

TENDER REF. NO.: KK/241/2026/UPP

**MINISTRY OF HEALTH
NEGARA BRUNEI DARUSSALAM**

**SUPPLY AND DELIVERY OF MEDICAL CONSUMABLES
FOR GASTROENTEROLOGY AND HEPATOLOGY UNIT AT
RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS)
HOSPITAL**

TENDER FEE : \$10.00

RECEIPT NO. :

CLOSING DATE : ON TUESDAY, 27th October 2026

TIME : 2.00 PM

FOA :

**THE CHAIRMAN
MINI TENDER BOARD, TENDER BOX
GROUND FLOOR, MINISTRY OF HEALTH
COMMONWEALTH DRIVE
BANDAR SERI BEGAWAN BB3910
NEGARA BRUNEI DARUSSALAM**

[NON-CLUSTERING]

SECTION 2

SPECIFICATION

TENDER REFERENCE NO.: KK/241/2026/UPP

SUPPLY AND DELIVERY OF MEDICAL CONSUMABLES FOR GASTROENTEROLOGY AND
HEPATOLOGY UNIT AT RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS) HOSPITAL

	USER'S REQUIREMENTS		
NO	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY
1.	SINGLE USE DISTAL COVER MAJ-2315	BOX	30 BOXES
2.	LOCK PERICARDIOCENTESIS SET CATHETER 8.3FR, 40CM LENGTH, SIDEPORTS: 6 NEEDLE G18, NEEDLE LENGTH 7,12CM WIRE GUIDED DIAMETER 0.038" WIRE GUIDE LENGTH 70CM DIALATOR 8 FR ORDER NO: G02433	PIECE	100 PCS
3.	ENDOSCOPIC ENZYMATIC SPONGE REVITAL-OX ENZYMATIC SPONGE	PIECE	288 PCS
4.	ACROBAT 2 CALIBRATED TIP WIRE, STGAIGHT TIP ACROBAT 2 CALIBRATED TIP WIRE, STRAIGHT TIP, WIRE GUIDE 0.025M DIAMETER, 450 LENGTH RADIOPAQUE, 4 CMHYDROPHILIC COATING: 5.8CM	PIECE	80 PCS
5.	CLEANING BRUSH FOR ENDOSCOPE CLEANING BRUSH BW20T, CLEANING BRUSH 2.0-4.2MM	PIECE	250 PCS

NO	<u>TERMS AND CONDITIONS</u>
1	Tenderer must be registered with the Ministry of Health.
2	TENDER FORM should be filled completely including the USER REQUIREMENT FORM (if available). Submission of incomplete form MAY cause DISQUALIFICATION OF TENDER .
3	Each tenderer is allowed to quote ONE BRAND WITH ONE PRICE ONLY for each item. Submission of more than one brand and price will cause DISQUALIFICATION OF TENDER .
4	All consumables supplied throughout this tender <u>shall</u> have a minimum expiry date of twelve (12) months / on delivery . Should the consumables be urgently needed, provision of consumables with expiry date of less than twelve (12) months should be first agreed by the User before delivery is made.
5	Brochures / catalogues should be submitted / attached with tender document.
6	Samples should be submitted together with tender or within fourteen (14 days) of the tender closing date (if applicable).
7	DELIVERY PERIOD: Not later than 4 weeks Staggered delivery upon request
8	PRICE VALIDITY: The quotation shall remain valid for 12 MONTHS from the final date for the submission of the quotation and no supplier may withdraw his/her quotation within that period. The Government reserves the right to extend this period if deemed necessary provided that such extension to the quotation validity period shall have written consent of the supplier(s).

Section/Unit	GASTROENTROLOGY & HEPATOLOGY UNIT
Person to Contact	Name : DR CHONG VUI HENG GASTROENTROLOGY AND HEPATOLOGY UNIT HOSPITAL RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS)
	E-mail : -

SCHEDULE 1 – TENDER FORM

To:

TENDER REFERENCE NO.: KK/241/2026/UPP

**INVITATION TO TENDER
SUPPLY AND DELIVERY OF MEDICAL CONSUMABLES FOR GASTROENTEROLOGY AND HEPATOLOGY UNIT AT RAJA ISTERI PENGIRAN ANAK
SALEHA (RIPAS) HOSPITAL**

