NAME OF THE EQUIPMENT: Beds

#### PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Eastern Medical	M/s KASBN International	M/s Clinical Life	M/s Saarf Medical	M/s Delta Plus	M/s Popular International	M/s Sheikh Associates	M/s Mediserve	M/s Vertex Medical
1	Complete Package/Tender	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
6	Delivery Period	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee)

Sr. No.	Evaluation Parameters	M/s Eastern Medical	M/s KASBN International	M/s Clinical Life	M/s Saarf Medical	M/s Delta Plus	M/s Popular International	M/s Sheikh Associates	M/s Mediserve	M/s Vertex Medical
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES	YES	YES	YES	YES	YES	No Legal attested Authoriza tion	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	YES	YES	YES	YES	YES	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES	YES	YES	YES	YES	YES	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES	YES	YES	YES	YES	nce	No Past Performa nce Attached	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES	YES	YES	YES	YES	YES	YES
6	Compliance of Warranty as per tender	YES	YES	YES	YES	YES	YES	YES	YES	YES
	Remarks:	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III	Not Eligible for Part-III	Not Eligible for Part-III	Eligible for Part-III

#### PART – III

### **KNOCK DOWN CRITERIA - PRODUCT EVALUATION**

		SPEC	CIFICATION CO	OMPLIANCE /	EVALUATION		S			
Name of Equipment	COMPANY	M/s Eastern Medical	M/s KASBN International	M/s Clinical Life	M/s Saarf Medical	M/s Delta Plus	M/s Popular International	M/s Sheikh Associates	M/s Mediserve	M/s Vertex Medical
Beds	Manufacturer	Medisa Medical Ibrica	Indtrias Pardo	IMO Industrias	Linet	Proma Reha	Amno Bed	Malveseio	Gardhen Bilance	Arjo Huntleigh
	Model	Galaxy-2	Newcare V-2	Matrix E-30	Eleganza-2	Superta E	A-III- 020-00	Delta 4 (3700)	Alex Hospital	Enterprise 5000x
Country of Manufactur	er	Spain	Spain	Purtugal	Czech Republic	Czech Republic	Germany	Italy	Italy	Sweden
Country of Origin of Product/Model Number		Spain	Spain	Purtugal	Czech Republic	Czech Republic	Germany	Italy	Italy	Poland
Compliance with define	Compliance with defined quality standards		Yes	Yes	Yes	Yes	Yes	No (expired)	Yes	Yes

#### PART – III

### **KNOCK DOWN CRITERIA - PRODUCT EVALUATION**

	SPECIFICATION COMPLIANCE /EVALUATION PARAMETERS									
Name of Equipment	COMPANY	M/s Eastern Medical	M/s KASBN International	M/s Clinical Life	M/s Saarf Medical	M/s Delta Plus	M/s Popular International	M/s Sheikh Associates	M/s Mediserve	M/s Vertex Medical
Specification Complian	nce features wise:									
Specifications:			Yes	Yes	No (Demo Unit not Provided)	No (Demo Unit not Provided)	Yes	Yes	No (Electronic CPR and Central Brake not available)	No CPR available in provided Demo Unit
Technical Eligibility of F	Product:		Yes	Yes	No	No	Yes	No	No	No
Technical Eligibility of F	Firm:	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes
BID ST	TATUS:	Responsive	Responsive	Responsive	Non Responsive	Non Responsive	Responsive	Non Responsive	Non Responsive	Non Responsive

NAME OF THE EQUIPMENT: Blood Bank Refrigerator

PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s SU Enterprises	M/s Delta Plus	M/s Medibridge
1	Complete Package/Tender	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes
6	Delivery Period	elivery Period Yes		Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s SU Enterprises	M/s Delta Plus	M/s Medibridge
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES
6	Compliance of Warranty as per tender	YES	YES	YES
	Remarks:	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III

