

// supervisory committee

// evaluation committee

**DIRECTORATE OF HEALTH SERVICES,
GOVERNMENT OF GOA
NOTICE INVITING TENDER**

TOWARDS

**PROVISION OF MANAGEMENT OF CLINICAL AND DIAGNOSTIC
SERVICES AT SUB DISTRICT HOSPITAL, CHICALIM.
(E-TENDERING MODE ONLY)**

PREAMBLE

Excellence in healthcare has always been the goal of Directorate of Health Services (DHS), Goa. With this sole objective in mind, DHS has achieved significant milestones while rendering quality healthcare to the citizens of the state. May it be about being the first state to introduce New born baby screening, MMR vaccine or reducing the IMR to single digit, DHS has always strived to provide the best healthcare facilities to the citizens of the state.

DHS takes immense pride in its achievements in primary and secondary healthcare which are comparable to international standards. However, at the same time DHS is well aware of its limitations in extending tertiary healthcare facilities to the citizens of the state. The Cottage hospital Chicalim, which is now upgraded to a Sub district hospital is an example of the fact where primary and secondary healthcare is provided to the citizens but the hospital is operating at 50% of its capacity due to limitations of manpower and experts. Complete utilisation of the same demands that tertiary healthcare facilities be extended to the same.

Limitations of infrastructure, manpower and expertise have often been a barrier to upgrading a hospital to provide tertiary healthcare facilities. However, in todays era of public private partnership (PPP) these limitations have become irrelevant. NITI Aayog through various reports has advocated strongly for PPP in healthcare so as to leverage capital, expertise and knowhow of private players in the sector.

Keeping in mind the same, DHS proposes to engage a private partner to strengthen healthcare facilities in the hospital so as to provide comprehensive medical care to the citizens of the state. Through this Expression of Interest, DHS aims to augment the gaps in diagnostics, tertiary care and other clinical services so as to guarantee quality health and wellbeing of the citizens of the state in line with the objectives of Sustainable Development Goals.

~~Govt vision~~

~~status~~

~~Expectations from the agency~~

// Budget Provision- FAC to be enclosed while submitting the file of tender notice to govt for administrative approval and concurrence from finance dept

DEFINITIONS

Unless the context requires otherwise, the following capitalized terms and expressions shall have the following meanings for the purpose of this Implementation Support Contract:

ABPM-JAY shall refer to AYUSHMAN BHARAT - PRADHAN MANTRI JAN AROGYA YOJANA managed and administered by the Ministry of Health and Family Welfare, Government of India

AB PM-JAY Beneficiary Database refers to all AB PM-JAY Beneficiary Family Units, as defined in Category under the deprivation criteria of D1, D2, D3, D4, D5 and D7, Automatically Included category (viz as Households without shelter, Destitute-living on alms, Manual Scavenger Families, Primitive Tribal Groups and Legally released Bonded Labour) and 11 defined occupational un-organized workers (in Urban Sector) of the Socio-Economic Caste Census (SECC) 2011 database of the State / UT along with the existing RSBY Beneficiary Families not figuring in the SECC Database of the Socio-Economic Caste Census (SECC) database which are resident in the State of Goa.

AB PM-JAY Guidelines mean the guidelines issued by MoHFW / NHA from time to time for the implementation of the AB PM-JAY, to the extent modified by the Tender Documents pursuant to which the Implementation Support Contract has been entered into; provided that MoHFW/ NHA or the State Health Agency may, from time to time, amend or modify the AB PM-JAY Guidelines or issue new AB PM-JAY Guidelines, which shall then be applicable to the ISA.

Annexure means an annexure to this Implementation Support Contract.

Appellate Authority shall mean the authority designated by the Government of Goa which has the powers to accept and adjudicate on appeals by the aggrieved party against the decisions of any Supervisory Committee set up pursuant to the Implementation Support Contract between the DHS and the Service Provider.

Beneficiary means a member of the AB PM-JAY Beneficiary Family Units who is eligible to avail benefits under the AYUSHMAN BHARAT - PRADHAN MANTRI JAN AROGYA YOJANA.

Bid refers to the qualification and the financial bids submitted by an eligible Service Provider pursuant to the release of this Tender Document as per the provisions laid down in this Tender Document and all subsequent submissions made by the Bidder as requested by the DHS for the purposes of evaluating the bid.

Bidder shall mean any eligible Service Provider which has submitted its bid in response to this Tender released by the DHS.

Claim means a claim that is received by the DHS from an Empaneled Health Care Provider, either online or through alternate mechanism in absence of internet connectivity.

Claim Payment means the payment of eligible Claim received by an Empanelled Health Care Provider from the SHA in respect of benefits under the Risk Cover made available to a Beneficiary.

Clause means a clause of this Implementation Support Contract.

Day Care Treatment means any Medical Treatment and/or Surgical Procedure which is undertaken under general anesthesia or local anesthesia at SDH Chicalim in less than 24 hours due to technological advancements, which would otherwise have required Hospitalization.

Days mean and shall be interpreted as calendar days unless otherwise specified.

Fraud shall refer to, mean and include any intentional deception, manipulation of facts and / or documents or misrepresentation made by a person or organization with the knowledge that the deception could result in unauthorized financial or other benefit to herself/himself or some other person or organization. It includes any act that may constitute fraud under any applicable law in India. In addition to the above, any act that is recognized by different provisions of the Indian Penal Code as fraud shall be deemed to be fraud. Such acts may include but not be limited to (a) impersonation; (b) counterfeiting; (c) misappropriation; (d) criminal breach of trust; (e) cheating; (f) forgery; (g) falsification; and (h) concealment.

Hospital IT Infrastructure means the hardware and software to be installed at the premises of SDH Chicalim for the provision of seamless transactions and services.

Hospitalization means any Medical Treatment or Surgical Procedure which requires the patient to stay at the premises of SDH Chicalim for 24 hours or more including day care treatment as defined above.

ICU or Intensive Care Unit means an identified section, ward or wing of an SDH Chicalim which is under the constant supervision of dedicated Medical Practitioners and which is specially equipped for the continuous monitoring and treatment of patients who are in critical condition, require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the general ward.

OPD refers to part of the hospital with allotted physical facilities and medical and other staffs, with regularly scheduled hours, to provide care for patients who are not registered as inpatients.

