



JAMMU AND KASHMIR MEDICAL SUPPLIES CORPORATION LTD.

(Public Sector Undertaking of the Government of Jammu and Kashmir)

Corporate Head Office: Corporate Head Office: Plot No. 58, Friends Colony Satyam Road Trikuta Nagar Jammu
Corporate Office: Corporate Office Kashmir: Near Haj House, Bemina(190018), Srinagar
email: mdjkmcl2@gmail.com; website: www.jkmsclbusiness.com

M/s Malik Sales Agencies,
Peewari Shopping Complex Khanyar
Srinagar (Bidder)

No: JKMSCL/GM/2026-27/4363-79

Dated: 14.09.2026.

Sub: Finalization and Issuance of Rate Contract for the procurement of item "High End ICU Ventilator/Adult Pediatric/Neonatal" under "Machinery and Equipment".

Reference:

1. NIT No: JKMSCL /M&E/2025/664 dated 30.06.2025.
2. Purchase Committee meeting held on 12-08-2026.
3. Minutes issued vide No. JKMSCL/PS/MD/2026-27/141-59 dated 21-08-2026.
4. LOI No. JKMSCL/GM/2026-27/3152-57 dated 25.08.2026.
5. Agreement executed on 05.09.2026.

Sir,

In line with the decision taken by the Purchase Committee of JKMSCL in its meeting held on 12.08.2026 and notified vide its minutes referred to above, the following item/items as detailed below has/have been approved in your favour on the quoted rates in the offered documents submitted by you in response to the above referred to NIT:

1. Approved item and Rates

S. No.	Name of item	Currency	Basic Rate without Tax with Conversion (1)	Taxes (2)	Total Amount (in Rs) with taxes (1+2)
1	High End ICU Ventilator /Adult Pediatric/Neonatal Importer: M/s Getinge Medical India Pvt. Ltd. Mathuradas Vasanji Road, Marol Village, Mumbai Manufacturer: M/s Getinge Medical Sweden. Model : SERVO-U	INR	31,11,811.00	1,55,590.55	3267401.55 (Rupees thirty two lakhs sixty seven thousand four hundred one and fifty five paisa only)

2. Comprehensive Maintenance Contract (CMC)

CMC Charges for Five (05) years, applicable after expiry of warranty, are approved as under:

Year	Rate (INR)
6th year	120000.00
7th year	120000.00
8th year	120000.00
9th year	120000.00
10th year	120000.00

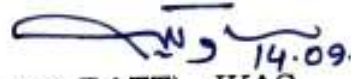
Terms and Conditions:

