

All India Institute of Medical Sciences, Bhubaneswar At - Sijua (Patrapada), Post - Dumuduma, Bhubaneswar (Odisha) - 751019

To be uploaded in website: www.aiimsbhubaneswar.nic.in (e-tender)

Reference No: STORE-64/5/2025-STPUR SEC

Comp. No.: 12387

Dated: 08/04/2025

Procurement of 03 types of items (High-End ICU Ventilator) for the Department of Burn Center on a PAC basis at AIIMS, Bhubaneswar.

INVITING COMMENTS THEREON

Department of Burn center at AIIMS, Bhubaneswar has requested for Procurement of 03 types of items (High-End ICU Ventilator) from M/s. Air Liquide Medical Systems Pvt. Ltd. (OEM)

The Notice is being uploaded for general information of prospective manufacturer/Authorized Distributor/Dealers to submit their objection/proposal/comments, if any, on proprietorship of the above items.

In case the product of any manufacturer/Authorized distributor/Dealer conforms, they may submit their proposal for the supply of the same along with the brochures, for compliance and any documentary evidence. One quotation of the product may also be submitted.

The objections/comments/proposal should be sent in sealed cover to the Office of Sr. Procurement Cum Stores Officer, AIIMS, Bhubaneswar (Odisha) – 751019 or through E-mail to sp_helpdesk@aiimsbhubaneswar.edu.in so as to reach on or before date: 33/04/2025 failing which it will be presumed that no other firm is interested to offer comments/protest/object and case will be decided on its merits.

The Ref. no. - STORE-64/5/2025-STPUR SEC Dated: 08/04/2025, due on dated: 23/04/2025 should be superscripted on sealed envelope.

Enclosure:

- 1. User Proprietary Article Certificate of AIIMS, Bhubaneswar- Annexure-I
- 2. PAC of M/s. Air Liquide Medical Systems Pvt. Ltd. (Distributor & Supplier is-OEM) Annexure-II
- 3. Budgetary Quotation Annexure- III

Signed by

Kunal Chakraborty

Date: 07-04-2025 12:12:06

Sr. Procurement-cum-Store Officer (I/c)

AIIMS, Bhubaneswar Ph.: 0674-2476035/669/044

Email: spo@aiimsbhubaneswar.edu.in

Copy to:

1. IO, Burn & plastic Surgery

: for information please

2. Accounts Officer

: for information please

3. Help Desk, S&P

: for information & necessary action please.

70957/2025/BURN CENTRE

AIIMS, BHUBANESWAR

Proprietary Article Certificate Valid for the Current Financial Year

File N	o. and Date Reference:					
1	Description of article		+	High End ICU Ve	entilator Re	eplacements
2	Forecast of quantity /annua	al requirement		As per Indent		
3	Approximate estimated val	ue for above quantity		Rs 1,63,780/-		
4	Maker's name and address			51, Rajiv Gandhi	B Campus Salai,	is Pvt.Ltd. Tek Meado⊾vs no. mil Nadu, In e dia,Pin-
5	Name(s) of authorized deal	ers/ Stuckists		Air Liquide Med	ical System	s PVT.LTD
6	Note- Tick to retain only on	use on PAC basis and certify the le out of (b), C-1) or (c-2) which AC certificate will be invalid.	at : - hever is applicab	le and cross out ot	thers. Pleas	e do confirm (a) by
6 (a)	This is the only firm who is	manufacturing / stocking this	item.			Yes
6 (b)	A Similar article is not manu	ufactured / sold by any other f	firm, which could	be used in lieu OF	₹	Yes
(c- 1)	No other make/brand will b OR Only one company manufa	ne suitable for following tangib acturing this equipment	ole reasons (like (DEM/ Warranty, sp	pares.) :	yes
(c)	No other make/brand will tast procurement cycle, ple	be suitable for following Intang ase also bring out efforts mad	gible reasons (if le since then to lo	PAC was also giver ocate more source	n in the s) : OR	
7	Reference of concurrence of	of finance wing to the proposa	ıl:			
istor	y of PAC Purchase of this iter	m for past three years may be	given below :			
lame	of the Supplier					
Ord	er/ Tender Reference & Date	Quantity Ordered	Basic Rate	on Order (Rs.)	7011100000	rse Performance eported if Any
1.00						23/1/3
	re of Approving Authority	Least	1.3.7	Signature (Me mae	oring Officer

Date...... Designation of Officer...

Officiating Executive Director

एन्स, भवनेश्वर/AIIMS, Bhubaneswa

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(Air Liquide

TO,
ALL INDIA INSTITUTE OF MEDICAL SCIENCE
AT-SIJUA(PATRAPADA)
POST-DUMUDUMA
BHUBANESWAR
ODISHA-751019

Date 23/12/2024

Dear Sir/Madam,

PROPRIETARY ARTICLE CERTIFICATE

Air Liquide Medical Systems Pvt Ltd is the Original Manufacture. This is to certify that the below items are Proprietary.

