



Ministry of Finance and Planning
Republic of Maldives

Terms of Reference
for
Request for Expression of Interest
of
Manage and Operate a Cath Lab at
Addu Equatorial Hospital (AEH) for a
period of 5 years

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Contents

1. Executive Summary.....	3
2. Background.....	3
2.1 Current Status of Cath lab	4
2.2 Demographic Trends	4
2.3 Specialties at AEH	5
3. Rational.....	6
4. Objectives	7
5. Scope Statement	8
Introduction and Background.....	8
Scope of Services.....	8
References	14
6. Expression of Interest (EOI) Evaluation Criteria	16
7. General instructions and EOI submission details	19
8. Forms	21
Form I: Expression of Interest Submission Form	22
Form II – Proponent Information Form	24
Form III – Historical Contract Non-Performance and Pending Litigation & Litigation History	25
Form IV - Technical Eligibility & Experience Form	28
Form V – Financial Eligibility Form.....	30
9. Annexure	34
Annex 1: Cath Lab Equipment Inventory	35
Annex 2: List of Procedures to be Proposed by Proponent.....	38

Terms of Reference

Manage and Operate a Cath Lab at Addu Equatorial Hospital (AEH) for a period of 5 years

1. Executive Summary

A significant portion of the population in Addu City relies on public healthcare services. As the most populous city in the Maldives outside the central region of Malé and Hulhumalé, Addu City holds considerable potential to serve as a key regional healthcare hub, particularly given its clustered population and strategic location. The city is also geographically central to the southern atolls of Gnaviyani, Gaafu Alif, and Gaafu Dhaalu, collectively contributing to a service population of over 56,000 individuals.

Addu Equatorial Hospital (AEH), the region's tertiary care facility with a 100-bed capacity, was officially inaugurated on April 2, 2019. The hospital's evolution from the former 50-bed Hithadhoo Regional Hospital into a tertiary-level institution has significantly enhanced healthcare accessibility in the region. AEH now provides a broad range of specialized services that were previously unavailable locally, including otolaryngologic and ophthalmic surgeries, advanced orthopedic procedures such as total knee replacements, laparoscopic interventions, and comprehensive diagnostic imaging services such as CT, MRI, endoscopy, and colonoscopy.

2. Background

In the Maldives, regional disparities in healthcare access have presented ongoing challenges, particularly in the outer atolls compared to the more centrally located and urbanized regions such as Malé City and Hulhumalé. Addu City, despite being the second-most populous urban center, has historically faced limitations in accessing advanced healthcare services locally.

Until recently, many essential diagnostic and treatment options such as CT, MRI, and echocardiography were unavailable in the southern region. As a result, patients were frequently referred to Malé for procedures that could not be conducted locally. This placed considerable logistical and financial strain on individuals and families, especially for non-emergency cases where national health insurance did not cover travel expenses.

The establishment of Addu Equatorial Hospital (AEH) has significantly enhanced healthcare service delivery in the southern region. With the introduction of advanced diagnostic services including ECHO, TMT, and Holter monitoring, AEH has begun addressing long-standing service gaps. Nonetheless, some specialized procedures and surgical interventions have only recently been introduced, and the full decentralization of high-end services remains an ongoing effort.

Addu City's economic context also underlines the importance of strengthening local healthcare capacity. The region's development has been gradual, with limited industrial and tourism activity

compared to the central atolls. Consequently, many residents have modest incomes, and domestic air travel required for seeking care in Malé can be prohibitively expensive.

In addition, public healthcare facilities in Malé often face high demand, resulting in waiting lists for consultations and procedures. This can lead to delays in accessing timely care, particularly for patients who travel for short durations. While private sector facilities offer advanced services, their costs may exceed the affordability of many households, especially when co-payments are required.

Enhancing specialized healthcare services within Addu City, including interventional cardiology, will not only reduce the burden of medical referrals and travel but also ensure equitable access to timely, high-quality care closer to home. This aligns with national priorities for strengthening regional health systems and promoting inclusive development across all parts of the country.

2.1 Current Status of Cath lab

The Cath lab at AEH consists of a main Cath lab operating room, a UPS room, an equipment room, a control room, and a dirty utility room. The Cath lab is part of the operating theatre suite and other facilities not within the Cath lab could be shared, like reception, changing rooms, rest rooms, recovery, patient waiting to counsel, etc. the Cath lab is a brand-new Shimadzu brand BRANSIST ALEXA which was successfully installed on 19th October 2024. A complete list of Cath lab equipment is attached in **Annex 1** and below in **Table 1.0 List of major equipment.**

	Equipment	Model	Manufacturer	Distributor/Service Agents
1	Cardiac Angio System	Bransist Alexa	Shimadzu Corporation	Hayleys Life Sciences Pvt Ltd Sri Lanka
2	Hemodynamic System	Picasso	Cathmaedical Cardiovascular, S.A	Hayleys Life Sciences Pvt Ltd Sri Lanka
3	Injector	Medrad Mark 7 Arterion	Bayer Medical Care inc	Next Innovation, Maldives
4	UPS	EATON 93PR	EATON	MEDLAND Pvt Ltd, Maldives

Table 1.0: Major Equipment Systems at Cath Lab

2.2 Demographic Trends

Addu City has a total of 25,053 people. Ganaviyani Atoll, Gaaf Alif Atoll, and Gaaf Dhaal Atoll are some of the nearby atolls that use AEH's services. As shown in the table below, when the populations of these three atolls are combined, AEH has a significantly larger population to serve. This population consists of 56,168 individuals. Residents of these three atolls around Addu City will prefer to commute to Addu City over central Male City due to the distance and costs associated with the latter.

Furthermore, the recent implementation of Rajje Transport Link (RTL), an affordable inter-island transportation network, has made it easier for people from these atolls to travel to Addu City.

Furthermore, planned development initiatives in Addu City to build five new resorts & the Hankede Integrated Tourism project with 5,000 beds are expected to boost the population by attracting a migrant workforce, both national and expatriate. As a result, with the predicted population influxes, AEH must move quickly and promptly to increase the demands both in capacity and services.

Atoll	Population
Addu Atoll	25,053
Gnaviyani Atoll	9,166
Gaaf Alif Atoll	9,174
Gaaf Dhaal Atoll	12,775
Total	56,168

Table 2.0: Population Addu City and Neighboring Atolls

2.3 Specialties at AEH

Table 3.0: shows that AEH has twelve permanent clinical care specialties, with seven being surgical and five being medicine specialties. AEH now provides regular subspecialty services as planned appointments. Currently, the hospital offers nine visiting specialties.

