

PC-1

Revamping of THQ Hospital, Lalian District Chiniot

ORIGINAL APPROVED COST	PKR Million. 289.764/-
ORIGINAL APPROVED GESTATION	72 Months Till June 2025
APPROVAL FORUM	DDSC (DDSC)

1. NAME OF THE PROJECT

Revamping of THQ Hospital, Lalian District Chiniot

2. LOCATION OF THE PROJECT

2.1. DISTRICT(S)

I. CHINIOT

3. AUTHORITIES RESPONSIBLE FOR

3.1. SPONSORING AGENCY

• PRIMARY AND SECONDARY HEALTH CARE

3.2. EXECUTION AGENCY

• PRIMARY AND SECONDARY HEALTH CARE

3.3. OPERATIONS AND MAINTENANCE AGENCY

• PRIMARY AND SECONDARY HEALTH CARE

3.4. CONCERNED FEDRAL MINISTRY

• NATIONAL HEALTH SERVICES, REGULATIONS AND COORDINATION

3	AUTHORITIES RESPONSIBLE	
	3.1 Sponsoring	Government of the Punjab, Primary and Secondary Healthcare Department
	3.2 Execution	PMU for Revamping Program of Primary and Secondary Healthcare Department, District Health Councils and C&W Department.
	3.3 Operation & Maintenance	PMU for Revamping Program of Primary and Secondary Healthcare Department and District Health Authority
	3.4 Concerned Federal Ministry	Ministry of National Health Services, Regulation and Coordination Pakistan

4. PLAN PROVISION

Sr #	Description	
1	Source of Funding: Scheme Listed in ADP CFY	
2	Proposed Allocation:0.000	
3	GS No: 5223	
4	Total Allocation: 0.000	
5	Funds Diverted:0.000	
6	Balance Funds:0.000	
7	Comments: Funded out of block provision reflected at G.S No.658 with an allocation of Rs. 1,800 million (Capital = Rs. 1.300 Million & Revenue = Rs. 500 Million).	

5. PROJECT OBJECTIVES

attached

5. Project objectives and its relationship with Sectorial Objectives and Components

The Government of Punjab is making strenuous efforts for a better and effective Health Care system. The Defining step in this direction was to recognize the importance of Health Care at Primary & Secondary Levels. As a first step towards better health care at primary and secondary level, the department under the guidance of Government of the Punjab has decided to launch massive revamping of 40 THQ & DHQ Hospitals in the financial year 2016-17 along with revamping of emergencies of 15 selected THQs and emergencies of all Hospitals. In addition to that, Government has assigned the task of revamping of all remaining 85 THQ Hospitals of Punjab during 2017-18. The Project Management Unit, Revamping Program, Primary and Secondary Healthcare Department has started the 2nd Phase of the said revamping program in September, 2017.

5.1 Background of Primary & Secondary Healthcare Department

Effective primary and secondary healthcare is particularly important in resource-poor countries. Effective delivery of vaccinations, maternal and child care (MCH) and treatment of common pathologies (such as malaria, gastroenteritis, respiratory tract infections and other vector borne diseases) is essential for the achievement of Sustainable Development Goals (SDGs). Effective diagnostic triage, an organized system of prescription and queue management, an effective and stringent sterilization regime, quality nursing and consultant care, implementation of minimum service delivery standards (MSDS) and delivery of care for chronic pathologies lie at the center for the provision of universal health care at a cost that the community can afford as envisaged in domains established by the 1978 Alma-Ata Declaration of WHO. Primary care serves as the cornerstone for building a strong healthcare system that ensures positive health outcomes and health equity. The deficiencies in quality of care represent neither the failure of professional compassion nor necessarily a lack of resources rather, they result from gaps in knowledge, inappropriate applications of available technology and unstructured planning. Local health care systems in our setup have practically not been able to implement department's objectives. Result is continuous lack of quality improvement to lower health outcomes.

Quality health care is actually provision of health care by timely, skillful application of medical technology in a culturally sensitive manner within the available resource constraints. Eliminating poor quality involves not only giving better care but also eliminating under provision of essential clinical services (system wide microscopy for diagnosing tuberculosis, for example); stopping overuse of some care (prenatal ultrasonography or unnecessary injections, for example); and ending misuse of unneeded services (such as unnecessary hysterectomies or antibiotics for viral infections). A sadly unique feature of quality is that poor quality can obviate all the implied benefits of good access and effective treatment. At its best, poor quality is wasteful and at its worst, it causes actual harm.

Keeping in view this basic essence of primary and secondary health care, The Government of Punjab is dedicated in making strenuous efforts for ensuring a better and effective Health Care system .The Defining step in this direction was to recognize the importance of Health Care at Primary & Secondary Levels. As a first step towards better health care at primary and secondary level, a separate department was created by bifurcating the Health department into two departments Specialized Health Care & Medical Education Department and Primary & Secondary Health Care (P&SH) Department. The principle reason for bifurcation has been to improve governance and service delivery in the spheres of health care across the province. Primary and Secondary Health Care Department has been entrusted the responsibility of primary and secondary level health facilities including preventive health services and Vertical Programs. P&SH Department accordingly has its functional responsibility in respect of 26 District Headquarter Hospitals (DHQs), 129 Tehsil Headquarter Hospitals (THQs), 322 Rural Health Centers (RHCs) and 2,504 Basic Health Units (BHUs). Moreover, specialized programs like Expanded Program for Immunization (EPI), TB Control (DOTS), Hepatitis Control Programs as well as special campaigns such as Dengue Campaign, Polio Eradication Campaigns also fall in purview of the department. The establishments like Director General Health Services (DGHS), Drug Testing Labs (DTLs) and Biomedical Engineering Workshops also assist the department in discharge of its functions efficiently. Establishment of Internal delivery Unit at Primary and Secondary Health Care Department has been aimed for institutional strengthening and capacity building of Primary and Secondary Health Care Department. Monitoring and follow up remains one of key ingredients for good governance and is at heart of all management models. Therefore, an Internal Delivery Unit, comprising well qualified and experienced persons, is being established within P&SH Department. Internal Delivery Unit shall be manned with qualified and experienced consultants. Internal Delivery Unit shall be responsible for every such task needed to strengthen the PSHD which may range from operational matters to monitoring e.g. tracking pace of all initiatives of the Department through the process such as tracking procurement of medicines by districts, procurement of vaccine by Director EPI, pace of various development schemes and performance of Drug Testing & Bio-mechanical Labs etc.

The basic mandate of Primary & Secondary Health Department is to focus on preventive health care in primary sector along with basic diagnostics and treatment facilities at secondary level. The context is to primarily lessen the load on tertiary care health establishments and to reduce treatment costs. The major challenge for Primary & Secondary Health Department is to boost the confidence of masses and raise the level of trust in the primary health care system. The reality is that most of the health care establishments at secondary level are not currently providing health care services up to the optimal level, owing to a myriad of reasons including heavy patient load, scarcity of resources, human resource constraints and dysfunctional biomedical and allied equipment.

Due to lack of structured planning and monitoring, previous efforts did not materialize into an integrated health care regime, rather these have resulted in haphazard construction, poor repair and maintenance, lack of basic amenities, absence of waiting areas, substandard diagnostics and therapeutics, shabby outlook and suboptimal level of patient care over all. Such state of affairs has severely jolted level of trust in health care system by common man and hence the patients prefer to visit tertiary level hospitals or even private health facilities for treatment of even very common pathologies. This subsequently has a cascade effect on socioeconomics of common man who has to spend more in shape of travelling from villages to district headquarters and then bearing costs of private treatment, secondly, this has also increased disease load on our tertiary health care establishments.

Keeping in view this importance of primary and secondary health care, the department decided to launch massive revamping program for all DHQs and THQs all over the Punjab.

5.2 Project Management Unit (PMU), Primary & Secondary Healthcare Department

In order to successfully complete the program objectives in the given timeframe, it is imperative to establish a dedicated Program Management Unit (PMU) having technical and administrative expertise and autonomy, as the regular machinery of the department is too busy with the routine work and cannot successfully steer the program. The PMU is responsible for the successful implementation of the Revamping Program through completion of all related projects. After the implementation of all these projects, the Primary & Secondary Healthcare network will be improved. The PMU shall ensure that the DHQ & THQ hospitals have a well-constructed physical infrastructure with vibrant management model for efficient service delivery and improved processes to focus on patient distress in prompt manner. It adheres to Minimum Service Delivery Standards (MSDS) to address the patients' needs in the most efficient and systematic manner.

In this regard, a dedicated team of Project Management Unit (PMU) has been established to execute the project. PMU's office is located at 31-E/1, Shahrahe-Imam Hussain, Gulberg-III, near Qaddaffi stadium, Lahore. It is headed by a Project Director with a committed team comprising of Deputy Project Director, Finance and Administration, ICT), Project Managers, Project Officers, Engineers, supporting administrative and technical staff, experienced and qualified Health consultants., Directors (Operations, Human Resource & Planning and infrastructure, Outsourcing) as well as Procurement Specialist.

5.3 Infrastructural Interventions

The construction of various new blocks of hospital complex is constructed without any proper planning and necessary connection to existing blocks. On the whole, the complete infrastructure of hospital is quite complex and scattered, access to various blocks of hospital is quite inadequate and there is no proper connection or link between different blocks of hospital. In the revamping program of DHQ and THQ Hospitals, the placement of various facilities of hospitals are replanned keeping in view the layout of existing blocks for facilitation of patients and some modifications/alterations were proposed in the blocks for necessary link or connection between the blocks.

Major infrastructural interventions can be divided in the following four categories

5.3.1 External Development

- 5.3.2 Internal Development
- 5.3.3 Medical Infrastructure Development
- **5.3.4 Emergencies Development**

5.3.1 External Development

5.3.1.1 External Platforms

In order to improve the communication between blocks, necessary interventions are taken to improve the existing internal metaled road network. Moreover, new internal metaled road network is also designed and proposed to access the blocks of hospital accordingly. Despite the improvement in metaled road network, external platforms except metaled road is also designed and proposed for patients to access the blocks by simply walking among the blocks.

5.3.1.2 Façade Improvement

In order to improve the aesthetics of hospital, façade uplift with aluminum composite panels with aluminum cladding, false steel structures, façade aluminum windows and aluminum doors are designed in order to give the feel of modern architectural era.

5.3.1.3 Sewerage System

The most important entity of a hospital lies in its cleanliness. Infrastructural interventions to keep the hospital clean were taken in the form of <u>improvement of</u> <u>sewerage system</u> of the hospital. These interventions include the re designing of sewerage system, construction of new manholes, laying of new sewer lines and connection between trunk sewer and hospital sewer.

5.3.1.4 Landscaping (Horticulture)

Landscaping in hospital adds aesthetic & beauty to the built environment as well as improves in reducing the pollution. Soft & hard landscape reduces dust particles moment in air, hence contributes in a clean environment. The hours spent in a hospital can be stressful for patients, staff and visitors. According to research easy access to a natural environment can contribute to stress management and potentially improve health outcomes: physiological studies indicate that 3-5 minutes spent in such Hospital Outdoor Landscape Design environments reduces anger, anxiety and pain and induces relaxation. Research also shows that "positive distractions" can reduce stress and their visual forms include gardens, scenic views and artwork, which play a critical role in modern hospital design: gardens, fountains, and water features provide patients, staff and visitors with restorative experiences of nature. In this regard complete lawns development, placement of benches, dust bins, playing equipment, fruit trees, flower plants, fruit trees and gazebos are proposed in all hospitals under revamping program

5.3.1.5 Water Filtration Plant

In the modern era, the access to clean water for everyone is becoming rare day by day. Especially in hospitals, the supply of water free from any harmful impurity is one of the most basic needs. To cope up with this problem water filtration system according to the existing nature of water is designed and <u>water filtration</u> <u>plant</u> is proposed accordingly. For ease of patients, <u>drinking water supply network</u> was designed to provide filtered water in wards and in various drinking stations within the hospital building

5.3.1.6 External Electrification

One of the major hindrances in functionality and ineffectiveness of electro medical equipment and other facilitating electrical appliances is either interrupted power supply or power supply with lesser voltage than required. This problem was solved by providing <u>express line or dual electrical supply</u> in all hospitals under revamping. Despite these two facilities based, on the current and proposed electrical load of hospital <u>new transformers were proposed</u> to step down the voltage to desired level and complete generator backup system was designed and <u>generators along with automatic transfer switches</u> were proposed accordingly. Moreover, to fully lighten up the hospital for proper utilization of all facilities of hospital during the low/no-light hours of the day, external <u>pole lights</u> to lighten up the pathways and <u>garden lights</u> to lighten up the lawns were designed and proposed.

5.3.1.7 Parking and Waiting area

Non-clinical facilitation of patients and attendants were specially considered in the revamping program. One such facilitation step is designing the parking and waiting areas on basis of daily influx of vehicles and patients/attendants during the peak hours. <u>Parking and waiting areas</u> on several places of hospital were then proposed according to the design.

5.3.1.8 External Signage

<u>Eexternal signage system</u> is designed including various signage types for complete guidance of patient attendants and to search concerned facility promptly.

5.3.2 Internal development

5.3.2.1 Aesthetic improvement

In order to improve the aesthetics of hospital wards, corridors, rooms and toilet blocks, flooring and dado design of suitable material in these areas is proposed. Despite of aesthetics, the material of flooring and dado design were chosen to provide ease in cleaning process. For further improvement in aesthetics, paint on exterior and interior part of the hospital, poly-vinyl chloride paneling to conceal the dampness damaged areas and steel cladding of columns are proposed.

5.3.2.2 Ramp and Stretcher improvement

For hospitals having more than one floor, there is a huge problem of patient transfer with stretcher. This problem is solved by proposing new ramps/stretcher ways where needed. Moreover, in order to further improve the communication between various floors of hospitals improvement of stair cases with hand rail or guard rails is proposed.

5.3.2.3 Seamless flooring and Lead Lining

To keep high risk areas like Operation theaters, I.C.U, C.C.U, and Gynecology Operation Theater bacteria free is one of the basic medical practices. In the revamping program of hospitals low epoxy paint is proposed in these areas to provide seamless flooring so that the bacterial growth within the groves can be prevented. Moreover, to make the X-Ray rooms radio-resistant and to keep the patients away from the harm of rays, interventions are taken in X-ray rooms regarding provision of lead lining in walls, ceiling and floor.

Interventions were taken regarding hazardous radiation emitting areas to make them radio-resistant in order to keep patients/attendants away from harmful radiations. These interventions were in the form of provision of lead lining in ceiling, walls and roofs of X-Ray rooms.

5.3.2.4 Aluminum doors and windows

In order to make sound and heat proof the doors and windows of wards, corridors and major health facilities are proposed as aluminum doors and windows. Which despite of above benefits are also aesthetically pleasing. Corridor wire mesh windows and rolling blinds for windows are proposed in order to invite or stop the day light within the wards according to the requirement. Moreover, existing wooden doors having shabby and dirty look are proposed to be re-polished and washroom doors are proposed to be replaced with PVC doors to make them resistant against water.

5.3.2.5 Improvement of washroom blocks

The area of hospital which can be dirty at most is its washroom or toilet blocks. To improve the cleanliness of hospital the special interventions were taken regarding the renovation of toilet block of hospital. This renovation includes the re tiling of existing damaged flooring and skirting and addition of water closets etc.

5.3.2.6 Facilitation of attendants and patients

The facilitation of attendants is also one of the most basic things to be provided in the hospital. The facilitation of attendants contributes towards the facilitation of patients. In order to facilitate the attendants, pantries are designed at that location of hospital where attendants can be effectively facilitated. These pantries include stoves and washing machines. Moreover, it is also very important to educate the patients and attendants regarding the seasonal and general diseases along with its cure and prevention. Installation of LED televisions in various locations of hospitals especially in wards and waiting areas is also proposed in the design in this regard.

5.3.2.7 Furniture and Fixtures

One more step towards the facilitation of attendants or patients is placement of benches in waiting areas. The most rush positions of hospital are chosen in this regard and placement of benches is designed according to the patient number and flow. In order to improve the efficiency of consultants or doctors, interventions regarding the renovations of doctor or consultant office are designed in this regard. The doctor room furniture is designed for this purpose keeping in view the existing area of room and necessary required equipment. To carry and dispose of the medical and general waste material of hospital, waste bin sets are designed to place at various positions of the hospital. These positions are marked by keeping in view the general circulation of the public and sensitivity of the area.

5.3.2.8 Air Conditioners, Refrigerators and LEDs

According to the different standards, there is a separate requirement of temperature to control the environment of particular place with respect to the nature of facility. In this regard, air conditioners are proposed according to the required tonnage of the specific area. For better efficiency and performance delivery, cabinet air conditioners are proposed in the wards and other facilities having larger areas. The maintenance and repair services of these air conditioners are outsourced so that uninterrupted performance can be delivered. For further facilitation of patients and attendants, placement of refrigerator is proposed on each nursing counter. These refrigerators are proposed for items requiring specific temperature for storage purposes. LEDs will also be placed at various points to facilitate the patients and attendants.

5.3.2.9 Internal Signage and Paintings

As described earlier, the information regarding the positions of major health facility especially emergency and labor room etc. is very much essential for any person entering inside the covered area of hospital. For these purposes, different types of signage are proposed including corridor hanging signage, floor map boards, room numbers and room names plaques. For general information duty rooster boards, janitorial station signage, waste bin set signage, emergency exit signage.

Different kinds of paintings are designed according to the nature of area where it is desired to be fixed. These paintings are beneficial in a sense that it improves the aesthetics of hospital and moreover, such painting patterns are designed so that it give the relaxation and soothing feelings to aid in the healing of patients. Moreover, in order to create a healthy, positive, entertaining and friendly environment for interest of children, paintings on children wards is proposed.

5.3.3 Medical Infrastructure Development

To cope with the emergency condition of clinically serious patient, oxygen supply system is designed by proposing an individual oxygen supply system for each major health facility. This oxygen supply network comprises on copper pipe line, flow meter with bed head units, cylinders and setup and individual central oxygen supply system. The contract of filling of oxygen gas in cylinders is outsourced for uninterrupted oxygen gas supply to the patients.

For patient receiving, information, guidance, appointment or for any other task, separate reception counters are proposed in various blocks so that, all necessary information regarding the block is available on the counter round the clock. In this way, utilization of clinical facilities will be optimized. For indoor patient department, complete facilitation and care of patients admitted in wards is ensured

by proposal of nursing counter in each ward. This nursing counter will be placed or constructed in such a placement that each bed can be monitored by the nurse available.

The design regarding architectural planning of above mentioned facilities are designed according to the patient facilities and architectural planning standards. These designed facilities are then designed in the existing building structure according to the patient flow and sensitivity of facility.

5.3.3.1 Emergency Department:

All THQS and DHQs are already providing emergency services to critical ill patients. As far as the existing sources including human resources & equipment are not sufficient to fulfill the requirement. Primary and secondary healthcare department is going to take the initiative to improve emergencies of hospitals by providing new equipment and human resource in form of recruitment of doctors, nurses and paramedical staff along with Infrastructure of Causality Department. Ultimate goal of revamping of emergencies is to enhance the quality of medical services to critical ill patient in golden hour to decrease the mortality and morbidity rate in causality department of each hospital.

5.3.3.1.1 General Overview of Emergency Department

In any hospital, the most important and critical area is its emergency block. Specially, if hospital is situated on a highway where there is a huge flux of rapidly moving traffic which can be a major source of causalities, if patient treatment is not proper. Besides road trauma cases, cardiac cases and burn cases etc. are also more likely to be initially treated in emergency. Proper first aid to patient reduces morbidity and mortality. The emergency department of hospital is a block where in time service delivery is so much essential that delay in proper treatment can cause lot of lives to suffer from serious diseases for rest of their life. In a nutshell, the efficiency and in time service delivery of emergency block depicts the overall efficiency of the hospital.

In order to improve the emergency department and to ensure in time service delivery of the same, special initiatives are being taken in this regard. Infrastructure of emergency department depends a lot on its service delivery and efficiency. An emergency department with all necessary medical and general equipment and equipped with all essential medical facilities but without ineffective and poorly planned infrastructure will never fulfill its need. Conclusively, such infrastructural interventions are planned in this program so that the efficiency of emergency department can be optimized. Some of the following major interventions are listed below:

5.3.3.1.2 Position of Emergency Department

It is planned that new construction of building should be avoided at most because already existing blocks with no proper utilization are existing in all of the hospitals. The emergency block should be on such a location that the distance between that department and main entrance gate should be minimum with respect to other locations or positions of complex. To fulfill this purpose, that portion of this building block is selected for re planning of emergency department which is most near to the entrance gate. The far positioning of emergency department will result the lost in time for patient during its travelling which can be crucial.

5.3.3.1.3 Access towards the Emergency Department

The route leading towards the emergency department is important in this aspect that a smooth track and a widened path will be feasible for the movement of vehicle or stretcher. Initiatives are taken in this program for construction of new pathways or renovation of existing ones leading towards the emergency department. Such material of the external platform is selected so that a smooth movement should be observed over it rather than jerks bumps. Moreover, the width of the passage from entrance gate up to emergency department is designed by keeping in view the flux of the vehicles rushing towards the emergency block.

5.3.3.1.4 Medical Infrastructure Emergency:

The existing emergency department or other block of the hospital according to its access from entrance gate, is designed and re planned according to the above described emergency facilities. The changings or amendments in the existing covered area of the hospital are proposed according space availability. Due to the rush of patients and increased number of minor surgeries performed in the emergency department make it one of the dirtiest department of the hospital. Hence, in this regards it is very much essential to keep the floors of certain area of emergency department bacteria free. Seamless flooring is proposed in this regard to avoid the groves so that the cleaning process can be made easy. Low epoxy paint is designed and proposed in this regard on Minor OT, Gurney area and specialized healthcare unit.

Provision of medical gasses is essential to facilitate the patients suffering from breathing issue due to some disease and ailment. The filling process of oxygen in the cylinders is outsourced to ensure the continuous supply of the oxygen among the beds. The oxygen system comprises on copper pipe, central oxygen supply system for pressure maintenance, oxygen cylinders and flow meter with bed head units.

5.3.3.1.5 General Building Interventions:

In order to improve the over building condition of emergency blocks following major interventions are taken:

- 1. Provision of flooring and skirting
- 2. Painting on interior and exterior side of department

- 3. Provision of false ceiling
- 4. Replacement of damaged and renovation of existing wooden doors
- 5. Provision of aluminum doors and windows
- 6. Public health work regarding supply of water and gas along with improvement of sewerage system
- 7. Provision of LED panel lights, ceiling fans, exhaust and wall bracket fans
- 8. Improvement of existing wiring and distribution including replacement of damaged equipment and proposal of new equipment

5.3.3.2 Monitoring and Quality Assurance (Process Interventions)

During construction phase, "Construction Supervision" will be carried out by the Procuring Agency (Director Infrastructure) along with Punjab Buildings department (C&W D) who will certify construction activity.

5.3.3.2.1 MSDS (Minimum Service Delivery Standards)

MSDS are minimum level of services, which the patients and service users have a right to expect. MSDS include minimum package of services, standards of care (level specific) and mandatory requirements/systems for delivery of effective health care services. The World Health Assembly in Alma-Atta in 1978 expressed the need of action to protect and promote the health for all the people of the world. Essential health is to be made universally accessible to individuals and families through their full participation and at a cost that the community and country can afford. MSDS is now being deemed to be of vital importance at Secondary HealthCare level. The THQ hospital provides promotive, preventive, curative, diagnostics, in patients, referral services and also specialist care.

THQ hospitals are supposed to provide basic and comprehensive EmONC. THQ hospital provides referral care to the patients including those referred by the Rural Health Centers, Basic Health Units, Lady Health Workers and other primary care facilities. The District Head Quarters Hospital is located at District headquarters level and serves a population of 1 to 3 million, depending upon the category of the hospital. The THQ hospital provides promotive, preventive, curative, advance diagnostics, inpatient services, advance specialist and referral services. Services package and standards of care at SHC level are also not well defined. Deficient areas include: weak arrangements to deal with non-communicable diseases, mental, geriatric problems and specialized surgical care especially at THQ. There is disproportionate emphasis on maternal and child health services at SHC facilities. Services-package being provided at PHC and SHC are also deficient in terms of Health care providers' obligations, patients' rights and obligations.