SP	ECIFICATION COMPLIANCE /EVAL	UATION PARAM	ETERS	
Name of Equipment	COMPANY	M/s SU Enterprises	M/s Delta Plus	M/s Medibridge
Blood Bank Refrigerator	Manufacturer	Arctiko	EverMed	Tekna Lab
	Model	BBR 500	BBR 530S x pro	4100NFP EMO
Country of Manufacturer		Denmark	Italy	Italy
Country of Origin of Product/Mo	del Number	Denmark	Italy	Italy
Compliance with defined quality	v standards	Yes	Yes	Yes
Specification Compliance featu	res wise:			
Specifications:		Yes	Yes	Yes
Technical Eligibility of Product:		Yes	Yes	Yes
Technical Eligibility of Firm:		Yes	Yes	Yes
BID	STATUS:	Responsive	Responsive	Responsive

NAME OF THE EQUIPMENT: CSSD

#### PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Total Technology	M/s Clinical Life	M/s Medline Technology	M/s Global Marketing Services	M/s Mediland Pakistan	M/s Vertex Medical
1	Complete Package/Tender	Yes	Yes	Yes	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes	Yes	Yes	Yes
6	Delivery Period	Yes	Yes	Yes	Yes	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

## PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee)

Sr. No.	Evaluation Parameters	M/s Total Technology	M/s Clinical Life	M/s Medline Technology	M/s Global Marketing Services	M/s Mediland Pakistan	M/s Vertex Medical
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES	YES	No (Leagal Attested Authorization)	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	No (Workshop facility not available in Punjab	YES	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES	YES	YES	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES	YES	YES	YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES	YES	YES	YES
6	Compliance of Warranty as per tender	YES	YES	YES	YES	YES	YES
	Remarks:	Eligible for Part- III	Eligible for Part- III	Not Eligible for Part-III	Not Eligible for Part-III	Eligible for Part- III	Eligible for Part- III

### PART – III KNOCK DOWN CRITERIA - PRODUCT EVALUATION

		SPECIFICATIO	ON COMPLIANCE /E	VALUATION PARA	METERS		
Name of Equipment COMPANY		M/s Total Technology	M/s Clinical Life	M/s Medline Technology	M/s Global Marketing Services	M/s Mediland Pakistan	M/s Vertex Medical
	Manufacturer	MMM Group	AJ Costa	Cisa	Steris	Getinge Group	Steelco
CSSD	Model	Selecto Mate PL6612-2 CL PL669-2CL Washer Model: Unicleane PL-II 15- 2	Amaro 5000AJE 7070130-2D GI 5000AJC 7070100- 1D GI Washer Model: IQ6 Kenhygene System Denmark	PS SV Washer Model: P-	AMSCO 600 EMEA8 STU ELEC STM GEN 2D AMSCO 600 EMEA 6 STU ELEC STM GEN 2D Washer Model: AMSCO 7053HP	SSS67 H13	VS8/2 VS6/1 Washer Model: DS1000
Country of Manufacture	er	Germany	Portugal	Italy	USA	Sweden EU	Italy
Country of Origin of Product/Model Number		Germany	Portugal	Italy	USA	Sweden EU	Italy
Compliance with define	Compliance with defined quality standards		Yes	Yes	Yes	Yes	Yes
Specification Compliar	nce features wise:						

Specifications:	No 1. The Capacity of Heavy Duty Steam Sterilizer is 6STU offered 2. Builtin Water Saving System in both sterilizers not offered 3. One Loading Trolley and One Loading Cart is offered each with hevy duty steam sterilizer instead of two 4. Medium Steam Sterilizer two door offered instead of single door.	Yes	Yes	No 1. Double Door Offered instead of Single Door in Medium Steam Sterilizer 2. Local UPS offered Instead of Same Manufacturer	Yes	Yes
Technical Eligibility of Product:	No	Yes	Yes	Yes	Yes	Yes
Technical Eligibility of Firm:	Yes	Yes	No	No	Yes	Yes
BID STATUS:	Non Responsive	Responsive	Non Responsive	Non Responsive	Responsive	Responsive

