

REQUEST FOR QUOTE DOCUMENT FOR

**IDENTIFICATION OF STRATEGIC PARTNER FROM EMPANELLED FIRMS
FOR**

**IMPLEMENTING PREVENTIVE HEALTHCARE CHECKUP IN FIVE DISTRICTS
FOR THE REGISTERED CONSTRUCTION WORKERS AND THEIR
DEPENDANTS UNDER KARNATAKA BUILDING AND OTHER
CONSTRUCTION WORKERS WELFARE BOARD**

RFQ No: HLL/HCS/RFQ/2023-24/11 Dated 08-12-2023



HLL LIFECARE LIMITED

(A Govt. Of India Enterprise)

CIN : U25193KL1966GOI002621

HLL Bhavan, Poojappura,

Thiruvananthapuram -695012, Kerala, India

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www.lifecarehll.com

**REQUEST FOR QUOTE (RFQ) FOR IMPLEMENTING HEALTHCARE CHECKUP IN FIVE DISTRICTS
FOR REGISTERED CONSTRUCTION WORKERS AND THEIR DEPENDANTS UNDER KARNATAKA
BUILDING AND OTHER CONSTRUCTION WORKERS WELFARE BOARD**

HLL Life care Limited, a Government of India Enterprise, invites financial quotes from empanelled firms (category A and B) under Medical laboratory Services to for implementing healthcare checkup in five districts for registered construction workers and their dependants under Karnataka building and other construction workers welfare board

RFQ No	:	HLL/HCS/RFQ/2023-24/11 Dated 08.12.2023
RFQ PUBLISHING DATE	:	08.12.2023
LAST DATE AND TIME FOR RECEIPT OF RFQ	:	15.12.2023 14:00 HRS
TIME AND DATE OF OPENING OF THE RFQ	:	16.12.2023 14.00 HRS
EMD	:	Rs. 1.00 Crore
PLACE OF OPENING OF RFQ	:	HLL LIFECARE LIMITED HLL BHAVAN,POOJAPPURA, TRIVANDRUM, KERALA- 695012 PHONE NO – 0471 2354949
ADDRESS FOR COMMUNICATION	:	DGM (HCS) HEALTHCARE SERVICES DIVISION HLL LIFECARE LIMITED, HLL BHAVAN, POOJAPPURA TRIVANDRUM, KERALA- 695012 PHONE NO – 0471 2354949
EMAIL ID	:	hcstenders@lifecarehll.com

DGM (HCS)
HEALTHCARE SERVICES DIVISION

SECTION-1 INSTRUCTIONS TO BIDDERS (ITB)

1. COMPANY BACKGROUND

HLL Lifecare Limited is a Government of India “Mini Ratna” Public Sector Enterprise, under the Ministry of Health and Family Welfare, Government of India. (Hereinafter known as “HLL”). Over the years, HLL has grown to serve many new areas in the field of healthcare in India in addition to manufacturing of contraceptives, and medical products.

HLL’s purpose of business is “to be a globally respected organization focusing on inclusiveness by providing affordable and quality healthcare solutions through continuous innovations”. In its quest to become a comprehensive healthcare solutions provider, HLL had diversified into hospital products and healthcare services, while nurturing its core business of providing quality contraceptives.

Healthcare Services Division

The Healthcare Service Division (HCS) of HLL is setting up and operating high-end path lab facilities and imaging centres across the country partnering with various State Governments and Central Government Institutions. The purpose of this division is to make available the high end path lab diagnostic facilities and imaging facilities to poor and needy patients at a much affordable rates. At present, HCS division of HLL has its presence in seven states.

2. INTRODUCTION

Through a chain of Healthcare Diagnostic centres, called HINDLABS, HLL offers clinical pathology lab services and Radio diagnostic imaging services. Over a period of short span, HINDLABS emerged as one of the key player among retail diagnostic chains with 225 Diagnostic labs, 4000 collection centers (Which includes PHC, RH, DH, SSH, RRH, WH & MH) and 50 medical imaging centres in various states and cities across India. HINDLABS uses state-of-the-art technology to provide the most comprehensive and advanced imaging services. The facilities are designed to comply with National Accreditation Board for Testing and Calibration Laboratories (NABL) standards.

The Healthcare Services Division (HCS) has numerous projects in pipeline and intended to explore the possibility to have Strategic Business Partners for their upcoming medical laboratory business projects. Accordingly HLL had invited an Expression of Interest (EOI number: HLL/CHO/HCS/ML/2022-23/01 Dated 03-06-2022) for empanelment of Strategic Business

partners for Medical laboratory Business of HCS Division of HLL Lifecare Limited. This EOI was floated in e-procurement portal of Government of India and after scrutiny the firms who met the EOI qualification criteria were empanelled. Further, the panel was expanded vide EOI no. HLL/CHO/HCS/EOI/2023-24/02 Dated 11.07.2023.

All the empanelled firms have submitted declaration and agreed for minimum revenue share of 8% for HLL. As per the above said EOI terms, post empanelment, through competitive bidding among the empanelled firms, Strategic partner shall be finalised for individual projects based on the highest revenue share they are willing to share with HLL, over and above the minimum revenue share.

3. SCOPE OF RFQ:

HLL had participated in the tender invited by Karnataka Building and Other Construction Workers Welfare Board (Hereinafter known as “KBOCWBB”) for providing Preventive Healthcare Checkup for registered construction workers and their dependants (herein after referred to as beneficiaries) of Karnataka . Subsequently, HLL received work order from KBOCWBB to implement health screening of all registered construction workers and their dependants under KBOCWBB at following regions/districts.

Sr. No	Districts	No. of Workers
1	Bangalore LO-01	33500
2	Bangalore LO-02	33500
3	Mangalore LO-02	33500
4	Belagavi LO-02	33500
5	Koppal	33500
Total		167500

Through this RFQ, HLL intends to identify a strategic partner/Service provider to support HLL in end to end implementation of preventive healthcare check-up program in the above mentioned locations, from its panel of strategic business partners for medical laboratory business. The project for health screening for registered construction workers and their dependants is for a period of 5 months per district from the receipt of work order from KBOCWBB.

Detailed Scope of work is given at Annexure-1

3.1 Scope of Strategic Business Partner

- To provide all services with due diligence, efficiency and economy, in accordance with generally accepted techniques and practices used in the industry that specified by the HLL in the Scope of Work of this RFQ.
- To employ appropriate advanced technology and best practices and safe and effective equipment, machinery, material, and methods. The Service Provider shall always act, in respect of any matter relating to this assignment, as faithful advisors to the HLL and shall, at all times, support and safeguard the HLL's legitimate interests in any dealings with third parties.
- Ensuring uninterrupted operations during period of engagement
- Incur necessary capital expenses including the turnkey work of the facilities, providing necessary infrastructure and accessories essential for the performance of the scope of work, Up-time management of the machines etc as per the requirement of HLL.
- Meet all the operational and recurring expenses during the day to day execution of the project
- Facilitation of all payment and other documentation from KBOCWVB
- Meet all statutory and regulatory guidance and requirements
- Maintain the quality standards and the strict adherence to the SOP/protocols
- Daily, Weekly, monthly, reports and coordination with all stakeholders.
- To maintain highest quality standards for the service delivery to beneficiaries at all times.
- Business development in public and private sectors.
- Branding, marketing and publicity of program through print and digital media.
- Arrangement of necessary collaterals for branding and communication.
- Any other related work assigned by HLL, based on the agreement between HLL & KBOCWVB, for smooth execution of project.

3.2 Scope of HLL

- The complete Strategic Design, Planning and execution of the project
- Project operation and management
- Depute project manager for overall coordination and monitoring of activities.
- Formulation of SOP and operational protocols
- Formulation of quality standards and QA protocols
- Facilitation of smooth and uninterrupted operations in coordination with strategic partner.
- Coordination with KBOCWVB for execution of project
- Periodic Reviews to ensure compliance with obligations and timelines
- Obtain the regulatory compliances for HLL

3.3 Revenue Sharing Model

- a) HLL intends to execute this project on a revenue sharing basis.
- b) Service provider has to provide services as detailed in Scope of work.
- c) As per the terms laid by KBOCWVB, HLL has to submit monthly invoices along with list of workers. The KBOCWVB shall release 90% of payment initially and the remaining 10% shall be paid after the completion of entire work. The Payment Certificate format shall be as per the approval of the KBOCWVB.
- d) Service provider must facilitate the timely invoice submission by HLL, through providing necessary documentations and payment certifications.
- e) From the realised amount against each invoice submitted to KBOCWVB, HLL will retain the revenue share as agreed by Strategic partner through their financial bid. Remaining after deducting all expenses incurred by HLL, will be released to strategic partner.
- f) Any expense incurred to HLL on account of operations or other with respect to this project is to be reimbursed to HLL.
- g) Since the anticipated annual revenue from this project is above Rs.25.00 Cr, category A and B strategy partners are eligible for participating in this RFQ.
- h) Strategic Partner shall make independent assessment of proposed project and submit their financial quotes. Financial quote of the strategic partners shall specify the revenue share percentage acceptable to share with HLL for this particular proposal. Financial quotes will be evaluated based on the revenue share percentage to HLL over and above the minimum value of 8%. Financial Quote has to be submitted as per the format provided in CPP portal.
- i) The evaluation for the project would be done of the basis of offered revenue share percentage to HLL. The bidder who offers highest revenue share (H1 bidder) would be finalised as Strategic partner for this project.