MSDS umbrella is very vast and it requires a very extensive and planned approach towards, gap analysis, planning, development, implementation,

monitoring and evaluation. MSDS comprises of 10 thematic area, 30 standards and 162 indicators. Government of Punjab has taken an initiative to standardize all hospitals of Punjab in accordance with Punjab Health Care Commission Minimum service delivery standards. PMU team segregated MSDS indicators into various targets and sub-targets to make these targets achievable. Manuals for both clinical and non-clinical specialties are being prepared comprising of departmental organizational plan, criteria for essential human resource, essential equipment, general and specialized SOPs, departmental safety guidelines etc. Standardized Medical Protocols (SMPs) are standard steps to be taken by a health facility during medical or surgical management of a patient. Standard Operating Procedure (SOPs) are detailed description of steps required in performing a task including specifications that must be complied with and are vital to ensure the delivery of these services .It requires literature review, departmental view, facility visits, consultative visits and development of action plan for implementation of MSDS. Effective MSDS implementation requires essential documentation. Documentation is a key for record keeping, monitoring and auditing. For this purpose, registers, forms, displays have to be designed with coding for effective tracking. In addition to this it also requires analysis from field from utilization point of view.

Displays constituting of public serving messages, health related information and general facility related guidelines. In order to monitor effective implementation, compliance monitoring is required to be carried out by field experts which is followed up by further planning to ensure continuous delivery of effective, accessible, continuous and quality services to masses in uninterruptable manner.

MSDS implementation is a complex procedure. Because it requires

- 1. Capacity building for understanding, development and continuous implementation of MSDS.
- 2. Ecosystem for establishing its implementation by full cooperation, collaboration, commitment of
- 3. Continuous monitoring
- 4. Continuous audit
- 5. Continuous training, refresher courses with purpose of reinforcement
- 6. Continuous quality improvement
- 7. Continuous Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis and gap identification
- 8. Continuous strategy making and implementation with backup plan for secondary options.
- 9. Responsibility designation for clinical and non-clinical procedures and activities.
- 10. Effective utilization, calibration and maintenance of equipment with record maintenance and their audit
- 11. Establishment of plans, implementation, analysis of gaps with alternate planning regarding fire evacuation plan, hospital inflectional control plan, hospital operational and

strategic plans, disaster plan both internal (partial / complete) and external.

The PDSA cycle

- 1. Developing a plan to test the change (Plan),
- 2. Carrying out the test (Do),
- 3. Observing and learning from the consequences (Study), and
- 4. Determining what modifications should be made to the test (Act).
- 5. Monitoring effective load sharing of Human resource and equipment within hospitals.
- 6. Addition of new HR/ rationalization on requirement of MSDS indicator compliance for effective departmental organization and their planned trainings by MPDD, UHS ETC
- 7. Standard optimization of Standard operating procedures and methods for their effective adoption by hospital human resource.
- 8. We have also extended our MSDS implementation in 20 more departments such as dentistry, ICU, CCU, Dialysis, mortuary, burn unit, physiotherapy, orthopedics, medicine, nursing, paeds, ophthalmology, derma, TB, urology, patient transfer system, store and purchase, audit and accounts, procurement, planning etc. We are also in process of preparing manuals, SOPS, plans, universal forms, and universal registers with universal tracking system of record.
- 9. We have developed an application for continuous monitoring of MSDS compliance.

Health managers are considered essential at both the strategic and operational levels of health systems. To gain an initial understanding of the management workforce for service deliver. Every health system desires managers who are competent and have the knowledge, skills and demeanor to be effective. The performance of health services managers will depend in part on how certain standard support systems function. Even good managers will have problems if procedures for running finances, staff, etc., are not working well. Functional systems should have clear rules and regulations, good guides and forms, effective monitoring and supervision and appropriate support staff, e.g. account staff, supplies and information staff and secretarial support A health manager is supposed to be competent in planning, budgeting, financial management systems personnel management systems, including performance management, procurement and distribution systems for drugs and other commodities, information management and monitoring systems, systems for managing assets and other logistics, infrastructure and transport. Support systems help to ensure uniformity in management practices and ensure that management and administrative systems function and get results.

5.3.3.3 Laboratory

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Laboratory in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of laboratory in vicinity.

5.3.3.4 <u>X-Ray</u>

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Radiology unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of Radiology unit in vicinity. A healthy human being enables not only nutrition of the physical body but also enhances social interaction and promotes self-esteem and feelings of self-esteem and feelings of wellbeing. The radiology equipment serves as a "window "to the patient treatment regarding the body.

5.3.3.5 <u>CCU</u>

Understanding these ground realities Primary and Secondary Healthcare Department, Government of the Punjab has decided to establish coronary care units (CCU) in THQ hospitals as a part of its Revamping Program. This will improve the quality of healthcare and timely provision of life saving treatment will be possible to large number of patients. A coronary care unit (CCU) is a special department of a hospital or health care facility that provide coronary care to patients. Coronary care units cater to patients with severe and life-threatening cardiac illnesses and which require constant, close monitoring and support from specialized equipment and medications in order to ensure normal bodily functions.

Coronary care units are staffed by highly trained doctors and nurses who specialize in caring for cardiac patients. They are also distinguished from normal hospital wards by a higher staff-to-patient ratio and access to advanced medical resources and equipment that are not routinely available elsewhere. Common conditions that are treated within CCUs including angina, myocardial infection, cardiac arrhythmia, cardiac shock etc. Patients may be transferred directly to coronary care unit from an emergency department or from a ward if they rapidly deteriorate, and immediately require cardiac care treatment.

5.3.3.6 Dialysis Unit

Chronic kidney disease is now a significant public health problem worldwide. Chronic kidney disease globally affects almost 10 % of general population with Incidence in prevalence of disease are still rising especially in developing countries .The rise in chronic kidney disease is by aging of the populations and growing problems of obesity, diabetes, high blood pressure and cardiovascular diseases.

Tehsil head Quarter Hospital (THQ) serve large catchment populations of the district and provide a range of specialist care in addition to basic outpatient and inpatient services. Patient who are in need of dialysis, are referred to tertiary care hospital due to non-availability or insufficient number of dialysis machines. Patient's condition not only deteriorate but also compromise the effectiveness of life saving intervention due to approaching to other cites or to costly private setups of dialysis. Primary and Secondary Healthcare Department has decided to establish & strengthening already existing 5 bedded dialysis unit at THQ hospitals. This will improve the quality of healthcare and timely provision of life saving treatment will be possible to large number of patients.

Dialysis unit is a special department of a hospital or health care facility that provides a lifesaving support to patients with chronic renal disease along with preexisting diseases like diabetes, hypertension, ischemic heart disease to ensure normal bodily functions. Dialysis units are staffed by highly trained doctors, dialysis technicians and dialysis nurses who have done specialized training in caring for such patients. Patients are usually admitted from out door and often from emergency and registered for their timing and schedule of dialysis because these patients are given regular appointments twice or thrice a week as per defined by nephrologist/physician.

5.3.3.7 Labor Rooms/Nurseries

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Labor Rooms/Nursery unit in THQ hospitals.

5.3.3.8 Operation Theater

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Operation Theater in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in treatment according to diagnosis in case of lack of Operation Theater in vicinity.

5.3.3.9 Orthopedic unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the orthopedic unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of orthopedic unit in vicinity.

5.3.3.10 Gynecology Department

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the gynecology unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of gynecology unit in vicinity.

5.3.3.11 Surgical Unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the surgical unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of surgical unit in vicinity.

5.3.3.12 Intensive Care Unit (ICU)

Tehsil Headquarter Hospitals (THQ) serve catchment populations of the whole Tehsil (0.5-1 million) and provide a range of specialist care in addition to basic outpatient and inpatient services. They typically have about 80 to 150 beds and a broad range of specialized services including surgery, medicine, paediatrics, obstetrics, gynaecology, ENT, ophthalmology, orthopaedics, urology, neurosurgery etc. Patient who are in need of intensive care are usually referred to tertiary care hospital but due to long distance they had to travel and time consumed on road due to heavy traffic and other unavoidable circumstance ,patient's condition not only deteriorate but also compromise the effectiveness of life saving intervention. Understanding these ground realities Primary and Secondary Healthcare Department, Government of the Punjab has decided to establish intensive care units (ICU) in THQ hospitals as a part of its Annual Development Plan. This will improve the quality of healthcare and timely provision of life saving treatment will be possible to large number of patients.

Primary and Secondary Healthcare Revamping programme (PSHRP) is the initiative by the Chief Minister of Punjab to strengthen the healthcare delivery system in the province Acquisition of licenses for all THQ Hospital by developing and implementing uniform set of standard Operating procedures (SOPs) & standard medical protocol (SMP) for compliance to MSDS of PHC is planned as a part of PSHRP.

An **intensive care unit** (**ICU**) is a special department of a hospital or health care facility that provides <u>intensive treatment medicine</u>. Intensive care units cater to patients with <u>severe and life-threatening</u> illnesses and injuries, which require constant, close monitoring and support from specialized equipment and medications in order to ensure <u>normal bodily functions</u>. Intensive care units are staffed by highly trained <u>doctors</u> and <u>nurses</u> who specialize in caring for critically ill patients. They are also distinguished from normal hospital wards by a higher staff-to-patient ratio and access to advanced medical resources and equipment that are not routinely available elsewhere. Common conditions that are treated within ICUs include <u>ARDS</u>, <u>trauma</u>, <u>multiple organ failure</u> and <u>sepsis</u>. Patients may be transferred directly to an intensive care unit from an <u>emergency department</u> if required, or from a ward if they rapidly deteriorate, or immediately after surgery if the surgery is very invasive and the patient is at high risk of complications.

5.3.3.13 Mortuary Unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the mortuary unit in THQ hospitals. Postmortem or autopsy is a part of medico legal investigation into a death which is conducted by a judicial medical officer. Realizing the problems countered medico legal process focusing on following important areas;

- 1. Improving quality and motivation levels of human resource conducting medico legal Examination.
- 2. Improve methods to collect and preserve samples so that so that these may best be available for further forensic analysis.
- 3. Improving physical infrastructure at tehsil level to provide enabling environment for better conduct of medico legal cases including improvement in state of mortuaries at tehsil level.
- 4. Improvement in legal framework including improved forms.

5.3.3.14 Dental Unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the dental unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of dental unit in vicinity.

5.3.3.15 Physiotherapy Unit (33 THQ Hospitals)

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the physiotherapy unit in all THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of physiotherapy unit in vicinity.

- 1. Physiotherapy is a "science of healing and art of caring". It pertains to the clinical examination, evaluation, assessment, diagnosis and treatment of musculoskeletal, Neurological, Cardio-Vascular and Respiratory systems 'functional disorders including symptoms of pain, edema, and physiological, structural and psychosomatic ailments. It deals with methods of treatment based on movement, manual therapy, physical agents, and therapeutics modalities to relieve the pain and other complications. Hence, Physical therapy covers basic parameters of healing sciences i.e. preventive, promotive, diagnostic, rehabilitative, and curative.
- 2. Physiotherapy practice has a very long history and a modern clinical practice is heavily reliant on research and evidence based practice. The Primary and Secondary Healthcare Department Government of Punjab attests to this commitment by adopting and promoting the Standards of Practice for Physiotherapy.

Importance of Physiotherapy and Rehabilitation department

- 1. Physiotherapy provides services to individuals and populations to develop maintain and restore maximum movement and functional ability throughout the lifespan. This includes providing services in circumstances where movement and function are threatened by aging, injury, disease or environmental factors. Functional movement is central to what it means to be healthy.
- 2. Physiotherapy is concerned with identifying and maximizing quality of life and movement potential within the spheres of promotion, prevention, treatment/intervention, habilitation and rehabilitation. This encompasses physical, psychological, emotional, and social wellbeing. Physiotherapy involves the interaction between physical therapist, patients/clients, other health professionals, families, care givers, and communities in a process where movement potential is assessed and goals are agreed upon, using knowledge and skills unique to physical therapists.
- 3. The proposed project entails setting up a Physiotherapy and Rehabilitation Department. Being one of the major players in human service sector, rehabilitation Departments provide a wide range of services relating to physical impairments and disabilities of all age groups. These services range from assessment, evaluation, diagnosis, treatment and plan of care of individuals, from newborns to the very oldest, who have medical problems or other health-related conditions that limit their abilities to move and perform functional activities in their daily lives. These services will be provided by qualified Physiotherapists Consultants. Our consultants

examine each individual and develop a plan using treatment techniques to promote the ability to move, reduce pain, restore function, and prevent disability. In addition, our doctor work with individuals to prevent the loss of mobility before it occurs by developing fitness- and wellness-oriented programs for healthier and more active lifestyles. The proposed Physiotherapy and Rehabilitation Department will provide all these services under one roof.

Opportunity Rationale

Due to vast media exposure over past few years, women, as well as men, have become more conscious about their health especially youngsters. In Pakistan, Rehabilitation Clinics and Fitness Centers have grown over the years. It is easy to open GP clinic as space and skill requirement is very basic. But a Rehabilitation clinic provides more professional services with qualified staff including Physiotherapy doctors and experienced support staff and therefore, requires more planning and arrangement. Quite a few Physiotherapy and Rehabilitation Departments have opened in Lahore, Islamabad, Karachi and other relatively larger cities of Pakistan, which are catering to the demand of the people, but still there is a lot of unfulfilled demand as can be judged from excessive rush at the existing Physiotherapy Departments. The patient's ratio and problems with musculoskeletal disorders and neurological disorders are same in the tehsils and districts levels of Punjab. The business is service-oriented and carries large potential for serving poor people due to its unique nature and uncontrolled spreading of joints and muscles, and neurological problems, especially in the areas where our THQ Hospitals are located. There is lot of potential in this domain, especially for those who are committed to providing quality service.

5.3.3.16 Queue Management System (QMS)

OPD in THQ has enormous patient load, due to the only big public sector serving hospital in Tehsils. At the moment the ticket system is prevailing but there is no mechanism to handle that ticket and assign number to the ticket and its being issued in manual format. This will also create dependency on the person issuing the ticket. After getting the tickets, patient will be provided with no guidance on where to go and when his term will come to meet the doctor and get the required service. This will create confusion and delayed service delivery. On the other hand it will waste lots of time on the end of doctor and patient as patient and doctor has no direct liaison with each other. Moreover, patient will again have to be dependent on some person to check that either doctor is free or any patient sitting in his facility. Here again, human intervention and dependency will come into play.

This project basically aims to remove all the human related dependency till the patient reach the doctors. Moreover, it also includes, recording basic information

for a patient and guiding him to the doctors room from registration count to triage without any dependency on hospital staff. This will improve the transparency as per the vision of good governance and serve the patient in an efficient and transparent manner. This will also help the patient in estimating that time estimate till his term which will give him relief and more belief on the fair system. On the other hand doctor will always have an idea that how many patients will be in queue and give him direct liaison with the patient sitting outside.

The need of queue management system is evident in hospital from the fact of lack of proper mechanism of patient queue management at OPD's, human resource deficiency and non-functional equipment. The Implementation of Queue Management System will provide and streamline Patient Queue Management at OPD with Ticket Generation and Display of Numbers on the counters. This will help in maintaining the queue on First IN First OUT (FIFO) basis. The system will also provide the information counter to the general public to educate them in the use of queue management system and short description of the process. After implementation of this system, the incoming patient will be guided in a manner to get the service on his turn without any dependency or interference of an external resource. All will be handled in an automated way with patient are being served at their turn.

The system manages the patients load, organizes the patient's queues in an adequate manner and gives them the ease in waiting area; and they will be examined gracefully by doctors at their turn. Basic information of the patient is also linked with its ticket, being taken at the first counter. This will help established a unique ID against each patient. This will also lead to the establishment of Electronic Medical Record. The Process flow of Queue Management System at THQ is given as follows:

There are 25 counters at THQ level including basic registration counter, triage counter, consultant office and hospital pharmacy. There is one ticketing machine with a bifurcation of male, female and old age person. The ticket will be issued to the relevant category accordingly. After receiving the ticket the said number will be blinked on male, female and old age counter. The person will move to that counter where he will be asked about his basic details which will be entered in the basic registration form software linked with QMS and that specific token / ticket number. He will also be asked about the disease and accordingly the relevant consultant / specialty area e.g. pediatrics, ophthalmology etc. after registering, he will take the printout and give the slip to patient / attendant along with its token number.

The basic fee of OPD will be received at the registration counter and accounted for in the basic registration software linked with QMS. The same token number will be displayed on the triage counter where his vitals will be taken and written on the same registration slip available with the patient. Now, keeping in view the specialty area the token number will be displayed on the relevant consultant office and he will be checked by relevant consultant. The consultant than diagnosed the medicine or either to admit it after his examination. In case of medicine he will be sent to hospital pharmacy where again the same ticket number will be displayed. There have to be an option available with the doctor to either redirect him to the hospital pharmacy counter the patient will move to pharmacy counter along with his token number and registration slip and take prescribed medicine. Patient will be disposed from that window and process of QMS will be completed. There will be no entry in the basic registration software on the counters of triage, doctor at the moment. Detail of equipment is attached.

The process described above for THQ will be implemented. The important constraints for the systems are:

- 1. Same token number will be used at all the counters and patient will be getting the ticket from ticketing machine only once at the time of entry.
- 2. QMS will cater for missed, skipped or delayed patient at any counter.
- 3. There will be two LED displayed at different location in the waiting area to guide patients about the process details and to display token number along with announcement in URDU.
- The gap between each display panel from ticketing machine to pharmacy can be customized according to requirement e.g. 5, 10, 30, 60 seconds etc.

5.3.3.17 Electronic Medical Record (EMR)

Establishment of network infrastructure, establishing a central data center, connectivity of different building through fiber, are also the major components of the revamping project in terms of ICT. This will including provision of networking point at all nursing stations and important areas where entries regarding patients' needs to be made e.g. Radiology/Pathology, Indoor, outdoor etc. This will serve as backbone to implement the Electronic Medical Record System in the Hospital which has the key feature of generating Unique Medical Record Number for each patient.

This MR number will serve as an identity for patients during their treatment, retrieval of records and for decision making.

EMR will also be able to log the patient for treatment being provided to him in different areas of hospital i.e. OPD, Pathology, Radiology, Surgery, Indoor, etc. and their integration. This will be achieved by entering the relevant information at each department against specific MR number of a patient in the Customized / Purpose build software (EMR) for these public healthcare facilities.

This entry of MR number against each patient in hospital will build a large database for patient and relevant diseases. This will help in analysis disease / epidemic prevention and better patient care through retrieval of patient history and proper diagnoses at physician end. Implementation of patient registration, Record keeping, physical queue management, E-prescription, supporting IT interventions for EMR and medicine dispensation. Detail of equipment is attached.

5.3.3.18 Video Surveillance through CCTVs

Installation of network based CCTV cameras is an important module in the ICT part of revamping project. Scope of this component is to install 60 to 80 cameras in each hospitals at important location i.e. entry, exit, OPD, waiting areas, Parking for surveillance and security purposes. This will also serve as major input to the security services by Outsourced Security Company in the hospitals. Moreover, there will be small scale central control room at each hospital to monitor the allocated locations where the cameras have been installed. This system will also have the facility to record the video for 15 days for all the cameras so that recording of specific duration can be produced on demand. This will also have the facility of central control room which has the capacity to access the camera of THQ hospitals and to view and monitor the area of specific camera within specific hospital at any given time. Therefore, it will establish a centralized surveillance and security mechanism for these 85 public sector healthcare facilities. Detail of equipment is attached.

5.3.3.19 Medicine Store

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the medicine store in THQ hospitals.

5.3.3.20 Day Care Center

On-site (or near-site) child care would lead to improve workplace satisfaction by allowing employers more frequent contact with their children,

reducing stress and anxiety over scheduling, and potentially providing financial benefit to the hospital. Therefore, P&SH Department has decided to establish the Day Care Center at every THQ Hospital. The Medical Superintendent of the concerned hospital will be the overall in-charge of the Day Care Center.

5.4 Out Sourcing of Non Clinical Services

It was planned to provide Outsourcing of following Non-clinical services through development Budget later on decided to shift to non-development Budget as per the decision of progress review meeting chaired by the Chairman P&D Board dated 01-01-2018 w.e.f. 30-06-2018:-

- 1. Janitorial services
- 2. Laundry services (On hold)
- 3. MEPG Services
- 4. CT scan
- 5. Security

5.4.1 Janitorial services

These services include cleaning of hospitals and its roads and ROW areas. Internal cleaning comprises of complete cleaning along with washrooms cleanliness and material for these services such as hand wash/sanitizer. The Outsourcing is hereby designed keeping in view the sizes of areas assigned to each sanitary worker along with condition and nature of service. Human resources are planned after measuring the total area of hospital, built up area excluding the areas of horticultural land and residential buildings. The workers shall work in three shifts in a day. Half of the total strength of sanitary workers shall work in morning shift due to patients load in OPD. The concerned sanitary work company is bound to provide cleaning services materials and their refilling as and when required.

The companies providing janitorial services will be required to provide quality janitorial services, complete their personnel strength on daily basis which will be ensured through biometric attendance. Also, the companies will be subject to pecuniary penalties by hospital authorities if services provided are not according to the contracts.

5.4.2 Laundry Services

Different models were being applied by the hospital administrations individually which were not properly catering the basic requirement of washing and disinfection of different items used for hospitals. This model includes the initial procurement of different daily use items such as three different colors bed sheets and pillow covers and are to be changed thrice a day. Moreover, the concerned company must provide washing and cleaning services of bed sheets, pillow covers, blankets along with covers, apparels/OT clothes.

5.4.3 MEPG Services

The service of the hospitals is suffering badly due to improper functionality of the existing electrical and mechanical equipment which arises due to lack of maintenance. This model satisfies the need of proper maintenance plan which comprises of regular visits of technicians for looking after of electrical and mechanical equipment and accessories. Outsourcing company will be responsible for immediate response and above mentioned services.

5.4.4 CT Scan Services

CT Scan Services in selected Hospitals of Punjab are also being undertaken as a component of Government's decision to revamp all Secondary Healthcare. The objective of this initiative is to provide high quality CT Scan Services to widely scattered population of low socio-economic groups at their door steps. It will ensure provision of satisfactory diagnose infections, muscle disorders, and bone fractures. The imaging technique of CT Scan can help doctor to study the blood vessels and other internal structures and assess the extent of internal injuries and internal bleeding.

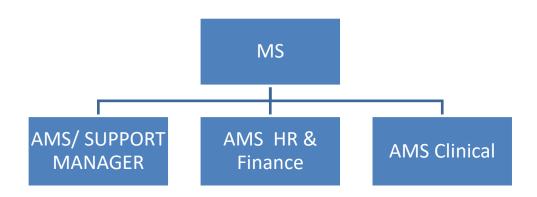
5.4.5 Security

The outsourcing model is designed due to non-provision of security arrangements and improper parking in different areas of premises of hospital. This model consists of guards who shall work in two shifts to provide security and surveillance for complete premises of hospital excluding residential areas. The devices required for this service to operate are arms, walkie talkie, Base set per unit and torch etc.