Surgical Specialities	Medical	Visiting	Sub
Surgery	Internal medicine	Neurology	
Obstetrics and gynecology	Paediatrics	Orthopaedics	
Orthopaedics	Dermatology	Oncology	
ENT	Psychiatry	Cardiology	
Urology	Clinical psychology	Interventional	
Ophthalmology	Pulmonology	Nephrology	
Dentistry and orthodontics	Cardiology	Gastroenterology	
	Nephrology	Paediatric surgeon	
		Cardiac Surg Paed	

Table 3.0: Service Specialties at AEH

Over a short amount of time, AEH has built a variety of specialized clinical care projects and programs, as shown in **Table 4.0**. AEH's Hiyfahi Clinic specializes in diabetic care and follows strict standards and norms. The most recent clinic opened focuses on pregnant women's health before and after delivery, Sandhina Clinic, which focuses on children's health, is also ready to launch.

Surgical Specialities
Hiyfahi Clinic (Specialized NCD Clinic)
Stroke centre
Employee mental health clinic (Veyshun Ekee)
Reproductive health clinic
Sandhina Clinic (Well Child Clinic) (Opening Soon)
Moahiri book for comorbidity patients (Beyskothalhaa)
We Care for You (Antenatal and postnatal exercise program)

Table 4.0: Specialized Clinics and Programs

At AEH, we recognize this need for our community and have implemented a variety of innovative services, procedures, treatments, and diagnostic facilities. AEH outperforms other developing tertiary care hospitals and has built a competitive team. **Table 5.0** highlights the new services that AEH has recently released.

Surgeries / Procedures
Laparoscopic appendectomy
Laparoscopic cholecystectomy
Varicocelelectomy
Orthodontic services
Infertility treatments and IUI
Whole body UV Light phototherapy
Endoscopy guided foreign body removal
Endoscopic tympanoplasty
Functional endoscopic sinus surgery
Diagnostic nasal endoscopy with adenoidectomy
Adenotonsillectomy
Cataract surgery
Total knee replacement
Total hip replacement
Hysters flow and hysteroscopic surgeries
Myomectomy
Polypectomy
Biopsy
Endometrial ablation
Hysterosalpingography

Table 5.0: Recent Service Additions

3. Rational

- Cath lab services are life-saving procedures essential for the diagnosis and treatment of all cardiac diseases. At present, no such facility is in operation at AEH. Coronary angiography is now recognized as the gold standard procedure for evaluating patients with suspected coronary heart disease and identifying coronary anatomy (Di Mario and Sutaria, 2005; Edmond et al, 2008).

- Cardiovascular illnesses are among the top five causes of death for young adults aged 35 to 64 years in the Maldives (MOH 2020). Kuntz et al. (1996) discovered that in many patient subgroups following AMI, routine coronary angiography and treatment guided by its results is more cost-effective than alternative coronary heart disease treatment strategies.
- Due to the unavailability of these essential services, all patients suspected of cardiac disease requiring angiograms or angioplasty have to be referred to the capital Male City. In 2022 and 2023, AEH urgently evacuated 19 and 23 patients, respectively. Cardiology referrals are one of the most common causes of medical evacuation from AEH.
- As per records of 2015, Aasandha spent around \$ 3.8 million on cardiology treatment abroad and also spent around \$ 880 thousand on airfare for these medical evacuations overseas.
- Since then the capital city has established a handful of Cathlabs both in government and in private like Tree Top Hospital and ADK Hospital. Yet the cardiovascular surgeries performed are on the rise, with 1138 in 2017 and 2279 cases in 2023 respectively.
- In 2019 With the proliferation of Cathlab facilities in Male, MOH took the decision to develop a Cathlab facility at Addu City. With the decision, equipment was supplied and the Cathlab facility was designed & developed at one of the operation theatres of AEH. Equipment installations have been completed at the end of 2023 and awaiting a management & operational model.

4. Objectives

1. AEH intends to provide cardiac Cath Lab services to the community of Addu City and the nearby atolls in the southern region, which comprise, Gnaviyani Atoll, Gaaf Alif Atoll, and Gaaf Dhaal Atoll, through a Government Private partnership on an Operate & manage Model.
2. The private partner, which is referred to as a service provider, will manage, hire consultants and technical staff, and operate the Cath lab 24/7, maintain the equipment for the Cath lab services i.e. Outpatient, Inpatient, Operative, Postoperative, and Intensive Care for the cardiac patients.
3. AEH will sponsor the activities stated in **Section 5.2**.
4. The AEH would be the government partner of the project and will pay the service provider for all the costs mentioned in **section 5.1 and through section 5.3 to 5.8** which includes, costs of human resources, consumables, and operational fees.
5. The Service Provider must allow undergraduate medical students from AEH-approved universities and medical institutions to use the Cath lab for training purposes as observers.

5. Scope Statement

Introduction and Background

Addu Equatorial Hospital (AEH) is a 100-bed tertiary referral hospital located in Addu City, the second most populous city in the Maldives. AEH serves a catchment population of over 56,000 individuals, including residents from Addu Atoll, Gnaviyani Atoll, Gaaf Alif, and Gaaf Dhaal Atolls. AEH has grown to offer advanced diagnostics and specialist care and is strategically positioned to deliver essential cardiovascular services to the southern region.

In 2023, a state-of-the-art Cath Lab equipped with the Shimadzu BRANSIST Alexa system and associated components was installed and is now awaiting operationalization. AEH invites Expressions of Interest (EOI) from qualified service providers to manage and operate this Cath Lab under a 10-year Government-Private Partnership model.

Scope of Services

Clinical and Operational Responsibilities of the Service Provider

The selected service provider shall be responsible for 24/7 operation and management of the AEH Cath Lab, covering:

- Diagnostic coronary angiography
- Percutaneous coronary intervention (PCI) and stenting (simple and complex lesions)
- ASD, VSD, PDA device closures
- Pericardiocentesis
- Temporary pacemaker insertion

Human Resources to be Deployed by the Service Provider

- 2 Interventional Cardiologists (1 Senior Consultant, 1 Junior Consultant)
- 2 Cath Lab-trained Nurses (Scrub Nurse and Circulating Nurse)
- 1 Radiographer or Cath Lab Technician
- 2 Local Administrative Officers (recruited locally)

All personnel costs including salary, accommodation, travel, and allowances will be borne by the service provider.

Additional Equipment and Items to be Provided/Managed by the Service Provider

- AED, ECG machine, Syringe pump, Infusion pump
- Executive chairs, wall clock, Android phone
- Mayo's trolley, instrument trolley, steel Cath Lab trolley
- Patient warmer and warm touch blankets
- Tissue dispensers, dustbins, linen hamper, crocks
- Formalin chamber, IV stands, Catheter storage rack, storage carts
- Printer, computer/laptop

Note: Some items may be shared from other departments subject to availability and AEH approval.

