

**PT. B.D.SHARAMA POSTGRADUATE INSTITUTE OF MEDICAL SCIENCES
ROHTAK**

E-mail:- equotations.pgims@uhsr.ac.in Invitation of e-quotations for

Department Name: ____ Orthopaedics

Demand No:Ortho/AB/26/ 291

Demand Date:13.03.2026

Last Date (Closing Date) of Submission of Quotation:15.03.26

Rate quotation in sealed envelope/Password protected quotation are hereby invited from the valid firms and suppliers by the undersigned on behalf of the Director, PGIMS, Rohtak for supply of consumables as per Annexure-I for the Institute as per terms & conditions mentioned below. The filled e-quotations must receive through registered e-mail (**Password protected**) on or before 15.03.26 at 3.00 PM & quotation opened on 15.03.26 at 3.30PM

1. Terms & Conditions:-

- a. The quotations received sealed/ online after the deadline shall not be entertained under any circumstances whatsoever. In case of any delay this institute will not be responsible.

The online submission though password protected mode will be restricted

- b. Quotations must be in online prescribed Proforma on the letter head of the firm duly signed by the Proprietor/ Partner/ Director or their authorized representative. In case of signing of quotation by the authorized representative letter of authorization must be attached with the quotation.
- c. Quotations must be submitted in the office of the undersigned before deadline of submitting the quotation.
- d. Rates must be quoted in Indian Rupees and as per the format specified taxes extra if any must be written separately.
- e. Rates must be quoted F.O.R. basis (including Freight charges).
- f. No overwriting or cutting is permitted in the rate. If found, the quotation shall be summarily rejected.
- g. The rates quoted must be valid for 90 days minimum or as per State Govt. instructions issued from time to time from the date of opening and silence of any tendered on this issue shall be treated as agreed with this condition.
- h. Becoming L1 will not be the criteria for awarding of purchase order unless the rates are reasonable & justified
- i. Any conditional quotations shall be rejected summarily.
- j. **Delivery period – As per supply order on issuing by the office.**
- k. **Liquidated Damages:** - If the supplier fails to deliver the material on or before the stipulated date, then a penalty at the rate of 0.5% per week of the total order values shall be levied subject to maximum of 10% of the total order value on which amount when there is no EMD.
- l. **Payment terms:** - Payment will be only after satisfactorily complete delivery/ commissioning of material and after inspection by Inspection committee.

Annexure-I

Sr. No.	Name of the items	Req. Qty.	Specification	Remarks
1.	HIV KIT	08		
2.				
3.				
4.				
5.				

Annexure-II

(On the letter head of the firm)

Price Bid Form

To

**The Director,
Pt. BDS PGIMS, Rohtak.**

1. I/ We _____ submitted the quotation for Demand No _____ Dated _____ "quotation for supply at Pt. BDS PGIMS, Rohtak.
2. I/ We thoroughly examined, understood and accepted terms and conditions given in the enquiry document, failing which my quotation will be rejected our rightly.
3. **The Vendor should also certify that the rates quoted in the quotation are not more than the MRP of the manufactures and lowest market rates.**
4. **I/ We hereby offer to supply at the following rates .**

Sr. No.	Name of Items	Rate of each Quantity	Quoted make If any	Price/ inclusive Tax/GST	Unit of
1.					
2.					

Date _____

Place _____

Phone _____

(Signature of Authorized Person)

Name _____

- m. Pt. BDS PGIMS, Rohtak reserves the right to increase or decrease quantity and / or amount of work. Decision of quantity of material in the Pt. BDS PGIMS, Rohtak will be final in this regard.
- n. Pt. BDS PGIMS, Rohtak reserves the right to reject any quotation or part or the whole of inviting quotation process without assigning any reason. Decision of the Pt. BDS PGIMS, Rohtak will be final in this regard.
- o. The Sealed Quotation on the envelop due date & product name mandatory. If not mention on the envelop. The quotation will be rejecting.

Special Terms and Conditions:-

1. Bidder must quote the product as per specifications provided in Annexure-1.
2. The supplier may be asked to submit the sample of quoted make for technical evaluation, to the Pt. BDS PGIMS, Rohtak , if required. The expenditure incurred for demonstrating the items will be borne by the supplier.
3. Inspection committee will check the products thoroughly, if somehow inspection committee found any discrepancy and is not satisfied with the final product (final product should be same as reviewed ones at the institution) then Pt. BDS PGIMS, Rohtak has the right to reject the supply and cancel the order, and no claim for payment in this regard will be entertained.
4. Jurisdiction: The jurisdiction will be district Rohtak only.
5. It is directed to IT Cell that requisition of above item may also be placed on website of Pt. BDS PGIMS, Rohtak for vide publicity to invite a competitive manner of purchase.
6. Samples will be provided by the firm with quotations, otherwise quotation not accepted for the institute.