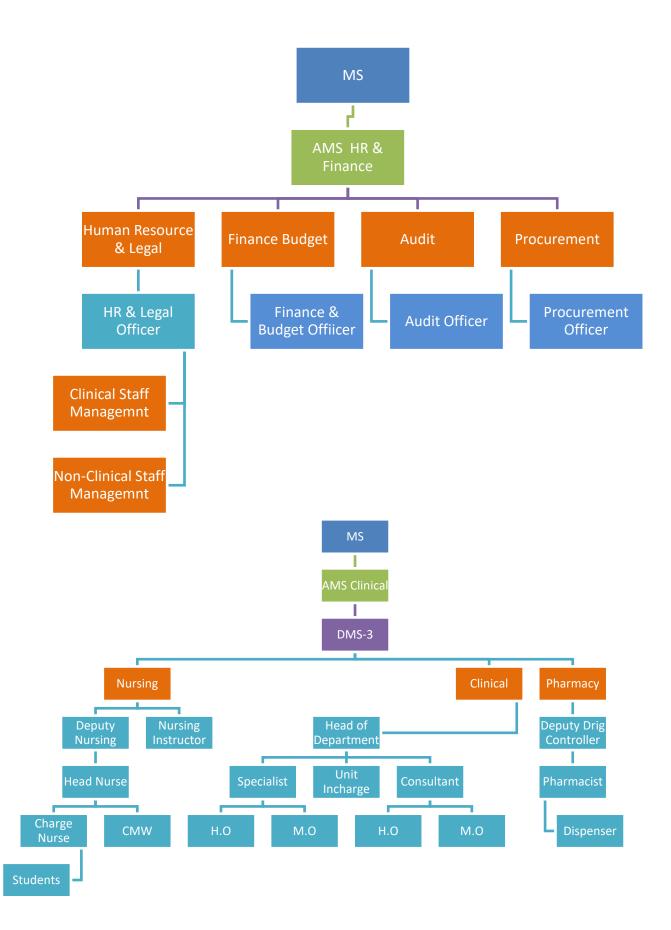
5.6 HR & Management Interventions Structure

HR Interventions can be broadly classified into introduction of New Management Structure (NMS) staff.

New Organogram of Hospital



MS	
•AMS/ SUPPORT MANAGER	
•IT/Data Analysis	
•IT/ Statistical Officer	
 4 Data Entry Operators 	
•Admin	
•Admin Officer	
•4 Monitors	
•Security	
•Transport	
• Parking	
•Janitorial	
•Canteen	
 External House Keeping 	
•Civil Works	
•Technical works	
•Electrical Works	
 Internal House Keeping 	
•Laundry	
 Stores & Supplies 	



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5.6.1 <u>Non Clinical HR Interventions (Human Resource (HR) Plan</u> <u>Management Structure)</u>

Institution will run under the administrative control of Medical Superintendent, who will control this with the collaboration and cooperation of 3 Additional Medical Superintendents including AMS (Admin), AMS (HR & Budget) and AMS (clinical), 3 Deputy Medical Superintendents (morning, evening and night) will be reporting to AMS Clinical. Each clinical facility will be further controlled by head of concerned department and 6 administrative posts of HR & Legal Officer, IT/Static Officer, Budget & Account Officer, Admin Officer, Procurement Officer and Audit Officer will be provided as supporting hands for AMS Admin and AMS HR & Budget for smooth execution of hospital tasks.

<u>Responsibilities / Job Descriptions, Eligibility & Financial</u> <u>Implications for Management Structure of Hospital</u>

5.6.2.1 Medical Superintendent

Shall be overall responsible for all the affairs of the Hospital

5.6.2.2 AMS Admin.

Shall be responsible for following functions in addition to his own duties:

- 1. General administration
- 2. IT/Data analysis/statistics keeping (biometric machines, etc.).
- 3. In case of outsourced interventions like QMS/EMR he shall be responsible for enforcement of contract and in case of violation shall ensure action has been taken as envisaged in the contract.
- 4. He shall be responsible for entry of data on Citizen Feedback Model.
- 5. He shall be responsible for ensuring collection of report of actions taken on CFM reports and entry of that on CFM.
- 6. He shall be responsible for implementation of any IT related initiative in the hospital.
- 7. He shall be responsible for better record keeping of hospital
- 8. He shall devise and implement systems for better record keeping of hospital

9. He shall ensure generation of all types of reports/information required of hospital by District Government/P&SHD/any other authorized Public agency

New Management Structure (NMS)

In place of the clerical positions, the P&SH Department has introduced a New Management Structure (NMS), in all District and Tehsil Headquarters Hospitals. The officers recruited as a part of the NMS have a minimum of 16 years of education. Their minimum qualification is MBA / B.Sc. Engineering / M.Com / Pharm-D / M.Cs / LLB / MPA / CA Inter / ACCA / ACMA / Master Degree or equivalent in relevant field etc. Their recruitments were undertaken through a competitive process by a third party testing service.

5.6.2.3 Admin Officer

Shall be responsible for general administrative affairs of hospital along with following functions:

- 1. Security
- 2. Transport
- 3. Parking
- 4. Janitorial
- 5. External housekeeping
- 6. Electrical works
- 7. Internal housekeeping
- 8. Laundry
- 9. Stores & supplies

In case these functions have been outsourced, he shall be responsible for enforcement of these contracts and shall ensure that penalties are imposed in case of violation of contract. In case he fails to enforce contract and the outsourced function is not performed at par as per contract and penalties have not been imposed he shall be liable for non-action. Moreover, only reporting of violation of contract shall not suffice but he has to ensure follow up till the penalty has been imposed and action as envisaged in contract in case of violation has been taken.

Eligibility Criteria

 Minimum qualification Masters' degree in Economics/ Public Administration/ Finance/ MBA Finance/Administration or equivalent from HEC recognized University Minimum 2 years post degree experience of administration (Additional credit may be given for hospital administration/ Public sector administration of similar nature)

5.6.2.4 Human Resource Officer

Shall be responsible for following:

- 1. Issuance of monthly Duty rosters & special duty rosters of Eid, Muhurram etc. of all clinical & non-clinical staff in hospital
- 2. Issuance of Transfer/postings orders within hospital
- 3. Taking of joining from new incumbents and charge relieving orders of relinquishing officials
- 4. File maintenance of all employees of hospital
- 5. Record of all enquires of employees of hospital
- 6. Leave record of employees
- 7. Adjustment of officials on duty during leave of concerned employee
- 8. Litigation/ legal issues of hospital (shall ensure all court cases are well attended and all legal matters of hospital are well taken care of)
- 9. Any other HR related function assigned by MS/AMS

Eigibility Criteria

- Minimum qualification Masters' degree in Economics/ Public Administration/ Finance/ MBA HR/Management/ Finance/Administration or equivalent from HEC recognized University
- 2. Minimum 1 year post degree experience of administration (Additional credit may be given for hospital administration/Public sector experience of similar nature)

5.6.2.5 IT/Statistical Officer

He shall be responsible for IT support for all IT interventions in the hospital.

He shall be in liaison with HISDU, P&SHD for proper reflection of hospital record on HISDU dashboard. In case there is any discrepancy or error he shall resolve the issue. Moreover, he shall be responsible for functionality of all IT equipment.

Eligibility Criteria

- 1. Minimum qualification Masters' degree in Computer Science or equivalent from HEC recognized University
- 2. 2 years post degree experience of IT/Data analysis(Additional credit may be given for similar assignment experience)

5.6.2.6 Finance & Budget Officer

Shall be responsible for following:

- 1. Handling of all financial matters of hospital
- 2. Petty cash handling
- 3. Preparation of budget
- 4. Budget review
- 5. Maintenance of accounts and record
- Any other function assigned by AMR HR & Finance/MS/P&SHD

Eigibility Criteria

- 1. Minimum qualification Masters' degree in Finance/ MBA Finance or equivalent from HEC recognized University (Additional credit may be given to Charter accountant/ACCA)
- Minimum 2 years post degree experience of Finance, Accounts & Budget (Additional credit may be given for Public sector experience of similar nature)

5.6.2.7 Procurement Officer

Shall be responsible for following functions:

- 1. Procurement of all kinds for hospital
- 2. Shall be in liaison with P&SHD for procurements being conducted
- 3. Any other function assigned by AMS HR & Finance /MS/P&SHD

Eigibility Criteria

- 1. Minimum qualification Masters' degree in Finance/ MBA Finance or equivalent from HEC recognized University
- 2. 2 years post degree experience of procurement (Additional credit may be given for public sector experience of procurement)

5.6.2.8 Quality Assurance Officer

He shall be responsible for quality of all things in the hospital.

Eligible Criteria

 Masters in Total Quality Management / Masters in Public Health/ Masters in Health Administration/ Masters in Hospital Management / Masters in Biochemistry / Biotechnology / Molecular Biology / Microbiology from an HEC recognized University or equivalent.

OR

16 years education along with Post graduate diploma in Total Quality Management/ Post graduate diploma in Health Safety and Environmental Management System / Post graduate diploma in Healthcare and Hospital Management / Quality Assurance or equivalent.

2. Minimum 1 Year post degree relevant experience.

5.6.2.9 Logistics Officer

He shall be responsible for Supply Chain, logistics, fleet, warehousing and inventory management, clearing and forwarding in the hospital.

Eligible Criteria

- 1. M.Sc. Supply Chain Management/ MBA or Equivalent.
- 2. One year experience in Supply Chain, logistics, fleet, warehousing and inventory management, clearing and forwarding.

5.6.2.10 Data Entry Operators (DEO)

Four Data entry operators shall help IT officer in dispensation of his responsibilities.

Eligible Criteria

 Minimum qualification BA / B.Sc / B.COM / BCS or equivalent from HEC recognized University. In case of BA/B.COM candidate must have six months computer course / Diploma.

- 2. Proficient in MS Word/ MS Excel/ MS Power point (additional credit may be given for additional relevant certified computer courses)
- 3. 1 years post degree relevant experience

5.6.2.11 Assistant Admin Officer

Shall be responsible for general administrative affairs of hospital and assist the admin officer.

Eligibility Criteria

- Minimum qualification Masters' degree in Social Sciences/Economics/ Public Administration/ Finance/ MBA Finance/Administration or equivalent from HEC recognized University
- Minimum 2 years post degree experience of administration (Additional credit may be given for hospital administration/ Public sector administration of similar nature).

5.7 <u>HR for QMS and MSDS and Day Care Center.</u> 5.7.1.1 <u>QMS Supervisor / Information Desk Officer</u>

Shall be responsible whole QMS networking

Eligible Criteria

- M.Sc. (Comp. Engineering, Electronics, Electrical Engineering, IT, Telecommunication, Com. Science, Software Engineering, MCS), BCS (Comp. Engineering, Electronics, Electrical Engineering, IT, Telecommunication, Com. Science, Software Engineering, MBA, BBA, MPA, IT related 16 years Education.
- Experience in the field of Software/Hardware/Network/DATA Quality Assurance, IT projects, IT enabled organizations, CCTV Control Room monitoring, Call Centre, Networking, Software Development will be considered as an added advantage during interview process.
- 3. Excellent communication Skill (Urdu, English) and IQ level
- 4. Age Limit of 21-28 years for Male & 21-30 years for Female
- 5. Typing Speed: 30WPM.

5.7.1.2 Computer Operators

Eight Computer operators shall help QMS Supervisor in dispensation of his responsibilities.

Eligible Criteria

- 1. Minimum qualification 14 year or Masters' degree from HEC recognized University
- 2. Proficient in MS Word/ MS Excel/ MS Power point (additional credit may be given for additional relevant certified computer courses)
- 3. 35 Word per Minute. Excellent communication in English and Urdu.

5.7.2 Consultants (MSDS) Implementation & Clinical Audit

Eligible Criteria

1. MBBS & Masters in Public Health, or equivalent qualification.

2. The consultant must have 10 years of hands on experience of third party validation, clinical audit of hospitals, Minimum Service Delivery Standards (MSDSs) implementation / hand holding; Report Writing; working knowledge of international best practices in hospital management will be preferred. Proficiency in MS Office is must. Must have strong communication skills.

5.7.2.1 <u>Terms of Reference (TORs) for Consultants Minimum Service</u> <u>Delivery Standards (MSDS) Implementation & Clinical Audit</u>

Government of the Punjab, Primary and Secondary Healthcare Department (P&SHD) is implementing multiple initiatives to improve the quality of healthcare at DHQ/THQ level across the province. One of the initiatives is Primary and Secondary Healthcare Revamping program which is being implemented by the Project Management Unit (PMU). Currently PMU is also involved in the standardization of quality of care at facility level through uniform set of Standard Operating Procedures (SOPs) & Standard Medical Protocols (SMPs) for compliance. The department intends to make all DHQs and THQ hospitals of Punjab as MSDS compliant which have been devised by Punjab Healthcare Commission.

Punjab Healthcare Commission was established under the PHC Act 2010 as an autonomous regulatory body for health sector; with the purpose of improving the quality, safety and efficiency of healthcare service delivery for all Public and Private Healthcare Establishments (including Allopaths, Homeopaths and Tibbs) in the province of Punjab. The Punjab Healthcare Commission has developed Minimum Service Delivery Standards (MSDS) for all hospitals to improve the quality of healthcare services all over the Punjab. All Healthcare Establishments are required to implement MSDS to acquire a License to deliver healthcare services in Punjab.

This standardization effort will not only ensure availability of minimum services delivery standards (MSDS), SOPs, SMPs at all levels, but also the other essential inputs for functioning of systems and processes to ensure the smooth and safe delivery of quality healthcare services. These will also create conducive working environment for healthcare providers.

5.7.2.2 Objectives

The objective of this assignment is to implement & check all SOPs, SMPs, Minimum Service Delivery Standards (MSDS) & conduct clinical audit for 125 DHQ/THQ hospitals. Furthermore, the consultant will also monitor ongoing multiple trainings at DHQ/THQ hospitals.

5.7.2.3 Scope of Work

- 1. Develop policy & strategy for clinical audit of 125 hospitals.
- 2. Develop detailed clinical audit plan, with expected deliverables from hospitals. 360 degrees clinical audit.
- 3. Visit DHQ/THQ hospitals, to assess MSDS implementation and detailed report generation with short coming & highlight areas of improvement.
- 4. Review SOPs, SMPs & ISO Standards in hospitals to identify non-compliance.
- 5. Visit DHQ/THQ hospitals to implement clinical audit as per devised strategy, as well as monitoring and implementing MSDS standards.
- 6. Prepare detailed visit reports of clinical short comings; and suggest, and implement improvement plan.
- 7. Monitoring & auditing of patient referral system, detailed report on error and recommendations on rectification of errors.
- 8. Visit DHQ/THQ hospitals to implement clinical audit as per devised strategy, as well as monitoring and implementing MSDS standards.
- 9. Prepare detailed visit reports of clinical short comings; and suggest, and implement improvement plan.
- 10. Monitoring & auditing of patient referral system, detailed report on error and recommendations on rectification of errors.
- 11. Monitoring and evaluation of multiple trainings imparted at DHQ/THQ hospitals.
- 12. Any other relevant task assigned by Project Director/Director Quality Assurance / Project Manager.

5.7.2.4 <u>Reporting Arrangements</u>

 The Consultant (MSDS & Clinical Audit) will report to the Project Director/Director Quality Assurance/Senior Project Manager, P&SHD

5.7.2.5 Duration of Assignment

• The duration of assignment will initially be for THREE MONTHS / 120 DAYS which will be extendable subject to satisfactory performance.

5.7.2.6 Outputs / Key Deliverables

- Study/desk review the relevant Minimum Service Delivery Standards (MSDS) prescribed by PHC & ISO Standards, train the hospital staff/monitor/facilitate their implementation.
- Study/desk review the existing Standard Operating Procedures (SOPs), train the hospital staff/monitor/facilitate their implementation and suggest improvements where necessary.
- Study/desk review the existing SMPs, train the hospital staff/monitor/facilitate their implementation and suggest improvements where necessary.
- Conduct hospital visits of 125 DHQ/THQ hospitals (each DHQ hospital to be visited monthly & each THQ hospital every three months).
- Conduct formal hospital survey for confirming the implementation of MSDS on the relevant Scoring Matrix.
- Submit detailed report of each hospital visit on a standard format prescribed for the purpose.
- Conduct a system, process analysis with special emphasis on clinical audit and submission of detailed report accordingly.

5.7.2.7 <u>Remunerations</u>

- The consultant will be paid amount of Rs. **4500-6500/- per day** with no other benefits.
- All logistics will be arranged/reimbursed by PMU for field visits (accommodation, refreshments etc).

5.7.2.8 Terms of Payment

• Consultant will be paid on monthly basis throughout the contract period.

5.7.3 HR for Day Care Center

5.7.3.1 Manager Day Care Center (DCC)

Shall be responsible for general administrative affairs of DCC.

Eligibility Criteria

- Minimum qualification Masters' degree in Economics/ Public Administration/ Finance/ MBA Finance/Administration or equivalent from HEC recognized University
- 2. Minimum 2 years post degree experience of administration (Additional credit may be given for hospital administration/ Public sector administration of similar nature)

5.7.3.2 Montessori Trained Teacher

Shall be responsible for basic education of children.

Eligibility Criteria

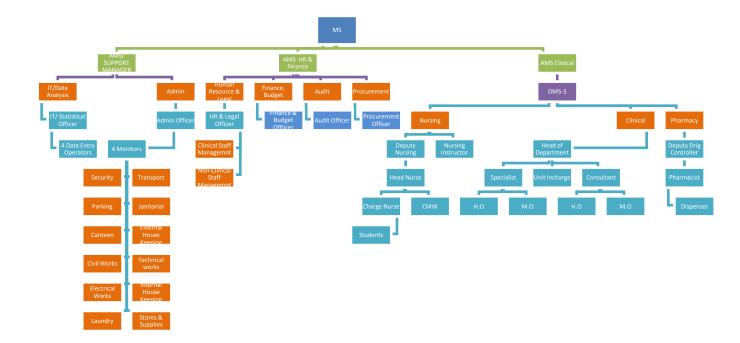
- 1. Minimum qualification BA/BSC or equivalent from HEC recognized University along with B.Ed.
- Minimum 1 years post degree experience of teaching (Additional credit may be given for Public sector teaching of similar nature)

5.7.3.3 Attendant / Care Giver

Shall be responsible for special care of the children.

Eligibility Criteria

Minimum qualification Matric or equivalent alongwith diploma in relevant field



The Planning & Development Board vide letter No.12(24)PO(COORD-II)P&D/2022 dated 14-07-2022 has informed that revised standard pay package were discussed and approved by the 83rd PDWP meeting held on 28-06-2022 under the chairmanship of Chairman P&D Board for all ADP funded Project posts of Department /Organizations working in Government of the Punjab:

Project Pay Scale (PPS)	Revised Project Pay Scales (Permissible	Annual Increment Up
	<u>Range) (PKR)</u>	to % age
PPS-1	28,000 44,800	10
PPS-2	35,00056,000	10
PPS-3	43,750 70,000	10
PPS-4	52,500 84,000	10
PPS-5	70,000112000	10
PPS-6	105,000 172,200	8
PPS-7	157,500258,300	8
PPS-8	218,750358,750	8
PPS-9	306,250502,250	8

PPS-10	437,500700,000	5
PPS-11	612,500 980,000	5
PPS-12	875,0001,400,000	5

In view of the above the Pay package of NMS staff has been revised. Financial Implications of New Management Structure Model based on revised Standard Pay Package (PPS) approved by the 83rd PDWP meeting held on 28-06-2022:

	No. of	Original Pa approved	ay package	Revised Pay package			
Name of Post	Employees	Per Month Salary	Salary for One Year	Per Month Salary	Salary for One Year		
Admin Officer	1	80,000	960,000	105,000	1,260,000		
Human Resource Officer	1	80,000	960,000	105,000	1,260,000		
IT/Statistical Officer	1	80,000	960,000	105,000	1,260,000		
Finance & Budget Officer	1	80,000	960,000	105,000	1,260,000		
Procurement Officer	1	80,000	960,000	105,000	1,260,000		
Quality Assurance Officer	1	80,000	960,000	105,000	1,260,000		
Logistics Officer	1	80,000	960,000	105,000	1,260,000		
Data Entry Operator (DEO)	2	35,000	840,000	44,000	1,056,000		
Assistant admin Officer	2	50,000	1,200,000	70,000	1,680,000		
Total	11		8,760,000	849,000	11,556,000		

5.8 Other Initiatives:

There are many other initiatives which government plans to undertake in order to improve healthcare services in the province. These include:

- Rehabilitation of Emergency Ward
- Fixture of Benches
- Addition of Bracket Fans/Water Coolers/LCDs with signage
- Supply of Laboratory/ Equipment/USG/ECG etc.
- CCU Improvement
- Installation of Water filtration plants
- Replacement of Bed sheets/Pillows/Matrasses
- Installation of Transformers/Dual Connection
- Improvement of Labor rooms/Nurseries

- Maintenance and replacement of Air-conditioners through Outsourcing
- Blood Bank improvement
- Installation of CCTV Cameras
- Installation of Basic Fire-fighting Equipment
- Up gradation of Pharmacy and medicine Store
- Improvement of Internal Roads and laying of Tough pavers
- External Development
- Rehabilitation of Hepatitis/T.B Control

The PMU is essential to deliver the project end-item within budget and time limitations, in accordance with technical specifications, and, when specified, in fulfillment of project objectives.

5.9 Patient Management Protocol

5.9.1 Emergency:

- 1. Initial reception and computerization of data, issuance of medical record number and preparation of record file.
- 2. Patients seen by C.M.O. initial assessment (brief history and physical examination) is entered on the emergency slip/file initial treatment is started.
- 3. C.M.O calls the medical officer / house officer of the relevant department who takes on of the following action:
 - i. Discharges the patient from emergency department after the patient is stabilized (himself or after consultation).
 - ii. Returns the patient in emergency department and inform the consultant or call such patient is either discharged after some time i.e. 2 hours of admitted later on
 - iii. Patient is straight way admitted by the medical officer himself or in consultation with the consultant
- 4. A separate record is maintained by each department. Each patient discusses at the morning meeting and any pitfalls are any pitfalls are corrected.
- 5. The patient who is admitted is again entered into the computer in the ward, complete history and physical examination is carried out and relevant lab & radiological investigations are ordered. (If not already done in the emergency department).

- 6. The definitive management is either started by the medical officer himself or in consultation with the consultant. (Telephone or physically). The patient is prepared for surgery if required.
- 7. At the evening round of the ward, the patients admitted throughout the day (Through OPD or emergency) are seen by the specialist. Appropriate changes in the management are carried out.
- 8. During the night, medical officer & house officer will be on duty and they will remain in contact with consultant.
- 9. In the morning round all the new admissions and old patients are thoroughly discussed management / treatment changed, surgery ordered or discharge ordered.
- 10. The discharge certificate is either prepared by the house officer or medical officer. If prepared by the house officer, it is countersigned by the medical officer

Appropriate changes are made in the computer record after discharge. The file is sent to the central record.

5.9.2 <u>O.P.D:</u>

- 1. After the initial registration and issuance of computerized number patient is sent to the relevant medical officer with the OPD slip/file.
- 2. The medical officer / house officer of the relevant department performs the initial assessment. The medical officer himself advises the treatment / investigation or refers the patients to the specialist or admits the patient.
- 3. After admission. The same routine is followed which has been mentioned in the case of admission through emergency.

5.9.3 Death or End of Life Management.

- 1. The decision regarding resuscitation is made at the initial stages by the medical officer / house officer or specialist in consultation with the patient himself and / attendants.
- 2. The DNR (Do not resuscitate) patients are only seen by the medical officer/ hose officer at the time of death.
- 3. For the patients to be resuscitated, a special code (blue code) is declared when patient go onto cardiac or the terminal events.
- 4. The policy for very sick / terminal and dying patients is formulated at the hospital administration level and appropriate modifications are decided in the relevant department for each patient.

5. Every death is discussed weekly at the mortality committee at the department and at the hospital level cleared by the Medical Superintendent.

5.9.4 Inventory Control System

The stock keeping and issuance of such items shall also be controlled and monitored through closer supervision and checks and balance system built in the software. The stock and expense of durable and consumable items will be kept in the system and also as hard copies. The main stores computers will be linked with the sub stores computers through networking. The areas like emergency. Outpatient department, Indoor registration desks, Laboratory and Radiology Department, ICUs, etc., will have linkages with the main and sub stores to know about:-

- 1. Stock in hand of various items
- 2. New receipt of these items
- 3. The items which have been issued to other departments
- 4. The Items which are not available
- 5. The expenditure incurred on the purchase.

The budget and details of account shall be linked with the financial control system.

5.9.5 Project Monitoring Committee

A Project Monitoring Committee is proposed hereby as under to monitor the project regarding Revamping of THQ Hospital:

1.	Deputy Commissioner	(Chairman)
2.	District Monitoring Officer	(Member)
3.	Executive Engineer Buildings	(Member)
4.	Assistant Commissioner Concerne	ed (Member)
5.	MS THQ Hospital	(Secretary/Member)

The committee will monitor the progress of the project and will hold regular weekly meeting to review the progress.

