

GOVERNMENT OF SINDH
REHABILITATION DEPARTMENT
MOBILE DIAGNOSTIC & EMERGENCY HEALTHCARE
SERVICES (MD&EHS)



Bidding Documents

For

**OPERATION & MAINTENANCE OF TEN (10) MOBILE
DIAGNOSTIC SERVICES FOR BREAST CANCER (MDSBC)
UNITS**

Khansa
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Government of Sindh, Karachi

INVITATION TO BID

IMPORTANT NOTE

Bids must be submitted electronically through E-PADS SPPRA website, any clause in this tender document asking for manual bid submission must be replaced and read as “through SPPRA E-PADS website”.

Only bid security in shape of pay order / demand draft in favor of the Director, MD&EHS, Rehabilitation Department, Karachi is to be submitted in original on or before the last date & time for electronics bid submission which should be uploaded on SPPRA E-PADS website as well as original of the same should be deposited in sealed envelope with labeled FINANCIAL PROPOSAL to the Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS).

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1. Instructions to Bidders (ITB)

1.1. Introduction

The Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS) is established in 2017 for the supervision and monitoring of the Mobile hospitals. There are total three Mobile Hospital Projects, two of them have completed and are operational in field since 01.06.2016 and 01.04.2018 under the Directorate of MD&EHS, Rehabilitation Department.

26 Mobile Hospitals from two Project namely **Mobile Emergency Healthcare Units (MEHCU)** and **Mobile Diagnostic Services for Breast Cancer (MDSBC)** providing free medical treatment facilities to people of remote and far-flung areas of 11 Districts of Sindh Province on regular basis as well as in the calamities and emergencies. The operational services of these Units are on outsourced module. The contractor will be responsible for operation and provision of medicines, Doctors (male & female), Technicians, Nurses (male & female) & other auxiliary staff. Operational cost is provided by Government of Sindh and are supervised and monitored through a Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS) under Rehabilitation Department Government of Sindh.

The Male & Female OPDs are established separately on a 10 wheeler Hino Truck but operate combined as a single unit to provide complete Diagnostic and Treatment facilities with free medicines in far flung remote areas of Sindh where no health services are available.

FACILITIES GIVEN IN MOBILE HOSPITALS:

- I. Laboratory test facilities. (Blood Sugar R/F) LFT, Blood Urea, Creatinine Uric Acid, LFT, Serum Bilirubin Total, (D&I) ALT,(SGPT) Alkaline Phosphates, Lipid profile, (total Cholesterol) Triglycerides HDL cholesterol, LDL Cholesterol, Total lipid, HBsAg, B & C, HIV, Blood complete picture, SR, Blood for MP.
- II. X-Ray facilities.
- III. Ultrasound facilities.
- IV. Nebulization and pulmonary functions facility.
- V. Incubator facilities, infant warmer, Phototherapy unit.
- VI. ECG,
- VII. Minor General Surgery/ Minor Gynecology surgery
- VIII. Initial Eye diseases diagnose
- IX. Initial ENT diseased diagnose.

DAILY OPERATION MECHANISM OF MOBILE HOSPITALS

OPD service at patients' door step is provided with free medicines, complete Laboratory Tests, Diagnostic equipment like Ultrasound, ECG, X-Ray, Mammography, Nebulizer, Suction, Otoscope, Laryngoscope and Minor Surgery.

Total field staff in each unit (Male & Female) are 14 Nos. who perform field operation 25 working days in every month, 1st & 3rd Saturdays of each month are off for sanitation, servicing and disinfection of all units. Monthly visit schedule is prepared in consultation with concerned District Health Officer and Deputy Commissioner before the start of every month. Average of total number of patients seen / examined per day by each unit are 200.

Note: It is pertinent to mention that; the Service Provider may deploy Mobile Units within the mentioned expected Districts / Project Areas / Divisions as per directions of the Procuring Agency. However, procuring agency may include or exclude any other districts / project area as per the requirement of the people / patients. Procuring agency, as a special assignment, may also use these Mobile units in other provinces as per the directions of the Government / Competent Authority or in case of any emergency / pandemic situation.

1.2. Scope of Bid

The Procuring Agency (PA), as indicated in the Bid Data Sheet (BDS) invites Bids from Bidders for provision of **OPERATION AND MAINTENANCE of (10) TEN MOBILE DIAGNOSTIC SERVICES FOR BREAST CANCER (MDSBC) UNITS** Services under Directorate of Mobile Diagnostic and Emergency Healthcare Services, Rehabilitation Department. The successful Bidders will be expected to provide the services for the specified period and timeline(s) as stated in the BDS.

1.3. Source of Funds

Government of Sindh.

1.4. Eligible

- i) The Invitation to Bids is open to all Service Providers i.e. association of firms/companies/sole proprietor, Joint Venture (JV) registered with relevant Registration Authorities and Tax Departments/Authorities (Income Tax, Sales Tax & Sindh Sales Tax etc.), except as provided hereinafter.
- ii) The firms meets the mandatory as well fulfill the evaluation criteria are eligible for the participation, documentary evidence must be attached.
- iii) Bidders (s) which have worked with the Procuring Agency and whose services have been terminated on account of non-satisfactory performance are not eligible for this tender.
- iv) Bidders should not be associated, or have been associated in the past, directly or indirectly, with a firm or any of its affiliates which have been engaged by the Procuring Agency to provide consultancy services for the preparation of specifications, and other documents to be used for the procurement of the services to be purchased under this Invitation to Bid.
- v) Bidders shall not be under a declaration of blacklisting by any Government department/other Procuring Agency or by Sindh Public Procurement Regulatory Authority (SPPRA).
- vi) Government-owned enterprises may participate only if they are duly/legally authorized in this regard by the respective/relevant competent forum/authority.

1.5. A Bidder may be ineligible if –

- (a) The Bidder is declared bankrupt or, in the case of company or firm, insolvent;
- (b) payments in favor of the Bidder is suspended in accordance with the judgment of a court of law other than a judgment declaring bankruptcy and resulting, in accordance with the national laws, in the total or partial loss of the right to administer and dispose of its property;
- (c) legal proceedings are instituted against such Bidder involving an order suspending payments and which may result, in accordance with the national laws, in a declaration of bankruptcy or in any other situation entailing the total or partial loss of the right to administer and dispose of the property;

- (d) The Bidder is convicted, by a final judgment, of any offence involving professional conduct;
- (e) The Bidder is debarred and blacklisted due to involvement in corrupt and fraudulent practices.
- (f) The firm/Service Provider and contractor is blacklisted/debarred by any international organization.

xii) Bidders shall provide to the Procuring Agency evidence of their eligibility, proof of compliance with the necessary legal requirements to carry out the contract effectively.

xiii) Bidders shall provide such evidence of their continued eligibility satisfactory to the Procuring Agency, as the Procuring Agency shall reasonably request.

1.6. Cost of Bidding

The Bidder shall bear all costs associated with the preparation and submission of its Bid, and the Procuring Agency named in the Bid Data Sheet, hereinafter referred to as "the Procuring Agency," will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the Bidding process.

1.7. Work Plan/Deployment Plan

The Bidder shall be responsible for the provision of bids as per work plan/deployment plan formulated by the procuring agency and procuring agency may also, from time to time amend the same as per its requirement.

2. THE BIDDING DOCUMENTS

2.1. Content of Bidding Documents

- i) The services required, Bidding procedures, and contract terms are prescribed in the Bidding documents.
- ii) The Bidder is required to examine all instructions, forms, terms and conditions, and scope of services in the Bidding documents. Failure to furnish all information as required by the Bidding documents or to submit a Bid not substantially responsive to the Bidding documents in every respect will be at the Bidder's risk and may result in the rejection of its Bid.
- iii) The Procuring Agency is not responsible for the completeness of the Bidding Documents and their addenda, if they were not obtained directly from the Procuring Agency or from its website or website of SPPRA. Re-confirming from the Procuring Agency that all pages/ contents have been properly and clearly received is the prime responsibility of the Bidder.

2.2. Clarification of Bidding Documents

- i) Clarification, revision, addition or deletion, in the bid documents may be made by the authority before the submission and opening of Tender in the form of Addendum/Corrigendum. This will be made only by formal Addendum/Corrigendum issued by the procuring agency and will become part of the contract documents. Each Addendum shall be signed by the vendor/firm and returned with Tender documents.

3. PREPARATION OF BIDS

3.1. Language of Bid

The Bid prepared by the Bidder, as well as all correspondence and documents relating to the Bid exchanged by the Bidder and the Procuring Agency shall be written in the language specified in the Bid Data Sheet.

3.2. Bid Form

The Bidder shall complete the Bid Form and the appropriate Price Schedule (Financial Bid) furnished in the Bidding documents.

3.3. Bid Prices

The Bidder shall indicate on the appropriate Price Schedule (in PKR) the units (where applicable) and total bid price of the goods/services it proposes to supply/execute under the contract.

3.4. Bid Currencies

- i) Prices shall be quoted in PKR unless otherwise specified in the Bid Data Sheet.
- ii) The Bidders must adhere to the minimum wage rate (notified by Labour & Human Resource Department) and all applicable taxes (imposed by FBR/PRA/any other government organization) while preparing financial bid.

3.5. Documents Establishing Bidder's Eligibility and Qualification

- i) Bidder shall furnish, as part of its Bid, documents establishing the Bidder's eligibility to Bid and its qualifications to perform the contract if its Bid is accepted.
- ii) The documentary evidence of the Bidder's eligibility to Bid shall establish to the Procuring Agency's satisfaction that the Bidder, at the time of submission of its Bid, is eligible as defined under clause 15 and 16.
- iii) The documentary evidence, of the Bidder's qualifications to perform the contract if its Bid is accepted, shall establish to the Procuring Agency's satisfaction:
 - (a) that the Bidder has the financial, technical capability necessary to perform the contract;
 - (b) that the Bidder meets the qualification criteria listed in the Mandatory Criteria.

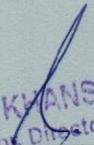
3.6. Bid Security

- i) Bidder will attach a copy of **BID SECURITY (amount hidden)** (as per amount mentioned under bidding Data Sheet) in shape of pay order or Demand Draft issued from any scheduled Bank of Pakistan in favor of Director, Mobile Diagnostic & Emergency Healthcare Services with technical bid proposal.
- ii) The bid security will be forfeited to the Government, if the bidder withdraws his bid after opening and before the expiry of the bid validity period or fails to sign the contract in stipulated time if the bid is accepted.
- iii) Conditional tender and tender without bid security shall not be considered.
- iv) Arithmetical errors will be rectified on the following basis. If there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail, and the total price shall be corrected. *If the bidder does not accept the correction of the errors, its bid will be rejected, and its bid security may be forfeited.*
- v) The Bid security shall be in Pakistan Rupees and shall be in one of the following forms:
 - (a) Demand Draft (DD), Pay Order (PO)
- vi) Bid shall remain valid for period of 90 days after the date of technical opening and same may be extended in terms of Rule-38(2)(3)(4) of SPPRA Rules.

3.7. Period of Validity of Bids

- i) Bids shall remain valid for the period specified in the Bid Data Sheet after the date of Bid opening prescribed by the Procuring Agency. A Bid valid for a shorter period may be rejected by the Procuring Agency as non-responsive.
- ii) In exceptional circumstances, the Procuring Agency may solicit the Bidder's consent to an extension of the period of validity. The request and the responses thereto shall be made in writing (or by email).

3.8. Format and Signing of Bid


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- i) The Bidder shall submit typed Bid in original and shall be signed by the Bidder to bind the Bidder to the contract. All pages of the Bid, shall be initialed and stamped by the person signing the Bid.
- ii) Any interlineation, erasures, or overwriting shall not be valid and such Bid shall be rejected.

3.9. Minimum Wage rates/all applicable taxes

The Bidders must adhere to the minimum wage rate (notified by Labour & Human Resource Department) and all applicable taxes (imposed by FBR/PRA/GST/any other government organization) while preparing financial bid.

4. SUBMISSION OF BIDS

Bids must be submitted electronically through E-PADS SPPRA website, any clause in this tender document asking for manual bid submission must be replaced and read as "through SPPRA E-PADS website".

Only bid security in shape of pay order / demand draft in favor of the Director, MD&EHS, Rehabilitation Department, Karachi is to be submitted in original on or before the last date & time for electronics bid submission which should be uploaded on SPPRA E-PADS website as well as original of the same should be deposited in sealed envelope with labeled FINANCIAL PROPOSAL to the Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS).

Note: The envelopes shall be sealed and marked in accordance with the bidding procedure adopted by Procuring agency.

4.2. Deadline for Submission of Bids

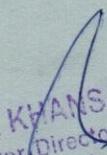
- i) Bids must be received by the Procuring Agency at the address specified under BDS no later than the time and date specified in the Bid Data Sheet.
- ii) Bids shall be received by the Procuring Agency at the address specified under BDS no later than the date and time specified in the BDS.

4.3. Late Bids

- i) Any Bid received by the Procuring Agency after the deadline for submission of Bids prescribed by the Procuring Agency will be rejected and returned unopened to the Bidder.
- ii) The Procuring Agency shall not consider for evaluation any Bid that arrives after the deadline for submission of Bids.
- iii) Any Bid received by the Procuring Agency after the deadline for submission of Bids shall be declared late, recorded, rejected and returned unopened to the Bidder.

4.4. Modification and Withdrawal of Bids

- i) Not allowed after deadline prescribed for submission of Bids
- ii) No Bid may be withdrawn in the interval between the deadline for submission of Bids and the expiration of the period of Bid validity specified by the Bidder on the Bid Form. Withdrawal of a Bid during this interval may result in the Bidder's forfeiture of its Bid security (along with other remedies available under SPPRA rule)


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5. OPENING AND EVALUATION OF BIDS

5.1. Opening of Bids by the Procuring Agency

- i) The Procuring Agency will open the Technical Proposals in public at the address, date and time specified in the BDS in the presence of Bidders' designated representatives who choose to attend and other parties with a legitimate interest in the Bid proceedings. The Financial Proposals will remain unopened and will be held in custody of the Procuring Agency until the time of their opening, as specified in BDS.
- ii) The envelopes holding the Technical Proposals shall be opened one at a time, and the following read out and recorded: (a) the name of the Bidder; (b) Any other details as the Procuring Agency may consider appropriate.
- iii) Bids not opened and not read out at the Bid opening shall not be considered further for evaluation, irrespective of the circumstances.
- iv) Bidders are advised to send in a representative with the knowledge of the content of the Bid who shall verify the information read out from the submitted documents. Failure to send a representative or to point out any unread information by the sent Bidder's representative shall indemnify the Procuring Agency against any claim or failure to read out the correct information contained in the Bidder's Bid.
- v) No Bid will be rejected at the time of Bid opening except for late Bids which will be returned unopened to the Bidder.
- vi) The Procuring Agency shall prepare minutes of the Bid opening. The record of the Bid opening shall include, as a minimum: the name of the Bidder and the Bidders' representatives who are present shall be requested to sign on the attendance sheet. The omission of a Bidder's signature on the record shall not invalidate the contents and affect the record.
- vii) A copy of the minutes of the Bid opening shall be furnished to Bidders upon request.

5.2. Confidentiality

- i) Information relating to the examination, clarification, evaluation and comparison of Bids and recommendation of contract award shall not be disclosed to Bidders or any other persons not officially concerned with such process until the time of the announcement of the respective evaluation report in accordance with the requirements.
- ii) Any effort by a Bidder to influence the Procuring Agency processing of Bids or award decisions may result in the rejection of its Bid.

5.3. Preliminary Examination

- i) The Procuring Agency will examine the Bids to determine whether they are complete, whether any computational errors have been made, whether required sureties have been furnished, whether the documents have been properly signed, and whether the Bids are generally in order.
- ii) Arithmetical errors will be rectified on the following basis:
 - a. If there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail, and the total price shall be corrected. If the Service Provider does not accept the correction of the errors, its Bid may be rejected, and its Bid security may be forfeited.
 - b. If there is a discrepancy between words and figures, the amount in words will prevail.
- iv) If a Bid is not substantially responsive, it will be rejected by the Procuring Agency and may not subsequently be made responsive by the Bidder by correction of the non-conformity.
- v) Prior to the detailed evaluation of Bids, the Procuring Agency will determine whether each Bid:

- a) meets the eligibility criteria has been prepared as per the format and contents defined by the Procuring Agency in the Bidding Documents;
 - c) has been properly signed;
 - d) is accompanied by the required securities; and
 - e) Is substantially responsive to the requirements of the Bidding Documents.
- The Procuring Agency's determination of a Bid's responsiveness will be based on the contents of the Bid itself.

