UHKDU/PRO/SOGE/SVS/0240 /2023	
	UNIVERSITY HOSPITAL
	General Sir John Kotelawala Defence University

University Hospital Kotelawala Defence University Werahara ,Boralesgamuwa

Sri Lanka

T:Phone: 0112044555 Fax: 0112044592

Web:

09/10 / 2023

INVITATION TO BID AND GENERAL CONDITIONS OF TENDER

- 1. The Vice Chancellor of the General Sir John Kotelawala Defence University, as the Chairman, Department Procurement Committee invites Bid/s from prospective Bidders for Printing of Medical forms.
- **2. CLOSING DATE & TIME.** The tender will close at 1400 hrs on 18/10/2023. Any Bid submitted after the closing time of the tender will be rejected & unopened such bids will be returned to the bidder.
- 3. <u>VALIDITY OF BID.</u> of tender.

Tender No:

The bid submitted under this tender <u>must be valid for a period</u> of 120 days from the date of closing

4. BID BOND / GUARANTEE.

- (b) Submission of insufficient Bid Bond/Guarantee value or period will be considered as a "**major deviation**" and such offer will not be considered for further procurement action and will be rejected.
- **5. <u>VALUE ADDED TAX.</u>** The Bidders who bid for locally delivered items must have the VAT registration. The VAT portion must be shown separately in the price schedule in Annex "A" and VAT registration number must be indicated. If the quoted item is exempted from VAT or Bidding Company is not liable for VAT, reference number and date of relevant Act number/Gazette notification/a certificate (as applicable) **issued for the current financial year** from the Commissioner General of Inland Revenue to that effect should be submitted along with the Bid.
- 6. BID SUBMISSION. The bidder must duly sign at the last page (before Annexes) of this document indicating the name of the signatory and the name of the company & place the company common seal to confirm the acceptance of tender conditions. The Bid/s that do not include authorized signature will be rejected. The Bid/s duly signed by the bidder enclosed and sealed in an appropriate cover addressed to the following address should be sent by registered post or could be deposited in the appropriate tender box placed at University Hospital Kotelawala Defence University. Werahara (at the Main Entrance of University Hospital Kotelawala Defence University) on or before the time & date specified for the closing of tender. The tender reference number, date & time of closing tender should be indicated & underlined at the top left corner of the envelop.

 The Chairman,

Department Procurement Committee,

University Hospital Kotelawala Defence University,

Werahara,

Sri Lanka.

7. The Bid/s must be submitted in the attached schedule of prices in Annex "A" as applicable. However, bidders could use similar formats prepared with their own letter heads with all the details mentioned therein and submit in three copies along with duly signed copy of a General Conditions of tender. The Bid/s must contain Technical Literature, Pamphlets, Drawings and Quality Standard Certificate etc necessary to determine characteristics of items offered and in case of Machinery/Vehicles & Equipment, servicing and workshop data/after sales service, back up facilities or any other facilities provided by the supplier.

8. SUBMISSION OF SAMPLES/PAYMENT OF TESTING CHARGES.

When it is required to submit samples, <u>every offer</u> must be accompanied with pre - marked samples. The marking of samples <u>indicating the Bidder & Offer number</u> must be done and the samples must be handed over to the officer at same place where tender box is placed <u>on or before the closing date & time of the Bid</u>. Samples submitted after closing time of the Bid will be rejected. The documents such as Air Way Bills etc, will not be accepted in place of samples. When the testing charges are required to be paid, bidders shall pay testing charges separately <u>for all offers</u> indicated in their bid/s.

(1) <u>Samples.</u> Please submit samples.

- (2) <u>Testing Charges</u>. A sum of Rs. <u>per offer</u> must be paid to the Bursar of KDU, prior to the submission of bid and a copy of the receipt must be annexed to the bid. It is the responsibility of bidder to inform the Cashier of the Account Office to note the tender number on the receipt issued for such payments.
- **8. BID OPENING.** All duly received bids **will be opened immediately after the scheduled closing time of Bids at the same venue**. Bidders or their accredited agents could be present at the time of opening of bids.

9. PRICES.

For locally delivered items (including locally manufactured items & foreign items imported by the bidders) price must be quoted in Sri Lankan Rupees, inclusive of all charges for delivery of items to University Hospital General Sir John Kotelawala Defence University Werahara,. <u>Unit price. VAT and Total price should be clearly indicated in schedule in Annex "A"</u>. Other than VAT, all other type of taxes (eg: NBT, BTT, etc.) should not be indicated separately and should be included in unit price.