5.10 Relationship with Sectoral Objectives

The Government of the Punjab, Primary & Secondary Healthcare Department is in the process of undertaking number of initiatives to improve health care delivery system in the province. The Government of the Punjab is firmly committed to provide health care services at the doorstep of the community through integrated approach. A number of projects to improve emergency health care service particularly targeting on the promptness and quality have been initiated. Although major focus is on disease prevention and health promotion strategies by providing specialist health care services to victims of various diseases in the patients is one of the top most priority. The instant project will be a major wing to health department with line departments.

Mainly the linkage with social welfare and human empowerment, labour and manpower, Education Department, Special Education, Home of the project will be in a vibrant environment in the holistic manner. The scope of the project itself aims to establish horizontal linkage with all the stakeholders through multisectorial approach. The health care facilities and ongoing services provided in the hospital will seek strength and viability from its linkage and public ownership.

6. DESCRIPTION AND JUSTIFICATION OF PROJECT

6.1 JUSTIFICATION OF PROJECT

attached

1. Description, Justification and Technical Parameters

The scheme has been estimated on face of the factual basic requirements and if needed, alterations and has been quoted in this PC-I. The Population of Tehsil 18-Hazari District Jhang is more than 0.295 million. The area of the THQ Hospital 18-Hazari District Jhang is 191,957 SFT land.

6.1 Description and Justification

The Project Management Unit, Revamping Program, Primary and Secondary Healthcare Department planned to start the 2nd Phase of the said revamping program. The instant PC-I is also meant for provision of requisite biomedical and non-biomedical equipment, Electricity, Furniture & Fixture, Signage, HR and outsourcing of services for Revamping of THQ Hospital, 18-Hazari District Jhang.

Revamping of THQ Hospital 18-Hazari District Jhang constitutes of value addition in all major domains of the hospital including improvement of Civil infrastructure, addition of water filtration plant facility, value addition in Emergency ward and making the health facility more equipped with modern bio-medical equipment. State of the art furniture and fixtures complemented by interior and exterior decors are also part of this revamping project backed by the thought of dedicated express line of electricity to ensure smooth operations of hospitals will bring the modern health facilities in healthy and comfortable environment at the door step of masses. Introduction of new model of outsourcing of laundry services to ensure provision of neat and clean bed sheets, pillow covers, blankets etc. round the clock is also a part of this project. Fool proof security and adequate cleanliness measures of whole health facility are also proposed in this PC-I.

Civil work component will be carried out through C&W Department instead of District Health Authority for this hospital. Value addition in Emergency block is proposed in four domains i.e. Triage, Minor O.T., Specialized care room and emergency ward. Addition of Water Filtration Plant facility where it is not available as unclean or polluted water is devastating for human health. A key consideration was made while selecting furniture and its compatibility with hospital grade cleaners, detergents and disinfectants. Signage is an effective interface between the user and intended facility. Effective signage promotes the healthcare facility in a patient friendly manner. Access is an important part of quality of care. A crucial aspect for patient satisfaction is their comfort levels with the facility itself i.e. a person's ease in navigating a facility, and the timeliness in receiving care. Clear and proper signage at strategic points helps patients in reaching their destination without losing much of their valuable time and saves lot of their efforts in unnecessary enquiring from persons. In this regard, the Equipment of Emergency, Bio-Medical, Non-Bio-Medical, Electricity, Signage, Janitorial, Security, Laundry, Maintenance of Generator and Horticulture have been added as per actual requirement of the Hospital. The Equipment of MSDS, IT, Furniture Fixture, Day

Care Center, HR, Medical Gases, Cafeteria are fixed in all hospitals as per yardstick established by P& SH Department. Prior to initiation of this exercise standardization of required facilities was done by committee of experts in P & SH Department and on the basis of it, gaps were identified which would be covered under this PC-I.

Justification for 3rd Revision of PC-I

- 1. Originally the Civil work component of the scheme was planned to be executed by the Health Council of the concerned District Health Authority based on cost estimates prepared by the Infrastructure Wing of PMU and approved by the DDSC. Accordingly, funds of Rs.3, Rs.5 and Rs.10 million were provided during FY 2017-18 for the execution of work as per parameters provided to these THQ Hospitals. However, no reasonable revamping civil work was carried out and hence did not fulfil the requirement and the objectives of the Revamping Program. Now P&SHD has decided to carry out further revamping of Civil work through Communication and Works Department Punjab to accomplish the uniformity of THQ Hospitals with already revamped hospitals of Phase-I. Hence the Rough Cost Estimates of the Punjab Buildings Department has been included in the civil work cost of this scheme.
- 2. Primary & Secondary Healthcare Department (P&SHD) made a decision to shift all the clerical posts in DHQ / THQ hospitals of Punjab to District Health Authorities as per notification dated 24th October, 2017. This administrative decision was taken due to a multiplicity of reasons which were adversely affecting healthcare service delivery in the hospitals. Primarily, these clerical posts were not specialized in any particular field, and therefore, the HR hired against these posts were generalized to the extent that they were not able to perform functions of Hospitals and Health Specific tasks that any medical administration should ideally perform. Additionally, public complaints against the clerical staff on issues such as behavior, performance created an environment of malfeasance in all hospitals. In place of the clerical positions, the Department introduced a New Management Structure (NMS), in all District and Tehsil Headquarters Hospitals. The officers/officials recruited as a part of the NMS have a minimum of 16 years of education. Introduction of New Management Structures (NMS) across all secondary hospitals in the Punjab, has allowed for the overall efficiency of District and Tehsil Headquarters Hospitals. In each Tehsil Headquarter Hospital HR under MNS has been provided for smooth running of the health services. Pay Package for NMS Staff was never been revised since 2017-18, therefore it was decided to approach the P&D Department for revision of Pay package. The PDWP approved revised pay page in its meeting held on 08-02-2022 based on PPS approved in 60th PDWP meeting as under: -

	60 th PDWP Me	eting	
Name of Posts	PPS Assigned	Permissible Range (PKR) & Annual increment	Approved Pay Package
HR & Legal Officer, IT & Statistical Officer, Admin Officer, Procurement Officer, Finance & Budget Officer, Logistics Officer, Quality Assurance Officer, Audit Officer and Biomedical Engineer	PPS-6	75,000-105,000 (8% annual incr.)	75,000
Assistant Admin Officer	PPS-5	50,000-75000 (10% annual incr.)	50,000
Data Entry Operator	PPS-3	35,000-55,000 (10% annual incr.)	35,000

Now the Planning & Development Board vide letter No.12(24)PO(COORD-II)P&D/2022 dated 14-07-2022 has informed that revised standard pay package were discussed and approved by the 83rd PDWP meeting held on 28-06-2022 under the chairmanship of Chairman P&D Board for all ADP funded Project posts of Department /Organizations working in Government of the Punjab. Therefore, the revised Pay Package has been incorporated in the revised PC-I.

- As the gestation period of the PC-I till 30.06.2023, therefore, the cost of NMS has been revised for smooth running of the Tehsil Headquarter Hospitals and hence PC-I has been proposed till 30- 06-2025.
- 4. Infrastructure team has conducted the Joint visits with the team of C&W Department. During the field visits, few alterations were recommended by the technical teams which have been incorporated in the Revised Rough Cost Estimates of the subject scheme and have been attached with the PC-I along with comparative statement. Therefore, Civil works component cost has been increased from Rs. 14.956 million to Rs. 33.801 million due to few changes in the scope and MRS rates (2nd Bi-annual 2022).

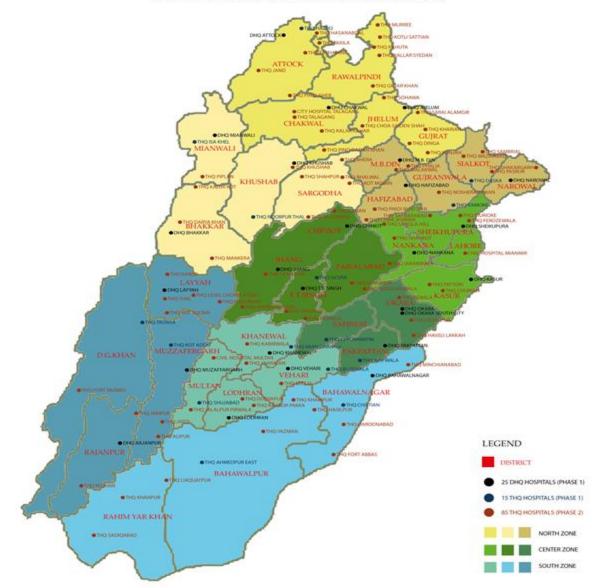
85 THQ Hospitals covered under the Program:

The location map of the 85 THQ hospitals that will be taken up for rehabilitation in this program is given below:

PROJECT MANAGEMENT UNIT PRIMARY & SECONDARY HEALTHCARE DEPARTMENT



LOCATION OF DHQ AND THQ HOSPITALS IN PUNJAB



6.2 SECTORAL SPECIFIC INFORMATION

Social Sectors, Health Department

7. CAPITAL COST ESTIMATES

Financial Components: Revenue **Cost Center:**OTHERS- (OTHERS) **Fund Center (Controlling):**N/A Grant Number:Development - (KB22C36) LO NO:LO17010547 A/C To be Credited:Assan Assignment

-														
\$ 1 <i>‡</i>	S Object Code	2019-2020		0 2020-2021		2021-2022		2022-2023		2023-2024		2024-2025		
		Local Foreign		Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	
	1 A05270-To Others	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
	2 A12403-Other Buildings	A12403-Other 0.000 0.000		0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
	Total	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	

Financial Components: Capital **Cost Center:**OTHERS- (OTHERS) **Fund Center (Controlling):**LE4203 Grant Number:Government Buildings - (PC12042) LO NO:LO22010027 A/C To be Credited:Account-I

PKR Million

S r #	Object Code	2019-	2019-2020 2020-2021		2021	2021-2022		2022-2023		-2024	2024-2025		
		Local Foreign		Local	Foreign	Local	Foreign	Local Foreign		Local Foreign		Local	Foreign
1	A12403-Other Buildings	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
2	A05270-To Others	То 0.000 0.000		0.000 0.000 0.000 0.000 0.000		0.000	0.000 0.000		00 0.000 0.000		0.000 0.000		

PKR Million

Total	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000

			Δ	bstra	ct of (Cost							
Name of THQ Hospital			~	Source		Lalia	n						
Scope of work	Cost in million												
		Original			1st Revis	ed	2nd Revised				3rd Revised		
	Capital	Revenue	Total	Capital	Revenue	Total	Capital	Revenue	Total	Capital	Revenue	Total	
Capital component													
Internal Development	0.000	9.205	9.205	0.000	9.205	9.205	12.737	3.000	15.737	19.674	3.000	22.674	
External Development	0.000	0.860	0.860	0.000	0.860	0.860	7.177	0.000	7,177	3.506	0.000	3.506	
Water filtration plant	0.000	5.600	5.600	0.000	5.600	5.600	0.000	0.000	0.000	0.000	0.000	0.000	
Total Capital Component	0.000	15.665	15.665	0.000	15.665	15.665	19.914	3.000	22.914	23.180	3.000	26.180	
Emergency	0.000	20.463	20.463	0.000	20.463	20.463	0.000	27.876	27.876	0.000	47.336	47.336	
MSDS	0.000	8.647	8.647	0.000	8.647	8.647	0.000	9.654	9.654	0.000	13.438	13,438	
Med. Machinery and Equipment	0.000	46.747	46.747	0.000	46.747	46,747	0.000	60.708	60,708	0.000	89.511	89.511	
Electricity	0.000	13.139	13.139	0.000	13.139	13.139	0.000	13.739	13.739	0.000	13.739	13.739	
IT & QMS & Surveillance	0.000	14.515	14.515	0.000	14.515	14.515	0.000	16.715	16.715	0.000	20.120	20.120	
Furniture and Fixtures	0.000	13.504	13.504	0.000	13.504	13.504	0.000	13.504	13.504	0.000	18.788	18.788	
Interior and Exterior decorations/ Signage	0.000	3.051	3.051	0.000	3.051	3.051	0.000	4.271	4.271	0.000	4.271	4.271	
Day Care Center	0.000	1.600	1.600	0.000	1.600	1.600	0.000	1.600	1.600	0.000	1.600	1.600	
Human resource (HR) plan	0.000	17.220	17.220	0.000	17.220	17.220	0.000	36.750	36.750	0.000	52.459	52.459	
LC Deficit during procurement (currency fluctuation)							0.000	2.274	2.274	0.000	2.274	2.274	
Total Revenue component	0.000	138.886	138.886	0.000	138.886	138.886	0.000	187.092	187.092	0.000	263.536	263.536	
Outsourcing component													
Janitorial Services	0.000	13.793	13.793	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Security and Parking services	0.000	5.595	5.595	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Laundry Services	0.000	3.000	3.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Maintenance (Generator)	0.000	1.670	1.670	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
MEP	0.000	3.693	3.693	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Medical Gases	0.000	1.304	1.304	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Cafeteria	0.000	6.743	6.743	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Horticulture services	0.000	8.735	8.735	0.000	0.048	0.048	0.000	0.048	0.048	0.000	0.048	0.048	
Total outsourcing cost	0.000	44.533	44.533	0.000	0.048	0.048	0.000	0.048	0.048	0.000	0.048	0.048	
Total	0.000	199.084	199.084	0.000	154.599	154.599	19.914	190.140	210.054	23.180	266.584	289.764	
Contingency (1%) only on Civil	0.000	0.157	0.157	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Component							1						
Third Party Monitoring (TPM) (1%)	0.000	1.991	1.991	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Third Party Validation (TPV) (1%)	0.000	1.991	1.991	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	
Grand Total	0.000	203.223	203.223	0.000	154.599	154.599	19.914	190.140	210.054	23.180	266.584	289.764	

				Emergency Equipment											
					ginal			Revis	ed		Revis	ed		Revis	ed
Sr. No.	Area	ITEM DESCRIPTION	Yard Stick	Required Quantity (T=6+S=0+E=6)	Actual Unit Price	Actual Total Cost(Rs)									
1		Table	0		99,750	-		99,750	-		99,750	-		99,750	-
2	Reception Area	Chairs	0		26,775	-		26,775	-		26,775	-		30,000	-
3		Computer Data Entry With Printer	1	1	141,750	141,750	1	141,750	141,750	1	141,750	141,750	1	195,000	195,000
4	3	Table (2.5 X 4)*(N)	0	0	101,850	-	0	101,850	-	0	101,850	-	0	101,850	-
5	6	Chairs *(N)	0	0	26,775	-	0	26,775	-	0	26,775	-	0	30,000	-
6		B.p apparatus wall type*(N)	3	6	15,750	94,500	6	15,750	94,500	6	30,000	180,000	6	30,000	180,000
7		Gurney WITH FOOT STEP)*(N)	3	6	420,000	2,520,000	6	420,000	2,520,000	6	460,000	2,760,000	6	800,000	4,800,000
8		Mercury B.P apparatus*(N)	2	4	33,600	134,400	4	33,600	134,400	4	36,000	144,000	4	36,000	144,000
9		Laryngoscope paeds &adult each*(N)	2	4	10,500	42,000	4	10,500	42,000	4	12,000	48,000	4	20,000	80,000
10		Diagnostic set*(N)	1	2	45,150	90,300	2	45,150	90,300	2	50,000	100,000	2	85,000	170,000
11	Triogo orog	ECG Machine (with trolley) *(N)	1	2	169,785	339,570	2	169,785	339,570	2	180,000	360,000	2	300,000	600,000
12	Triage area	Central oxygen with accessories FOR each	0	0	420,000	-	0	420,000	-	0	-	-	0	-	-
13		NEBULIZER HD*(N)	2	4	125,265	501,060	4	125,265	501,060	4	215,000	860,000	4	300,000	1,200,000
14		SUCKER MACHINE*(N)	1	2	259,350	518,700	2	259,350	518,700	2	275,000	550,000	2	300,000	600,000
15		Resuscitation Trolley (fully equipped))*(N)	1	2	244,733	489,466	2	244,733	489,466	2	400,000	800,000	2	600,000	1,200,000
16		INSTRUMENT CABINET*N	1	2	69,300	138,600	2	69,300	138,600	2	69,300	138,600	2	69,300	138,600
17		MEDICINE TROLLY*N	1	2	60,900	121,800	2	60,900	121,800	2	60,900	121,800	2	60,900	121,800
18		O.T table WITH foot step	1	1	1,417,500	1,417,500	1	1,417,500	1,417,500	1	2,000,000	2,000,000	1	2,500,000	2,500,000
19		Anesthesia Machine	1	1	2,509,554	2,509,554	1	2,509,554	2,509,554	1	3,000,000	3,000,000	1	7,000,000	7,000,000
20		Sucker machine	1	1	259,350	259,350	1	259,350	259,350	1	275,000	275,000	1	300,000	300,000
21		Portable O.T Lights	1	1	304,220	304,220	1	304,220	304,220	1	500,000	500,000	1	900,000	900,000
22 23	Minor O.T	Ceiling o.t light Hot air oven	1	1	414,750	414,750	1	414,750	414,750	1	800,000	800,000	1	950,000	950,000
23		Autoclave	1	1	110,000	110,000	1	110,000	110,000	1	385,000	385,000	1	450,000	450,000
25		Instrument trolley*N	1	1	441,000 54,000	441,000 54,000	1	441,000 54,000	441,000 54,000	1	550,000 54,000	550,000 54,000	1	850,000 55,000	850,000 55,000
26		Defibrillator*N	1	1	310,000	310,000	1	310,000	310,000	1	54,000	650,000	1	55,000 800,000	800,000
27		Instrument cabinet	1	1	69.300	69.300	1	69.300	69.300	1	69.300	69.300	1	69.300	69,300
28		GURNEYS*N	4	1	420,000	- 09,300	1	420,000	- 09,300	1	460,000	- 09,300	1	850,000	- 09,300
29		Sucker machine *(N)	2		259,350	-		259,350	-		275,000	-		300,000	-
30		Nebulizer HD*(N)	2		125,265	-		125,265	-		215,000	-		300,000	-
31		Center Oxygen supply*N	1		420,000			420,000	-			-		-	-
32		Resuscitation Trolley (fully equipped))*(N)	1		237,618	-		237,618	-		400,000	-		600,000	-
33	Constant / specialized	Defibrillator*N	1		302.605	-		302.605	-		650.000	-		800.000	-
34	care room	Pulse- oximeter*(N)	4		104,000	-		104,000	-		160,000	-		225,000	-
35		Bedside-monitor*(N)	4		301,665	-		301,665	-		550,000	-		1,200,000	-
36		ECG MACHINE)*(N)	1		169,785	-		169,785	-		169,785	-		300,000	-
37		BP APPARATUS*N	1		15,750	-		15,750	-		16,000	-		16,000	-
38		FOOT STEP)*(N)	1		3,150	-		3,150	-		4,000	-		5,500	-
39		ATTANDANT BENCH)*(N)	1		5,250	-		5,250	-		8,000	-		10,000	-
40	7	(MOTRIZED BEDS) with accessories (with foot steps*(N)	7	6	210,000	1,260,000	6	210,000	1,260,000	6	400,000	2,400,000	6	600,000	3,600,000
41	6	ECG machine(with trolley) *(N)	1	1	169,785	169,785	1	169,785	169,785	1	169,785	169,785	1	300,000	300,000
42		Pulse- oximeter *(N)	6	6	104,000	624,000	6	104,000	624,000	6	160,000	960,000	6	225,000	1,350,000
43		Bedside-monitor*(N)	3	3	301,665	904,995	3	301,665	904,995	3	550,000	1,650,000	3	1,200,000	3,600,000

	Emergency Equipment														
				Ori	ginal		1st	Revis	ed	2nd	Revis	ed	3rd Revised		
Sr.	Area	ITEM DESCRIPTION	Yard	Required Quantity	Actual Unit	Actual Total									
44		B.P apparatus wall type *(N)	6	6	26,250	157,500	6	26,250	157,500	6	30,000	180,000	6	30,000	180,000
45	Emergency	Nebulizer HD *(N)	2	2	125,265	250,530	2	125,265	250,530	2	215,000	430,000	2	300,000	600,000
46	ward	Resuscitation Trolley (fully equipped))*(N)	1	1	237,618	237,618	1	237,618	237,618	1	400,000	400,000	1	600,000	600,000
47		Defibrillator*N	1	1	299,153	299,153	1	299,153	299,153	1	650,000	650,000	1	800,000	800,000
48		Sucker machine *(N)	2	2	259,350	518,700	2	259,350	518,700	2	275,000	550,000	2	300,000	600,000
49		Wheal chairs *(N)	0	0	31,500	-	0	31,500	-	0	35,000	-	0	35,000	-
50		Stretcher *(N)	0	0	69,300	-	0	69,300	-	0	69,300	-	0	69,300	-
51		ambo bag paeds with Mask*N	5	5	15,750	78,750	5	15,750	78,750	5	19,000	95,000	5	19,000	95,000
52	Generalized	ambo bag adult with Mask* N	5	5	15,750	78,750	5	15,750	78,750	5	19,000	95,000	5	19,500	97,500
53		patient stool * N	2	2	4,085	8,169	2	4,085	8,169	2	4,500	9,000	2	5,000	10,000
54		Portable x-rays (300 M.A)	1	1	3,450,350	3,450,350	1	3,450,350	3,450,350	1	4,300,000	4,300,000	1	9,800,000	9,800,000
55		Portable ultra-sound	1	1	1,403,325	1,403,325	1	1,403,325	1,403,325	1	1,500,000	1,500,000	1	2,400,000	2,400,000
		Total				20,463,445			20,463,445			27,876,235			47,336,200
						20.463			20.463			27.876			47.336