NAME OF THE EQUIPMENT: Defibrillator

PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Medical Equipment System	M/s Biotech Services
1	Complete Package/Tender	Yes	Yes
2	Original Receipt of Tender	Yes	Yes
3	Affidavit from Bidder	Yes	Yes
4	Bid Security	Yes	Yes
5	Bid Validity	Yes	Yes
6	Delivery Period	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s Medical Equipment System	M/s Biotech Services
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES
6	6 Compliance of Warranty as per tender		YES
	Remarks:	Eligible for Part-III	Eligible for Part-III

SPE	SPECIFICATION COMPLIANCE /EVALUATION PARAMETERS					
Name of Equipment	COMPANY	M/s Medical Equipment System	M/s Biotech Services			
Defibrillator	Manufacturer	Zoll Medical	Nihan Kohden			
	Model	M2	TEC 5631			
Country of Manufacturer		USA	Japan			
Country of Origin of Product/N	lodel Number	China	Japan			
Compliance with defined quali	ty standards		Yes			
Specification Compliance feat	ures wise:					
Specifications:		No (Boot time is high)	Yes			
Technical Eligibility of Product		No	Yes			
Technical Eligibility of Firm:		Yes	Yes			
BIDS	STATUS:	Non Responsive	Responsive			

NAME OF THE EQUIPMENT: ECG Machine

PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION) (To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Hospicare System	M/s Radiant Medical	M/s Biotech Services
1	Complete Package/Tender	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes
6	Delivery Period	Yes	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s Hospicare System	M/s Radiant Medical	M/s Biotech Services
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)		YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES
6	6 Compliance of Warranty as per tender		YES	YES
	Remarks:	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III

	SPECIFICATION COMI	PLIANCE /EVALUATIO	N PARAMETERS	
Name of Equipment	COMPANY	M/s Hospicare System M/s Radiant Medical		M/s Biotech Services
ECG Machine	Manufacturer	Cardio Line	Welchallyn	Nihon Kohden
	Model	100+	ELI-230	ECG 1250
Country of Manufactur	er	Italy	USA	Japan
Country of Origin of Pr	oduct/Model Number	Italy	USA	Japan
Compliance with define	ed quality standards	Yes	Yes	Yes
Specification Compliar	nce features wise:			
Specifications:		No (Builtin Power Supply not available)	Yes	Yes
Technical Eligibility of I	Product:	No	Yes	Yes
Technical Eligibility of I	Firm:	Yes	Yes	Yes
BIDS	STATUS:	Non Responsive	Responsive	Responsive

NAME OF THE EQUIPMENT: Electro Surgical Unit

#### PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Radiant Medical	M/s Mediland Pakistan	M/s Al-Basit Traders	M/s Popular International	M/s Vital Care
1	Complete Package/Tender	Yes	Yes	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes	Yes	Yes
6	Delivery Period	Yes	Yes	Yes	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

## PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee)

Sr. No.	Evaluation Parameters	M/s Radiant Medical	M/s Mediland Pakistan	M/s Al-Basit Traders	M/s Popular International	M/s Vital Care
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES	YES	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	YES	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES	YES	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES	YES	YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES	YES	YES
6	Compliance of Warranty as per tender	YES	YES	YES	YES	YES
	Remarks:		Eligible for Part-III	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III

### PART – III KNOCK DOWN CRITERIA - PRODUCT EVALUATION

	SPECIFICATION COMPLIANCE /EVALUATION PARAMETERS						
Name of Equipment	COMPANY	M/s Radiant Medical	M/s Mediland Pakistan	M/s Al-Basit Traders	M/s Popular International	M/s Vital Care	
Electro Surgical Unit	Manufacturer	Lamidey Noury	KLS Martin	ESSE-3	Medtronic/ Covidien	LED SPA	
	Model	SEAL	Maxium Smart C	ESS-400+	SS501 SX	Surtron 300HP	
Country of Manufacturer		France	Germany	Italy	Ireland	Italy	
Country of Origin of Product/Model Number		France	Germany	Italy	Switzerland	Italy	
Compliance with defined quality standards		Yes	Yes	Yes	Yes	Yes	