Service Provider means the successful bidder which has been selected pursuant to this bidding process and has agreed to the terms and conditions of the Tender

Document and has signed the Contract for Management of Clinical and Diagnostic service at SDH Chicalim with the State Government.

Law means all statutes, enactments, acts of legislature, laws, ordinances, rules, bye laws, regulations, notifications, guidelines, policies, and orders of any statutory authority or judgments of any court of India.

Material Misrepresentation shall mean an act of intentional hiding or fabrication of a material fact which, if known to the other party, could have terminated, or significantly altered the basis of a contract, deal, or transaction.

Medical Practitioner/Officer means a person who holds a valid registration from the medical council of any state of India and is thereby entitled to practice medicine within its jurisdiction, acting within the scope and jurisdiction of his/her license.

Medically Necessary Treatment shall mean any medical treatment, surgical procedure, day-care treatment or follow-up care, which:

- i is required for the medical management of the illness, disease or injury suffered by the Beneficiary;
- ii does not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration or intensity;
- iii has been prescribed by a Medical Practitioner; and
- iv Conforms to the professional standards widely accepted in international medical practice or by the medical community in India.

Package Rate means the fixed maximum charges for a Medical Treatment or Surgical Procedure or for any Follow-up Care that will be paid by the state government and shall be determined by the government in accordance with the guidelines under various schemes like DDSSY, PM-JAY, MPJAY. This shall be inclusive of Package rates applicable for private patients referred by the SDH Chicalim to the Service Provider.

Patient refers to a person receiving medical treatment from a Doctor or a hospital.

Private/Paying Patient refers to those patients who choose to pay for their treatment directly rather than using any insurance scheme or a referral from any government hospital in the state of Goa

Revenue to include total receivables by the Service provider from government, semi government, Insurance companies, Corporations, Private Patients (IPD & OPD), Radiology, Pathology and other charges being levelled against the activities conducted in the Sub-District Hospital, Chicalim.

Selected Bidder/ Service Provider shall mean the successful bidder which has been selected in the bid exercise and has agreed to the terms and conditions of the Tender

Document and has signed the Contract for management of clinical and diagnostic services of SDH Chicalim with the State Government.

Successful Bidder shall mean the bidder whose bid document is responsive, which has been pre-qualified and whose financial bid is the highest among all the shortlisted and with whom the State Government intends to select and sign the Contract for management of clinical and diagnostic services of SDH Chicalim

State Government refers to the duly elected Government in the State of Goa .

1.1 Interpretation

- a Any grammatical form of a defined term herein shall have the same meaning as that of such term.
- b Any reference to an agreement, contract, instrument or other document herein shall be to such agreement, instrument or other document as amended, varied, supplemented, modified or suspended at the time of such reference.
- c Any reference to an "agreement" includes any undertaking, deed, agreement and legally enforceable arrangement, whether in writing and a reference to a document includes an agreement (so defined) in writing and any certificate, notice, instrument and document of any kind.
- d Any reference to a statutory provision shall include such provision as modified or re-enacted or consolidated from time to time.
- e Terms and expressions denoting the singular shall include the plural and vice versa.
- f Any reference to "persons" denotes natural persons, partnerships, firms, companies, corporations, joint ventures, trusts, associations, organizations or other entities (in each case, whether or not incorporated and whether or not having a separate legal entity).
- g The term "including" shall always mean "including, without limitation", for the purposes of this Contract.
- h The terms "herein", "hereof", "hereinafter", "hereto", "hereunder" and words of similar import refer to this Tender as a whole.
- i Headings are used for convenience only and shall not affect the interpretation of this Contract.
- j The Schedules and Annexures to this Contract form an integral part of this Contract and will be in full force and effect as though they were expressly set out in the body of this Contract.
- k References to Recitals, Clauses, Schedules or Annexures in this Contract shall, except where the context otherwise requires, be deemed to be references to Recitals, Clauses, Schedules and Annexures of or to this Contract.
- l References to any date or time of day are to Indian Standard Time.

- m Any reference to day shall mean a reference to a calendar day.
- n Any reference to a month shall mean a reference to a calendar month.
- o Any reference to any period commencing from a specified day or date and till or until a specified day or date shall include both such days and dates.
- p Any agreement, consent, approval, authorization, notice, communication, information or report required under or pursuant to this Contract from or by any Party shall be valid and effectual only if it is in writing under the hands of a duly authorized representative of such Party.
- q The provisions of the Clauses, the Schedules and the Annexures of this Contract shall be interpreted in such a manner that will ensure that there is no inconsistency in interpretation between the intent expressed in the Clauses, the Schedules and the Annexures. In the event of any inconsistency between the Clauses, the Schedules and the Annexures, the Clauses shall prevail over the Schedules and the Annexures.
- r The rule of construction, if any, that an agreement should be interpreted against the Party responsible for the drafting and preparation thereof shall not apply to this Contract.

I N D E X

Name of Work: MANAGEMENT OF CLINICAL AND DIAGNOSTIC SERVICES AT SUB DISTRICT HOSPITAL, CHICALIM.

Sr. No.	Description	Page no.
1.	Tender Notice	
2.	Qualifying Technical Bid	
3.	Bidder to submit information	
4.	Eligibility conditions of contract	
5.	Terms & conditions of contract	
6.	Price Bid	
7.	Financial Bid	

This Tender Document contains 1- **XX** pages as detailed above

DIRECTORATE OF HEALTH SERVICES, CAMPAL PANAJI GOA

URL: www.goaenividha.goa.gov.in or www.tenderwizard.com/GOA

Email: directorhealth_goa@yahoo.co.in / **Special Cell Section, DHS**

specialcelldhs@gmail.com

Telephone No.2225646/2225668/2225540

NOTICE INVITING TENDER (N.I.T.) TOWARDS

MANAGEMENT OF CLINICAL AND DIAGNOSTIC SERVICES AT SUB

DISTRICT HOSPITAL, CHICALIM.