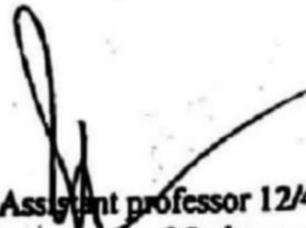
Encl: Annexure-I (Specification)

Committee

Annexure –II (Format of Quotation)

(To be signed by concerned Department)


Senior Resident Unit-12/4
Department of Orthopaedics
Pt. BDS, PGIMS, Rohtak


Assistant professor 12/4
Department of Orthopaedics
Pt. BDS PGIMS Rohtak


Nodal Officer Unit-12/4
Ayushman Bharat Scheme
Department of Orthopaedics
Pt. BDS, PGIMS, Rohtak

PT B D SHARMA PGIMS ROHTAK (HOSP6G03738)- ROHTAK

Caseview (1021455647)

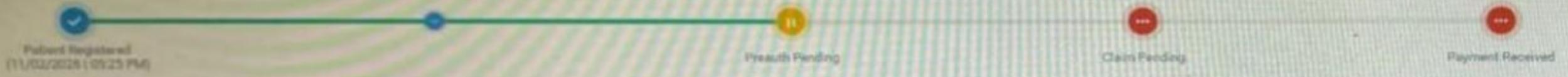
Care Plan
 PMJAY HR PP
 PMJAY ID
 MQBOTJWP4
 ABHA Number
 NA
 Patient Care
In-Patient

Mobile Number
 NA
 Address
 310 Opposite Rurkee Mod Opposite Rurkee Mod, Bhalot
 ROHTAK HARYANA 124401

Registration ID
 1021455647
 Registration Date
 11/02/2026 17:25:56
 Aadhaar Verified ✔

Total Wallet Amount
 ₹ 5,00,000.00
 Wallet Balance
 ₹ 3,10,000.00

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MEDICAL INFORMATION

ADMISSION INFORMATION

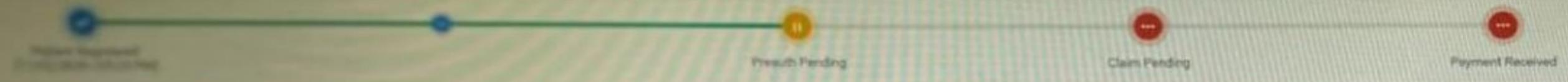
TREATMENT DETAILS

Amount and Incentive Details

No.	Package Code	Package Type	Procedure Cost	Stratification Cost	Quantity	Package Cost	Adj Factor	Incentive	Total Amount	Remarks
1.	SB038A	Surgical	₹ 61,600.00	Not Available	1	₹ 61,600.00	0%	Incentive=0.00%	₹ 0.00	NA
2.	SB038B	Surgical	₹ 46,300.00	Not Available	1	₹ 46,300.00	0%	Incentive=0.00%	₹ 0.00	NA
3.	IMP0112	Implant	Not Available	Not Available	1	₹ 40,250.00	NA	Incentive=NA	₹ 0.00	NA
4.	IMP0113	Implant	Not Available	Not Available	1	₹ 65,000.00	NA	Incentive=NA	₹ 0.00	NA

PT & D SHARMA POMS ROHTAK (HOSP403738) - ROHTAK

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- Medical Information
- Insurance Information
- Treatment Details

Services and Incentive Details

Sr.	Procedure Code	Procedure Type	Procedure Cost	Classification Code	Quantity	Package Cost	Adj Factor	Incentives	Total Amount	Remarks
1	93001	Surge	₹ 61,500.00	Not Available	1	₹ 61,500.00	0%	Incentive=0.00%	₹ 0.00	NA
2	93002	Surge	₹ 46,300.00	Not Available	1	₹ 46,300.00	0%	Incentive=0.00%	₹ 0.00	NA
3	93003	Surge	Not Available	Not Available	1	₹ 40,250.00	NA	Incentive=NA	₹ 0.00	NA
4	93004	Surge	Not Available	Not Available	1	₹ 65,000.00	NA	Incentive=NA	₹ 0.00	NA
Total package amount (without incentives):									₹ 2,13,150.00	
Total adjusted package amount (as per guidelines):									₹ 1,90,000.00	
Total payable amount (after incentives):									Not Available	
e-RUPI Amount:									₹ 0.00	
Miscellaneous Amount:									Not Available	