SAST/CLPC/ACU-BGSMCH/ 159 /2025-26 Date: 26-11-2025

TENDER NOTIFICATION

The Head, CLPC, Sri Adichunchanagiri Shikshana Trust invites closed tenders from eligible tenderers or bonafide licensed manufacturer (OEM) or their authorized local supplier/ dealer/ distributor in the state of Karnataka for the **Procurement of MRI Machine at BGS MCH Hospital, Nagarur, Nelamangala.** as per section I & II.

01	Name of the work	**Procurement of MRI Machine at BGS MCH Hospital, Nagarur, Nelamangala**
02	Last Date for Tender Submission	On or before 12.12.2025 before 5.30 PM

Section-1

Instructions to Tenderers

1) The Tenderer shall submit the bids (Technical & Financial bids) through the mail id: **clpchead@bgscet.ac.in** on or before the last date of tender submission (for any or all list of items) on professional business letterheads only. The details to be printed on the letter head is as follows
   i) Tender for Procurement of MRI Machine at BGS MCH Hospital, Nagarur, Nelamangala.
   ii) Tender Reference number.....[Insert Number]
   iii) Address to ""The HEAD, CLPC, Sri Adichunchanagiri Shikshana Trust, BGSCET Campus, Mahalakshmipuram, Bengaluru – 560086"
   iv) The tenderer shall submit the original documents to this office on the last day of submission for verification who prefers to submit the tender through Post can dispatch the same through Registered post / Speed post or Couriers as to reach the above address on or before the due date and time specified in the Tender Notice. Tenders received after the due date and time, for what so ever reasons will not be considered and the authority, Head of CLPC will not be liable or responsible for the same.
2) **Tender Currency:** Prices shall be quoted in Indian Rupees only.
3) **AMC/CMC (IF ANY)** is subject to the Sri Adichunchanagiri shikshana trust's norms.
4) **Warranty:** 3 years.
5) **Amendment of tender documents:** At any time prior to the deadline of submission of tenders the trust may, for no reason, whether as its own initiative or otherwise modify the tender documents by amendment. Sri Adichunchanagiri Shikshana Trust reserves all the rights to accept, reject, incorporate changes and re-tender without giving any reasons.

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6) **Documents Comprising the Tender:** Shall attach Brochure, Certification of the product, Bank/account details, PAN, GSTIN, Good Standing Certificate and 02 years of ITR declaration inside the envelope and the company contact details with email id on the in the below mention format in annexure - 1.
7) **Tender Prices:** Prices indicated on the price schedule shall be entered separately I.e. the price of the goods, quoted (ex-works, ex-factory, ex-showroom, ex-warehouse, or off-the-shelf, as applicable), including all duties and sales and the other taxes already paid or payable. Any Indian duties, sales and other taxes which will be payable on the goods if the contract is awarded. Conditional tenders will not be considered. The bidder has to give the quotation in the below enclosed format in annexure – 2.
8) **Validity of the Bid:** 90 days from the last date of submission of bid.
9) **Corrupt or Fraudulent practices:** Sri Adichunchanagiri Shikshana Trust requires that the tenderers, observe the highest standard of ethics during the procurement and execution of such contracts. In purchase of this policy:
   a) Will reject a proposal for award if it determines the tenderer recommended for award has engaged in corrupt or fraudulent practices in competing for the contract in question;
   b) Will declare a firm ineligible, either indefinitely or for the stated period of time, to be awarded a university contract if it any time determines that the firm has engaged in corrupt or fraudulent practices in competing for, or in executing, a trust contract.
10) **Process to be confidential:** Information relating to the examination, clarification, evaluation, and comparison of tenders and recommendations for the award of contract will not be disclosed to tenderers or any other persons not officially concerned with such process until the award to the successful tenderer has been announced. Any effort by a tenderer to influence the employer's processing of tenders or award decisions may result in rejection of his tender.
11) **Clarification of Tenders:** To assist in the examination, evaluation, and comparison of tenders the employer may, at his discretion, ask and tenderer for clarification of his tender, including breakdowns of unit rates. The request for clarification and the response shall be writing or by cable, but no change in the price or substance of the tender shall be sought, offered, or permitted except as required to confirm the correction of arithmetic errors discovered by the employers in the evaluation of the tenders.
12) **Delivery:** The successful BIDDER should commence the service as per the tender document/work or purchase order. For any queries or assistance, please write to clpchead@bgscet.ac.in or telephone to +91-8123707324.
13) **Penalty Clause:** Non-execution of supply order – for the reasons of failure to supply partially or completely within the stipulated time or any event of breach of contract. In case at any following stages
   a) For the delayed supply (3 days of grace period) – 5% deduction
   b) Quantity issues – 5 % deduction
   c) Quality issues – 10% deduction