10. RESTRICTED TENDERS. Invitation to Bids are circulated among the registered suppliers with Ministry of Defence (MOD), only bids submitted by registered suppliers will be allowed for consideration. However, Chairman, Department Procurement Committee reserves the right to invite the bids from multiple combinations of Procurement Methods as stipulated in Chapter III of the Government Procurement Guideline, 2006 to ensure highest competitiveness.

- 11. PERFORMANCE BOND/GUARANTEE. A successful bidder shall furnish a Performance Bond/Guarantee in the form of "On Demand" & "Unconditional" Bank/Insurance Guarantee for a sum equivalent to 10% of the contract value for every contract that exceeds Rs. 2,000,000.00 or equivalent amount in foreign currency through a recognized Commercial Bank registered in Sri Lanka or through an Insurance Company authorized by the Insurance Board of Sri Lanka to issue such Performance Guarantee for this purpose, within two weeks from the date of notification of award. The proceeds of the Performance Bond/Guarantee shall be payable to the Vice Chancellor of the General Sir John Kotelawala Defence University as compensation for any loss resulting from the supplier's failure to complete his performance obligations under the contract. If the contracted supplier fails to deliver the items on time or fails to complete the works as per the agreed contract, THE TOTAL VALUE OF THE PERFORMANCE BOND/GUARANTEE will be forfeited. If only partial delivery is made during the agreed contract period, the corresponding value percentage of undelivered quantity from the Performance Bond/Guarantee will be forfeited.
- 12. SIGNING OF CONTRACT. The notification of award will be transmitted to the successful bidder by post, by fax or email. This notification constitutes the formation of the contract. The successful bidder should submit his written acceptance for the award and performance bond / guarantee (For awards over Rs. 500,000.00 without VAT) within 14 days of receipt of such notification. Upon acceptance of the award and furnishing of the Performance Bond/Guarantee, the successful bidder will have to enter into a formal contract with the Vice Chancellor of the General Sir John Kotelawala Defence University by signing the Contract.
- 13. DELIVERY. Preference will be given for early delivery. In case of bulk supplies for locally manufactured items, the delivery of total quantity must be completed within 120 days of signing of contract, unless mutually agreed for extended delivery period with University Hospital Kotelawala Defence University. The bidder/s must indicate the proposed delivery schedule in Annex "E". In the event of placing a purchase order with the successful bidder, the total quantity so ordered must be supplied as one consignment unless part deliveries are agreed upon in the contract. The deliveries not made as per agreed delivery schedule will be considered as bad performances by the suppliers and no extended delivery period will be authorized. Under extreme unavoidable conditions too, the Chairman, Department Procurement Committee (Vice Chancellor of the General Sir John Kotelawala Defence University) reserves the right to grant or refuse delivery period extensions only within the current financial year with or without liquidated claim for delayed deliveries and that decision will be final.
- 14. LIOUIDATED DAMAGES. In case of delivery period extensions requested by the successful bidder, a sum equivalent to 2% of the total value of the delayed supply per delay of one week or part thereof may be deducted from the payment due to the supplier from the University Hospital General Sir John Kotelawala Defence University as liquidated damages up to the maximum limit of 10% of the total value of delayed supplies.
- **PAYMENT TERMS FOR LOCALLY DELIVERED ITEMS.** Payment will be made after acceptance of items which should be subjected to a pre-acceptance inspection/testing by University Hospital General Sir John Kotelawala Defence University authorities. The delivery made to University Hospital should not be considered as quantities taken over by University Hospital General Sir John Kotelawala Defence University until items are properly accepted after pre-acceptance inspection. Any item that does not conform to the specifications or already approved sample will be rejected & it is the responsibility of the supplier to remove them from University Hospital stores/premises within 07 working days of such intimation (either verbal or written) at his own cost and replace them with items conforming to specification within one month of such rejection. The bidder shall allow approximately 60-90 days period of credit from the date of acceptance of items for Account Office, University Hospital General Sir John Kotelawala Defence University to obtain liquid cash from General Treasury & release the payment.
- 16. **RIGHTS OF THE PROCUREMENT COMMITTEE**. The Department Procurement Committee reserve the right to accept or reject whole or part of this tender and their decision will be final. The successful bidders will be notified. Information with regard to rejected or unsuccessful bids will not be communicated.

ing You

PROCUREMENT MANAGER
University Hospital Kot lawala Defence University

I/We agree to abide by the conditions of tender and undertake to supply the items as per delivery schedule mentioned in the contract, in the event of an order been placed with me/my firm/company as a result of this tender.