1. **Delivery Site:** Rates are FOR Drug warehouse of JKMSCL/any Govt. Institution(s) in the UT of J&K, wherever installation is required.
2. **Validity:** The rate contract shall remain valid for a period of two years from the date of issuance of the Contract which can be extended for a period of 90 days or till such time the new rate contract is finalized, whichever is earlier, with mutual consent of JKMSCL and successful bidder.
3. **Taxes:** As mentioned above and/or as applicable in line with the statutory provisions/Government notifications issued from time to time.
4. **Warranty:** Five Years from the date of installation.
5. **Performance Security:** Performance security equivalent to 5% of the total invoice value in the shape of Bank Guarantee in favour of FA/CAO, JKMSCL is required to be deposited within seven days from the date of issuance of Purchase Order(s) from time to time.
6. **Supplies** Within 90 days from the date of issuance of supply order(s).
7. **Penalty** In case of extension in the delivery period with liquidated damages, recovery of liquidated damages shall be made at the rate of 0.25% per day for every day of delay subject to maximum of 10%.
8. **Installation:** Installation / commissioning and necessary training for upkeep of the equipment shall be provided free of cost by the supplier/firm/agency.
9. **Availability of Spares:** Firm shall certify that the parts of the equipment will remain available at least for a period of **five years** after the year of expiry of warranty period of five years.
10. The firm shall submit an undertaking on stamp paper duly notarised/certificate to the effect that the above quoted rates are the lowest rates applicable/quoted to all Govt. / Private institutions/PSU's etc. Variation found if any, during the rate contract period by the Corporation/Intending department or any other agency shall be the sole responsibility of the Contractor/Supplier/manufacturer/importer.
11. The supplier/manufacturer/importer shall ensure to supply the Brand new and unused item(s) strictly as per specifications/sample(s) approved. Variations found, if any at the time of delivery of the equipment or at later stages by the Corporation/Intending department/any other agency which may lead to substandard or Not of standard/approved quality, shall be the sole responsibility of the supplier/ manufacturer/ importer/contractor.
12. JKMSCL is at liberty to get the feedback from the end-user department/intending department regarding the functioning of the machinery and equipment supplied by your agency. Adverse report, if any, may lead to strict action against you under rules/terms and conditions of the NIT/guidelines issued by the Govt. from time to time.
13. **Fall Clause:** The prices under contract shall be subject to price fall clause. The prices charged for the goods supplied under the contract by successful bidder shall in no event exceed the lowest price at which the successful bidder sells the goods or offers to sell the goods of identical description to any other person(s)/Organization(s) including procurement agencies or any other department of Central Govt. or State Govt. as the case may be during the period till the performance of the contract. If at any time, during the period of the contract, the bidder reduces the sales price chargeable under the contract, he shall forthwith notify such reduction to the JKMSCL, J&K as well and the price payable under the contract for the stores supplied after the date of coming into force of such reduction or sale shall stand reduced correspondingly. It implies that if the contract holder quotes/ reduces its price to render similar goods at a price lower than the contract price to any other organisation/institute in the Central/State Govt. at any time during the currency of contract including extension period, the contract price shall be automatically reduced with effect from the date of reducing or quoting lower price and the contract shall be amended accordingly.
14. **Risk Purchase:** If the bidder is unable to complete the supply within the specified or extended period, the corporation shall be entitled to purchase the goods or any part thereof from elsewhere without notice to the bidder on his (i.e., bidders) account and at his cost and risk, with the prior approval of Managing Director JKMSCL, J&K. The bidder shall be liable to pay any loss or damage which the purchasing officer may sustain by reasons of such failure on the part of the bidder.
The bidder shall not be entitled to any gain on such purchases made against default. The recovery of such loss or damage shall be made from any sums accruing to the bidder under this or any other contract with the corporation/government. If recovery is not possible from the bill and the bidder fails to pay the loss or damage within one month of the demand, the recovery of such amount or sum due shall be made from the bidder. In case supplier fails to deliver ordered goods, the risk purchases may be made at market rate from any other

firm. It is mandatory for the approved supplier to acknowledge receipt of orders within seven days from the date of dispatch of order, failing which the procuring agency will be at liberty to initiate action to purchase the items on risk purchase provision at the expiry of the prescribed supply period.

15. Orders shall only be placed on the basis of actual requirement and subject to the availability of funds under the relevant Head of Accounts.
16. The aforesaid rates shall only be applicable for supply orders placed by JKMSCL. In case, the said rates after signing of agreement is used by your firm/dealer for making supplies to any other organization/department/agency on the said rate/rate contract, you shall have to pay 7.5 % of the total invoice value of product(s) supplied by your firm/dealer as penalty, besides, your firm shall be considered for debarring/blacklisting for a period not less than 5 years.
17. Acceptance of supplies is subject to production of relevant certificate(s)/report required in the matter.
18. Supplier/manufacturer/direct importer shall have to intimate immediately to the JKMSCL, in case, the firm or any of its product was or is getting debarred/blacklisted by any of the government department or PSU or any agency or otherwise. In case, Supplier/manufacturer/direct importer conceals the fact and it comes to the notice of corporation or any other agency or department(s), in later stages, the respective firm shall be held personally responsible for the same and action as warranted under rules of land/NIT shall be initiated against the defaulter firm.
19. Payment shall be released after successful installation and commissioning of the equipment duly verified by the intending department.
20. Approved technical specifications shall remain same as per NIT (Annexure I)
21. All the terms and conditions of the NIT, Standard Procurement Procedure (SPP) of JKMSCL and LOI shall constitute an Integral part of this Rate Contract.

Yours sincerely,


(WAKEEL AHMED BATT), JKAS
General Manager (Adm.),
J&K Medical Supplies Corporation Ltd

Copy for information to the:

1. Commissioner Secretary to the Government, Health & Medical Education Department, J&K.
2. Mission Director, National Health Mission, J&K.
3. Principal, Govt. Medical College, Srinagar /Jammu/ Anantnag/ Rajouri/ Kathua/ Doda/ Handwara/ Udhampur/Baramulla.
4. Principal, Government Dental College, Srinagar/Jammu.
5. Director Finance, Health & Medical Education Department, J&K
6. Director, Health Services, Jammu.
7. Director, Health Services, Kashmir.
8. Controller, Drug & Food Control Organization, J&K.
9. Director, Family Welfare, MCH & Immunization, J&K.
10. Financial Advisor/CAO, J&K Medical Supplies Corporation Limited.
11. General Manager (K), J&K Medical Supplies Corporation Limited.
12. Dy. General Manager (P&S), J&K Medical Supplies Corporation Limited.
13. Dy. General Manager (Tendering), J&K Medical Supplies Corporation Limited.
14. Medical Officers (All drug ware houses), J&K Medical Supplies Corporation Limited.
15. Medical Officer (I.T), JKMSCL with the directions to upload the Rate Contract on DVDMS Portal.
16. Assistant Programmer (M) with the directions to upload the Rate Contract on official website of JKMSCL.
17. File