Training Requirements (AEH Staff)

The service provider will train the following AEH staff:

- 3 AEH Nurses: 6-month training at a high-volume Cath Lab
- 2 AEH Radiographers: 6-month training
- 2 AEH Anesthesiologists: 2-week training (must be completed pre-launch)

Post training evaluation and assessments must be conducted and certification must be provided at the end of training.

Existing Facility and Infrastructure at AEH

- Cath Lab is located in the OT complex of AEH and includes: operating room, UPS room, equipment room, control room, dirty utility
- Fully installed Shimadzu BRANSIST Alexa system (details in Annex 1 of EOI)
- Shared use of reception, changing rooms, rest areas, and recovery rooms

5.1	Services Under Scope of Service Provider
5.1.1.	Perform cardiac angiography and primary cardiac stenting at AEH.
5.1.2.	Fulltime interventional cardiologists x 2 capable of performing cardiac angiography and primary cardiac stenting are to be stationed at AEH. Whenever a full-time cardiologist goes on a long leave, a locum interventional cardiologist should cover full-time cardiologists during the latter's absence.
5.1.3.	The Proponent has to provide 24-hour uninterrupted services 7 days a week.
5.1.4.	The proponent should prepare all policies and procedures and other relevant documents in time to apply for an operating license from MOH.
5.1.5.	All arrangements, that are not in the scope of the AEH, as mentioned in 5.2 , but required by the proponent for the smooth functioning of the Cardiac Cath Lab has to be provided, and procured by the Service Provider. Any modification, alteration, or addition to the already constructed building of the Hospital has to be done by the service provider himself after obtaining prior permission from the Hospital Authorities, at his own cost. Any equipment, instruments which is vital to continue operation should be procured by the proponent. The cost of these can be deducted from the rent in divided installments from the Site & Equipment Rental Fee.
5.1.6.	Any complications arising out of and during the treatments shall be referred to a higher center for management.
5.2	Services Under Scope of AEH
5.2.1.	AEH will provide a fully operational Cath Lab with all necessary equipment installed.
5.2.2.	AEH will provide all general surgical and anesthesia instruments/equipment.
5.2.3.	Replace the current Cath Lab with a new one after 5 years of service.
5.2.4.	AEH will facilitate obtaining all licenses, radiation safety, authorizations, and approvals Ministry of Health or any other government body within Maldives needed for operating the Cath Lab.
5.2.5.	Electricity, generator, UPS, water, air conditioning, and medical gases services, will be provided by AEH.

5.2.6.	AEH will ensure 24-hour generator backup during power failure.
5.2.7.	Intercom Telephone connections will be provided by AEH.
5.2.8.	AEH will provide access to its EMR for use by Cath lab staff.
5.2.9.	AEH will provide TLD badges and analysis on a bimonthly schedule for all Cath lab staff.
5.2.10.	AEH will provide cloth gowns, overcoats, radiation safety equipment, and lead aprons for use by all staff.
5.2.11.	AEH will provide all linen, bedding, and stationaries required for the Cath lab operation.
5.2.12.	Internet facilities and Wi-Fi will be provided by AEH.
5.2.13.	In-hospital available Services of CSSD, Laundry, Laboratory, Radiology, MRD, and Bio-medical Waste Disposal will be managed by AEH.
5.2.14.	The use of dialysis facilities, if required will be facilitated by AEH.
5.2.15.	All investigations & procedures available at AEH will be provided at zero cost through the national insurance of the patients.
5.2.16.	General consumables for any Cath lab procedures will NOT be provided by AEH. NOTE: Also note that AEH will not provide any specialized consumables, dyes, or drugs specific to Cath lab procedures.
5.2.17.	Lift services and access control will be provided to clinical areas.
5.2.18.	AE will manage the maintenance of building, building services, fixtures, and fittings.
5.2.19.	Security services are available for the Hospital with CCTV.
5.2.20.	AEH will Provide housekeeping services.
5.2.21.	AEH will permit the use of Casualty & all inpatient department facilities for cardiac patients.
5.2.22.	AEH will facilitate the service providers to manage their consumables inventory by providing spaces for storage.
5.3	Costs related to Cardiologists.
5.3.1.	Interventional Cardiologist x 2 (1 x Senior consultant & 1 x Junior consultant)
5.3.2.	Interventional Cardiologist salary per month
5.3.3.	Travel costs per month

5.3.4.	Accommodation Costs per month
5.3.5.	Other expenses (please describe in detail)
5.3.6.	Total Expenses of Cardiologists per month
5.4.	Costs related to the Nursing team:
	A nursing team consisting of two members who can manage the Cath lab & assist in the procedures that would be performed by the cardiologist should be stationed at AEH.
5.4.1.	Nursing team – 2 members (Scrub nurse & circulating nurse)
5.4.2.	Nurse salary per person per month
5.4.3.	Travel costs
5.4.4.	Nursing staff accommodation per person per month
5.4.5.	Other expenses for the two nurses per month
5.4.6.	Total expenses for two nurses per year.
5.5.	Cost-related Cath Lab Technician or Cath Lab Radiographer
5.5.1.	Cath Lab Technician- 1 x member
5.5.2.	Cath Lab technician salary per month
5.5.3.	Cath Lab technician accommodation per month
5.5.4.	Other expenses of Cath Lab technician per month
5.5.5.	Total expenses of Cath Lab technician per month
5.6.	Costs related to administrative staff
5.6.1.	Administrative staff – 2members. Administrative staff should be locals
5.6.2.	Estimated salary for each staff per month.
5.6.3.	Total expenses for two administrative staff per year
5.7.	Cost of Cath lab inventory specific for angiography and stenting procedures – Catheters, stents, guide wires, blood thinners, connectors, syringes, dyes and any other similar specific consumables.
5.7.1.	Inventory Holding cost (estimated quantity of Catheters and stents and any other consumables specific for coronary angiography and stenting)