Name of the Company/Bidder	
Date :	Company seal

FILE NO - UHKDU/PRO/SOGE/SVS/0240/2023

SCHEDULE OF PRICES FOR LOCALLY DELIVERED ITEMS

S/N	ITEMS	UNIT	QTY	PRICE EACH SLRS	TOTAL PRICE SLRS
1	Admission History & Physical Assessment Form UHKDU/MED/MO/0001(Size A3 Both side GSM 70)	NO'S	900		
2	Admission History & Physical Assessment Form Pediatrics UHKDU/MED/PAED/MO/0001(Size A3 Both side GSM 70)	NO'S	60		
3	Admission history & physical assessment form obstetrics & gynecology UHKDU/MED/OBS/MO/0001(Size A3 Both side GSM 70)	NO'S	180		
4	Admission History & Physical Assessment Form -NICU-UHKDU/MED-NICU-MO-0001 (Size A4 Both side GSM 70)	NO'S	90		
5	Admission History & Physical Assessment Form - Day Care UHKDU/MED/DC/MO/0001(Size A4 Both side GSM 70)	NO'S	120		
6	Discharge Checklist UHKDU/MED/NUR/0003(Size A5 GSM 70)	NO'S	900		
7	Discharge Against Medical Advice UHKDU/MED/MO/0003 (Size A4 GSM 70)	NO'S	90		
8	Nursing Assessment (Pediatrics) UHKDU/MED/NUR/0006 (Size A3 Both side GSM 70)	NO'S	60		
9	Nursing Assessment (Obstetric) UHKDU/MED/NUR-0007 (Size A3 + A4 Both side GSM 70)	NO'S	120		
10	Daily Pain, Fall & Skin Assessment Sheet Pediatrics UHKDU/MED/PAED/NUR/0001 (Size A3 Both side GSM 70)	NO'S	90		
11	Daily Pain, Fall & Skin Assessment Sheet General UHKDU/MED/NUR/0010 (Size A4 Both side GSM 70)	NO'S	300		
12	Request Form for Hemodialysis UHKDU/MED/NUR/0013 (Size A4 GSM 70)	NO'S	150		
13	Informed Consent & Data Sheet –(Dental Procedures)- UHKDU/CONSENT/0001(Size A4 GSM 70)	NO'S	60		
14	Informed Consent for Endoscopic Procedures UHKDU/CONSENT/0006 (Size A4 Both side GSM 70)	NO'S	240		
15	Anesthesia Consent form (Sinhala) -UHKDU/CONSENT/00013-S (Size A4 Both side GSM 70)	NO'S	300		
16	Informed Consent form for Chemotherapy UHKDU/CONSENT/0011(Size A4 Both side GSM 70)	NO'S	300		
17	Informed Consent for Anesthesia – UHKDU/CONSENT/0013(Size A3 Both side GSM 70)	NO'S	600		
18	Mental Health Physical Restraint Form UHKDU/CONSENT/0014 (Size A4 Both side GSM 70)	NO'S	150		
19	Critical Care Discharge Summary (General) UHKDU/MED/MO/0004 –a (Size A4 Both side GSM 70)	NO'S	300		
20	Critical Care Discharge Summary UHKDU/MED/MO/0004 -b(Size A4 Both side GSM 70)	NO'S	600		
21	Intensive Care Unit Admission Form UHKDU/MED/MO/0005(Size A4 Both side GSM 70)	NO'S	180		
22	Informed consent for transfusion information on blood & component UHKDU-CONSENT-0019(Size A4 Both side GSM 70)	NO'S	600		
23	Pre & post anesthetic record UHKDU-MED-MO-007 (Size A3 Both side GSM 70)	NO'S	900		
24	Nurses' Patient Handing Over Book (100 Pages) UHKDU/MED/NUR-0020 (Size A4 Both side GSM 70)	NO'S	9		
25	Mo Handing Over Book (100 Pages) UHKDU/MED/MO/0008 (Size A4 Both side GSM 70)	NO'S	9		
26	Infection control surveillance form - UHKDU/IC/0001(Size A4 GSM 70)	NO'S	900		