Total revenue share to HLL will be Minimum revenue share of 8% + additional revenue share offered in the price bid (b)%, i.e, (8+b)%

Period of engagement will be terminated on completion of the project or closure of the project by HLL's Clients after issuing sufficient notice period to HLL as per the agreement terms.

- j) HLL will have the right to reject proposals if they are found to be unacceptable.

3.4 General Terms and Conditions

1.	While this RFQ has been prepared in good faith, HLL does not make any commitment or warranty, express or implied, or accept any responsibility or liability, whatsoever, in respect of any statement or omission herein, or the accuracy, completeness or reliability of information contained herein, and shall incur no liability under any law, statute, rules or regulations as to the accuracy, reliability or completeness of this request, even if any loss or damage is caused by any act or omission on its part.
2.	The process of inviting RFQ is for ascertaining various options available to HLL. After evaluation / examination of the offers, HLL may at its sole discretion decide further course of action.
3.	On submission of financial bid, participant confirms its acceptance to all terms and conditions of RFQ and scope of work.
4.	On submission of financial bid, participants must ensure and confirms to HLL that they have complied with applicable Laws in all material respects and has not been subject to any fines, penalties, injunctive relief or any other civil or criminal liabilities which in the aggregate have or may have an adverse Effect on its ability to perform its obligations under the scope of work of this RFQ
5.	RFQ participants are requested to keep the information and details strictly confidential.
6.	HLL shall not be responsible for any expense incurred by Parties in connection with the preparation and delivery of their RFQ and other expenses.
7.	HLL reserves the right to deal with the proposal in any manner without assigning any reasons for the same. The decision of HLL in this regard shall be final.
8.	The Bidder to indemnify HLL from any claims / penalties / statutory charges, liquidated damages, with legal expenses etc as charged by the customer.

4. SUBMISSION OF BIDS

The Interested bidder shall submit their bid online only through the Government eProcurement portal (URL: <https://etenders.gov.in/eprocure/app>) as per the procedure laid down for e-submission as detailed in the web site. For e tenders, the Interested bidders shall download from the portal. The Bidder shall fill up the documents and submit the same online using their Digital Signature Certificate. On successful submission of bids, a system generated receipt can be downloaded by the bidder for future reference. Copies of all certificates and documents shall be uploaded while submitting the tender online.

The tender is invited in 1 Envelope system from the registered and eligible firms at CPP Portal.

Envelope –I (Financial bid):

Financial offer shall be quoted in the format provided in procurement portal and no other format is acceptable. Bidders are required to download the file, open it and complete the colored (Unprotected) cells with their respective financial quotes and other details (such as name of the bidder). No other cells should be changed. Once the details have been completed, the bidder should save it and submit it online, without changing the filename. If the file is found to be modified by the bidder, the bid will be rejected.

Through submission of financial Bid, it is considered that participant agrees to all terms and conditions of this RFQ.

Note:-

The Tender Inviting Authority shall not be responsible for any failure, malfunction or breakdown of the electronic system while downloading or uploading the documents by the Bidder during the e-procurement process.

5. GENERAL INSTRUCTIONS TO BIDDERS:

5.1 This RFQ is an e-Tender and is being published online in Government eProcurement portal, <https://etenders.gov.in/eprocure/app>

5.2 RFQ documents can be downloaded free of cost from the Central Public Procurement Portal of Government of India (e-portal). All Corrigendum/extension regarding this e-RFQ shall be uploaded on this website i.e. <https://etenders.gov.in/eprocure/app>.

5.3 The RFQ and its corrigendum/extension will also be published in our company website, URL address: <http://www.lifecarehll.com/tender>.

5.4 The RFQ process is done online only at Government eProcurement portal (URL address: <https://etenders.gov.in/eprocure/app>). Aspiring bidders may download and go through the RFQ document.

5.5 All bid documents are to be submitted online only and in the designated cover(s)/envelope(s) on the Government eProcurement website. RFQs/bids shall be accepted only through online mode on the Government eProcurement website and no manual submission of the same shall be entertained. Late RFQs will not be accepted.

- 5.6 The complete bidding process is online. Bidders should be in possession of valid Digital Signature Certificate (DSC) of class II or above for online submission of bids. Prior to bidding DSC need to be registered on the website mentioned above. If the envelope is not digitally signed & encrypted the Purchaser shall not accept such open Bids for evaluation purpose and shall be treated as non-responsive and shall be rejected.
- 5.7 Bidders are advised to go through “Bidder Manual Kit”, “System Settings” & “FAQ” links available on the login page of the e-Tender portal for guidelines, procedures & system requirements. In case of any technical difficulty, Bidders may contact the help desk numbers & email ids mentioned at the e-tender portal.
- 5.8 Bidders are advised to visit CPPP website <https://etenders.gov.in> regularly to keep themselves updated, for any changes/modifications/any corrigendum in the RFQ Enquiry Document.
- 5.9 The bidders are required to submit soft copies of their bids electronically on the CPP Portal, using valid Digital Signature Certificates. The instructions given below are meant to assist the bidders in registering on the CPP Portal, prepare their bids in accordance with the requirements and submitting their bids online on the Government eProcurement Portal.
- 5.10 Registration
- 5.10.1 Bidders are required to register in the Government e-procurement portal, obtain ‘Login ID’ & ‘Password’ and go through the instructions available in the Home page after log in to the CPP Portal (URL: <https://etenders.gov.in/eprocure/app>), by clicking on the link “Online bidder Enrolment” on the CPP Portal which is free of charge.
- 5.10.2 As part of the enrolment process, the bidders will be required to choose a unique user name and assign a password for their accounts.
- 5.10.3 Bidders are advised to register their valid email address and mobile numbers as part of the registration process. These would be used for any communication from the CPP Portal.
- 5.10.4 They should also obtain Digital Signature Certificate (DSC) in parallel which is essentially required for submission of their application. The process normally takes 03 days’ time. The bidders are required to have Class II or above digital certificate or above with both signing and encryption from the authorized digital signature Issuance Company. Please refer online portal i.e. - <https://etenders.gov.in/eprocure/app> for more details.
- 5.10.5 Upon enrolment, the bidders will be required to register their valid Digital Signature Certificate (Class II or above Certificates with signing key usage) issued by any Certifying Authority recognized by CCA India (e.g. Sify /nCode / eMudhra etc.), with their profile.

- 5.10.6 Bidder then logs in to the site through the secured log-in by entering their user ID/password and the password of the DSC / e-Token.
- 5.10.7 The Bidder intending to participate in the bid is required to register in the e-tenders portal using his/her Login ID and attach his/her valid Digital Signature Certificate (DSC) to his/her unique Login ID. He/She have to submit the relevant information as asked for about the firm/contractor. The bidders, who submit their bids for this RFQ after digitally signing using their Digital Signature Certificate (DSC), accept that they have clearly understood and agreed the terms and conditions including all the Forms/Annexure of this RFQ.
- 5.10.8 Only those bidders having a valid and active registration, on the date of bid submission, shall submit bids online on the e-procurement portal.
- 5.10.9 Only one valid DSC should be registered by a bidder. Please note that the bidders are responsible to ensure that they do not lend their DSC's to others which may lead to misuse.
- 5.10.10 Ineligible bidder or bidders who do not possess valid & active registration, on the date of bid submission, are strictly advised to refrain themselves from participating in this RFQ.
- 5.11 Searching for RFQ Documents
- a) There are various search options built in the CPP Portal, to facilitate bidders to search active RFQs by several parameters. These parameters could include RFQ ID, Organization Name, Form of Contract, Location, Date, Value etc. There is also an option of advanced search for RFQs, wherein the bidders may combine a number of search parameters such as Organization
 - b) Once the bidders have selected the RFQs they are interested in, they may download the required documents/RFQ schedules. These RFQs can be moved to the respective 'My Tenders' folder. This would enable the CPP Portal to intimate the bidders through SMS/ e-mail in case there is any corrigendum issued to the RFQ document.
 - c) The bidder should make a note of the unique RFQ ID assigned to each RFQ, in case they want to obtain any clarification/help from the Helpdesk
- 5.12 Preparation of Bid
- a) Bidder should take into account any corrigendum published on the RFQ document before submitting their bids.