5.7.2.	Estimated stent, Catheter, and other consumables inventory cost for one month.
5.7.3.	Estimated inventory costs for stents, Catheters, and other consumables for one year.
5.8.	Service fee (Management fee for operating Cath-Lab)
5.8.1.	The management fee for operating the Cath Lab.
5.8.2.	Service fee per month (management fee)
5.8.3.	Service fee per year (management fee)
5.9.	Qualification & Experience of the Medical Personnel
5.9.1.	All professionals should have a valid registration & license in their fields in their home country's respective medical, nursing, or allied health councils.
5.9.2.	Interventional Cardiologist: The senior interventional cardiologist shall have at least 8 years of experience post-DM/DNB or equivalent. Supporting documents should be submitted along with the bid.
5.9.3.	Nurse: A bachelor's degree with a minimum of 2 years' experience in the field. Supporting documents should be submitted along with the bid.
5.9.4.	Radiographer: A bachelor's degree with a minimum of 2 years' experience in Critical care and cardiac Cath Lab. Supporting documents should be submitted along with the bid.
5.9.5.	Anesthesiologist: MD Medicine Anesthesia with 1-year experience in a Cath Lab. Supporting documents should be submitted along with the bid.
5.9.6.	Cath lab technician: A bachelor's degree with a minimum 2 years of experience in Cath Lab. Supporting documents should be submitted along with the bid.
5.10.	Training
5.10.1.	The Anesthesiologist training shall be completed before starting the operation. The training of the rest of the team should commence within the first year of operation. At the end of the training, an assessment should be made and a certificate awarded. The training could be conducted in-house at a high-volume Cath Lab.
5.10.2.	Nurses: should train 3 nurses of AEH at a high-volume Cath Lab for a minimum of period of 6 months. Following the training, the nurses should be able to independently assist the interventional cardiologist during interventional cardiac procedures at AEH.
5.10.3.	Radiographer: should train 2 radiographers of AEH at a high-volume Cath Lab for a minimum of period of 6 months. Following the training, the radiographers should be able to independently assist the interventional cardiologist during interventional cardiac procedures at AEH and replace the Cath Lab technician.

5.10.4.	Anesthesiologist: should train 2 Anesthetists of AEH at a high-volume Cath Lab for a minimum period of 2 weeks.
5.11.	Equipment & Site Rental Fee
5.11.1.	This is a monthly payment that the successful proponent is expected to pay AEH, and therefore this payment shall be deducted by AEH from the service fee (management fee) mentioned in (5.8) before making the payment to the proponent.
5.12.	13.0 List of Services Proposed with Cost.
5.12.1.	Please mark the procedures you propose. The list is not exhaustive, you can add additional procedures to the list.
	<p>List the price of the package (Refer to (Annex 2))</p> <p>Diagnostic coronary angiography.</p> <p>PCI and stenting for simple and complex lesions</p> <p>ASD device closure.</p> <p>VSD device closure.</p> <p>PDA device closure.</p> <p>Pericardiocentesis.</p> <p>Temporary pacemaker.</p>
5.13.	Site
	Addu Equatorial Hospital, Kanbihaa Magu, Maamendhoo, Addu City, Maldives
5.14.	Performance Monitoring & Medical records
5.14.1.	The Hospital Authority is free to monitor the quality of services rendered by the Service Provider on a periodical basis.
5.14.2.	Any shortcomings will be communicated to the Service Provider in a written format and the service provider will be responsible for rectification/action if any.
5.14.3.	The service provider shall maintain records and logs of patients and procedures carried out.
5.14.4.	Monthly statistics must be sent to the hospital administration and medical records.
5.14.5.	Service Provider must maintain all medico-legal & other records and should be able to provide them in hard and soft copy to the Hospital Administration on demand

5.14.6.	The service provider shall be responsible for the storage of images and reports of all Cath labs done by the service provider including the image retrieval system for a period of ten years. In case of a change of service provider for any reason, the stored data and images must be transferred to the new provider for continuation of storage.
5.14.7.	Soft copy of images and report: one copy each to the patient and AEH. A hard copy of the report: each to patient and AEH.
5.14.8.	Regular patient satisfaction surveys/grievances shall be carried out and shared between the Service Provider Medical Director & QAD.
5.14.9.	Corrective action needs to be intimated in writing by the Service Provider.
5.14.10.	The Medical Director or his authorized person shall have the right to inspect the Centre at any time.
5.14.11.	The service provider will nominate an official for liaison work and performance monitoring.
5.15.	Service Period
5.15.1.	The service period is for 5 years.
5.15.2.	Subleasing of the service or infrastructure is not permitted during the contract period.
5.15.3.	On Expiry of the contract any additional machinery & inventory brought in by the service provider related to this undertaking may either be removed from AEH premises by the proponent or ownership may be transferred to AEH.
5.15.4.	Ownership of all machinery and inventory related to this project may be transferred to AEH, under mutually agreed terms and conditions between AEH and the proponent.
5.15.5.	If a mutual understanding is not reached, the proponent will take away all inventory under the proponent's ownership. After the expiry of contract terms, a grace period of up to 4 weeks will be allowed to remove the proponent's inventory items from the premises.
5.15.6.	The contract could be terminated by either party with 6 months written notice with justification or reason.

References

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2. Bowden, T., 2009. Evidence-based care for patients undergoing coronary angiography. *British journal of nursing*, 18(13), pp.776-783.

3. *Statistical Yearbook of Maldives 2020*. (n.d.).
<https://statisticsmaldives.gov.mv/yearbook/2020/>
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<https://statisticsmaldives.gov.mv/yearbook/2023/>

6. Expression of Interest (EOI) Evaluation Criteria

Criteria	
<p>1. Eligibility</p>	<ul style="list-style-type: none"> i) The Proponent must be a legally registered company or a consortium comprising a maximum of two legally registered companies, jointly submitting a proposal to provide the required services. ii) In the case of a consortium, all members shall be jointly and severally responsible for the successful delivery and operation of the Cath Lab. The Lead Member must hold a minimum of 55% ownership stake in the consortium. iii) Bids from individuals or unregistered groups of individuals shall not be accepted. iv) All entities involved must be legally incorporated under the applicable Companies Act in their respective countries. Furthermore, in the case of a consortium, at least one member must be a company duly registered in the Maldives. v) A company may not submit more than one bid, either independently or as part of a consortium. Dual participation as a sole proponent and as a consortium partner is strictly prohibited. vi) Each proponent or consortium is permitted to submit only one proposal in any capacity under this procurement process. vii) In the case of a consortium, the Lead Member (Principal Proponent) shall act as the sole representative for all consortium members and shall assume full legal responsibility for the performance of obligations under the contract. The Lead Member will serve as the primary point of contact and shall be authorized to act on behalf of all consortium partners in all legal, contractual, and administrative matters related to the project.
<p>2. Conflict of Interest</p>	<p>The Proponent must not have any actual or perceived conflicts of interest that could affect its participation in this project or, upon award, the execution of its responsibilities. This includes conflicts arising from prior or current contracts, agreements, or relationships that may compromise impartiality or give rise to a reasonable concern of bias in the conduct of this EOI process.</p>

