



**SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES & TECHNOLOGY**

**THIRUVANANTHAPURAM—695 011, INDIA.**

(An Institute of National Importance under Govt. of India)

Phone—(91) 0471—2443152 Fax—(91)0471—2446433, 2550728

Email-sct@sctimst.ac.in Web site—www.sctimst.ac.in

No : CPP-DTM/SCTIMST/2015

Dated : 03.10.2015

**Quotation for the sale of Cryo Poor Plasma/Fresh Frozen Plasma**

Sealed quotations are invited from plasma products manufacturing companies / firms for the sale of Cryo Poor Plasma/Fresh Frozen Plasma from Department of Transfusion Medicine (Blood Bank) attached to the Hospital Wing of the Institute.

**Terms and Conditions:**

1. The firm should have a valid license for manufacturing blood products. The firm should furnish attested photocopy of License for manufacturing blood products approved by the Licensing authority.
2. They should produce a NOC from Drug Controller General, India for collecting excess plasma from licensed blood bank.
3. SCTIMST has no obligation to provide plasma periodically to the firm. But they should collect it whenever SCTIMST informs them.
4. The cost of Plasma as per the agreed rate/Invoice should be deposited either in the Cash Counter of the Institute or by way of Demand Draft in favour of Director, SCTIMST, payable at Trivandrum or the Institute may decide to obtain plasma products for the value of CPP.
5. The cost of secondary packing material and logistics should be borne by the company.
6. SCTIMST will not take any responsibility for litigation or legal obligation in case of any transfusion transmitted infection status of plasma prepared by SCTMST and the company should attach an Indemnity Certificate in this regard.

**TENDER SUBMISSION:**

1. Sealed Quotations super subscribing "Quotation for the sale of Cryo Poor Plasma/Fresh Frozen Plasma" is to be submitted either by post or by hand addressed to the Office of Medical Superintendent, SCTIMST, Thiruvananthapuram-11.
2. The bid should be submitted in the letterhead of the company/firm along with the following documents :
  - A. Name, Address, Telephone Number, Fax Number, e-mail address of the firm and of the Managing Director / Partners / Proprietor.
  - B. Attested photocopy of License for manufacturing blood products approved by the Licensing authority.

- C. NOC from Drug Controller General, India for collecting excess plasma from licensed blood bank.
  - D. EMD of ₹ 5000/-(Rupees Five thousand only) is to be remitted by way of Demand Draft in favour of the Director SCTIMST, payable at Trivandrum
  - E. Indemnity letter
  - F. Acceptance of Agreement format
  - G. Offer for Cryo Poor Plasma/Fresh Frozen plasma.
3. The bids should reach the Office of Medical Superintendent, SCTIMST on or before **17.10.2015, 1.00 P M**. Late tenders will be rejected.
  4. Date of opening of bid : **17.10.2015 at 3.00 P M**,  
Venue - **Office of Medical Superintendent, SCTIMST**
  5. The selected firm shall enter into an agreement with SCTIMST in Kerala Stamp Paper worth Rupees Five hundred only.
  6. The Director of this Institute reserves the right to accept or reject any or all the tenders without assigning any reasons whatsoever.

**Sd/-**  
**DIRECTOR**