Specification Compliance features wise:					
Specifications:	Yes	Yes	No (Demo Unit not Provided)	Yes	Yes
Technical Eligibility of Product:	Yes	Yes	No	Yes	Yes
Technical Eligibility of Firm:	Yes	Yes	Yes	Yes	Yes
BID STATUS:	Responsive	Responsive	Not Responsive	Responsive	Responsive

NAME OF THE EQUIPMENT: Hypothermia

PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION) (To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Hospicare System	M/s Vertex Medical	M/s Mediland Pakistan
1	Complete Package/Tender	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes
6	Delivery Period	Yes	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s Hospicare System	M/s Vertex Medical	M/s Mediland Pakistan
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES	YES
4	Vendor Past performance (In case of unsatisfactory		YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES
6	Compliance of Warranty as per tender	YES	YES	YES
	Remarks:	Eligible for Part-III	Eligible for Part-III	Eligible for Part-III

	SPECIFICATION COM	IPLIANCE /EVALUATI	ON PARAMETERS	
Name of Equipment	COMPANY	M/s Hospicare System M/s Vertex Medical		M/s Mediland Pakistan
Hypothermia	Manufacturer	Genetherm (CSZ)	LivaNova	Gentinge Group
riypotrerinia	Model	Hemotherm CE (400CE)	Heater Cooler 3T	HCU 40
Country of Manufactur	er	USA	Italy	Germany
Country of Origin of Pr	oduct/Model Number	USA	Germany	Germany
Compliance with define	ed quality standards	Yes	No (FDA Recalls Open)	Yes
Specification Compliar	nce features wise:			
Specifications:		No (cardioplegia port not available)	No (FDA Recalls Open)	Yes
Technical Eligibility of Product:		No	No	Yes
Technical Eligibility of	Firm:	Yes	Yes	Yes
BID S	TATUS:	Non Responsive	Non Responsive	Responsive

NAME OF THE EQUIPMENT: Intra Aortic Balloon Pump

PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Sherizi Trading	M/s Mediland Pakistan
1	Complete Package/Tender	Yes	Yes
2	Original Receipt of Tender	Yes	Yes
3	Affidavit from Bidder	Yes	Yes
4	Bid Security	Yes	Yes
5	Bid Validity	Yes	Yes
6	Delivery Period	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s Sherizi Trading	M/s Mediland Pakistan
1	1 Exclusive Authorization / Sole Agent Certificate by Authorization / Sole Agent Certificate by Aut		YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	No Technical Trained Engineer	YES
3	Certificate from the Manufacturer about the after		YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	NO Satisfactory Report)	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES
6 Compliance of Warranty as per tender		YES	YES
	Remarks:	Not Eligible for Part- III	Eligible for Part-III

SPEC	SPECIFICATION COMPLIANCE /EVALUATION PARAMETERS				
Name of Equipment	COMPANY	M/s Sherizi Trading	M/s Mediland Pakistan		
Intra Aortic Balloon Pump	Manufacturer	Arrow	Getinge Group		
	Model	AC-3 Optimus	Cardio save hybrid		
Country of Manufacturer		USA	Sweden		
Country of Origin of Product/Mo	del Number	USA	USA		
Compliance with defined quality	standards	Yes	Yes		
Specification Compliance featur	es wise:				
Specifications:		No (No Automatic in Vivo Calibration, no control of deflation point in automatic mode)	Yes		
Technical Eligibility of Product:		No	Yes		
Technical Eligibility of Firm:		No	Yes		
BID STA	TUS:	Non Responsive	Responsive		