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Section-2

Technical Specification

SL. No	Particulars	Total Quantity in Nos.
1.	MRI	1

	Technical Specification of MRI 3.0 T and 1.5 T. – Quotations to be mentioned separately
	Whole body 3.0 Tesla Magnetic Resonance Imaging system optimized for higher performance in cardiac and neurological examinations with short superconducting magnet, high performance gradients and digital Radio frequency system. The system should preferably have 32 channels RF system. The system should be totally new and should not contain refurbished or having recycled items. Silent scanning (noise level <80dB) to be enabled as standard
	The model should be the latest and launching date should be specified. The undertaking should be submitted from the manufacturer for the same.
1	**MAGNET**
a	3.0T active shielded super conductive magnet with best homogeneity. Field stability over time should be < or equal to 0.2 ppm/hr
b	Length should be short with 70cm bore diameter.
c	It should have facilities of better illumination ventilation and designed to avoid patient claustrophobia.
d	The homogeneity of the magnet should be mentioned in relation to 10, 20, 30, 40 cm DSV. Automatic shimming in phantom should be better than 3.5ppm in 40 DSV.
e	Please specify upto what FOV gradient linearity is maintained.
f	Magnet should be shielded from external interferences. Smaller fringe field preferred 5 Gauss and 10 Gauss Line in X, Y, Z axis specify yours Quote value for 5 gauss and 10 gauss line. The 5 Gauss line will have to be marked.
g	Cryogen vessel to be of Helium only with appropriate super thermal shielding and refrigeration facility for minimum Helium boil-off, Specify the Helium tank capacity and boil-off rate.
h	Helium level monitoring equipment in the magnet and facility for appropriate quick shutdown of the magnet in the event of emergency
i	Helium refill time should not be not less than 2years. Please mention the helium refill time.
j	Noise level inside the examination room should be minimum as possible.

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	Specify db level
k	The vendor should quote model with physiological signal display on gantry if available
l	Built - in 2 way Intercom facility to communicate with patient is required
m	Emergency helium release button should be provided at least in two places [inside MR examination room and console room]
2	**Shim system**
a	High performance and highly stable shim system with global and localized manual and auto-shimming for high homogeneity magnetic field for imaging. Specify time for shimming. Quote the number of shim coil used
b	Off-centre shimming should be possible. System must have Second order/high order shimmming.
c	Auto shim (global and voxel shim) should take minimum time to shim the magnet with patient in position.
3	**Gradient system**
a	Activity shielded Gradient System with strength of 35 mT/m or more at slew rate of 200T/m/sec for 3T MRI to be achieved simultaneously for the same FOV & preferably low linearity. The rise time should not be more than 225 micro second to reach the maximum gradient strength. Activity shielded Gradient System with strength of 25 mT/m or more at slew rate of 100T/m/sec or more for 1.5T MRI to be achieved simultaneously for the same FOV & preferably low linearity. The rise time should not be more than 225 micro second to reach the maximum gradient strength **SPECIFY the actual and effective gradient and slew rate values offered for 3T and 1.5T separately.**
b	These true slew rates should be available in each axis independently, for overall better duty cycle performance of the gradient.
c	The duty cycle should be 100 percent.
d	The Gradient system should have provision for eddy current compensation. Mention level of Eddy current compensation in %
e	Field of View should be at least 45 cm in all three axes.
f	Minimum TE & TR in 2D/3D should be specified in relation to the sequences.
g	Minimum Slice Thickness in 2D & 3D should be specified in relation to the sequences.
h	Echo Train length in both Spin echo and Gradient Echo should be at least 255 or more.
i	The measurement matrix should be from 128x128 to 1024x1024 in both 2D and 3D imaging as well.
4	**RF system**