TENDER OF (*name of tenderer*) _____

Company/Business Registration No.: _____

Tender Closing Date: _____

USER’S REQUIREMENTS				VENDOR’S OFFER					
NO	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKING SIZE	TOTAL QUANTITY	COST PER PACK (COST PER UNIT) (B\$)	TOTAL COSTS (B\$)
1.	SINGLE USE DISTAL COVER MAJ-2315	BOX	30 BOXES						

	USER'S REQUIREMENTS			VENDOR'S OFFER					
NO	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKING SIZE	TOTAL QUANTITY	COST PER PACK (COST PER UNIT) (B\$)	TOTAL COSTS (B\$)
2.	LOCK PERICARDIOCENTHESIS SET CATHETER 8.3FR, 40CM LENGTH, SIDEPORTS: 6 NEEDLE G18, NEEDLE LENGTH 7,12CM WIRE GUIDED DIAMETER 0.038" WIRE GUIDE LENGTH 70CM DIALATOR 8 FR ORDER NO: G02433	PIECE	100 PCS						
3.	ENDOSCOPIC ENZYMATIC SPONGE REVITAL-OX ENZYMATIC SPONGE	PIECE	288 PCS						
4.	ACROBAT 2 CALIBRATED TIP WIRE, STGAIGHT TIP ACROBAT 2 CALIBRATED TIP WIRE, STRAIGHT TIP, WIRE GUIDE 0.025M DIAMETER, 450 LENGTH RADIOPAQUE, 4 CMHYDROPHILIC COATING: 5.8CM	PIECE	80 PCS						

	USER'S REQUIREMENTS			VENDOR'S OFFER					
NO	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKING SIZE	TOTAL QUANTITY	COST PER PACK (COST PER UNIT) (B\$)	TOTAL COSTS (B\$)
5.	CLEANING BRUSH FOR ENDOSCOPE CLEANING BRUSH BW20T, CLEANING BRUSH 2.0-4.2MM	PIECE	250 PCS						
TOTAL COST (B\$)									

NO	TERMS AND CONDITIONS	VENDOR'S OFFER (PLEASE STATE)
1	Tenderer must be registered with the Ministry of Health.	
2	TENDER FORM should be filled completely including the USER REQUIREMENT FORM (if available). Submission of incomplete form MAY cause DISQUALIFICATION OF TENDER.	
3	Each tenderer is allowed to quote ONE BRAND WITH ONE PRICE ONLY for each item. Submission of more than one brand and price will cause DISQUALIFICATION OF TENDER.	
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5	Brochures / catalogues should be submitted / attached with tender document.	
6	Samples should be submitted together with tender or within fourteen (14 days) of the tender closing date (if applicable).	
7	DELIVERY PERIOD: Not later than 4 weeks Staggered delivery upon request	(Yes / No) (If No, please specify)
8	PRICE VALIDITY: The quotation shall remain valid for 12 MONTHS from the final date for the submission of the quotation and no supplier may withdraw his/her quotation within that period. The Government reserves the right to extend this period if deemed necessary provided that such extension to the quotation validity period shall have written consent of the supplier(s).	

Section/Unit	GASTROENTROLOGY & HEPATOLOGY UNIT	Section/Unit Ref No.:	
Person to Contact	DR CHONG VUI HENG Name : GASTROENTROLOGY AND HEPATOLOGY UNIT HOSPITAL RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS)	Tel.No. :	2242424
	E-mail : -	Fax No.:	

SECTION 2 – PRICE PROPOSAL		
PURCHASE PRICE	PER UNIT	BND\$
	ACCESSORIES	BND\$
	TOTAL	BND\$

SECTION 3 - PROCUREMENT AND TECHNICAL SPECIFICATION

BRAND:		MODEL:	
COUNTRY OF ORIGIN:		YEAR INTRODUCED TO MARKET:	
WARRANTY PERIOD:		LAST COUNTRY SOLD TO:	
PRICE VALIDITY: [AT LEAST <u>ONE (1) YEAR</u> PRICE VALIDTY]		DELIVERY TIME:	

