



# 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: Kashmir, Near Haj House, Bemina 190018, Srinagar

email: [mdjkmscl2@gmail.com](mailto:mdjkmscl2@gmail.com); website: [www.jkmsclbusiness.com](http://www.jkmsclbusiness.com)

## C O R R I G E N D U M

In light of the representation(s) submitted by the prospective bidder(s) thereof for the finalization of Rate Contract for "Setup, Operations, Management and Maintenance of Tele ICUs in New Medical College(s)" uploaded vide NIT No. JKMSCL/TELE ICU/2025/683 Dated: 31.12.2025, the amendments in the technical specifications as recommended by the technical experts from Nation Health Mission, J&K vide their letter No. SHS/NHM/J&K/Tele-ICU/7885081/140 dated 20.04.2026 are annexed as Annexure-A (03 Pages).

Accordingly, the critical dates are extended with the approval of tender inviting authority. The critical dates are asunder:

1. Last date and time for submission of online bids: **06.05.2026** upto 1600 hrs.
2. Date and time for online opening of technical bids: **08.05.2026** at 1100 hrs.

### Please Note:

1. Those firms/bidders who have already uploaded their bids are required to re-upload their bids as per amendments and corrigendum issued thereof.
2. All the bidders are requested to keep themselves updated & submit their e-bids through e-portal as per specifications & BOQs. The amendments/modifications shall be available on e-Portal and [www.jkmsclbusiness.com](http://www.jkmsclbusiness.com).

  
(Dr. Mohd Shafi Koka)  
General Manager (K),  
J&K Medical Supplies Corporation Ltd.

No.: JKMSCL/Corg/2026/312-15

Dated: 27.04.2026.

Copy for information to the: -

1. General Manager-(Adm), J&K Medical Supplies Corporation Ltd.
2. Dy. General Manager (Tendering), J&K Medical Supplies Corporation Ltd.
3. P.A to Managing Director, J&K Medical Supplies Corporation Ltd
4. Assistant Programmer, J&K Medical Supplies Corporation Ltd for uploading on web portal.
5. File

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Annexure I to corrigendum No. \_\_\_\_\_ Dated ^/04/2026

S.No	Page No.	Clause as per NIT/clarifications sought	Amendments made thereof
1.	Page-7 & Page -33	<p><b>Aim &amp; Objectives:</b></p> <p><b>Point IX: Scope and Specifications of Hardware /Software Specifications and requirements at proposed hub / command Centre</b></p> <p>A mobile and tablet application designed to have capability for nurses and GDMOs to operate at remote ICU locations</p>	<p>A mobile/tablet responsive application or cloud-based web application designed to have capability for nurses and GDMOs to operate at remote ICU locations.</p> <p>Subject to confirmation that the proposed cloud-based web application fully complies with applicable data privacy, data security, and hosting requirements, including patient data protection norms.</p>
2.	SCOPE OF EXPANSION	<p>Special terms and conditions   Key Features involved in quoting the rates</p> <p>Separately per ICU cost of</p> <ol style="list-style-type: none"> <li>1) 6 bedded Tele ICU</li> <li>2) 6+1 bedded Tele ICU</li> <li>3) 6+3 bedded Tele ICU</li> <li>4) 6+6 bedded Tele ICU</li> </ol>	<p>Total beds across all ICUs shall be <b>12 beds/ ICU</b>. The firm shall submit cost of one ICU so that J&amp;K Govt. can decide the No. of ICUs it wants as per budget.</p>
3.	Page -25	<p><b>Default Clauses and Penalties</b></p> <p>i. Any single deviation from tender conditions, scope of work, outlined role/responsibilities herein, ISSCM guidelines, NQAS Checklists, patient safety shall invite a penalty of Rs. 05 Lacs for the 1st default &amp; Rs. 10 lacs for each subsequent default which shall be payable to the GMC within 07 days of the default. There shall be an interest of 12% per month in case of delay in depositing the penalty amount. The fixing of responsibility on the vendor shall be done by a committee under the chairpersonship of the Principal of the GMC with the MS, Accounts incharge &amp; HoD Anesthesia as members. The committee shall not take more than 07 days for fixing the responsibility of the violation by the firm.</p>	<p><b>Default Clauses and Penalties</b></p> <p>i. Any single deviation from tender conditions, scope of work, outlined role/responsibilities herein, ISSCM guidelines, NQAS Checklists, patient safety shall invite a penalty of Rs. 1% of the monthly bill for that GMC for the 1st default &amp; 3% of the monthly bill for that GMC for each subsequent default which shall be payable to the GMC within 07 days of the default. A corrective period of 10 days will be allowed during which time if no corrective measure is taken to the satisfaction of the committee. The fixing of responsibility on the vendor shall be done by a committee under the chairpersonship of the Principal of the GMC with the MS, Accounts incharge &amp; HoD Anesthesia as members with due representation from the service provider. The committee shall not take more</p>

