures 3, 3.5, 4, 5 cm), size 5F/6F/7F/8F. g) IMA guiding catheter, 5F/6F/7F. h) Multipurpose (AI, AII), 5F/6F/7F/8F. i) Multipurpose (BI, BII), 5F/6F/7F/8F. j) Amplatz Left without side holes (Curves AL0.75, AL1, AL1.5, AL2, AL3), 5F/6F/7F/8F. k) Amplatz Left with side holes (Curves AL0.75, AL1, AL1.5, AL2, AL3), 5F/6F/7F/8F. l) Amplatz Right without side holes (Curves AR1, AR2), 5F/6F/7F/8F. m) Amplatz Right with side holes (Curves AR1, AR2), 5F/6F/7F/8F. n) Voda Left, 5F/6F/7F/8F. o) Voda Right, 5F/6F/7F/8F. p) Left Coronary bypass guide catheter, 6F/7F. q) Right coronary bypass guide catheter, 6F/7F. r) Contra Lateral Support (CLS) left without side holes, 5F/6F/7F/8F. s) Contra Lateral Support (CLS) Left with side hole, 5F/6F/7F/8F. t) Contra Lateral Support (CLS) right without side hole, 5F/6F/7F/8F. u) Contra Lateral Support (CLS) right with side hole, 5F/6F/7F/8F. v) 3D right guiding catheter without side hole, 6F/7F. w) 3D right guiding catheter with side hole, 6F/7F. x) Hockey Stick guiding catheter, 6F/7F. y) Shepherd Crook right type guiding (Curves 3.5, 4, 5), 6F/7F. z) Head Hunter guiding catheter, 6F/7F. aa) Extraback up (EBU3, 3.5, 4) catheters, 5F/6F/7F/8F. bb) Extraback up right (EBU right 3, 3.5, 4) catheters, 5F/6F/7F/8F.

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181.	PTRA guide wire for Renal Angioplasty, diameter 0.018", 100- 110 cm long.
182.	Radial Artery compression band consists of two balloons specially designed for spot compression of the radial puncture site, Preferred make Terumo, Meritt, Medtronic.
183.	Radial Diagnostics Catheter with the unique tiger type Curve which enables angiography of right and left coronary arteries using either radial or Brachial approach, preferred make Terumo, Cordis, Medtronic.
184.	Radial introducer Sheath, 5F Radial Introduces Sheath with haemostatic valve, 5F, 20Gx2" puncture needle with plastic IV catheter and 0.025" Radifocus mini plastic guidewire, preferred make Terumo, Cordis, Medtronic.
185.	Radial introducer Sheath, 6F Radial Introduces Sheath with haemostatic valve, 6F, 20Gx2" puncture needle with plastic IV catheter and 0.025" Radifocus mini plastic guidewire, preferred make Terumo, Cordis, Medtronic
186.	Radial introducer Sheath, 7F Radial Introduces Sheath with haemostatic valve, 7F, 20Gx2" puncture needle with plastic IV catheter and 0.025" Radifocus mini plastic guidewire, preferred make Terumo, Cordis, Medtronic.
187.	Renal Stents, cobalt chromium, DCGI approved Balloon Mounted Monorail 0.014" compatible Cobalt chromium renal Stent diameter 4-7 mm length 10-24 mm.
188.	RIGHT CORONARY BY PASS DIAGNOSTIC CATHETER 4F,5F,6F all Curves.
189.	Short tube of 12 to 15 inches to connect to touhy borst
190.	Sirolimus coated coronary drug eluting balloon / Sirolimus coated drug eluting balloon (All sizes)
191.	Stainless steel base Everolimus coated drug eluting coronary stents /certified Stainless steel base Everolimus coated drug eluting coronary stent (All sizes & Diameters)
192.	Stainless steel base Sirolimus coated drug eluting coronary stent certified Stainless steel base Sirolimus coated drug eluting coronary stent (All sizes & Diameters)
193.	Stainless steel base Zotarolimus coated drug eluting coronary stent /certified Stainless steel base Zotarolimus coated drug eluting coronary stent (All sizes & Diameters)
194.	Stainless Steel renal Stent, Balloon Mounted Monorail 0.014" Compatible Stainless Steel renal Stent diameter 4-7 mm Length 10-24 mm.
195.	Sterile Lead free Radiation Protection Drape for use in cath lab, Lead equivalency should be at least 0.125 mm Pb and must be anti-toxicity certificate.
196.	Temporary Pacing Electrode catheter: Must be NBIH™ standard, Must have Soft-Tip Bipolar Electrode, size-6 French 125 cm
197.	Terumo guidewire 0.021" straight tip ,150 cm
198.	Thin struts Everolimus eluting coronary stent DCGI approved Everolimus eluting coronary stent with thin struts (50µm), all sizes.
199.	Thrombus Aspiration Catheter, preloaded stylet with soft, Short forward-facing tip design; 6F Compatible (Preferred make Medtronic, Cordis, Terumo)
200.	Transseptal puncture needle (Brockenbrough type), adult Stainless steel, 18 gauge shaft, 21 gauge tip, 71 cm length.