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a	A fully digital RF system capable of transmitting power of at least 15 KW or more. Suitable technique should be provided for better B1 homogeneity.
b	It should also have at least minimum of 32 independent ADC or channel independent hardware RF channels with each having bandwidth of 1MHz or more along with necessary hardware to support Quadrature/CP array coils.
c	It should support Parallel acquisition techniques like ASSET/SENSE/iPAT with a factor of at least 4
d	SAR limits should be as per FDA guidelines for all protiocos including neuro and abdominal angiogram.
5	**RF Coils**
	The system body Coil integrated to the magnet must be quadrature /CP. In addition to this coil, following Coils (preferably be with equal number of elements as the channels) be quoted. RF coils in addition to main body coil (Transmit / Receive or receive coils) auto tune, array or no tune coils. Coils for the following applications should be available with the system. Circular polarized (CP) Array coils should included in the offer. Coil / RF design should support compatibility to coils manufactured by other manufacturers. Please specify the measures taken to prevent dielectric artifacts. (Quadrature design & EPI compatible) in addition to main body coil. All array coils should be compatible with parallel imaging techniques. Please specify the number of channels and elements available for each coil. Please mention the true acceleration factor for each of the array coils.
a	Preferably 32 channels or more head coil-capable of multi frequency MR spectroscopy (1H).
b	Please specify the number of channels for the coils quoted.
c	Neurovascular coil of 16 channels or more
d	Spine phased array coil preferrably 32 channel or more acquisition with single or combination of coils. (If more than one coil offered against this point, the offered coils will not be considered against any other applications)
e	Body phased array coils preferrably32 channels of more (single or in combination) at least 45 cm z-axis coverage for imaging of abdomen, with at least 32 channels acquisition for body parts.
f	Dedicated coil/coil combination for peripheral angiography of 32 or more channel with coverage of 80cm or more. Dedicated coil if available with vendor should be quoted. If not available, original product datasheet and an undertaking from OEM should be submitted
g	Suitable Carotid coil
h	Breast coil 16 channel or more .

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i	Shoulder coil: a. Dedicated Shoulder coil – 16 channel or more- 1 No b. flex coils – 2nos. (One large and one small) i. Shoulder coil: Flex coils (Small) - 4 Channel or more ii. Shoulder coil: Flex coils (Large) - 8 Channel or more OR multipurpose coil of 16 channel or more.
j	High resolution knee coil 16 channels or more.
k	High resolution foot/ ankle coil – 8 channels or more.
5.a	The supplier should quote coils or their combinations exclusively for each application. The number of coils should be as per the BOQ . It should be mentioned as independent coils and not having overlapping applications.
5.b	The bidder should provide line wise break-up for offered number and name/model of the coil against each coil specified in the technical specification & BOQ.
6	**Patient Table**
a	The table should be fully motorized, MRI Compatible computer controlled table movement in vertical and horizontal directions Position accuracy should be +/- 1.0 mm or better.
b	Should be able to take at least 140 kg load.
c	The table should have facility for manual traction in case of emergency.
d	Cushions and other patient comfort accessories. All parts of the table should be protected from liquid spill
e	The table should have patient hand-held alarm system.
f	The table should deliver the protocols for automatic bolus chasing in peripheral angio with automatic table movement.
7	**COMPUTER SYSTEM IMAGE PROCESSOR / OPERATOR CONSOLE**
a	Computer should be latest in the industry, fast and efficient
b	One colour console for acquisition, all calculations, post processing etc Console must have full colour with user define protocols with programmable inter scan delay. Necessary image processor with large RAM for ultra-fast image reconstruction should be provided It should be at least 32 GB RAM.
c	Computational Speed to match the single shot Echo Planar Imaging (EPI). Interactive angiogram, multi-planar three dimensional (3D) reconstruction, surface rendering, dynamic Imaging, vascular Imaging/angiography.Functional imaging, DTI etc. The main host computer should have at least 18-inch or more TFT/LCD type colour monitor.
d	The main console should have integrated facility for music system for the