27	Drug Prescription & Administration Record UHKDU/MED/MO/0023	NO'S		
	(Size A4 Both side GSM 70)		1800	
28	Nurses Assessment - UHKDU/MED/NUR/004 (Size A3 Both side	NO'S		
	GSM 70)		900	
29	Hospital Admission Form (Size A3 Both side GSM 70)	NO'S	900	
30	UHKDU (p) 035 Observation Chart (Size A4 GSM 70)	NO'S	1200	
31	UHKDU (p) 024 Blood Sugar Monitoring Chart (Size A4 GSM 70)	NO'S	1200	
32	UHKDU (p) 014 Lab Request Form (Size A5 GSM 70)	NO'S	5000	
33	Temperature Chart (Size A4 GSM 70)	NO'S	1200	
34	UHKDU (p) 034 Nurse's Note (Size A4 GSM 70)	NO'S	6000	
35	UHKDU (p) 026 Continuation Sheet (Size A4 GSM 70)	NO'S	6000	
36	UHKDU (p) 067 Drug Requesting Form –Indoor Pharmacy (Size B5	NO'S		
	GSM 70)		3000	
37	UHKDU (p) 006 Prescription form (Size A5 GSM 70)	NO'S	2000	
38	UHKDU (p) 068 Cardiology Services Request (Size A5 GSM 70)	NO'S	1500	
39	UHKDU (p) 010 Request form for Radiological Imaging (Size A4	NO'S		
	GSM 70)		2000	
40	UHKDU (p) 018 Check List (Size A5 GSM 70)	NO'S	500	
41	Request for CT Scan (Size A4 GSM 70)	NO'S	500	
42	Request for MRI Scan (Size A4 GSM 70)	NO'S	500	
	Specification is attached here with Annex "B"			
	h va gas u viii			
	DISCOUNT			
	TOTAL(AFTER DISCOUNT)			
	VAT %			
	GRAND TOTAL			

NOTE: PLEASE IF POSIBBLE PRICE FORWARD YOUR QUOTATION THOROUGH YOUR COMPANY LETTER HEAD NOTE: All form should be print on white colour paper & print in dark Green Colour font

2.	a. warranty period	:
	b. validity	:120days from the date of closing of tender
	c. payment term	:credit
	d Country of Manufacture	:
	e. brand name	:
3.	VAT Registration No. :	
l .	Name of the Company :	
5. 5.	Testing Charges Paid. : Rs Receipt No and Date : Signature of Bidder :	
7.	G	
3.	MOD registered No :	Company Seal :

PROCUREMENT MANAGER
University Hospital
General Sir John Kotelawdia Defence University



Name	
I.P. No	•
Hosp N	9 internal
AdoDY	ector Med
8000	. 13/

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DAILY PAIN, FALL & SKIN ASSESSMENT SHEET

BHT No:	Name:
Age:	Gender:
	THAT SISTERION

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PAIN ASSESSMENT & MANAGEMENT

Date	Time	Location	Character	Pre Score	Intervention	SK ASSES	1030	Date
ie i	91532	x Factor	Score Ris		Scale		RISK Facto	
	ol/i	Access	7.4 = 0		No	197111	Fistory Of Fa	
	251		25		zey	didin	minediate or sindonths	
	OM	teme	71.5 D		oVI		Secondary	
							Two or more	1
						(202	onesib Isoiben	

Assess for relief of pain – IV does: 10-15 min IM & Oral: 30-45 min Suppository: 30-45 min, Non Pharmacological Therapy: 1-2hrs

FALL ASSESSMENT - Morse Fall Risk Assessment

Date	Time	Score	Risk 21	Intervention 10	Signature
			-	Nene/aed reas/wheelshar/Nurse	
			High Risk	re < 25 - Low Risk 25 - 45 - Moderate Risk > 45	Sco
				Why Assessment: Barden Scale Total Score	3.5
Fricti	HOME	10101	viilidolvi	Sensory Indistance Activity	
Herail L	Y	Yey 1 Per	lata ano	Completely Constantly Bediast	

Score: <25 Green Sticker

25-45 Yellow Sticker >45 Red Sticker

Date	Time	Braden Score	Any sign of risk	l lines	ntervention	United	Signature
idora E	Adequate	8	18 Films	- Docesionally	Secasionally .	Sightly Umited	8
eM Appar	Inellesx 8	R (tot)	oin Li	4 requently	4 Karely Moist	No Impairment	A
				пыя	Itiate Skin Care	Score v 17 ln	1011
		Herr ot arok	N - E.J. 10 -	Risk Score 1	wol at to 21	eral Sir John Kote	awala

For Score < 17- Initiate skin care plan Risk Level : Mild Risk-15-16 Moderate Risk-13-14 High Risk ≤ 12

Revision No: 00

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Director UHKDU/MED/NUR/0010
Deputy Director