5.4. Examination of Terms and Conditions; Technical Evaluation

- i) The Procuring Agency shall examine the Bid to confirm that all terms and conditions specified in bid have been accepted by the Bidder without any material deviation or reservation.
- ii) The Procuring Agency shall evaluate the technical aspects of the Bid submitted to confirm that all requirements specified in bid.
- iii) If after the examination of the terms and conditions and the technical evaluation, the Procuring Agency determines that the Bid is not responsive in accordance, it shall reject the Bid.

5.5. Correction of Errors

- i) Bids determined to be substantially responsive will be checked for any arithmetic errors. Errors will be corrected as follows: -
 - a) if there is a discrepancy between unit prices and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail, and the total price shall be corrected, unless in the opinion of the Procuring Agency there is an obvious misplacement of the decimal point in the unit price, in which the total price as quoted shall govern and the unit price shall be corrected;
 - b) if there is an error in a total corresponding to the addition or subtraction of sub-totals, the sub-totals shall prevail and the total shall be corrected; and
 - c) Where there is a discrepancy between the amounts in figures and in words, the amount in words will govern.
 - d) Where there is discrepancy between grand total of price schedule and amount mentioned on the Form of Bid, the amount referred in Price Schedule shall be treated as correct subject to elimination of other errors.
- ii) The amount stated in the Bid will, be adjusted by the Procuring Agency in accordance with the above procedure for the correction of errors. The concurrence of the Bidder shall be considered as binding upon the Bidder. If the Bidder does not accept the corrected amount, its Bid will then be rejected, and the Bid Security may be forfeited.

5.6. Evaluation of Bids

- i) The Procuring Agency will technically evaluate and compare the substantially responsive Bids, as per the Evaluation Criteria in the bid documents.
- ii) The financial evaluation of a Bid will be on the basis of form of Price Schedules/ Financial Bid Form to be decided by the Procuring Agency, inclusive of all prevailing taxes, duties, fees along with observance of minimum wages, etc.

5.7. Grievance Redressal

- i. Any Bidder feeling aggrieved by any act of the Procuring Agency after the submission of his Bid may lodge a written complaint concerning his grievances as per SPP rule after the announcement of the Final evaluation reports. The GRC shall investigate and decide upon the complaint as per SPPRA rules. Mere fact of lodging of a complaint shall not warrant suspension of the procurement process.

6. VALIDITY OF THE CONTRACT

The project is to be undertaken as an outsourced solution by the Service Provider for a period of one (May be extendable up-to three years subject to Satisfactory Performance as decided by the Procuring Agency). The procuring agency shall pay an annual increment / increase of 3% to 5% subject to availability of Budget and approval of competent authority.

7. OPERATIONS & MAINTENANCE OF MDSBC

The Operations & Maintenance Services of Mobile Health Units, shall include the following;

- 7.1 The Contractor shall perform the Operation as per SOPs given in bidding documents. The contractor shall also provide the maintenance of MDSBC Units and their equipment by repair / replace the following whenever required from the O&M provision.
- Vehicle Tyres, Generators, ACs, lights, and MDSBC sandwich box and others etc.
 - All equipment's as per list.
- 7.2 The Service Provider may deploy the Mobile units within the expected Districts / Project Areas / Divisions as per directions of the Department as mentioned in this document. However, procuring agency may include or exclude expected districts / project area / Divisions as per the requirement of the people / patients. Procuring agency may also use these units in other provinces as per the directions of the Government / Competent Authority or in case of any emergency / pandemic situation or special assignments.
- 7.3 Mobile units operational timings may be 08 Hours per day tentatively (timing may be decided with the mutual consent of both Service Provider and Procuring Agency).
- 7.4 Mobile unit is expected to provide services to ~ 150 – 200 patients / day. However, no. of patients can be increased.
- 7.5 Thirty (30) minutes setup time shall be permissible.
- 7.6 In routine, the unit will not provide services on gazette or any notified local holidays and Sundays.
- 7.7 One additional day-off in a month for calibration services and routine periodic / preventive / corrective repair and maintenance of complete unit including but not limited to medical equipment, non- bio equipment, vehicles repair, documentations etc.
- 7.8 The additional day-off will be fixed / approved by the procuring agency on the request of the service provider on start of every month along with the respective monthly deployment plan (likely to be changed on daily basis).
- 7.9 The service provider will ensure the compliance with all laws, rules and regulations, whether local, or national which are applicable & labor laws requirements in Pakistan. Furthermore, service provider will ensure that mobile Health Units are fit and suitable for the purposes of the Project and can operate without problems in the Project Areas throughout the contract duration.
- 7.10 All the Bio-Medical Equipment shall be tagged as per approved format by the procuring agency. The medical equipment shall be calibrated regularly and pasted with a calibration sticker (External Calibration).
- 7.11 Functionality / uptime of biomedical / diagnostic equipment / non-biomedical equipment / prime mover / generator or any other allied critical equipment must be greater or equal to 95% per month.
- 7.12 The service provider will be responsible to operate Mobile unit at its full capacity or as per requirement of the procuring agency, to cater the need of the people / patients.
- 7.13 The safe custody and security of all assets pertaining the mobile units will be the responsibility of the service provider.
- 7.14 Before the initiation of contract a handing over taking over (HOTO) will be done by the designated staff of procuring agency and service provider.
- 7.15 The service provider shall make close liaison with Procuring Agency / respective District Administrative departments for monthly schedule of visits / deployment plans (likely to be changed on daily basis) in-accordance with the SOPs, which would be issued by the procuring agency.
- 7.16 The Service Provider shall make arrangements comprising of waiting area, seating facility, fans, drinking water and all the related comfortable arrangements, which are to be provided for the patients / attendants.
- 7.17 Mobile units Staff salaries, Fuel Expense, Diagnostic Tests / consumables and Repair & Maintenance (i.e., Shortage of above-mentioned head, which are on the part of Service Provider) will not be linked with any payments made by the procuring agency against the monthly invoices.

8. HUMAN RESOURCE

Service Provider will employ well-qualified personnel as mentioned below with respect to the Provision of Operations & Maintenance services of Mobile Health Units in Sindh. The Service Provider will establish below offices as per given details below: -

Central Project Management Office (CPMO)

The Service Provider will establish 01 Project Management Headquarter Office to look after Districts offices and operations of Mobile Emergency Healthcare Units.

List of Staff as under: -

Staff List for Central Project Management Office (CPMO)		
1	Director	1
2	Manager (Admin)	1
3	Medical Officer (Monitoring) Male / Female	1
4	Consultant for Mammography Screening	1
5	Computer Operator	1
6	Accountant	1
7	Bio Medical Engineer / Electro medical Engineer	2
8	Driver LTV	1

District Offices

The Service Provider will establish the District Offices as per designated areas of MD&EHS.

List of Staff as under: -

Staff List for District Office		
1	Admin Officer	1
2	Computer Operator / Accountant	1
4	Cook	1
5	Helper Cook	1
6	Office Boy	1

MOBILE DIAGNOSTIC SERVICES FOR BREAST CANCER UNITS

The following staff will be provided with each MDSBC Units.

List of Staff for MDSBC Mobile Male OPD as under: -

Staff List for MDSBC MALE OPD		
1	Medical Doctor Male MBBS	01
2	Paramedic Staff (Male)	02
3	Laboratory Technician / Operator	01
4	Driver HTV	01

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5	Janitorial Staff	01
6	Security Guard with ammunition	01

List of Staff for MDSBC Female OPD as under: -

Staff List for MDSBC FEMALE OPD		
1	Medical Doctor Female MBBS (Trained Radiologist)	01
2	Paramedic Staff (Female)	02
3	Radiographer (Female)	01
4	X-Ray Technician / Operator	01
5	Driver HTV	01
6	Cleaner	01

- 8.1. All staff will be enrolled on the bio-metric devices installed at the Mobile units. Service provider shall ensure that its staff uses these devices for attendance marking. Their attendance will be monitored duly by Procuring Agency through the biometric devices. Bio-Metric attendance sheet shall be a mandatory part of monthly invoice. However, in case of non-availability / non-functionality of Bio-Metric Machine, the service provider is bound to ensure availability / functionality within 03 working Days.
- 8.2. Service provider shall be bound to pay its staff before 10th of each month and salaries shall not be linked to any other payment which contractor is entitled to receive from the Procuring Agency.
- 8.3. Service Provider shall pay its personnel not less than the minimum wages as notified by Government of Sindh and any other labor laws of Pakistan including other benefits mandated by the law.
- 8.4. The staff and their affairs relating to their employment will be the sole responsibility of the service provider and in this regard no extraneous influence will be brought to bear upon the client Procuring Agency.
- 8.5. All the staff will be allowed leave(s) as per the relevant labor laws. However, the service provider shall ensure that 100% staff is available for duty.
- 8.6. Service Provider will ensure that the employed personnel have requisite qualifications and experience commensurate to their position.
- 8.7. The Doctors should have valid PMDC registration. The paramedics and technical staff should also be well qualified and must have the relevant Certificate / Diploma qualification with relevant experience.
- 8.8. The service provider will provide / equip its staff with all necessary requirements to perform its duties.
- 8.9. The service provider will ensure that all staff deputed at MHUs is adequately immunized against all types of communicable diseases (Hepatitis B etc.) and preventively monitored through health check-ups. The Service Provider will submit screening reports to the Procuring Agency in this regard.
- 8.10. Verification of the particulars, reference check and criminal record check, of the workers / staff, shall be the responsibility of the Service Provider.
- 8.11. Service Provider in the performance of its services shall secure, maintain its own expense all registration, licenses or permits required by law, and shall comply with all pertinent rules and regulations (if any). The required registrations / licensing may include Sindh Healthcare Commission (SHC) Licensing, Pakistan Nuclear Regulatory Licensing (PNRA), etc.

- 8.12. Service Provider will disburse salaries through E-Channel i.e. Bank Account / Easy Paisa / Jazz Cash etc. and proof of the same must be readily available with the service provider all the time and must be attached with the respective monthly invoice.
- 8.13. The Service Provider's staff appearance will be influential in creating a good image of subject service. Their appearance shall set a good example. The Service Provider shall ensure that personnel at all times present a neat and clean appearance, paying particular attention to their personal hygiene.

Annexure B

9. JOB DESCRIPTION

JOB DESCRIPTIONS OF CPMO MANAGEMENT

Director (CPMO)

The Director shall serve as the Head of the Central Project Management Office (CPMO) and will be responsible for overall strategic leadership, operational oversight, coordination, and performance monitoring of Mobile Diagnostic & Emergency Healthcare Units across designated districts of Sindh.

Strategic & Administrative Leadership

- Provide overall direction for implementation of project objectives.
- Supervise district offices and ensure smooth functioning of mobile units.
- Ensure compliance with Government policies and project guidelines / Standard Operating procedures.

Operational Oversight

- Monitor deployment and functioning of mobile healthcare units.
- Ensure timely delivery of diagnostic and emergency healthcare services.
- Supervise project KPIs and reporting mechanisms.
- Review operational performance reports and take corrective measures.

Coordination & Liaison

- Liaise with Rehabilitation Department, Health Department, district administrations, and relevant stakeholders.
- Coordinate with tertiary hospitals for referral mechanisms.
- Represent the project in official meetings and high-level forums.

Financial & Compliance Oversight

- Oversee financial utilization as per approved budget.
- Ensure transparency, audit compliance, and documentation.
- Supervise procurement process of Medicines, Surgical Disposables or Laboratories items to fulfil the routine operations of Mobile diagnostic Services.

Monitoring & Evaluation

- Establish monitoring framework and.
- Review monthly, quarterly, and annual progress reports.
- Ensure impact assessment and service quality standards.

Skills & Competencies

- Strong leadership & decision-making ability
- Excellent reporting & documentation skills
- Financial and administrative management expertise.
- Strong communication and stakeholder coordination skills

Key Performance Indicators (KPIs)

- Operational efficiency of mobile units
- Timely reporting compliance
- Service delivery coverage in target districts / as per directive of Directorate.

Manager (Admin)

The Manager (Admin) shall be responsible for managing administrative operations of the Central Project Management Office (CPMO) and coordinating administrative support to district offices and Mobile Healthcare Units to ensure smooth and efficient project execution.

Key Responsibilities

Administrative Management

- Oversee day-to-day administrative functions of CPMO.
- Ensure proper office management, documentation, and record keeping.
- Maintain service contracts, vendor records, and office inventory.
- *Ensure compliance* with Government rules and project SOPs.

Human Resource Coordination

- Assist in recruitment, onboarding, and contractual documentation.
- Maintain personnel records and attendance monitoring.
- Coordinate performance evaluations and HR documentation.

Logistics & Fleet Coordination

- Coordinate with district offices for deployment schedules.
- Ensure availability of operational support to mobile units.
- Monitor fuel consumption, vehicle movement records, and maintenance logs (in coordination with relevant technical staff).

Reporting

- Prepare administrative reports for Director CPMO.
- Maintain correspondence records with districts and departments.
- Ensure timely submission of required reports.

Skills & Competencies

- Strong organizational and coordination skills
- Knowledge of government administrative procedures
- Documentation & record management expertise
- Good communication and interpersonal skills
- Ability to handle multi-district coordination

Reporting Line

- Reports to: **Director – CPMO**

Medical Officer Monitoring (Male/ Female)

The Medical Officer (Monitoring) shall be responsible for monitoring and evaluating clinical service delivery of Mobile Diagnostic & Emergency Healthcare Units across designated districts. The position focuses on quality assurance, adherence to clinical protocols, and field-based performance assessment to ensure effective and standardized healthcare service provision.

Key Responsibilities

Field Monitoring & Supervision

- Conduct regular field visits to mobile healthcare units across districts.
- Monitor service delivery standards and adherence to approved SOPs.
- Assess availability and proper utilization of medical equipment and supplies.
- Evaluate patient flow management and on-site emergency response readiness.

Clinical Quality Oversight

- Review clinical practices to ensure compliance with healthcare protocols.
- Identify gaps in service delivery and recommend corrective measures.
- Ensure infection prevention and control standards are maintained.
- Monitor proper documentation of patient records.

Reporting & Compliance

- Prepare structured monitoring and evaluation reports.
- Submit monthly performance assessments to Director CPMO and Directorate.
- Highlight operational, clinical, or compliance deficiencies.
- Recommend improvements to enhance service quality.

Coordination

- Coordinate with District Offices for monitoring schedules.
- Provide feedback and guidance to field staff for service improvement.
- Assist in developing monitoring checklists and evaluation tools.

Skills & Competencies

- Strong analytical and reporting skills

- Understanding of clinical protocols and healthcare standards
- Ability to conduct independent field monitoring
- Good communication and coordination skills
- Problem-solving and corrective action planning

Reporting Line

- Reports to: **Director – CPMO**

Consultant (Mammography Screening)

The Consultant (Mammography Screening) shall be responsible for overseeing, supervising, and ensuring quality mammography services provided through Mobile Diagnostic Units. The role includes interpretation of mammograms, ensuring compliance with radiological standards, and strengthening early breast cancer detection services across designated districts.

Key Responsibilities

Clinical Responsibilities

- Interpret and report mammography images conducted through mobile units.
- Ensure adherence to standardized breast imaging protocols.
- Maintain diagnostic accuracy and reporting timelines.
- Provide second opinions when required.

Quality Assurance

- Ensure compliance with radiology safety standards and radiation protection guidelines.
- Supervise proper calibration and usage of mammography equipment (in coordination with Biomedical Engineer).
- Monitor image quality standards and reporting formats.

Capacity Building

- Provide technical guidance and support to radiographers/technicians.
- Conduct periodic training sessions on mammography best practices.

Reporting & Documentation

- Maintain proper documentation of mammography reports.
- Submit periodic service performance reports to Director CPMO.
- Ensure confidentiality and ethical handling of patient data.

Qualification & Experience

Mandatory Qualification:

- MBBS with FCPS / MCPS / MD in Radiology (recognized by PMDC/PMC).

Experience:

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 Director, Directorate of MD&EHS
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- Minimum 5 years of post-specialization experience in Radiology.
- Experience in mammography and breast imaging mandatory.
- Experience in mobile or outreach healthcare services preferred.

Skills & Competencies

- Expertise in mammographic interpretation
- Knowledge of radiation safety protocols
- Strong diagnostic and analytical skills
- High ethical and professional standards
- Ability to work in field-based healthcare settings

Reporting Line

- Reports to: **Director – CPMO**

Accountant

The Accountant shall be responsible for managing the financial operations of the project, ensuring transparent utilization of funds in accordance with Government of Sindh financial rules. The position will oversee expenditure tracking, financial reporting, financial record and audit compliance.

Key Responsibilities

Financial Management

- Maintain complete project accounts and financial records.
- Monitor budget allocation and expenditure as per approved PC-I.
- Ensure proper classification of expenditures under relevant heads.
- Process payments, reimbursements, and financial documentation.

