

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

NO. HG / Med / Tie –up / Clinical Invest/RPH HU/2020

Howrah, dated 19 / 02 / 2020

Sub : - Floating of notice for **Expression Of Interest (EOI)** regarding Outsourcing work of clinical Investigations including Pathological, Radiological and special investigations for Railway Beneficiaries at latest CGHS rates or at lower rate or GOVT rate or AIIMS's rate or at reasonable rate as per mutual agreement for a period of **three (03) years for Rampurhat Health Unit.**

Application for Expression of Interest (EOI) is invited from the interested locally available diagnostic centers or Govt./Pvt. hospitals for extending investigative facilities of railway referred patients of Rampurhat Health Unit at latest CGHS rates of the city in concern/nearest city (HOWRAH/ KOLKATA); 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.

1.	Name of the works	Clinical Investigations including Pathological (like Blood, routine urine and stool examination), Radiological (like X-ray on chest , limbs, abdomen, Head and spine and USG examination on Abdomen, KUB, Pelvis, Prostate, Feto Placental, Scrotum, Breast and Thyroid Gland) and special investigations . However, details are available in ANNEXURE-B of prescribed format
2	Place where the prescribed format and related necessary papers to be deposited or sent by post	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 officers i.e. ACMS/Admin/HWH or ADMO/path/HWH who will be available from 12.00 hrs to 15.00 hrs. on any working day till 07/ 04 /2020.
3	Date of receipt of application	Up to 07/ 04 /2020 on any working day between 11.00 hrs to 16.00 hrs.
4	Modalities on which to be selected and bill payment system	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 Rampurhat Health Unit. Security money @ 5% and taxes as admissible will be deducted from each bill
5	Mode of selection of firms	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.
6	Credential	Document/certificate of previous experience regarding similar work executing with Govt/semi Govt organization (if any) need to be submitted.
7	Application form	1.Prescribed format of application as Annexure-A 2.Details of investigations on which rates to be quoted are marked as Annexure-B of 3 pages

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8	Bench mark criterias and other criterias to be followed	A). The firm should have :- 1) Good Infrastructures for pathological and radiological investigation . B. Human resource:- 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 C. Other criteria:- 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 RPH 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 throughout the empanelment period and will be valid till rates are revised by CGHS. 11) Upper Ceiling limit of expenditure for clinical investigation for referred patient of HU would be:- A. For single Doctor's post Rs. 5000/- p.m. B. For two doctors post Rs. 10,000/- p.m. 12) The Railway Administration reserves the right to accept or reject any or all of the Offers without assigning any reason whatsoever. (EIO may be extended after expiry of agreemental period by going further mutual agreement between Railway and the centre subject to satisfactory performance.) Eastern Railway Website – www.er.indianrailway.gov.in
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(DR. S. DAS)
 ADDL CHIEF MEDICAL SUPERINTENDENT (R)
 EASTERN RAILWAY/ HOWRAH
 For and on behalf of the President of India

ANNEXURE –A

(Page-1)

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 of the city in concern/nearest city WITH ORTHOPAEDIC HOSPITAL , HOWRAH /E.RLY FOR DOING OUTSOURCING WORK OF CLINICAL INVESTIGATIONS INCLUDING PATHOLOGICAL ,RADIOLOGICAL AND SPECIAL TYPE OF INVESTIGATIONS **for Railway beneficiaries at RPH HU** 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).

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

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

3. WE AGREE TO PROVIDE SERVICES AT LATEST CGHS(NON-NABL/NABL) RATES AS PER APPLICABLE TO THE CITY IN CONCERN/NEAREST CITY OR KOLKATA OR GOVT RATE OR AIIMS RATE OR MUTUAL RATE ARRIVED AT -----

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

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

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

7. OUR DIAGNOSTIC CENTER/HOSPITAL OFFERS TO PROVIDE FREE AMBULANCE SERVICES FOR ALL REFERRAL PATIENTS TO AND FROM AT RPH HEALTH UNIT -----

SIGNATURE

AUTHORIZED SIGNATORY

(NAME-)

ADDRESS -----

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 -----

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 AS PER ANNEXURE-B

11. OUR DIAGNOSTIC CENTER /HOSPITAL HAVE BEEN RECOGNISED FOR TREATMENT OF THE FOLLOWING
GOVT. ORGANISATION/SEMI-GOVT. ORGANISATION/ PRIVATE ORGANISATION AS PER ANNEXURE

12. WE HOPE OUR ORGANISATION WILL BE CONSIDERED FOR TIE-UP WITH ORTHOPAEDIC HOSPITAL/HOWRAH
FOR PROVIDING SERVICES TO THE RAILWAY BENEFICIARIES AT RAMPURHAT HEALTH UNIT.