Specification of High End ICU Ventilator Adult/Paediatric/ Neonatal:

1. Must be microprocessor / Computer-controlled ventilator or latest technology.
2. Should be usable for Adult, Paediatric, Neonates and preterm babies.
3. Should work on electrical sources: External AC and in-built battery backup for minimum of 60 -90 minutes.
4. The ventilator should run on centralized air supply line and should have standalone compressor/integrated compressor with auto change over facility in case of piped air supply fails and vice versa as air supply line resume. Compressor should be same make as of ventilator.
5. The Ventilator must run on both the air compressor unit and / or on central pipeline air supply (60psig.).
6. Must have TFT touch screen of 12 inches or more, showing all the set ventilator and patient parameters, scalars, loops, mechanics etc. on clear displays. The colour touch screen should have the facility for tilt / rotate for better viewing.
7. Should have external interface with RS232 serial port.
8. OXYGEN SUPPLY: Must have in-built O2 blender with sensor with display for set and delivered O2 concentration.
9. Should provide O2 enrichment @40 to 60 psi O2 supply source with alarms for low or high pressure supply.
10. Should have provision to work on both pipeline O2 or air supply and high pressure O2 cylinder -based supply.

MODES OF VENTILATION:

11. Should have Assist. Control and SIMV modes, in both pressure and volume modes.
12. Should have provision of Non-invasive ventilation with leak compensation at all user set pressure values and NIV in all volume and pressure modes.
13. Should have additional modes such as pressure Regulated Volume Control (PRVC), APRV, Volume Support, Volume guarantee, Bi - level with PS & any other advance modes specific to manufacturer. Beside basic / common modes, should have advanced mode of ventilator (BIPAP / Bi-vent with pressure support, APRV, PRVC and Biphasic ventilation). Hybrid modes such as Auto-mode/ASV/MMV.
14. **Must have provision for all the following:**
 - a) Automatic Tube/Circuit Compensation .
 - b) CPAP (0-50 cm H2O).
 - c) Back-up Apnea ventilation.
 - d) 100% oxygen for a period of two minutes before disconnection for suctioning or other procedures.

SETTING OF VENTILATOR:**Should have at least the following range of settings:**

- a) Should be able to be programmable for Adult, Paediatric & Neonatal separately on switching on the equipment.
- b) Setting of modes should be user friendly and have volume based and pressure-based modes separately, along with provision for non-invasive ventilation in pressure modes and volume modes.
- c) Settings should be user friendly-com wheel or touch screen based.
- d) Tidal volume from 2-2000 ml (in volume control mode)
- e) Respiratory rate- up to 120 bpm.
- f) PEEP – 0 to 50 cm H2O.
- g) FiO2 – 21 to 100 %.
- h) Pressure support – 0 to 100 cm H2O. Rise time 0-2 seconds in fraction of 0.1 second or in %.
- i) Inspiration time 0.1 to 10 seconds.
- j) Apnea time interval setting from backup ventilation when in spontaneous mode.
- k) Flow 0 to 150 L/min or more.
- l) I:E ratio – 1:2 – 1:9.

DISPLAYS:

15. Must monitor / displays the following set and delivered parameters of ventilator settings:
 - i. Tidal volume – Inspiratory and expiratory.
 - ii. Minute volume – Inspiratory and expiratory.
 - iii. Peak, mean and plateau pressure.
 - iv. PEEP.

- v. I:E ratio .
 - vi. Inspiratory time
 - vii. Rate total and spontaneous
 - viii. Compliance, static & dynamic
 - ix. Resistance
 - x. FiO2 set and delivered
 - xi. Must display electrical power source (internal / external) and battery level.
 - xii. At least 3-4 user selected scalar graphic (flow, pressure and volume over time) should be displayed simultaneously on the screen with set and delivered parameter mentioned above. Should at least display 2 loops and facility of superimposing and saving of reference loop available. Should display 3-4 wave forms and 3 loops simultaneously on screen.
 - xiii. Must have features of expiratory and Inspiratory and Inspiratory hold, occlusion pressure & Vital capacity measurement / WOB. ETCO2 monitoring is optional.
 - xiv. Should be able to measure and displays PEEPi.
16. Must provide at least 72 hours trending and browsing of monitored parameters. It should have facility to store 40 screenshots and 40 recordings each of 30 seconds and export via USB.