Product Code

Product Description

KY600400 KY442400 EM-852 MP-010 EXPIRATORY VALVE DIAPHRAGM FOR EXTEND XT VENTILATOR.
EXPIRATORY FLOW SENSOR FOR EXTEND XT VENTILATOR.
12V BATTERY FOR EXTEND XT VENTILATOR.
OXYGEN SENSOR FOR EXTEND XT VENTILATOR.

No other make or supplier is acceptable to supply the above items for following reasons.

The above mentioned code are designed to work together as a part of a medical device as defined by Air Liquide Medical Systems Pvt Ltd.

Thanking You,

Yours faithfully,

For AIR LIQUIDE MEDICAL SYSTEMS PVT.LTD.,

Authorized Signatory

Air Liquide Medical Systems Pvt Ltd., 5th Floor, Tower B,Campus Tek Meadows No.51,Rajiv Gandhi Salai, Sholinganallur Chennai,Tamil Nadu, INDIA,PIN-600119

Tel: 044 4385 1116

Email: service.almsindia@airliquide.com

sudip.chakraborty@airliquide.com

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Dr. San W Run ar Giri
Additional Photosor & Head
Dept. of Burns an astic Surgery
AllMS, Briubaneswar-751019



AIR LIQUIDE MEDICAL SYSTEMS PVT. LTD.,
Tower B, 5th Floor, No.51, Tekmea2ows,
Rajiv Gandhi Salai, Sholinganallur,
Chennai - 600119, Tamil Nadu, India
Tel:+9144 43851116/17/43851187/88
Email:service.almsindia@airliquide.com
www.device.airliquidehealthcare.com

		S	PARES / SEI	RVICE	ESTIMATE					
Customer code:			Quotation No.: 0667/2024 - 25			Dat : 12-12-2024				
Name:		ALL INDIA INSTITUTE OF MEDICAL SCIENCES (BURN UNIT) BHUBANESWAR ORISSA		Ref. No.				Date: 33A/AACE8420F1Z3 AAACE8420F U331121987PTC014641		
				GSTIN/UIN: Pan No						
S.N.	ITEM CODE	DESCRIPTION	HSN/SAC	QTY	Unit Rate	Basic Value	Tax Rate	Tax Amount	Total	
		COMPONENT CHARGES FOR MEDICAL INSTRUMENT - EXTEND XT								
1	KY600900	EXPIRATORY VALVE DIAPHARAM	90330000	8	7200	57600	18%	10368.00	67,968.00	
2	KY442400	EXPIRATORY FLOW SENSOR.	99330000	8	8075	64600	18%	11628.00	76,228.00	
3	EM-825-C	12 V BATTERY-EXT	85075000	2	7650	15300	28%	4284	19,584.00	
		BANK DETAILS Beneficiary Name: AIR LIQUIDE MEDICAL SYSTEMS PVT. LTD Beneficiary Account No: 6022 050 39976 Beneficiary Bank Name: ICICI BANK LTD Banking Address: NAC TOWERS, NO.200/1, DR.R.K.SALAI MYLAPORE, CHENNAI 600 004 IFSC: ICIC0006022, MICR: 600229007								

Rupees: One Lakhs Si: y Thre	e Thousand Seven Hundred Eighty Only.	1,22,200.00	21,996.00	1,63,780.00
Terms & Conditions: 1. Estimation valid up to 12 m	onth.	For Air Liquide Medi	cal Systems Pvt Ltd	,
		Authorised S	Signatory	
CANALONAL ED CENT	ENIT AND CONFIDMATION FOR OR	DOED DI ACEMENT	100	Date:
ACKNOWLEDGEMI	ENT AND CONFIRMATION FOR OF	DERFLACEMENT		Place:
/ We	hereby accepts the above t	nentioned prices and the quanti		Place:
I / Weterms and conditions of service	hereby accepts the above res and undertakes to make necessary payment as per the	nentioned prices and the quantile terms mentioned above and f	ulfill all the obligati	Place: uide general ons of the
I / We terms and conditions of service order. We wish to confi n the p	hereby accepts the above t	nentioned prices and the quantile terms mentioned above and f	ulfill all the obligati	Place: uide general ons of the
I / We terms and conditions of service order. We wish to confine the pof Rs	hereby accepts the above res and undertakes to make necessary payment as per the	nentioned prices and the quantile terms mentioned above and f	ulfill all the obligati	Place: uide general ons of the Total amount
I / We terms and conditions of service order. We wish to confine the pof Rs PAN:NO.:	hereby accepts the above res and undertakes to make necessary payment as per the placement of order for a other total order value Rs	nentioned prices and the quantile terms mentioned above and f	ulfill all the obligati ble	Place: uide general ons of the Total amount
I / Weterms and conditions of service	hereby accepts the above res and undertakes to make necessary payment as per the placement of order for a other total order value Rs Contact Details:	nentioned prices and the quantile terms mentioned above and f	ulfill all the obligati ble	Place: uide general ons of the Total amount

Dr. Santa Kumar Giri
Additional Professor & Head
Additional Professor & Head
Dept. of Burns & Plastic Surgery
Dept. of Burns & Plastic Surgery
AllMs Rhubaneswar-751019

Dr. Tarun Kumar Patra

Dr. Tarun Kumar Patra

Dr. Assistant Professor

Dept. of Anesthesiology & Critical Care

Dept. o