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201.	Ultrasound contrast agent for contrast echo, 2ml,
202.	Sirolimus coated coronary drug eluting balloon (all sizes)
203.	Balloon Mounted Monorail 0.014" Compatible Cobalt chromium renal Stent Diameter 4-7 mm Length 10-24 mm
204.	Balloon Mounted Monorail 0.014" Compatible Stainless Steel renal Stent Diameter 4-7 mm Length 10-24 mm
205.	Peripheral Stainless Steel Stent all sizes both OTW and monorail
206.	Platinum chromium base Sirolimus coated drug eluting coronary stent (All sizes & diameters)
207.	Platinum chromium base Zotarolimus coated drug eluting coronary stent (All sizes & diameters)
208.	PTCA pre-dilatation semi-compliant balloon for CTO PTCA pre-dilatation semi-compliant balloon with lowest tip entry profile of $\leq 0.017''$, lowest crossing profile for crossing CTO or difficult to cross lesions and smallest balloon size of 1.0/1.1 mm diameter and length of 6-8 mm with single marker at the center of the balloon. Other diameters of 1.2/1.25mm, 1.5mm, 15-18mm, 20-22mm, 25mm or more.
209.	PTCA Pre-dilatation, monorail balloon (semi compliant) Low entry profile ($\leq 0.017''$) and 5F guide catheter compatibility. Diameters (mm): 0.75, 1.0, 1.2/1.25, 1.5, 2.0, 2.5, 3, 3.5, 4.0. Length: minimum 6-8 mm to 20 mm or more.
210.	Stainless steel base Everolimus coated drug eluting coronary stent (All sizes & diameters)
211.	Stainless steel base Sirolimus coated drug eluting coronary stent (All sizes & diameters)
212.	Stainless steel base Zotarolimus coated drug eluting coronary stent (All sizes & diameters)
213.	ultra-low entry profile Semi Compliant Balloon with 0.40 mm or 0.016" and entry profile from 1.25*10 to 2.25*10 remains same for exceptional crossability even with higher diameter balloon.
214.	, PTCA pre-dilatation semi-compliant over the wire balloon with short balloon taper, low entry profile ($\leq 0.016''$). Diameter – 1.2/1.25, 1.5, 2.0, 2.5, 3.0 mm or more length – minimum 6-8 mm to 20 mm.
215.	Everolimus eluting stent with thin struts (50 μ m)
216.	Monorail based nitinol peripheral self-expanding stent all sizes.
217.	Peripheral Drug eluting balloon; All sizes, quote separately
218.	bare metal coronary stent (All sizes & Diameters)
219.	Valvuloplasty Balloon (Dumbell Shaped) Numed type, all sizes with accessories
220.	Valvuloplasty Balloon Tyshak Type 0.25 & 0.35 system
221.	<p>VVIR pacemaker with International standard warranty</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories • All single chamber modes and basic multi-programmable parameters with preferably autosensing and auto-capture/output management facilities. • Must have Ventricular Capture management. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology.