Compliance & Regulatory Adherence

- Ensure compliance with Government of Sindh financial rules and regulations.
- Maintain procurement-related financial documentation.
- Ensure proper maintenance of vouchers, receipts, and supporting documents.

Audit & Coordination

- Coordinate with internal and external auditors.
- Ensure timely preparation of audit-related documentation.
- Address audit observations and compliance requirements.

Documentation & Record Keeping

- Maintain proper financial filing system (hard and soft copies).
- Ensure secure and confidential handling of financial records.

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Skills & Competencies

- Strong understanding of budgeting and financial reporting
- Knowledge of public sector accounting procedures
- Audit coordination experience
- Strong documentation and analytical skills
- Integrity and attention to detail

Reporting Line

- Reports to: **Director – CPMO**

Bio-Medical Engineer / Electro- Medical Engineer

Responsibility in Field Hospital as Biomedical engineer;

- To maintain Hospital equipment repair & maintenance work, Installation of equipment.
- To maintain inventory of all equipment, preventive maintenance & calibration of equipment on monthly or quarterly.
- New Purchase of Medical Equipment Technical Specification as per requirements of End user.
- Evaluation of equipment & machinery on the basis of its initial cost as well as operating cost, since many times, the high maintenance & operating cost,
- Inspection of equipment and pre-acceptance checks before acceptance & payment.
- Maintaining record e.g. equipment history, checking safety hazards.
- Monitoring of high tech equipment contract services and keep records of spares/consumables items.

Computer Operator

The Computer Operator shall be responsible for maintaining digital records, data entry, report compilation, and documentation management related to the Mobile Diagnostic & Emergency Healthcare Services project. The position supports data accuracy, timely reporting, and proper record keeping at the CPMO level.

Key Responsibilities

Data Management

- Enter and update project-related data in designated databases/software.
- Maintain digital records of district reports and service statistics.
- Compile daily, weekly, and monthly operational data.
- Ensure data accuracy and completeness.

Reporting Support

- Assist in preparation of progress reports, presentations, and summaries.
- Maintain electronic filing systems for project documentation.
- Support monitoring team in consolidating field reports.

Record Maintenance

- Maintain confidential patient and operational data.
- Ensure proper backup of digital records.

- Organize soft and hard copy documentation systematically.

Administrative Support

- Assist CPMO staff in official correspondence and documentation.
- Perform other computer-related tasks assigned by Manager (Admin) or Director CPMO.

Reporting Line

- Reports to: **Manager (Admin)**

JOB DESCRIPTIONS OF MOBILE DIAGNOSTIC UNIT

Medical Officer (Male)

A medical officer is required to carry out various duties in a Mobile Hospital. He is responsible for all medical aspects of the Mobile Hospital and shall provide direct medical services in accordance with the job description given below:-

- Before leaving the hostel, he will be responsible for sending daily morning SMS mentioning the number of staff, the exact time of leaving the hostel and the distance of kilometers to the destination village.
- He will supervise and get ensured that all required equipment /stores are available in Mobile Hospital after closing the field operation. After that an evening SMS will be sent to the concerned persons which will contain the details of field operations which have been described by the Head Office.
- He will ensure that the staff is well turned out and Mobile Hospital is properly cleaned and disinfected.
- All doctors and the staff will remain in apron during the duty hours.
- The MO will be responsible to ensure up-to-date record of medicines through paramedic by maintenance daily expense of medicines.
- MO must keep an eye on his staff in field and hold responsible in case of any pilferage of medicine.
- In case of damage/breakage of any equipment by any staff member due to mishandling and negligence, MO will be the responsible for payments.
- The MO will ensure that only prescribed medicines are dispensed to the patients.
- He is responsible for planning, guiding, organizing, and monitoring all services along with Admin Officer at Mobile Hospital.
- He is solely responsible to administer all possible medical treatment with immense patience to the illiterate and ignorant patients of rural and backward areas.
- He is required to motivate himself and also keep motivating his staff to render all possible medical care.
- He supervises the daily work of his various assistants related to proper care of patients and also educating the patients regarding personal hygiene.

- Daily supervision through staff and maintenance of record of medicines, items and equipment required for medical treatment and arrangement for quick replenishment.
- He must ensure accurate availability of sufficient stock of life saving drugs.
- In the case of disobedience and neglect of duties by any staff, he will take appropriate disciplinary action along with the Manager Admin by informing to the Head Office.
- Any damage /loss of property or damage to the Mobile Hospital will be investigated and immediately reported through concerned Admin Officer for necessary action by Head Office.
- He will ensure that regular visits are made to the areas according to the schedule given to the Mobile Hospital by DC/DHO of concerned district.
- He is required to ensure accurate arrangements for disposal of waste as per the safety requirements.
- Doctor's attitude with patients must be extremely polite and exemplary, so that no patient has any complaint regarding Doctor's behavior. This is doctor's responsibility to satisfy the patients visiting Mobile Hospital.
- The Mobile Hospital must develop and maintain written protocols i.e. standing orders, rules of practice, and medical directives, which apply to services provided by the Head Office and which direct step by step collection of subjective and objective data (one sided and personal) from the patient. The protocols shall further direct data analysis; direct explicit medical actions, depending upon the data collected, and include rationale for each decision made. The protocol shall be signed by the MO.
- The Mobile Hospital staff must furnish those diagnostic and therapeutic services and supplies that are commonly furnished in a physician's office or at the entry point of the health care delivery system. These include medical history, physical examination, assessment of health status, and treatment for a variety of medical conditions.
- A complaint box is to be kept at each Mobile Hospital at a prominent place for monitoring of complaints.
- Doctor's performance is directly proportionate to the patients satisfaction .If the patients are not satisfied and do not recover then it may reflect on doctor's performance which in turn may lead to punitive measures even termination of the contract.
- MO has to examine a female patient in presence of Female Staff Nurse.

Medical Officer (Female)

She is the most important part of Mobile Hospital staff because, in areas where Mobile Hospital is to operate, a lady doctor is going to be a real blessing for the women folk and the minor children. She will be responsible for providing all possible medical care to the female patients and the minor children. The responsibilities of lady MO is as follows:-

- Before leaving the hostel, she will be responsible for sending daily morning SMS mentioning the number of staff, the exact time of leaving the hostel and the distance of kilometers to the destination village.
- She will examine and treat all cases reporting to her especially female and children.
- She will keep herself abreast of the current available medicines.
- She will work in coordination with MO and the nursing staff.
- She will ensure that all equipment under her care in good serviceable condition.

- In consultation with MO, she will assess the requirement of the equipment/medicines and put up the demand in time.
- She must educate the female patients regarding hygiene and cleanliness.
- She is required to motivate herself and also keep motivating her staff to render all possible medical care to the needy without any inhibition or discrimination.
- If there is any breakage of any equipment by any staff member due to mishandling, he or she will pay the loss.
- She will carry out Ultra Sound exam of female patients, where it is required.
- After the field operation, an evening SMS will be sent to the concerned persons which will contain the details of field operations which have been described by the Head Office.

Paramedics (Male)

Performs routine and emergency duties for the Mobile Hospital. He must acquire a working knowledge of the area of operation of Mobile Hospital. He is required to exercise full responsibility for all activity when assigned or dispatched on rescue duty. In daily operations of Mobile Hospital, he will perform various tasks as under. These include but are not limited to:-

- Will help the driver to maintain the Mobile Hospital in mechanically sound and sanitary condition.
- Maintenance of an adequate inventory of medical supplies in consultation with medical officer.
- Maintains medical equipment to assure safe and sanitary condition.
- Maintenance of Mobile Hospital and designated site to assure safe and sanitary environment.
- Maintenance of patients' treatment record.
- Restock all equipment /supplies to ensure their timely availability.
- Helps the locals to learn about basic hygiene and sanitation essentials, when otherwise not involved in any medical service activity.
- Maintains and enhances his skills through constant study and practice.
- Performs other duties as assigned by the Medical Officer/Admin Officer.
- Will dispense medicines as advised by the Medical Officer and keep record of medicines and will maintain ledgers/Register of Medicines.
- He will be responsible to take on charge all the medical stores, dispense and maintenance expense summary on daily basis leading to monthly certified receipt voucher and.
- He will maintain the 1st Aid /emergency box properly. He will keep all emergency medicines in the 1st aid box /Emergency kit and prepare list of all medicines to be kept in the box.
- He will be responsible to maintain the following records:-
 - Maintain the Computerized Patients Record Data (CPRD)
 - Maintain daily medicine expense.
 - Maintain daily ultrasound record register.
 - Maintain daily ECG record Register.
 - Maintain the record of daily referral patients.
- If there is any breakage of any equipment by herself due to mishandling, he will pay the loss.

Paramedics (Female)

- She will work under her MO in charge and will be responsible for all articles of Mobile Hospital placed under her charge.
- She is responsible for ensuring that Mobile Hospital is ready to function on arrival at the place of duty.
- She will see that the investigation recommended is carried out promptly and reports are entered in appropriate medical documents. The results of urgent case will be brought to the notice of concerned MO immediately.
- She will see that treatment recommended is immediately started and carried out. If the drugs as recommended are not available this will be immediately brought to the notice of MO.
- She will be responsible to see that entries on the temperature chart are correct, complete, and accurate and up-to-date and according to the instructions.
- She will keep the record of controlled drugs in a separate register.
- She will make sure that the treatment book is daily compared with treatment written by MO on treatment sheet so that no omission in treatment is made.
- She will be responsible to maintain the following records:-
 - Maintain the Computerized Patients Record Data (CPRD)
 - Maintain daily medicine expense.
 - Maintain daily ultrasound record register.
 - Maintain daily ECG record Register.
 - Maintain the record of daily referral patients.
- If there is any breakage of any equipment by herself due to mishandling, she will pay the loss.

District Office Manager

- He is responsible to coordinate with District Health Authority and Deputy Commissioner
- He is responsible to prepare the Monthly visits schedule with the mutual discussion of DHO/DC.
- Responsible to execute the field operation according to the monthly schedule.
- Responsible to check timely send the morning and evening SMS on prescribed format to the concerned individuals by the Male & Female doctors.
- Responsible to issue accumulated medicine on daily basis for field operation.
- Responsible for timely move of staff to the field operation.
- Responsible to look after the fuel consuming in units.
- Responsible to maintain of all electro-medical record of units.
- Responsible to maintain Medicine warehouse.
- Responsible to maintain all records of patients.
- Responsible to timely send the mess, fuel & patient's record to the Head Office on daily / monthly basis.
- Responsible to maintenance and cleaning of unit residency.
- Responsible to prepare food for all staff on time.
- Responsible to maintain the items provided by Head Office at unit residency.
- Responsible to maintain the disciplinary environment amongst the staff and field operation.
- Responsible for reporting all the district correspondence to the Head Office.

X-Ray Technician

He will perform his duties under MO and will carry out X-ray exam of patient on the written advice of MO or Lady MO.

- He will be responsible for the upkeep of the X-ray room.
- He will ensure correctness and proper functioning the x-ray equipment on his custody.
- He will ensure adequacy of X-ray films and required chemicals by indenting weekly.
- He will perform all X-ray tests and show to the MO. He will prepare and dry x-ray films in dark room properly before putting up to MO.
- He will ensure that records of all tests done in the X-Ray Room are properly maintained as per the direction of MO.
- He will ensure that NO un-authorized work is done in the X-Ray Room and no un-authorized person enters the X-Ray Room.
- He will ensure that utmost economy in use of material is enforced.
- He will ensure that equipment on his charge are regularly cleaned and maintained and any negligence reported to MO/Admin Officer.
- He will ensure that before closing hour all equipment are properly accounted for and stored at the respective places carefully.
- He will prepare the list for the replenishment of the disposable items on weekly basis and give it to the MO.
- He will be responsible to MO for efficiency, discipline and correctness of reports.
- He will perform any other duties allotted to him by the Medical Officer/Admin Officer.
- If there is any breakage of any equipment by himself due to mishandling, he will pay the loss.
- He will responsible to keep neat and clean area of dark room.
- He will responsible to maintain the Computerized Patient Record Data (CPRD) of X-ray tests.

Lab Technician

He performs medical laboratory tests for, diagnosis of diseases, as advised by the Male/Female Medical Officer and will perform any other duty as decided by the MO. He must ensure that he is following proper methods of sterilization and infection control in the Mobile Hospital Lab. He is responsible to perform tasks as under:-

- He will ensure correctness and proper functioning of all Lab equipment in his custody.
- He will be responsible for the upkeep of laboratory as highlighted above.
- He will ensure adequacy of reagents.
- He will perform all blood tests and show to the MO. He will prepare the slide /chamber stains the slide for microscopy, as advised by MO.
- He will maintain a proper record of all tests done.
- He will carry out the professional duties allotted to him by the Medical Officer/Admin Officer.
- He will ensure that records of all tests done in the Lab are properly maintained as per the direction of MO.
- He will ensure that NO un-authorized work is done in the lab and no un-authorized person enters the lab.
- He will ensure that utmost economy in use of material is enforced.

- He will ensure that Lab equipment on his charge are regularly cleaned and maintained and any negligence reported to MO/Admin Officer.
- He will ensure that before closing hour all equipment are properly accounted for and stored at the respective places carefully.
- He will prepare the list for the replenishment of the disposable items on weekly basis and give it to the MO.
- He will responsible to preparing daily expense of Lab chemicals and Lab kits.
- He will be responsible to MO for efficiency, discipline and correctness of reports.
- He will perform any other duties allotted to him by the Medical Officer/Admin Officer.
- He will responsible to keep neat and clean area of Lab.
- He will responsible to maintain the Computerized Patient Record Data (CPRD) of Lab investigations.

Biomedical Technician

A biomedical technician (also called biomedical equipment technician) or a biomedical engineer, is responsible for the operation, maintenance and repair of medical equipment. He is skilled on all medical equipment. He is required to perform the following tasks:-

- Responsible for tests, repairs, calibrates and maintains medical equipment using both his technical knowledge as well as service manuals.
- He disassembles equipment and adjusts, troubleshoots and replaces faulty and worn electrical and mechanical parts.
- He creates and maintains the detailed repair records in log book.
- He assures that the equipment remains in compliance with medical facilities standards and best practices.
- He remains in touch with medical staff, instructing them on operation of equipment and any issue regarding its functions.
- He serves as a consultant to the management for the procurement of new medical equipment.
- He evaluates equipment and makes recommendations regarding purchase.
- He consistently need to research operational and troubleshooting procedures for new medical equipment.
- He must also have exceptional communication skills, as he has to instruct others on the operation of equipment and how to troubleshoot.

He will render any additional duty recording patient care, assigned to hire by the Head Office.

Office Boy

- He is assist to District office manager.
- He is responsible for maintain papers and files.
- He is responsible for serving beverages to staff and visitors.
- He is responsible for cleaning units, unit residency.
- Any other responsibility assigned by the Head Office.

Janitorial Staff

- He is responsible to cleaning both mobile hospitals.
- During the field operation he is responsible to clean the mobile hospital.

- After closing the field operation he must be disinfect the walls and floors of both mobile hospitals on daily basis.
- Assist to other staff to fixing the tent in field area.
- During the field operation he must obey the order of both unit doctors

Security Guard

- He is responsible to look after both mobile hospitals
- Protect government property and staff by maintaining a safe and secure environment.
- To Observe for signs of crime or disorder and investigate disturbances
- Act lawfully in direct defense of life or property
- Take accurate notes of unusual occurrences
- Report in detail any suspicious incidents
- To Round randomly or regularly Mobile Hospital premises.
- Monitor and control access at mobile hospitals gates.
- Excellent knowledge of public safety and security procedures/protocols

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10. MANAGEMENT INFORMATION SYSTEM / MONITORING OF MOBILE HEALTH MIUNITS

- 10.1. The Procuring Agency will provide a dashboard / application / Management Information System (MIS) / HIMS. The Service Provider is responsible for every entry as per requirement / need of the Procuring Agency.
- 10.2. The service provider shall provide following dashboards / portals for monitoring of MHUs;
 - a. Tracking of MHUs
 - b. CCTV Monitoring
 - c. Fuel Tracker
- 10.3. No entry on EMR / MIS / provision of vehicles tracking / Bio metric machines / CCTV cameras etc, will lead to non-compliance.
- 10.4. The service provider will provide daily and monthly situation / progress reports regarding operations of each Mobile Health Unit.
- 10.5. The service provider is advised to ensure the MSDS compliance from the Sindh Healthcare Commission (SHC) and shall comply with the SOP's of infectious control and waste management as per hospital waste management rules / SOPs of Sindh.
- 10.6. GPS trackers (already installed) will be used to track / monitor movement of the MHUs and to ensure compliance of the pre-defined deployment plans as approved by procuring agency. The features of the tracking system will include but not limited to the following: 24/7 live location, engine start / stop, travelling speed, distance travelled, etc.
- 10.7. It is the responsibility of the Service provider to provide the internet at every location / MHU. In case of non-availability of internet services at any location, special permission shall be sought from the Procuring Agency for carrying out the operations manually.
- 10.8. Any costs incurred by the Service provider in above mentioned reference will be deemed to be a part of the financial form / Operations & Maintenance cost.