	<p>A conflict of interest may include, but is not limited to, any direct or indirect relationship between:</p> <ul style="list-style-type: none"> the Proponent (including its directors, employees, consultants, or advisers), and any Government ministry, department, agency, or body or their respective officials or employees with influence over the scope, design, evaluation, or implementation of the project.
<p>3. Historical Contract Non-Performance & Litigation History</p>	<p>i) The Proponent must not have been declared insolvent, under liquidation, or bankrupt at any time during the five (5) years preceding the submission deadline of this Expression of Interest.</p> <p>ii) The Proponent must not have been convicted, whether in the Maldives or any other jurisdiction, of offenses related to fraud, corruption, collusion, money laundering, or any serious criminal act involving dishonesty, violence, or harm to human life, or any offense connected to professional misconduct.</p> <p>iii) Neither the Proponent nor any member of a consortium (if applicable) shall have been:</p> <ol style="list-style-type: none"> disqualified or barred from participating in any public procurement process within the Maldives, or had any public sector contract terminated for cause by a government or public entity, whether within or outside the Maldives. <p>iv) No consistent history of court/arbitral award decisions against the Proponent since 1st January 2020.</p>
<p>4. Technical Eligibility & Experience</p>	<p>i) The Proponent must have been operating a Multispecialty Hospital or a Super Specialty Hospital with active Interventional Cardiology or Cardio-Thoracic Surgery services for at least the past three (3) financial years.</p> <ul style="list-style-type: none"> A valid hospital registration certificate or equivalent documentation confirming operational status must be submitted as part of the EOI. <p>ii) The hospital and its surgical facilities must be accredited by an internationally recognized quality assurance body such as the National Accreditation Board for Hospitals</p>

	<p>& Healthcare Providers (NABH), the Joint Commission International (JCI), or an equivalent regulatory/accrediting institution.</p> <p>iii) The Proponent must currently operate at least one fully functional Cardiac Catheterization Laboratory, supported by a trained team of interventional cardiology professionals.</p> <ul style="list-style-type: none"> • The Proponent must have performed a minimum of 1,000 cardiac catheterization procedures during the most recently completed financial year. • A summary of cases including the number and types of interventions must be submitted in the form of a certified report, duly signed and attested by an authorized representative. <p>iv) The Proponent must provide a third-party Performance Audit Report as evidence of quality assurance and operational standards.</p> <p>v) The Proponent shall either be:</p> <ul style="list-style-type: none"> • a multispecialty hospital with a functional cardiology department, or • a dedicated cardiology hospital with demonstrable experience in interventional cardiac care.
5. Financial Eligibility	<p>The Proponent must demonstrate sound financial standing and capacity to undertake and sustain the operation and management of the Cath Lab over the contract period.</p> <p>i) The Proponent must have had a minimum average annual turnover of MVR 48 Million (or equivalent in local currency) over the past three (3) consecutive financial years, specifically from hospital operations or related healthcare services.</p> <p>ii) The Proponent must have a positive net worth in each of the past three (3) audited financial years.</p> <p>iii) The Proponent shall submit the following documents as proof of financial capacity:</p>

	<ul style="list-style-type: none"> • Audited financial statements for the past five (5) financial years, duly certified by an independent Chartered Accountant or a registered audit firm. <p>iv) In the case of a Consortium, the Lead Member must individually meet at least 50% of the turnover requirement, and the combined financial capacity of all members shall be considered.</p> <p>v) The Proponent shall demonstrate that it has access to, or has available, liquid assets, unencumbered real assets, lines of credit, and other financial means (independent of any contractual advance payment) sufficient to meet the cash flow requirement of at least MVR 8 million for the subject contract(s) net of the Proponent's other commitments.</p>
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7. General instructions and EOI submission details

The following documents must be submitted and EOIs that fail to provide the required documentation shall be disqualified.

- i) **Form I**- Expression of Interest Submission Form
- ii) **Form II**- Proponent Information Form
- iii) **Form III** – Historical Contract Non-Performance and Pending Litigation & Litigation History
- iv) **Form IV** - Technical Eligibility and Experience Form– along with reference documentation demonstrating that the company meets the Technical experience eligibility criteria.
- v) **Form V** - Financial Eligibility Form- Audited financial statements for the applicant's three most recent financial years.
- vi) **Company Profile**- in the case of a consortium, company profile of all the members of the consortium.

Clarifications:

- Any requests for **clarification** must be submitted to the email address below **no later than 30th June 2025 at 13:00 hrs**. Responses to all questions and clarifications will be posted on the Ministry of Finance and Planning website.

Submission Instructions:

- The Ministry of Finance and Planning invites interested proponents to submit their EOI via email to the email address below. Sealed envelope submissions shall also be accepted. All sealed envelopes must be clearly marked as **“Expression of Interest for Manage and Operate a Cath Lab at Addu Equatorial Hospital (AEH) for a period of 5 years”** and delivered to the following address:

Ms. Fathimath Rishfa Ahmed,
Chief Procurement Executive,
National Tender Department,
Ministry of Finance and Planning,
Ameenah Magu, Male', Maldives
Tel: +(960) 334 9102, +(960)3349106
Email: ibrahim.aflah@finance.gov.mv
tender@finance.gov.mv

- EOI **submissions** must be received **no later than Wednesday, 09th July 2025, 1400 hours**. (Maldives local time).

Disclaimer:

By submitting an EOI, the prospective respondent acknowledges and agrees to the following:

- The issuance of the EOI does not constitute a commitment by the Ministry of Finance and Planning to enter into any binding contractual agreements.
- The Ministry of Finance and Planning reserves the right to accept or reject any or all EOIs, without obligation to inform the affected applicants or provide reasons for such decisions.
- The applicant shall bear all costs incurred in responding to this EOI, and the Ministry of Finance and Planning shall not be liable for any costs, damages, or expenses incurred in the event of cancellation of the EOI process.

8.Forms

Form I: Expression of Interest Submission Form

(To be submitted on the Proponent's official letterhead)

Date:

Expression of Interest Invitation No:

Project Number:

To:

Ms. Fathimath Rishfa Ahmed,
Chief Procurement Executive,
National Tender Department,
Ministry of Finance and Planning,
Ameenee Magu, Male', Maldives

Subject: Expression of Interest to Manage and Operate a Cath Lab at Addu Equatorial Hospital (AEH) for a period of 5 years

We, the undersigned, hereby submit our Expression of Interest (EOI) for the project titled "**Manage and Operate a Cath Lab at Addu Equatorial Hospital (AEH) for a period of 5 years**" in accordance with the requirements outlined in the Terms of Reference.

We provide the following information in support of our submission:

1. Proponent Information

Full Legal Name of the Proponent	
Type of Entity	
Registered Address	

2. In Case of a Consortium (if applicable)

Consortium Member	Country of Registration	Legal Status	% Ownership	Role
Lead Member				
Member 2				

3. Declaration

We confirm the following:

- We are a **legally registered company** or, where applicable, a consortium comprising no more than two legally registered companies submitting this proposal jointly.