			than 07 days for fixing the responsibility of the violation by the firm.
4.	<b>Certified Critical Care Training</b>	Training shall be done by internationally certified trainers certified by international certifying bodies like EUSIM or alike	Training shall be done by trainers certified by certifying bodies like EUSIM or equivalent recognized bodies of repute at a domestic or international level. The bidder shall submit documentary evidence establishing accreditation and equivalence of the proposed training body, including confirmation of <b>EUSIM accreditation or equivalent recognition</b> , for evaluation by the competent authority
5.	Page-47 Eligibility criteria	Pre-Qualification Criteria, Point 6   Government Experience for Critical Care Training :  Preference shall be given to the bidder with experience of working in Govt. Sector during the <b>last 03 (Three) Years</b>	Pre-Qualification Criteria, Point 6   Government Experience for Critical Care Training :  Preference shall be limited strictly to bidders with demonstrable experience in <b>critical care training services</b> provided to Government / PPP programmes during the last 3 years.  Experience limited to <b>general healthcare training</b> shall not be considered for this criterion
6.	Page-47 Eligibility criteria	<b>Pre-Qualification Criteria, Point 4   Government Experience for Critical Care Training</b>  The Bidder should have experience in providing training in the area of Critical Care Management for a minimum cumulative of 3,000 (Three Thousand) personnel* for a minimum cumulative period of last three (03) years.	<b>Pre-Qualification Criteria, Point 4   Government Experience for Critical Care Training</b>  The Bidder should have experience in providing training in the area of Critical Care Management to a minimum cumulative of 3,000 (Three Thousand) personnel* for a minimum cumulative period of three (03) years during the last three (03) years to staff who are employed by the service provider or for external parties
7.	Scope and Specification of Hardware /Software Page No 34	<b>Data Security</b> The Application should have Health Insurance Portability and Accountability Act (HIPAA) which is a world wide standard for storage and access to sensitive patient data.	<b>Data Security</b> HIPAA compliance not required. The bidder shall submit an undertaking on the affidavit duly notarized that it will comply to DPDP Act of 2023. Any violation shall be dealt with according to the Law
8.	Scope and	<b>Tele-round Features</b>	

	Specificati on of Hardware/ Software Page No 34	<input type="checkbox"/> Integration with Google's Gemini API for speech-to-text conversion.  <input type="checkbox"/> Voice recording for doctor's treatment recommendations with start, finish/next controls for each patient. <input type="checkbox"/> Manual verification and correction feature for the text converted from the doctor's speech.	<b>Tele-round Features</b>  Any standard, secure, and clinically reliable speech-to-text solution, irrespective of the vendor, in line with fair procurement practices.
9.	Camera	Trolley-Mounted Camer as vs Ceiling / Fixed Camer	There shall be two trolley-based cameras essentially for the clinical rounds. The firm can install 03 ceiling cameras or more as per requirements. In any case keeping the trolley infection free shall be responsibility of bidder.
10.	ISO 27001 vs ISO 9001 Certification	Certification : ISO 9001  <b>Clarification</b> Tele-ICU projects involving live patient data, video streams, clinical documentation, inter-facility data exchange ISO 27001 (Information Security Management System) is significantly more relevant than ISO 9001 (general quality management).	Amended as ● Including ISO 27001 as a preferred or alternative certification ● Allowing ISO 9001 in addition, not in isolation  This would strengthen the tender's focus on data security, privacy, and cyber resilience.
11.	Experience Criteria for all Consortium Partners independently demonstrate Tele-ICU operations and training experience.	The RFP requires all consortium partners to independently demonstrate Tele-ICU operations and training experience	The lead partner and supporting partner in the consortium may decide and divide the roles and responsibilities amongst themselves provided that the Tele ICUs are run as per ICCM, NQAS ICU checklist and all the conditions specified in the tender document
12.	Mandatory In-House Simulation Lab Requirement	The RFP mandates In-House Simulation Lab Requirement	Training must be from nationally accredited critical care facilities, covering <b>≥3,000 personnel cumulatively over the last 3 years</b>
13.	Average Turnover Threshold		No Change
14		Additional Requirement	Requirement of <b>3 HRS perfusionists per ICU</b> .