11. PATIENT REGISTRATION

- 11.1. Patient will approach to reception / registration area (under a tent / building). The patient will be registered by the MHU staff and his/her particulars will be entered in the EMR / MIS / register. Accordingly, a token number will be issued to the patient. Preferably, separate sitting / waiting arrangements for male and female patients will be managed.
- 11.2. Generally, patients will be served through two separate queues for male and female patients to be treated by Medical Officer (MO) & Woman Medical Officer (WMO) respectively. However, in case of unavailability of any of the afore-said doctors, patients will be served through available doctor.
- 11.3. MO / WMO will examine patient, diagnose (recommend the diagnostic tests as per requirement of the patient) & prescribe the medicines. Accordingly, the details will be entered in the EMR system.
- 11.4. If MO / WMO advises any lab test (s), X-Ray, ECG or Ultrasound the concerned clinical staff will perform the required test/scan/service. In such cases diagnosis / prescription will be finalized after the diagnostic reports.
- 11.5. The patient will be serves with the prescribed medicines by the dispenser and be clearly briefed regarding usage / dosage of the medicine. The dispensed medicine etc. will be entered in the EMR / MIS.
- 11.6. The service provider is responsible to ensure that every clinical / non-clinical operational activities must be recorded on EMR / MIS, timely and with relevancy or as per SOPs issued by the procuring agency.

12. MHU PAYMENT VERIFICATION SYSTEM / PAYMENT / INVOICE VERIFICATION METHOD

- 12.1. The Service Provider shall submit the invoice (s) on monthly basis inclusive of all taxes in the prescribed format provided by Procuring Agency.
- 12.2. All payments / invoices to the service provider will be verified through Procuring Agency Head Office according to the Payment Verification Process given below:
- a. The service provider will be the responsible for submission of invoice (s) with complete documentation as per SOP's of invoice processing issued by the procuring agency. The invoice submitted by the service provider must be complete in all aspects for further processing of payments. The check list of activities on the basis of which verification process shall include the following:
 - i. Service provider will ensure the formulation / extensive sharing of mobile units deployment plans with RESCUE 1122, DC, AC,s (concerned), Chief Executive Officer of respective District Administrative, Chairman of concerned Union Council etc. or as per SOP's issued by the Procuring Agency.
 - ii. Electronic Medical Records (EMR) / MIS containing the details of treated patients, diagnostics and medicines etc. Manual data will be accepted only, in case of non-functionality of EMR
 - iii. Actual medicines dispensed.
 - iv. Actual diagnostic tests performed
 - v. Record of repair and maintenance of MHU or equipment (if any)
 - vi. Patient referrals if any
 - vii. Distance travelled by Prime Mover in case of special assignment (s).
 - viii. Mobile units Tracking Report along with all necessary details i.e. Total Distance Traveled, Locations as per Deployment Plan etc. and any other details required by Procuring Agency.
 - ix. Generator Fuel Consumption Report as per approved format x. log-book (prime mover, generator) will be maintained by the service provider.
 - xii. Functionality of Bio-Medical Equipment duly verified by the Procuring Agency.
 - xiii. Or any other document.
- 12.3. After submission of invoice from Service Providers, the Project Manager Operations/designated officer by the Procuring Agency, MD&EHS shall verify the reports, patient details, medicines provided, tests conducted and all other activity checklist, and send the invoice to the Director, MD&EHS.
- 12.4. Detailed invoice processing SOPs will be finalized at the time of signing of contract.

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13. BID DATA SHEET

The following specific data for the services to be procured shall complement, supplement, or amend the provisions in the Instructions to Bidders (ITB) Section-II. Whenever there is a conflict, the provisions herein shall prevail over those in

<u>BID DATA SHEET</u>	
PROCURING AGENCY	Directorate Mobile Diagnostic & Emergency Healthcare Services (MD&EHS), Rehabilitation Department, GOVERNMENT OF SINDH.
THE SUBJECT OF PROCUREMENT	Operation & Maintenance of Ten (10) Mobile Diagnostic Services for Breast Cancer (MDSBC) Units
TENDER REFERENCE NUMBER	Dir/MD&EHS/1(14)/2025-26.
ADDRESS	F-55/3, Block-8, Kehkashan Scheme-5, Clifton, Karachi.
BID VALIDITY	90 Days, As per SPPRA Rule 2010 (amended till date)
AMOUNT OF BID SECURITY	2% of bid amount
LAST DATE OF SELLING OF BID	As per Mentioned in NIT
DATE OF SUBMISSION OF BID	As per Mentioned in NIT
PLACE OF SUBMISSION	F-55/3, Block-8, Kehkashan Scheme-5, Clifton, Karachi. .
PERFORMANCE SECURITY	5% of the Contract Value
LANGUAGE OF BID	English
CURRENCY OF BID	PKR
BIDDING PROCEDURE	Single Stage Two Envelope Procedure 46 (2)/ SPPRA Rule 46(2) (Complete in Single Package)
PERIOD OF COMPLETION	The contract shall be valid for one year from the date of Award of Contract. Which may be further extendable up to three years subject to satisfactory performance. The procuring agency shall pay increment / increase 3% to 5%. Subject to availability of Budget and approval of competent authority.

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14. TERMS & CONDITIONS OF TENDER

- a. **PERFORMANCE SECURITY:** The successful bidders will have to deposit the requisite Performance Security Bond in shape of a Pay Order / Demand Draft as per amount mentioned under Bidding Data sheet in favour of **Director, Mobile Diagnostic & Emergency Healthcare Services**. The same will be released after successful completion of contract period. Moreover, security deposit shall be forfeited by the Procuring Agency if contractor fails to comply with terms and condition of the contract at any stage during contract period.
- b. The Procuring agency reserves the right at the time of contract award to increase or decrease, the items / quantities of goods and services originally specified in the Schedule of Requirements without any change in unit price or other terms and conditions.
- c. Arithmetical errors will be rectified on the following basis. If there is a discrepancy between the unit price and the total price that is obtained by multiplying the unit price and quantity, the unit price shall prevail, and the total price shall be corrected. If the bidder does not accept the correction of the errors, its bid will be rejected, and its bid security may be forfeited.
- d. In case of any dispute, decision of the **Director, Mobile Diagnostic & Emergency Healthcare Services**, shall be final and contractor will not challenge the decision in the Court of Law.
- e. The **Director, Mobile Diagnostic & Emergency Healthcare Services**, has the right to cancel the contract at any stage and without issuing any prior notice in case of violation of **Agreement / ToR** is proved as well as damages to the prestige or property of **Mobile Diagnostic & Emergency Healthcare Services**.
- f. Contractor will be responsible for any theft or pilferage committed by any of his employees. The employee will be liable to punishment under the rules.
- g. In case of breach of the contract by the contractor, contract will be forfeited partly or fully as decided by the **Director, Mobile Diagnostic & Emergency Healthcare Services**.
- h. Any condition / clause of the Contract can be included / amended if required in the interest of the **Directorate Mobile Diagnostic & Emergency Healthcare Services** with the mutual understanding of both parties.
- i. The Contractor should not violate or allow his Staff to violate the rules of the Sindh Government.
- j. Contractor shall be responsible for his staff. The Contractor shall appoint the staff of **MOBILE DIAGNOSTIC SERVICES FOR BREAST CANCER MDSBC UNITS** as per Recruitment Criteria given in the bidding documents.
- k. Contractor shall purchase all the Medicines, Surgical items and Disposable lab items etc. from reputable companies dully registered with regulators. In case of any discrepancy, the contractor shall be liable.
- l. Contractor shall purchase all Medicines, Surgical Items, and Disposable items Lab items etc. with the stamp of "Not for Sale, stamp of contractor.
- m. Contractor shall provide the Mess to Staff.
- n. Contractor shall submit the inspection report of all staff vans after every month to the Directorate of Mobile Diagnostic and Emergency Healthcare Services (MD&EHS) on prescribed format with Monthly Progress Report (MPR).
- o. The Contract is for one year starting from the date of agreement and extendable upto three years (total) on yearly basis, on the basis of performance after the approval from Competent Authority.
- p. Bid / offer will be evaluated as per criteria and the bid's terms & conditions.
- q. Stamp duty should be placed on contract agreement (as per the govt. approved rate) on stamp paper.
- r. Procurement Committee shall disqualify a contractor, whether pre-qualified or not, if it finds at any time, that the information submitted by him concerning his qualification and professional, technical, financial, legal, or managerial competence as contractor; was false and materially inaccurate or incomplete at any stage.
- s. Conditional tender and tender without bid security shall not be considered.
- t. GST / Income Tax & SRB Certificates must be accompanied with tender.

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- u. The Procuring Agency may reject all or any bid at any time prior to the acceptance of a bid or proposals, subject to the relevant provision of SPP Rules, 2010 (Amended till date).
- v. No tender will be entertained without bid security. The bid security will be forfeited to Government Treasury, in case of non-submission of performance security within fifteen (15) Days of receipt of the Letter of Acceptance.
- w. If the contractor fails to give services within the stipulated period, liquidity charges will be imposed.
- x. The Bidder shall sign and stamp the Integrity Pact provided at Bid in the Bidding Document for all Provincial Government procurement contracts exceeding Rupees 10 million in case of goods and 2.5 million in case of services. Failure to sign such Integrity Pact shall make the bidder nonresponsive.

I / We agree to above mentioned terms & conditions:

Name of Contractor _____ Signature

CNIC NO _____ (Copy must be attached)

Full Address

Rubber Stamp _____

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Rehabilitation Department
Government of Sindh, Karachi

15. QUALIFICATION CRITERIA (MANDATORY)

S.#	MANDATORY REQUIREMENTS	YES	NO
01.	<p>Compliance of Terms & Conditions / Instructions mentioned in the SBD.</p> <ol style="list-style-type: none"> Attached authorized person CNIC copy. Signed & stamped each and every page of Terms & Condition & all bidding documents. Fill, sign & stamped Form of Bidder Information as Annexure-F <p style="text-align: center;">OR</p> <p>Joint Venture is allowed subject to following conditions;</p> <ol style="list-style-type: none"> Lead partner shall specify his role & responsibilities and subsequent responsibility of the partner. Joint Venture agreement shall be submitted. The responsibilities of the JV partner (s) may be like provision of clinical services, repair & maintenance services, provision of goods and Information management system etc. The parties in a Joint Venture shall be jointly and separately liable. Maximum number of partners in the JV shall be limited to Three (03) <p>(If compliance of above points not found offer will be rejected).</p>		
02.	Copy of the Pay order / Demand Draft (hidden amount) of Bid security should be attached along with technical bid document. (Original bid security should be submitted in a sealed envelope to Directorate office).		
03.	Valid Sindh Sales Tax / Sindh Revenue Board (SRB) Certificate (Copy must be attached).		
04.	Should be registered with Income Tax Department (NTN Certificate must be attached).		
05.	Valid General Sales Tax (GST) Certificate		
06.	Audited Financial Reports by Chartered Accountant for last three years.		
07.	Income Tax and Return (FBR) of last three years (2022-23, 2023-24 and 2024-2025)		
08.	<p>Submission of undertaking on legal valid stamp paper of 200 Rs. that the firm;</p> <ol style="list-style-type: none"> The firm is not blacklisted by any Department The documents provided with bid are authentic. In case, any fake/bogus document is found at any stage, the firm shall be blacklisted as per law / rules. Affidavit for correctness of information Contractor/firm is not blacklisted or subject to any pending litigation with all any Government or public department. 		
09	Undertaking / Statement on Stamp Paper of Rs. 100/- that the Party including the director and the owners is not a subject of bankruptcy proceedings, receivership, administration receivership, or any other form of liquidation.		
10	Undertaking / Statement on Stamp Paper of 200 Rs. regarding No Litigation / Dispute with department / procuring agency.		
11	Valid Professional Tax Certificate for the year of 2025 - 2026		

Note: Bidders NOT complying with any of the above eligibility pre-requisites would be disqualified. All documentary evidence must be submitted along with the bids; no document will be acceptable after bid submission.

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Health, Safety & Environment Department
Kwame Ninsin University, Kumasi

16. TECHNICAL BID EVALUATION CRITERIA

- a) **THE BIDS SHALL BE EVALUATED ON MOST ADVANTAGEOUS BID BASIS** SPPRA Rule-2(x) amended till date.
- b) The bids not responsive to the **QUALIFICATION CRITERIA (MANDATORY)** shall not be eligible for further Technical Bid Evaluation.
- c) **Bids are invited as per Single Stage – Two Envelope Procedure** in accordance with sub rule 2 of rule 46 of the Sindh Public Procurement Rules, 2010 (Amended Till Date). In case, any bidder encloses the financial bid within the technical bid, the same shall be rejected summarily.
- d) The following merit point system for weighing evaluation factors / criteria will be applied for technical bids/Proposals. Bidders achieving **minimum 70% marks** will be qualified and considered only for further process / evaluation besides compliance of all mandatory clauses. Documentary evidence must be attached in support of your claim.
- e) Technically qualified/successful bidder(s) shall be eligible for Financial Proposal(s). The Financial bids shall be opened in the presence of the Bidders at the scheduled date, time and venue communicated in advance.
- f) Financial Bids of Proposals of Technically disqualified/rejected bidders will not be opened and sealed envelope shall be returned to the bidder.
- g) Bids not accompanied by the Bid Security of required amount in form of pay order/ demand draft shall be rejected.
- h) The technical evaluation carried out by the Procurement Committee, will be final, which will be assessed on provided documents.

S. #	Evaluation Parameters/Sub-parameters	Maximum Marks	Obtained Marks
1	Company Profile: (Please attach complete documents)	40	
1.1	Company Establishment (Total Years). (05 Marks each year. Maximum 10 Marks)	10	
1.2	Core Management team, which consist of following; Hospital Management Expert Public Health Expert Bio-Medical Expert	15	
1.3	Company's Turnover each year average for continuous last three years. (Financial Soundness verified through "Net Revenue (Excluding Sales Tax, Federal Excise brokerage, commission, discount, freight outward) or Final/Fixed/Minimum/Average/Relevant/Reduced Tax) FBR Returns). a) 100 million to 250 million 5 Marks b) More than 250 million to 500 million 10 Marks c) More Than 500 million or above 15 Marks	15	
2	Experience with the Healthcare Services for a minimum period of 1 year. a) One Year 05 Marks b) Two Years or more 10 Marks	10	
3	Performance Certificate (s) issued during the last 2 year. c) Hospitals 05 Marks d) Field Hospitals 05 Marks	15	
4	Human Resource / Total Number of Employees on Bidder's Payroll.	20	

	a) 50 employees 05 Marks b) 75 employees 05 Marks c) 100 employees 05 Marks d) 150 employees 05 Marks		
*5	*An organization / firm having a valid license issued by Sindh Healthcare Commission (SHC) as a Healthcare Establishment organization.	10	
6	Valid ISO 9001:2015 for Quality Management System Certification of the Bidder / firm.	10	
TOTAL MARKS		100	

- a. The documents submitted by the bidders will be verified. At any stage if the documents are found forged, the company will be disqualified from the tender process.
- b. Financial bids shall be opened through EPADS at the scheduled date, time and venue communicated in advance.
- c. Only those Financial Proposals will be announced / considered which were technically qualified by the Committee.
- d. Financial Bids / Proposals of Technically disqualified / rejected bidders will not be opened and sealed envelope shall be returned to the bidders.
- e. The Performance and Experience Certificates should be issued by the Head of the Institute, Hospital, NGO, or by the Project Director.
- f. A **Core Hospital Management Team** is a multidisciplinary leadership group responsible for ensuring that a hospital operates efficiently, safely, and in alignment with healthcare standards and community needs.
- g. The procuring agency has the right to verify all documents during the evaluation process or any time.

***Note:** If the firm / organization is not registered with the Sindh Healthcare Commission as a healthcare organization, they must register within 6 to 9 months after the award of the contract. In case of non-compliance the directorate shall be imposed penalty on service provider with 10% of the monthly operational cost till the compliance.