NAME OF THE EQUIPMENT: Mobile X-Ray

PART- I

**KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)** 

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Hoora Pharma
1	Complete Package/Tender	Yes
2	Original Receipt of Tender	Yes
3	Affidavit from Bidder	Yes
4	Bid Security	Yes
5	Bid Validity	Yes
6	Delivery Period	Yes
	Remarks:	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s Hoora Pharma	
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	
6	6 Compliance of Warranty as per tender		
	Remarks:		

SPECIFICATION COMPLIANCE /EVALUATION PARAMETERS				
Name of Equipment	COMPANY	M/s Hoora Pharma		
Mobile X-Ray	Manufacturer	Shimadzu		
	Model	Mobile art evolution MX 7Version		
Country of Manufacture	er	Japan		
Country of Origin of Pre	oduct/Model Number	Japan		
Compliance with define	ed quality standards	No (FDA 510K)		
Specification Complian	nce features wise:			
Specifications:		No (FDA 510K)		
Technical Eligibility of I	Product:	NO		
Technical Eligibility of F	Firm:	Yes		
E	BID STATUS:	No Responsive		

NAME OF THE EQUIPMENT: Syringe Pump

PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Iqbal & Co.	M/s Medical Eduipment System	M/s Human Healthcare
1	Complete Package/Tender	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes
6	Delivery Period	Yes	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s Iqbal & Co.	M/s Medical Eduipment System	M/s Human Healthcare
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES	NO Legal attested Authorizati on
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	YES
3	Certificate from the Manufacturer about the after		YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES
6	Compliance of Warranty as per tender	YES	YES	YES
	Remarks:	Eligible for Part-III	Eligible for Part-III	Not Eligible for Part-III

SPECIF	ICATION COMPLIANCE	E /EVALUATIC	ON PARAMETE	ERS
Name of Equipment	COMPANY	M/s Iqbal & Co.	M/s Medical Eduipment System	M/s Human Healthcare
Syringe Pump	Manufacturer	BD, Care fusion	Fresinius Kabi	Medicinos Gija uab
	Model	Alaris GH Plus	Infusia SP-7s	Medifusion SP
Country of Manufacturer		Switzerland	Germany	Lithuania
Country of Origin of Pr	oduct/Model Number	EU	China	Lithuania
Compliance with define	ed quality standards	Yes	Yes	No (Discrepancy in CE)
Specification Compliar				
Specifications:		Yes	Yes	
Technical Eligibility of I	Technical Eligibility of Product:			No
Technical Eligibility of I	Firm:	Yes	Yes	No
BID ST	TATUS:	Responsive	Responsive	Non Responsive

NAME OF THE EQUIPMENT: Ultrasonic Nebulizer

PART- I

**KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)** 

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Medimpex	M/s Sial Traders
1	Complete Package/Tender	Yes	Yes
2	Original Receipt of Tender	Yes	Yes
3	Affidavit from Bidder	Yes	Yes
4	Bid Security	Yes	Yes
5	Bid Validity	Yes	Yes
6	Delivery Period	Yes	Yes
	Remarks:	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee) (All evaluation parameters defined below are mandatory for compliance.)

Sr. No.	Evaluation Parameters	M/s Medimpex	M/s Sial Traders
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES
6 Compliance of Warranty as per tender		YES	YES
	Remarks:	Eligible for Part-III	Eligible for Part- III

SPECIFIC				
Name of Equipment COMPANY		M/s Medimpex	M/s Sial Traders	
Ultrasonic Nebulizer	Manufacturer	Koushin Industries	Prizma GmbH	
	Model	Comfort 3000 KU-500	Profisonic	
Country of Manufacturer		Japan	Germany	
Country of Origin of Pr	oduct/Model Number	Japan	Germany	
Compliance with define	ed quality standards	Yes	Yes	
Specification Compliar	nce features wise:			
Specifications:		Yes	Yes	
Technical Eligibility of Product:		Yes	Yes	
Technical Eligibility of I		Yes	Yes	
BID S	TATUS:	Responsive	Responsive	