- b) Before the deadline for submission of bids, the Tender Inviting Authority may modify the bidding document by issuing addenda.
 - c) Any addendum thus issued shall be a part of the bidding documents which will be published in the e-tender website. The Tender Inviting Authority will not be responsible for the prospective bidders not viewing the website in time.
 - d) If the addendum thus published does involves major changes in the scope of work, the Tender Inviting Authority may at his own discretion, extend the deadline for submission of bids for a suitable period to enable prospective bidders to take reasonable time for bid preparation taking into account the addendum published.
 - e) Please go through the RFQ document carefully to understand the documents required to be submitted as part of the bid. Please note the number of covers in which the bid documents have to be submitted, the number of documents - including the names and content of each of the document that need to be submitted. Any deviations from these may lead to rejection of the bid.
- 5.13 More information useful for submitting online bids on the CPP Portal may be obtained at <https://etenders.gov.in/eprocure/app>
- 5.14 Any queries relating to the process of online bid submission or queries relating to CPP Portal in general may be directed to the 24x7 CPP Portal Helpdesk. The 24x7 Help Desk details are as below: -
- 5.15 For any technical related queries please call at 24 x 7 Help Desk Number:
0120-4001 062, 0120-4001 002, 0120-4001 005, 0120-6277 787
Note:- International Bidders are requested to prefix +91 as country code
E-Mail Support: For any Issues or Clarifications relating to the published RFQs, bidders are requested to contact the respective RFQ Inviting Authority
Technical - support-eproc@nic.in, Policy Related - cppp-doe@nic.in
- 5.16 Bidders are requested to kindly mention the URL of the portal and RFQ ID in the subject while emailing any issue along with the contact details.
- 5.17 Any queries relating to the RFQ document and the terms and conditions contained therein should be addressed to the RFQ Inviting Authority for a RFQ or the relevant

contact person indicated in the RFQ. Address for communication and place of opening of bids:

Deputy General Manager (HCS)
Healthcare Services Division
HLL Lifecare Limited
HLL Bhavan, Poojappura, Thiruvananthapuram - 695012,
Kerala, India
Tel: +91 4712354949 , Email – hcstenders@lifecarehll.com

- 5.18 The bids shall be opened online at the Office of the Deputy General Manager (HCS) in the presence of the Bidders/their authorized representatives who wish to attend at the above address. If the RFQ opening date happens to be on a holiday or non-working day due to any other valid reason, the RFQ opening process will be done on the next working day at same time and place.
- 5.19 More details can be had from the Office of the Deputy General Manager (HCS) during working hours. The RFQ Inviting Authority shall not be responsible for any failure, malfunction or breakdown of the electronic system while downloading or uploading the documents by the Bidder during the e-procurement process.
- 5.20 A firm/bidder shall submit only one bid in the same bidding process. A Bidder (either as a firm or as an individual or as a partner of a firm) who submits or participates in more than one bid will cause all the proposals in which the Bidder has participated to be disqualified.
- 5.21 Online RFQ Process:
The RFQ process shall consist of the following stages:
- Downloading of RFQ document: RFQ document will be available for free download on Government e-procurement portal (URL: <https://etenders.gov.in/eprocure/app>).
 - Publishing of Corrigendum: All corrigenda shall be published on Government e-procurement portal (URL: <https://etenders.gov.in/eprocure/app>) and HLL website (URL address: <http://www.lifecarehll.com/tender>) and shall not be available elsewhere.
 - Bid submission: Bidders have to submit their bids along with supporting documents to support their eligibility, as required in this RFQ document on Government e-procurement portal. No manual submission of bid is allowed and manual bids shall not be accepted under any circumstances.

- iv. Opening of RFQ and Award of contract: The financial bids will be opened, evaluated and finalized as per the criteria detailed in this RFQ document.
- 5.22 Conditional bids and bids not uploaded with appropriate/desired documents may be rejected out rightly and decision of HLL Lifecare Limited in this regard shall be final and binding.
- 5.23 HLL Lifecare Limited Ltd. reserves the right to verify the claims made by the bidders and to carry out the capability assessment of the bidders and the HLL Lifecare Limited's decision shall be final in this regard.
- 5.24 HLL Lifecare Limited Ltd reserves the right to amend or withdraw any of the terms and conditions contained in the RFQ document including scope of work or reject any or all RFQs without giving any notice or assigning any reasons.
- 5.25 Submission Process:
For submission of bids, all interested bidders have to register online as explained above in this document. After registration, bidders shall submit their bid online on Government e-procurement portal (URL: <https://etenders.gov.in/eprocure/app>).
- 5.26 Note:- It is necessary to click on "Freeze bid" link / icon to complete the process of bid submission otherwise the bid will not get submitted online and the same shall not be available for viewing/ opening during bid opening process.

6. DEADLINE FOR SUBMISSION OF THE RFQ FOR INTERESTED BIDDERS

- 6.1 Bid shall be received only online on or before the date and time as notified in RFQ.
- 6.2 The Tender Inviting Authority, in exceptional circumstances and at its own discretion, may extend the last date for submission of bids, in which case all rights and obligations previously subject to the original date will then be subject to the new date of submission. The Bidder will not be able to submit his bid after expiry of the date and time of submission of bid (server time).
- 6.3 Modification, Resubmission and Withdrawal of RFQs
Resubmission or modification of bid by the bidders for any number of times before the date and time of submission is allowed. Resubmission of bid shall require uploading of all documents including price bid afresh.
- 6.4 If the bidder fails to submit his modified bids within the pre-defined time of receipt, the system shall consider only the last bid submitted.

6.5 The Bidder can withdraw his/her bid before the date and time of receipt of the bid. The system shall not allow any withdrawal after the date and time of submission.

7. BID OPENING AND EVALUATION

RFQs of Interested bidders shall be opened on the specified date & time, by the RFQ inviting authority or his authorized representative in the presence of bidders or their designated representatives who choose to attend.

8. BID OPENING PROCESS

Opening of bids shall be carried out in the same order as it is occurring in invitation of bids or as in order of receipt of bids in the portal. The bidders & guest users can view the summary of opening of bids from any system. Bidders are not required to be present during the bid opening at the opening location if they so desire.

In the event of the specified date of bid opening being declared a holiday for HLL, the bids will be opened at the same time on the next working day.

9. CONFIDENTIALITY

9.1 Information relating to the examination, clarification, evaluation, and comparison of Bids and recommendations for the award of a contract shall not be disclosed to Bidders or any other persons not officially concerned with such process until the award has been announced in favour of the successful bidder.

9.2 Any effort by a Bidder to influence the Purchaser during processing of bids, evaluation, bid comparison or award decisions shall be treated as Corrupt & Fraudulent Practices and may result in the rejection of the Bidders' bid.

10. BID VALIDITY

10.1 Bids shall remain valid for a period of engagement or additional extended time period as decided by HLL from the date of notification of Award. A bid valid for a shorter period shall be rejected by HLL as non-responsive.

10.2 In exceptional circumstances, prior to expiry of the original bid validity period, the Tendering Authority may request the bidders to extend the period of validity for a specified additional period. The request and the responses thereto shall be made in writing or by email. A bidder may refuse the request without forfeiting its bid security (if applicable). A bidder agreeing to the request will not be required or permitted to modify

its bid, but will be required to extend the validity of its bid security (if applicable) for the period of the extension.

11. BID SECURITY (EMD)

11.1 Bidders have to submit an EMD of Rs. 1.00 Crore through RTGS/NEFT transfer in the following HLL A/c details:.

Account No	:	00630330000563
IFSC Code	:	HDFC0000063
Bank Name	:	HDFC BANK
Branch Name	:	Vazhuthacaud

Document of the above transaction (UTR NUMBER and DATE OF UTR) completed successfully by the bidder, shall be uploaded at the indicated locations in CPP Portal while submitting the bids online.

Note: 1. Any transaction charges levied while using any of the above modes of payment has to be borne by the bidder. The supplier / contractor's bid will be evaluated only if payment is effective on the date and time of bid opening.

2. Statutory exemptions as per relevant guidelines shall be applicable for MSE vendors.

11.2 The Bid Security (EMD) of the successful Bidder will be discharged when the Bidder has furnished the required Security Deposit and acceptance of LOI/Work order.