- **(if applicable)** We, as a consortium, have appointed a Lead Member holding at least 55% equity, who is authorized to represent all members in legal, contractual, and administrative matters related to this project.
- We are incorporated under the relevant Companies Act in our respective countries, and at least one consortium member is duly registered in the Maldives.
- We have not submitted more than one proposal in this procurement process, whether independently or as part of a consortium.
- We are not participating in this EOI both as a sole proponent and as a member of another consortium.
- We have not been declared insolvent, under liquidation, or bankrupt at any time during the past five (5) years.
- We have not been convicted in any jurisdiction of fraud, corruption, collusion, money laundering, or any criminal offense involving dishonesty, violence, or professional misconduct.
- **(if applicable)** We accept that all consortium members shall be jointly and severally responsible for fulfilling the obligations under any resulting contract.
- We meet the **eligibility requirements** stated in the Terms of Reference Section 6 (1).
- We have not been **barred, blacklisted, or had contracts terminated** due to default by any public entity in the Maldives or abroad as stated in Terms of Reference Section 6 (1).
- We have no **conflict of interest** that could affect our participation in this process as stated in Terms of Reference Section 6 (2).

All information submitted in this EOI is true, complete, and correct to the best of our knowledge. We agree to provide any supporting documents or clarifications requested by Ministry of Finance and Planning.

We understand that the submission of this EOI does not constitute a commitment by Ministry of Finance and Planning to proceed with further procurement stages.

Name of the Proponent: *[insert complete name of the Proponent]

Name of the person duly authorized to sign the EoI on behalf of the Proponent: ** [insert complete name of person duly authorized to sign the Bid]

Title of the person signing the EoI: [insert complete title of the person signing the Bid]

Signature of the person named above: [insert signature of person whose name and capacity are shown above]

Date signed [insert date of signing] **day of** [insert month], [insert year]

Form II – Proponent Information Form

Proponent's name	
In case of Joint Venture (JV), name of each member:	
Proponent's actual or intended country of registration: <i>[indicate country of Constitution]</i>	
Proponent's actual or intended year of incorporation:	
Proponent's legal address [in country of registration]:	
Proponent's authorized representative information: Name: Address: Telephone/Fax numbers: E-mail address:	
<input type="checkbox"/> In case of JV, letter of intent to form JV or JV agreement must be submitted	
Proponent's JV name:	
JV member's name:	
JV member's country of registration:	
JV member's year of constitution:	
JV member's legal address in country of constitution:	
JV member's authorized representative information Name: Address: Telephone/Fax numbers: E-mail address:	

Form III – Historical Contract Non-Performance and Pending Litigation & Litigation History

Proponent's Name: _____

JV Member's Name _____

Non-Performed Contracts in accordance with Section 6 (2)			
<input type="checkbox"/> Contract non-performance did not occur since 1 st January <i>[insert year]</i> <input type="checkbox"/> Contract(s) not performed since 1 st January <i>[insert year]</i>			
Year	Non-performed portion of contract	Contract Identification	Total Contract Amount (current value, currency, exchange rate and US\$ equivalent)
<i>[insert year]</i>	<i>[insert amount and percentage]</i>	Contract Identification: <i>[indicate complete contract name/ number, and any other identification]</i> Name of Employer: <i>[insert full name]</i> Address of Employer: <i>[insert street/city/country]</i> Reason(s) for nonperformance: <i>[indicate main reason(s)]</i>	<i>[insert amount]</i>
Pending Litigation, in accordance with Section 6 (2)			
<input type="checkbox"/> No pending litigation <input type="checkbox"/> Pending litigation.			
Year of dispute	Amount in dispute (currency)	Contract Identification	Total Contract Amount (currency), MVR
		Contract Identification: _____ Name of Employer: _____ Address of Employer: _____ Matter in dispute: _____ Party who initiated the dispute: _____ Status of dispute: _____	

		Contract Identification: Name of Employer: Address of Employer: Matter in dispute: Party who initiated the dispute: Status of dispute:	
Litigation History in accordance with Section 6 (2)			
<input type="checkbox"/> No Litigation History <input type="checkbox"/> Litigation History			
Year of award	Outcome as percentage of Net Worth	Contract Identification	Total Contract Amount (currency), MVR
<i>[insert year]</i>	<i>[insert percentage]</i>	Contract Identification: [indicate complete contract name, number, and any other identification] Name of Employer: <i>[insert full name]</i> Address of Employer: <i>[insert street/city/country]</i> Matter in dispute: <i>[indicate main issues in dispute]</i> Party who initiated the dispute: <i>[indicate "Employer"]</i> Reason(s) for Litigation and award decision <i>[indicate main reason(s)]</i>	<i>[insert amount]</i>
<i>[insert year]</i>	<i>[insert percentage]</i>	Contract Identification: [indicate complete contract name, number, and any other identification] Name of Employer: <i>[insert full name]</i> Address of Employer: <i>[insert street/city/country]</i> Matter in dispute: <i>[indicate main issues in dispute]</i> Party who initiated the dispute: <i>[indicate "Employer"]</i> Reason(s) for Litigation and award decision <i>[indicate main reason(s)]</i>	<i>[insert amount]</i>

I/we hereby declare that, except as disclosed above, there is no action, suit, proceeding, investigation, adjudication, arbitration, or litigation pending or, to the best of our knowledge, threatened against the Proponent (including all members of the consortium, if applicable), which either individually or in aggregate, could, if resolved adversely, materially affect the execution or performance of the proposed project, or impair our ability to fulfill the obligations set out under the resulting Agreement/Contract.

I/we further declare that the information provided herein is true, complete, and correct, and that this declaration is made in good faith and without concealment of any material facts.

I/we understand that any misrepresentation or concealment of relevant information may lead to disqualification from the procurement process or termination of the contract, if awarded.

I/we make this declaration under penalty of perjury, fully aware of the legal consequences of making a false statement.