(E-TENDERING MODE ONLY)

NIT NO. DHS/SpCell/TENDER/

Dated:

The Director, Directorate of Health Services, Campal Panaji on behalf of the Governor of Goa, invites tenders through e-tender mode for under taking **Management of Clinical and Diagnostic Services at SUB DISTRICT HOSPITAL, CHICALIM** from well-established and reputed agency or a consortium having relevant experience in the field of undertaking **Management of Clinical and Diagnostic Services.**

No	Brief Description	E.M.D. (Refundable to non- successful bidders) (in Rs.)	Cost of tender document (non- refundable) (in Rs.)	Tender processing Fee (non- refundable) (in Rs.)	period of Contr act
1	Management of Clinical and Diagnostic Services.	2,00,000.00	15,000.00	1,500.00	33 years

SERVICE PROVIDER

DIRECTOR

2	Date & Time for application and submission of tender document.	i) Last date of online SUBMISSION for tender document is upto 5.00 p.m.
3	Date of opening of online Technical Bid	at 11:00 a.m. in the office of the Directorate of Health services, Campal-Panaji-Goa.
4	Date of opening of online Financial Bid	Will be communicated later.
5	Availability & Submission of Tender Documents	<p>For detailed tender notice, please visit our e-tender website "www.goaenividha.gov.in, www.tenderwizard.com/GOA</p> <p>The bidders are requested to examine all instructions, forms, terms, requirements & other information in the tender documents. Failure to furnish all information required as mentioned in the tender documents or submission of a proposal not substantially responsive to the tender documents in every respect will be at the Bidders risk & may result in rejection of the proposal & forfeiture of the bid</p>
6	Registration of Vendors	<p>The vendors/interested parties are required to get registered with www.tenderwizard.com/GOA. The intending bidder must have a valid digital signature to submit the bid.</p>
7	Cost of Tender Document/Processing Fee & Earnest Money Deposit	<p>Mode of Payment towards Tender Document Fee, Processing Fee & Earnest Money Deposit to be paid online through e-payment mode via: NEFT/RTGS/OTC/debit card/credit card facility /net banking with pre-printed challans available on e-tendering website and directly credit the amount to ITG account as generated by challans for NEFT/RTGS/OTC.</p> <p>Tender Document, EMD & Tender Processing Fee in the form of cheque/Demand Draft will not be accepted. Tenders which are not accompanied (e-payment/deposit proof) will not be considered unless accompanied by necessary exemption certificates issued by Govt. of Goa.</p> <p>Note: Any payments made through NEFT/RTGS/OTC will take 24 hrs for reconciliation. Hence the payments through NEFT/RTGS/OTC should be made atleast TWO BANK WORKING DAYS in advance before any due date and upload the scanned copy of the challans in the e-tender website as a token of payment.</p>

QUALIFYING/ TECHNICAL BID (scan and upload)

1) Due date & Time of online tender submission.	upto pm
2) Submission of hard copy of technical bid to Directorate of Health Services, Campal Panaji	upto am
3) Details of assignment (Presentation Copy)	
4) Earnest Money Deposit	Rs. 2,00,000/- (Rupees two lakhs only) By electronic mode only
COMPANY PROFILE	
5) Name of the Company	
a) Head Office/Registered office	
b) Complete Postal Address of the Head Office	
c) Complete Postal Address of the Local Office	
d) Name & Designation of the Contact Person	
e) Tel/Mobile No (S)	
f) Fax No. (S) & Email Address	
6) Year of commencement of business .	
7) Registration No	
8) Trade License No.	
9) PAN No.	
10) RPFC- Registration No.	
11) ESIC Registration No.	
12) Service Tax Registration and GST Registration No.	
13) Total Turnover (min Rs.5 cr.) a) FY 2016-2017 b) FY 2017-2018 c) FY 2018-2019	
14) Labour License for staff (one	As per Annexure - II

single license.)	
15) Estimated Revenue for the next 3 years	As per Annexure - I
16) Equipment specifications	As per Annexure- III

List of hospitals managed and details of services provided in Goa (Please attach additional sheets, if necessary).

The information provided by you will facilitate evaluation of your Qualifying /Technical bid

Name of the hospital and address	Phone No (s) & Fax No(s)	Period From - to	Services provided

1. Enclose performance certificate of at least 2 clients as per point 8 of stage – I.
2. Enclose Audited Balance Sheet/Profit and Loss Account for last 3 years.

SERVICE PROVIDER

DIRECTOR

GENERAL INSTRUCTION TO THE BIDDER

The bidder must submit an envelope containing the following documents:

- The fully completed “Form of Bid”;
- A covering letter along with all related documents;
- A sealed envelope labeled “Technical Proposal” which contain all related documentation;
- A sealed envelope labelled “Financial Proposal” which contains all related documentation.

Failure of submission of any of the above-stated documents will lead to the bid being declared not responsive.

Documents to be submitted

Bidder to submit/attach following information :

SN	PARTICULARS	Page No.
1	Name of the agency/company with postal address, telephone & Fax no of head office	
2	Name of the Company with local address, telephone & Fax No	
3	Name & Designation of Contact person with telephone no.	
4	Year of commencement	
5	Attested copy of Provident fund Certificate Registration	
6	Attested copy of ESIC Registration	
7	Balance Sheet FY 2016-2017	
8	Balance Sheet FY 2017-2018	
9	Balance Sheet FY 2018-2019	
10	Proof of Sole proprietor/partnership firm or a Company having existence for minimum five years.	
11	Attested copy of ISO 9001:2008 certificate valid as on the date of submission of Bid is prefer able	
12	Attested copy of PAN No.	
13	Attested copy of service Tax Registration and GST Registration	

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14	Earnest Money Deposit of Rs. 2,00,000/- to be paid by electronic mode only. Scan copy to be uploaded to e-tender web site. Payment of EMD in any other form of bank draft/DD will not be accepted.	
15	The bidder should have minimum Annual turnover of Rs. 500.00 lakhs in each of the last three years i.e. 2016-17, 17-18 & 18-19. Audited Balance Sheet along with Certificate from Chartered Accountant clearly showing the turnover.	
16	The bidder should submit a copy of Labour License- one single license. (Copy of relevant certificate is to be attached).	

17	Proof of incorporation of the company, viz. of MOA and AOA (in case of Pvt. Ltd. company) Partnership Deed (in case of partnership firm), or Registration Deed (in case of Sole proprietor ship) – (copy to be attached)	
18	The bidder should have minimum 5 years' experience of providing similar services in management of clinical and diagnostic services.	

Evaluation of Tender

- (i) The qualifying / technical bid shall be opened in the presence of their representatives on mentioned date and time at Directorate of Health services, Campal-Panaji-Goa.
- (ii) The Directorate of Health Services reserve the right to select the tendered on the basis of best possible bids received.
- (iii) The tender will be evaluated on the basis of techno-commercial parameters as given below.

