

**Orthopaedic Hospital  
Eastern Railway, Howrah**

NO.Med/Tie-up/EMG & NCV & ECHOCARDIO GRAPHY ETC /CGHS/2019    Howrah, dated 30 .10. 2019

Sub :- Expression of Interest (EOI) is sought from interested diagnostic centers/hospitals etc. in Kolkata and Howrah for outsourcing of various work of Clinical investigations through EMG & NCV, Echo Cardiography (Plain) , Dexa Scan and Mammography and other special type of investigations etc at latest CGHS rates of the city in concern/nearest city for Railway beneficiaries for a period of three(03) years.

Notification :    EOI / EMG & NCV & ECHOCARDIO GRAPHY/Dexa Scan ETC /CGHS/2019

Application for Expression of Interest (EOI) are invited for entering into tie-up with reputed diagnostic centers/hospitals etc. in Kolkata and Howrah area to undertake work of different Clinical investigations through EMG & NCV, Echo Cardiography (Plain) , Dexa Scan and Mammography and other special type of investigations etc for Railway beneficiaries for a period of three(03) years in prescribed proforma available at Railway Website . The details are available in Eastern Railway Website – [www.er.indianrailway.gov.in](http://www.er.indianrailway.gov.in) under Division Howrah- Department-Medical-

DA : As Above

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Chief Medical Supdt.  
Eastern Railway, Howrah

Copy for information :-

1. CMD
2. DRM/E.Rly
3. Sr. DFM/HWH –He is requested to advise nominated SO to be present on 17.12.2019 for opening the applications

**ORTHOPAEDIC HOSPITAL**  
222-Church Road  
Eastern Railway/ Howrah-711101.

NO.Med/Tie-up/EMG & NCV & ECHOCARDIO GRAPHY ETC /CGHS/2019 Howrah, dated 30 / 10 / 2019

Sub : -Floating of notice for **Expression Of Interest ( EOI) regarding**  
outsourcing of various work of Clinical investigations through  
EMG & NCV, Echo Cardiography(Plain) , Dexa Scan and  
Mammography and other special type of investigations etc for  
Railway beneficiaries for a period of three(03) years.

Application for Expression of Interest(EOI) is invited from the interested diagnostic centers/hospitals for extending investigative facilities to railway patients of Orthopaedic Hospital/HWH at latest CGHS rates of the city in concern/nearest city; in case CGHS rate for a particular investigation is not available then AIIMS rate or any other government hospital rate shall be applicable or reasonable rate as per mutual agreement between Railway and the centre.

<b>1.</b>	<b>Name of the works</b>	Investigations required for different parts of Human body like EMG & NCV, Echo-Cardiography, Dexa Scan, Mammography, Tilt Table Analysis(HUTT), Ambulatory BP Monitoring, Upper GI Endoscopy, Colonoscopy etc. However, details available in ANNEXURE-B of prescribed format
<b>2</b>	<b>Place where the prescribed format and related necessary papers to be deposited or sent by post</b>	In the office of Chief Medical Superintendent/ Orthopaedic Hospital 222-Church Road/ Eastern Railway/ Howrah-711101.  A pre offer consulting may be done with the medical officer-in-charge i.e. ACMS/Admin/HWH who will be available from 12.00 hrs to 15.00 hrs. on any working day till 17.12.2019
<b>3</b>	<b>Date of receipt of application</b>	Up to 17/12/2019 on any working day between 11.00 hrs to 16.00 hrs
<b>4</b>	<b>Modalities of rates has to be accepted by the firms and if found suitable by the committee</b>	A Memorandum Of Understanding(MOU) will be executed with interested firms who will render their service at Central Government Health scheme(CGHS) rates or lower rates or in case CGHS rate for a particular investigation is not available then AIIMS rate or any other government hospital rate shall be applicable or reasonable rate as per mutual agreement between Railway and the centre with bill paying system. Rates shall be firm throughout the empanelment period of three years from the date of acceptance by competent authority . Payment shall be made on the clear bill along with reference slip issued from the Orthopaedic Hospital, Eastern Railway/Howrah.
<b>5</b>	<b>Mode of selection of firms</b>	One committee of Medical officers may be formed who will select the firms with whom Railway will go for tie-up/MOU with bill paying system. Empanelment will be done on the basis of the prescribed criteria and offered rates. Empanelment will be on sole discretion of the committee. Empanelment will be on sole discretion of the committee. Railway authority reserves the right to terminate empanelment process at any point of time without assigning any reason. Keeping valid NABL or NABH certification may be preferable.
<b>6</b>	<b>Credential</b>	Document/certificate of previous experience regarding similar work executing with Govt/semi Govt organization(if any) need to be submitted.
<b>7</b>	<b>Application form</b>	1.Prescribed format of application as <b>Annexure-A</b> 2.Details of investigations on which rates to be quoted are marked as <b>Annexure-B</b>