Name:	
Designation:	
Company Name:	
Signature:	
Date:	
Company Seal (if applicable)	

Form IV - Technical Eligibility & Experience Form

(Operation of Multispecialty / Super Specialty Hospital with Interventional Cardiology or Cardio-Thoracic Surgery Facilities)

Name of Proponent (Sole Member / Consortium Member):	
Hospital Details	
Name of Hospital Operated:	
	Type of Hospital (select one): <input type="checkbox"/> Multispecialty <input type="checkbox"/> Super Specialty
	Specialties Available (check all that apply): <input type="checkbox"/> Interventional Cardiology <input type="checkbox"/> Cardio-Thoracic Surgery
Hospital Address:	
Period of Continuous Operation:	From: ____ / ____ / ____ To: ____ / ____ / ____ (Must cover at least the last 3 financial years)
Accreditation Details	
Is the hospital accredited to an international standard?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Accrediting Body (e.g., NABH, JCI, equivalent):	
Accreditation Certificate Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cath Lab Operations	
Number of Cath Labs Operated by Proponent:	
Location of Primary Cath Lab:	
Is the Cath Lab staffed with fully trained service personnel?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of Cardiac Catheterization Procedures	

Performed in the Last Financial Year: <i>(Must be at least 1,000)</i>	
List of procedures with detailed interventions:	

5. Supporting Documents Attached (*check all that apply*):

- ☐ Hospital Registration Certificate
- ☐ Statutory License(s) (e.g., Clinical Establishment Act registration)
- ☐ Accreditation Certificate (e.g., NABH, JCI)
- ☐ Summary List of Cardiac Catheterization Procedures (Certified)
- ☐ Other documentary proof of operation and specialties
(Specify): _____

Form V – Financial Eligibility Form

FIN- 1 Financial Situation and Performance

Proponent's Name: _____
JV Member's Name _____

1. Financial data

Type of Financial information in (currency)	Historic information for previous _____ years, _____ (amount in currency, currency, exchange rate*, MVR equivalent)				
	Year 1	Year 2	Year 3	Year4	Year 5
Statement of Financial Position (Information from Balance Sheet)					
Total Assets (TA)					
Total Liabilities (TL)					
Total Equity/Net Worth (NW)					
Current Assets (CA)					
Current Liabilities (CL)					
Working Capital (WC)					
Information from Income Statement					
Total Revenue (TR)					
Profits Before Taxes (PBT)					
Cash Flow Information					
Cash Flow from Operating Activities					

2. Financial documents

The Proponent and its parties shall provide copies of financial statements for 5 (*five*) years pursuant Section 6 (5) (iii). The financial statements shall:

- (a) reflect the financial situation of the Proponent or in case of JV member, and not an affiliated entity (such as parent company or group member).
- (b) be independently audited or certified in accordance with local legislation.
- (c) be complete, including all notes to the financial statements.
- (d) correspond to accounting periods already completed and audited.

☐ Attached are copies of financial statements¹ for the _____ years required above; and complying with the requirements

¹ If the most recent set of financial statements is for a period earlier than 12 months from the date of EoI submission, the reason for this should be justified.

Form FIN – 2

Average Annual Turnover

Proponent's Name: _____
JV Member's Name _____

	Annual turnover data		
Year	Amount Currency	Exchange rate	USD equivalent
<i>[indicate year]</i>	<i>[insert amount and indicate currency]</i>		
Average Annual Turnover *			

* See Section 6 (5)

Form FIN – 3

Financial Resources

Specify proposed sources of financing, such as liquid assets, unencumbered real assets, lines of credit, and other financial means, net of current commitments, available to meet the total cash flow demands of the subject contract as specified in Section 6 (5)

Financial Resources		
No.	Source of financing	Amount (MVR equivalent)
1		
2		
3		

9. Annexure

Annex 1: Cath Lab Equipment Inventory

Cath-lab Equipment Inventory								
Sl No.	Equipment Name	Location/Room	Brand	Model	Serial Number	Part Number	Installed Date	Status
1	Total System	Equipment Room	Shimadzu	BRANSIST alexa	41E581D72001	503-79400-61	10/17/2023	Working
3	Digital Cabinet	Equipment Room	Shimadzu	DAR-9500F	LMC354872002	562-28000-72	10/17/2023	Working
4	C-ARM	Exam Room	Shimadzu	MH-200S	41EA60E72001	503-79600-14	10/17/2023	Working
6	X-Ray Generator Cabinet	Equipment Room	Shimadzu	D150GC-40	LM99D4172002	562-26300-81	10/17/2023	Working
7	Catheterization Table	Exam Room	Shimadzu	KS-70	4061A8272002	503-64000-02	10/17/2023	Working
8	Software	Control Room	Shimadzu	Score Stent view ALX	LMD13D172002	562-28570-41	10/17/2023	Working
9	C-ARM Controller	Exam Room	Shimadzu	CYBERCONSOLE	M146CDB72003	563-72900-11	10/17/2023	Working
10	Detector Communication Box	Equipment Room	Shimadzu	CP2	080205-019	N/A	10/17/2023	Working
11	Monitor Support	Exam Room	Shimadzu	MTA-40C-4	M03F7F472002	563-62600-84	10/17/2023	Working
12	Table Console	Exam Room	Shimadzu	TABLE CONSOLE	M149F986C004	563-73030	10/17/2023	Working
13	Foot Switch	Control Room	N/A	IP Class X1	N/A	N/A	10/17/2023	Working
14	Foot Switch	Exam Room	Shimadzu	Foot Switch Assembly(SN)	M1DF4A86C006	563-79146	10/17/2023	Working
15	Main Supply Transformer	Equipment Room	Shimadzu	C-ARM Control Cabinet	1782259703	566-14529-02	10/17/2023	Working
16	C-ARM Cabinet	Equipment Room	Shimadzu	Control Cabinet	1788005502	566-14526-01	10/17/2023	Working
17	C-ARM Moving Rail	Exam Room	Shimadzu	SUB RAIL	MP7F13471001	566-15205	10/17/2023	Working
18	ACQ Monitor	Control Room	EIZO	RadiForce RX 150-S SC	HXJ2002137	6GF6210-2ES01	10/17/2023	Working
19	Reference Monitor	Control Room	EIZO	RadiForce RX 150-S SC	HXJ2002139	6GF6210-2ES01	10/17/2023	Working
20	Hemodynamic Monitor	Control Room	ASUS	CATH - MED	MCLMTF017651	190647-24	10/17/2023	Working
21	System Display Assay	Exam Room	Shimadzu	System Display Assay	47519106	0FTD1920	10/17/2023	Working
22	System Display Assay	Control Room	Shimadzu	System Display Assay	1814760401	562-27788	10/17/2023	Working
23	System Display Monitor	Control Room	EIZO	CL15532-BRX1J	L625D00022	CV532PJ/B	10/17/2023	Working
24	Dynamic Type Flexible Microphone	Exam Room	Prima	FD13A	N/A	N/A	10/17/2023	Working
25	Dynamic Type Flexible Microphone	Control Room	Prima	FD13A	N/A	N/A	10/17/2023	Working
26	Dynamic Type Flexible Microphone	Control Room	Prima	FD13A	N/A	N/A	10/17/2023	Working
27	Exam Room Speaker	Exam Room	BOSE	N/A	040783Z62830336AE	N/A	10/17/2023	Working
28	Control Room Speaker	Control Room	MASSIVE	DF-310 II	N/A	N/A	10/17/2023	Working
29	CVS Audio System	Control Room	Shimadzu	CVS AUDIO 1ST	1783758002	562-26701	10/17/2023	Working
30	Workstation - CELSIUS M740	Control Room	FUJITSU	CELMO30O3Z	MA6YOOO5	CP724156-01	10/17/2023	Working
31	Cable Spooler	Exam Room	MAVIG GmbH	TS10B03	0317/86096/01	N/A	10/17/2023	Working
32	Mavig Rail	Exam Room	MAVIG GmbH	TS1U06	0417/36985	N/A	10/17/2023	Working
33	Glass Lead Shield	Exam Room	MAVIG GmbH	OT25B05	0123/42117/01	N/A	10/17/2023	Working
34	OT Led Light, 24V DC	Exam Room	Mavig	Mach LED	17/05978	N/A	10/17/2023	Working