Eligibility Conditions

Stage I:

The following documents duly attested shall have to be submitted failing which the tender will be rejected.

SERVICE PROVIDER

DIRECTOR

1. The bidder can be sole proprietor, partnership firm or a Company and the bidder should be registered with EPF Office & ESIC Office and
2. In case a consortium or a partnership firm participating in the bid, the Service Provider would be required to authorise **One firm (Two firms in case the partners are more than 5) as the bidder** who has to fulfil the eligibility criteria given for the Service provider.

// should have been registered under Goa Medical Practitioners Act, 2004/ Directorate of Health Services for minimum five years. The Medical Practitioners have to be registered under Goa Medical Council and the staff nurses have to be registered under INC. Proof of Certificate to be notarized and furnished.

3. A copy of ISO 9001: 2015 & NABH certificate valid as on the date of submission of Bid is preferable.
4. A copy of PAN No, Service Tax Registration to be furnished.
5. Earnest Money Deposit of Rs. 2,00,000/- by electronic mode only.
6. The bidder should have average Annual turnover of **Rs. 500.00 lakhs** in last three years i.e. 2016-17, 2017-18 & 2018-19. Audited Balance Sheet along with Certificate from Chartered Accountant clearly showing the turnover, should be attached as per the attached format.
7. Proof of incorporation of the company, viz, of MOA and AOA ((in case of Pvt. Ltd. company) Partnership Deed (in case of partner – ship firm), or Registration Deed (in case of Sole proprietorship) – (copy to be attached).
8. The bidder should have minimum **five years’ experience of providing similar services in clinical and diagnostics services. Experience certificate of such employers/ clients to be attached giving details of the nature of the various jobs executed/currently being executed.–Non fulfilment of the above criteria will disqualify the bidder.**
9. All the technical bid documents are required to be scanned and uploaded to e-tender website.
10. “The bidder should submit GST Registration Certificate”
11. The scoring for the Technical bid will be done based on the criteria mentioned in Annexure IV

Stage – II ----

1. Financial Bid will be opened of those Tenderers who are Successful in Stage – I.
2. The scoring for the Financial bid will be done based on the criteria mentioned in Annexure IV

TERMS & CONDITIONS

1. The prescribed filled-in Tender Documents Consisting of Qualifying / Technical Bid; may be placed in an envelope super scribed “Qualifying / Technical Bid”. For **“TENDER FOR MANAGEMENT OF CLINICAL AND DIAGNOSTIC SERVICES AT SUB DISTRICT HOSPITAL CHICALIM”**. All the above mentioned envelopes may be addressed to the Director, Directorate of Health Services, Campal-Panaji, Goa. On each of the aforesaid envelopes, the bidder shall also give name & complete postal address of the firm. This big size envelope may be dropped in a Tender Box at the above mentioned address. No Tender shall be accepted after prescribed due date and time.

The Qualifying /Technical bid shall submit EMD by electronic mode only. The decision of the Directorate of Health Services in this regards shall be final. Only those bidders, who qualify in Technical bids in all respects, will be considered for evaluation.

All the documents and Offer will have to be uploaded and submitted as per the E-tendering requirement. Hard copies of the technical bid in SPIRALLY BOUND AND DULY NUMBERED PAGES INDICATING THE CORRESPONDING DOCUMENT IN THE INDEX PROVIDED should reach **this office on or before due date. Non spiral bound hard copies will not be accepted. Financial bids shall not be submitted as a hard copy and need to be uploaded online only.**

2. Only those **formats** as given in the Tender Documents should be used. All sheets need to be submitted after affixing seal of the **agency/ consortium** and signature of the authorized signatory. Additional sheets, duly authenticated, may be attached to provide specifications or clarify specific issues. Alterations, if any, in the tender document should be attested properly by the bidder, failing which the tender will be rejected.
3. Any conditions / terms given in the bid by bidders on their own shall not be binding on the Directorate of Health Services, Campal. All the terms & conditions will be as given herein and no change in any terms or conditions by the bidders will be acceptable.
4. Photocopies of the documents duly attested as mentioned in stage – I which are required for verification in Qualifying / Technical bid have to be submitted by the bidding firms along with the Qualifying / Technical Bid failing which the DHS, Campal will have the right to reject the bid.
5. Bidder is requested to visit the site and get acquainted with the conditions of the services required to be provided.
6. In case acknowledgement or receipt of tender is desired (applicable only to Tenders sent through post), it should be sent under Registered Post with an acknowledgement due card.
7. The Directorate does not take any responsibility for the tender being wrongly opened before the due date, if those are not sent in the manner prescribed by the Directorate or misplaced in transit or not received in the Directorate by the stipulated date and time.
8. Tenders not strictly in accordance with the Terms and conditions as given in the Tender Documents are liable to be rejected.
9. The bidder should not have been blacklisted by any State/Central Government Organisation.
10. Canvassing in any form will be viewed seriously and if any bidder is found to be resorting to such practices, the tender of such firm will be rejected and the decision of the Directorate in this regard will be final
11. Tender (s) shall be liable to be rejected if the requisite information sought in the Tender Document is not filled up properly and correctly in the manner specified above.

12. The Director reserves the right to accept or reject any or all tenders received by it without assigning any reason what-so-ever.
13. Selected bidder would be required to enter into agreement with the Directorate. The Letter of Award of the Contract and Terms & Conditions contained in this Tender Document shall collectively form part of the agreement.
14. The agency will provide uniforms and Photo I-Cards to all Personnel deployed at sites. It will be the responsibility of the agency to ensure that all its staff at the Directorate's office report for duty in proper uniform and also display their identity cards.
15. The agency shall be responsible for conduct and behaviour of the staff deployed by it at the hospital premises. Any loss or damage to the premises movable or immovable property due to the conduct of the Service Provider's staff shall be made good by the Service Provider. The value of the loss will be decided by the Directorate based on accounting principles/ market value. The decision by the Directorate in this regard will be final and binding on the agency.
16. If found that the conduct or efficiency of any person employed by the Service Provider is unsatisfactory, the Service Provider shall have to remove the concerned person and provide a substitute within 10 days of intimation by hospitals. The decision of the Director in this regard shall be final and binding on the agency.
17. The workers employed by the Contracting agency shall be directly under the supervision, control and employment of the Service Provider and they shall have no direct connection what-so-ever with the Directorate of Health Services. The Directorate of Health Services shall have no obligation to control or supervise such workers or take any action against them, except as permissible under the law. Such workers shall also not have any claim against The Directorate of Health Services for employment or regularization of their services by virtue of being employed by the Contracting Agency against any temporary / permanent posts in DHS. But DHS will have right to supervise the services and quality of services given by the agency.
18. The bidder must supply the minimum staff as per the requirement and must be in a position to execute the job with the highest standards.