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	patient in the magnet room or dedicated music system should be supplied, if the main console does not have integrated facility for music system
e	Filming and adequate storage for images and other applications .
f	Total hard disk memory to be sufficient to store at least 250,000 images of 256 x 256 matrix data size.. Systems offering higher' storage will be preferred. The system should have CD/DVD archiving facility on the main console and work station.
g	DVD write/CD Read/Rewrite drive for writing of images, spectra and raw data along with the necessary software for reading the Images and spectra on DVD/CD storing capabilities. Provision for archival of k-space data and raw (unprocessed) images.
h	There should be a provision of retrieval of the reconstruction data (raw files) in an user friendly manner.
i	DICOM interface to hook DICOM dry/laser camera capable of storing printing 1024 x 1024 matrix size images at least in 16 format without loss of digital resolution.
j	The system should be capable to connect to PACS through RIS/HIS at no extra cost. Highest version of DICOM connectivity to be provided.
8	**Workstation**
1	One server with 2 node with concurrent licenses to be supplied with the system. Licenses: 2 nos Concurrent license here implies the capability to process all the loaded software to be accessible and usable on all the systems simultaneously without any processing delay. The software should also include a reputed antivirus software of a perpetual type or renewed by the supplier. Hardware: Node: The vendor has to supply the hardware in the form of CPU and Medical grade monitor 18" or more of 2MP resolution. Hardware Server: The server (single/dual configuration) should have image storage capacity of at least 10 TB (internal/external) minimum 20,000 concurrent slice processing power and at least 128 GB RAM. The server hardware to be included with 21" or more FT/LCD monitor with dual processor. DICOM 3.0 compatibility and interfacing with other modalities must be possible. The workstation shall have the resolution, software and all functionality of a stand-alone workstation. The workstation should be VNA and integrate with the existing PACS. The work station should enable printing in laser film camera and color printer.
2	All necessary software including post-processing software for all offered applications including evaluation for fMRI, perfusion (ASL, T1 perfusion and T2* perfusion), diffusion, DTI with fibre tracking, cardiac evaluation, and other associated post processing like MIP, MPR, surface reconstruction should be provided.
	The workstation should have the following features:

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	a. Cardiac perfusion analysis, quantitative T1 mapping, with colour metabolite mapping, quantification of the CSF flow data.
	Details of the software offered as a standard and those with additional cost should be clearly specified.
	b. Image Fusion software should be provided for Inter-modality and Intra-modality fusion.
	c. Software for vascular properties like IAUC, KEP as standard.
	d. DSA images should be viewable in Subtraction mode.
	e. Necessary and adequate hardware and software for sending and receiving the patient data {text + images}. Printing of films should be possible from both main console and workstation.
	f. Workstation should also be able to function independent of the main console. Post processing of the MRS data including for CSI with paramagnetic metabolic mapping
	g. Capability to calculate colour display of real MTT, real CBV, and real CBF
	h. Compatibility with data from other MRI system for post processing.
	i. Output in the form of jpeg, avi / equivalent formats should be possible.
	Cardiac Package should be offered: The workstation should have display of Cardiac cine images in movie mode with rapid avi creation and should have comprehensive cardiac post processing software including for coronary MRA with regular free upgrades in future. **Calculation of ventricular area and volume, stroke volume, ejection fraction and relative ejection fraction, Time volume diagram generation, filling rates and myocardial wall motion, Graphic display of output calculation of flow and velocity parameter with colour coded display of velocity parameters.** 3D myocardial tagging should be possible.
	Cartilage mapping should be quoted as standard
	Myocardial Mapping (T1 & T2, T2* Map) should be provided as standard.
9	**Data Acquisition**
a	The system should be capable of 2D and 3D acquisitions in conventional, fast & ultra-fast spin echo and gradient echo modes so that real- time online images can be observed if needed.
b	2D multi-slice imaging should be possible in all planes (axial, sagiltal, coronal, oblique arid double oblique).
c	Minimum 512 x 512 matrix acquisition for all applications.
d	Half Fourier or other techniques to reduce scan acquisition time while maintaining adequate SNR
e	3D volume, multiple contiguous slabs, multiple interleaved and multiple overlapping slabs