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 Rehabilitation Department
 Government of Sindh, Karachi

17. TERMS & CONDITIONS OF CONTRACT

a. **CONTRACT:**

The Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services will, after issuance of Letter of Intent to the successful bidder(s) send the contract provided in the Standard Bidding Document (SBD), to the successful bidder(s). Within three (03) working days of the receipts of such contract, the Bidder(s) shall sign and date the contract and return it to the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services.

b. **CONTRACT DOCUMENTS AND INFORMATION:**

The Contractor(s) shall not, without the Procuring Agency's prior written consent, make use of the Contract, or any provision thereof, or any document(s), specification(s), drawing(s), pattern(s), sample(s) or information furnished by or on behalf of the Procuring Agency in connection herewith except for purposes of performing the contract of disclose the same to any person other than a person employed by the contractor(s) in the performance of the contract. Disclosure to any such employed person shall be made in confidence and shall extend only as far as may be necessary for purposes of such performance.

c. **CONTRACT LANGUAGE:**

The Contract and all documents relating to the Contract, exchanged between the Contractor(s) and the Procuring Agency, shall be in English. The Contractor(s) shall bear all costs of translation to English and all risks of the accuracy of such translation.

d. **STANDARDS:**

The goods/Items/Stores provided under this Contract shall confirm to the latest Technology / model Standards.

e. **PATIENT RIGHT:**

The contract shall indemnify and hold the department harmless against all third party claims of infringement of patent, trademark or industrial design rights arising from use of the goods or any part thereof.

f. **EXECUTION SCHEDULE:**

The Contractor(s) shall submit an execution Schedule, giving details of Services rendered, as required under the contract, to the Procuring Agency, immediately after the issuance of letter of Intent.

g. **PRICE:**

The contractor(s) shall not charge prices for the Services provided and for other obligations discharged, under the contract, varying from the prices quoted by the contractor in the price schedule.

h. **PAYMENT:**

The Contractor(s) shall submit an application for payment, in the prescribed form, to the Procuring Agency. The application for payment shall be accompanied by the payroll/salary disbursement, House Rent agreements/payment receipts, Supply of Medicines receipts purchased from company and provide inventory and consumption of medicines as mentioned in terms & conditions of contract clause-xiii), detail of repair & maintenance, documentary evidence as and when the Procuring Agency may require. Payment shall not be made in advance. The Procuring Agency will make payment for

the Services provided, to the contractor(s), as per Contract agreement, in Pak Rupees, through A.G Sindh Cheque. The service provider shall application as per following format.

Invoice Checklist (to be attached with invoice)			
Sr. No.	Description	Annexure	Attached
1	Covering Letter / Noting signed by Project Manager Operations (Covering letter must have proper Letter No., Date etc.)	A	
2	Original invoice/bill(s) provided by the service provider along-with consolidated sheet/report.	B	
3	Separate Corrected Invoice in case of over-invoicing along-with supporting documents.	C	
4	Salary Disbursement Report.	D	
5	Bio Metric Attendance / EMR report / MIS report etc. in case of non-functionality Manual record of Patients must be available.	E	
6	Tracker reports.	F	
7	Any other document if required for processing of payments as per SOP's issued by the Procuring Agency	G	
<p>Note: The Service Provider must submit the invoice in proper File Cover so that the Documents to be attached don't get spoiled and disintegrated. The page numbering of the whole invoice must be done adequately and documents must be attached in the same sequence / order as mentioned in the table.</p>			

i. ASSIGNMENT / SUBCONTRACT:

The contractor(s) shall not assign or sub-contract its obligations under the contract, in whole or in part, except with the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services prior written consent. The contractor(s) shall guarantee that any and all assignees or subcontractors of the contractor(s) shall, for performance of any part or whole of the goods under the contract, comply fully with the terms and conditions of the contract applicable to such part or whole of the goods under the contract.

j. LIQUIDATED DAMAGES:

If the contractor(s) fails/delays in performance of any of the obligations, under the Contract/violates any of the provisions of the Contract/commits breach of any of the terms and conditions of the contract the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services may, without prejudice to any other right of action/remedy it may have, deduct from the Contract Price, as liquidated damages, a sum of money @ 0.25% per day, of the contract Price which attributable to such part of the services as cannot, in consequence of the failure/delay, be put to the intended use, for every day between the scheduled delivery date(s), with any extension of time thereof granted by the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services, and the actual delivery date(s). Provided that the amount so deducted shall not exceed, in the aggregate, 10% of the Contract Price.

If any equipment, vehicle, tyres, batteries, generators, A/C. Oil of Mobile Unit(s) and the Staff van are reported for services, repair & maintenance etc. to contractor and then negligence found on their part, the Government of Sindh MD&EHS shall penalize the

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Regulation Department
Government of Sindh, Karachi

contractor of 20% of Equipment repair cost. If the Monitoring team submit the report as highly unsatisfactory and the contractor does not rectify the observations within fifteen days the penalty shall be imposed upto 10% of services charges.

k. TECHNICAL REPORT OF MDSBC

The contractor shall submit the technical verification report of complete MDSBC Units alongwith all equipment before three months of expiry of contract agreement that the MDSBC units alongwith all equipment are in good working conditions. The Procuring Agency shall comprise a technical verification committee which shall visit and verify the technical verification report submitted by the contractor.

The contractor will maintain the log book of repair and replace for transparency & performance evaluation. Directorate monitoring team can randomly visit & counter check the maintenance log book, visit schedule. Team can also generate a report based on the performance & physical verification of log book.

l. HANDING AND TAKING OF MDSBC UNITS:

The Procuring agency shall handover the MDSBC Units to the contractor after signing of contract. The contractor shall maintain the MDSBC units under the contract agreement SOPs. After the contract agreement expiry, the contractor shall handover the MDSBC Units to the Procuring agency in a good working conditions.

m. PROCUREMENT OF MEDICINES:

The Contractor shall procure all medicines from well-reputed pharmaceutical companies among the top fifty manufacturers. The medicines shall have a minimum remaining shelf life of at least 80% for locally manufactured products and 70% for imported products. Each invoice shall clearly mention the product name, generic name, manufacturer, batch number, manufacturing date, and expiry date. The warranty of medicines shall contain the same details as mentioned in the invoices and shall be submitted on **Form 2-A**.

Surgical and disposable laboratory items shall be procured from well-reputed importers or distributors whose products are approved by **USFDA, EU, WHO, or RRA countries** and are duly registered with **DRAP**.

In every month the service provider shall provide detail report of inventory stock of medicines / disposable items / laboratory kits etc. report with consumption report.

Total Number of medicines issued

Total Stock of Medicine	Issued in One Month	Remaining Stock

In case of any discrepancy/non-compliance the Contractor shall be penalties with 10% of the monthly operational cost.

n. OPERATION & MAINTENANCE (O&M) OF MDSBC UNITS:

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 Rehabilitation Department
 Government of Punjab, Rawalpindi

The Contractor shall perform the Operation as per SOPs given in bidding documents. The contractor shall also provide the maintenance of MDSBC Units and their equipment by repair / replace the following whenever required from the O&M provision.

- a) Vehicle Tyres, Generators, ACs, lights, and MDSBC sandwich box and others etc.
- b) All Equipment as per list.
- c) The described points mentioned Operation & Maintenance of MDSBC in Clause-7.

o. BLACKLISTING:

If the contractor(s) fails/delays in performance of any of the obligations, under the contract / violates any of the provisions of the contract/commits breach of any of the terms and conditions of the contract the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services may, at any time, without prejudice to any other right of action/remedy it may have, blacklist the contractor(s), either indefinitely or for a stated period, for further tenders in public sector. If the contractor(s) is found to have engaged in corrupt or fraudulent practices in competing for the without prejudice to any other right of action / remedy it may have, blacklist the contractor(s), either indefinitely or for a stated period, for further tenders in public sector.

p. FORFEITURE OF PERFORMANCE SECURITY:

If the contractor(s) fails/delays in performance of any of the obligations, under the contract / violates any of the provisions of the contract/commits breach of any of the terms and conditions of the contract the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services may, without prejudice to any other right of action / remedy it may have, forfeit performance security of the contractor(s). Failure to supply required items/goods/stores within the specified time period will invoke penalty as specified in this document. In addition to that, performance security amount will be forfeited and the company(s) will not be allowed to participate in future tenders as well.

q. TERMINATION FOR DEFAULT:

If the contractor(s) fails/delays in performance of any of the obligations, under the contract/violates any of the provisions of the contract/commits breach of any of the terms and conditions of the contract the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services may, at any time, without prejudice to any other right of action/remedy it may have, by written notice served on the contract indicate the nature of the default(s) and terminate the contract, in whole or in part, without any compensation to the contractor(s). Provided that the termination of the contract shall be resorted to only if the contractor(s) does not cure its failure/delay, within fifteen (15) working days (or such longer period as the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services may allow in writing), after receipt of the such notice. If the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services terminates the contract for default, in whole or in part, the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services may procure, upon such terms and conditions and in such manner as it deems appropriate, goods similar to those undelivered, and the contractor(s) shall be liable to the Government of Sindh, Mobile

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Diagnostic & Emergency Healthcare Services excess costs for such similar Goods/Items/Stores. However, the contractor(s) shall continue performance of the contract of the extent not terminated.

r. TERMINATION OF INSOLVENCY:

If the contractor(s) becomes bankrupt or otherwise insolvent, the Government of Sindh, Mobile Diagnostic & Emergency Healthcare Services, at any time, without prejudice to any other right of action/remedy it may have, by written notice served on the contractor(s), indicate the nature of the insolvency and terminate the contract, in whole or in part, without any compensation to the contractor(s).

s. RESOLUTION OF DISPUTES.

The Procuring agency and the contractor(s) shall make every effort to resolve amicably by direct informal negotiation any disagreement or dispute arising between them under or in connection with the Contract.

If, after thirty (30) days from the commencement of such informal negotiations, the Procuring agency and the Supplier have been unable to resolve amicably a Contract dispute, either party may require that the dispute be referred for resolution to the formal mechanisms. These mechanisms may include, but are not restricted to, conciliation mediated by a third party, adjudication in an agreed manner and/or arbitration.

In the case of a dispute between the Procuring agency and the contractor(s), the dispute shall be referred to adjudication or arbitration in accordance with the laws of the Procuring agency's country.

t. All the terms & conditions on which both the parties agreed upon shall not be challengeable in the Court.

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Rehabilitation Department
Government of Sindh, Karachi

**Operation and Maintenance for Ten
Mobile Emergency Healthcare Units (MDSBC)**

THIS AGREEMENT made on the ____ day of _____ 2026 between Directorate Mobile Diagnostic & Emergency Healthcare Services, Rehabilitation Department Government of Sindh, (hereinafter called "the Procuring Agency") of the one part and M/s _____ (hereinafter called "the Services Provider") of the other part:

WHEREAS the Procuring Agency invited bids for ancillary services, viz., Operation and Maintenance of 10 Mobile Diagnostic Services for Breast Cancer Units

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

ANNEX - 1

Operation and Maintenance of Ten Mobile Diagnostic Services for Breast Cancer (MDSBC)

1. Services	The Service Provider shall provide the services as per the SOPs, Operation and Maintenance Plan with HR details of working plan, list of services and medicines for the execution of Operation and Maintenance Contract of MDSBC as per Annexures-
2. Term	<p>Operation and Maintenance Service Plan</p> <p>The Service Provider shall provide the Operation and maintenance services for the period of 01 Year which shall be extendable for three years, subject to satisfactory performance under SPPRA rules 2010. The Operation and Maintenance of Each MDSBC will be started after signing the Contract agreement.</p> <p>The Operation and Maintenance Contract may be extendable after successful operation and maintenance services. The operation and maintenance services can be delivered in any district of Sindh wherever PA will desire.</p>
3. Payment	<p><u>Payment Conditions</u></p> <p><u>As per Terms & Conditions of Contract clause h</u></p>

1. Following Documents shall be the part of Contract Agreement:

- A. Biding Documents
- B. SOPs of MDSBC
- C. Schedule of Requirements.
- D. Terms & Conditions of Contract
- E. Terms & Conditions of Tender
- F. Integrity Pact.


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 Rehabilitation Department
 Government of Sindh, Karachi

2. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to.
3. In consideration of the payments to be made by the Procuring Agency to the Service Provider as hereinafter mentioned, the Service Provider hereby covenants with the Procuring Agency to provide the services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
4. The Procuring Agency hereby covenants to pay the Service Provider in consideration of the provision of the services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the times and in the manner prescribed by the contract.
5. The Income Tax as per FBR policy and Sindh Sales Tax on services as per SRB policy and any other applicable tax(s) shall be borne by the Contractor.

IN WITNESS where of the parties hereto have caused this Agreement to be executed in accordance with their respective laws the day and year first above written.

NOW THEREFORE THE PARTIES hereby agree as follows:-

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed in their respective names as of the day and year first above written

**FOR AND BEHALF OF PA
SUPPLIER /**

**FOR AND BEHALF OF
SERVICE PROVIDER**

Signed by:

Title:

Witness:

Name : _____

Title: _____

Signed by:

Title:

Witness:

Name: _____

Title: _____

DR. KHANSA ZAMEER
 Director, Directorate of MDS&HS
 Rehabilitation Department
 Government of Sindh, Karachi

9 SCHEDULE OF REQUIREMENTS

Sr.#	Operation & Management Services	Qty	Unit Price	Total Price
<p>01</p> <p>A</p>	<p><u>MDSBC MALE OPD</u></p> <p>The following services will be required in MDSBC-Male OPD:</p> <ul style="list-style-type: none"> • Availability of Male Doctor, Laboratory Technician, and Paramedic Staff etc. as annexure-A. • Availability of Medicines for Male OPD as per approved list and sample by Procuring Agency and as required by the Doctors for Male Patients (List of Medicines and lab test enclosed in annexure-C) • To fix salaries and ensure to pay them in between 1st to 5th every month by submitting the payroll on next day. • Boarding and Lodging Expenses of MDSBC Male OPD and Staff in the designated areas. • POL expenses of MDSBC • POL expenses for Generator of MDSBC • Payment of utility bills of district offices. • Maintenance of MDSBC Units • Any other cost required for repair / replace of any biomedical equipment or non-biomedical equipment like vehicle, generator, tyres etc. <p><u>The patients shall be examined in Male OPD as follows:</u></p> <p>Operational Services Charges for 24 Working Days Operational Cost including Medicine & Complete Tests:- Approximately 150 - 200 Patients per Day with Medicines & Tests will be examined in each hospital.</p>	<p>05</p>		
<p>02</p> <p>a</p>	<p><u>MDSBC FEMALE OPD</u></p> <p>The following services will be required in MDSBC-Female OPD: -</p> <ul style="list-style-type: none"> • Availability of Female Doctor, X-Ray Technician, and Female Paramedic Staff etc. as annexure-A. • Availability of Medicines for Female OPD and Mammographical expenditures as required by the Doctors for Female Patients (List of Proposed Medicines but not limited to and lab test in annexure-C enclosed). • Availability of Medicines for Female OPD as per approved list and sample by Procuring Agency and as required by the Doctors for Female Patients (List of Medicines and lab test enclosed in annexure-C) • To fix salaries and ensure to pay them in between 1st to 5th every month by submitting payroll. • Boarding and Lodging Expenses of MDSBC Female OPD and Staff in the designated areas. 	<p>05</p>		


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 Government of Punjab, Department of Health & Family Welfare

- POL expenses of MDSBC
- POL expenses for Generator of MDSBC
- Payment of utility bills of district offices.
- Maintenance of MDSBC Units
- Any other cost required for repair / replace of any biomedical equipment or non-biomedical equipment like vehicle, generator, tyres etc.

The patients shall be examined in Female OPD as follows: -

Operational Services Charges for 24 Working Days
Operational Cost including Medicine & Complete Tests:-
Approximately 150 - 200 Patients per Day with
Medicines & Tests will be examined in each hospital.

Total

Grand Total in words in Pakistani Rupees (*Inclusive of All Taxes*): _____

1. Component / services will be awarded on Package basis.
2. No any kind of separate payment shall be made for the incidental services.
3. The rates quoted in this schedule are inclusive of all the applicable taxes as per FBR policy and as per SRB policy & freight/transportation etc.
4. The bidder will be responsible for all the applicable taxes.