19. (i) The successful bidder/Service Provider, on acceptance of the tender by the Government shall within the period of **60 days** from the stipulated date of start of the work sign the agreement as required by Directorate of Health Services.
ii) the Service Provider or service provided should sign the agreement on a stamp paper of Rs. 1000/-. The cost of which is to be borne by the Service Provider/service provide. iii). **start atleast 40% of the mandatory services within 6 months of signing of the agreement.**
20. **The Consultants must be residing within a radius of 8km from the hospital and should be available on call whenever required.**
21. **The Service Provider must provide 24x7 coverage of the hospital with Doctors with minimum MBBS qualification**
22. **The Service Provider must provide 24x7 anaesthesia coverage**
23. **Staff Nurses should have BSc Nursing/ GNM as minimum qualification.**
24. **Electricity, water and Rent free space to accommodate 60 beds and space to house the ancillary services within the premises will be provided by SDH Chicalim.**
25. **The Service Provider has to incur all costs, relating to medicines, consumables, food served for the patients. S/he has to ensure proper sanitation/ hygienic conditions in food preparation and service.**
26. **Housekeeping and security of the assigned areas to be done by the Service Provider/ service provider**
27. **Separate Registration counter to be provided for the registration of private paying patients. Registration desk will have the facility to swap the cards under DDSSY, MPJAY, PMJAY**

The Service Provider/ service provider shall:

28. **give daily report on DDSSY, MPJAY, PMJAY patients**
29. **ensure that s/he has a valid trade license and also submit a copy of the same to DHS and renew it periodically on its own cost**
30. **Provide list of all its personnel scheduled to work in the premises of the hospital. Bidder shall be responsible for statutory compliances, payment of ESI, PF & Bonus as per current state laws.**

31. The Service Provider should agree that it is liable and responsible for and undertakes to pay wages not less than the minimum wages, allowances, and other benefits due and payable under the various applicable statutes/ regulations to the personnel employed by the bidder on the said services.
32. Shall abide by all the necessary provisions of various other Labour Laws/ Acts viz. ESI/Bonus, Workman's Compensation and any other laws and rules applicable in this regard.
33. Be responsible for verifying the antecedents of the persons deployed by him by police verification and will keep attendance and the other relevant records at its cost and will produce these on demand on any authority.
34. Ensure that he provides the employees prescribed neat and clean uniform according to season and give badges to its employees with their name and designation at his own cost and ensure that they wear the same.
35. Accommodation for the worker has to be provided by the Service Provider at his own cost.
36. Should become NABH accredited within 18 months of signing of MoU. [Undertaking Annexure]
37. shall observe sound management practices, and employ appropriate advanced technology and safe and effective equipment, machinery, materials and methods
38. shall be financially sound
39. Segregation, transport and disposal of biomedical waste shall be the sole responsibility of the Service Provider. Noncompliance would lead to penalty as per the provisions of Biomedical Waste Management Rules 2016
40. Records to be made available for inspection on demand to Director, DHS or his representative.
41. The Service Provider shall not sublet the facility to any third party
42. In the situation of outsourcing of any services, for eg. Housekeeping, security etc, the Service Provider should ensure that the concerned agency adheres to all the rules and regulations of the prevailing acts.
43. Shall submit revenue estimate for the next 3 years in the format given in Annexure I

AWARD OF CONTRACT

Evaluation of bidder for arriving at H1 rates-

1. Technical bid score of 50 marks (out of 70) shall be the qualifying score to be considered for the bid
2. Proposals will finally be ranked according to their combined technical (T_b) and financial (C_b) scores as follows:

$$B_b = T_b + (0.3) \times (C_b / C_{max} * 100)$$

SERVICE PROVIDER

DIRECTOR

Where,

B_b = overall combined score of bidder under consideration (calculated up to two decimal points)

T_b = Technical score of the bidder under consideration

C_b = Financial bid value of the bidder under consideration

C_{max} = Maximum financial bid value among the financial proposals under consideration

3. The Selected Applicant shall be the Applicant having the highest combined score. The second highest Applicant shall be kept in reserve and may be invited in its discretion for negotiations in case the first-ranked Applicant withdraws, or fails to comply with the requirements specified.
4. In case of a tie, preference will be given to the person whose C_b value is higher.

TERMS AND CONDITIONS FOR PAYMENTS

PAYMENT FROM GOVERNMENT TO THE AGENCY: PATIENTS REGISTERING UNDER GOVERNMENT REGSITRATION DESK

“ The Payment of monthly service charges to the Service Provider shall be made upon submission of monthly bills after **the scrutiny and certification of works by the Medical Superintendent/ Health Officer of the respective units based on the criteria and grading of the work**” as **per the terms and conditions of DDSSY, PM-JAY, MPJAY**

1. For patients enrolled under DDSSY scheme, the agency shall not charge the patients. The government shall make those payments to the agency as per the prevailing package rates under the DDSSY scheme for Category A hospital.
2. For patients enrolled under PM-JAY scheme, the agency shall not charge the patients. The government shall make those payments to the agency as per the prevailing package rates under the PM-JAY scheme.
3. For patients enrolled under MPJAY scheme, the agency shall not charge the patients. The government shall make those payments to the agency as per the prevailing package rates under the MPJAY scheme. **The Agency with the**

support of government authority shall be required to ensure that the hospital is empanelled under MPJAY.

4. For the patients with valid Goan residency proof, for services not covered under the above three schemes, the patient shall be charged based on the rates approved as under the **Annexure V**

PAYMENT TO BE CHARGED BY THE AGENCY: PATIENTS REGISTERING UNDER GOVERNMENT REGISTRATION DESK

1. For patients enrolled under DDSSY scheme, the agency shall not charge for the services offered to the patients for the procedures offered under the DDSSY scheme.
2. For patients enrolled under PM-JAY scheme, the agency shall not charge for the services offered to the patients for the procedures offered under the PM-JAY scheme.
3. For patients enrolled under MPJAY scheme, the agency shall not charge for the services offered to the patients for the procedures offered under the MPJAY scheme.
4. Other than the above services, if the patient wishes to avail any services from the private player they can do so by paying the charges as applicable.