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	<ul style="list-style-type: none"> • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Model with International standard warranty (at least 7 years or more).
222.	<p>VVIR pacemaker with International standard warranty, 1.5 T MRI Conditional</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All single chamber modes and basic multi-programmable parameters with preferably autosensing and auto-capture/output management facilities. • Must have Ventricular Capture Management. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The Lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Should allow full body 1.5T MRI scan without any restriction zone with International standard warranty (atleast 7 years or more).
223.	<p>VVIR pacemaker with International standard warranty, 3 T MRI Conditional</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All single chamber modes and basic multi-programmable parameters with preferably autosensing and auto-capture/output management facilities. • Must have Ventricular Capture Management. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The Lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Should allow full body 3T MRI scan without any restriction zone with International standard warranty (atleast 7 years or more)
224.	<p>VVIR pacemaker with lifetime warranty</p> <ul style="list-style-type: none"> • pacemaker with lead & accessories. • All single chamber modes and basic multi-programmable parameters with preferably autosensing and auto-capture/output management facilities. • Must have Ventricular Capture Management. • Monitor the integrity of lead and switch polarity in case of issue. • The size of lead should be 7F or less. • The Lead must be steroid eluting and should be both bipolar and unipolar configuration. • Must have both active and passive fixation endocardial leads available. • Company must provide at least one programmer exclusively to the department of cardiology. • Company must provide its trained technical person for each implantation and for follow up programming whenever required. • Company must quote only the latest model of devices commercially available. • Model with International life time warranty.

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225.	<p>VVIR pacemaker with lifetime warranty, 1.5 T MRI Conditional</p> <ul style="list-style-type: none">• pacemaker with lead & accessories.• All single chamber modes and basic multi-programmable parameters with preferably autosensing and auto-capture/output management facilities.• Must have Ventricular Capture Management.• Monitor the integrity of lead and switch polarity in case of issue.• The size of lead should be 7F or less.• The Lead must be steroid eluting and should be both bipolar and unipolar configuration.• Must have both active and passive fixation endocardial leads available.• Company must provide at least one programmer exclusively to the department of cardiology.• Company must provide its trained technical person for each implantation and for follow up programming whenever required.• Company must quote only the latest model of devices commercially available.• Should allow full body 1.5T MRI scan without any restriction zone with Life time International warranty.
226.	<p>VVIR pacemaker with lifetime warranty, 3 T MRI Conditional</p> <ul style="list-style-type: none">• pacemaker with lead & accessories.• All single chamber modes and basic multi-programmable parameters with preferably autosensing and auto-capture/output management facilities.• Must have Ventricular Capture Management.• Monitor the integrity of lead and switch polarity in case of issue.• The size of lead should be 7F or less.• The Lead must be steroid eluting and should be both bipolar and unipolar configuration.• Must have both active and passive fixation endocardial leads available.• Company must provide at least one programmer exclusively to the department of cardiology.• Company must provide its trained technical person for each implantation and for follow up programming whenever required.• Company must quote only the latest model of devices commercially available.• Should allow full body 3T MRI scan without any restriction zone with Life time International warranty.
227.	Y-connector hemostatic valve with push-release mechanism
228.	Y-connector hemostatic valve with rotating mechanism

Note:

