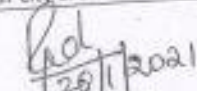


Expression of Interest Notice No. CH/BBS/Proc.of Haring Aid/21-22

NOTICE INVITING EXPRESSION OF INTERST (EOI)

For and on behalf of President of India, Central Hospital (Medical), East Coast Railway, Bhubaneswar, invites Expression of Interest (EOI) for the under mentioned work from the authorized dealers for purchase of hearing Aids for the beneficiaries of Central Hospital, Bhubaneswar duly fulfilling the eligibility criteria.

| Srl No | Description of Work | To supply Hearing Aid to the beneficiaries of Central Hospital, East Coast Railway, Bhubaneswar as per the following specification. |
|--------|---|---|
| 01. | Type of Hearing Aid | Specification |
| a. | Body Worn/Pocket Type | 1. High power, high gain Hearing Aid, two channel 2. High power for Mild, Moderate & Severe Loss 3. Top-Mounted Omni directional electrets condenser microphone for reliable operation. 4. 3-position N-H-O Switch Hearing Aids & fitting range 40-120dB |
| b. | Analogue BTE | 1. Ideal for geriatric patient, two-channel 2. Active tone control and tropicalised to last longer 3. With programmable switch & fitting range 20-90dB 4. For mild to moderately severe hearing losses. |
| c. | Digital BTE | 1. Suitable for Moderate to profound hearing loss. 2. Gain adjustment and three channel 3. Digital feedback system & fitting range 20-105dB. 4. Speech intelligibility and Telecoil. |
| d. | ITC/CIC | 1. Suitable for mild to Moderately Severe hearing loss. 2. Gain adjustment and three channel 3. Digital feedback system & fitting range 20-75dB 4. Speech intelligibility and noise reduction. |
| 02. | Period of contract | 01 (One) year i.e from 01.04.2021 to 31.03.2022 |
| 03. | Approximate procurement value during 2020-21 Up to Jan'2020 | Rs.50 000/- (fifty thousand). |
| 04. | EOI closing date and time | 25.02.2021 |
| 05. | Address of EOI recipient | Medical Director, Central Hospital, East Coast Railway, Mancheswar, Bhubaneswar, Odisha-751017. |
| 06. | Eligibility Criteria | a. The firm should have current and valid authorization from their OEM for the entire contract period. b. The firm should have facility for repair and replacement. c. The firm should ready to give 03 years warranty. d. The authorized dealer should have facility to prepare flexible ear moulds. e. The authorized dealer is to fit and modify the hearing aid as per patient's requirement. f. The dealer should be ready to give hearing aid trials up to patient's satisfaction. |
| 07. | Selection Procedure | Quotations will be invited from all the willing vendors. Transparent procedure for opening of financial bids, in presence of representative of Medical department and accounts department shall be formulated and followed. A rate contract will be issued to the successful vendor. Equipment will be supplied by the vendor on placement of specific supply order. |
| 08. | Application format | Application format (Enclosed in Annexure -I) could be downloaded free of cost from the official website of East Coast Railway, Bhubaneswar (Medical Deptt). |
| 09. | Documents | Vendors/Authorized dealers should submit all documents relating to eligibility criteria as specified in the application format, failing which their offer shall be summarily rejected. |
| 10. | Manual Expression of interest | Manual Expression of interest in prescribed format sent by post /Courier or in person shall be accepted if received in time i.e 15.02.2021. |
| 11. | Other condition | Hearing Aid supplying store should be within the Bhubaneswar city area. |


25/1/2021
Medical Director
Central Hospital/Bhubaneswar-17