PAYMENT FROM THE AGENCY TO THE GOVERNMENT

1. The agency shall be required to share the quoted percentage of the total revenue with the government.
2. The payment has to be made by the 10th day of the month following each quarter. For eg. If the first quarter will be from 1st January 2020 to 31st March 2020 and the payment for the first quarter shall be made on or before 10th April of the same calendar year.
3. Non payment of the above shall attract an interest of 8% per annum on the due amount.

COMPLIANCE OF STATUTORY OBLIGATIONS

19. The contracting agency will be required to comply with all statutory obligations from time to time emanating from this contract, such as (i) payment of wages as per Minimum Wages in force from time to time; (ii) contributions towards employees provident fund; (iii) contributions towards ESIC; (iv) Service Tax/ GST or any other statutory/ mandatory requirement from time to time.

SERVICE PROVIDER

DIRECTOR

20. In the event of violation of any contractual or statutory obligations by the Contracting agency, the agency shall be fully and solely responsible for the same. Further, in the event of any action, claim, damages, suit initiated against the Directorate by any individual agency or Government authority due to acts of the contracting agency, the agency shall be liable to make good/ compensate such claims or damages to the Directorate. As a result of the acts of the Service Provider, if the Directorate is required to pay any damages to any individual, agency or Government authority, the agency would be required to reimburse to the Directorate such amount along with other expenses incurred by the Directorate or the Directorate reserves the right to recover such amount from the payment (s) due to the agency while settling its bills OR from the amount of security deposit of the Service Provider lying with the Directorate.

WAGES TO BE PAID TO STAFF BY THE AGENCY

21. The contracting agency will be required to make payment of wages to the staff provided by it as per minimum wages force from time to time as per the prevailing acts.
22. The contracting agency will ensure payment of wages to the staff deployed by **seventh day of every month**, irrespective of the fact whether the payment of its bill submitted to DHS has been released by the Directorate or not by that date. If seventh day of a particular month happens to be a holiday, the agency may be required to make payment of wages to its staff on a working day prior to the seventh day of such month.

PENALTY FOR POOR OR INSUFFICIENT SERVICES

23. The contracting agency would be expected to maintain high standards of quality in cleanliness services in the entire office as per details given in the Tender document. It would also be required to maintain adequate stock of consumables, medicines and other essential items needed for the services to be provided. The Directorate's office designated officers or nominated supervisory committee members may make surprise checks from time to time to ascertain the quality of service being provided. Any serious lapse noticed by the said officers/ committee members would attract **minimum penalty of Rs. 10,000/-** in the first instance. On recurrence of such lapses, the Directorate may impose a penalty, as may be decided by the competent authority/ authorities or take appropriate necessary action against the contracting agency, including termination of the contract. Such decision(s) of the Directorate shall be binding on the contracting agency.

SECURITY DEPOSIT

25. The successful bidder will be required to submit to the Directorate demand draft Fixed Deposit Receipt (in original) made in favour of DIRECTORATE OF HEALTH SERVICES for a **sum of 5% of the annual expected revenue as** Performance Security. The Fixed Deposit Receipt, renewed from time to time, will be retained by the Directorate for the entire period of the contract and on termination of the contract; the Directorate will refund to the Service Provider the full security amount along with interest accrued thereon during the entire period of the contract. Alternately a Bank Guarantee may also be submitted as specified by the Directorate of the specified value.
26. If the contract is terminated by the Service Provider without giving stipulated period of notice or fails to observe the terms & conditions of the Tender, letter of Award for the Contract and the agreement signed by the Service Provider with the Directorate, the Security Deposit will be forfeited out right and Directorate reserves the right to proceed against the agency for any additional damages that the Directorate suffers as a result of breach of the aforesaid terms & condition.
27. If the Service Provider/bidder fails to furnish the security deposit within 21 days of letter of acceptance, the Directorate of Health Services shall without prejudice to any other right or remedy be at a liberty to forfeit the said EMD absolutely.

PERIOD OF CONTRACT

28. The period of contract is for **thirty three years** subject to the satisfactory performance and services of the Contracting agency which will be **evaluated in the first six months of the operations.** In the event that the Directorate finds the Service Provider not suitable / not satisfactory the Directorate reserves the right to terminate the contract without giving any notice.
29. the validity of the contract shall be initially for a period of **33** years as per the terms and conditions of the tender document and subject to production of satisfactory completion of the services by the service provider duly certified by the Directorate of Health Services can be renewable for the further period of **33** years.
30. **During the period of contract after every 5 years the Service Provider will be required to hike the share of revenue by 5%** of the agreed to percentage share of revenue at the time of signing of the agreement

TERMINATION OF THE CONTRACT

30. During the validity of the Agreement, the DHS will be free to terminate the Agreement for unsatisfactory performance by providing **6 months** advance notice of termination, in case of violation of any terms and conditions of the Agreement and non-adherence to service standards, scope etc. Similarly, the Bidder, if he so desires, will be free to terminate the Agreement by providing 90 days of advance notice and shall not be liable for any compensation.
31. If the Successful Service Provider with-draws or the services provided by the successful Service Provider are not found satisfactory (say in month or so) during the probationary period of three months from the date of commencement of the contract, DHS reserves the right to terminate the contract without giving any notice and initiate appropriate necessary action in the matter for making alternate arrangements.
32. In case of termination of the contract, the equipment brought in by the agency shall be transferred to the government.

TERMS OF PAYMENT

“ The Payment of monthly service charges to the Service Provider shall be made upon submission of monthly bills along with the certification of works by the Medical Superintendent/ Health Officer of the respective units based on the criteria and grading of the work” as per the terms and conditions of DDSSY, PMJAY, MPJAY

JURISDICTION

Any dispute arising out of this tender shall be under the jurisdiction of Estate officer of the Directorate.

SCOPE OF WORK

SPACE TO BE GIVEN BY THE GOVERNMENT TO THE PARTY

1. Total number of beds allotted to the private partner would be 60. Additional beds, if required, will be made available depending on the occupancy.
2. Space will be provided for the ancillary services in the annex building.