- 1. All Trauma Implants must be approved/certified as USFDA/EUCE with 4 digit notified number/BIS/CDSCO MD9. Certificates regarding the USFDA/EUCE/BIS/CDSCO MD9 specifically for the quoted items should be submitted/uploaded with the Tender Document.***
- 2. The Bidder/vendor/authorized vendor should be in existence from at least 3 years (proof must be provided) and have office/supply system in the radius of 1-2 Kms from GGS Medical Hospital, Faridkot and should be bound to supply the required implants 24/7 round the clock as and when required by the hospital for patients.***
- 3. The bidders may be called for Demo of their Implant material.***

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TERMS AND CONDITIONS

FOR SIGNING RATE CONTRACT FOR SUPPLY AND SIGNING RATE CONTRACT OF CARDIOLOGY MATERIAL FOR CARDIOLOGY DEPARTMENT AT GGS MEDICAL COLLEGE & HOSPITAL, FARIDKOT

ELIGIBILITY (TERMS & CONDITIONS)

- The sole manufacturers or their authorized agents/distributors may quote their rates.
 - In case of Authorized Supplier/Agency/Distributor, the Authorization Certificate as per the Format given at **Annexure-‘III’** should be attached.
 - In case the Tenderer is authorized dealer/supplier an undertaking/certificate issued by their Principle Manufacturer/Supplier that in case dealership/distributorship is withdrawn after supply then the Principle Manufacturer/Supplier will be responsible for supply of material till the expiry of Rate Contract (**Annexure – ‘IV’**).
1. This institution reserves the right to reject tenders/bids without assigning any reason and increase or decrease the quantity of the articles tendered.
 2. If the supply is not made within the stipulated period as and when required then late delivery charges @2% will be imposed on the total amount of Supply Order up to delay of 30 days and thereafter @ 4% for another 30 days.
 3. The firm/bidder should have been in existence for at- least three years and it should have turn of Rs.10.00 Crores/- or more per year and total of Rs.30.00 Crores or more in Last Three years.

Special Note: - The Bidder/vendor should be in existence from at least 3 years (proof must be provided) and have office/supply system in the radius of 1-2 Kms from GGS Medical Hospital, Faridkot and should be bound to supply the required implants 24/7 round the clock as and when required by the hospital for patients.

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Annexure-I

TECHNICAL BID COMPLIANCE STATEMENT

Name and Address of the applicant / firm _____

Specify whether Manufacturer/Dealer/Distributor: _____

Sr. No.	Particulars	Remarks
1.	Tender Fee of Rs. 2360/- through online	Yes/No
2.	Tender Processing Fee as per the Punjab Govt norms.	Yes/No
3.	Earnest Money of Rs. 10,80,000/- through online mode	Yes/No
4.	Technical Bid Compliance Proforma uploaded (Annexure-I).	Yes/No
5.	Whether an affidavit regarding Non-Black listing as per proforma given at Annexure-II duly attested by an Executive Magistrate or a Notary Public uploaded.	Yes/No
6.	In case the bidder is Authorized Supplier/Agency, the Authorization Certificate as per the Format given at Annexure-‘III’ uploaded.	Yes/No
7.	In case the Tenderer is Authorized Supplier/Agency, an undertaking/certificate issued by their Principal Manufacturer/Supplier that in case dealership/distributorship is withdrawn after supply then the Principal Manufacturer/Supplier will be responsible for supply of Implants Material material till the completion of Rate Contract (Annexure – ‘IV’) uploaded.	Yes/No
8.	Details of Bank Account for refund of EMD (Annexure – V) uploaded.	Yes/No
9.	Price Bid in the prescribed format (Annex – VI).	Yes/No
10.	Copy of Certificate of Registration for service Tax/TIN/TAN/PAN/ GST uploaded.	Yes/No
11.	A certificate from C.A. regarding Annual Turnover with Balance Sheet for the last 3 (three) financial years uploaded. (10 crores per year or 30 crores total for last three years for bidder and 50 crores per year or 150 crores total for last three years for OEM)	Yes/No
12.	Copy of the IT Returns for three financial years uploaded.	Yes/No
13.	Certified copy of Valid Drug License (required for items under Drug Act) To be uploaded.	Yes/No
14.	Certificate regarding USFDA/EUCE/BIS/CDSCO MD9 certified standard in quality	Yes/No
15.	Phone number	
16.	E-mail ID	

Signature & seal of bidder

Place:

Date :

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Annexure-II

(To be furnished on non-judicial stamp paper worth Rs.30/- duly attested by Executive Magistrate or Notary Public).