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)

(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 -----

PHONE NUMBER-----

E MAIL ID-----

Whatsapp No. _____

SEAL/STAMP

ANNEXURE-B**LIST OF PATHOLOGICAL TESTS FOR RPH HU (Page-1 of Annexure- B)**

Sl. No	PATHOLOGICAL TEST		
01	ROUTINE URINE EXAMINATION		
02	ROUTINE STOOL EXAMINATION		
03	BLOOD for Hb%		
04	BLOOD FOR TLC		
05	BLOOD FOR DLC		
06	BLOOD FOR ESR		
07	BLOOD FOR Hb% , TLC, DLC, ESR		
08	BLOOD FOR MALARIA PARASITE		
09	BLOOD FOR MALARIA PARASITE, ANTIGEN (PLASMODIUM, VIVAX & FALCIPARUM)		
10	BLOOD SUGAR FASTING		
11	BLOOD SUGAR POST PRANDIAL		
12	BLOOD SUGAR RANDOM		
13	GLYCOSYLATED HAEMOGLOBIN(HBA1C)		
14	SERUM BILIRUBIN		
15	SERUM ALKALINE PHOSPHATASE		
16	SGOT		
17	SGPT		
18	TOTAL PROTEIN		
19	TOTAL CHOLESTEROL		
20	ALBUMIN		
21	GLOBULIN		
22	AG RATIO		
23	SERUM UREA		
24	SERUM CREATININE		
25	LIPIDE PROFILE-CHOLESTEROL, TRIGLYCERIDE, HDLC, VLDL		
26	WIDAL TEST		
27	IgG & IgM for dengue		
28	BLOOD TEST FOR CHIKENGUNIA		
29	NS-1 FOR DENGUE FEVER		
30	PT, INR		
31	Platelet count		
32	BTCT		
33	HbsAg		
34	HbA1C		
35	FT3FT4 TSH		
36	THS		
37	ABORh		
38	Uricacid		
39	ASO Titre		
40	RA Factor		

SIGNATURE OF AUTHORIZED SIGNATORY OF DIAGNOSTIC CENTRE WITH SEAL & STAMP

LIST OF RADIOLOGICAL INVESTIGATION FOR RPH HU

(Page -2 of Annexure-B)

S1 No.	RADIOLOGICAL TEST		
	CHEST X-Ray		
01	CHEST (PA) VIEW		
02	CHEST (AP) VIEW		
03	CHEST (LAT) VIEW		
04	CHEST (OBLIQUE) VIEW		
	ABDOMEN X-Ray		
05	STRAIGHT X-RAY (ABDOMEN IN ERECTPOSTURE(AP) VIEW		
06	K.U.B (AP) VIEW		
07	PELVIS (AP) VIEW		
	HEAD X-Ray		
08	SKULL (AP) VIEW		
09	SKULL (LAT) VIEW		
10	P.N.S(OM) VIEW		
11	MASTOIDS(LAT/OBQ) VIEW		
12	ORBIT (AP) VIEW		
13	NASAL BONE (LAT) VIEW		
14	NASOPHARYNX(LAT) VIEW		
	LOWER LIMB X-Ray		
15	HIP JOINT (AP) VIEW		
16	HIP JOINT (LAT) VIEW		
17	FEMUR (AP & LAT) VIEW		
18	KNEE JOINT (AP & LAT) VIEW		
19	LEG (AP & LAT VIEW		
20	ANKLE JOINT (AP & LAT) VIEW		
21	FOOT (AP & OBQ) VIEW		
22	TOE (AP /LAT) VIEW		
23	HEEL (LAT/AXIAL) VIEW		
	UPPER LIMB X-Ray		
24	ARM (AP&LAT) VIEW		
25	SHOULDER (AP) VIEW		
26	SHOULDER (LAT) VIEW		
27	ELBOW (AP& LAT) VIEW		
28	FOREARM (AP&LAT) VIEW		
29	WRIST (AP& LAT) VIEW		
30	SCAPHOID		
31	HAND (AP & OBQ) VIEW		
32	FINGER (AP & LAT)		
33	CERVICAL SPINE (AP) VIEW		
34	CERVICAL SPINE (LAT) VIEW		
35	SOFT TISSUE NECK (LAT) VIEW		
36	DORSAL SPINE (AP) VIEW		
37	DORSAL SPINE (LAT) VIEW		
38	DORSO- LUMBER SPINE (AP) VIEW		
39	DORSO-LUMBER SPINE (LAT) VIEW		
40	LUMBO-SACRAL SPINE (AP) VIEW		
41	LUMBO-SACRAL SPINE (LAT) VIEW		
42	SACRUM & COCCYX (AP) VIEW		
43	SACRUM & COCCYX (LAT) VIEW		
44	BOTH SACRO-ILIAC JOINTS (AP) VIEW		
45	(EACH) SACROILIAC JOINT (OBLIQUE VIEW)		

SIGNATURE OF AUTHORIZED SIGNATORY OF DIAGNOSTIC CENTRE WITH SEAL & STAMP

LIST OF RADIOLOGICAL INVESTIGATION FOR RPH HU**(PAGE-3 of Annexure-B)**

SL No	USG TESTS		
46	USG OF WHOLE ABDOMEN		
47	USG OF UPPER ABDOMEN		
48	USG OF LOWER ABDOMEN		
49	USG OF KUB & PELVIS		
50	USG OF PF LIN, PROSTATE AND RUV		
51	USG OF FETO PLACENTAL PROFILE		
52	USG OF SCROTUM (EACH)		
53	USG OF BREAST (EACH)		
54	USG OF THYROID GLAND		
	OTHERS		
55	EEG		
56	ECHO CARDIO GRAPHY (3D)		
57	ECHO CARDIO GRAPHY (2D)		

SIGNATURE OF AUTHORIZED SIGNATORY OF DIAGNOSTIC CENTRE WITH SEAL & STAMP