ALARMS:

17. Must provide for user adjustable alarms for the following with built in default setting:
- i. Respiratory (high and low)
 - ii. Minute volume (high and low)
 - iii. Pressure (high and low)
 - iv. FiO2 (high and low)
 - v. Apnea
 - vi. Gas supply failure
18. Must also have warning alarms of both auditory and visual for the following:
- i. Low Oxygen pressure.
 - ii. Patient disconnects.
 - iii. Check sensor on malfunction for flow and Oxygen sensor.
 - iv. Low battery.
 - v. AC disconnects.
19. Should have provision for record of alarm for at least 72 hours or logbook of 2000 events.
20. Must have audible alarms of different tones graded for high priority, immediate priority tones with display of the nature of warning being highlighted on the display. It should display the trouble shooting of current alarm on screen.
21. Alarms of importance like disconnection circuit leak or mechanical failure should be activated within 20 secs & should be loud and well audible.
22. Should have facility to silence alarms for a period of 2 minutes.

23. MISCELLANEOUS:

24. Should have facility to measure inflection point during alveolar recruitment through pressure- volume loop/ Open Lung Tool.
25. Should not involve frequent change of expiratory valve / cassette, Oxygen sensor. The same should be covered under warranty.
- i. Should provide autoclave able expiratory cassette/ expiratory valves-02 nos/ventilator.
Flow sensor – if required, autoclavable / disposable/reusable flow sensors (based on hot wire anemometry, differential pressure or any other technology)– 100 Nos/Ventilator
 Or reusable flow sensors (based on hot wire anemometry, differential pressure or any other technology) - 20 Nos./ventilator and covered under warranty.
 - ii. O2 sensor to be covered under warranty and CAMC or paramagnetic under CAMC.
26. Should be provided with all accessories.
- i. 02 Nos. each sets of disposable masks for non-invasive ventilation (Small, Medium, Large)
 - ii. 20 Nos. HME filters with disposable circuits.
 - iii. 02 Nos. each autoclavable circuits of pediatrics and Neonatal compatible with humidifiers.
 - iv. Test lung with each unit.
 - v. Air (2 nos) and Oxygen (2 nos.) high pressure hoses
27. Should be compatible with standard disposable ventilator tubings with separate inspiratory limb having integrated spiral heating coil/thermistor technology and expiratory limbs with moisture diffusing

- membrane/integrated spiral heating coil connected with y-connectors, with or without water traps and non-invasive ventilation masks available in market. Should be supported with performance and live demonstration is mandatory.
28. Ventilator should be able to accept and work on all commonly used brands of disposable ventilator tubing's humidifier assemblies disposable or reusable parts. Rates of Disposable ventilator circuits should be fixed for a minimum of 05 (five) years.
29. The ventilator should have integrated /in-built nebulizer vibrating mesh technology which is independent of flow. Should be Autoclavable and produce 3-micron size drug particle size.
30. The ventilator should be supplied with USFDA and European CE (with four digit notified body) approved OR USFDA and CDSCO
OR USFDA and BIS certified servo controlled humidifier MR 950 along with its accessories.
31. Reusable chambers: 02 Nos.
32. Both Ventilator and compressor should be USFDA and European CE (with four digit notified body) approved OR USFDA and CDSCO
OR USFDA and BIS certified.
33. It should have advanced adaptive closed loop ventilation with continuous automated protocol implementing ability for improved patient ventilator interaction to improve weaning. It should be supported by Clinical reference and performance. Should have either of the following automated protocol for automatic weaning of patient along with the consumables for at least 05 Nos. of Patient and prices should be quoted separately valid for minimum 05 years.
Should adjust the pressure support to the lowest possible limit based on the breath-to-breath analysis of the respiratory rate, tidal volume and ETCO₂ or compliance in a particular patient
OR
Should optimize oxygenation automatically to adjust FiO₂ and PEEP to achieve a target SpO₂ and the ventilation setting should adjust MV, TV and RR automatically to achieve a target ETCO₂
OR
Should be able to assist ventilation on breath-to-breath basis according to electrically activity generated by the diaphragm.
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