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भारत सरकार / Government of India
स्वास्थ्य एवं परिवार कल्याण मंत्रालय / Ministry of Health and Family Welfare

अखिल भारतीय भौतिक चिकित्सा एवं पुनर्वास संस्थान / ALL INDIA INSTITUTE OF PHYSICAL MEDICINE AND REHABILITATION
हाजी अली, के. के मार्ग, महालक्ष्मी, मुंबई- 400 034 / Haji Ali, K.K.Marg, Mahalaxmi, Mumbai - 400 034.

संदर्भ सं./ Ref.No.: पीडब्ल्यूएस/कोटेशन/PWS/Qtn./291

दिनांक / Dated : 13/05/2019

To,

महोदय / Sir,

निम्न प्रकार की उल्लिखित _____ खरीदी हेतु यह प्रस्तावित किया जाता है, जैसा कि नीचे बताया गया है।

It is proposed to purchase following **Endoskeletal Hip Disarticulation Prosthetic Kit** as mentioned below.

मैं, अनुरोध करता हूँ कि उपर्युक्त आपूर्ति के लिए न्यूनतम दर प्रस्तुत करें।

You are requested to submit your lowest rate for supply of the same.

दरें बताते समय कृपया निम्नलिखित जानकारी दें :

While quoting, the following information may please be supplied :

- 1 वस्तुओं का पूर्ण विवरण-वस्तुओं को सचित्र स्पष्ट करनेवाली पुस्तिकाओं, इश्तेहारों या नमूनों के रूप में।

Complete description of the articles in form of booklets, pamphlets or samples illustrating the articles.

- 2 अवधि, जिसमें आपूर्ति कि जा सके।

The period within which the supply is to be made.

- 3 सामान्य एवं बिक्री कर / विक्रय कर संख्या इत्यादि, यदि लागू हों।

General and sales tax number etc. if applicable.

निविदा के लिए मुहरबंद लिफाफे में ऊपर 'निविदा' शीर्षक देकर निदेशक, अखिल भारतीय भौतिक चिकित्सा एवं पुनर्वास संस्थान, हाजी अली, मुंबई-400 034 को प्रस्तुत करें एवं स्थापना अनुभाग में उपलब्ध निविदा पेटी दिनांक 01/06/2019 में 12.30 बजे (अपराह्न) के पूर्व डालें।

The quotation should be submitted in sealed envelope superscribed as **quotation for _____** to the Director, All India Institute of Physical Medicine and Rehabilitation, Haji Ali Park, Mumbai- 400 034 and to be dropped in quotation Box available with Establishment Section before 12.30 P.M. (I.S.T.) on **01/06/2019**

निविदा, केवल प्राधिकृत हस्ताक्षरकर्ता के नाम एवं पदनाम, पैन/टैन संख्या के साथ ही वैध मानी जाएगी।

Quotation with name & designation of authorized signatory by mentioning PAN/TAN and GST Number will only be valid.

निविदा केवल एक वर्ष की अवधि के लिए ही वैध होगी। आपूर्ति आदेश तिमाही जारी किया जाएगा।

Quotations should be valid for the period of one year. Supply Order will be placed on quarterly basis.

इस संबंध में किसी प्रकार की अन्य जानकारी आवश्यक हो तो आप इस कार्यालय से सोमवार से शुक्रवार, 9.00 से (पूर्वाह्न) 3.30 (अपराह्न) बजे के बीच प्राप्त कर सकते हैं।

Any other information you may require in this matter can be had from this office from Monday to Friday between 9.00 a.m. to 3.30 p.m.

Sr. No.	Name of the Material	Quantity
1	Endoskeletal Hip Disarticulation Prosthetic Kit	10 Nos.

Made in India components will be preferred. BIS mark (certification) components will be preferred, if not available then CE mark (certification) will be considered.

Detailed Technical Specification separately attached.

भवदीय / Yours faithfully,

SD/-

व्याख्याता, संयुक्तांग एवं ऋज्वांग,
(Lecturer, Prosthetic & Orthotic)

सूचना : पूर्व रसीदी बिल के तीन प्रतियों के अनुसार भुगतान, किया जाएगा।

Note : Payment will be made against pre-receipted bill in triplicate.

Technical Specifications for Various Components of Endoskeletal Hip Disarticulation Prosthesis with Polycentric Hip Joint & Polycentric Knee Joint

Each kit should consist of the following:-

<u>Sr. No.</u>	<u>Name & description of the components</u>	<u>Technical specifications</u>
1.	4 Bar type polycentric mechanical hip joint for hip disarticulation prosthesis with <u>Anchor Plate</u> & screws	<ul style="list-style-type: none"> • For hip disarticulation amputees with moderate functional level • Hip flexion range 0-125° (minimum) • Material: Stainless steel
2.	Pylon tube for attachment of knee joint with hip joint	<ul style="list-style-type: none"> • Aluminium alloy tube with Outside Dia: 30mm × Length: 300mm
3.	Polycentric Knee Joint with Integrated Spring Extension Assist with Pyramid on top and provision for clamping the pylon tube below (to be used for hip disarticulation prosthesis)	<ul style="list-style-type: none"> • Knee flexion range 0-125° (minimum) • Adequate stance phase stability • Material: Stainless steel
4.	Angular adaptor for clamping the pylon tube with knee joint (tube clamp) on top (with forward flexion) and regular adaptor below	<ul style="list-style-type: none"> • Should permit 10° forward flexion • Material: Stainless steel
5.	Pylon tube with integrated adaptor (for attachment of foot)	<ul style="list-style-type: none"> • Pyramid adaptor with four screws, material; stainless steel • Aluminium alloy tube with Outside Dia: 30mm × Length: 300mm
6.	Ankle bolt with pyramid adaptor	<ul style="list-style-type: none"> • SACH ankle bolt with pyramid adaptor on top (Length: 70mm × Dia: 10mm)

M. K. G. M.
01/05/2019

Lecturer & HOD P&O