NAME OF THE EQUIPMENT: Ventilator

#### PART- I

KNOCK DOWN CRITERIA - (COMMERCIAL EVALUATION)

(To be evaluated by Purchase Department)

Sr. No.	Evaluation Parameters	M/s Mediserves	M/s Cares worth	M/s Eastern Medical	M/s Diginocis	M/s Shirazi Trading	M/s Noor International
1	Complete Package/Tender	Yes	Yes	Yes	Yes	Yes	Yes
2	Original Receipt of Tender	Yes	Yes	Yes	Yes	Yes	Yes
3	Affidavit from Bidder	Yes	Yes	Yes	Yes	Yes	Yes
4	Bid Security	Yes	Yes	Yes	Yes	Yes	Yes
5	Bid Validity	Yes	Yes	Yes	Yes	Yes	Yes
6	Delivery Period	Yes	Yes	Yes	Yes	Yes	Yes
Remarks:		Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II	Eligible for Part-II

### PART- II KNOCK DOWN CRITERIA - (VENDOR EVALUATION) (To be evaluated by Technical Evaluation Committee)

Sr. No.	Evaluation Parameters	M/s Mediserves	M/s Cares worth	M/s Eastern Medical	M/s Diginocis	M/s Shirazi Trading	M/s Noor International
1	Exclusive Authorization / Sole Agent Certificate by the Manufacturer	No (Legal Attested Authorization not provided)	No (Legal Attested Authorization not provided)	YES	YES	YES	YES
2	Technical & Engineering capability(As defined for the specific tender in specifications)	YES	YES	YES	YES	YES	YES
3	Certificate from the Manufacturer about the after sales services through agent or itself (In case specifically demanded in the specifications)	YES	YES	YES	YES	YES	YES
4	Vendor Past performance (In case of unsatisfactory performance, details must be mentioned)	YES	YES	YES	YES	YES	YES
5	Availability of relevant Tools and Testing / Calibration Equipment	YES	YES	YES	YES	YES	YES
6	Compliance of Warranty as per tender	YES	YES	YES	YES	YES	YES
	Remarks:		Not Eligible for Part-III	Eligible for Part- III	Eligible for Part- III	Eligible for Part- III	Eligible for Part- III

#### PART – III

#### **KNOCK DOWN CRITERIA - PRODUCT EVALUATION**

SPECIFICATION COMPLIANCE /EVALUATION PARAMETERS								
Name of Equipment	lame of Equipment COMPANY		M/s Cares worth	M/s Eastern Medical	M/s Diginocis	M/s Shirazi Trading	M/s Noor International	
Ventilator	Manufacturer	Heyer Medical	Atlanta Medical	E Vent Medical	Getinge	GE Healthcare	Hamilton Medical	
	Model	Iternis ADB	Diomede	eVolution 3e Essential	Servo-i	Carescape R-860	Hamilton G5	
Country of Manufacturer		Germany	UK	USA	Sweden	USA	Switzerland	
Country of Origin of Product/Model Number		China	UK	USA	Sweden	USA	Switzerland	
Compliance with defined quality standards		No (single Certified)		No (FDA 510K)	Yes	Yes	Yes	
Specification Compliance features wise:								
Specifications:		No (single Certified)	No (Demo Unit not Provided)	No (Attached FDA 510K is for model eVolution 3e ventilator, however quoted model is eVolution 3e Essential)	Yes	Yes	Yes	
Technical Eligibility of Product:		No	No	No	Yes	Yes	Yes	
Technical Eligibility of Firm:		No	No	Yes	Yes	Yes	Yes	
BID STATUS:		Non Responsive	Non Responsive	Non Responsive	Responsive	Responsive	Responsive	