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10 STANDARD OPERATING PROCEDURE (SOPs) - WORKING OF MDSBC

1. To implement the goal set forth by the Directorate of MD&EHS Rehabilitation Department Govt. of Sindh to provide basic health care facilities to the people of rural areas.
2. **Concept.** The main objective of using MDSBC Units is to improve the access for the population groups currently deprived of the services provided by existing health care system.
3. The MDSBC Units will provide Diagnostic and Therapeutic services and will supplement the health facilities with the use of Mammography, X-Ray, E.C.G, Ultra Sound and Lab Test Facilities available in the MDSBC Units. This will accrue following advantages:-
 - Mutually supportive system which will fill gaps in service provision.
 - Minimization of costs and avoidance of administrative and logistical cost.
 - Strengthening the outreach provisions of preventive and promotive services.
 - Expansion and improvement of the referral linkage.
4. **MDSBC Units Staff.** The list of staff as per details Annex-A.
5. **Training.** Intensive training will be imparted to the staff every three months which includes:
 - a. Interpretation of Mammography.
 - b. Use of Mammography.
 - c. Patient counselling training.
 - d. Training of Doctors for breast examination / screening.
 - e. Interpretation of Ultrasound, ECG, X-Ray and Lab.
6. **Organization and Execution**
 - a. The Operational Services are on outsourced module. The contractor shall establish a Head office in Karachi and 5 Districts offices along with accommodation and mess for the staff who will be hired from other districts in case of non-availability in concerned Districts. The District office must have the store for medicines as per medicines storage SOPs.
 - b. The contractor shall procure medicines as mentioned in Terms & conditions clause-m. The stock of medicines should be available at least for two months in every District office store. The contractor shall share the supply chain of medicines with Directorate.
 - c. Category wise Job description is given. The Job description will be revised with the passage of time / experience / practice.
7. **Operation of MDSBC Units**
 - a. Head Office in consultation with local district authorities will issue a visit schedule of MDSBC Units for their respective Districts on / monthly basis.
 - b. MDSBC Units will function 6 days a week except 1st and 3rd Saturday which will be observed as maintenance day for equipment and Unit.
 - c. Days will be fixed (keeping in view public holidays) for the localities.
 - d. Visit program will be strictly adhered to by MDSBC Units. Any change because of inaccessibility will be made in consultation with Directorate Office.
 - e. In the area of operation, the MDSBC Units will be parked at the sites designated by the Local administration.
 - f. The MDSBC Units will function as per schedule
 - o Summer Timings 09:00-16:00
 - o Winter Timings 09:00-16:00

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- g. Regular reports and returns will be sent to the Directorate office giving details of daily treatment by morning and evening SMS.
- h. Stocks of medicine, consumables, linen and other related requirements shall be replenished / replaced before move by the next working day.
- i. Screening Tests list and Reports must be issued every month.

8. Maintenance of MDSBC Units.

- a. The contractor will repair / replace and maintain the MDSBC units (all equipment, vehicle, including tyre and sticker etc.).
- b. If any damage or broken of any equipment like X-ray machine, ECG machine, Mammography machine, vehicle tyres etc. The service provider will replace and bear the cost.
- c. The service provider shall submit functional report of all equipment's including vehicle, generator etc. quarterly.
- d. The Maintenance report of all the equipment's will be maintained by the Admin officer and the same will be submitted to Directorate office every month.
- e. Drivers will keep the Log Books / valid repair reports of MDSBC Unit updated wherein consumption of POL and the Repair work of MDSBC Vehicle will be mentioned and the same shall be submitted to Directorate office every month.
- f. Preventive maintenance of the vehicle shall be carried out before the next departure by the concerned drivers.
- g. The all record of maintenance shall be verified through the teams of directorate, if found any forgery or fake bills the directorate have right to imposed penalty.
- h. The contractor will maintain the reports if any equipment replace or repair for transparency & performance evaluation. Directorate monitoring team can randomly visit & counter check the maintenance reports, log book with justified reports just not the entry, visiting schedule. Team can also generate a report based on the performance & physical verification of all record.
- i. The contractor will submit the authorized Fitness Report of Staff Van after every 06 months to this directorate.

9. Medical Treatment

- a. Outdoor patient will be seen in MDSBC Units for common ailment and essentially required drugs will be issued to patients. Medicine List attached as per 3 to 5 days prescription for medicines will be rendered to patients.
- b. Minor Surgical procedure may be carried out at MDSBC Units including A/S Dressing, Abscess / Cyst-drainage, Minor stitching etc.
- c. Family planning services will be provided to Male / Female patients.
- d. Mothers and child health care including Ante-natal and post natal services will be provided.
- e. Mammography, X-Ray, ECG, Ultra Sound and Lab test will be carried out at MDSBC as advised by the MO wherever clinically indicated.
- f. Examination and Mammography screening with patient's consent will be done whenever required and will be referred to Govt. hospitals and will be followed up for prognoses and treatment by respective units.
- g. To educate patients regarding use of clean water, sanitation and general hygiene MO will deliver a motivational talk to the gathered clientele.
- h. Screening / referral and follow up CA breast with patient.

10. Sick Report Procedure:-

- a. Patient will report to Reception area (Assembly area under a shamiana for male and female separately). Reception will be managed by Attendant. He will register the patients and enter his/her particulars in the register/computer. He will make

prescription chit and enter the particulars of patient. He will then direct the patients to go to Doctor accordingly.

- b. Paramedic (Nursing Asst) and Lady Health Visitor/Lady Nursing staff will receive the patient respectively (Male or Female). They will check the vitals of patient e.g. pulse, BP, RR, Temp, Weight etc. and bring the patient to Doctor/Lady Doctor.
- c. Doctor/Lady Doctor will attend the patient, take history of patient, will examine patient, diagnose the disease & write prescription. If Doctor/Lady Doctor advises any Mammography, X-Ray/ECG or Ultrasound or any lab-Test, then paramedic will guide and direct the patient to concerned Mammography/X-Ray/Lab Technician for the needful.
- d. Minimum requirements of the Mammography patients: Active contact No, Postal address, CNIC of Patient if not available the CNIC of Father / Husband.
- e. Patient after Doctor's advice will report to medicine corner for taking medicines. Medical Attendant/Nursing Asst will see the prescription written by Doctor/Lady Doctor & dispense the medicines to the patient accordingly. He will clearly brief the patient regarding usage and dose of drugs for how many days.
- f. If inject able or any Injection / Drip is advised by the Doctor/Lady Doctor, N/Assistant will administer that drug accordingly and ask the patient to sit-down or lie-down on stretcher/coach. Patient will wait for 15 minutes after having been administered I/M or I/V injection to observe for any Reaction or otherwise.
- g. After completion of a/m process, the patient will be directed by paramedic /Lady Health Visitor to leave MDSBC & return to his / her village to take medicines as directed and after completion of treatment, can visit MDSBC Units for follow up if required.
- h. Whole sick report procedure as mentioned above will be monitored controlled by concerned Medical Officer accordingly and in befitting manner. He is responsible to facilitate the patients in getting medical advice & treatment from MDSBC Units. Any difficulty/problem faced by the patients or Medical Staff will be addressed then and there by concerned Doctor.
- i. Medical officer will also deliver motivational talk to the gathered clientele regarding personal hygiene and preventive health. Likewise Female Doctor /LHV will talk to females for female reproductive health and child care.

11. **Registration of Patients.** The record of the patients will be maintained under the direction of MO as follows:-

- a. 1x copy prescription form will be given to Directorate office
- b. 1x copy is given to the patient for future visits at month ending for perusal.
- c. Report of Mammography must be prepared genuinely and share with directorate separately.
- d. The Directorate will provide with the Web application / software with database after that the instructions will be provided accordingly.

12. **Supervision of MDSBC Units.**

- a. The Directorate Office will supervise all the operational services.

13. **Monitoring of MDSBC Units.**

The Directorate Office will monitor all the activities of MDSBC Units. Field visits will be conducted by the Monitoring team every month.

14. **Non Compliance of SOPs or Directives.**

The Contractor shall be penalized up to 10% of the monthly Operational Cost if the SOPs or the Directives of Directorate are not complied by the Contractor.

DR. KHANSA ZAMEER
Director Directorate of MD&HS
Rehabilitation Department
Government of Sindh, Karachi

LIST OF MEDICINES FOR OPD**Essential Medicines List of Sindh Government****For BHU & RHC**

S No.	Therapeutic Class	Sr #	Generic Drug Name	From	Strength		
A	Anesthetics local	1	lidocaine (hydrochloride)	Vial/ampoule	2% w/v (10ml)		
		2		topical	2% gel (15gm)		
B	Analgesics/NSAIDs	3	Acetylsalicylic acid (dispersible/ soluble)	Tablet	100mg to 500mg		
		4		suppository	75mg in 3ml		
		5	Diclofenac (sodium) / Voltral	ampule	75mg in 3ml		
		6		Tablet	100mg, 50mg		
		7		Gel / cream	50g		
		8	Ibuprofen	Tablet	200mg, 400mg		
		9		syrup	200mg/5ml		
		10		Cream	30g		
		11	Paracetamol + Neubrolforte	Tablet	500mg		
		12		syrup	125mg/5ml		
		13		suppository	100mg		
		14		Drop	30ml		
		C	Anti-Allergic and medicines used in anaphylaxis	15	Chloropheniramine (hydrogen maleate)	Tablet	4mg
				16		syrup	2.5mg/5ml
17	injection			10mg/ml			
18	Dexamethasone (disodium phosphate)			injection	4mg/ml		
19	Epinephrine (adrenaline)			ampule	1 mg/ml		
20	Hydrocortisone (sodium succinate)			injection	100mg, 250mg		
21	Prednisolone			tablet	5mg		
22	Loratadine			Tablet	10mg		
23				syrup	1mg/ml		
ANTI-INFECTIVES							
D	Antibiotics / antimicrobials	24	Amoxicillin (tri-hydrate) (preferably dispersible tablet)	Capsule/ tablet	250mg, 500mg		
		25		syrup	125mg, 250mg/5ml		
		26		injection	250mg, 500mg		
		27		Drop	30ml/15ml		
		28	Azithromycin	Capsule	250mg, 500mg		
		29		Suspension	128mg/5ml in 22.5ml		
		30	Cefixime (trihydrate)	Capsule	400mg		
		31		Syrup	60ml		
		32	Ampicillin (as sodium salt)	injection	500mg and 1g		

		33	Ciprofloxacin	tablet	250mg, 500mg
		34	(hydrochloride)	Syrup	60ml
		35	Cotorimoxazole	Tablet	400mg + 80mg
		36	(Sulfamethoxazole + trimethoprim)	syrup	200mg + 400mg
		37	Metronidazole	Tablet	200mg, 400mg
		38	(benzoate)	syrup	200mg/5ml
		39	Augmentin	Tablet	625mg, 375mg
		40		Syrup	90ml
E	Anti-Helminthic	41	Mebendazole	Tablet (chewable)	500mg (with caution, only for adults)
		42		syrup	100mg/5ml
F	Anti-Fungul	43	Nystatin	Tablet	500,000 IU
		44		Drops	100,000 IU/ml
		45		Pessary	100,000 IU
		46	Clotrimazole	Vaginal cream	1%
		47		Vaginal tablet	100mg and 500mg
G	Antimalarial For vivax For falciparum To be used in combination (co-blister)	48	Chloroquine (phosphate or sulfate)	Tablet	150mg
		49	Primaquine (disphosphate)	Tablet	15mg
		50	Artesunate + sulfadoxine and pyrimethamine	Tablet	Co-blister of (6 + 2) tablet-- two large tablets, each has sulfadoxine 500mg U.S.P + pyrimethamine 25mg U.S.P -- and six small tablets, each contains artesunate 100mg U.S.P
		51		Tablet	Co-blister of (6 + 2) tablet-- two large tablets, each has sulfadoxine 500mg U.S.P + pyrimethamine 25mg U.S.P -- and six small tablets, each contains artesunate 100mg U.S.P
		52	Artesunate + sulfadoxine and pyrimethamine	Tablet	50mg
H	Anti-Diabetics	53	Glibenclamide	Tablet	5mg
		54	Metformin (hydrochloride)	Tablet	500mg
I	Cardiovascular medicines	55	Furosemide	Tablet	20mg, 40mg
		56		injection	10mg
		57	Glyceryl trinitrate	Sublingual	500mcg
		58	Methyldopa	Tablet	250mg
		59	Enalapril (maleate)	Tablet	5mg, 10mg
J	Gastrointestinal (GIT) medicine	60	Metoclopramide	Tablets	10mg
		61		Syrup	5mg/5ml
		62	(hydrochloride)	Injection	5mg/ml
		63	Omeprazole	Capsule	10mg, 20mg, 40mg
		64		Injection	

		65	Aluminium hydroxide + magnesium trisilicate	Tablets	250mg + 500mg
		66	ORS (low osmolarity)	Sachet	Dry mixture (low osmolarity formula) in sachet for 1 liter of solution, each sachet contains glucose anhydrous 13.5gm B.P trisodium citrate dihydrate 2.9gm B.P. potassium chloride 1.5gm B.P., sodium chloride 2.6gm B.P.
		67	Glycerin	suppository	
K	Respiratory medicine	68	Salbutamol (sulfate)	Tablet	2 and 4mg
		69	(ventolin)	Solution	5mg/ml for nebulizer
		70		Syrup	120ml/60ml
		71	Aminophylline	Injection	25mg/ml
L	Anxiolytic	72	Alprazolam	Tablet	0.5mg
M	Miscellaneous	73	Atrophine (sulface)	Ampule	1 mg in 1 ml
		74	Charcoal activated	Powder	
		75	Diazepam	Injection	10mg
		76		Gel or rectal solutions	5mg/ml in 0.5ml; 2ml; 4 - ml
		77		Tablet	10mg, 5mg
		78	Magnesium sulphate	Injection	500mg/ml
		79	(Hydroxide) (Antacid)	Syrup	120ml
		80	Naloxone (hydrochloride)	injection	400mcg in 1ml
		81	Citralka	Syrup	120ml
		82	Fosfomycin	Syrup	60ml
		83	Lactose	Syrup	120ml
		84	Indral	Tablet	40mg, 10mg
		85	Tenormin	Tablet	25mg, 50mg
		86	Mepresor	Tablet	100mg
		87	Atrova	Tablet	20mg
		88	Hyoscine (Buscopan)	Tablet	
		89	Drotaverine (Nospa)	Tablet	
		90	Colic	Syrup	50ml
		91	Transamine	Capsule	500mg, 250mg
		92	Coferb	Syrup	120ml
		93	Betamethasone	Cream	20g
		94		Eye Drop	7.5ml
		95	Septan	Tablet	400mg, 800mg
		96	Vibramycin	Capsule / Tablet	100mg
		97	Gentamicin	Eye Drop	7.5ml
		98	Moxigan	Eye Drop	5ml
		99	Polyfax	Cream	20g
		100	Ventolin	Solution	20ml
		101	Gravinate	Tablet	50mg
		102		Syrup	60ml
		103	Claritek	Syrup	125mg / 5ml

		104		Drop	125mg / 5ml
		105	Acefyl	Syrup	125ml
		106	Zental	Syrup	10ml
		107	Azithromycin (Azomax)	Syrup	200mg / 5ml
		108	Oxygen concentrator/ cylinder		
N	Ophthalmic / ENT	109	Boroglycerine	Ear drops (only for wax removing)	40%
		110	Polymyxin B sulphate + ligocaine	Ear drops	Each ml contains polymyxin B (sulphate): 10,000 IU/ ml, Lignocaine: 50mg/ml]; 5ml plastic bottle
		111	Chloramphenicol	Eye drops	1% w/v, 0.5% w/v
		112	Gentamicin	Eye drops	0.30%
		113	Polymyxin B (sulphate) + bacitracin zinc	Eye ointment	10,000 IU/g + 500 IU/g
				114	Dextrose + saline
O	I/V Infusions Plasma substitutes	115	Glucose/dextrose	Infusion	5%, 10%
		116	Normal saline	Infusion	0.9%
		117	Ringer lactate	Infusion	Infusion 1,000ml contains calcium chloride 0.2gm U.S.P.; potassium chloride 0.3gm U.S.P.; 3.1gm sodium lactate U.S.P., sterile water for injection 1,000ml (q.s.) 1,000ml collapsible plastic bottle
		117	Water for injection	Ampule	5ml and 10ml
				118	Ascorbic acid
P	Vitamins and minerals <i>Micronutrients</i>	119	Calcium gluconate	Injection	100mg/ml in 10ml
		120	Calcium lactate	Tablet	500mg, 1gm
		121	Ergocalciferol (vitamin D)	Tablet	1.25mg (50,000 IU)
		122	Ferrous salt (fumerate)	Tablet	Equivalent to 60mg iron
		123		Syrup	Equivalent 25mg/ml iron
		124	Folic acid	Tablet	0.5mg, 1 mg, and 5mg
		125	Ferrous salt + folic acid	Tablet (DRAP approved)	Tablet, equivalent to 60mg iron + 400mcg folic acid
		126	Multiple micronutrients	Sachet	UNICEF approved
		127	Retinol (vitamin A)	Tablet/ capsule	50,000 IU; 100,000 IU; 200,000 IU (as palmitate)
		128	Zinc Sulphate	Dispersible tablet	20mg
		129		syrup	120ml
		130	B complex	Tablet	DRAP approved
		131	Multivitamins	Tablet	DRAP approved
		132	Lysovit	Syrup	120ml
Q	Dermatologicals	133	Benzyl benzoate	Lotion	5%, 25%
		134	Calamine	Lotion	15%
		135	Hydrocortisone	Cream	1%

		136	Polymyxin B (sulphate) + bacitracin zinc	Ointment	10,000 IU/g + 500 IU/g
		137	Silver sulphadiazine	cream	1%
R	Antiseptics/ disinfectants <i>Only chlorine-based compound in stable dry granular form</i>	138	Povidone-iodine	Solution	10% w/v
		139	Halogenated natrium phosphate	Powder	100gms
		140	Chlorine-base compund	Powder	(0.1% available chlorine for solution)
		141	Chlorheide + ceterimide	Solution	1.5% w/v + 15% w/v
		142	Chlorhexidine digluconate (7.1%) for cord care	Gel	Equivalent to 4% chlorhexide
		S	Disposable supplies	143	Syringe (autodisable)
144	IV sets (DRAP Approved)			Sterile packs	
145	IV canula (DRAP approved)			Sterile pack	16G, 20G, 24G
146	Adhesive tape (hypoallergenic)			Roll	1inch, 2 inch
147	Surgical gauze				32 pix, 40 M
148	Cotton bandage			Roll	6.5cm x 2m
149	Absorbent cotton wool			Pack	500gm
150	Examination gloves			Pairs	Box of 100 (small, medium and large) [1:2:1]
151	Sterile surgical glove			Pairs	7, 7 ^{1/2}
152	Silk sutures			Sterile pack	0, 1/0, 2/0, 3/0, 4/0
153	Face masks disposable				
154	Blood lancets			Sterile pack	
155	Slides				

Note: Medicines list is proposed as per BHU and RHC Essential Medicines but not limited to. The Medicines can be included and increased as per Doctors demand and patients flow.

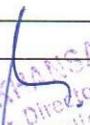
DR. KHANSA ZAMEER
Director, Directorate of MD&EHS
Rehabilitation Department
Government of Sindh, Karachi

EMERGENCY TRAY FOR OPD

Sr #	Name of Items	Strength	Quantity
1	Injection tranexamic acid	250mg/5ml	10
2	Injection atropine	1mg/1ml	10
3	Injection adrenaline	0.1mg/ml	10
4	Injection diazepam	5mg/ml	10
5	Injection diclofenac sodum	25mg/ml	10
6	Injection pheniramine (maleate)	22.7mg/2ml	10
7	Injection hydrocortisone sodiium	100mg	1
8	Injection lidocaine	2% w/v	5
9	Water for injection	5ml	5
10	Injection ringer lacate	1,000ml	10
11	Injection normal saline	1,000ml	10
12	Glyceryl trinitrate sublingual	500mcg	50
13	Isosorbide dinitrate sublingual	5mg	10
14	Llidocaine	Gel	1
15	Cotton roll BPC	500gms	1
16	Compression bandage BPC		5
17	D/S	5cc	30
18	IV set		20
19	IV cannula	18G, 20G, 22G, 24G	20 (1:2:2:1)
20	Injection 25% DW	25 ml ampoule	2

LIST OF LAB & OTHER TEST

1	ALP Kit	26	Typhidot
2	ALT Kit	27	Urea Kit
3	Anti HCV Device	28	Uric Acid
4	Bilirubin Kit	29	Urine Combi
5	Blood Grouping	30	Urine Sugar Strips
6	Blood Lancet	31	VDRL
7	Blue Tips	32	Widal (To,TH)
8	CBC Tubes	33	Yellow Tips
9	Cholesterol Kit	34	Urine Cobi
10	Cover Slips	35	SPRIT
11	Creatinine Kit	36	Cotton Roll 400G
12	Distal Water	37	Sunny Plast
13	EDTA Solution	38	Syringe 3cc
14	ESR Solution	39	Surgical Gloves
15	Glass Slides	40	Glass Test Tube
16	Gluco Meter Strips	41	Urine Container Sterilized
17	Glucose	42	Face Mask
18	HBs Ag Device	43	Calcium Serum
19	CBC	44	HIV
20	H-Pylori	45	Tissue Roll
21	ICT – TB	46	Syringe 5cc
22	Malaria Kit (MP)	47	X Ray Films
23	Pregnancy Strips	48	Fixer Powder
24	R. A Factor	49	Developer Powder
25	Test Tubes Glass/Plastic		


DR. MANSA ZAMEER
 Director, Directorate of NDR&RS
 Rehabilitation Department
 Government of Sindh, Karachi

Hiring Criteria of Medical & Para Medical Staff by the Contractor**CPMO**

Sr#	Designation	Criteria
1	Director	MBBS, MPH or MBA in Health Management with At least 5 years in senior management position
2	Manager (Admin)	BBA/MBA Management with 5 years experience.
3	Medical Officer (Monitoring) Male / Female	MBBS with 5 years' experience of Monitoring and Inspection
4	Consultant for Mammography Screening	MBBS with FCPS / MCPS MD in Radiology Minimum 5 years of post-specialization experience in Radiology, Experience in mammography and breast imaging mandatory.
5	Computer Operator	Bachelor's Degree with Diploma in Computers courses.
6	Accountant	B.Com / MBA Finance with 2 to 3 years' experience.
7	Bio Medical Engineer	BE or BS Bio-Medical Technology / DAE with B.Tech, 3 to 5 Years' Experience.
8	Driver LTV	Valid LTV Driving License (Mandatory).

Sr#	Designation	Criteria
1	Medical Officer (Doctor)	MBBS, 5 Years' Experience in private firm (preferable with NGOs)
2	Nurse	Post Diploma (PNC Registered), 3 to 5 years' experience in Private firm (preferable with NGOs)
3	Lab Technician	Diploma / Post Diploma from reputable institute along with 3 to 5 Years' experience in private firm (preferable with NGOs)
4	X-Ray Technician	Diploma / Post Diploma in Emergency & ICU along with 3-5 years' experience in private firm
5	OT Technician	Diploma OTT, 3 years' experience.
6	Biomedical Technician	Diploma in Biomedical, 5 years' Experience.

District office

1	Admin Officer	Bachelor in Humanities or Business Administration or Diploma in Public Administration along with 5 to 6 Years' experience in private firm (preferable with NGOs)
2	Computer Operator	Bachelor and DIT / CIT along with 3 to 5 years' experience in private firm (preferable with NGOs)
3	Drive HTV	Middle, having HTV license along with 3 years' experience in private firm (preferable with NGOs)
4	Cook	Literate, 3 years' experience
5	Helper	Literate, 2 years' experience
6	Office Boy	Literate, 2 years' experience

Note: The Contractor shall follow the Notification of Government of Sindh regarding the Minimum wages.

DR. KHANSA ZAMEER
Director, Directorate of MD&EHS
Rehabilitation Department
Government of Sindh, Karachi

FORMAT FOR INTEGRITY PACT:

(This Integrity Pact Format shall be on the stamp Paper valuing Rs. 100/- submitted by the successful Bidder(s) with attestation of Notary Public).

Contract Number: _____

Dated: _____

Contract Value: _____

Contract Title: _____

1. M/s. _____ hereby declares that it has no obtained or induced the Procurement of any contract, right, interest, privilege or other obligation or benefit from Government of Sindh (GoS) or any Administrative subdivision or Agency thereof or any other entity owned or controlled by it (Government of Sindh) through any corrupt business practice.
2. Without limiting the generality of the foregoing, M/s. _____ represents and warrants that it has fully declared the brokerage, commission, fees etc. paid or payable to anyone and not given or agreed to give and shall not give or agree to give to anyone within or outside Pakistan either directly or indirectly through any natural or juridical person, including its Affiliate, Agent, Associate, Broker, Consultant, Director, Promoter, Shareholder, Sponsor, or Subsidiary, any Commission, Gratification, Bribe, Finder's Fee or Kickback, whether described as consultation fee or otherwise, with the object of obtaining or including the procurement of a contract, right, interest, privilege or other obligation or benefit, in whatsoever form, from Mobile Diagnostic & Emergency Healthcare Services Government of Sindh, except that which has been expressly declared pursuant hereto.
3. M/s. _____ certifies that it has made and will make full disclosure of all agreements and arrangements with all persons in respect of or related to the transaction with Mobile Diagnostic & Emergency Healthcare Services Government of Sindh and has not taken any action or will not take any action to circumvent the above declaration, representation or warranty.
4. M/s. _____ accepts full responsibility and strict liability for making any false declaration, not making full disclosure, misrepresenting facts or taking any action likely to defeat the purpose of this declaration, representation and warranty. It agrees that any contract, right, interest, privilege or other obligation or benefit obtained or procured as aforesaid shall, without prejudice to any other right and remedies available to Mobile Diagnostic & Emergency Healthcare Services, Government of Sindh under any law, contract or other instrument, be voidable at the option of Mobile Diagnostic & Emergency Healthcare Services, Government of Sindh.
5. Notwithstanding any rights and remedies exercised by Mobile Diagnostic & Emergency Healthcare Services, Government of Sindh in this regard, M/s. _____ agrees to indemnify Mobile Diagnostic & Emergency Healthcare Services, Government of Sindh for any loss or damage incurred by it on account of its corrupt business practices and further pay compensation to Mobile Diagnostic & Emergency Healthcare Services, Government of Sindh in an amount equivalent to Ten Time the sum of any commission, Gratification, Bribe, Finder's Fee or Kickback given by M/s. _____ as aforesaid for the purpose of obtaining or inducing the Procurement of any contract, right, interest, privilege or other obligation or benefit, in whatsoever form, Mobile Diagnostic & Emergency Healthcare Services, Government of Sindh.

**(Mobile Diagnostic & Emergency
 Healthcare Services)**

**(Bidders Authorized Signatures with
 Official Stamp)**

FORM OF BIDDER INFORMATION

(to be submitted on the bidder's letterhead with technical proposal)

Name of Bidder / Firm		
Status of the Bidder	Sole Proprietorship	
	Partnership	
	Limited Company	
	Joint Venture	
Name of Owner		
CNIC No. of the Owner		
Postal Address		
Telephone No. (Landline No. & Cell No.)		
Fax No.		
Email Address of the Bidder		
Provide phone /cell number & email address of bank who prepared bid security		
Authorized person	Owner/Representative	
	Name	
	Designation	
	Signature	
	Contact No.	
Active GST No. of the bidder		
Active FBR NTN no. of the bidder		
Active SRB no. of the bidder		

Chans.

DR. KHANSA ZAMEER
 Director, Directorate of MD&EHS
 Rehabilitation Department
 Government of Sindh, Karachi

NOTICE INVITING TENDER

Operation & Maintenance of Ten Mobile Diagnostic Services for Breast Cancer Units

The Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS), Rehabilitation Department, Government of Sindh (GoS), invites e-bids through E-Pak Acquisition & Disposable System (EPADS) from well established, experienced and reputed firms / bidders for Operation & Maintenance of Ten Mobile Diagnostic Services for Breast Cancer Units, as per provision of SPPRA Rules 2010 (Amended-up to date) through single stage two envelopes procedure / method.

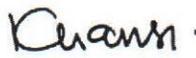
The interested firm(s) / bidder(s) / either individually or in a consortium (Joint venture) which intend(s) to participate in competition must be registered with and appear on the 'List of Active Taxpayers' of FBR/SRB for income tax and GST/SST (wherever applicable) for the Operation & Maintenance of Ten Mobile Diagnostic Services for Breast Cancer Units.

Terms & Conditions

1. The interested firms can purchase bid document containing detailed Terms and Conditions from the office of the MD&EHS, Rehabilitation Department, GoS, during working days/hours or bid document can be downloaded from website <https://portalsindh.eprocure.gov.pk> against the payment of tender fee (Non-refundable) Rs.5000/- in shape of pay order in favor of the MD&EHS from the date of publication of NIT.
2. Electronic bids should be submitted through EPADS only. Manual bids will not be received/entertained. Interested firms are required to register themselves on the EPAD System at the link <https://sindh.eprocure.gov.pk/#/supplier/registration> for the submission of electronic bids.
3. The Bid Security equal to 2% of total Bid in shape of Pay Order/ Demand Draft from any scheduled Bank on company name / firm account in favor of the Director, MD&EHS, Rehabilitation Department, GoS.
4. The bids, prepared according to the instructions provided in the bidding documents, must be submitted on EPADS by 01st April, 2026 at 11:30 AM and bids will be opened on the same day at 12:30 PM.
5. If any fake documents are found, then the tender is liable to be rejected / cancelled without any compensation with penalty as per rules.
6. A representative must have authority on stamp paper from his / her company's owner along with CNIC copy.

Note:

- a. In case Govt. announces any public holiday or any unfavorable circumstances the tender/bids will be submitted and opened on the next working day, at the same venue and time.
- b. The Procuring Agency reserves the right to reject any/all bids under the relevant provisions of SPP Rules 2010(Amended-up to date)
- c. In case of any difficulty, prospective bidders / firms may contact the EPADS Helpline 051-111-137-237 during the working days/hours.


DR. KHANSA ZAMEER
Director, Directorate of MD&EHS
Rehabilitation Department
Government of Sindh, Karachi



**GOVERNMENT OF SINDH
REHABILITATION DEPARTMENT**

Bungalow No: D-83/I, KDA Scheme-5 Block-VII, Clifton,
Phone No: 021-99250052-53, Fax: 021-35379950

Karachi dated: 25th August, 2025

NOTIFICATION

No: SO-II (Rehab)/3-24/2022/

: In compliance of Rule-31 (1) of SPPRA Rules 2010 (amended upto date), a Complaint Redressal Committee is hereby constituted for all procurements of works, services and goods for Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS), Rehabilitation Department during current financial year 2025-26 as under: -

1. Secretary, Rehabilitation Department
2. Representative from A.G Sindh.
(Not below the Rank of BS-18 Grade)
3. An independent professional from the relevant field

Chairman
Member

Member

Terms of Reference (ToR)

The Complaint Redressal Committee (CRC) shall perform the functions according to Rule 31 of SPPRA Rules 2010 (amended upto date).

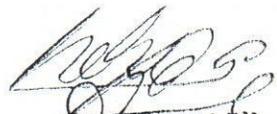
(AKHTAR HUSSAIN BUGTI)
SECRETARY TO GOVT. OF SINDH

No: SO-II (Rehab)/3-24/2022/5673

Karachi dated: August, 2025

A copy for information & necessary action to:

1. The Account General Sindh, Karachi.
2. The Director, MD&EHS, Rehabilitation Department, Govt. of Sindh, Karachi.
3. P.S to Secretary, Rehabilitation Department, Government of Sindh, Karachi.
4. Office Order File.
5. Master File 2025-26.


(SHAHID ALI)
SECTION OFFICER (Coord.)

Karachi dated: 25th August, 2025

NOTIFICATION

No: SO-II (Rehab)/3-24/2022/ : In compliance of Rule-7 of SPPRA Rules 2010 (amended upto date), a Procurement Committee is hereby constituted for all procurements of works, services and goods for Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS), Rehabilitation Department during current financial year 2025-26 as under: -

- | | |
|--|--------------------|
| 1. Director, MD&EHS | Chairman |
| 2. Representative from Health Department, | Member |
| 3. Deputy Director PDMA | Member |
| 4. Representative from W&S Department | Member |
| 5. Section officer, Rehabilitation Department. | Member / Secretary |

Terms of Reference (ToR)

The Procurement Committee shall perform their functions according to Rule 8 of SPPRA Rule 2010 (amended upto date), which is as under:

1. Preparing and / or reviewing Bidding Documents.
2. Carrying out technical as well as financial evaluation of the bids.
3. Preparing Evaluation Report as provided in Rule 25.
4. Making recommendations for the award of contract to the competent authority
5. and
6. Perform any other function ancillary and Incidental to the above.

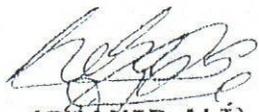
(AKHTAR HUSSAIN BUGTI)
SECRETARY TO GOVT. OF SINDH

No: SO-II (Rehab)/3-24/2022/5672

Karachi dated: August, 2025

A copy for information & necessary action to:

1. The Secretary, Health Department, Govt. of Sindh, Karachi.
2. The Secretary, W&S Department, Govt. of Sindh, Karachi.
3. The Director General, PDMA, Karachi.
4. The Director, MD&EHS, Rehabilitation Department, Govt. of Sindh, Karachi.
5. P.S to Secretary, Rehabilitation Department, Government of Sindh, Karachi.
6. Master File 2025-25.


(SHAHID ALI)
SECTION OFFICER (Coord.)