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f	Slice thickness in 2D and partition in 3D to be freely selectable
g	Dynamic acquisition (serial imaging) with capability to initiate scan sequences either from the magnet panel or from the console.
h	Dynamic acquisition number of repeat scans with delay time either identical time interval or selectable.
i	Auto slices positioning from the localizer images.
j	Maximum -off centre positioning both anterior-posterior and lateral direction and should be selectable.
k	Gating: physiological signals like ECG, pulse, respiratory, external signal triggering (interface for triggering input pulse from external source).
l	Simultaneous acquisition, processing and display of image data in 2D multi-slice mode.
m	Selection of voxel from oblique slices should be possible while doing spectroscopy.
n	The application software for image smoothing and edge sharpness etc. for improvement in image resolution should be quoted.
o	Artifact reduction/motion correction techniques/imaging enhancement/image filtering/image subtraction/addition multiplication/division techniques:
p	Flow 1st and 2nd order flow artifact compensation.
q	Presentation slabs: a number of relocatable saturation bands to be placed either inside or outside the region of interest.
r	Magnetization transfer saturation: Off resonance RF pulses to suppress signals from stationary tissue in FOV phase contrast capability in 2D & 3D mode.
s	Breath Hold Acquisition for Cardiac and Abdominal Imaging must be possible.
t	Fat saturation techniques: frequency selective RF pulses to suppress fat signal in the measured image FO. ROI selective (regional) fat suppression should also be given.
u	Magnetization transfer saturation; OFF-resonance RF pulses to suppress signals from stationary issue in FOV.
v	Phase contrast capability in 2D and 3D mode.
w	Image intensity correction.
x	Breath hold acquisition
10	**EPI mode**
	a. Single and multi shot EPI imaging techniques. Best Diffusion technique available to be offered, which should remove all the susceptibility artefacts
	b. Data acquisition in all three standard planes (axial, sagittal coronal) and oblique and double oblique planes

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	c. Multi-coil acquisition in order to optimize throughput increase and increased effective FOV. Individual acquisition of every coil should be mentioned.
	d. Higher matrix acquisition capability in single shot EPI, Acquisition time, TR TE and slice thickness should be clearly mentioned and supported by data sheet reference.
	e. BOLD, SWI, T2 Perfusion (with all post processing licences as standard)
	f. Complete Functional MRI of Brain package as standard. 32" size or more LCD/LED based FMRI sytem should be provided.
	Deleted
	g. Susceptibility-weighted Phase Imaging to differentiate calcification & haemorrhage.
11	**Imaging sequences**
	a. The system should be capable of selecting TR and TEs as per requirement in majority of the pulse sequences.
	b. Spin echo (SE); multi-slice single echo, multislice multi- echo(B echo or more) with minimum TR and TE.SE with symmetrical and asymmetrical echo intervals: MT-SE imaging sequence. Compress Sensing & Simultaneous Multislice Imaging should be available
	c. Inversion recovery (IR) including short TI, modified IRSE, FLAIR, DIR (Double Inversion Recovery) MT and FLAIR.
	d. Gradient echo (GE) 3D gradient echo with shortest TR and TE, free choice of flip angle selection while maintaining SNR
	Fast sequences
	a. Fast spin echo in 2D and 3D mode TI, T2 and PD contrast capable of acquiring maximum number of slices with a given TR a minimum TE. echo train should be at least 128 or more in fast spin echo mode.
	b. Half Fourier acquisition capabilities should be available with/ without diffusion gradients and in combination with fast spin echo.
	c. Fast inversion recovery with spin echo.
	d. Fast gradient spin echo, IR multi-slice multi-echo mode with maximum turbo factor Sequences should incorporate RF focusing to acquire ultra fast gradient spin echo.
	e. Fast gradient echo sequence should be provided to acquire images in ultra-fast 2D and 3D mode.
	f. Fat and water suppressed imaging sequences including the sequence which should give 4 contrast (in phase, opposed phase. FAT and Water) images in a single acquisition to be quoted as standard. EPI optimized sequences for T1, T2, PD imaging. perfusion, regular diffusion values {5b, 3 directions),