11.3 The Bid Security may be forfeited:

(a) If a Bidder:

- Changes its offer/bid during the period of bid validity or during the validity of the contract.
- Does not accept the correction of errors

(b) In the case of the successful Bidder, if the Bidder fails:

- To sign the Agreement
- To deliver the material within stipulated time frame as per PO.
- To accept the Notification of award/Letter of Indent/ Purchase order and/or submit the security deposit.
- To acknowledge the Notification of award/Letter of Indent/ Purchase order within 5 days from the date of issue by sending the signed copy of the same.
- to furnish the Performance Security within the specified time period

11.4 In such cases the work shall be rearranged at the risk and cost of the selected bidder

11.5 The Bid Security deposited will not carry any interest.

12. ALTERATIONS AND ADDITIONS

12.1 The bid shall contain no alterations or additions, except those to comply with instructions, or as necessary to correct errors made by the bidder, in which case such corrections shall be initialed by the person or persons signing the bid.

12.2 The Interested bidder shall not attach any conditions of his own to the Bid. The Bid price must be based on the tender documents. Any bidder who fails to comply with this clause will be disqualified.

13. NOTIFICATION OF AWARD :

13.1 Successful participant after evaluation of financial bid will be notified through a Notification of Award issued by HLL

13.2 Selected participant has to submit performance security as specified in this RFQ

13.3 After receipt of performance security an agreement will be entered with the successful participant.

14. PROJECT IMPLEMENTATION

14.1. Service provider has to prepare and submit a detailed implementation for all 5 districts, within 15 days of receiving the NoA.

14.2. The Service Provider should furnish and equip laboratory at strategic locations specified by HLL in the assigned districts of Karnataka.

14.3. The blood sample collected shall be tested and reported from labs established by service provider only.

14.4. Additional labs have to be established by Service provider based on the requirements and volume of the beneficiaries at any project locations as required by HLL.

14.5. Necessary concurrence from HLL has to be obtained for all equipment, consumables and other accessories to be used for this project before deployment.

15. PENALTIES

15.1. The Service Provider shall provide services as defined in the scope of work of this RFQ to ensure adherence to project terms and error free availability of the services

15.2. Any penalty imposed by the KBOCWBB shall be applicable to the strategic partner on a back to back basis.

- 15.3. The maximum penalty at any point of time and for any period should not exceed 5% of project cost and if it exceeds 5%, will lead to loss of the project by HLL. In such instance Contract with the Strategic partner will be terminated automatically.

16. DURATION OF ENGAGEMENT

The entire Scope of work under this project for health screening for registered construction workers and their dependants (as per the agreement terms between HLL and KBOCWVB) must be performed and completed by the selected Strategy partner before **30.04.2024**. The engagement period shall be extended on back to back basis if KBOCWVB intends to do so.

The HLL reserves the right to increase or decrease the project duration as deemed necessary.

17. CONFLICT OF INTEREST.

The selected Strategic Partner shall not engage in activities that are in conflict with interest of the client (HLL) under the assignment and they would not engage in any contract that would be in conflict of interest with their current obligations. The selected Strategic Partner that has a business of family relationship with such members of HLL staff who are directly or indirectly involved in this assignment will not be awarded the assignment.

18. PERFORMANCE SECURITY

- 18.1 The selected strategy partner has to submit an irrevocable and unconditional guarantee from a Bank for a sum equivalent to Rs. 2,500,0000.00/- (Rupees Two Crore and Fifty Lacs) in the form provided by HLL. Until such time the Performance Security is provided by the strategy partner and the same comes into effect, the Bid Security shall remain in force and effect, and upon provision of the Performance Security, the HLL shall release the Bid Security (EMD) to the Strategy partner. No interest shall be payable by the HLL against the Performance Security. The format for Performance security is enclosed as Annexure-3.
- 18.2 Appropriation of Performance Security
Upon occurrence of a Strategy partner Default, the HLL shall, without prejudice to its other rights and remedies hereunder or in law, be entitled to encash and appropriate from the Performance Security the amounts due to it for and in respect of such Strategy partner Default. Upon such encashment and appropriation from the Performance Security, the Strategy partner shall, within 30 days thereof, replenish, in case of partial

appropriation, to its original level the Performance Security, and in case of appropriation of the entire Performance Security by the HLL, provide a fresh Performance Security, as the case may be, failing which the HLL shall be entitled to terminate the Agreement with Strategy partner. Upon replenishment or furnishing of a fresh Performance Security, as the case may be, as aforesaid, the Strategy partner shall be entitled to an additional Cure Period of 15 days for remedying the Strategy partner Default, and in the event of the Strategy partner not curing its default within such Cure Period, the HLL shall be entitled to encash and appropriate such Performance Security as Damages, and to terminate the Agreement with Strategy partner

18.3 Validity of Performance Security

The Performance Security shall remain in force and effect for atleast 90 days beyond completion of all contractual obligations.

19. COURT JURISDICTION:

In the event of any dispute arising out of this agreement, the parties agree that the courts of Thiruvananthapuram, Kerala alone will have exclusive jurisdiction.

20. INDEMNITY

The Interested Bidder shall indemnify, defend and hold harmless Government of India and HLL, its Affiliates, officers, directors, employees, agents, and their respective successors and assigns, from and against any and all loss, damage, claim, injury, cost or expenses (including without limitation reasonable attorney's fees), incurred in connection with third Party claims of any kind that arise out of or are attributable to (i) Manufacturer's/Bidders/service providers breach of any of its warranties, representations, covenants or obligations set forth herein or (ii) the negligent act or omission of the Manufacturer /Bidders.(iii) any product/service liability claim arising from the gross negligence or bad faith of, or intentional misconduct or intentional breach of this Contract by bidder or its affiliate.

21. HLL'S RIGHT TO ACCEPT OR REJECT ANY OR ALL BIDS

21.1 HLL reserves the right to accept or reject any bid, and to annul the bidding process and reject all bids at any time prior to award Contract award, without thereby incurring any liability to the affected bidder or bidders.

21.2 HLL does not bind itself to accept the highest or any bid and reserves the right to reject any

or all bids at any point of time prior to the issuance of the Notice of award/Letter of intent/Purchase order without reason whatsoever.

- 21.3 HLL reserves the right to resort to retendering without providing any reasons whatsoever. The purchaser shall not incur any liability on account of such rejection. The purchaser reserves the right to modify any terms, conditions or specifications for submission of offer and to obtain revised bids from the bidders due to such changes, if any.
- 21.4 Canvassing of any kind will be a disqualification and the purchaser may decide to cancel the bidder from its empanelment.
- 21.5 HLL reserves the right to accept or reject any bid and annul the bidding process and reject all bids at any time prior to award of contract without thereby incurring any liability to the affected bidder or bidders or any obligation to inform the affected bidder or bidders of the ground for the purchaser's action.

22. GOVERNING LANGUAGE

The contract shall be written in English language. English language version of the Contract shall govern its interpretation. All correspondence and documents pertaining to the Contract which are exchanged by the parties shall be written in the same language.

23. TERMINATION

HLL reserves the right to terminate/ cancel the Notification of award/ agreement at any time for any reason without any liability on HLL.

24. PAYMENT TERMS

- 24.1. As per the conditions laid by KBOCWVB, HLL has to submit monthly invoices to KBOCWVB which will be facilitated by the Service provider.
- 24.2. The KBOCWVB shall release 90% of payment initially and the remaining 10% shall be paid after completion of entire work. The Payment Certificate format shall be as per the approval of the KBOCWVB.
- 24.3. The invoices and list of beneficiaries and their health screening reports shall be made available in their on-line verification portal to the HLL /KBOCWVB.
- 24.4. Submission of hard and soft copy of booklet with complete details of beneficiaries availed under the scheme, complete details of examinations conducted for them along with monthly bill.
- 24.5. The invoices are to be prepared as per actual basis, on the number of workers undergone the medical examination by the Service Provider.

- 24.6. At the time of submission of the bill, a certificate of successful execution of the scheme should be obtained from the concerned labour officer and submitted.
- 24.7. From the realised amount against each invoice, HLL will retain the revenue share as agreed by Strategic partner through their financial bid. Remaining amount, after deducting all expenses incurred by HLL, will be released to Service provider. HLL will release payments to Service provider after 30 days of receipt of corresponding payment from KBOCWVB.
- 24.8. In the event of the HLL noticing at any time that any amount has been disbursed wrongly to the Service Provider or any other amount is due from the Service Provider to the HLL, the HLL may without prejudice to its rights recover such amounts by other means after notifying the Service Provider or deduct such amount from any payment falling due to the Service Provider. The details of such recovery, if any, shall be intimated to the Service Provider. The Service Provider shall receive the payment of undisputed amount under subsequent invoice for any amount that has been omitted in previous invoice by mistake on the part of the HLL.
- 24.9. The HLL shall be entitled to delay or withhold payment of any invoice or part of it delivered by the Service Provider where the HLL or KBOCWVB disputes such invoice or part of it provided that such dispute is bonafide. The withheld amount shall be limited to that which is in dispute. The disputed amount shall be settled in accordance with the procedure. Any exercise by the HLL under this section shall not entitle the Service Provider to delay or withhold the Health screening of the workers.
- 24.10. All payments agreed to be made by the HLL to the Service Provider in accordance with the Health screening shall be inclusive of all statutory levies, duties, taxes and other charges whenever levied/applicable. The Service Provider shall bear all personal/income taxes levied or imposed on it and its personnel, etc. on account of payment received under this agreement.