SECTION 3 - PROCUREMENT AND TECHNICAL SPECIFICATION						
AUTHORIZED DISTRIBUTOR: (AUTHORIZED DISTRIBUTOR LETTER ATTACHED)	APPOINTED BRUNEI DISTRIBUTOR					
	PROCURE FROM OVERSEA AUTHORIZED DISTRIBUTOR	COMPANY NAME:				
		COMPANY ORIGIN:				
DETAILED BROCHURE INCLUDED		YES		NO	☒ or specify where appropriate	
USER AND SERVICE MANUALS:		YES		NO	Tenderers to acknowledge that they must provide at least TWO sets of USER AND SERVICE manuals when applying commissioning form. One Set for End User, One Set for BME. (Please provide hardcopy or softcopy)	
MAINS POWER SUPPLY:				OTHERS:		
				OTHERS:		
BATTERY		RECHARGEABLE			SINGLE-USE	REPLACEABLE
		OTHERS:				
	TYPE OF BATTERY:					
	RATING:					
POWER ADAPTER/CHARGER OUTPUT RATING:						
EQUIPMENT AMBIENT OPERATING TEMPERATURE RANGE:						
INTERNATIONAL SAFETY STANDARD Must comply to at least 1 safety Standards and certification (Please attached the copy of stated standards and certifications)				☒ Tick where appropriate ☐ US FDA Standard, ☐ European Union CE MARK, ☐ Australian TGA Standard, ☐ Canadian CSA Standard or ☐ Japanese JIS Standard. Others (Please specify): _____		
NUMBER OF TECHNICAL SUPPORT (ENGINEER/TECHNICIAN) Please provide training or certification for locals who is trained/certified	LOCAL			☐ Trained / Certified ☐ Not yet trained on the product		
	OVERSEA (SPECIFY LOCATION)		NEAREST LOCATION:			
DIMENSIONS AND WEIGHT OF MAIN UNIT:		☐ mm ☐ cm ☐ inch		☐ Kilogram (Kg) ☐ Gram(g) ☐ Pound (lbs)		
EQUIPMENT WHOLE LIFE TIME SUPPORT:	The supplier shall ensure that spare parts for the equipment are available for a minimum of 10 years after installation, with the support period extending beyond the expected lifecycle of the equipment. No of years: _____ (Please specify)					

SECTION 4 – WARRANTY UNDERTAKING FORM

Tenderer, on behalf of the manufacturer, acknowledged and agrees that when equipment is under the warranty period, must cover the scope of normal warranty below at no additional cost:

NORMAL WARRANTY

- Warrants the supplied medical equipment and its accessories to be in good condition, in working order and free from defects to the extent such equipment do not comply with specifications, under normal use for the warranty period. The scope of warranty covers to its maximum extent permitted by applicable law.
- During warranty, tenderer must rectify issues arise from any mechanical, technical or software faulty as soon as it is reported.
- **Exchange warranty;** Providing replacement units:
 - A. Warranty against defects – Manufacturing defects or Equipment malfunction resulted from mechanical, electrical or software failure during Commissioning or within the first _____ months of use
 - B. Faulty workmanship or unsatisfactory condition during delivery or commissioning
 - C. If a unit or accessory is deemed used item or refurbished item (not a new unit) by the user and BME Unit.
- **Two time Planned Preventive Maintenance (PPM) PER YEAR** according to Manufacturer's Preventive Maintenance Guideline and to include one-time replacements of battery at the end of 2 years warranty period or any other relevant parts to prolong equipment lifespan.

EXCLUSION FROM WARRANTY

MOH understand that the following circumstances are not covered in the warranty and Tenderer may quote for repair and subject to MOH approval:

- Unauthorized modifications - an alteration or repair by anyone other than the Manufacturer or Authorized agent during warranty period.
- Accidental damage or problems caused by negligence or mishandling, subject to appropriate justification by both parties.
- Vandalism and Natural disasters
- Normal wear and tear

ANY OTHER EXCLUSION

Tenderer may propose below to include items or terms which is not listed in the exclusion list above for MOH consideration.

TENDERER ACKNOWLEDGMENT

COMPANY CHOP AND SIGNATURE

1. We offer and undertake on your acceptance of our Tender to supply and deliver the above mentioned goods in accordance with your Invitation To Tender.
2. Our Tender is fully consistent with and does not contradict or derogate from anything in your Invitation To Tender. We have not qualified or changed any of the provisions of your Invitation To Tender.
3. We shall execute a formal agreement in the appropriate form set out in Section 4 – Contract of the Invitation to Tender together with such further terms and conditions, if any, agreed between the Government and us.
4. OUR OFFER IS VALID FOR **TWELVE (12)** CALENDER MONTHS FROM THE TENDER CLOSING DATE.
5. When requested by you, we shall extend the validity of this offer.
6. We further undertake to give you any further information which you may require.

Dated this day of 20 .

Signature of authorised officer of Tenderer
Name:
Designation:

Tenderer's official stamp: