

Government of India
Kalawati Saran Children's Hospital
New Delhi – 110001

No: KSCH/Purchase/2025-26/ 3155

Dated:- 28.7.2025

NOTICE

29

Following article which is not available on GeM portal is to be procured through inviting Quotations under GFR-155. Interested firms/suppliers may quote their concessional rates in the prescribed format in a sealed envelope within one week of issuance of this notice. Quotations must be submitted on original letter head duly signed and stamped item wise. Sample may be asked by the user department as and when required.

Sl.No.	Name of Items	Quantity
1	Tracheostomy Set (as per annexure)	01 Set

Quantity may vary as per the demand of the user department. Firm must quote all the items. Quotations received after the prescribed dates will not be entertained under any condition. The quotation should be addressed to the Director, LHMC & Associated Hospitals, New Delhi.

Quotation Format

Sr.No.	Name of Item	Unit Price (In Rs.)	Quantity	Amount in Rupees
	Offered Make/Brand :			
	Offered Model :			
	Total :			
	GST Percentage :			
	Total Amount (included GST %)			
	Rupees in words :			

Apart from above quotations must bear the following details :

GST Number of the bidder :

Complete Mailing Address (with pin code) :

Mobile Number :

Full Name of the Owner :

PAN No.:

e-mail address :

Name of Signatory should be there in quotation:

Vimal Kr. Arya

Dr.Vimal Kr. Arya
Additional Medical Supdt.

To,

Notice Board, Purchase Section, KSCH
Notice Board, Purchase Section, LHMC

Copy to :

Webmaster, LHMC & Assoc. Hospitals with request to upload this Notice on Hospital website for the period of one week from the date of issue/receipt of request.

Government of India
Kalawati Saran Children's Hospital
New Delhi – 110001

No: KSCH/Purchase/2025-26/3154

Dated:- 28.7.2025

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Sl.No.	Name of Items	Quantity
1	Surgical Instruments Tonsils and Adenoids (as per annexure)	01 Set

Quantity may vary as per the demand of the user department. Firm must quote all the items. Quotations received after the prescribed dates will not be entertained under any condition. The quotation should be addressed to the Director, LHMC & Associated Hospitals, New Delhi.

Quotation Format

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	Offered Make/Brand :			
	Offered Model :			
	Total :			
	GST Percentage :			
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Dr.Vimal Kr. Arya
Additional Medical Supdt.

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Notice Board, Purchase Section, KSCH
Notice Board, Purchase Section, LHMC

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Government of India
Kalawati Saran Children's Hospital
New Delhi – 110001

No: KSCH/Purchase/2025-26/3153

Dated:- 28.7.2025

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Sl.No.	Name of Items	Quantity
1	General Instruments Head and Neck (as per annexure)	01 Set

Quantity may vary as per the demand of the user department. Firm must quote all the items. Quotations received after the prescribed dates will not be entertained under any condition. The quotation should be addressed to the Director, LHMC & Associated Hospitals, New Delhi.

Quotation Format

Sr.No.	Name of Item	Unit Price (In Rs.)	Quantity	Amount in Rupees
	Offered Make/Brand :			
	Offered Model :			
	Total :			
	GST Percentage :			
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e-mail address :

Name of Signatory should be there in quotation:

Vimal Kr. Arya

Dr.Vimal Kr. Arya
Additional Medical Supdt.

To,

Notice Board, Purchase Section, KSCH

Notice Board, Purchase Section, LHMC

Copy to :

Webmaster, LHMC & Assoc. Hospitals with request to upload this Notice on Hospital website for the period of one week from the date of issue/receipt of request.

Government of India
Kalawati Saran Children's Hospital
New Delhi – 110001

No: KSCH/Purchase/2025-26/ 3152

Dated:- 28.7.2025

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Sl.No.	Name of Items	Quantity
1	Ear Surgery Instrument Set (as per annexure)	01 Set

Quantity may vary as per the demand of the user department. Firm must quote all the items. Quotations received after the prescribed dates will not be entertained under any condition. The quotation should be addressed to the Director, LHMC & Associated Hospitals, New Delhi.

Quotation Format

Sr.No.	Name of Item	Unit Price (In Rs.)	Quantity	Amount in Rupees
	Offered Make/Brand :			
	Offered Model :			
	Total :			
	GST Percentage :			
	Total Amount (included GST %)			
	Rupees in words :			

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Mobile Number :

Full Name of the Owner :

PAN No.:

e-mail address :

Name of Signatory should be there in quotation:

Vimal Kumar

Dr.Vimal Kr. Arya
Additional Medical Supdt.

To,

Notice Board, Purchase Section, KSCH

Notice Board, Purchase Section, LHMC

Copy to :

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Kalawati Saran Children's Hospital
New Delhi – 110001

No: KSCH/Purchase/2025-26/3151

Dated:- 28.7.2025

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Sl.No.	Name of Items	Quantity
1	Low temperature Thermoplastic Sheet 2mm ✓	10 Nos. ✓
2	Low temperature Plastic Sheets 3.2mm ✓	05 Nos. ✓
3	Low temperature plastic cutting scissors ✓	02 Nos. ✓
4	Self adhesive velcrol ½" ✓	05 Nos. ✓
5	Self adhesive velcrol 1" ✓	05 Nos. ✓
6	Low temperature thermoplastic pattern ✓	02 Nos. ✓
7	AFO 5" right ✓	25 Nos. ✓
8	AFO 5" left ✓	25 Nos. ✓
9	AFO liner 5" right ✓	25 Nos. ✓
10	AFO liner 5" left ✓	25 Nos. ✓
11	CO PP sheet ✓	03 Nos. ✓

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Dr.Vimal Kr. Arya
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Government of India
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New Delhi – 110001

No: KSCH/Purchase/2025-26/ 3150

Dated:- 28.7.2025

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Sl.No.	Name of Items	Quantity
1	Air Diffuser for toilets	25 Nos.

Quantity may vary as per the demand of the user department. Firm must quote all the items. Quotations received after the prescribed dates will not be entertained under any condition. The quotation should be addressed to the Director, LHMC & Associated Hospitals, New Delhi.

Quotation Format

Sr.No.	Name of Item	Unit Price (In Rs.)	Quantity	Amount in Rupees
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