25. TAXES

- 25.1. The Service Provider shall bear all personnel taxes levied or imposed on its personnel, or any other member of the Service Provider's team, etc. on account of payment received under this agreement. The Service Provider shall bear all corporate taxes, levied or imposed on the Service Provider on account of payments received by it from the HLL for the work done under the scope of work
- 25.2. The Service Provider agrees that it shall comply with the Indian Income Tax Act in force from time to time and pay Indian Income Tax, as may be imposed/ levied on them by the Indian Income Tax Authorities, for the payments received by them for the works under the scope of work

- 25.3. Should the Service Provider fail to submit returns/pay taxes in times as stipulated under applicable Indian/State Tax Laws and consequently any interest or penalty is imposed by the concerned authority, the Service Provider shall pay the same. The Service Provider shall indemnify the HLL against any and all liabilities or claims arising out of this engagement for such taxes including interest and penalty by any such Tax Authority may assess or levy against the Board / Service Provider.

ANNEXURE-1

SCOPE OF WORK

The Service Provider shall provide services related to conducting of preventive healthcare checkup for registered construction workers and their beneficiaries (as specified in Rule 2(P-1) of the Karnataka Rules) inline with the agreement terms between HLL and KBOCWWB.

A. Objective

- a. Preventive Healthcare training and Checkup (PHCs) has an objective to provide a range of health care services to the beneficiaries and their dependents, under the jurisdiction of labour officers of respective district/ division/ subdivision.
- b. The key objective of the PHC is to reach the beneficiaries and their dependents in defined location with a set of preventive, promotive and curative services including but not limited to RCH services, which are free to the patient at the point of care. In this light, it is proposed to reach out to by provision of much needed medical facilities through PHCs.
- c. The services provided would be preventive and promotive and outpatient curative care. Where there are cases needing acute medical care on the day the PHC reaches, such care should be provided and patient referral shall be organized.

B. Guidelines for operation

- a. The Service provider should adhere to Standard Operating Procedures (SOPs) for each of the service finalized in consultation with HLL.
- b. Service provider must ensure strict adherence with all statutory and regulatory norms while providing the services under the scope of work.
- c. If any complaint of misbehavior and or misconduct comes into the knowledge, the Service Provider shall be fully responsible and have to compensate for the losses so suffered by HLL/KBOCWWB.
- d. The service provider will be responsible for any type of statutory/mandatory claims or penalties arising out of default in results of Investigation.
- e. The health check up camp and IEC training centers shall be setup by service provider by following the guidelines of HLL/ KBOCWWB.
- f. The implementation and day to day operations shall be closely monitored by HLL.

C. Manpower

- a. The service provider shall deploy sufficient qualified and trained technical staff (Nursing .MLT Tech, Paramedical), for collection of Blood samples and other sample and shall provide all necessary consumables.
- b. The laboratories should have Pathologist /Specialists as per clinical establishment Act and guidelines.
- c. The service provider shall deploy sufficient non-technical staff for field work as well as other activities.
- d. All manpower recruitment and engagement shall be complying with latest labour laws/ ESI/EPF rules.
- e. The service provider shall submit the complete documents of the staff deployed which will include Name, Age, Sex, Address, Qualification, Experience Certificate, Medical fitness, contact number, Recent photographs duly attested.
- f. The service provider shall be liable to make alternate arrangements in case of the absence of any staff deployed for collection of samples.
- g. The service provider shall be bound to replace the staff rendering unsatisfactory performance.

D. Awareness programs & Branding activities

- a. Branding, marketing and publicity of Preventive Healthcare Checkup under KBOCWBB through print and digital media will be the responsibility of service provider.
- b. The service provider shall provide the basic facilities for conducting IEC activities.
- c. Printed pamphlets, in the format approved by KBOCWBB providing information about healthy lifestyle and food habits shall be distributed to the beneficiaries.
- d. The staff of the service provider should carry out community mobilization, ensuring that people who need services are informed of the PHC schedule, can mobilize those in need of screening, those with communicable diseases or chronic conditions for follow up medical examinations, women in need of family planning services, children in need of medical care, follow up of children discharged from secondary or tertiary care facilities, and those with acute medical conditions.
- e. Service provider shall Inform the field level officials about the implementation of the scheme and carry out necessary publicity.
- f. IEC activities should be done mainly through leaflets, banner, poster, audio & auto promotion and social media.

- g. An album of activities undertaken in this regard should be prepared for submission to KBOCWBB by HLL.

E. Preventive Health checkup planning

- a. The entire program shall be planned and executed under the guidance and concurrence from HLL.
- b. The planning and dissemination of the PHC route map is the responsibility of the service provider and should be informed in advance to HLL as well as concerned officials of KBOCWBB and labour Officers of that particular jurisdiction. The mapping should also identify referral sites that are the first point of referral for these inaccessible clusters. The frequency of PHC visit shall be decided by concerned officials of KBOCWBB and Labour Officer concerned.
- c. The route of PHC would be planned such that it reaches a site which serves a cluster of areas. The PHC should be located in the Mohallas or localities occupied by targeted beneficiaries. If possible, the services could be conducted in any adequate building with one or two rooms and toilets, such as an Anganwadi center or Panchayat Bhavan, primary school or Offices OR Community Halls of the Labour Department. The Project shall be so implemented that it covers all the Assembly Constituencies within the jurisdiction of the concerned Labour Officer.
- d. The service provider may seek the cooperation of various departments of the Government (Health, Police, Revenue etc.) if necessary, for the implementation of the project.

F. Preventive Health Checkup

- a. Service provider is responsible for conducting health screening of registered workers and their dependents as per MCI & NABL norms with a team of qualified doctors and para medical staff as per rules. The details of of all staff working under this scheme should be provided.
- b. Service provider is responsible to provide basic facilities for medical examination and privacy of workers at the place of implementation of the project. Arrangements should be made to utilize as many Community Bhavana or Anganwadi Centres or other Government offices as possible with the permission of the Heads of Offices.
- c. The samples collected from the beneficiaries should be safely transported to the laboratory established at respective location/district and sample processing should be done within the ideal Turn around time.

- d. The presence of a representative of the Labour Department/Board should be ensured at the places where inspections are carried out. Video recording of the entire process should be facilitated in case Labour Department/Board representative is unable to attend.
- e. The PHC could also be used for natural or man-made calamities or in disaster situations and epidemics to provide services to affected populations. The service provider should be capable of rendering such services if any situation arises.
- f. The PHC must not be seen as a stand-alone service delivery option, but rather as a way of delivering primary care at construction sites and establishing a continuum of care with community level and outreach care as well as secondary and tertiary level care.

G. Technical requirements

The following technical requirements must be met and followed:-

- a. The instruments/devices installed in all laboratories must be integrated and interfaced with LIS and there should not be any manual data entry.
- b. All lab Samples should be bar coded and transferred using temperature-controlled units.
- c. All Lab Analyzers should be interfaced using standard HL7 or ASTM protocols With Automated testing and report generation.
- d. Consolidated Reports should follow the format as prescribed in Annexure 2 along with the Health Risk Assessment and Health Score
- e. There should be a Unified Data Platform (UDP) (Data should flow to the unified data platform): A comprehensive and integrated solution that facilitates data management, storage, processing, and analytics across various camps, this can be facilitated via the Department of Labour.
- f. Data Integration: The process of combining data from multiple sources, formats, and systems into a unified format within the UDP.
- g. Data Governance: A set of policies, processes, and procedures to ensure data quality, security, and compliance within the UDP.
- h. Data Security and Privacy: Measures to protect sensitive and confidential information from unauthorized access, ensuring compliance with relevant data protection regulations, ISO27001, HIPAA.
- i. Data Analytics and Business Intelligence (BI): The use of advanced analytical tools and algorithms to derive valuable insights from the data within the UDP.
- j. Data Visualization: Presenting data in a visual format, such as charts and graphs, to aid in understanding and decision-making.
- k. Data Catalogue: A centralized repository that documents and organizes metadata, data definitions, and data lineage within the UDP.