ABC
Certified

سورهيه مريڻ سوپ کي ته دل جا وهڻ وسار - پيڻائي

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روزاني سوپ ڪراچي (8) آچر 08 مارچ 2026 ع

ٽينڊر گھرائڻ لاءِ نوٽيس

پريست ڪينسر يونٽس لاءِ ٽين موبائل ڊائگنوسٽڪ سروسز جو آپريشن ۽ سار سنڀال

سنڌ حڪومت جي بحالي ڪاتي، موبائل ڊائگنوسٽڪ اينڊ ايمرجنسي هيلٿ ڪيئر سروسز (MD&EHS) جي ڊائريڪٽوريٽ، ايس پي بي آري روز 2010 (ترميم ٿيل تاحال) جي سنگل اسٽيج ٽو انويلپ طريقيڪار/طريقيڪار جي مطابق. پريست ڪينسر يونٽس لاءِ ڏهه موبائل ڊائگنوسٽڪ سروسز جي آپريشن ۽ سار سنڀال لاءِ ڪائر ڪيل. تجربيڪار ۽ نامور فرمن/واڪ ڊينڊڙن کان اي-باڪ ايڪوريشن اينڊ ڊسپوزيبل سسٽم (EPADS) ذريعي اي-آپون گھرائڻ تيون.

پريست ڪينسر يونٽس لاءِ ڏهه موبائل ڊائگنوسٽڪ سروسز جي آپريشن ۽ سار سنڀال لاءِ دلچسپي رکندڙ فرمز/واڪ ڊينڊڙن يا ته انفرادي طور تي يا هڪ ڪنسورشپ (جوائنٽ وينچر) و جيڪي چٽاڀيٽي و حصو وٺڻ جو ارادو رکن ٿا، انهن کي ايف بي آر/ايس آري بي جي آمدني ٽيڪس ۽ جي ايس تي/ايس ايس تي (جتي به لاڳو هجي) لاءِ رجسٽرڊ هجڻ گھرجي ۽ فعال ٽيڪس ادا ڪندڙن جي فهرست تي ظاهر ٿيڻ گھرجي.

شرط ۽ ضابطا

1. دلچسپي رکندڙ فرمز اين آءِ تي جي اشاعت جي تاريخ کان ڪم ڪار واري ڏينهن/وقت دوران ٽينڊر فيس جي ادائگي (ناقابل واپسي) 5000/- روپيا MD&EHS جي حق و بي آر جي صورت و ادائگي عيوض ايس ڊي ۽ اي ايج ايس. بحالي ڪاتي، جي ايس ايس جي آفيس مان تفصيلي شرطن ۽ ضابطن تي مشتمل آڇ دستاويز خريد ڪري سگھجن ٿا يا آڇ دستاويز ويب سائيٽ <https://portalsindh.eprocure.gov.pk> تان ڏٺون لوڊ ڪري سگھجن ٿا.
2. اليڪٽرانڪ آپون صرف EPADS ذريعي جمع ڪرايون وڃن. بائمرادو قبول/جمع نه ڪيون وينديون. دلچسپي رکندڙ فرمز اليڪٽرانڪ آپون جمع ڪرائڻ لاءِ لنڪ <https://sindh.eprocure.gov.pk/#/supplier/registration> تي EPAD سسٽم تي پاڙ کي رجسٽرڊ ڪرائڻ گھرجي.
3. ڊائريڪٽر MD&EHS ريهيبلينٽيشن ڊپارٽمينٽ گورنمينٽ آف سنڌ جي حق و ڪمپني جي نالي/فرو اڪائونٽ تي ڪنهن به فيڊول بينڪ مان بي آر/ڊي/بيمانيه ڊوائس جي صورت و ڪل آڇ جي 2% جي باور ڀند سيڪيوريٽي هجڻ گھرجي.
4. آڇ جي دستاويز و ڏنل هدايتن مطابق تيار ڪيل آچون. 01 اپريل 2026 تي صبح جو 11:30 وڳي تائين EPADS تي جمع ڪرائڻ گھرجن ۽ آچون ساڳئي ڏينهن 12:30 وڳي کوليون وينديون.
5. جيڪڏهن ڪو به جعلي دستاويز ملي ٿو، ته پوءِ بغير ڪنهن معاوضي جي ٽينڊر رد/منسوخ ڪيا ۽ ضابطن جي مطابق جرمانو لاڳو ڪرڻ جو حق آهي.
6. هڪ نمائندگي ڪمپني جي مالڪ کان اسٽيمپ پيپر تي اختيار هجڻ گھرجي ۽ CNIC ڪاپي سان گڏ.

نوٽ:

- a. حڪومت پاران عام موڪل واري اعلان يا ڪنهن به ائوٽنڊو واقعي جي صورت و ٽينڊر/آچون آڳاٽي ڪم ڪار واري ڏينهن ساڳي وقت ۽ هنڌ تي جمع ڪرايا ۽ کوليا ويندا.
- b. ايس پي بي آري روز 2010 جي لاڳاپيل شق تحت پروڪيورنگ ايجنسي ڪا به هڪ يا سموريون آچون رد ڪرڻ جو حق محفوظ رکي ٿي.
- c. ڪنهن به ڏکيائي جي صورت و امڪاني آڇيندڙ EPADS سان دفعتي ڏينهن/وقت و ٽيلا 137-111-051 237 تي رابطو ڪري سگھن ٿا.

ڊائريڪٽر

ڊائريڪٽوريٽ آف MD&EHS

ريههبلينٽيشن ڊپارٽمينٽ گورنمينٽ آف سنڌ

INF.KRY.No: 949/2026

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DR. KHAUSA ZAMEER
Director, Directorate of MD&EHS
Rehabilitation Department
Government of Sindh, Karachi

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بانی میر ظلیل الرحمن
چاند 90
آوار 18 رمضان المبارک 1447ھ 8 مارچ 2026ء نمبر 67

نوٹس جلی ٹینڈر

بریسٹ کینسر یونٹس کے لئے دس موبائل ڈائگنوسٹک اینڈ ایمرجنسی ہیلتھ کیئر

دی ڈائیکریٹ آف موبائل ڈائگنوسٹک اینڈ ایمرجنسی ہیلتھ کیئر سروسز (MD&EHS) ری پبلیکیشن ڈپارٹمنٹ حکومت سندھ بذریعہ ایک مرحلہ دولغافہ کاروائی/طریق کار SPPRA روز 2010 (ترمیم شدہ تاہ حال) کی شق کے مطابق بریسٹ کینسر یونٹس کے لئے دس موبائل ڈائگنوسٹک سروسز کی آپریشن اور مینٹیننس کے لئے خوب مستحکم تجربہ کار اور معروف فرم/پیشکش دہندگان سے E پاک ایکوزیشن اینڈ ڈسپوزا بل سسٹم (EPADS) کے ذریعے ای بڈز مدعو کرتا ہے۔

دلچسپی لینے والی فرم (ز)/پیشکش دہندہ (دہندگان) / چاہے انفرادی ہوں یا ایک کنسورشیم (جو انٹ وچر) میں ہوں، جو مسابقت میں شرکت کے خواہاں ہے/ ہیں لازماً بریسٹ کینسر یونٹس کے لئے دس موبائل ڈائگنوسٹک سروسز کے آپریشن اور مینٹیننس کے لئے FBR/SBR برائے آئی ٹیکس اور GST/SST (جہاں بھی اطلاق ہو) کی ایکٹیو ٹیکس پیئرز کی لسٹ میں ظاہر اور رجسٹرڈ ہوں۔

شرائط و ضوابط :

(1) دلچسپی رکھنے والی فرم مفصل شرائط و ضوابط پر مبنی ٹینڈر دستاویزات NIT کی اشاعت کی تاریخ سے -/5,000 روپے ٹینڈر فیس (ناقابل واپسی) بشکل پی آرڈر بنام MD&EHS کی ادائیگی کے مقابل کسی بھی ایام کار/اوقات دفتر MD&EHS ری پبلیکیشن ڈپارٹمنٹ حکومت سندھ سے حاصل کر سکتی ہیں یا بڈ دستاویز ویب سائٹ <https://portalsindh.eprocure.gov.pk> سے ڈاؤن لوڈ کی جاسکتی ہے۔

(2) ایکٹر ونک بڈز صرف بذریعہ EPADS جمع کرانی چاہئیں مینوئل بڈز وصول/زیر غور نہیں لائی جائیں گی۔ دلچسپی رکھنے والی فرم سے درکار ہے کہ ایکٹر ونک بڈز کو جمع کرانے کے لئے لنک <https://sindh.procure.gov.pk/#/supplier/registration> میں EPAD سسٹم پر خود کو رجسٹر کرالیں۔

(3) ٹوٹل بڈ کی 2% مساوی بڈ سکورٹی بشکل پی آرڈر ذمہ دارانہ ڈرافٹ از کمپنی نام/فرم اکاؤنٹ پر کوئی شیڈولڈ بینک بچن ڈائریکٹر MD&EHS ری پبلیکیشن ڈپارٹمنٹ حکومت سندھ۔

(4) بڈنگ دستاویزات میں فراہم کردہ ہدایات کے مطابق تیار کردہ پیشکش EPADS پر لازماً یکم اپریل 2026 بوقت صبح 11:30 بجے تک جمع کرا دینی چاہئیں اور پیشکشیں اسی روز بوقت دوپہر 12:30 بجے کھولی جائیں گی۔

(5) اگر کوئی جعلی دستاویزات پائی جاتی ہیں تو پھر ٹینڈر رولز کے مطابق جرمانے کے ساتھ بلا ہرجاہ مسترد/منسوخ کی مستوجب ہوگی۔

(6) نمائندہ کے پاس لازماً CNIC کاپی کے ہمراہ اس (مرد/خاتون) کے پاس کمپنی کے مالک کی طرف سے اسٹامپ پیچہ پر اتھارٹی ہونی چاہئے۔

نوٹ:

(a) حکومت کی جانب سے کسی عام تعطیل یا کسی ناخوشگوار حالات کی صورت میں ٹینڈر/بڈز ای جگہ اور وقت پر آئندہ یوم کار پر جمع کی اور کھولی جائیں گی۔

(b) پروڈیورنگ ایجنسی SPP روز 2010 (ترمیم شدہ تاہ حال) کی متعلقہ شقوں کی تحت کسی/جملہ پیشکشوں کو مسترد کرنے کا حق محفوظ رکھتی ہے۔

(c) کسی دشواری کی صورت میں امکانی پیشکش دہندگان/فرم دوران ایام کار/اوقات EPADS ہیلپ لائن 051-111-137-237 پر رابطہ کر سکتے ہیں۔

دستخط..... خانصہ ضمیر

ڈائریکٹر

ڈائریکٹر بریسٹ آف MD&EHS

ری پبلیکیشن ڈپارٹمنٹ، حکومت سندھ، کراچی

INF-KRY 949/26

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INFORMATION DEPARTMENT

Chansi
DR. KHANSA ZAMEER
Director, Directorate of MD&EHS
Rehabilitation Department

ٹینڈر طلبی نوٹس

بریسٹ کینسر یونٹس کیلئے دس موبائل ڈائیکٹا سٹک سروسز کے آپریشن اور معنی بخش کیلئے

ڈائریکٹوریٹ آف موبائل ڈائیکٹا سٹک اینڈ ایمرجنسی ہیلتھ کیئر سروسز (MD&EHS)، بحالی (ری ہیبیلیٹیشن) ڈیپارٹمنٹ، حکومت سندھ کی جانب سے بریسٹ کینسر یونٹس کے لیے دس موبائل ڈائیکٹا سٹک سروسز کے آپریشن اور معنی بخش کے لیے مستند، تجربہ کار اور با اعتماد کمپنیوں/فرمز سے ای۔ پی۔ ای۔ ڈی ایس (EPADS) سسٹم کے ذریعے ایکٹرائٹ بولیوں (Bids) طلب کی جاتی ہیں۔ یہ ٹینڈر SPPRA روڈ 2010 (ترمیم شدہ) کے مطابق منسلک اسٹیٹ ٹرانسپورٹ کے تحت جاری کیا جا رہا ہے۔

دلچسپی رکھنے والی کمپنیاں/فرمز، چاہے انفرادی طور پر ہوں یا کنسورٹیم (جو انٹ وینچر) کی صورت میں، کے لیے لازم ہے کہ وہ FBR/SRB کی ایکٹو ٹیکس رزلٹ میں آکر ٹیکس اور بی ایس ٹی / ایس ٹی (جہاں لاگو ہو) کے لیے رجسٹرڈ ہوں۔

شرائط و ضوابط:

1۔ دلچسپی رکھنے والی فرمیں تفصیلی شرائط و ضوابط پر مشتمل بڈ ڈاؤن لوڈ کرنے کے لیے MD&EHS، ری ہیبیلیٹیشن ڈیپارٹمنٹ، حکومت سندھ سے دفتری اوقات میں حاصل کر سکتی ہیں یا ویب سائٹ <https://portalsindh.eprocure.gov> سے ڈاؤن لوڈ کر سکتی ہیں۔ اس کے لیے غیر قابل واپسی فیس 5000 روپے بے آر ڈر کی صورت میں MD&EHS کے متن میں جمع کروانا ہوگی۔

2۔ تمام بولیاں صرف EPADS کے ذریعے ایکٹرائٹ طریقے سے جمع کروائی جائیں گی۔ دفتری بولیاں قابل قبول نہیں ہوں گی۔ دلچسپی رکھنے والی فرمز کو EPADS سسٹم پر درج ذیل لنک کے ذریعے رجسٹریشن کروانا ضروری ہے:

<https://sindh.eprocure.gov.pk/#/supplier/registration>

3۔ بڈ سیکورٹی کل بڈ کی 2 فیصد ہوگی جو کسی بھی شیڈولڈ بینک سے بے آر ڈر یا ڈیمائٹڈ ڈرافٹ کی صورت میں کمپنی کے نام سے ڈائریکٹر MD&EHS، ری ہیبیلیٹیشن ڈیپارٹمنٹ، حکومت سندھ کے متن میں جمع کرائی جائے گی۔

4۔ بڈ دستاویزات میں دی گئی ہدایات کے مطابق تیار کردہ بولیاں 16 اپریل 2026ء بدھ صبح 11:30 بجے تک EPADS پر جمع کرائی جائیں گی۔

5۔ اگر دستاویزات نامکمل پائی گئیں تو ٹینڈر بغیر کسی اطلاع کے منسوخ کیا جاسکتا ہے۔

6۔ کمپنی کا نمائندہ اسٹامپ پیپر پر کمپنی مالک کی طرف سے مجاز اتھارٹی لیسٹ اور اپنی CNIC کی کاپی پیش کرے گا۔

نوٹ:

الف) اگر حکومت کی جانب سے کسی سرکاری تعطیل یا غیر متوقع صورتحال کا اعلان کیا جاتا ہے تو بولیاں اگلے کام کے دن اسی مقام اور وقت پر وصول اور کھولی جائیں گی۔

ب) خریداری کرنے والا ادارہ SPP روڈ 2010 (ترمیم شدہ) کے تحت کسی بھی یا تمام بولیوں کو مسترد کرنے کا حق محفوظ رکھتا ہے۔

ج) کسی بھی مشکل کی صورت میں ممکنہ بولی دہندگان EPADS ہیلپ لائن 051-111-137-237 پر دفتری اوقات میں رابطہ کر سکتے ہیں۔

ڈاکٹر خانصیر

ڈائریکٹر ڈائریکٹوریٹ آف MD&EHS

ری ہیبیلیٹیشن ڈیپارٹمنٹ

حکومت سندھ، کراچی

INF-KRY.949/2026

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قیمت 15 روپے

جلد 25 / شماره 306 ہفتہ 17 رمضان المبارک 1447، 07 مارچ 2026ء

KARACHI 07 MARCH 2026

11/3
DR. KHANSA ZAMEER
Director, Directorate of MD&EHS
Rehabilitation Department
Government of Sindh, Karachi

ANNUAL PROCUREMENT PLAN
(WORKS, GOODS & SERVICES)
Financial Year 2025-26

Name: Directorate of Mobile Diagnostic & Emergency Healthcare Services (MD&EHS),
Rehabilitation Department, Government of Sindh

(Rs. In millions)

Sr.No	Description of Procurement	Quantity (Where applicable)	Estimated unit cost (where applicable)	Estimated total cost	Funds Allocated	Source of funds (ADP/N on ADP)	Proposed Procurement method	Timing of Procurements				Remarks
								1 st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	
1.	Stationary	-	-	0.974	0.974	Non-APD	Open Tender	100%				
2.	Printing & Publication	-	-	1.000	1.000	Non-APD	Open Tender	100%				
3.	Others / Miscellaneous	-	-	2.291	2.291	Non-APD	Open Tender	100%				
4.	Advertisement & Publicity	-	-	4.000	4.000	Non-APD	Open Tender	25%				
5.	Computer Stationary	-	-	0.700	0.700	Non-APD	Open Tender	100%				
6.	Purchase of Plant & Machinery	-	-	2.950	2.950	Non-APD	Open Tender	100%				
7.	Operation & Maintenance of 10 Mobile Diagnostic Services for Breast Cancer Units	-	-	556.863	556.863	Non-APD	Open Tender	100%				

Khansa
Dr. KHANSA ZAMEER
Director, MD&EHS