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	EPI-FLAIR. CPI-IR, IPI-FLAIR diffusion tensor. EP1-MT-FLAIR, tensor diffusion (5b values in minimum in six directions) for diffusion studies. Suitable artifact/fat suppression techniques to be incorporated in the sequence to have optimum image quality. There should be capability of generation of ADC map (isotropic and anisotropy from the regular diffusion and tensor data). Facility of online generation of ADC map should be there. Optimized sequence package for special applications. Small focus DWI should be standard
	g. MR angio; 2D/3D TOF, 2D/3D Phase contrast (with and without gating) magnetization transfer saturation, black blood angiography for cerebral, pulmonary, abdominal and peripheral vessel For peripheral angio moving table angiography should be offered so that complete limb can be examined in one go Bolus tracking software package should be offered. Sequences for breath hold angiography with contrast enchainment should also be offered.
	h. NON Contrast Angiography like Native, Inhance, Trance for whole body applications to be quoted as standard.
	i. Contrast bolus tracking (including single shot whole body MRA, interactive and automatic, etc.
	J1. The system should have the Hydrogen, Single Voxel spectroscopy, Multivoxel, multislice 2D, 3D Spectroscopy and also the Chemical shift imaging in 2D/3D. The complete processing / post- processing software including colour metabolite maps should be available. J2. Full comprehensive cardiac sequences which includes, (a) MR cardiology package for evaluation of heart in long and short axis with black blood cardiac imaging, (b) package for- prospective and retrospective gating, etc. Advanced Cardiac Applications: morphology, wall motion, perfusion imaging myocardial viability imaging, Myocardial tagging, Cardiac functions including EF, ED/ES volume, Cardiac output, and wall thickness. This processing can be in workstation and console. Spectroscopy package should be available for brain, liver, prostate and breast)
	k. Sequence package for diffusion study including DTI (tractography) in organs like brain.
	l. Perfusion study in organ systems like kidney, brain, heart etc. Evaluation package for calculating CBV, CBF, MTT, perfusion map etc. Post processing of perfusion should be available in console also.
	m. Sequences for MRI imaging of joints with Metal implants like WARP/Maverick/SEMAC equivalent should be offered
	e. Full Perfusion imaging with necessary post processing with time

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	intensity graph and other statistical parameters
	f. Flow quantification and evaluation for vascular (high and low). CSF, bladder outlet and cine display Full Fledged Advanced Functional MRI: Whole brain coverage using high temporal resolution T2* - weighted BOLD) imaging Single-shot EP1 for multi-slice imaging. Complete fMRI processing software, Automatic real-time processing of functional BOLD MR data sets into functional activation map should be offered.
	g. Full post processing for SVS, CSI, metabolic mapping with colour coding for BRAIN, BREAST , LIVER & PROSTRATE.
	h. Image statistics: measurement of distance, area, volume (2D and 3D), angle, SD, mean, image addition subtraction, multiplication, division, interpolation, segmental, threshold, histogram (ROC) Evaluation features like zoom, rotation, scroll, image synthesis, multi point T1 and T2 calculation (more than 8) window searching, text dialogues graphics. Sorting, searching, archiving, recalling, etc.
	The CCTV system with LCD display to observe the patient. Two-way communication should be possible with the patient from the console room
14	**Additional Points**
	Silent / Quiet MRI: Sequences with gradient wave modification for extremely quiet imaging without compromise on slew rate or peak amplitude or acquisition time should be offered.
	Technology to automatically detect breathing triggered scans as soon as the patient lies on the table for simplified workflow and minimize user interaction for respiratory sensor or vital eye to be offered.
a	Sequence optimization using compressed sensing/Hyper Sense/Compressed Sense technique should be offered in Neuro, body, cardiac & MSK imaging for all sequence **2D/3D** Scans.
b	Multi-slice Simultaneous Sequence to provide Better image quality in EPI. Multi-slice Simultaneous Sequence should be offered in TSE sequence, if available.
c	Sequence to provide IRON and FAT quantification.
d	Deep learning based image reconstruction to speed up the acquisition/ post processing and reporting if any should be specified.
15	**UPS**
	The system should be provided with the suitable UPS system for the complete system (MR + accessories except Chiller) with at least 30 minutes back up.