	MSDS												
			Origina	al	1s	t Revis	sed	2n	d Revi	sed	3r	d Revi	sed
Sr. No.	ITEM DESCRIPTION	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)									
1	Histology slide boxes	3	3,100	9,299	3	3,100	9,299	3	4,500	13,500	3	4,500	13,500
2	Labeling Device connected with Computer	3	60,000	180,000	3	60,000	180,000	3	80,000	240,000	3	80,000	240,000
3	Safe Transportation Boxes	2	15,750	31,500	2	15,750	31,500	2	18,000	36,000	2	18,000	36,000
4	Portable Safety Exhaust Hood	1	160,000	160,000	1	160,000	160,000	1	250,000	250,000	1	450,000	450,000
5	Centrifuge Machine	0	149,336	-	0	149,336	-	0	250,000	-	0	325,000	-
6	Hot plates	2	26,250	52,500	2	26,250	52,500	2	45,000	90,000	2	55,000	110,000
7	Water bath	1	157,500	157,500	1	157,500	157,500	1	157,500	157,500	1	300,000	300,000
8 9	Complaint boxes Spine boards with Neck holders	10	3,150	31,500	10 4	3,150 31.080	31,500	10 4	3,150	31,500	10 4	3,150	31,500
9 10	Sensitometer	4	31,080 137,325	124,320 137,325	4	137,325	124,320 137.325	4	31,080 137,325	124,320 137.325	4	31,080 137,325	124,320 137,325
11	Densitometer personal	2	191,391	382,782	2	191,391	382,782	2	191,325	382,782	2	191,391	382,782
12	Box of Films	2	26,250	52,500	2	26,250	52,500	2	30,000	60,000	2	30,000	60,000
13	Aluminium Step Wedge	1	26,250	26.250	1	26,250	26.250	1	26,250	26,250	1	26,250	26,250
14	Non-Mercury thermometer	10	305	3,045	10	305	3,045	10	350	3,500	10	750	7,500
15	Brass or copper mesh screen	2	5,250	10,500	2	5,250	10,500	2	5,250	10,500	2	5,250	10,500
16	Wheel Chairs	0	31,500	-	0	31,500	-	0	35,000	-	0	35,000	-
17	Statures	0	67,830	-	0	67,830	-	0	75,000	-	0	75,000	-
18	Blood Warmer	3	246,750	740,250	3	246,750	740,250	3	275,000	825,000	3	275,000	825,000
19	Sequence Compression Device	2	210,000	420,000	2	210,000	420,000	2	230,000	460,000	2	600,000	1,200,000
20	Blood Bank Refrigerators with	0	682,500	-	0	682,500	-	0	700,000	-	0	1,469,900	-
21	Data Coder	1	84,000	84,000	1	84,000	84,000	1	100,000	100,000	1	-	-
22	Plasma Separator 1	0	4,200,000	-	0	4,200,000	-	0	4,500,000	-	0	4,500,000	-
23	Blood Storage Cabinet	1	682,500	682,500	1	682,500	682,500	1	700,000	700,000	1	1,469,900	1,469,900
24	Resuscitation Trolley	0	244,733	-	0	244,733	-	0	400,000	-	0	491,350	-
25	Ultra sound machine gyne	0	1,403,325	-	0	1,403,325	-	0	1,700,000	-	0	2,150,000	-
26	Delivery Table	0	47,250	-	0	47,250	-	0	47,250	-	0	48,500	-
27	Height and weight scale	4	8,400	33,600	4	8,400	33,600	4	10,000	40,000	4	31,500	126,000
28 29	Suction Electronic Fetal Heart Rate Detector	0	259,350	- 144,375	0	259,350		0	275,000 175,000	- 175,000	0	275,000	
30	Ambo bag	0	144,375 17.325	144,375	0	144,375 17,325	144,375	0	175,000	175,000	0	275,000 19,000	275,000
31	Neonatal size face mask	4	578	2,310	4	578	2,310	4	1,200	4,800	4	1,500	6,000
32	Exchange transfusion trays	2	10,000	20,000	2	10,000	20.000	2	10,000	20,000	2	12.000	24,000
33	Shoe racks SS	4	39,900	159,600	4	39,900	159,600	4	39,900	159,600	4	39,900	159,600
34	Sterilizer	0	2,940,000	-	0	2,940,000	-	0	3,500,000	-	0	7,800,000	-
35	Washer disinfector	0	-	-	0	-	-	0	-	-	0	-	-
36	Packing table	0	-	-	0	-	-	0	-	-	0	-	-
37	Digital Sealer Printer	1	420,000	420,000	1	420,000	420,000	1	480,000	480,000	1	520,000	520,000
38	Backup Auto Clave	0	441,000	-	0	441,000	-	0	550,000	-	0	789,625	-
39	Racks for Manual	10	21,000	210,000	10	21,000	210,000	10	37,500	375,000	10	56,160	561,600
40	Locked Racks for MSDS Data	2	21,000	42,000	2	21,000	42,000	2	37,500	75,000	2	56,160	112,320
41	Eye Wash Station with shower	3	300,000	900,000	3	300,000	900,000	3	350,000	1,050,000	3	350,000	1,050,000
42	Air Curtain	4	50,190	200,760	4	50,190	200,760	4	60,000	240,000	4	60,000	240,000
43	Fire Sand Buckets with stand	5	15,000	75,000	5	15,000	75,000	5	20,000	100,000	5	20,000	100,000
44	Smoke Detectors	10	7,350	73,500	10	7,350	73,500	10	8,500	85,000	10	8,500	85,000
45	Heat Detector	5	8,400	42,000	5	8,400	42,000	5	10,000	50,000	5	10,000	50,000
46 47	Gas Detector Fire Blankets	5	6,300	31,500	5	6,300	31,500	5 10	7,500	37,500	5 10	7,500	37,500
47	Fire Blankets Fire Alarms	10	2,783 5,250	27,825 52,500	10	2,783 5,250	27,825 52,500	10	3,200 6,500	32,000 65,000	10	3,200 6,500	32,000 65,000
48	Identification Bands	100	5,250	52,500	100	5,250	52,500	100	6,500	65,000 300	100	6,500	300
49 50	Wet Flooring Signages	0	431	- 315	0	431	- 315	0	550	- 300	0	3 750	- 300
50	Key Box	6	8,190	49,140	6	8,190	49,140	6	10,000	- 60,000	6	10,000	- 60,000
52	Dehumidifier	0	58,800	-	0	58,800	49,140	0	70,000	-	0	100,000	-
- 32		, v	50,000	-	5	50,000	-	v	70,000	-	3	100,000	

				MS	DS								
		(Origina	al	1s	t Revi	sed	2n	d Revi	sed	3r	d Revi	sed
Sr. No.	ITEM DESCRIPTION	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)									
53	Tourniquet	4	840	3,360	4	840	3,360	4	850	3,400	4	1,500	6,000
54	LAB SAFETY BOX	2	3,150	6,300	2	3,150	6,300	2	4,000	8,000	2	4,000	8,000
55	densitometer	0	210,000	-	0	210,000	-	0	210,000	-	0	210,000	-
56	vending machine	0	630,000	-	0	630,000	-	0	630,000	-	0	630,000	-
57	Automatic shoe cover machine	2	296,100	592,200	2	296,100	592,200	2	332,500	665,000	2	332,500	665,000
58	Vein Finder	2	630,000	1,260,000	2	630,000	1,260,000	2	630,000	1,260,000	2	630,000	1,260,000
59	Blood Sample Vials (BOXES)	3	13	38	3	13	38	3	15	45	3	15	45
60	Bassinets	5	21,000	105,000	5	21,000	105,000	5	22,000	110,000	5	22,000	110,000
61	Chemical Spill Cleanup kit	2	100,000	200,000	2	100,000	200,000	2	100,000	200,000	2	100,000	200,000
62	Digital Tempurature Humidity Guage	4	15,000	60,000	4	15,000	60,000	4	15,000	60,000	4	15,000	60,000
63	Bio Cleaning and Disinfection System	1	650,000	650,000	1	650,000	650,000	1	650,000	650,000	1	2,200,000	2,200,000
	Total			8,647,094			8,647,094			9,653,822			13,437,942
				8.647			8.647			9.654			13.438

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						Equip		4		-1		0	N ¹ -	-1		0		-1
				Orig					levise	d			Revise	d			Revise	d
Sr. Area No.	Name of Equipment	Yard Stick	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Co
1	Semi Auto Clinical Chemistry Analyzer	1	1	0	449,295	-	1	0	449,295	-	1	0	550,000	-	1	0	550,000	-
2	Hematology Analyzer	1	1	0	427,350	-	1	0	427,350	-	1	0	550,000	-	1	0	750,000	-
3	Electrolyte Analyzer	1	0	1	427,350	427,350	0	1	427,350	427,350	0	1	550,000	550,000	0	1	550,000	550,0
4	Blood Gas Analyzer	0	0	0	2,744,858	-	0	0	2,744,858	-	0	0	3,200,000	-	0	0	1,400,000	-
5	Clinical Microscope	1	1	0	132,825	-	1	0	132,825	-	1	0	180,000	-	1	0	250,000	-
6 Laboratory	Water Bath	1	1	0	60,000	-	1	0	60,000	-	1	0	157,500	-	1	0	325,000	-
7	Hot air Oven	1	1	0	210,000	-	1	0	210,000	-	1	0	385,000	-	1	0	450,000	-
8	Distilled water plant	1	1	0	52,500	-	1	0	52,500		1	0	75,000	-	1	0	125,000	-
9	Auto pipettes	10	1	9	31,500	283,500	1	9	31,500	283,500	1	9	40,500	364,500	1	9	45,000	405,0
10	glass wares	0	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-
11	Centrifuge Machine	2	1	1	149,336	149,336	1	1	149,336	149,336	1	1	250,000	250,000	1	1	400,000	400,0
12	Static X-ray Machine	1	1	0	4.200.000	-	1	0	4,200,000	-	1	0	6,000,000	-	1	0	12,000,000	-
13	Mobile X-Ray Machine	0	0	0	3,850,524	-	0	0	3,850,524	-	0	0	4,300,000	-	0	0	9,800,000	-
14	Computerized Radiography System	0	0	0	4,018,245	-	0	0	4,018,245	-	0	0	4,500,000	-	0	0	4,500,000	-
15	Dental X-Ray	0	1	0	282,975	-	1	0	282,975	-	1	0	350,000	-	1	0	525,000	-
16 X-Rays	Lead apron and PPE	2	1	1	52,500	52,500	1	1	52,500	52,500	1	1	60,000	60,000	1	1	85,000	85,0
17	Density meter personal (Add)	0	0	0	210,000	-	0	0	210,000	-	0	0	210,000	-	0	0	250,000	
18	Lead glass /shield	0	0	0	105,000	-	0	0	105,000		0	0	105,000	-	0	0	150,000	-
19	Lead Walls	0	1	0	525,000	-	1	0	525,000	-	1	0	525,000	-	1	0	525,000	-
20	Portable/Mobile Ultrasound	0	1	0	1,371,331	_	1	0	1,371,331	-	1	0	1,500,000	_	1	0	2,400,000	_
21 Ultrasound	Color Doppler RADIOLOGY	1	0	1	3,698,310	3,698,310	0	1	3,698,310	3,698,310	0	1	4,500,000	4,500,000	0	1	5,500,000	5,500,0
22	ICU MONITOR	2	1	1	301,665	301,665	1	1	301,665	301,665	1	1	900.000	900,000	1	1	1,250,000	1,250,0
23		0	0	0	315,000	301,003	0	0	315,000	-	0	0	315,000	-	0	0	550,000	1,200,00
24	Temporary pace maker Defibrillator	1	1	0	299,153	-	1	0	299,153		1	0	650,000	-	1	0	800,000	-
25 CCU		2	1	0	169,785	- 169,785	1	1	169,785	- 169,785	1	1	169,785	169,785	1	0	300,000	300,00
26	ECG Machine Three Channel ETT Machine	0	1	0	2.021.838	- 109,765	1		2,021,838	- 109,705	1		2,200,000	- 109,705	1	0	3.000.000	
27		0	1	0	4,681,790	-	1	0	4,681,790	-	1	0	4,800,000	-	1	0	6,000,000	-
28	Color doplor CARDIOLOGY			-	4,681,790	259,350	1					-				-	300,000	300,00
29	Suction Pump	2	1	1				1	259,350	259,350	1	1	275,000	275,000	1	1		
30	Blood Cabinet	1	0	1	690,539	690,539	0	1	690,539	690,539	0	1	700,000	700,000	0	1	1,500,000	1,500,00
Blood Bank	Centrifuge Machine	2	1	1	149,336	149,336	1	1	149,336	149,336	1	1	250,000	250,000	1	1	400,000	400,00
31 32	Slide viewer	1	0	1	42,000	42,000	0	1	42,000	42,000	0	1	55,000	55,000	0	1	55,000	55,00
	Clinical Microscope	1	1	0	132,825	-	1	0	132,825	-	1	0	180,000	-	1	0	250,000	-
33 Dialysis Unit (10 beds)	Computerized Hemo Dialysis Machine	5	0	5	1,050,000	5,250,000	0	5	1,050,000	5,250,000	0	5	1,600,000	8,000,000	0	5	3,200,000	16,000,00
34	Baby Cot	10	1	9	14,669	132,017	1	9	14,669	132,017	1	9	16,000	144,000	1	9	16,000	144,00
35	Phototherapy Unit	2	1	1	130,200	130,200	1	1	130,200	130,200	1	1	655,000	655,000	1	1	850,000	850,00
36	Infant Warmer	2	1	1	335,638	335,638	1	1	335,638	335,638	1	1	985,000	985,000	1	1	1,050,000	1,050,00
37 Nursery	Pulse Oximeter	6	0	6	104,500	627,000	0	6	104,500	627,000	0	6	160,000	960,000	0	6	225,000	1,350,00
38	Infant Incubator	2	1	1	858,932	858,932	1	1	858,932	858,932	1	1	900,000	900,000	1	1	1,750,000	1,750,00
39	Suction Pump	1	0	1	259,350	259,350	0	1	259,350	259,350	0	1	275,000	275,000	0	1	300,000	300,00
40	Hospital Grade Nebulizer Heavy Duty	2	1	1	125,265	125,265	1	1	125,265	125,265	1	1	215,000	215,000	1	1	300,000	300,00
41	Anesthesia Machine with Ventilator	1	1	0	2,509,554	-	1	0	2,509,554	-	1	0	3,000,000		1	0	7,000,000	-
42	BED SIDE PATIENT MONITOR	2	1	1	441,000	441,000	1	1	441,000	441,000	1	1	550,000	550,000	1	1	1,200,000	1,200,0
43	Defibrillator	2	1	1	308,713	308,713	1	1	308,713	308,713	1	1	650,000	650,000	1	1	800,000	800,0
44	Electrosurgical Unit	1	1	0	507,530	-	1	0	507,530	-	1	0	700,000		1	0	900,000	
45	Operation Table	1	1	0	1,426,215		1	0	1,426,215		1	0	2,000,000		1	0	2,500,000	
⁴⁶ O.T (04)	Ceiling Operating Light	1	1	0	413,013		1	0	413,013	-	1	0	800,000	-	1	0	950,000	-
47	STEAM STERILIZER	1	1	0	3,465,000	-	1	0	3,465,000		1	0	4,000,000	-	1	0	7,800,000	-
48	Suction Pump	2	0	2	259,350	518,700	0	2	259,350	518,700	0	2	275,000	550,000	0	2	300,000	600,0
49	Resuscitation trolley With Crash Cart	2	0	2	259,350	244,733	0	2	259,350	244,733	0	2	400.000	400.000	0	2	600,000	600,0
50		4		4	244,733	244,733 84,000		4	244,733	84,000	0	4	23,000	92,000		1 4	23,000	92,0
51			0			84,000 304,220	0		-		-				0			
52	MOBILE OPERATING LIGHT	1	0	1	304,220		0	1	304,220	304,220	0	1	400,000	400,000	0	1	900,000	900,0
52	Operation Table	0	0	0	1,426,215	-	0	0	1,426,215		0	0	2,000,000	-	0	0	5,000,000	-
	ORTHOPEDIC DRILL	0	0	0	1,108,740	-	0	0	1,108,740		0	0	1,500,000	-	0	0	4,000,000	
54 Orthopedic	Plaster Cutting Pneumatic	1	0	1	276,250	276,250	0	1	276,250	276,250	0	1	450,000	450,000	0	1	1,500,000	1,500,0
55	Pneumatic Tourniquets	0	0	0	262,500	-	0	0	262,500	-	0	0	262,500	-	0	0	300,000	-
56	Orthopedic Instruments	0	0	0	432,623	-	0	0	432,623	-	0	0	550,000	-	0	0	550,000	1

							Equip		4 - 4 -	a.da -	-1	1	0	.	-1		On al F		-1
					Orig					evise	d			Revise	d			Revise	d
Sr. Io.	Area	Name of Equipment	Yard Stick	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Co
57		Portable/Mobile Ultrasound	1	1	0	1,418,958	-	1	0	1,418,958	-	1	0	1,500,000	-	1	0	2,400,000	-
58		Autoclave	1	1	0	441,000	-	1	0	441,000	-	1	0	550,000	-	1	0	850,000	-
59		Delivery Set	10	1	9	31,500	283,500	1	9	31,500	283,500	1	9	40,000	360,000	1	9	65,000	585,0
60		Delivery Table	2	1	1	47,250	47,250	1	1	47,250	47,250	1	1	47,250	47,250	1	1	55,000	55,0
61		BED SIDE PATIENT MONITOR	2	0	2	294,000	588,000	0	2	294,000	588,000	0	2	550,000	1,100,000	0	2	1,200,000	2,400,0
62	ynea (20	D & C Set	2	1	1	34,650	34,650	1	1	34,650	34,650	1	1	40,000	40,000	1	1	60,000	60,0
h	eds)	Vaccume Extractor	1	0	1	259,350	259,350	0	1	259,350	259,350	0	1	300,000	300,000	0	1	350,000	350,0
64		CTG Machine	1	1	0	628,049	-	1	0	628,049	-	1	0	725,000	-	1	0	900,000	-
65 66		ECG Machine Three Channel	1	1	0	169,785	-	1	0	169,785	-	1	0	180,000	-	1	0	300,000	-
67		Portable O.T Light	2	0	2	304,220	608,440	0	2	304,220	608,440	0	2	400,000	800,000	0	2	900,000	1,800,0
68		Baby Cot	2	0	2	14,669	29,337	0	2	14,669	29,337	0	2	16,000	32,000	0	2	16,000	32,0
69		Delivery trolly	2	0	2	47,250 144,375	94,500 144,375	0	2	47,250 144,375	94,500 144,375	0	2	47,250 175,000	94,500 175,000	0	2	47,250 200,000	94,5 200,0
70		Desktop Fetal Heart Rate Detector	1	0	1	3.355.849	144,375	0	1	3.355.849	144,375	0	1	4.000.000	175,000	0	1	7.800.000	200,0
71		Steam Sterilizer Operation Table	0	0	0	1,426,215	-	0	0	1,426,215	-	0	0	2,000,000	-	0	0	2,500,000	-
72	Surgical	MOBILE OPERATING LIGHT	0	1	0	285,466	-	1	0	285,466	-	1	0	400,000		1	0	900,000	-
	mergency (10	Suction Pump	0	1	0	259,350	-	1	0	259,350	-	1	0	275,000	-	1	0	300,000	-
74	beds)	Laryngoscope	0	0	0	9,744	_	0	0	9,744	-	0	0	12,000	-	0	0	20,000	_
75		Set of Surgical Instruments	0	1	0	141.750	-	1	0	141.750	-	1	0	160.000	-	1	0	220.000	-
76		Stretcher	10	0	10	68,250	682,500	0	10	68,250	682,500	0	10	69,300	693,000	0	10	69,300	693,0
77		wheel chair	10	0	10	31,500	315.000	0	10	31,500	315,000	0	10	35,000	350,000	0	10	35,000	350,0
78		foot support	6	0	6	4,200	25,200	0	6	4,200	25,200	0	6	4,500	27,000	0	6	5,148	30,8
79		Resuscitation trolly With Crash Cart	5	0	5	237,618	1,188,091	0	5	237,618	1,188,091	0	5	400,000	2,000,000	0	5	600,000	3,000,0
80		BP Appratus	15	0	15	15,750	236,250	0	15	15,750	236,250	0	15	16,000	240,000	0	15	16,000	240,0
81	Others	Ventilator	0	0	0	2,195,080	-	0	0	2,195,080	-	0	0	3,500,000	-	0	0	5,500,000	-
82		CPAP	1	0	1	1,098,510	1,098,510	0	1	1,098,510	1,098,510	0	1	2,100,000	2,100,000	0	1	2,800,000	2,800,0
83		X-RAY PROCESSOR	1	0	1	858,440	858,440	0	1	858,440	858,440	0	1	925,000	925,000	0	1	1,200,000	1,200,0
84		Hand wash Scrub Double Bay	2	0	2	94,500	189,000	0	2	94,500	189,000	0	2	100,000	200,000	0	2	140,000	280,0
85		Image Inensifier	0	0	0	4,667,460	-	0	0	4,667,460	-	0	0	4,667,460	-	0	0	12,000,000	-
86		Central Medical Gass Pipe Line System	7	0	7	850,000	5,950,000	0	7	850,000	5,950,000	0	7	-	-	0	7	-	-
87		Motorized Patient bed with bed side,Mattress,IV stand, Attendant Bench	4	0	4	210,000	840,000	0	4	210,000	840,000	0	4	400,000	1,600,000	0	4	600,000	2,400,0
88		Sphygmomanometer wall mtd	4	0	4	15,750	63.000	0	4	15,750	63.000	0	4	30,000	120,000	0	4	35.000	140.0
89		Resuscitation trolly With Crash Cart	2	0	2	244,733	489,466	0	2	244,733	489,466	0	2	400,000	800,000	0	2	600,000	1,200,0
90		Defibrilator	1	0	1	299,153	299,153	0	1	299,153	299,153	0	1	650,000	650,000	0	1	800,000	800,0
91		Defibrillator with Monitor	0	0	0	330,750		0	0	330,750		0	0	650,000		0	0	800,000	-
92		ECG Machine Three Channel	0	0	0	169,785	-	0	0	169,785	-	0	0	180,000	-	0	0	300,000	-
93		Syringe pump	1	0	1	108,780	108,780	0	1	108,780	108,780	0	1	125,000	125,000	0	1	200,000	200,0
94	ICU	Suction Pump	0	0	0	259,350	-	0	0	259,350	-	0	0	275,000	-	0	0	300,000	-
95		ICU Monitor	0	0	0	298,200	-	0	0	298,200	-	0	0	900,000	-	0	0	1,250,000	-
96		Instrument Trolley	1	0	1	55,000	55,000	0	1	55,000	55,000	0	1	55,000	55,000	0	1	55,000	55,0
97		Ward instruments	0	0	0		-	0	0	-		0	0	•	-	0	0	-	-
98		Ventilator intensive care	2	0	2	1,600,000	3,200,000	0	2	1,600,000	3,200,000	0	2	3,500,000	7,000,000	0	2	5,500,000	11,000,0
99		CPAP with humidifier	0	0	0	1,098,510	-	0	0	1,098,510	-	0	0	2,100,000	-	0	0	2,800,000	-
00		DELIVERY TROLLY STAINLESS STEEL	1	0	1	23,835	23,835	0	1	23,835	23,835	0	1	47,250	47,250	0	1	47,250	47,2
02		Ambu-Bag, adult	4	0	4	17,325 17,325	69,300	0	4	17,325 17,325	69,300	0	4	19,000	76,000	0	4	19,000 19,000	76,0 76,0
02		Ambu-Bag, paeds TWO BODY REFRIGERATOR WITH	4	0	4	17,325	69,300	0	4	17,325	69,300	U	4	19,000	76,000	0	4	19,000	76,0
	MORTUERY	CASTERS 220v 50Hz Along with Atopsy Table & Lifter Trolley	1	0	1	2,470,546	2,470,546	0	1	2,470,546	2,470,546	0	1	3,000,000	3,000,000	0	1	3,500,000	3,500,0
04		Dental Unit	2	0	2	2,190,000	4,380,000	0	2	2,190,000	4,380,000	0	2	2,820,000	5,640,000	0	2	2,820,000	5,640,0
05		Autoclave	1	0	1	441,000	441,000	0	1	441,000	441,000	0	1	550,000	550,000	0	1	850,000	850,0
06		Dental X-RAY Machine	1	0	1	282,975	282,975	0	1	282,975	282,975	0	1	350,000	350,000	0	1	525,000	525,0
07		Digital Intra Oral Camera	0	0	0	94,500	-	0	0	94,500	-	0	0	150,000	-	0	0	600,000	
08	Dental Unit	DENTAL CAUTERY	0	0	0	84,000	-	0	0	84,000	-	0	0	160,000	-	0	0	900,000	
09	Dentai Unit	Ultrasonic scaling	1	0	1	120,750 52,500	120,750 52,500	0	1	120,750 52,500	120,750 52,500	0	1	175,000 95,000	175,000 95,000	0	1	300,000	300,0 150,0
10		Curing lights	1	0	1			0				0				0	1	150,000	

					Me	dical	Equipr	nent											
					Origi	inal			1st R	levised	k		2nd F	Revise	d		3rd R	evise	d
Sr. No.	Area	Name of Equipment	Yard Stick	Available Quantity		Cost per Unit	Total Cost		Required Quantity	Cost per Unit	Total Cost		Required Quantity	Cost per Unit	Total Cost		Required Quantity	Cost per Unit	Total Cost
112		Dental cabinet	0	0	0	42,000	-	0	0	42,000	-	0	0	70,000	-	0	0	160,000	-
113		Dental examination/surgical instrument sets	4	0	4	157,500	630,000	0	4	157,500	630,000	0	4	175,000	700,000	0	4	175,000	700,000
114	Beds	Fowler beds with Mattress	60	0	60	70,000	4,200,000	0	60	70,000	4,200,000	0	60	110,000	6,600,000	0	60	150,000	9,000,000
		Total					46,747,287				46,747,287				60,708,285				89,510,638
							46.747				46.747				60.708				89.511