Continue.....at p/2

<p>8</p> <p><b>Bench mark criterias and other criterias to be followed</b></p>	<p><b>A)The firm should have following infrastructure:-</b> 5)Eye - Capable to investigate the parts of the body as per latest CGHS list.</p> <p><b>B. Human resource:-</b> 1) Medical Officer-The specialist in the concerned field should be available. 2) Technician-Should have requisite qualification in the concerned field. 3) Other paramedical staff be available for take care of patient during investigations</p> <p><b>C. Other criteria:-</b> 1) It will be suitably placed for taking the patient smoothly. 2) There should be sufficient space out side hospital for parking of vehicle (Ambulance ) . 3)There should be sufficient infrastructure inside hospital premises for managing emergency if arises during stay of the patient at hospital . 4) The Diagnostic centre /hospital nearer to Howrah Orthopaedic Hospital will be preferred. 5) All licenses necessary to run such an establishment must be available for inspection. 6) Must all time to obtain, maintain and sustain the valid registration, recognition and high quality and standard of its services and to have all statutory/mandatory licenses,permits or approval of the concerned authorities under or as per existing laws. 7) In case of emergency, arrangements should be done to deliver the reports through E-Mail/SMS/Whatsapp/over phone etc at the earliest 8) Reports of all patients should be submitted within 24 hrs. 9) The Diagnostic centre/Hospital will provide cashless services to the patient(s) and payment will be done by Railway on receiving Bills on monthly basis. 10) Rates shall be fixed throught the empanelment period and will be valid till rates are revised by CGHS.</p> <p><b>11) The Railway Administration reserves the right to accept or reject any or all of the Offers without assigning any reason whatsoever.</b></p> <p>(EIO may be extended after expiry of agreemental period by going further mutual agreement between Railway and the centre subject to satisfactory performance)</p> <p>Eastern Railway Website – <a href="http://www.er.indianrailway.gov.in">www.er.indianrailway.gov.in</a></p>
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CHIEF MEDICAL SUPERINTENDENT  
EASTERN RAILWAY/ HOWRAH  
For and on behalf of the President of India

**ANNEXURE –A**

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**PRESCRIBED FORMAT APPLICATION**

**FOR**

EXPRESSION OF INTEREST (EOI) FOR ENTERING INTO TIE UP BEING A CGHS/ESI/ECHS EMPANELLED/ UNEMPANELLED PRIVATE HOSPITAL/DIAGNOSTIC CENTRE / POLY CLINIC IN KOLKATA AND HOWRAH AREA WITH ORTHOPAEDIC HOSPITAL HOWRAH /E.RLY FOR DOING OUTSOURCING WORK OF CLINICAL INVESTIGATIONS OF DIFFERENT PARTS OF HUMAN BODY BY EMG & NCV, Echo-Cardiography, Dexa Scan, Mammography, Tilt Table Analysis(HUTT), Ambulatory BP Monitoring, Upper GI Endoscopy, Colonoscopy etc at latest CGHS rates in concern/nearest city( in case CGHS rate for a particular investigation is not available then AIIMS rate or any other government hospital rate shall be applicable or reasonable rate as per mutual agreement between Railway and the centre).

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1. NAME OF THE DIAGNOSTIC CENTERS/ HOSPITAL / ADDRESS/TELEPHONE NUMBER/E MAIL ID -----

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2. EXPERIENCES OF WORKING IN THE MOU FORMAT IN PRIVATE SECTOR/GOVT. SECTOR/ATTACH DETAILS. -----

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3. WE AGREE TO PROVIDE SERVICES AT LATEST CGHS/NON-NABH/NABH) RATES AS PER APPLICABLE TO KOLKATA-----

4. WE AGREE TO PROVIDE THE SERVICES TO THE RAILWAY BENEFICIARIES IN FOLLOWING DISCIPLINES (REF : ANNEXURE- B OF EOI) -----

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5. FOR THOSE SERVICES/INVESTIGATIONS/TREATMENT MODALITIES, WHICH ARE NOT LISTED IN THE CGHS RATE, OUR HOSPITAL WILL PROVIDE THE SERVICES ON HOSPITAL RATES -----% DISCOUNT, LIST OF WHICH ARE ENCLOSED