- l. Data Quality Management: Processes and tools to ensure data accuracy, consistency, and completeness within the UDP.
- m. Data Lake: A repository that stores raw and unprocessed data in its native format, facilitating big data analytics within the UDP.
- n. Data Virtualization: Providing a logical view of data from multiple sources without physically moving or copying the data within the UDP.
- o. API Integration: The use of Application Programming Interfaces (APIs) to enable seamless communication and data exchange between different systems within the UDP.
- p. Real-time Data Processing: The ability to process and analyze data in real-time, providing up-to-date insights within the UDP.
- q. Data Archiving and Retention: Strategies for long-term data storage, archival, and retention policies within the UDP.
- r. Disaster Recovery and Backup: Measures to ensure data continuity and protect against data loss in case of system failures or disasters within the UDP.
- s. Data Collaboration and Sharing: Features that enable secure data sharing and collaboration among government departments and authorized stakeholders within the UDP..
- t. All devices for health check up at camp site including BP apparatus, weighing machine, height checking systems. Temperature and SPO2 monitoring devices, eye screening systems-, ear screening system , Spirometer and mouth pieces etc shall be made available at all health check up locations in working conditions and validated by HLL team.

H. Reporting

- a. Service provider should ensure that the test reports should be analysed every week and details of the beneficiaries requiring Secondary and Tertiary treatment as well as follow-up treatment required and medical precautions to be taken should be prepared and facilitate the submission to KBOCWVB.
- b. Sort the reports of beneficiaries with an identifiable mark in green on the face page of the reports of healthy beneficiaries, an identifiable mark in orange on the face page of reports of non-serious and needy beneficiaries, and an identifiable mark in red on the face page of reports of beneficiaries who need medical attention. (identifiable mark in red) printing and distribution and obtaining acknowledgments from beneficiaries for distribution of reports.
- c. Distribution of red collared inspection reports to the beneficiaries should be done in the presence of the doctor and the workers have to be reminded about the follow-up treatment to be undertaken.

- d. Inform the concerned authorities of Health and Family Welfare Department in accordance with medical regulations, the details of beneficiaries who are found to have latent diseases in the inspection reports. A copy of the same should be submitted to the board in a sealed envelope.
- e. Mobile phone number of every beneficiary to be checked must be obtained compulsorily. Entering the mobile phone number in the reports related to them. If the phone number is not available, enter the mobile phone number of other family members.

I. Development of the Cloud based application software / mobile app

- a. The Service Provider shall develop and implement Cloud based application software/mobile app for updating, review and monitoring of the entire health program.
- b. The required login/access shall be provided to the officials/representatives of the HLL/ KBOCWVB.
- c. The Service Provider shall generate and provide periodic, location wise, camp wise reports as per the formats approved by the HLL.
- d. The Service Provider shall be responsible to maintain servers/data/backend/frontend of the entire system.
- e. The details of workers availing the benefits of the scheme shall be maintained in the data portal and reports shall be submitted to the Board from time to time. To maintain the server of the said data portal in the board and facilitate the use of the officials of the board and labor department.
- f. The backup of the entire digital data in the formats as per the requirements of the HLL/ KBOCWVB shall be provided by the Service Provider as and when required by the HLL.
- g. Any change in the Scope of Work or Deliverables in relation to which services are to be provided by the Service Provider.

J. Cost for conducting comprehensive health plan

- a. The Service Provider shall conduct health screening for all the registered construction workers and their beneficiaries under the KBOCWBB. The workers who will be registered in future will also be covered under the health screening program.
- b. The Service Provider shall conduct health screening as per the following test rate offered by HLL to KBOCWBB.

Sl.No.	Particulars of Check-ups	Rate
1	Doctor consultation – Detailed physical Test	Rs. 2940.00 For all 20Check-ups per person (Inclusive of all applicable taxes)
2	Lung Function Test	
3	Audiometry Screen Test	
4	Vision Screening Test	
5	CBC test	
6	ESR	
7	Hba1c	
8	Liver Function Test	
9	Renal (kidney) function tests	
10	LIPID Profile	
11	Malaria Parasite	
12	Urine Routine	
13	T3 T4 TSH	
14	Serum Iron	
15	Serum Magnesium	
16	GGTP	
17	CRP Quantitative	
18	Serum Ferritin	
19.a	Infection Disease Panel- HIV	
19.b	Infection Disease Panel- Hepatitis B	
19.c	Infection Disease Panel- Hepatitis C	
19.d	Infection Disease Panel- VDRL	
20	Blood Grouping	

The revenue share offer to HLL by the service provider shall be made by analyzing and considering the above mentioned rate per test, for a total of 167500 construction workers at 5 different districts/locations, inclusive of all operational and other expenses like pre camp – training, IEC activities, health camps , post health camp activities, coordination , business development & liasoning .

ANNEXURE-2

FORMAT FOR PHC REPORT

Health Checkup Report Format

Selected Agency shall follow below formats to generate Health Checkup reports:

Name -

Age -

Gender -

Labour ID -

SlNo	Name of Test Conducted	Page No.
1	Doctors Consultation - Detailed Physical Test	1 to 3
2	Lung Function Test	4
3	Audiometry Screening Test	5
4	Vision Screening Test	6
5	CBC Test	7 to End of Report
6	ESR	
7	HbA1c	
8	Liver Function Test	
9	Renal Function Test	
10	Lipid Profile	
11	Malaria Parasite	
12	Urine Routine	
13	T3, T4, TSH	
14	Serum Iron	
15	Serum magnesium	
16	GGTP	
17	CRP Quantitative	
18	Serum Ferritin	
19	HIV	
	Hepatitis B	
	Hepatitis C	
	VDRL	
20	Blood Grouping	

dd-mm-yyyy

Basic Health Checkup Report

Name	Phone No	Height Cms
Gender	Labor Id	Weight Kg
Location	MRN No.	Age Yrs

BODY STATS

			<18	18-27	27-30	>30
BMI	Kg/m2	Normal	Underweight	Normal	Overweight	Obese
			<50%	50%-65%	>65%	
Hydration	Normal		Low	Normal	Good	
			<12%	12-20%	20-26%	26-29% >29%
Fat	Athletic		Athletic	Good	Acceptable	Overweight Obese
			<3.4%	3.4%-5%	>5%	
Bone Mass	Normal		Low	Normal	Good	
			<43.1%	43.1-56.5%	>56.5%	
Muscle	Normal		Low	Normal	Good	
			1-12.5%		13-59%	
Visceral Fat	Good		Good		High	
			<0		>0	
Metabolic Age	Good		Good		High	

BLOOD PRESSURE

			<90	90-130	130-140	>140
Systolic	mmHg	Low	Low	Normal	Pre-Hyper	High
			<60	60-90	90-100	>100
Diastolic	mmHg	Low	Low	Normal	Pre-Hyper	High

TEMPERATURE

			93-99 °F (33-37°C)	>99 °F (37°C)
Temperature	°F	Normal	Normal	High

PULSE

			<60	60-90	>90
Pulse	bpm	Low	Low	Normal	High
			<90%	90-100%	>100%
Oxygen Sat	Low		Low	Normal	Good

RECOMMENDATIONS

BMI-

<Recommendations>

Fat -

No recommendations

Muscle -

<Recommendations>

Hydration -

<Recommendations>

Bone mass -

<Recommendations>

Metabolic Range -

<Recommendations>

Visceral Fat -

<Recommendations>

Metabolic Age -

<Recommendations>

Muscle Quality Score -

<Recommendations>

Systolic -

<Recommendations>

Name

Gender

Location

Phone No

Labor Id

MRN No.

Height Cms

Weight Kg

Age Yrs

Stethoscopy

<Comments>

<Comments>

Dermscopy

Spirometry COPD Screening Report

Subject Information

Subject Name :	Subject ID:
Gender	Age:
Height	Regression Set:
Weight	BMI:

Test Information

Test Date:	Values at BTPS
Device ID: 19791	Device Software
Number of 1	Ref: Number of
Blows: Best 1	Good Blows Best
FEV1 within: -	FEV6 Within:

Results

Parameter	Predicted	Test 1	Test 2	Test 3	Best	%Pred
FEV1 (L)						
FEV6 (L)						
FEV1/FEV6 (ratio)						

Obstructive Index COPD (GOLD) Classification

FEV1 Meas./FEV1 Pred. \geq 80%	Normal		Normal	FEV1/FEV6 \geq 0.70
FEV1 Meas./FEV1 Pred. < 80%	Mild		Stage I	FEV1/FEV6 < 0.70 & FEV1 \geq 80% Pred.
FEV1 Meas./FEV1 Pred. < 50%	Moderate		Stage II	FEV1/FEV6 < 0.70 & FEV1 < 80% Pred.
FEV1 Meas./FEV1 Pred. < 30% ▶	Severe		Stage III	FEV1/FEV6 < 0.70 & FEV1 < 50% Pred.
			Stage IV	◀ FEV1/FEV6 < 0.70 & FEV1 < 30% Pred.