				Elec	tricity								
			Origina	l		1st Revis	ed		2nd Revis	ed		3rd Revis	ed
Sr. No.	Item Name	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost
1	Transformers (200 KVA)	1	600,000	600,000	1	600,000	600,000	1	1,200,000	1,200,000	1	1,200,000	1,200,000
2	Transformers (100 KVA)	1	450,000	450,000	1	450,000	450,000	1	450,000	450,000	1	450,000	450,000
3	Transformers (50 KVA)	0	300,000	-	0	300,000	-	0	300,000	-	0	300,000	-
4	Generator (200 KVA)	1	4,000,000	4,000,000	1	4,000,000	4,000,000	1	4,000,000	4,000,000	1	4,000,000	4,000,000
5	Generator (100 KVA)	0	2,300,000	-	0	2,300,000	-	0	2,300,000	-	0	2,300,000	-
6	2 Ton air conditioners (split)	25	55,500	1,387,500	25	55,500	1,387,500	25	55,500	1,387,500	25	55,500	1,387,500
7	2 Ton air conditioners (Cabinet)	12	78,000	936,000	12	78,000	936,000	12	78,000	936,000	12	78,000	936,000
8	4 Ton air conditioners (Cabinet)	3	120,000	360,000	3	120,000	360,000	3	120,000	360,000	3	120,000	360,000
9	Ceiling Fans 56"	20	3,090	61,800	20	3,090	61,800	20	3,090	61,800	20	3,090	61,800
10	Exhaust Fans	36	3,000	108,000	36	3,000	108,000	36	3,000	108,000	36	3,000	108,000
11	Bracket Fans 18"	72	3,280	236,160	72	3,280	236,160	72	3,280	236,160	72	3,280	236,160
12	Dual Connection of Electricity / Express Line	1	5,000,000	5,000,000	1	5,000,000	5,000,000	1	5,000,000	5,000,000	1	5,000,000	5,000,000
	Total			13,139,460			13,139,460			13,739,460			13,739,460
				13.139			13.139			13.739			13.739

			Origina	l	1s	t Revis	sed	2n	d Revi	sed	3r	d Revis	sed
Sr. No.	Item Name	Quantity	Per Unit Cost	Total Cost									
1	Desktop, UPS, LED	30	75,000	2,250,000	30	75,000	2,250,000	30	130,000	3,900,000	30	216,000	6,480,000
2	MS Windows License	30	20,000	600,000	30	20,000	600,000	30	20,000	600,000	30	20,000	600,000
3	Scanner Flatbed with ADF	3	90,000	270,000	3	90,000	270,000	3	150,000	450,000	3	150,000	450,000
4	Heavy duty Printer	7	40,000	280,000	7	40,000	280,000	7	50,000	350,000	7	110,000	770,000
5	Multimedia Projector with Screen	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000
6	Tabs	4	50,000	200,000	4	50,000	200,000	4	50,000	200,000	4	50,000	200,000
7	Laptop	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000
8	MS Windows License	1	20,000	20,000	1	20,000	20,000	1	20,000	20,000	1	20,000	20,000
9	QMS System	1	3,700,000	3,700,000	1	3,700,000	3,700,000	1	4,000,000	4,000,000	1	4,000,000	4,000,000
10	Networking	1	995,000	995,000	1	995,000	995,000	1	995,000	995,000	1	1,200,000	1,200,000
11	Monitoring & Surveillance (CCTV)	1	5,000,000	5,000,000	1	5,000,000	5,000,000	1	5,000,000	5,000,000	1	5,000,000	5,000,000
12	Public Address System	1	1,000,000	1,000,000	1	1,000,000	1,000,000	1	1,000,000	1,000,000	1	1,200,000	1,200,000
	Total			14,515,000			14,515,000			16,715,000			20,120,000
		1		14.515			14.515			16,715			20,120

Furniture and Fixtures

			Origin	al	19	st Revi	sed	2 n	nd Rev	ised	3r	d Rev	ised
Sr. No.	Item Name	Quantity	Unit Price	Total	Quantity	Unit Price	Total	Quantity	Unit Price	Total	Quantity	Unit Price	Total
1	Benches (internal)	60	30,000	1,800,000	60	30,000	1,800,000	60	30,000	1,800,000	60	40000	2,400,000
2	Benches (external)	10	10,000	100,000	10	10,000	100,000	10	10,000	100,000	10	40000	400,000
3	Electric Water Cooler	8	45,000	360,000	8	45,000	360,000	8	45,000	360,000	8	60000	480,000
4	Doctors rooms Furniture	30	70,000	2,100,000	30	70,000	2,100,000	30	70,000	2,100,000	30	125000	3,750,000
5	Examination couches	10	35,000	350,000	10	35,000	350,000	10	35,000	350,000	10	35000	350,000
6	Fire Blanket	5	2,500	12,500	5	2,500	12,500	5	2,500	12,500	5	3000	15,000
7	Fire Extinguisher (Water Based)	30	8,000	240,000	30	8,000	240,000	30	8,000	240,000	30	2500	75,000
8	Acrylic Board	150	2,200	330,000	150	2,200	330,000	150	2,200	330,000	150	2000	300,000
9	Rostrum	2	18,000	36,000	2	18,000	36,000	2	18,000	36,000	2	20000	40,000
10	Blinds for windows	6000	150	900.000	6000	150	900,000	6000	150	900.000	6000	200	1,200,000
	Paintings	100	6.000	600.000	100	6.000	600,000	100	6.000	600.000	100	5000	500,000
	Waste Bin Sets (3 bin)	40	6.000	240.000	40	6.000	240,000	40	6.000	240,000	40	9000	360,000
	Printing	-		1,000,000			1,000,000			1,000,000			1,000,000
	Machinery and Equipment's			, ,			, ,			, ,			, ,
	Refrigerator(Domestic) front glass double door	2	160,000	320,000	2	160,000	320,000	2	160,000	320,000	2	150000	300,000
	Refrigerator glass single door	5	80,000	400,000	5	80,000	400,000	5	80,000	400,000	5	90000	450,000
	Refrigerator 16 cft	5	36,000	180,000	5	36,000	180,000	5	36,000	180,000	5	50000	250,000
	Air Curtain On Door	5	50,000	250,000	5	50,000	250,000	5	50,000	250,000	5	75000	375,000
	Washing machines for pantries	3	13,000	39,000	3	13,000	39,000	3	13,000	39,000	3	11000	33,000
19	Gas Burner for pantries	10	4,800	48,000	10	4,800	48,000	10	4,800	48,000	10	80000	800,000
20	Fire Extinguishers DCP	30	4,800	144,000	30	4,800	144,000	30	4,800	144,000	30	6500	195,000
21	LED TV	15	55,000	825,000	15	55,000	825,000	15	55,000	825,000	15	140000	2,100,000
22	Industrial Exhaust	5	50,000	250,000	5	50,000	250,000	5	50,000	250,000	5	60000	300,000
23	Acrylic Display Board	4	20,000	80,000	4	20,000	80,000	4	20,000	80,000	4	20000	80,000
	Laundry & Washing												
24	Bed Sheets and pillow covers	300	1,250	375,000	300	1,250	375,000	300	1,250	375,000	300	2500	750,000
	Pillows	150	400	60,000	150	400	60,000	150	400	60,000	150	500	75,000
26	Blankets with covers	100	5,000	500,000	100	5,000	500,000	100	5,000	500,000	100	4000	400,000
	Medicine Store		,			, i	·		,				
	Medicine (Iron Racks) 8x6x2 (Required)	20	50.000	1.000.000	20	50.000	1.000.000	20	50.000	1.000.000	20	60000	1.200.000
	Moveable Iron Stairs (Required)	2	15,000	30,000	2	15,000	30,000	2	15,000	30,000	2	20000	40,000
	Lifters (Required)	2	37,000	74,000	2	37,000	74,000	2	37,000	74,000	2	35000	70,000
	Pallets 3x4 (Plastic) (Required)	20	12,000	240.000	20	12.000	240.000	20	12.000	240.000	20	10000	200,000
	Dehumidifier (Required)	1	100,000	100,000	1	100.000	100,000	1	100.000	100,000	1	125000	125,000
32	Insect Killer (Required)	25	8,000	200,000	25	8,000	200,000	25	8,000	200,000	25	6500	162,500
~		20	16,000	320,000	20	16,000	320,000	20	16,000	320,000	20	600	12,000
33	Thermometer (Required)												

Signage and plaques

			0	rigin	al	1st	Revi	sed	2nd	Rev	ised	3rd	Revi	ised
Sr No	Туре	Kinds of Sign Boards	Quantity	Rates	Cost	Quantity	Rates	Cost	Quantity	Rates	Cost	Quantity	Rates	Cost
		External Sign Boards												
1	A1	External Platform/Road Signage (Circular)	6	9,965	59,790	6	9,965	59,790	6	13,951	83,706	6	13,951	83,706
2	A2	External Platform/Road Signage (Triangular)	6	9,116	54,696	6	9,116	54,696	6	12,762	76,574	6	12,762	76,574
3	B1	Main Directional Board	1	110,791	110,791	1	110,791	110,791	1	155,107	155,107	1	155,107	155,107
4	C1	Directional Board (Single Sheet)	10	14,235	142,350	10	14,235	142,350	10	19,929	199,290	10	19,929	199,290
5	C2	Directional Board (Two Sheets)	1	22,154	22,154	1	22,154	22,154	1	31,016	31,016	1	31,016	31,016
6	C3	Directional Board (Three Sheets)	1	29,701	29,701	1	29,701	29,701	1	41,581	41,581	1	41,581	41,581
7	C4	Directional Board (Four Sheets)	1	36,679	36,679	1	36,679	36,679	1	51,351	51,351	1	51,351	51,351
8	C5	Directional Board (Five Sheets)	1	44,543	44,543	1	44,543	44,543	1	62,360	62,360	1	62,360	62,360
9	C6	Directional Board (Six Sheets)	1	52,007	52,007	1	52,007	52,007	1	72,810	72,810	1	72,810	72,810
10	C7	Additional Panel (For Fixation on existing Foundation & Posts)	3	7,823	23,469	3	7,823	23,469	3	10,952	32,857	3	10,952	32,857
11	D1	Departmental Signage on Building	6	46,491	278,946	6	46,491	278,946	6	65,087	390,524	6	65,087	390,524
12	E1	External Map Boards	2	40,563	81,126	2	40,563	81,126	2	56,788	113,576	2	56,788	113,576
		Internal Signage	0		-	0		-	0	-	-	0	-	-
1	F1	Internal Hanging Signage (Main Entrance)	5	89,496	447,480	5	89,496	447,480	5	125,294	626,472	5	125,294	626,472
2	F2	Internal Hanging Signage (Main Entrance 2)	5	68,140	340,700	5	68,140	340,700	5	95,396	476,980	5	95,396	476,980
3	F3	Internal Hanging Signage (Corridor)	4	50.465	201.860	4	50.465	201.860	4	70,651	282.604	4	70.651	282.604
4	F4	Internal Hanging Signage (Corridor 2)	4	51,050	204,200	4	51,050	204,200	4	71,470	285,880	4	71,470	285,880
5	G1	Internal Department Signage on wall	7	12,908	90,356	7	12,908	90,356	7	18,071	126,498	7	18,071	126,498
6	H1	Specialist Name Plaques fixed on wall	20	3,710	74,200	20	3,710	74,200	20	5,194	103,880	20	5,194	103,880
7	J1	Room Name Plaques and Numbers fixed on wall	100	853	85,300	100	853	85,300	100	1,194	119,420	100	1,194	119,420
8	K1	Internal Wall Signage	100	1,401	140,100	100	1,401	140,100	100	1,961	196,140	100	1,961	196,140
9	L1	Room Numbers Fixed on Wall	50	3,556	177,800	50	3,556	177,800	50	4,978	248,920	50	4,978	248,920
10	M1	Advance Fire Exit Sign	10	1,810	18,100	10	1,810	18,100	10	2,534	25,340	10	2,534	25,340
11	M2	Fire Exit Sign Mounted Above the Door	10	1,252	12,520	10	1,252	12,520	10	1,753	17,528	10	1,753	17,528
12	N1	Fire Safety/Equipment Signage	20	2,398	47,960	20	2,398	47,960	20	3,357	67,144	20	3,357	67,144
13	P1	Floor Map Board	5	20,768	103,840	5	20,768	103,840	5	29,075	145,376	5	29,075	145,376
14	Q1	Caution Signage	25	2,140	53,500	25	2.140	53,500	25	2,996	74,900	25	2,996	74,900
15	Q2	Caution Signage	5	644	3,220	5	644	3,220	5	902	4,508	5	902	4,508
16	Q3	Caution Signage	10	1,126	11,260	10	1.126	11,260	10	1,576	15,764	10	1.576	15,764
17	Q4	Caution Signage	15	875	13,125	15	875	13,125	15	1,370	18,375	15	1,070	18,375
.,	чт	Total		0.0	2,961,773	10	0.0	2,961,773	10	1,220	4,146,482	10	1,220	4,146,48
		Designing and Site Supervision	1		88,853			88,853			124,394			124,39
		Grand Total			3,050,626		+	3,050,626			4,270,877			4,270,87
		Granu rolai	1		3,030,020		1	3,030,020			4,210,011			4,210,01

DAY CARE CENTER

Yard Stick as per Women Dvelopment Department

-		C	Driginal		1st	Revised		2nc	Revised		3rc	d Revised	
Sr. No.	ITEMS	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total
1	Cylinder Block	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000
2	Geometrical Cabinet (36 pcs)	1	4,000	4,000	1	4,000	4,000	1	4,000	4,000	1	4,000	4,000
3	Geometrical Solids (10 pcs)	1	2,200	2,200	1	2,200	2,200	1	2,200	2,200	1	2,200	2,200
4	Base for Geometrical Solids (14 pcs)	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000
5	Constructive Triangles (4 box)	1	400	400	1	400	400	1	400	400	1	400	400
6	Metal Insets (10 - shape)	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000
7	Stand for metal insets	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000
8	Paper Board for metal insets (10 Boards)	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000
9	Sandpaper Alphabets (English)	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000
10	Sandpaper Alphabets (Urdu)	3	3,500	10,500	3	3,500	10,500	3	3,500	10,500	3	3,500	10,500
11	Sandpaper Number	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000
12	Hammer Case	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
13	Soft Reading Book	15	200	3,000	15	200	3,000	15	200	3,000	15	200	3,000
14	Shape Sorting Case	2	500 700	1,000 1,400	2	500 700	1,000 1,400	2	500 700	1,000 1,400	2	500 700	1,000 1,400
15 16	Transport Set (Model) Model Puzzles (S)	7	300	2,100	7	300	2,100	7	300	2,100	7	300	2,100
17	Model Puzzles (S) Model Puzzles (B)	7	500	3,500	7	500	3,500	7	500	3,500	7	500	3,500
18	Storybook	20	100	2,000	20	100	2,000	20	100	2,000	20	100	2,000
19	Information Book (Large)	20	350	7,000	20	350	7,000	20	350	7,000	20	350	7,000
20	Basket (L)	10	1.000	10.000	10	1,000	10.000	10	1.000	10.000	10	1.000	10.000
21	Basket (S)	10	600	6.000	10	600	6,000	10	600	6,000	10	600	6,000
22	Color table Box	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
23	ABC Block	4	500	2,000	4	500	2,000	4	500	2,000	4	500	2,000
24	Number Block	4	500	2,000	4	500	2,000	4	500	2,000	4	500	2,000
25	Color Pensils (Large)	5	450	2,250	5	450	2,250	5	450	2,250	5	450	2,250
26	Color Crayons (Large)	5	300	1,500	5	300	1,500	5	300	1,500	5	300	1,500
27	Marker Color (Board and Permanent)	15	395	5,925	15	395	5,925	15	395	5,925	15	395	5,925
28	Fruits Basket (Model Set)	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
29	Vegetables Basket (Model Set)	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
30	Animal Sets	2	600	1,200	2	600	1,200	2	600	1,200	2	600	1,200
31	Insects sets	2	400	800	2	400	800	2	400	800	2	400	800
32	Shape Sorting House	2	1,500	3,000	2	1,500	3,000	2	1,500	3,000	2	1,500	3,000
33	Flash card (Small)	10	120	1,200	10	120	1,200	10	120	1,200	10	120	1,200
34	Flash card (Big)	10	325	3,250	10	325	3,250	10	325	3,250	10	325	3,250
35 36	Sand Play Gym Play	2	1,000 2,000	4,000 3.000	2	1,000 2,000	4,000 3.000	2	1,000	4,000 3.000	2	1,000 2,000	4,000 3,000
30	Straight Mats	20	2,000	40.000	20	1,500	40.000	20	2,000	40.000	20	1,500	40.000
38	Folding Mats	20	2,000	6,000	20	2,000	6,000	20	2,000	6,000	20	2,000	6,000
39	Diaper Changing Mats	3	300	1,500	3	300	1,500	3	300	1,500	3	300	1,500
40	Cube Cushion	2	500	1,000	2	500	1,000	2	500	1,000	2	500	1,000
41	Square Cushion	2	500	600	2	500	600	2	500	600	2	500	600
42	Baby Mirror	3	300	2,400	3	300	2,400	3	300	2,400	3	300	2,400
43	Pink Tower With Stand	1	800	500	1	800	500	1	800	500	1	800	500
44	Dressing Frames	10	500	8,000	10	500	8,000	10	500	8,000	10	500	8,000
45	Monkey Stuffed	2	800	2,400	2	800	2,400	2	800	2,400	2	800	2,400
46	Lion Stuffed	2	1,200	3,400	2	1,200	3,400	2	1,200	3,400	2	1,200	3,400
47	Cater Pillar Stuffed	2	1,700	3,000	2	1,700	3,000	2	1,700	3,000	2	1,700	3,000
48	Stuffed toys (Animal shaped i.e. Moneky, lion, caterpillar etc)	6	1,500	9,000	6	1,500	9,000	6	1,500	9,000	6	1,500	9,000
49	Long Roads with Stands	1	1,500	1,500	1	1,500	1,500	1	1,500	1,500	1	1,500	1,500
	Number Rods	1	500	500	1	500	500	1	500	500	1	500	500
51	Stand Number Rods	1	800	800	1	800	800	1	800	800	1	800	800

DAY CARE CENTER

Yard Stick as per Women Dvelopment Department

Sr. No. TITEMS Vard Sitek (DCC of 25 (Kids) Unit Cest (Kids) Teal (DCC of 25 (Kids) Unit Cest (Kids) Teal (CCC of 25 (Kids) Teal (Kids) Teal (CCC of 25 (Kids) Unit Cest (Kids) Teal (CCC of 25 (Kids) Teal (Kids) <thteal (CCC of 25 (Kids) Teal (Kids)<th></th><th></th><th>C</th><th>Driginal</th><th></th><th>1st</th><th>Revised</th><th></th><th>2nc</th><th>Revised</th><th></th><th>3rc</th><th>d Revised</th><th></th></thteal 			C	Driginal		1st	Revised		2nc	Revised		3rc	d Revised	
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Batt Books (duplication) 20 500 10,000 20 500 10,000 20 500 82 Bottle Brushes 3 300 900	9 FI	un Rattle	15	400	6,000	15	400	6,000	15	400		15	400	6,000
Bottle Brushes 3 300 900 3 300 900 3 300 900 3 300 List of others Items i.e. Kitchen, Office, Electric items -<	0 M	lother feeding Chair	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000
List of others Items i.e. Kitchen, Office, Electric items -	1 S	oft Books (duplication)	20	500	10,000	20	500	10,000	20	500	10,000	20	500	10,000
1 Water Dispenser 1 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,000 14,00				300	900	3	300	900	3	300	900	3	300	900
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21 Carpets 1 100,000 1 100				,	,									100,000

DAY CARE CENTER

Yard Stick as per Women Dvelopment Department

		C	Driginal		1st	Revised		2nd	Revised	I	3rd	Revised	1
Sr. No.	ITEMS	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total
22	Other miscellaneous items	1	218,675	218,675	1	218,675	218,675	1	218,675	218,675	1	218,675	218,675
	TOTAL			1,600,000			1,600,000			1,600,000			1,600,000
				1.600			1.600			1.600			1.600

Sr.			Orig	inal			1st Re	evised			2nd Re	evised				3rd Re	vised	
lo.	NAME OF POST	No. of Employees	Per Month Salary	Per Month Salary for Person	Salary for One Year	No. of Employees	Per Month Salary	Per Month Salary for Person	Salary for One Year	No. of Employees	Per Month Salary	Per Month Salary for Person		No. of Emplyees	Project Pay Scale	Per Month Salary	Per Month Salary for all Person	Salary for Two Years
1	ADMIN OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
	HUMAN RESOURCE & LEGAL OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
3	IT/STATISTICAL OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
	FINANCE, BUDGET & AUDIT OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
5	PROCUREMENT OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
6	QUALITY ASSURANCE OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
7	LOGISTICS OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
8	DATA ENTRY OPERAOTOR (DEO)	2	25,000	50,000	600,000	2	25,000	50,000	600,000	2	35,000	70,000	1,680,000	2	3	44,000	88,000	2,728,000
9	ASSISTANT ADMIN OFFICER	2	40,000	80,000	960,000	2	40,000	80,000	960,000	2	50,000	100,000	2,400,000	2	5	70,000	140,000	4,340,000
-	HR FOR QMS and MSDS and Day Care Center																	
	QMS Supervisor / Information Desk Officer	2	25,000	50,000	600,000	2	25,000	50,000	600,000	2	25,000	50,000	600,000	2		25,000	50,000	600,000
12	Computer Operator	8	20,000	160,000	1,920,000	8	20,000	160,000	1,920,000	8	20,000	160,000	1,920,000	8		20,000	160,000	1,920,000
	Consultants (MSDS) Implementation & Clinical Audit	1	100,000	100,000	1,200,000	1	100,000	100,000	1,200,000	1	100,000	100,000	1,200,000	1		100,000	100,000	1,200,000
	Training on MSDS Compliance for Staff of THQ Hospital	1000	4,000	4,000,000	4,000,000	1000	4,000	4,000,000	4,000,000	1000	4,000	4,000,000	4,000,000	1000		4,000	4,000,000	4,000,000
15	Rent for Vehicle				500,000				500,000				500,000		1		0	500,000
16	Manager Day Care Center	1	45,000	45,000	540,000	1	45,000	45,000	540,000	1	45,000	45,000	540,000	1]	45,000	45,000	540,000
	Montessori Trained Teacher	1	35,000	35,000	420,000	1	35,000	35,000	420,000	1	35,000	35,000	420,000	1]	35,000	35,000	420,000
	Attendant / Care Giver	4	25,000	100,000	1,200,000	4	25,000	100,000	1,200,000	4	25,000	100,000	1,200,000	4	1	25,000	100,000	1,200,000
19	Office Boy	1	20,000	20,000	240,000	1	20,000	20,000	240,000	1	20,000	20,000	240,000	1	4	20,000	20,000	240,000
	Sub Total of H	R Model		4,860,000	17,220,000			4,860,000	17,220,000			5,040,000			4		5,273,000	
		L			17.220				17.220				28.140		1			40.473
	Utilization of HR C Total of HR Cor							1	8.610				11.986 36.75]			52.459

Janitorial Services				
	Original		nal	From 1st Revised to onwards
Assumptions				In the light of decision made during the Progress Review Meeting of
Covered area excluding residential area	30,693	sft		Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the
Covered area assigned to one sweeper	7,500	sft		Chairmanship of Chairman, P&D Board; it was inter alia decided as under:
Number of sweepers required for covered area	4	Persons		"It would be made sure by the P&SH Department that the outsourcing
Road and ROW area	82,040	sft		would be shifted to the non-development side from 1st July 2018 next FY". In view of above, Outsourcing cost has been excluded from this PC-I.
Road and ROW assigned to one sweeper	15,000	sft		
Number of sweepers required for road and ROW area	5	Persons		In view of above, Outsourchig cost has been excluded from this PC-1.
Number of washroom blocks	14	blocks		
Number of washroom block assigned to one sweeper	3	Persons		
Number of sweepers required for total washroom blocks	5	Persons		
Total sweeper in morning shift	14	Persons		
Total number of sweepers in evening shift	7	Persons		
Total number of sweepers in night shift	7	Persons		
Total number of sweepers in all shifts	28	Persons		
Number of sewer men required	3	Persons		
Number of supervisors	3	Persons		
Salary component				
Type of worker	No of	Salary per	Salary for	
	workers	month	One Year	
Sweepers / Janitors	28	22,000	7,264,787	
Sewer men	3	22,000	792,000	
Supervisors	3	26,000	936,000	
Cost of Supply per Month		400,000	4,800,000	
Sub Total (Salary component)			13,792,787	
			13.793	

	S	ecuri	ity and	l Parki	ng
	Original				From 1st Revised to onwards
Assumptions	1				In the light of decision made during the Progress Review
Covered area excluding residences	30,693				Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-
Covered Area per guard	15,000				2018 under the Chairmanship of Chairman, P&D Board; it was
Number of guards	2				inter alia decided as under:
Open area excluding parking area	82,040				"It would be made sure by the P&SH Department that the
Area covered per guard per shift for open area excluding parking	15,000				outsourcing would be shifted to the non-development side from 1st July 2018 next FY". In view of above, Outsourcing cost has been excluded from this
Number of guards for total area	_				PC-I.
excluding parking area	5				101.
Number of gates	2				
Number of guards at gates	4				
Total No of Guard	12				
Total number of all guards for second shift	6				
Lady Searcher	2				
Number of parking areas	1				
Number of guards for parking lot per	-				
shift (Morning+ Evening)	2				
Total no. of Supervisors	2				
Type of worker	No of workers	Salary per month	Salary per Month for all Person	Salary for One year	
Supervisors	2	24,675	49,350	592,200	
Ex-Army	6	21,525	129,150	1,549,800	
Civilian	10	21,000	210,000	2,520,000	
Lady Searcher	2	21,525	43,050	516,600]
Parking	2	21,525	43,050	516,600]
Sub total				5,695,200]
Equipment cost					
Lump sum Provision (Walk Through Gate=1, Metal Detector=4, Walkies Talkies=8, Base Set=1)				400,000	
Sub total				400,000	1
Subtracting Parking Fees				500,000	J
Total Security and Parking Services				5,595,200	
			1	5.595	1

Laundry Services					
		Origin	al		
Number of beds Type of Item	60 No of Beds	Per bed cost per year	Total Cost		
No of Bed	60	30,000	1,800,000		
Transport Charges			1,200,000		
Total for laundry items			3,000,000		
Total			3.000		

From 1st Revised to onwards

In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: "It would be made sure by the P&SH Department that the outsourcing would be shifted to the nondevelopment side from 1st July 2018 next FY". In view of above, Outsourcing cost has

In view of above, Outsourcing cost has been excluded from this PC-I.

