

STORE SECTION (D.O.)

ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029

Ref. No. **XX-201/SO(DO)/Gastro/2025-26/M&E**

Dated: **23.02.2026**

CORRIGENDUM

It is informed that the tender bearing no. XX-201/SO (DO)/Gastro/2025-26/M&E and CPP tender I.D. No. 2026_AIMSD_894205_1, procurement of High Definition Upper Flexible Endoscopic System & High Definition Lower Flexible Endoscopic System and Reusable Flexible Dueodenoscope with Disposable Cap on buy-back basis was published through CPP portal has revised technical specification & dates of tender has been extended, as per TSEC recommendation and detail given below:

Sl. No.	DETAIL	EXISTING	AMENDED/EXTENDED
1.	Bid submission END Date	26.02.2026	05.03.2026
2.	Bid Opening Date	27.02.2026	06.03.2026
3.	Technical Specification	Enclosed revised technical specification. Annexure-I	

All other terms & condition of the tender are same.


STORE OFFICER (DO)


Technical Specifications for High-Definition Upper GI Flexible endoscope, Lower GI Flexible Endoscope and Duodenoscope System

I. Upper GI flexible endoscopes (No-12)

- Built-in compatible CMOS with full focus to prevent blurring of edges of field under observation and high magnification
- Should have real time optical chromoendoscopy system for observation of capillaries and mucosal surface to identify suspicious areas.
- Should have brightness adjustment imaging with maintenance of contrast/extended dynamic range technology for improvement of brightness in darker portions for better endoscopic visibility to reduce miss rate during endoscopic examination
- Should have technology which gives images in both near and far view with better clarity such as extended depth of field technology etc.
- Should have advance technology to optimize real time visualization of bleeding points and underlying deep vessels to facilitate therapeutic interventions.
- Should have special modes for optimizing texture, brightness, and colour of endoscopic image to effectively detect early malignancies & subtle changes of endoscopic image
- Should be compatible with all the advanced imaging features as described in video-processor and light section
- Should have built in HDTV/4KTV compatible technology
- Should be equipped with auxiliary water jet function for flushing (mucosal cleaning).
- It should have dual focus with near mode or multi step zoom facility for detailed mucosal visualization at higher magnification and without reduction in field of vision.
- It should be fully immersible in disinfectant solution & one touch connectivity
- In-built scope identification memory chip for monitor display of scope's model no., serial no., white balancing memory, no. of connections/cumulative uses, etc.
- Endoscope configuration:
 - Field of view: 140°
 - Direction of view: Forward
 - Depth of field: Normal: 3-100 mm, Near: 1.5 – 2.5 mm or more
 - Bending capability: minimum Up 210° /Down 90°, Right 100°/Left 100°
 - Distal end diameter: 9.9 mm or less
 - Insertion tube diameter: 9.8 mm or less
 - Working channel diameter: 2.8 mm or more
 - Working length: 1100 mm or less
 - Total length: At 1200-1400 mm

- The following scopes should be provided as below:
 - Therapeutic scope (with a channel diameter of ≥ 3.2 mm): no-1 : it could be CCD/CMOS compatible
 - Double channel scope (channel diameter: $\geq 2.8, \geq 3.7$ mm): no-1 : it could be CCD/CMOS compatible, suction from both channels
 - Ultrathin scope (OD 6.0 mm or less and channel size of ≥ 2.2 mm): no-2 : it could be CCD/CMOS
 - Dual focus or multistep zoom scope: no – 08 : The endoscope should be of latest series or same series as video processor & light source
- The other specifications should be similar to upper GI flexible endoscopes as mentioned above.

II. Lower GI Endoscope (Colonovideoscope) (No-6)

- Built-in HDTV compatible CMOS with full focus to prevent blurring of edges of field under observation and high magnification without reduction of field of view
- Should have real time optical chromoendoscopy system for observation of capillaries and mucosal surface to identify suspicious areas.
- Should have brightness adjustment imaging with maintenance of contrast/extended dynamic range technology for improvement of brightness in darker portions for better endoscopic visibility to reduce miss rate during endoscopic examination
- Should have technology which gives images in both near and far view with better clarity such as extended depth of field technology etc.
- Should have advance technology to optimize real time visualization of bleeding points and underlying deep vessels to facilitate therapeutic interventions.
- Should have special modes for optimizing texture, brightness, and colour of endoscopic image to effectively detect early malignancies & subtle changes of endoscopic image
- Should be compatible with all the advanced imaging features as described in video-processor and light section
- Should have built in HDTV/4KTV compatible technology
- Should be equipped with auxiliary water jet function for flushing (mucosal cleaning).
- All scopes should have dual focus with near mode or multi step zoom facility for detailed mucosal visualization at higher magnification and without reduction in field of vision.
- It should be fully immersible in disinfectant solution & one touch connectivity
- In-built scope identification memory chip for monitor display of scope's model no., serial no., white balancing memory, no. of connections/cumulative uses, etc.
- Scope should be compatible with the Artificial Intelligence system.