1. PAIN SCALE - VISUAL ANALOG SCALE (VAS)



2. FALL RISK ASSESSMENT SCALE

MORSE FALL RISK ASS	ESMENT		Location Char	amiT ote(TOTAL
Risk Factor	Scale	Score	Risk Factor	Scale	Score
History Of Falling; immediate or within	No	0	4. IV Access	No	0
3 months	Yes	25		Yes	20
2. Secondary Diagnosis	No	0	5. Mental Status	No	0
(Two or more medical diagnoses)	Yes	15		Yes	15
3. Ambulatory aid		o-15 miles oc	6. Gait / nist Transferring	Normal / Bed rest / immobile	0 N
Sig	Crutches / Cane /Walker	15 year	Score Ri	Weak stell	10
	None/bed rest/wheelchair/Nurse	0		Impaired	20

Score: < 25 - Low Risk 25 - 45 - Moderate Risk

> 45 - High Risk

3. Skin Assessment: Barden Scale Total Score

Sensory Perception		Moisture		Activity		Mobility		Nutrition		Friction/ Shear	
1	Completely Limited	1	Constantly Moist	1	Bedfast	1	Completely Immobile	1	Very Poor	1	Significant Problem
2	Very Limited	2	Often Moist	2	Chair fast	2	Very ADZ MAG	2	Probably Inadequate	2	Problem
3	Slightly Limited	3	Occasionally Moist	3	Walks Occasionally	3	Slightly Limited	3	Adequate	3	Potential Problem
4	No Impairment	4	Rarely Moist	4	Walks Frequently	4	No Limitation	4	Excellent	4	No Apparent Problem

For Score < 17 Initiate Skin Care Plan

Risk Level: Score 15 or 16 - Low Risk

Score 14 or 13 - Moderate risk

Score 12 or less - High risk

DELIVERY SCHEDULE

(IT IS MANDATORY TO FILL TITEM:			
ITEM :			 Q11
DURATION		QTY	
EX STOCK QTY (WITHIN 01 V	WEEK)		
01MONTH			
02 MONTHS			
03 MONTHS			
04 MONTHS			
TOTAL			
NAME OF THE BIDDER	:		
SIGNATURE OF BIDDER	:		
DATE	:		
COMPANY SEAL	:	:	

PROCUREMENT MANAGER
University Hospital
General Sir John Kotelawala Defence University
Werahera

ANNEX "C"

		SPECIA	MEN FORM OF	BID SECU	<u>JRITY</u>				
) whose i	registered office is at	(hereinafter	(herein	called "the Bidder") and We (name of bank or insurance after called "the Surety") are held and firmly bound onto the Authority") in the sum of int of which sum the Bidder and the Surety bind themselves				
		d assigns jointly and severally			and or winder come and brauer and and carety cand and another				
	Whereas		Tender and oth	er persons	to compete tenders in similar terms for the supply of and to				
Bid") in a to be und	accordanc ertaken b		nd shall provide s	ecurity to th	oses to submit to the Authority a Bid (hereafter called "the ne Authority that the Bidder will honour certain obligations tions.				
	(a) That it shall remain in full force and effect until the earliest of								
	(i) (Date), being () days from (submission date), the date stipulated by the Authority for the submission of tenders, or any prolongation of such date above notified to the Authority by the Bidder and the Surety in writing.								
	(ii) In the event of acceptance of the Tender by the Authority, the date upon which the Bidder provide performance security to the Authority in accordance with the terms of the contract thereby made between them, or								
	(b) receipt o	Subject to this Bond being ir first written demand form the			arety shall pay the full amount specified in this Bond upon				
		(i) The Bidder has with	hdrawn his Tende	r during the	e validity of this Bond, or				
		(ii) The Bidder has fail the tender within 14 days from			e security to the Authority in accordance with the terms of ard of the Tender.				
concernir liability u	ng the Te	nder on the part of the Autho			forgiveness in or in respect of neither any matter or thing a the bidder shall in any way release the Surety from any				
Authority	shall ret	efit of this Bond shall not be urn the same to the Bidder. and shall be governed by the law		ne Authorit	y and upon its ceasing to be in full force and effect the				
	I exec	uted as a deed on this () day of () 20 ()				
	For and	on behalf of the Bidder			For and on behalf of the Surety				
	Signed by				Signed by				
In the capacity of					In the capacity of				
	and by		-		and by				
	In the ca	pacity of	-		In the capacity of				
	Seal (wh	ere applicable)			Seal (where applicable)				

PROCUREMENT MANAGER
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Werahera