35	LCD Monitor	Exam Room	EIZO	RadiForce RX 150-S SC	HXJ2002140	6GF6210-2ES01	10/17/2023	Working
36	LCD Monitor	Exam Room	EIZO	RadiForce RX 150-S SC	HXJ2002148	6GF6210-2ES01	10/17/2023	Working
37	Hemodynamic Monitor	Exam Room	ASUS	VS247HR	GALMTF095419	N/A	10/17/2023	Working
38	FPD COOLER	Equipment Room	Shimadzu	HEC002-A5BX101	UY-0313	N/A	10/17/2023	Working
39	X-Ray Tube Heat Exchanger	Equipment Room	Shimadzu	WHE-01B	16M002	N/A	10/17/2023	Working
40	System Table	Control Room	Shimadzu	ED-SKN/WKN	170126	N/A	10/17/2023	Working
41	Joystick Controller	Exam Room	Shimadzu	1806139401	563-63818-11	N/A	10/17/2023	Working
42	Local Console	Exam Room	Shimadzu	1756051705	566-13600-11	N/A	10/17/2023	Working
43	Injector Pedestal	Exam Room	Medrad	Mark 7 Arterion	B-171743	60720574	10/17/2023	Working
44	Injection System Injector	Exam Room	Medrad	Mark 7 Arterion	202850	60726793	10/17/2023	Working
45	UPS	UPS Room	EATON	ETON 93PR	DS043WAA01	N/A	10/17/2023	Working
48	XTA Cabinet	Equipment Room	Shimadzu	N/A	1816997501	562-28301	10/17/2023	Working
49	Hemodynamic System PC	Control Room	PICASSO	CATH - MED	2023342122	B40-500-006	10/17/2023	Working
50	Patient Monitor System	Exam Room	SCHILLER	Argus PB3000	N/A	N/A	10/17/2023	Working
52	Table Mattress	Exam Room	Shimadzu	KS-70	5012027	566-15450	10/17/2023	Working
54	ARM REST METRESS	Exam Room	Shimadzu				10/17/2023	Working
55	IV Stand	Exam Room	Shimadzu	KS-70	5012027	1769727102	10/17/2023	Working
56	Control Box	Control Room	Shimadzu	N/A	1814760801	N/A	10/17/2023	Working
57	Hemodynamic System Printer	Control Room	HP	3PZ15A	PHCFG17296	N/A	10/17/2023	Working
58	Hemodynamic System UPS	Control Room	iDialog	IDG1600	ME44VN10052176	AIDG1K61RU	10/17/2023	Working
59	USB Keyboard	Control Room	K120	YU0042	2224MR13E128	820-009904	10/17/2023	Working
60	USB Keyboard	Control Room	Kensington	M01067	A1431A000282	K64406US	10/17/2023	Working
61	USB Mouse	Control Room	Microsoft	1113	N/A	X821908-001	10/17/2023	Working
62	USB Mouse	Control Room	Logitech	M-U0026	2141HS05W9V8	810-003656	10/17/2023	Working
63	Double Sided Apron, Size: XL	Control Room	KIRAN	OPTIMA	X1203743	N/A	10/17/2023	
64	Double Sided Apron, Size: XL	Control Room	KIRAN	OPTIMA	X1203743	N/A	10/17/2023	
65	Double Sided Apron, Size: XL	Control Room	KIRAN	OPTIMA	X1203743	N/A	10/17/2023	
66	Double Sided Apron, Size: XL	Control Room	KIRAN	OPTIMA	X1203743	N/A	10/17/2023	
67	Double Sided Apron, Size: XL	Control Room	KIRAN	OPTIMA	X1203743	N/A	10/17/2023	
68	Double Sided Apron, Size: L	Control Room	KIRAN	OPTIMA	X1203732	N/A	10/17/2023	
69	Double Sided Apron, Size: L	Control Room	KIRAN	OPTIMA	X1203732	N/A	10/17/2023	
70	Double Sided Apron, Size: L	Control Room	KIRAN	OPTIMA	X1203732	N/A	10/17/2023	
71	Double Sided Apron, Size: L	Control Room	KIRAN	OPTIMA	X1203732	N/A	10/17/2023	
72	Double Sided Apron, Size: L	Control Room	KIRAN	OPTIMA	X1203732	N/A	10/17/2023	
73	Double Sided Apron, Size: M	Control Room	KIRAN	OPTIMA	X1203722	N/A	10/17/2023	
74	Double Sided Apron, Size: M	Control Room	KIRAN	OPTIMA	X1203722	N/A	10/17/2023	
75	Double Sided Apron, Size: M	Control Room	KIRAN	OPTIMA	X1203722	N/A	10/17/2023	
76	Double Sided Apron, Size: M	Control Room	KIRAN	OPTIMA	X1203722	N/A	10/17/2023	
77	Double Sided Apron, Size: M	Control Room	KIRAN	OPTIMA	X1203722	N/A	10/17/2023	

78	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
79	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
80	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
81	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
82	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
83	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
84	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
85	Thyroid Shield	Control Room	KIRAN	TS50LL	X1513300	N/A	10/17/2023	
86	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
87	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
88	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
89	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
90	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
91	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
92	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
93	Radiation Protective Eyewear	Control Room	KIRAN	EWFTO	X1860001	N/A	10/17/2023	
94	Cabinet for Storage Accessories	Control Room	N/A	N/A	N/A	N/A	10/17/2023	
95	Cabinet for Storage Accessories	Control Room	N/A	N/A	N/A	N/A	10/17/2023	
96	Cabinet for Storage Accessories	Control Room	N/A	N/A	N/A	N/A	10/17/2023	

Annex 2: List of Procedures to be Proposed by Proponent

#	Description
1	Diagnostic coronary angiography.
2	PCI and stenting for simple and complex lesions
3	ASD device closure.
4	VSD device closure.
5	PDA device closure.
6	Pericardiocentesis.
7	Temporary pacemaker.