SERVICES TO BE PROVIDED BY THE PARTY

1. Mandatory Services

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- a. ICCU
- b. Fully Equipped Operation Theatre
- c. Anaesthesia Coverage 24x7
- d. Radiology
- e. Orthopaedics with joint replacement surgeries, Arthroscopy
- f. Paediatrics
- g. Ophthalmology with surgery
- h. ENT
- i. Dermatology
- j. Urology with Surgical Intervention
- k. Laparoscopic Gynaecology and Obstetrics Surgeries
- l. Pathological Laboratory
- m. 24x7 Pharmacy

2. Additional Services

- a. Neurology and Neurological Surgery
- b. Endoscopy with related procedures
- c. IVF
- d. Laparoscopic and general surgeries
- e. Burns unit
- f. Plastic Surgeries

3. Registration Services

The Service Provider must provide for separate registration facilities for their OPD and in-patients.

4. OPD

OPDs for the mandatory services have to be provided by the Service Provider will be conducted in the assigned OPD block. Additional services, if any, may be also be provided by the Service Provider in the assigned OPD blocks.

The service provider will Annex the schedule***

5. OT Services

The number of available OTs are two and services will be shared by the clinicians from the government and the private provider.

Likewise the Labor rooms and casualties will be shared

OT services will be used for emergency in consultation with the Medical Superintendent, Sub District Hospital Chicalim

Schedule for the planned surgeries will be Annexed*** [shared 7 days in advance with SDH Chicalim authorities]

6. HMIS

The Hospital Management Information System should include collecting, collationg and reporting data on real-time basis. The application will generate reports, in predefined format, at periodic intervals, as decided between government and agency.

Also agency should ensure that details of all transactions, real time, financial, clinical and administrative data analytics access be made available on monitoring portal and access should be made available to government for monitoring at department level.

7. Referrals

Referral to other institutions shall be audited at regular intervals. (monthly)

8. Cross Referrals

No cross referrals are allowed to any of the hospitals in the city if services are available at Sub District Hospital Chicalim

9. Ambulance

The private provider is required to provide ambulance services.

10. National Health Program

The Service Provider will be required to implement the National Health Programs

Annexure I

Projected Fixed Cost Estimate

S. No.	Type of Expenditure	No. of People	Cost per month	Cost per annum
1.	Manpower			
2.	Administrative			
3.	Marketing			
4.	Equipment			
5.	Outsourced Services			
6.	Waste management			
7.	Other services			
	Total Fixed Cost			

Projected Variable Cost Estimate

S. No.	Type of Expenditure	Cost per bed per day	Bed days per month	Cost per month	Cost per annum
1.	Linen				
2.	Food & Beverage				
3.	Napkins & Towels				
4.	Consumables				
	Total variable cost				

Projected Total Cost Summary

S. No	Type of Expenditure	Cost per month	Cost per annum
1.	Fixed Cost		
2.	Variable Cost		
3.	Total cost per month		
4.	Total cost per annum		
5.	No. of bed days per month		
6.	Total cost per bed day per month		

Projected revenue summary

S. No.	Type of revenue	No. of beds	No. of Days	Monthly cost	Annual cost
A.	Revenue from beds				
	General ward				
	Semi private room				
	Private room				
	Deluxe room				
	ICU				
	Sub-total				
B.	Revenue from other sources				
	Sub-total				
C.	Total Revenue per month				
D.	Total Revenue per annum				

S. No.	Particulars	Number	Cost
1.	Total no. of available beds	60	
2.	Average Occupancy per day (Expected)		
3.	Actual no. of occupied beds per day		
4.	Total no. of bed days per month		
	<u>Breakup of No. of beds</u>		
	General ward		
	Semi private room		
	Private room		
	Deluxe room		
	ICU		
	<u>Bed charges per day</u>		
	General ward		
	Semi private room		
	Private room		
	Deluxe room		

Annexure II

LABOUR/OTHER COMPONENT				
SN	Category of Staff	No. of Staff	Qualifications	Type of services
	Manpower:			
	Staff Nurse:			
	Reception:			
	Registration & billing:			
	Accounts:			
	RMO:			
	Administrative Staff:			
	Ayas:			
	Housekeeping:			
	Security:			
	Technician:			
	Electrician:			
	Electrical Engineer:			
	Biomedical Engineer:			
	Physiotherapist:			
	Cafeteria:			
	Laundry:			

Annexure III

EQUIPMENT				
SN	Unit	Equipment details		
	ICCU:			
	Operation Theatre:			
	Laparoscopic Instruments:			
	Radiology:			
	Dentistry:			
	Digital x ray:			
	Ultrasonography:			
	Ophthalmology:			
	Pathological Laboratory:			

ANNEXURE IV

SCORING

1. Technical bid will carry 70 marks
2. Financial bid to carry 30 marks

Evaluation Technical Bid

S. No.	Type of Service	Marks Allotted (70)	Service wise breakup	Marks breakup
1.	Clinical Services	30	ICCU	4
			Fully Equipped Operation Theatre	6
			Anaesthesia Coverage 24x7	4
			Orthopaedics with joint replacement surgeries, Arthroscopy	3
			Paediatrics	2
			Ophthalmology with surgery	2
			ENT	1
			Dermatology	1
			Urology with Surgical Intervention	2
			Laparoscopic Gynec and Obst Surgeries	2
			Neurology and Neurological Surgery	0.5
			Endoscopy with related procedures	0.5
			IVF	0.5
			Laparoscopic and general surgeries	0.5
Burns unit	0.5			

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			Plastic Surgeries	0.5
2.	Administration	1	NABH	1
3.	Diagnostic Services	25	Pathology	3
			Radiology	8
			Equipment	14
4.	Pharmacy	2		
5.	Ambulance	2		
6.	Presentation	10		

1. The bidder is must score at least 50 marks (out of 70) in the technical score to qualify for the opening of financial bid

Financial Bid

1. The bidder shall submit the quote of the percentage of the revenue that he will be sharing with the Directorate of Health Services.
2. The above quote shall not be below 5% ***
3. The highest financial bid value will score 100% marks
4. The remaining quotes shall be considered in the percentile of the highest quote.

Combined and Final Evaluation

Proposals will finally be ranked according to their combined technical (T_b) and financial (C_b) scores as follows:

$$B_b = T_b + (0.3) \times (C_b / C_{\max} * 100)$$

Where,

B_b = overall combined score of bidder under consideration (calculated up to two decimal points)

T_b = Technical score of the bidder under consideration

C_b = Financial bid value of the bidder under consideration

C_{\max} = Maximum financial bid value among the financial proposals under consideration

The final evaluation shall be done by the Committee constituted for the purpose.

