

Office of the Chief Medical  
Superintendent / Howrah  
ORTHOPAEDIC HOSPITAL,  
222 CHURCH ROAD,  
EASTERN RAILWAY,  
HOWRAH

EOI (EXPRESSION OF INTEREST)

Sub: EOI (Expression of Interest) towards entering in to Tie-up with CGHS empanelled Hospitals & Diagnostic Centres for Railway Medical Beneficiaries and Referral & Domiciliary care of Railway Medical Beneficiaries for Physiotherapy, Occupational Therapy and Speech Therapy at approved **CGHS rates** for referral of Railway beneficiaries under Medical Department, Howrah Division which are not available at Railway hospital.

Chief Medical Superintendent, Orthopaedic Hospital, Eastern Railway, Howrah invites the Expression of Interest from all willing CGHS empanelled Hospital & Diagnostic Centres for entering in to Tie-up for referral of Railway beneficiaries under Medical Department, Howrah Division which are not available at Railway hospital & Domiciliary care of Railway Medical beneficiaries for Physiotherapy, Occupational Therapy and Speech Therapy at approved **CGHS rates**.

For Expression of interest, the documents may be collected from office of CMS, Orthopaedic Hospital, Eastern Railway, Howrah and this EOI will be seen on the website [www.er.indianrailway.gov.in](http://www.er.indianrailway.gov.in).

The responses to be submitted to the office of Chief Medical Superintendent, Orthopaedic Hospital, Eastern Railway, Howrah preferably within one month from the date of publication of this advertisement.

Chief Medical Supdt.  
Eastern Railway/Howrah

ANNEXURE-A

**SPECIALITIES IDENTIFIED FOR TREATMENT**

1. Orthopaedic patients with difficult co-morbid conditions.
2. Neurosurgical patients.
3. Patients with vascular compromise.
4. Complicated Orthopaedic problems.
5. Plastic or Reconstructive Surgery.
6. Fasciomaxillary Surgery.
7. Polytrauma with head injury, visceral injury & ARDS (Acute Respiratory Distress Syndrome) etc.
8. Ortho Oncology.
9. Complicated General Surgical patients needing multispecialty management.
10. Complicated Cardiac and Thoracic Surgical patient.
11. Paediatric and Neonatology, NICU, PICU, Paediatric Surgery.
12. Complicated medical including respiratory, Renal cardiac cases.
13. Gynae Oncology.
14. Gynaecological and Obstetrics patients with co-existing medical complications, Ectopic Pregnancy etc.
15. Eye Emergencies and cases needing Vitreo Retinal (VR) surgeries.
16. Complicated ENT cases including ENT emergencies.
17. 24 hours Blood Bank Service.
18. Domiciliary care of Railway Medical Beneficiaries for Physiotherapy, Occupational Therapy and Speech Therapy.

Above mentioned broad head line specialities identified for railway beneficiaries treatment which are not available or not possible to dealt in this hospital.

This is for your approval please.

ACMS/Admn./HWH

CMS/HWH

ANNEXURE-B

PRESCRIBED FORMAT APPLICATION  
FOR

EXPRESSION OF INTEREST (EOI) FOR ENTERING INTO TIE UP WITH CGHS  
EMPANELLED HOSPITAL, DIAGNOSTIC CENTRES & REFERRAL & DOMICILIARY  
CARE AT APPROVED CGHS RATES FOR CASHLESS TREATMENT OF ALL RAILWAY  
BENEFICIARIES UNDER MEDICAL DEPARTMENT/HOWRAH DIVISION.

1. NAME OF THE 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 CGHS(NON-NABH/NABH) RATES AS PER  
APPLICABLE TO KOLKATA-2014 \_\_\_\_\_  
\_\_\_\_\_
4. WE AGREE TO PROVIDE THE SERVICES TO THE RAILWAY BENEFICIARIES IN  
FOLLOWING DISCIPLINES (ATTACHED ANNEXURE) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contd.... P/2.

7. OUR HOSPITAL OFFERS TO PROVIDE FREE AMBULANCE SERVICES (TYPE OF AMBULANCE) FOR ALL REFERRAL PATIENTS TO AND FROM HOWRAH AND KOLKATA  
\_\_\_\_\_
8. WE HEREBY ENCLOSE A LIST OF THE FACILITIES, WHICH ARE AVAILABLE WITH OUR HOSPITAL AS PER ANNEXURE \_\_\_\_\_
9. WE ENCLOSE THE IN HOUSE HUMAN RESOURCES/SPECIALISATIONS, WHICH ARE AVAILABLE WITH OUR 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 HOSPITAL COMPARING WITH CGHS RATES AS PER ANNEXURE \_\_\_\_\_
11. OUR HOSPITAL HAS 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.

**(All documents are to be signed and stamped by the Authorized signatory on all pages.)**

SIGNATURE  
AUTHORIZED SIGNATORY  
(NAME )

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

EMAIL-ID \_\_\_\_\_

SEAL/STAMP