Govt. Of Maharashtra

Chhatrapati Pramila Raje General Hospital, Kolhapur - 416002.

By Regd. A.D / U.P.C.

Tel: (0231) 2641583

Acetabular Screwss

Specification :- Screws to fix the acetabular cup.

Mahatma Jyotiba Phule Jan Aarogya Yojana.

Го,	No. CPRGHK/ 1142 / 2025	1 805	Date: 3 N	PR /202	25
	Subject :-	Replacement			
	Reference: - As per Sanctioned Notesheet Date:-	03 / 08 /202	25.		
supp	Please arrange to give your lowest possible rate lied only along with all required instrumentation set of Note:- The Specification of Implants and	or sets		n are to	be
Sr.	Name of Item	Packing Size	MFG By	MRP	Quotated Rate Per Unit
	Uncemented Total Hip Replacement (Ce	ramic on Ceramic	(Indian)	in Other	
1	Uncemented Acetabular Cup Specification: - Uncemented, beaded / porous / HA coated with three screw holes. Attachment for ceramic liner	1 nos			
2	Ceramic/Poly acetabular liner Specification :-Ceramic acetabular liner with stable locking mechanism. All sizea. Accommodating head from 28mm to 36mm	1 nos			
, 3	Acetabular Screwss Specification :- Screws'to fix the acetabular cup.	1 nos	quate of		
4	Uncemented Femoral Stem Specification: Fully HA coated / poprous coated uncemented stem. Standard taper neck 12/14. Standard and high offset options.	1 nos	mines conse		
5	Cermic Head Specification :- Ceraamic Head size from 28 / 32 / 36	1 nos			
6	Saw Balde Specification :- Blade for neck cut	1 nos	-1 51/70		
HO	Uncemented Total Hip Replacement (Co	eramic on Cerami	c) (Improt	ed)	
7	Uncemented Acetabular Cup Specification: - Uncemented, beaded / porous / HA coated with three screw holes. Attachment for ceramic liner	1 nos		10 (A)	
8	Ceramic/Poly acetabular liner Specification:-Ceramic acetabular liner with stable locking mechanism. All sizea. Accommodating head from 28mm to 36mm	1 nos			
	III OIII ZOIIIIII CO SOIIIIII				

1 nos

10	Uncemented Femoral Stem Specification: Fully HA coated / poprous coated uncemented stem. Standard taper neck 12/14. Standard and high offset options.	1 nos		
Trans.	Cermic Head Specification: - Ceraamic Head size from 28 / 32 / 36	1 nos		
12	Saw Balde Specification :- Blade for neck cut	1 nos		

Terms & Condition as follows:-

- 1. All The Insutuments Set Required for TKR/THR Should be Provided by the vendor in good condition without any Extra charges applicable for the usage of the instrument set (Example Handling charges etc.)
- 2.All the prices quoted for the TKR/THR Implant should be on single Unit basis which include the entire construst & components as per the techinical spcification.
- 3. The rate of the TKR/THR unit will be considered as consolidated price of all components of one single unit as per quotation.
- 4. The order will be on patient to patient basis.
- 5. The Charges will be paid only for the components used (TKR/THR) and no other extra charges will be applicable for the billing.
- 6. Rate should be inclusive of all taxes like GSTetc .
- 7. Material should be delivered at approproate place and time as instructed by authority (Main OT within two Hours RCSMGMC & CPR Hospital, Kolhapur)
- 8. Material should be in good condition as per the specification.
- 9. Material will be inspected HOD Orthopedic Department and if material is found of inappropriate quality then material will be rejected.
- 10. Attach Xerox copy of PAN, GST & FDA Drug Licence (attested) .
- 11. All rights are preserve in favour of The Dean , C.P.R. Hospital, Kolhapur.
- 12. Don't Quoate Rates of other items except as mention Dont miss serial of above list.
- 13.Organisation/ Distibutor Require Authorization letter for submission of the quatation.
- 14. Submit printed quotation on your own letter head with duly signed and stamped . Quotation should not be submitted without sample approval from HOD. Hand written quotation will be rejected.
- 15. Quotation submitted in any other format other than above will be rejected.
- 16. दरपत्रकासोबत अन्न व औषध प्रशासन विभागाकडील नोंदणी प्रमाणपत्र २० बी व २१ बी (Drug Licences)सोबत जेडण आवश्यक.
- 17. ज्या Manufacture कंपनीचे Ortho Surgery Implant set with implant करणार आहे त्या Manufacture कंपनीची Ministry of Health and family Welfare (Department of Family welfare) Notification, New Delhi Date.31/01/2017 G.S.R. 78E नुसार DCGI प्रमाणीत Product List व Manufacturing License copy mandatory
- 18. Ortho Surgery Implant set with implant उत्पादकाचे डिलरशिप प्रमाणपत्र आवश्यक
- 19. Ministry of Health and family Welfare (Department of Family welfare) Notification, New Delhi Date.31/01/2017 G.S.R. 78E नुसार DCGI प्रमाणीत Product List Non Sterile असेल तर Sterile Loan License DCGI प्रमाणित copy mandatory
- 20. संस्था / दुकान उपकरणे / विक्री विषयक नोंदणी दाखला
- 21. यादीमधील बाबी आवश्यकते प्रमाणे Implant पुरवठा आदेश देण्यात येतील जर आवश्यकता नसेल तर पुरवठा आदेश दिला जाणार नाही.
- 22. ठरवुन दिलेल्या कालावधीत साहित्यांना पुरवठा न झाल्यास नियमानुसार दंडात्मक रक्कम पुरवठादारांच्या देयकातुन वसुल केली जाईल.

- 23. दरपत्रक मंजुर झाल्यानंतर पुरवठा केलेल्या मालाच्या बिलामध्ये आपला Drug Liciennces 4 no पैनकार्ड व जी.एस.टी. न क्रमांक लिहावा . तसेच आयकर व्यवसायकर इ.तसेच नियमानुसार जे शासकीय करलागु असतीलते सर्व भरण्याची दरपत्रकधारकाची राहील.
- 24. एखादे Orthopedic Implant अप्रमाणित अथवा खराब अढळल्यास त्याविषयी होणाऱ्या सर्व शासिकय कार्यवाहीची जबाबदारी दरपत्रकधारकाची राहील. नवीन बदली करुन दयावे लागल्यास तो पुरवठा बिना शर्त व इतर खर्चाशिवाय पुरवठा करणे हे दरपत्रकधारकास बंधनकारक राहील.
- 25. Ministry of Health and family Welfare (Department of Family welfare) Notification, New Delhi Date.31/01/2017 G.S.R. 78E नुसार DCGI नुसार इम्प्लांट्सचे स्टिकर देणे बंधनकारक आहे.

26.Sealed Quotations should reach this office i.e. on/before Mahatma Jyotirav Phule Jan Aarogya Yojana, C.P.R.HOSPITAL, KOLHAPUR Dt.:- 09)04/2025, Upto 5. pm.

Dean, C. P. R. General Hospital, Kolhapur.