- Should have adjustable or variable stiffness which can be adjusted according to endoscopist preference
- Should have extended bending section for passive bending function
- Should have advanced or high force transmission function for better torque
- Should be compatible with scope guide system or equivalent for 3D visualization of scope position and configuration during colonoscopy (No- 2), minimum 02 no. compatible scope should be provided.
- One of the colonovideoscope should be paediatric colonovideoscope of similar make (No-1).
 - Colonoscope configuration:
 - Field of view : 140 Degree or more
 - Field of view : 140 Degree or more
 - Direction of view : forward viewing
 - Depth of field : Normal: 3-100 mm, near: 1.5-2.5mm or more
 - Distal end outer diameter : 13.2mm or less
 - Insertion tube outer diameter : 12.8 mm or less
 - Tip Bending range : Up & down 180°, Left & Right 160°
 - Working length : 1600 mm or more
 - Total length : 1800 mm or more
 - Channel inner diameter : 3.7 mm or more

III. Combined Light source and Video processor (Number=4)

- Video processor should have in-built light source with 4 or more multi light LED Spectrum Technology
- It should have a single port for easy attachment of the endoscopes.
- Should have real time optical enhancement technology like - NBI/BLI& LCI/i-SCAN (OE) or equivalent.
- Should have advance technology to optimize real time visualization of the actively bleeding points and deep blood vessels for facilitating advanced therapeutic interventions
- Should have technology for optimizing texture, brightness and colour enhancement of endoscopic image to effectively detect early malignancies or mucosal pathologies
- Should have brightness adjustment imaging with maintenance of contrast/extended dynamic range technology for improvement of brightness in darker portions for better endoscopic visibility to reduce miss rate during endoscopic examination
- Video processor should have digital 12GHD-SDI output for 4K, 3G-SDI and HD-SDI /DVI output for HD image and should contain electronics for clear visibility of near and far objects
- The processor should have compatibility with optical zoom scopes, enteroscopes and dual focus scopes and all other latest generation and advance endoscopes available with the company.
- Provision of automatic IRIS control and white balance free function/Automatic White balance function.

- Provision of picture in picture display for both SD & HD input options and index function ability
- Equipped with automatic light adjustment facility.
- Equipped with touch screen interface / button for accessing the processor settings
- Equipped with high resolution HDTV imaging capacity
- Provision of portable memory and USB slot for still image recording
- The processor should be compatible with all the quoted scopes in the tender

IV. Medical Grade Monitor (n=4)

- 32-inch Medical Grade LCD monitor with narrow bezel and should have 4K resolution
- High contrast and wide viewing angle
- Video Monitor: Should be compatible HD/4K for display of endoscopic images with higher magnification and resolution for better visualisation of endoscopic images
- Multi-modality display capability including picture-in-picture (PIP) and picture-out-picture (POP)
- Should have CLONE OUT function to duplicate the 4K/HD video signals as displayed on the screen, including PIP/POP to a second monitor, or recording device
- Variety of video signal inputs such as 12G-SDI, HDMI, & 3G-SDI should be available
- It should have AIME technology.

V. Standard accessories:

- Water flushing pumps, n=06
- CO2 insufflators, n=06
- Water bottle 2 extra for each endoscope
- Biopsy channel rubber valves (100 Nos.) extra for each endoscope
- A/W valves – 02 Nos. extra for each endoscope
- Suction valves – 02 Nos. extra for each endoscope
- 500 disposable biopsy forceps for upper endoscopes and 500 biopsy forceps for lower endoscopes
- Leak testing device: (n=6)

VI. Should supply artificial intelligence hardware and software (n=2) for computer aided detection and diagnosis/ characterization. There should be a facility to upgrade and update whenever required.

VII. Technical Specifications for Flexible Duodenoscope(side-viewing)with reusable Disposable Cap (No =4)

- Built-in compatible CCD/CMOS with Full focus to prevent blurring of edges of field under observation

- Should have real time opticalchromoendoscopy system for observation of capillaries and other structure on the mucosal surface to identify suspicious areas.
- Should be compatible with all the advanced imaging features as described in video-processor and light section
- Should have a removable/disposable distal cap at the tip of the duodenoscope for proper disinfection
- Elevator should allow for smooth, precise positioning of instruments and accessories.
- Should have option to flush the distal endpreferablywith adapter
 - It should be fully immersible in disinfectant solution
 - In-built scope identification memory chip for monitor display of scope's model no., serial no., white balancing memory, no. of connections/cumulative uses, etc.
 - Configuration:
 - Field of view: 100° or more
 - Direction of view: Backward side viewing 10-15° or more
 - Distal end outer diameter: Up to 13.6 mm
 - Insertion tube outer diameter: Up to 11.6 mm
 - Working length: 1240 mm or more
 - Channel inner diameter: 4.2 mm or more
 - Angulation range: Up: 120°, Down: 90°, Right: 105-110°, Left: 90°
 - Total length: 1500 mm or more

VIII. Standard accessories for duodenoscopes:

- Biopsy channel rubber valves (100 Nos.) extra for each endoscope
- A/W valves – 02 Nos. extra for each endoscope
- Suction Valves – 02 Nos. extra for each endoscope
- Disposable caps for duodenoscope (n=100)

IX. General specifications:

- All endoscopes should be compatible with video processor quoted in the tender
- The company should quote their latest high end model
- In the event of malfunction, the down time should be minimum and the company should provide a loaner endoscope within 72 hours otherwise a penalty of Rs. 5000 per day will be levied.
- The system must have a standard comprehensive warranty of 2 years with spares and should quote CMC for next 8 years.
- A certificate should be given by the supplier that the instrument has not been supplied at a rate lower than the rate quoted in the tender of AIIMS. If it is found to be so then the difference will be recovered from the supplier along with penal interest.
- System should be European CE with 04 digit notified number/ FDA Approved or BIS compliant.

- It should be certified that if the instrument becomes non-functional, it will be repaired within the shortest possible time period otherwise a penal charge will be levied on the company.
- It should be installed on already placed endoscopic pendants in the department and all peripherals should be in the scope of vendors to make it fully functional.
- Old endoscopic system including endoscopes, video processors and light source etc. which are non-functional in the department should be taken under buy-back policy. Please quote for buy-back system. It can be inspected in the department.