



अखिलभारतीयआयुर्विज्ञानसंस्थान, रायपुर(छत्तीसगढ़)
All India Institute of Medical Sciences, Raipur (Chhattisgarh)
Tatibandh, GE Road,
Raipur-492 099 (CG)
www.aiimsraipur.edu.in

AIIMS/R/HS/PACU/2026/PAC/496

Date: 05/06/2026

Call for Objections

Sub:-Inviting Comments/objections (if any), regarding procurement of Air Hose Pipe-Patient Warming System for B Block OT 4th Floor PACU at, AIIMS Raipur under Proprietary Article.


B Block OT 4th Floor PACU at, AIIMS Raipur has to procure the **Air Hose Pipe-Patient Warming System** through Proprietary Article Basis under GFR -166. The proposal submitted by **M/s Gentherm Medical LLC** who is sole manufacturer and M/s Devyog Impex pvt. Ltd. Is the local agent of this item along with Proprietary Article Certificate are attached and same upload on AIIMS Raipur website.

The above documents are being uploaded for open information to submit objections/comments (if any) from any manufacturer/supplier before declaring proprietary article forthe said equipment/items to be procured, within 07 days (i.e. 11/06/2026) from the date of issuance/uploading of the notifications. The objection should be raised on the technical compliance sheet as enclosed, if any firm claiming suitability of their product with respect to specification mentioned.

The comments should be sent to the Gate No. 1 Administrative Budling 1st floor Hospital Store, AIIMS, Raipur in sealed envelopeor through mail storesofficer.hp@aiimsraipur.edu.in on or before 11/06/2026 up to 3.00 PM failing which it will be presumed that any other vendor having no comments to offer and case will be decided on merits.

Encl: -

1. Proprietary Letter by Manufacturer
2. Proprietary Letter by Department
3. Authentication letter of vendor


Store Officer (H)
AIIMS Raipur (अस्प.)
Stores Officer (H)
एम. रायपुर (उ.प.)
AIIMS Raipur (CG.)



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स्वामित्व प्रमाण पत्र
Proprietary Article Certificate

फाइल संख्या और संदर्भ File Number and Reference		6-302/19/2026-SO-H
1	सामाग्री का विवरण Description of article	AIR HOSE PIPE Pt warming
2	पूर्वानुमानित मात्रा/वार्षिक आवश्यकता Forecast of quantity/annual requirement	—
3	उपरोक्त मात्रा हेतु अनुमानित मूल्य Approximate estimated value for above	
4	निर्माता का नाम एवं पता Maker's name and address	GENTHERN Medical.
5	अधिकृत डीलर/स्टाकिस्ट का नाम Name(s) of authorised dealers/stockists	Denyog Impex Pvt Ltd
6	मैं पी ए सी के आधार पर उपरोक्त खरीद को स्वीकार करता हूं और यह प्रमाणित करता हूं कि: नोट- (बी), (सी-1) या (सी-2) में से केवल एक को बनाए रखने के लिए टिक करें, जो भी लागू हो और दूसरो को काट दें। कृपया (ए) टिक कर पुष्टि करें इसके बिना पीएसी प्रमाण पत्र अवैध होगा I approve the above purchase on PAC basis and certify that:- Note- Tick to retain only one out of (b), (c-1) or (c-2) whichever is applicable and cross out others. Please do confirm (a) by ticking it – without which PAC certificate will be invalid.	
6 (a)	यह एकमात्र फर्म है जो इस मद का निर्माण/संग्रहण कर रहा है। और This is the only firm who is manufacturing /stocking this item. AND	<input checked="" type="checkbox"/>
6 (b)	किसी अन्य फर्म द्वारा समरूप मद निर्मित/विक्रय नहीं किया जाता है, जिसका उपयोग इसके बदले किया जा सकता है। अथवा A similar article is not manufacturing/sold by any other firm, which could be used in lieu OR	<input checked="" type="checkbox"/>
6 (c-1)	कोई अन्य मेक/ब्रांड निम्नलिखित कारणों (जैसे ओईएम/वारंटी के) के लिए उपयुक्त नहीं होगा। अथवा No other make/brand will be suitable for following tangible reasons (like OEM/warranty spares): OR	
6 (c)	कोई अन्य मेक/ब्रांड निम्नलिखित कारणों से उपयुक्त नहीं होगा (अगर पीएसी	

	<p>पिछले खरीद में भी दिया गया था, तो कृपया इसके बाद से अधिक स्रोतों का पता लगाने के लिए प्रयास करें) तथा No other make/brand will be suitable for following intangible reasons (if PAC was also given in the last procurement cycle, please also bring out efforts made since then to locate more sources): OR</p> <p>.....</p> <p>.....</p>	
7	<p>प्रस्ताव के लिए वित्त शाखा की सहमति का संदर्भ (कार्रवाई भंडार और लेखा विभाग द्वारा की जायेगी) Reference of concurrence of finance wing to the proposal (Action will be taken by stores & Account Department)</p>	<p>.....</p> <p>.....</p>

पिछले तीन सालों में इस मद की पीएसी खरीद का इतिहास नीचे दिया जा सकता है (यदि कोई हो) History of PAC purchase of this item for past three years may be given below (if any)

प्रदायक का नाम Name of the Supplier	आदेशित मात्रा Quantity Ordered	आदेश पर मूल दर (₹) Basic Rate on order (Rs.)	प्रतिकूल प्रदर्शन रिपोर्ट अगर कोई हो Adverse Performance Reported if any
आदेश/निविदा संदर्भ और दिनांक Order/Tender reference & Date			

अनुमोदन करने वाले प्राधिकारी का हस्ताक्षर

दिनांक

23/02/2026

अधिकारी का पदनाम

20/02/2026
मुकेश कुमार मालव
Mukesh Kumar Malav
सहायक नर्सिंग अधीक्षक
Assistant Nursing Superintendent
एम्स, रायपुर (छ.ग.)/AIIMS, Raipur (C.G.)

प्रो. (डॉ.) सुब्रता कुमारी सिंघा
Prof. (Dr) Subrata Kumar Singha
प्राध्यापक एवं विभागाध्यक्ष (निद्रयन्त्र विभाग)
Professor and Head (Dept. of Anaesthesiology)
अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छ.ग.)
All India Institute of Medical Sciences, Raipur (C.G.)

LETTER OF AUTHORIZATION

Date: 01-01-2025

Sub: Authorization for Sales & Service**TO WHOM IT MAY CONCERN**

We, Gentherm Medical LLC, 12011 Mosteller Road, Cincinnati OHIO 45241, USA

Appoint M/s. **Dev yog Impex Pvt Ltd**, having office at 608, Vishal Tower District Center Janakpuri, New Delhi: 110058, as our Authorized Distributor to promote, market, sell and distribute IOB Medical Warming Solutions in India under the terms and conditions of the Distributor Agreement signed

1. IOB Air Warming Unit-505
2. All types of blankets for IOB -505
3. All Types of Spare Parts for IOB 505

We would like to hereby confirm that IOB MEDICAL Air Warming Unit, Spare Parts and its accessories are our proprietary items. No other manufacturer worldwide has the right to produce them apart from us.

Yours faithfully



Hsiao Jen Ying
Gentherm Medical LLC
General Manager /Managing Director, APAC
Jen.ying@gentherm.com



ATTESTED

Notary Public, Delhi

05 JUN 2026