AFFIDAVIT

I/We _____ partner/sole
proprietor (Strike out which is not applicable) of (Name & Address of Firm)
_____do hereby declare and solemnly affirm:-

- a) That the individual/firm/ companies are **not debarred or black- listed** by any department of Union/ State Government or any autonomous institute.
- b) That no partner or shareholder, directly or indirectly connected with the applicant has been debarred or blacklisted by any department of Union Govt./State Govt./Autonomous Institute.
- c) And that the terms and conditions for signing Rate Contract for supply of Implants Material in the various departments at GGSMCH, Faridkot, are acceptable to me/us. I/We shall abide by them in letter and spirit.

Date:

Place:

DEPONENT

VERIFICATION

I/We do hereby solemnly declare and affirm that the above declarations are true and correct to the best of my/our knowledge and beliefs. No part of it is false and nothing has been concealed therein.

Date:

Place:

DEPONENT

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Cardiology department***

Annexure- 27

MANUFACTURER'S/PRINCIPAL'S AUTHORIZATION FORM

TO

The Registrar
Baba Farid University of Health Sciences,
Faridkot -151203

Ref. No.....

Dated:

**Sub: Authorization Certificate in favour of M/s..... for signing Rate
Contract for supply of Cardiology Implants Material for Cardiology department at GGS
Medical College & Hospital, Faridkot.**

We, M/s , who are established and reputable manufacturers
Implants Material having factory(ies) at and
....., hereby authorize
M/s.....(name and address) to bid, negotiate and conclude the
Tender formalities with you against Tender No..... for the signing Rate Contract for
supply of Cardiology Implants Material manufactured by us.

No company or firm or individual other than M/s..... are authorized to bid,
negotiate and conclude the tender formalities in regard to this business against this specific tender.

We, hereby extend our full guarantee and warranty as per the conditions of tender for the
goods offered for supply against this tender by the above firm.

Yours faithfully,

(Name)

For and on behalf of M/s.....
(name of manufacturer/Principal)

**Note: This letter should be signed by a person competent and having authority to sign on
behalf of manufacturer, and should be on manufacturer Letter Head.**

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Annexure - IV

UNDERTAKING BY MANUFACTURER'S/PRINCIPAL'S

TO

The Registrar
Baba Farid University of Health Sciences,
Faridkot -151203

Ref. No.....

Dated:

Sub: Undertaking for continued supply of Implants Material for Cardiology department

We, M/s....., who are established and reputable manufacturers of Cardio Implants Material have authorized M/s..... (name and address) to bid, negotiate and conclude the Tender formalities with you against Tender No..... for the signing Rate Contract for supply of Cardiology Implants Material.

Further, we undertake that in case dealership/distributorship is withdrawn after signing Rate Contract then we will be responsible for supply of Cardiology Implants Material till the expiry of Rate Contract.

Yours faithfully,

For and on behalf of M/s.....
(Name of manufacturer/Principal)

Note: This letter should be signed by a person competent and having authority to sign on behalf of manufacturer, and should be on manufacturer Letter Head.

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Annexure- V

Details of Bank Account of the firm who has deposited EMD

Name of the firm: _____

Sr. No.	Particulars	Detail
1.	Account No.	
2.	Name of Bank	
3.	Branch Name	
4.	IFSC Code of Bank	
5.	Name of Operator	

ANNEXURE - VI

PRICE BID

TO BE UPLOADED
IN EXCELL SHEET AVAILABLE ON THE E-PROCUREMENT PORTAL ONLY