The Selected Applicant shall be the Applicant having the highest combined score. The second highest Applicant shall be kept in reserve and may be invited in its discretion

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for negotiations in case the first-ranked Applicant withdraws, or fails to comply with the requirements specified.

In case of a tie, preference will be given to the person whose C_b value is higher.

ANNEXURE V

Proposed Rate Chart

Consultant Fee	Rates
General Ward	300
Semi Private	400
Private Room	500
ICU	700
OPD	400

Emergency visit will be charged at rate of Rs.1000/-

WARDS	RATE PER DAY
General Ward	950
Semi Private Room	1350
Private Room	1950
ICU	3750

WARDS	MINOR	MAJOR	SUPRA-MAJOR
General Ward	5000	8000	12000
Semi Private Room	8000	11000	17000
Private Room	10000	15000	20000
ICU	12000	17000	25000
OPD	6000	NA	NA

OT charges : 30% of Surgeon fees.

Anesthetist Fees: 30% of Surgeon fees.

Above rates will NOT BE APPLICABLE for the Patients with DDSSY / PMJY Card and for those referred from SDH, Chicalim.

Rates for Xray/USG

XRAY CHEST	500
XRAY AP/LAT	600
USG ABDOMEN	800
USG PELVIS	800
USG BREAST	750
USG TESTES	800
DOPPLER	1400
RENAL	1500

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Rates for CT

CT SCAN BRAIN	2300
CT AORTOGRAM + THORACIC/ABDOMEN	7500
CT SCAN UPPER ABDOMEN PLAIN	4000
HRCT CHEST	4000
CT PELVIS WITH BOTH HIPS	4000
CT RENAL ANGIO	6000
CT KNEE JOINT	4000
CT LONG BONES	6000

Bidder’s Undertaking

[On letterhead of the Bidder]

From

[Name of Bidder]

[Address of Bidder]

Date: [insert date], 202X

To

Dear Madam/Sir,

Subject: Undertaking Regarding Compliance with Terms of Management of clinical and diagnostic services, Sub District Hospital, Chicalim

I, [insert name] designated as [insert title] at [insert location] of [insert name of Bidder] and being the authorized signatory for and on behalf of the Bidder, do hereby declare and undertake that we have read the Tender Documents for award of Management of clinical and diagnostic services at Sub District Hospital, Chicalim.

We hereby undertake and explicitly agree that if we are selected as the Successful Bidder, we shall adhere to and unconditionally comply with the terms as set out in the Tender Notice and the final agreement.

Dated this __ day of _____, 202X

(Signature)

.....(insert name of the authorized signatory)

In the capacity of __[position]

Duly authorized to sign this Bid for and on behalf of __[name of Bidder]

Financial Bid

[On letterhead of the Bidder]

From

**[insert name of Bidder]
[insert address of Bidder]**

Date: [insert date], 202X

To

Dear Madam / Sir,

Subject: Financial Bid for the Management of clinical and diagnostic services at Sub District Hospital, Chicalim.

With reference to your Tender Documents dated (Insert Date) we, [insert name of Bidder], wish to submit our Financial Bid for the award of the Contract(s) for the Management of clinical and diagnostic services at Sub District Hospital, Chicalim in the State/UT of/ UT [insert name of the State/UT]. Our details have been set out in our Qualification Bid.

1. We hereby submit our Financial Bid, which is unconditional and unqualified. We have examined the Tender Documents, including all the Addenda.

2. We acknowledge that the Directorate of Health Services will be relying on the information provided by us in the Financial Bid for evaluation and comparison of Financial Bids received from the Eligible Bidders and for the selection of the Successful Bidder for the award of the Management of clinical and diagnostic services at Sub District Hospital, Chicalim in the State/UT of [insert name of the State/UT]. We certify that all information provided in the Financial Bid is true and correct. Nothing has been omitted which renders such information misleading and all documents accompanying our Financial Bid are true copies of their respective originals.

SERVICE PROVIDER

DIRECTOR

3. We shall make available to the Directorate of Health Services any clarification it may find necessary or require to supplement or authenticate the Financial Bid.
4. We acknowledge the right of the Directorate of Health Services to reject our Financial Bid or not to select us as the Successful Bidder, without assigning any reason or otherwise and we hereby waive, to the fullest extent permitted by applicable laws, our right to challenge the same on any account whatsoever.
5. We hereby acknowledge and confirm that all the undertakings and declarations made by us in our Qualification Bid are true, correct and accurate as on the date of opening of our Financial Bid
6. We acknowledge and declare that the Directorate of Health Services is not obliged to return the Financial Bid or any part thereof or any information provided along with the Financial Bid, other than in accordance with the provisions set out in the Tender Document.
7. We undertake that if there is any change in facts or circumstances during the Bidding Process which may render us liable to disqualification in accordance with the terms of the Tender Documents, we shall advise the Directorate of Health Services of the same immediately.

DIRECTORATE OF HEALTH SERVICES Campal – Panaji, Goa URL: www.etender.goa.gov.in or www.tenderwizard.com/GOA Email: directorhealth_goa@yahoo.co.in Telephone Phone: 2225646/2225668/2225540		
Project: Providing Clinical & Diagnostic Services Sub District Hospital Chicalim, (E-Tender Mode only)		
E-Tender Notification No: DHS/Sp.Cell/TENDER/		Dated:
SUMMARY FINANCIAL BID FOR Revenue Sharing (Quarterly)		
Name of the bidder:		
S. No	LOCATION	% Revenue Share
1.	Sub District Hospital Chicalim	

Evaluation of Technical Bid

Sr. No	Type of services	Marks
1.	ICCU	
2.	Fully Equipped Operation Theatre	

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3.	Anesthesia Coverage 24x 7	
4.	Radiology	
5.	Orthopaedics with Joint replacement surgeries, Arthroscopy	
6.	Paediatrics	
7.	Ophthalmology with surgery	
8.	ENT	
9.	Dermatology	
10.	Urology with Surgical Intervention	
11.	Laparoscopic Gynec and Obst Surgeries	
12.	Pathological Laboratory	
13.	24x7 Pharmacy	
	Total Marks	