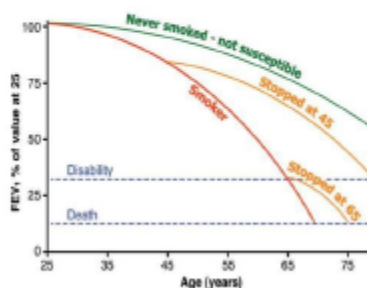
Interpretation



Lung Age : Obstructive

Index:

Interpretation:



Comments

Labour ID		ScreeningDate (mm-dd-yyy)	dd-mm-yyyy		
Patient ID		Screening Location			
Name					
Age					
Gender					
Contact					
Provisional Diagnosis	Hearing screening appears to be Normal				
Is Hearing Screening Done?	0				
Hearing Screening	500Hz	1000Hz	2000Hz	4000Hz	
Left Ear					
Right Ear					
Recommendation	1 Pure tone Audiometry (PTA)				Comments
	2 Impedance Audiometry				
	3 Hearing Aid Trial(HAT)				
	4 Other				
	5. ENT Consultation				
<p>Disclaimer: This hearing screening test has been developed for general information and awareness purposes only. The results indicate an individual's potential level of risk for developing hearing loss. It does not constitute or replace medical advice and is not meant to replace an audiogram. In this screening pure tone estimation is conducted through a calibrated headset When you submit your personal information in this form, you give us your consent to send you information regarding hearing loss or hearing care. ShruTi never discloses your personal information to anyone .The screening hearing test results indicate whether you have potential risk of hearing loss or not. The result is therefore only indicative and should be confirmed with a hearing specialist.</p>					

Patient: | | Y |



Generated At:

HAEMATOLOGY

Investigation Performed: **COMPLETE BLOOD COUNT**

Parameter	Results	Units	referral values
HAEMOGLOBIN (COLORIMETRIC METHOD)		gm%	11.2 - 14.4
RBC (SHEATH FLOW DC DETECTION)		millio- n/cumm	3.5 - 5.3
HCT(CALCULATED)		%	36 - 48
MCV(CALCULATED)		Fl	80 - 100
MCH(CALCULATED)		pg	27 - 32
MCHC(CALCULATED)		g/dL	32 - 35
RDW-CV(CALCULATED)		%	11.6 - 14
PLATELET COUNT(SHEATH FLOW D-C DETECTION)		Thou μ L	150 - 450
TOTAL WBC COUNT		Thou μ L	4 - 10
NEUTROPHILS		%	40 - 70
LYMPHOCYTES		%	20 - 40
MONOCYTES		%	2 - 10
EOSINOPHILS		%	1 - 6
BASOPHILS		%	0 - 1
ERYTHROCYTE SEDIMENTATION RATE		mm/hr	0 - 20

Patient: Y	
Generated At:	

Hematology

Investigation Performed: **BLOOD GROUP AND Rh TYPE**

Parameter	Results	Units	referral values
BLOOD GROUP AND Rh TYPE		-	-

ABC & Rh blood groups are major grouping system. Besides these, all individuals carry antigens of other blood group system, as well. It is important to subject all patients samples to an antibody screen prior to blood transfusion to detect any unexpected antibodies.

If blood grouping is done for new born babies/ cord blood, It is mandatory to repeat at one year of age since A, B & H antigens are not developed at birth.

Investigation Performed: **LIPID PROFILE**

Parameter	Results	Interpretation	Units	referral values
CHOLESTEROL TOTAL		-	mg/dl	0 - 200 : Desirable 201 - 239 : Moderate risk > 240 : High risk
TRIGLYCERIDES		Normal	mg/dl	0 - 150 : Normal 150 - 199 : Borderline 200 - 500 : High > 500 : Very high
HDL CHOLESTEROL		-	mg/dl	< 7 : Dangerous 7 - 15 : Dangerous 15 - 25 : Average 25 - 37 : Below Average > 37 : Protection problem
VLDL CHOLESTEROL		Normal	mg/dl	4.0 - 40.0 : Normal
LDL CHOLESTEROL		-	mg/dl	0 - 100 : Optimal 100 - 129 : Near/Above Optimal 130 - 159 : Borderline high 160 - 189 : High > 190 : Very high
CHOLESTEROL / HDL RATIO		-	-	0 - 5 : Normal

Patient: | | Y |



Generated At:

Biochemistry

Investigation Performed: RENAL PANEL RANDOM

Parameter	Results	Units	referral values
GLUCOSE RANDOM		mg/dl	70 - 140
CREATININE SERUM		mg/dl	0.6 - 1.2
UREA		mg/dl	17.4 - 55.8
URIC ACID		mg/dl	3.5 - 7.3

Investigation Performed: LIVER FUNCTION TEST

Parameter	Results	Units	referral values
TOTAL BILIRUBIN(REFLECTANCE SPECTROPHOTOMETRY)		mg/dl	0.3 - 1.2
DIRECT BILIRUBIN(CALCULATED)		mg/dl	0.1 - 0.5
INDIRECT BILIRUBIN(REFLECTANCE SPECTROPHOTOMETRY)		mg/dl	0.3 - 1
ASPARTATE TRANSAMINASE (SGOT) (UV WITH PSP)		IU/L	15 - 41
ALANINE TRANSAMINASE(SGPT) (-UV WITH PSP)		IU/L	17 - 63
ALKALINE PHOSPHATASE(PNPP)		IU/L	32 - 126
GGT(G-GLUTAMYL--P-NITROANILIDE)		IU/L	7 - 50
TOTAL PROTEIN (BIURET)		g/dl	6.5 - 8.1
ALBUMIN (BROMOCRESOL GREEN)		g/dl	3.5 - 5
GLOBULIN(CALCULATED)		g/dl	2 - 4
A/G RATIO(CALCULATED)		-	0.8 - 2

Patient: Y	Generated At: 
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Investigation Performed: **IMMUNOASSAY TEST**

Parameter	Results	Units	referral values
TRIIODOTHYRONINE - T3		nmol/L	1.49 - 2.60
THYROXINE - T4		nmol/L	71.2 - 141
THYROID STIMULATING HORMONE		uIU/ml	0.46 - 4.68

INTERPRETATION :

Hypothyroidism Subclinical Hypothyroidism Hyperthyroidism Subclinical Hyperthyroidism
For subclinical Hypo/hyperthyroidism, thyroid antibodies repeat TSH & FT4 suggested. Please evaluate for comorbid conditions like DM, CHD etc. TSH values may be transiently altered because of non thyroid illness like infections, recovery phase of illness, surgery & certain drugs. Diurnal variation of upto 50%, is known to occur and hence, time of the day can influence measured value.
Ref range for Pregnancy: (ATA2014) I Tri - 0.1 - 2.5, II Tri 0.2 - 3.0, III Tri 0.3 - 3.0
References- NHS 2013 & JAPI 2011
Investigation Performed: **SPECIAL CHEMISTRY**

Parameter	Results	Units	referral values
MAGNESIUM		mg/dl	1.7 - 2.8
C-REACTIVE PROTEIN		mg/dL	0 - 1

Investigation Performed: **IRON PANEL**

Parameter	Results	Units	referral values
IRON		(µg/dL)	60 - 170
FERRITIN		ng/ml	17.9 - 464

Patient: Y	Generated At: 
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Serology