	C	Drigin	al	1st Revised	From 1st Revised to onwards
Item Name	Quantity	Cost per year	Total Cost	Progress Review Meeting of Revamping	In the light of decision made during the Progress Review Meeting of Revamping of
Periodical Maintenance Cost				of DHQ/THQ Hospitals held on 01-01-	DHQ/THQ Hospitals held on 01-01-2018
Number of Generators (200 KVA)	-	500,000	-	2018 under the Chairmanship of	under the Chairmanship of Chairman, P&D
Number of Generators (100 KVA)	-	300,000	-	Chairman, P&D Board; it was inter alia decided as under:	Board; it was inter alia decided as under: "It would be made sure by the P&SH
Number of Generators (50 KVA)	1	175,000	175,000	"It would be made sure by the P&SH	Department that the outsourcing would be
Repairs Cost	1	175,000	175,000	Department that the outsourcing	shifted to the non-development side from
HR Cost				would be shifted to the non-	1st July 2018 next FY".
Supervisor	1	40,000	240,000	development side from 1st July 2018	In view of above, Outsourcing cost has been
Generator Operator	3	30,000	1,080,000	next FY".	excluded from this PC-I.
Technical Staff/Mechanic	-	30,000	-	In view of above, Outsourcing cost has	
Total			1,670,000	been excluded from this PC-I.	
			1.670		

MEP

Original

Type of worker / Component	No of workers	Salary per month	Salary per Month for all persons	Salary for One Year	Re
Supervisors	1	56,420	56,420	677,040	
Plumber	1	32,550	32,550	390,600	ť
AC/ Technician	1	34,720	34,720	416,640	
Electrician	2	31,465	62,930	755,160	Ir
Car painter	1	30,380	30,380	364,560	
Total (Salary compone	nt)		217,000	2,604,000	
	No.	Per Unit Cost per Year	Cost per Year for all Items	Cost for One Year	
A/C	66	6,665	439,890	439,890	
Fridge	7	4,000	28,000	28,000	
UPS	12	8,000	96,000	96,000	
Water Cooler	15	4,000	60,000	60,000	
Exhaust	7	3,000	21,000	21,000	
Geyser	15	4,000	60,000	60,000	
Water Pump	3	3,000	9,000	9,000	
Carpentry Work		-	180,000	180,000	
Electrical Work		-	120,000	120,000	
Plumbing Work		-	75,000	75,000	
Sub Total				1,088,890	
General Total				3,692,890	
				3.693	

From 1st Revised to onwards

In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under:

"It would be made sure by the P&SH Department that the outsourcing would be shifted to the nondevelopment side from 1st July 2018 next FY". In view of above, Outsourcing cost has been excluded from this PC-I.

	Medical Gases								
			Original			From 1st Revised to onwards			
	Scope of Work	Monthly Consumption per THQ Hospital	Annual Consumption per THQ Hospital	Rate per Cylinder	Total Annual Cost per THQs	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under:			
	Medical Oxygen Gas in 240 CFTCylinder (MM)	12	144	1850	266,400	"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from			
Oxygen	Medical Oxygen Gas in 48 CFTCylinder (MF)	30	360	1,000	360,000	1st July 2018 next FY". In view of above, Outsourcing cost has been excluded from this PC-			
	Medical Oxygen Gas in 24 CFTCylinder (ME)	40	480	800	384,000	I.			
Nitrous	Nitrous Oxide in 1,620 Liter (XE)	2	24	5,000	120,000				
Oxide	Nitrous Oxide in 16,200 Liter (XM)	1	12	12,500	150,000				
Nitrogen Gas		1	12	2,000	24,000				
		Total			1,304,400				
					1.304				
					1.304				

			eri			
	Pre-Fabrication	Cate	een	(Proc	urement	
					-1	From 1st
			C	Drigin	al	Revised to
						Onwards In the light of decision made during
Sr. No.	Description of work	Unit	Qty	Rate (Rs)	Amount (Rs)	the Progress Review Meeting of Revamping of DHQ/THQ Hospitals
1	Excavation in foundation of building, bridges and other structures, including dagbelling, dressing, refilling around structure with excavated earth, watering and ramming lead upto one chain (30 m) and lift upto 5 ft. (1.5 m) for ordinary soil	Cft	2545	6.13	15,602	held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: "It would be made sure by the
2	Spraying anti-termite liquid mixed with water in the ratio of 1:40.	Sft	4305	2.21	9,514	P&SH Department that the outsourcing would be shifted to the
3	Supplying and filling sand of approved quality from outside sources under floors etc complete in all respects.	Cft	2268	15.62	35,426	non-development side from 1st July 2018 next FY". In view of above, Outsourcing cost has been excluded from this PC-I.
4	Providing, laying, watering and ramming brick ballast 1% " to 2"(40 mm to 50 mm) gauge mixed with 25% sand, for floor and foundation, complete in all respects.	Cft	998	39.15	39,069	
5	Providing and laying damp proof course (1½" thick (40 mm)) of cement concrete 1:2:4, with one coat bitumen and one coat polythene sheet 500gauge	Sft	318	43.34	13,789	
6	Brick work with cement, sand mortar ratio 1:5	Cft	1792	180.25	323,071	
7	Cement concrete plain Ratio 1: 4: 8 including placing, compacting, finishing and curing complete (including screening and washing of stone aggregate)	Cft	427	170.72	72,893	
8	Cement concrete plain Ratio 1: 2 : 4 including placing, compacting, finishing and curing complete (including screening and washing of stone aggregate)	Cft	1043	190.48	198,746	
9	Placing Granite tiles (24"x24"x0.5") using white cement over a bed of ³ / ₄ " (20 mm) thick cement mortar 1:6.	Sft	2160	200.00	432,000	
10	Providing and laying Tuff pavers, having 7000 PSI, crushing strength of approved manufacturer, over 2" to 3" sand cushion i/c grouting with sand in joints i/c finishing to require slope.complete in all respect.	Sft	720	118.00	84,960	
Dre	Total Amount of Platform Construction				1,225,070	
	Fabrication of Canteen Structure Providing and fixing aluminium frame window with double glazzed glass 6mm+6mm thick complete in all respect as approved by engineer	Sft	48	1100.00	52,800	
12	Providing and fixing aluminium frame door with single glazzed glass 6mm thick complete in all respect as approved by engineer	Sft	56	700.00	39,200	
13	Fixing of frameless Glass wall of approved quality and design as approved by engineer	Sft	550	1500.00	825,000	
14	Providing Granite skirting or dado 4/8"(13 mm) thick including rounding of corner and straight ening of top edge and finishing to smooth surface afterplastering	Sft	491	212.00	104,177	
15	Placing & erection of pre-painted Box section tube Columns of M.S sheet 4mm thick of size 4" x4" complete in all respect.	Kg	693	150.00	103,950	
16	Placing & erection of pre-painted Box section tube Rafters of M.S sheet 4mm thick of size 3" x3" with all fittings, complete in all respect.	Kg	1040	150.00	155,925	
17	Placing & erection of pre-painted Box section tube Purlins of M.S sheet 1.6 mm thick (16 Gauge) of size 2" x2", with all fittings, complete in all respect.	Rft	676	120.00	81,144	
18	Placing & erection of pre-painted, Galvanized Sandwitched board of 0.5 mm thick M.S sheet with 50mm PU insulation with all fittings, complete in all respect.	Sft	2640	400.00	1,055,800	
19	Placing & fixing glass wool complete in all respect.	Sft	3024	50.00	151,200	1
I	Placing & fixing Gypsum False Ceiling, complete in all	Sft	3024	70.00	211,680	1

	Ca Pre-Fabrication		t eri een		urement))
		Original			al	From 1st Revised to onwards
21	Providing & Fixing corrugated galvanized iron sheets 22 gauge with EPDM screw fittings, complete in all respect.	Sft	3629	145.00	526,176	
	Total Cost of Pre-Fabrication of Canteen Structure				3,307,052	
	Total Amount (Rs)	4,532,121				
22	Electrification				998,735	
23	Plumbing and Sanitory				410,000	
24	Kitching Fixtures				802,000	
	Grand Total Amount (Rs)				6,742,856	
					6.743	

LANDSCAPE DEVELOPMENT WORKS COST ESTIMATE

			0	rigina	From 1st Revised to onwards	
Sr. No.	Description	Unit	Quantity	Unit Rate Rs.	Amount Rs.	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018
1	SOFT LANDSCAPE TOP SOIL Providing, spreading and leveling of topsoil (sweet soil including manure and fertilizers) as required complete in all respects as per Drawings, Specifications and as approved by the Engineer.	Cft	9,184	20	183,680	Under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: "It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY". In view of above, Outsourcing cost has been
1.2	STONE / PEBBLES Supply and layer of pebbles/stone at specified locations with Landscape base as in Landscape Design approved by the Engineer. GRASSING	Truck	1	34,375	34,375	excluded from this PC-I whereas Rs. 0.048 million has been charged in this scheme against Design Consultancy from development side before the above said decision, hence it is reflected in this PC-I.
а	GRASSING (EXISTING NON MAINTANE LAWNS)					
	Providing and dibbing of Fine Dacca grass where required, including mud filling/leveling and contour shape preparation confirming to the criteria outlined in the Specifications, complete in all respects as per Drawings, Specifications and as approved by the Engineer.	Sft	25,361	7	177,527	
b	GRASSING (NEW LAWNS) Providing and dibbing of Fine Dacca grass, including mud filling/leveling and contour shape preparation confirming to the criteria outlined in the Specifications, complete in all respects as per Drawings, Specifications and as approved by the Engineer.	Sft	9,361	11.25	105,311	
1.4	TREE / SHRUBS (SPREADING) Providing and planting tree / shrub as listed and as arrangement and type shown in the Drawings, in pits of size 305mm x 305mm x 305mm. Dug in improved soil 610mm. deep filled by adding 10% cow dung manure and confirming to the criteria outlined in the Specifications, complete in all respects and to the satisfaction of Engineer.					
а	Trees 18" pot 6'-7' - Terminally, Cassia Fistula, Bauhinia Variegated, Alstonia Choirs, Ficus Yellow, Ficus Black, Jacaranda, Pilken, Mangifera etc.	No's	242	1,500	363,000	
b	Trees 12* pot 3'-4' - Polyalthia Long folia, Terminally, Cassia Fistula, Bauhinia Variegated, Latonia Choirs, Delonix Regia, Ficus Yellow, Focus Black, fichus Starlight, Melaluca, Mimuspps, Pine, Ficus Amestal, Pilken, Palms etc.	No's	60	270	16,200	
с	Plantation of Fruit Plants in the vacant area 12" pot 3'- 4' - Am rood, Jaman, Berri, Mango, Citrus. Including site preparation, plantation, watering and maintenance for six months.	No's	400	600	240,000	
1.5	Shrubs and Ornamental Plants 10° pot Pittosporum Variegated, Murray Small, Ixora Coccinea, Juniper Varigated, Hibiscus Varigated, Carronda Dwarf Spp, Jasmine Sambac(Mottya), Leucophyllum Frutescens(Silvery), Rose, Nerium, Lantana, Canna, Asparagrass, Conocarpus, Acalypha, Callistemon Dwarf, Cestrum, Thabernaemontara Variegated etc.	No's	31,500	69	2,173,500	
а	Shrubs and Ornamental Plants 12" pot Pittosporum Varigated, Ixora Cochineal, Juniper Variegated, Carronade Dwarf, Jasmine Thai, Plumier Robar, Cassia Malacca, Largest mea, Euphorbia, Jestropha Thai etc	No's	4,875	195	950,625	
1.6	GROUND COVERS Providing and planting ground covers as listed and as arrangement and type shown in the Drawings, in pits of size 150mm x 150mm x 150mm. Dug in improved soil 610mm deep filled by adding 10% cow dung manure and confirming to the criteria outlined in the Specifications, complete in all respects and to the satisfaction of Engineer.					
	Ground Cover Plastic Bag Plants Alternant Hera, Dianella, Iresine (Red), Hemercollis(Daylily), Duranta etc	No's	25,000	12	300,000	

LANDSCAPE DEVELOPMENT WORKS COST ESTIMATE

			O	rigina	I	From 1st Revised to onwards
1.7	PALMS					
	Providing and planting palms as per Drawings,					
	specifications and to the satisfaction of Engineer .					
а	Palm 18" pot - Queen Palm, Wodyetia Bifurcate, Washingtonian Palm, Biskarkia etc.	No's	12	3,675	44,100	
b	Palm 18" pot - Phoenix Palm, Cyrus Palm	No's	40	1,800	72,000	
1.8	CREEPERS			1,000	12,000	
	Providing and planting Creepers as listed and as arrangement and type shown in the Drawings, in pits of size 305mm x 305mm x 305mm Dug in improved soil 610mm. deep filled by adding 10% cow dung manure and confirming to the criteria outlined in the Specifications, complete in all respects and to the satisfaction of Engineer.					
	Creepers 12" Pot - Bougainvillea, Bonsai, Qusqualus, Bombay Creeper etc.	No's	100	195	19,500	
2	HARD LANDSCAPE					
2.1	WALK WAYS					
а	Excavation of walkways and edging including brick ballast under 12"X14" curb stones fixing with1:2:4 PCC, supply of 7000PSI tuff tiles 60mmas per approved design fixing on 4" brick ballast compacted and grouting with sand.	Sft	2000	150	300,000	
2.2	BENCHES					
	Concrete Bench 5' wide complete in all respects and to the satisfaction of Engineer as per approved	No's	10	12,562	125,620	
2.3	design. DUSTBINS					
2.0	Complete in all respects and to the satisfaction of		-			
	Engineer as per approved design.	No's	8	23,675	189,400	
2.4	PLAYING EQUIPMENTS					
	Complete in all respects and to the satisfaction of	No's	1	465.760	465,760	
2.5	Engineer as per approved design.			,	,	
2.5	PLANTERS Concrete planters 2' X 2-1/2' complete in all respects and to the satisfaction of Engineer as per approved design.	No's	7	3,850	26,950	
2.6	WATER POINTS (Injector Pump 1HP)	No's	3	45,000	135,000	
3	SOFT LANDSCAPE MAINTENANCE (Including maintenance and up keeping of site for 6 months) after development as per specifications and to the satisfaction of Engineer.	Sft	40,456	7.50	303,420	
4	CONSTRUCTION OF PLANTERS					
4.1	Large Size with keystones fixed with cement with top concrete slab as per design and to the satisfaction of Engineer.	No's	100	550	55,000	
4.2	Medium Size with keystones fixed with cement with top concrete slab as per design and to the satisfaction of Engineer.	No's	1,170	550	643,500	
4.3	Small Size with keystones fixed with cement with top concrete slab as per design and to the satisfaction of Engineer.	No's	240	550	132,000	
5	GAZEEBO Construction of Gazebo 12 X 12' with top fiberglass 3 layer canopy as per approved design and to the satisfaction of Engineer.	No's	1	200,000	200,000	
	Total Amount of - Landscaping				7,256,468	
	PRA(16%)				1,161,035	
ļ	Design Consultancy				100,000	
	TPV (3%)				217,694	

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To,

OFFICE OF THE SUPERINTENDING ENGINEER BUILDINGS CIRCLE No. I, FAISALABAD 20041-9200458 & 041-9201188

The Director, PMU, Primary and Secondary Healthcare Department Punjab Lahore,

BII, No/

Dated 28/09 /2022

Subject:

Reference

ROUGH COST ESTIMATE FOR THE WORK REVAMPING OF ALL THO HOSPITALS IN PUNJAB ONE AT TEHSIL HEAD QUARTER HOSPITAL AT LALIAN (ADP NO .658 FOR THE YEAR 2022-23) No PMU/ (P&SHD)/2020/0450 Dated 19.09.2022

Kindly find enclosed herewith Amended rough cost estimate amounting $23 - 18^{\circ}$ to Rs: 26:565 (M) of the subject scheme based on the rates of 2^{nd} Bi- annual Period

2022 Submitted after attending observation for Administrative Approval and

arrangement of funds.

DA/ Estimate

ERINTENDING ENGINEER Buildings Circle No.1, **TEATSALABAD**

Endst: No.

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Dated _____

_/2022.

A copy is forwarded for information to the: -

/BII,

Executive Engineer Buildings Division Chiniot with reference to his letter 2539 /DB, dated: 27.09.2022

Circle Head Draftsman (Local.). 0/2022

SUPERINTENDING ENGINEER Buildings Circle No.1, FAISALABAD.

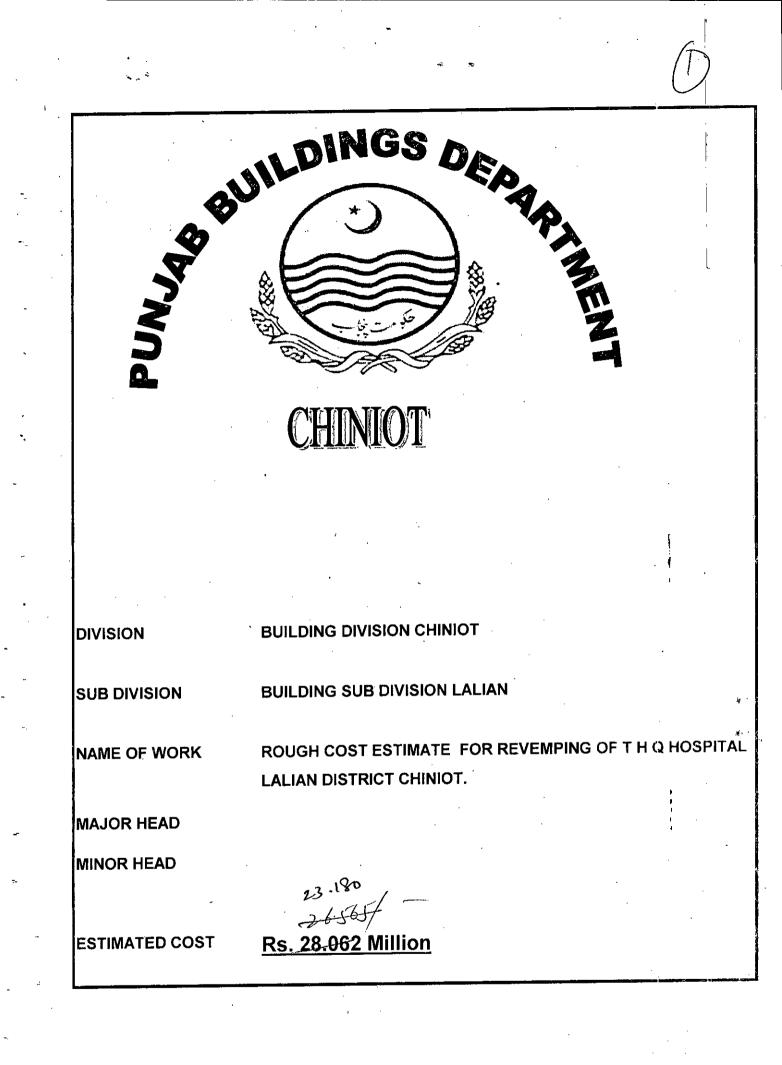
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	IDENTIFICATION OF	SCOPE FOR REV	AMPING OF HEALTH FA	ACILITY	Visit Date: 05/08/2022
THQ	Hospital Lalian	-	. · ·		
Sr No	Item	OPD/G.Floor	Wards/1st Floor	Old Block / Gynae Block	Remarks
1	Porcelain Floor Tile replacement			Damaged full Body Porcelain tiles needs to be replaced with new Porcelain tiles on floors by providing new PCC layer of specified thickness.	Tiles specifications, brand size and Installation will be as per specified C&W standards.
. 2	Porcelain Wall Tile replacement	Old Skirting in rooms is to be replaced with Full Body Porcelain tiles dado on fresh plaster.	Old Skirting in rooms is to be replaced with Full Body Porcelain tiles dado on fresh plaster.	Damaged Full Body Porcelain tiles needs to be replaced with new porcelain tiles on walls.	Tiles specifications, brand, size and Installation will be as per specified C&W standards.
3	Wooden Doors flush or Solid/ Main Doors	Damaged doors need to be replaced with flush doors by matching with the exisiting doors.	Damaged doors need to be replaced with flush doors by matching with the exisiting doors.	All doors need to be replaced with ash ply with grooves, flush doors i/c dolly frame MS chowkats.	Specifications, wood/type of door, polish, door locks an handles will be as per specified C&W standards.
4	Verandah opening (opening to open area)/ MS Windows on Façade			Remove collapsble gates in verandah openings and replace with fly proof with double jali and angle iron frame with ash white paint.	Specifications will be as pe C&W standards.
5	Existing Internal Windows	· .		All old MS internal windows need to be replaced with Aluminum Windows, safety grill with marble sill (no need to replace exisiting Aluminum windows.)	Specifications, Aluminum and glass color will be as per specified C&W Standards
6	Internal Corridors.				· · · · · · · · · · · · · · · · · · ·

Visit Date:

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ROUGH COST ESTIMATE FOR REVEMPING OF T H Q HOSPITAL LALIAN DISTRICT CHINIOT.

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ABSTRACT OF COST Based on 2nd Bi annual 2022 Plinth Area Rates Sr. # Description of work Qty. Unit Amount Remarks B.P P.H E.I S.G TOTAL Main Building Revemping Work 7774 Sft Cement plaster 1:4 upto 20' (6.00 m) height:-P.Sft 3 245 95 252348 7-3.245.9 P.Sft 2647521 /-Providing and laying porcelain tiles skirting / dado 16"x16"x3/8" light colour laid 7774 sft 340.55 340.55 2 in white cement and matching pigment over 3/4" thick cement sand mortar (1:2) i/c filling joints in white cement and matching pigment complete in all respect. (master dwv series class sb or equivalent). Providing and applying weather shield paint of approved quality on external 10342 Sft P.Sft 1,925.45 1,925.45 199132 /-3 surface of building including preparation of surface, application of primer complete in all respect: 128193 /-Providing and fixing Aluminum Fly screen comprising of Fiber /Aluminum wire 260 Sft P.Sft 493.05 4 493.05 guaze (Malasian) fixed in aluminum frame of approved manufacturer brownze Colour / powder coated of size 1- 1/2"x1/2" and 1.6mm thick with rubber gasket i/c cost of Hardwares as approved and directed by the engineer incharge. complete in all respect. 701168 /-1348.4 5 Providing and fitting all types of glazed aluminium windows of anodised bronze 520 Sft P.Sft 1.348.40 colour partly fixed and partly sliding using delux sections of approved manufacturer having frame size of 100 x 20 mm (4"x3/4") and leaf frame sections of 50 x 20 mm (2"x¾"), all of 1.6mm thickness including 5 mm thick imported tinted glass with rubber gasket using approved standard latches, hardware etc., as approved by the Engineer in-charge.