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16	**DOCUMENTATION**
	a. The dry imager system should have digital DICOM 3.0 dry chemistry camera with resolution of 16 bits/ 500 dpi or more. The system must have at least three online film sizes, and should be capable to print on any of the 8 x 10, 10 x 12, 14 x 17 sizes. The system should be freely configurable by the user, to use any of the above mentioned size. should be suplied with 500 films of each size.
	b. A colour laser printer for printing colour images and protocols on plane in 1200 dpi resolution and more than 20 ppm
17	**ACCESSORIES**
	1. Storage cabinet for all coils
	2. MRI Compatible Dual Syringe Pressure injector : Independent dual-Syringe Pressure injector with following Features; Non-ferrous, automatic syringe size detection, performs single and dual phase contrast injections, provides Saline flush delivery and allows timed contrast delivery Must be compatible with 5, 7.5 &10ml pre-filled contrast syringes and 50 ml syringes for both saline & contrast (20 Nos of 50 ml Syringes with 100 nos. of tube connectors should be provided) Must be able to observe progress of injection and view injection result
	3. MRI Compatible ECG electrodes (100 no.s Disposable Electrodes for MRI Image gating)
	5. MRI Compatible (upto 3 Tesla) Anaesthesia Machine with atleast 8 inch screen and integrated electronic ventilator, 2 vaporiser, inbuilt suction circle absorber, **AGM and remote monitor.**
	a) Capable of ventilating adult, pediatric and neonates.
	b) Software for ventilation should support Volume control, Pressure control and Pressure support modes and advanced modes (SIMV,PSV) along with integrated suction.
	c) Should have oxygen, nitrous oxide and air flow meters
	d) Isoflurane and sevoflurane vaporisers
	e) All safety alarms
	One MRI compatible Multiparameter Vital Signs Patient Monitor of 5000 Gauss Compliance from isocentre in MRI Room and One Slave monitor in console room
	13. MRI Compatible two IV stands. (if not provided already)
	14. Two non-magnetic height adjustable patient transfer trolleys, which do not alarm in Ferro Magnetic Detector System, should be provided
	15. Two Anaesthesia bed/trolley for recovery room

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	16. Walk through Metal detector with multiple fluxgate or equivalent sensor to help detect approaching ferro magnetic hazards and with door ignore function to be installed at entry door of MRI Scanner Room (Zone III type) - 01 no. Must have continuous detection or alert capability following MRI door opening, or following preceding alert. Must allow passage of patient trolley.
	17. Phantoms to be provided for regular QA studies.
	18. Complete manuals and other necessary documentation's should be provided.
	20. MRI room Oxygen defficiency level monitor 1 no (price to be quoted separately)
	21. MRI compatible transport ventilator 1 no (Price to be quoted separately)
	22. MRI ccompatible wheel chair 1 no (Price to be quoted separately)
	23. SCREENER FOR IMPLANT DETECTION - 1 No
18	**TRAINING**
	On site Training for a period of 2 Weeks including training on MRI safety and MRI Hazards for Level 1 and Level 2 personnel.
19	**STANDARD AND SAFETY**
a)	Should have import/manufacturing license from Central licensing Authority or State licensing authority of CDSCO for Medical Devices and copy of valid license should be submitted for the quoted model. In case the vendor has not yet obtained import/manufacturing license from CDSCO for the quoted model, proof of application for CDSCO medical device license to be submitted in the bid document and valid CDSCO license to be produced at the time of supply/ NOA for the quoted Model
b)	Offered system should be BIS / European CE with 4 digit notified body no / USFDA certified.

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Annexure – 1

PARTICULARS OF THE BIDDER

Sr. No	Description	Details (to be filled by the responder to the Bid)
1	Name of the company	
2	Official address	
3	Phone No. And Fax No.	
4	Corporate Headquarters Address	
5	Phone No. And Fax No.	
6	Web Site Address	
7	Details of Company's Registration (Please enclose copy of the company registration document)	
8	Name of Registration Authority	
9	Registration Number and Year of Registration	
10	ISO certifications and its validity	
11	GST registration No.	
12	Permanent Account Number (PAN)	
13	Company's Revenue for last 3 years (Year wise)	
14	Company's net worth for the last year	
15	Bank Details (Name, Account no., Branch, IFSC, MICR)	

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Annexure – 2

The Bidder has to quote the rate in the Item Data available online with this bid. Details to be filled up for price bid are as below:

The price shall be inclusive of all taxes (inclusive of GST) under the relevant Laws of India.

SL. No	Particular	Amount In Rs. (Inclusive of All the taxes)
1	Total Cost for the Procurement of MRI Machine of 1.5 Tesla at BGS MCH Hospital, Nagarur, Nelamangala	
2	Total Cost for the Procurement of MRI Machine of 3.0 Tesla at BGS MCH Hospital, Nagarur, Nelamangala	
Total in Rs and in words –		

SL. No	Item Description	Quantity in Nos.	Price for 3.0 T	Price for 1.5 T
1	Total Cost for the Procurement of MRI Machine to BGSMCH, Nagrur, Nelamangala	1		
2	Total cost for hiring MRI Machine on Rental Purpose to BGSMCH, Nagrur, Nelamangala (per month or per use)	1		
3	Total Annuity payment for the procurement of MRI Machine to BGSMCH, Nagrur, Nelamangala (Finance Lease / Operating Lease)	1		

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