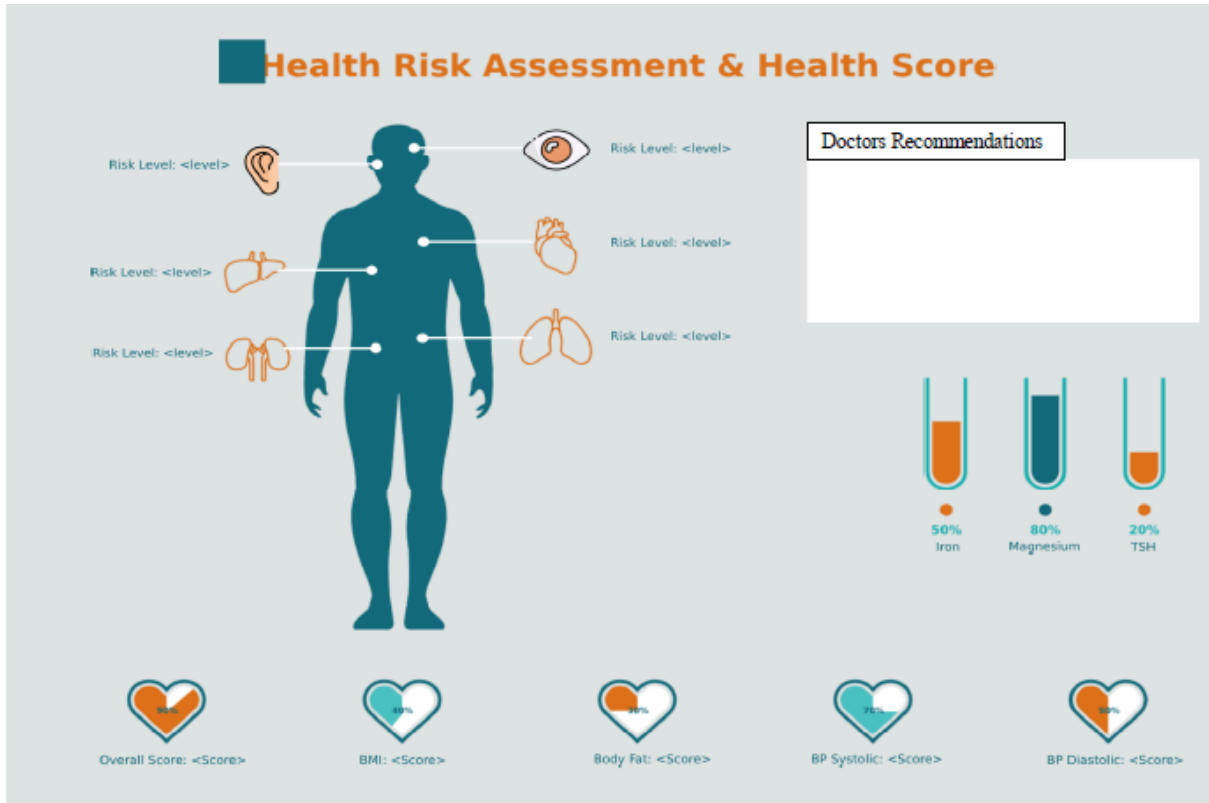
Investigation Performed: SEROLOGY TEST

Parameter	Results	Interpretation	Units	referral values
HBsAg - Hepatitis B surface antigen		Non-reactive	COI	< 0.90 : Non-reactive 0.90 - 1.0 : Border > 1.0 : Reactive
V.D.R.L		Non-reactive	COI	< 1 : Non-reactive > 1 : Reactive
HIV HUMAN IMMUNO DEFICIENCY VIRUS HIV I + II		Non-reactive	COI	< 1.0 : Non-reactive > 1.0 : Reactive
HCV Ab - Hepatitis C virus Antibody		Non-reactive	COI	< 90.0 : Non-reactive 0.90 - 1 : Border > 1 : Reactive
MALARIAL PARASITES		-	-	-

Clinical pathology

Investigation Performed: URINE ROUTINE

Parameter	Results	Units	referral values
VOLUME		ml	> 2
APPEARANCE		-	CLEAR
Sp.GRAVITY		-	1.006 - 1.022
LEUCOCYTES (PUS CELLS)		WBC/ μ l	NEGATIVE
NITRATE		-	NEGATIVE
UROBILINOGEN		EU/dL	-0.2 - 1
PROTEIN		mg/dL	NEGATIVE
pH		-	4.6 - 8
BLOOD		RBC/ μ l	NEGATIVE
URINE KETONE BODIES		mg/dL	NEGATIVE
BILIRUBIN		-	NEGATIVE
URINE GLUCOSE		mg/dL	NEGATIVE



ANNEXURE-3

BG.NO:

ISSUE DATE:

EXPIRY DATE:.....

BANK GUARANTEE FOR SECURITY DEPOSIT

To,

The
HLL Lifecare Limited,
Corporate & Regd. Office,
HLL Bhavan, Poojappura (PO),
Thiruvananthapuram-695012
Kerala

This Guarantee made on this (“Guarantee”) by, a body corporate constituted under the Banking Companies (Acquisition and Transfer of Undertakings) Act, 1970/1980 having registered office at and acting through its Branch Office at(hereinafter called the “Bank / Guarantor”) (Which expression shall include its heirs, successors, administrators and assigns) of the ONE PART, in favour of **HLL Lifecare Limited**, HLL Bhavan, Poojappura P.O., Thiruvananthapuram – 695 012, Kerala (hereinafter called the “HLL” which term shall include its successors, heirs and assigns) of the OTHER PART.

WHEREAS IN CONSIDERATION OF MESSERS. **HLL Lifecare Limited, (CIN**) Corporate & Registered office, HLL Bhavan, Poojappura PO, Thiruvananthapuram – 695012 (Kerala), a Government of India Enterprises (hereinafter called “HLL”) (which expression shall include its successor in business and assigns) having placed an order on **M/s. (CIN.....)** a Agency having its registered office at and its Branch Office at (hereinafter called “The Contractor”) (which expression shall include executors, administrators and assigns) vide Work order No. Dated for against Tender No. dated(work order hereinafter called “The Order”) (which expression shall include any amendments/ alterations to “The Order” issued by “HLL Lifecare Limited”) for the supply of services for “HLL Life care Limited”.

AND WHEREAS, under the terms of the said Order, “The Contractor” shall furnish a security amount of **Rs...../- (Rupees only)** for the performance of “The Contractor’s” obligations and/or discharge of the “The Contractor’s” liability in connection with the said “Order”; and “HLL Lifecare Limited” having agreed with “The Contractor” to accept Bank Guarantee for the Security Deposit.

NOW THEREFORE:

1. We, the “**Bank / Guarantor**” hereby affirm that we are guarantors and responsible to you, on behalf of the Contractor, up to a total of **Rs...../- (Rupees only)** and we undertake to pay you, upon your first written demand declaring the Contractor to be in default under the contract and without cavil or argument, any sum or sums within the limits of (amount of guarantee) as aforesaid, without your needing to prove or to show grounds or reasons for your demand or the sum specified therein.
2. We, the “**Bank / Guarantor**” further agree that “HLL Lifecare Limited” shall be sole judge whether the said “Contractor” has failed to perform or fulfil the said “order” in terms thereof or committed breach of any terms and conditions of “The Order” and the extent of loss, damage, cost, charges and expenses suffered or incurred by “HLL Lifecare Limited” on account thereof and we waive in the favour of “HLL Lifecare Limited” all the rights and defences to which we as guarantors and/or “The Contractor” may be entitled to.
3. We, the “**Bank / Guarantor**” further agree that the amount demanded by “HLL Lifecare Limited” as such shall be final and binding on “The Bank” as to “The Bank’s” liability to pay and the amount demanded and “The Bank” undertake to pay “HLL Lifecare limited” the amount so demanded on first demand and without any demur notwithstanding any disputes raised by “The Contractor” or any suit or other legal proceedings including arbitration pending before any court, tribunal or arbitrator relating thereto, our liability under this guarantee being absolute and unconditional.
4. We, the “**Bank / Guarantor**” further agree with “HLL Lifecare Limited” that “HLL Lifecare Limited” shall have the fullest liberty without our consent and without affecting in any manner our obligations hereunder to vary any of the terms and conditions of the said “Order”/ or to extend time of performance by “The Contractor” from time to time or to postpone for any time to time any of the powers exercisable by “HLL Lifecare Limited” against “The Contractor” and to forbear to enforce any of the terms and conditions relating to “The Order” and we shall not be relieved from our liability by reason of any such variation or extension being granted to “The Contractor” or for any forbearance, act or omission on the part of “HLL Lifecare Limited” or any indulgence by “HLL Lifecare Limited” to “The Contractor” or by any such matter or things whatsoever which under the law relating to sureties would but for this provision have the effect of relieving us.
5. We further agree that no change or addition to or other modification of the terms of the contract to be performed there under or of any of the contract documents which may be made between you and the Contractor shall in any way release us from any liability under this guarantee and we hereby waive notice of any such change, addition, or modification.
6. However, it has been agreed between “The Contractor” and “HLL Lifecare Limited” Bank Guarantee for Security Deposit is valid up to a period of 60 days beyond the expiry of the defect’s liability period as per the terms of the Order No..... Dated
7. We, the “**Bank / Guarantor**” further undertake not to revoke this guarantee during its currency except with the previous consent of HLL Lifecare Limited” in writing.

8. We, the “**Bank / Guarantor**” lastly agree that “The Bank’s liability under this guarantee shall not be affected by any change in the constitution of “The Contractor”.

09. “The Bank” has power to issue this guarantee in favour of “HLL Lifecare Limited, HLL Bhavan, Poojappura PO, Thiruvananthapuram-695012 (Kerala)” in terms of the documents and/or the Agreement/Contract or MoU entered into between “The Contractor” and “The Bank” in this regard.

10. **Notwithstanding anything contained hereinabove:**

i) Our liability under this Bank guarantee shall not exceed amount of **Rs...../- (Rupees only).**

ii) This Bank Guarantee shall be valid up to being the expiry date of the Guarantee) (Validity Period).

iii) Further a claim period of **1 year after validity period (claim period)** is available to you to make a demand under the Bank Guarantee, in respect of a cause of action which has arisen during the validity period only

iv) We are liable to pay up to the guarantee amount only and only if we receive from you a written claim or demand within the validity period of the guarantee or within the claim period, as above.

Bank’s Seal -----

The confirmation of this bank guarantee is available with our controlling office at the following address:

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