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6. WE ALSO AGREE TO PROVIDE SERVICES ON BILL SYSTEM OF PAYMENT -----

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7. OUR DIAGONSTIC CENTER/HOSPITAL OFFERS TO PROVIDE FREE AMBULANCE SERVICES FOR ALL REFERRAL(INDOOR) PATIENTS TO AND FRO AT HOWRAH ORTHOPAEDIC HOSPITAL -----

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SIGNATURE  
AUTHORIZED SIGNATORY  
(NAME- )

ADDRESS -----

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PHONE NUMBER-----

E MAIL ID-----

SEAL/STAMP

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8. WE HEREBY ENCLOSE A LIST OF THE FACILITIES, WHICH ARE AVAILABLE WITH OUR DIAGNOSTIC CENTER/ HOSPITAL AS PER ANNEXURE -----  
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9. WE ENCLOSE THE IN HOUSE HUMAN RESOURCES/SPECIALISATIONS, WHICH ARE AVAILABLE WITH OUR DIAGNOSTIC CENTER/HOSPITAL AS PER ANNEXURE..... THE INFRASTRUCTURAL FACILITIES OF OUR HOSPITAL IS ALSO ENCLOSED AS PER ANNEXURE.....

10. WE ENCLOSE A COMPLETE TARIFF CHART OF OUR DIAGNOSTIC CENTER/ HOSPITAL COMPARING WITH CGHS RATES AS PER ANNEXURE.....

11. OUR DIAGNOSTIC CENTER /HOSPITAL HAVE BEEN RECOGNISED FOR TREATMENT OF THE FOLLOWING GOVT. ORGANISATION/SEMI-GOVT. ORGANISATION/ PRIVATE ORGANISATION AS PER ANNEXURE  
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12. WE HOPE OUR ORGANISATION WILL BE CONSIDERED FOR TIE-UP WITH ORTHOPAEDIC HOSPITAL/HOWRAH FOR PROVIDING SERVICES TO THE RAILWAY BENEFICIARIES.

13 DOCUMENTS TO BE ATTACHED (Trade license, Accreditation Certificate, Fire certificate, NABL/NABH, CGHS empanelment certificate with validity period etc.) \_\_\_\_\_

14. OTHERS DOCUMENTS TO BE ATTACHED ( PAN card details, Bank Accounts details, Trade license and authorization letter with whom correspondence will be made etc )  
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**(All documents are to be signed and stamped by the Authorized signatory on all pages. No columns from 1 to 14 will be left blank. EIO may be extended after expiry of agreemental period by going further mutual agreement between Railway and the centre subject to satisfactory performance)**

SIGNATURE OF AUTHORIZED SIGNATORY

(NAME- )

ADDRESS -----  
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PHONE NUMBER-----

E MAIL ID-----

Whatsapp No. \_\_\_\_\_

SEAL/STAMP

**ORTHOPAEDIC HOSPITAL/EASTERN RAILWAY, HOWRAH.**

**ANNEXURE-B**

**LIST OF INVESTIGATIONS TO BE DONE**

Sl. No.	NAME OF THE INVESTIGATION	RATES IN FIGURE(Rs.)	RATES IN WORDS (RS. )
1.	NCV OF BOTH UPPER LIMBS .		
2.	NCV OF BOTH LOWER LIMBS .		
3.	NCV OF RT. UPPER LIMB & RT. LOWER LIMB .		
4.	NCV OF LT. UPPER LIMB & LT. LOWER LIMB .		
5.	NCV OF ALL THE FOUR LIMBS .		
6.	EMG & NCV OF RT. UPPER LIMB & RT. LOWER LIMB		
7.	EMG & NCV OF LT. UPPER LIMB & LT. LOWER LIMB		
8.	EMG & NCV OF BOTH UPPER LIMBS .		
9.	EMG & NCV OF BOTH LOWER LIMBS .		
10.	EMG & NCV OF ALL THE FOUR LIMBS		
11.	ECHOCARDIOGRAPHY		
12.	DEXA SCAN		
13.	MAMOGRAPHY		
14.	TILT TABLE ANALYSIS (HUTT )		
15.	AMBULATORY BP MONITORING		
16.	UPPER GI ENDOSCOPY		
17.	COLONOSCOPY		

ADDRESS\_\_\_\_\_

SIGNATURE OF AUTHORIZED SIGNATORY WITH SEAL/STAMP  
(NAME- )

\_\_\_\_\_  
PHONE NO. \_\_\_\_\_