Page 1 of !

C #	^b Density in a formula	0	1	F	linth Area Rates	T		D
Sr. #	Description of work	Qty.	Unit	B.P	P.H E.I S.G	TOTAL	Amount	Remarks
6	P/F 1-1/2" thick solid flush door comprising of 2.5 mm thick Deodar/Ash/Oak ply with grooves, compressed over 2.5 mm thick commercial ply over 1" thick packing wood in style and rails under proper pressure i/c the cost of nails, tower bolt, handles, glue, sawing charges and lacquar polishing to show the grains of ply properly, sand papering and 3/8" thick matching wooden lipping as approved and directed by the Engineer Incharge.	604 Sft	P.Sft	1,437.6 0 <i>So2. 20</i>	· · ·	44 37.6 502-20	&67592_j- 3v3329/~	
7	Providing and fixing 3/8" M.S. square bar 'grill including 1-1/4"x3/16" M.S. Flat Frame 'of windows of approved design including painting 3 coat complete in all respect.	520 Sft	P.Sft	854-75 491.95		<mark>854 - 45</mark> 491.95	444314/- 255814- /-	
8	P/L, Anti-static anti bactrial vinile flooring wuth fixation on existing wall i/c cost of carrage complete self leveling floor / Dado PVC MFRP Conductive flooring (imported) to avoid firction with all chemical polishing etc.	1210 Sft	P.Sft	1100		1100	1331000 /-	
9	Providing and Instalation premimum graded /scratch -resistant Hygienic anti - microbial pvc wall clading of specied thickness duly thermoplastic welded conforming to iso22196 and pasted over 12mm thicnes gupsum board with adhesive /solvent fixed over 14 swg G.I Channal of size 3.5"x2"x3.5" duly screwed on wall i/c the cost of hardware asapproved and directed by the Engineer in Charge	1980 Sft	P.Sft	2500	• • • •	2 500 . 879 ⁷⁷	4950000-/ 3564000/	
10	Removing of door with chowkhat	20 No		438	Each		8760	
11	Removing of window	18 No		341.5	Each		6147	
12	distemper on old surface	26463 Sft	P.Sft	782.5		782.5	207072 /-	
-13	- Raking and washing joints of stone masonry (old work)	<u>3273 Sft</u>	P_Sft				43197./-	
14	Cement pointing struck joints, on walls, upto 20' (6.00 m) hiehgt:	3273 Sft	P.Sft	3,518.35	-	3,518.35	115138 /-	
15	Painting to door and window any type	6619 Sft	P.Sft	1477.4		1477.4	97789 /-	
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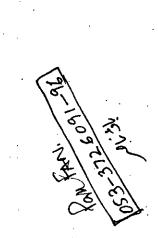
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C #				P	Plinth Area Rates	
<u>Sr. #</u>	Description of work	Qty.	Unit	B.P	P.H E.I S.G TOTAL	Amount Remarks
16	ExtracostformakingholeinMarbleslabforfixtures,Sink,burners,basinVanitiesi/ccosto fbevellingofinternaledgeasapprovedanddirected by the Engineer Incharge.	50	Each	691.8	691.8	34590 /-
. 17	ExtraforBevellingchargesofmarbleedgeinapproveddesigncompleteinallrespectsi/ct hecostofCarborandamdiscasapprovedand directed by the Engineer Incharge.	275	P.Rft	24.9	24.9	6848 /-
18	Providingandlaying3/4"thickfullwidthPrepolishedMarbleslabforVanities/Shelves/T reads/WindowCills,havingUniformtexture(Spotless)withadhesivebondover3/4"thi ck(1:2)cementsandmortori/cthecostofmatchingsealercompleteinallrespectsasappro ved and directed by the Engineer Incharge.China Verona	750	p.sft	412.35 1,309.00	1309	309263/ 981750 1 -
· 19	Dismentling P.C.C 1:2:4	1502 Cft	% cft	11,174.60	11174.6	167823 /-
20	-Dismantling cement concrete with brick-aggregate.	1248-Cft	- % cft -			
21	Cement concrete plain including placing, compacting, finishing and curing complete (including screening and washing of stone aggregate):(f) Ratio 1: 2: 4	989 Cft	∘% cft	38,178.90	38178.9	377710 /-
22	Providing and layng superb quality Cerimices glazed t i l es f l oori ng of M A ST ER brand of speci f i ed si ze in approved desi gn,Col or and Shade with adhesi ve/bond ov er 3/4" thi ck (1:3) cement pl ast er i/c the cost of seal er f or f i ni shi ng the joints i/c cutti ng gri ndi ng compl et e in all respect as approved and di rected by the Engi neer Incharge.Full body Glazed tiles (i i i) 600mmx 1200 mm	3781 Sft	p.sft	340.55	340.55	1287726 /-
23 .	Providing and laying superb qual i ty Cermices glazed tiles of Master brand, ski rti ng/dado of speci fied size, Color and Shade with adhesiv e/ bond ov er 1/2" thi ck (1:2) cement pl ast er i/c the cost of and seal er f or f i ni shi ng the joints, cutti ng gri ndi ng compl et e in al 1 r espect as approved and di rected by the Engi neer Incharge.Full body Glazed Tile 00mmx 1200 mm	6526 Sft	p.sft	340.55	340.55	2222371 /-
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Sr. #	Description of work	Qty.	Unit	Plinth Area Rates		Amount	Remarks
$\frac{JI}{m}$			Ona	B.P P.H E.I S.			
24	Fabrication of heavy steel work, with angle, tees, fl at i r on round iron and sheet iron for making trusses, gi rders, tanks, etc., including cutti ng, drilling, revitting, handl ing, assembling and fixing, but excluding erection in position.	235 kg	% Kg	32,480:05 (1649 <u>9</u> .85+648.85) = 17148.70	.32480.05 17 <i>1</i> 48.70	76393-/ - \$ \$\$ 40300	1_
25	Provi di ng and laying flooring with China Verona Marble having uniform texture (Spot I ess) of r equi r ed si ze and specified thickness, with adhesive bond ov er 3/4" thi ck beddi ng of (1:2) cement sand mortor i/c the cost of matching seal er, cutting, grinding and chemical polishing complete in all respect as approved and directed by the Engineer Incharge $3/4$ " thick (12" x24" /12" x36")	200 sft	P.sft	330.95	330.95	66190 /-	
. 26	Provi di ng and f i xi ng G.1. wi re gauze 24 SWG, 12x12 meshes per square i nch, fixed to steel wi ndows or doors, et c., complet e in all respects.	144 sft	P.sft	987.75	987.75	142236	
. 27	Providing and Instalation premimum graded /scratch -resistant Hygienic apti- microbial pvc wall clading of specied thickness duly thermoplastic welded conforming to iso22196 and pasted over 12mm thicnes gupsum board with adhesive /solvent fixed over 14 swg G.I Channal of size 3.5"x2"x3.5" duly screwed on wall i/c the cost of hardware asapproved and directed by the Engineer in Charge .	< - 1980-Sft	P:Sft	800 Duplicate	800		-
28	Providing and Fixing U.P.V.C Door complete in all respect as approved by engineer incharge.	700 Sft	P.Sft	850	850	595000	
. 29	Providing and Fixing Hydralic Door Closer complete in all respect as approved by engineer incharge.	50 NO	Each	2,932.00	2932	146600	
30	Provision of Counter	1 Job		Detailed Attached		563456	
31	Sanitary instalation		-	Detailed Attached		1580198	
32	Provision of Eletricity (Eletric Instalation) Old Building	10441	Sft	Plinth Area Rates	228	2380470	•

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	Description of work	Qty.	Unit	·	Plinth Are		· · T		
33				B.P	P.H	E.I S.G	TOTAL	Amount	Remarks
34	Sewrage work HDPE P.L G.1 pipe 4" for water supply	210 Rft	lied Attache	364-60 1,935.10	P.Rft		364.60 1935.10	1015678 /· 7 <i>4566</i> 406 371 /·	
35	P.F Steenlee steel corner beading angle 2'x2'x1/16" with double tape fixed with Steenless steel nail complete	1500 Rft		150	P.Rft		150	507454 /	
36	Supply and erection of LED/SMD Light 36 watt 2'x2'	50 No		570 0	Each	•	5700	285000 /	
				-		Ţ	otal =	26,2 76,7647	17815648
	E.I.S. Public Health (2380548/4 1580190/= 3960738/-)	×				Т	otal =	~26,276,764 -/	278156384
37	D/D Cost Of Old Material							-313000 293,000 -3960738 +	17502648/-
				24597	764-/_	۲ -	vet	- 25,983,76 4 = 2	1,463,387/-
38	Add 5% P.R.A Tax		On Rs:	2 5,983,7	64 /		N	<1,299,188 / Ct7 107	12 29 888-1-
39	Add 3% Cotongences		On Rs:	2 5,983,7 245977				(-1) 6 779,513 -/	13901 = 737932/
					/-	-	G Total =	2 8,062,4 65 / 2-3	180458/~
· ,	Technically vetted for 23-180						SAY RS:	- 28,062,000 / 2.3 ·	180
	Amounting to Rs: 24-565 (M)					- ,	OR =		M)
								220	565004/
	seagin		H	the i				2	3-18-0(11)
	Superintending Engineer Buildings Circle No-1, Faisalabad.	Exe Bu	cutive Enig Idings Div Chiniot.	neer, sion			Sub <u>Dif</u> is Buildings	GnaPOfficer Sub Division	• .
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Sr. No.	Description				d Rough co cember 202	st Estimate (1st 1)			r Amendeo nber 2022		mate (1st july to 31	(+)Excess (-) Saving (10-6)	Remarks
		Qty	L	Jnit	Rate	Amount	Qty	U	nit	Rate	Amount		
1	2	3		4	5	6	7		8	9	10	11	12
A	Main Building											,	
	Renovation Repair of Main Building (GF+FF+2nd F = 11760X3= 35280-Sft)	35280	1	Sft	523	18437995	0	1	Each	438	17502649	-935346	
2	Provision of Electricity (old Bldg)	0	1	Sft	0,0	0	0	1	Each	341,5	2380548		
3	Provision of Sanitory Installation	0	1	รถ	0.0	0	0.	1	Each	341.5	1580190	1580190	•••
	Total	· · · · ·				18,437,995					21,463,387	3,025,391.65	
	Add 5 % PST					921,899.75			•		1,073,169,33		
	Add 3% Contingencies				_	553,169.00					643,901.60		
	Grand Total					19,913,064					23,180,458	-	
	Say					19,913					23,180		

Amended Rough cost Estimate For Revamping of All THQ Hospitals in Punjab (Phase-2) in THQ Lallian District Chiniot (ADP-658) COMPARATIVE STATEMENT

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Sr. No,	Description			Approve ecember	d Rough cost Est 2021)	imate (1st July to			r Amende cember 3	ed Rough cost Estir 2022)	nate (1st july to	(+)Excess {-) Saving (10-6)	Remarks
		Qty	υ	nit	Rate .	Amount	Qty	U	nit	Rate	Amount		
1	2	3		4	5	6	7		8	9	10	11	12
i	Main Building Revamping Work												
1	Constn of Water Filteration plant (2213+118=2331/- Psft)	300	1	Sft	2331	699300	0	1	Each	438	0	-699300	
2	Providing and fixing Aluminum Fly screen comprising of Fiber / Aluminum wire guaze (Malasian) fixed in aluminum frame of approved manufacturer/ powder coated of size 1-1/2"x1/2" and 1.6mm thick with rubber gasket <i>i/c</i> cost of Hardwares as approved and directed by the engineer incharge, complete in all respect.	704	1	sa	330.05	232355	260	1	รถ	493.05	128193	-104162	
3	Providing and fitting all types of glazed aluminium windows of anodised/ powder coated partly fixed and partly sliding using delux sections of approved manufacturer section thickness is 1.6 mm. having frame size of 100 x 30 mm (4"x1-1/4") leaf frame sections of 50 x 20 mm (2"x4"), all of 1.6mm thickness including 5 mm thick imported tinted glass with sections are of dull aluminium rubber gasket using approved standard latches, hardware shade.etc. as approved by the Engineer in-charge	1408	1.	. Sñ	- 498 ,50	701888 .	520	- 1	Sft	1348.40	701168	-720	
4	Providing and fixing all types of partly fixed and partly openable glazed anodised/ powder coated aluminium doors, using delux section of M/s Al-Cop or Pakistan sections thickness is 2 mm., having chowkat frame of size 40 x 100 mm ($1/2$ " x 4") and leaf frame of 60x40mm ($2/2$ "x $1/2$ ") wide sections including the cost of λ " (5 mm) thick imported tinted glass with aluminium triangular gola and rubber gasket to support the glass and leaf edging, using approved standard fittings, locks, 3" (75 mm) wide long handles and hardware any required as approved by the local glass is used engineer in-charge	996		Sft	965 00	961140	0	1	Sň	0.00	Ų	-961140	
5	Supply and installation premimum graded/scratch-resistant Hygienic anti- microbial Pvc wall cladding of specified thickness duly thermoplastic welded conforming to (ISO:22196) and pasted over 12mm thick gypsum board with adhesive/solvent fixed over 14–SWG G.I Channael of size 3.5"X 2"X3.5" duly screwed on wall i/c the cost of hardwares as approved and directed by the Engineer In-charge (b) 2.5 mm thick	2003	1	Sft	866.00	1734598	1980	1	Sfi	1800.00	3564000	1829402	
6	Distempering on old surface	25219	100	Sft	782.50	197339	26463	100	Sft	782.50	207073	9734	
7	Prepairing Surface and Painting Doors & windows any Type on Both surface (2 coats)	1659	100	Sít	1464,20	24291	6619	100	รถ	1477,40	97789	73498	
	Providing and fixing 2'-9" high stair railing comprising of non magnetic (304) Stain less steel 2" dia pipe railing of 18 SWG welded with vertical posts of 2" dia stainless steel round/ Squar pipe/ Tong (chimta) @ 2-ft c/c fixed on alternate steps with 3" long steel screws and brass rawal plugs , 3-Nos diagonal stainless steel pipes of 1/2" dia passes through goties fixed on vertical post, i/c stainles steel welding, fixing & polishing complete in all respects as approved and directed by the Engineer Incharge.	30	1	Rít	2057,00	61710	0	1	Rfi	1478,40	0	-61710	
9	Provision of shed (100x15.50)	1550	1	Sſt	597,00	925350	0	1	Stì	0,00	0	-925350	

Amended Rough cost Estimate For Revamping of All THQ Hospitals in Punjab (Phase-2) in Lallian District Chiniot

10	Sewerage work										1015678		
11	Provision of Tuff Tiles (600x30)	·				880723	0	1	Rft	0,00		134955	
	· ,	18000		Sfi	279.25	5026500	0	I	Sfi	0,00	0	-5026500	
12	Provision of Plastic water Tanks 500 Gal capacity	Т	Т	Each	18000.00	18000	O	1	Sñ	1.00	0 -	-18000	
13	Provision of electric Poles	10	Í	Each	72000,00	720000	0	1	Sû	2.00	0	-720000	
14	Provision of PPRC pipe 3" dia for water supply	400	ι	Rfi	173 00	69200	0	I	Rft	1478 40	o	-69200	
15	Provision of Valves 3" dia for water supply	3.	I	Rít	1500.00	4500	0	I	Rſt	1478.40	· 0	-4500	
16	Provision of GI pipe 4" dia for water supply	210	I	Rít	883 40	185514	0	1	Rû	1478.40	0	-185514	
17	Providing, laying, cutting, jointing, testing and disinfecting High Density Polyethylene Pipe (HDPE-100) working presure pipe, Beta/ Dadex/ Popular/ IL or equivalent, in trenches, as approved & directed by the engineer incharge, complete in all respects.(c) PN-10 (SDR-17) (ii) 110 mm						210.00	t.00	Rft	364.60	76566	76566	
18	Internal EI in waiting	1000	1	Sfi	118,00	118000	0	l	SA	0.00	0	-118000	
19	Razor Cutt wire 24" diameter	600	1	Rít	451,00	270600	0	1	Rñ	1478.40	0	-270600	
20	Provision of ramp					70080	0	I	Rít	1479,40	0	-70080	
21	Revamping of main enterance Gate					507454	0	I	RĤ	1480.40	0	-507454	
22	Providing and fixing 2"X2" Stainless Steel 14 SWG Corner Guard angle with bevelled corner and 0.8 mm bend at edges duly pasted with premium grade self-adhesive glue strips with excellent hold/(double sided Tape) as approved and directed by the Engineer Incharge.	650	1	RĤ	640.00	507454	1500	l	Ríi	150	225000	-28245-	
23	Supply and erection of single core PVC insulated, PVC sheathed copper conductor, 250/440 volts grade cable (BSS-2004), in prelaid PVC pipes/M.S. conduit/G.I. pipe/wooden strip batten/wooden casing and capping/trenches, etc. (rate for cable only):-(7/0.064)	800	1	Rſţ	79.40	63520	0	1	Rſt	0	()	-63520	k
24	Supply and erection of Ceiling lights	300	1	Each	450.00	135000	0	 I	Each	1	0	-135000	
	Providing and fixing high quality LED SMD Panel Light 2 ft×2 ft of specified wattage and Luminous flux with Polystyrene bowl/prismatic cover made of Philips as approved and direced by the Engineer												
	Lumens: 110Lumn/Watt (36 Watt)		·····				50.00	1.00	Each	5,700.00	285000	285000	··· ·· ···
26	Removing Doors	26	1	SA	331.65	8623	20	1	Each	438,00	8760	1490	
27	Removing Windows	18	1	Sít	258.70	4657	18	1	Each	341,50	6147	115156	
28	Providing and laying superb quality Porcelain glazed tiles of Master brand, skirting /dado of specified size,Color and Shade with adhesive/bond over 1/2" thick (1:2) cement plaster i/c the cost of and sealer for finishing the joints,cutting grinding complete in all respect as approved and directed by the Engineer Incharge. Full body Glazed tiles 400 mm x 400 mm (For Dado)	0	1	Sft	237.00	- 0	7774	1	Sft	340,55	2647436	199130	

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29	Providing and applying weather shield paint of aproved Quality on Extennal surface (Old Surface)	0	I	Sfi	0.00	0	10342	100	ŚŔ	1925,45	199130	303329	-	
30	P/F 1-1/2" thick solid flush door comprising of 2.5 mm thick Commercial ply compressed over 2.5 mm thick commercial ply over 1" thick packing wood in style and rails under proper pressure <i>i/c</i> the cost of nails, tower bolt, handles, glue, sawing charges, Painting charges, sand papering and 3/8" thick matching wooden lipping as approved and directed by the Engineer Incharge.	p	1	SN	0,00	0	604		Sn	502,20	303329	444314		
31	Providing and fixing M.S. grill fabricated with MS Square polished Vertical/horizontal Bars of specified size @ 4" c/c * passed through punched holes in MS Patti of 1-114"x1/8" //c the cost of 1-1/4"x1/8" MS patti for Frame of windows and painting 3 coat complete in all respect as approved and directed by the Engineer Incharge.(i) 3/8" Squar Bars	. 0	1	รก์	1,00	Ð	520	1	Sñ	854,45	444314	,. 1331000	· .	
32	Supply and installation anti incrobial Hygenic flooring (with anti bacterial agent) conforming to (ISO:22166) of specified thickness duly welded with thermoplastic equipment placed over self levelling adhesive as approved and directed by the Engineer Incharge.	0	I	sn	0.00	0	1210	1	Sñ	100.00	1331000	624360		ı.
33	Supply and installation of Clip-in tile of specified thickness non-porous Alumnium false ceiling of specified size fitted with 'Clip-in' suspension system hanged on Concealed T/Shiplap edge/runners @ 600 mmX600 mm grid, Edge Trims fasten on wall with plug and screw @ 500 mm /c/ i/c cutting charges of tiles to required size, suspension rods and joints sealed with silicon if required of DAMPA/Demark, as approved and directed by the Engineer Incharge. (b) Bevelled edges & flange 21.5 mm (iii)600 mmX 600 mm	0	1	Sñ -	0.00	0	1210	l	Sft	516 00	624360	137		
34	Cement Pointing struck joints, on walls upto 20 Ft Height.	0	100	Sñ	0,00	0	3273	100	Sft	3518,35	115156	73498		ł
35	Extra cost for making hole in Marble stab for fixtures, Sink,burners, basin Vanities i/c cost of beveiling of internal edge as approved and directed by the Engineer Incharge.		I	Each	0,00	0	50		Each	691.80	34590	34590		
36	Extra for Bevelling charges of marble edge in approved design complete in all respects i/c the cost of Carborandam disc as approved and directed by the Engineer incharge	0	J	Rú	0,00	0	50	275	ŔŰ	24.90	5	5		
37	Providing and laying flooring with China Verona Marble having uniform texture (Spotless) of required size and specified thickness, with adhesive bond over 3/4" thick bedding of (1:2) cement sand mortor i/c the cost of matching sealer, cutting, grinding and chemical polishing complete in all respect as approved and directed by the Engineer Incharge	0	1	sa	. 0.00	0	750		Sñ	412 35	309263	309263		4. () () () () () () () () () (
38	Dismantling PCC (1:2:4)	0	100	Sft	8421,60	0	1502	100	Cft	11174,60	167842	167842		
39	Cement concrete plain including placing, compacting, finishing and curing complete (Including screening ans washing of stone aggregate) (f) Ratio (1:2:4)	0	100	• Sft	8422,60	0	989	100	Cfi	38178.90	377589	377589		
40	Providing and laying superb quality Ceramic tile floors of Master brand of specified size, Glossy/Matt/Textureo/approved Color and Shade as per approved design with adhesivebond, over 3/4"thick(1;2)cement sand plaster i/c the cost of sealer for finishing the joints i/c cutting grinding completeinalirespectsandasapprovedanddirected by the Engineer Incharge. For Floor) 12"x36"	0	I	Sn	0,00	0	3781	1	sn	340,55	1287620	1287620		

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	Providing and laying superb quality Ceramic tile of Master brand of specified size.Glossy/Matt/Textureofapproved Color and Shade as per approved design with adhesivebond, over 3/4"thick(1.2)cement sand plaster l/c the cost of sealer for finishing the joints i/c cutting grinding completeinal/respectsandasapprovedanddirected by the Engineer Incharge For dado) 12"x36"	0	1	SA	0.00	0	6526	1	sn	340.55	2222429	2222429	
	Fabrication of heavy steel work, with angle, tees, flat iron round iron and sheet iron for making trusses, girders, tanks, etc., including cutting, drilling, revitting, handling, assembling and fixing, but excluding erection in position.	0	ı	Kg	0,00	0	235	100	Кg	16499,85	38775	38775	
43	Erection and fitting in position iron trusses, staging of water tanks, etc.	0	I	Кg	0,00	0	235	100	Кg	648.85	1525	1525	•
	Providing and laying flooring with China Verona Marble having uniform texture (Spotless) of required size and specified thickness, with adhesive bond over 3/4" thick bedding of (1:2) cement sand motror ic the cost of matching sealer,cutting, grinding and chemical polishing complete in all respect as approved and directed by the Engineer Incharge i) 1/2" thick1/2*12*1/2*524"	U	ł	รนิ	L.00	IJ	200	1	Sñ	330.95	66190	66190	
45	Providing and fixing G.I. wire gauze 22 SWG, 12x12 Per Sfi.complete with flat iron patti ½"x 1/8" (13 Rs.4.70 per Sft. or Rs.50.60 P SQM mmx3 mm) and machine made screws.	0	ł	sfi	1.00	0	[44	1	SA	171.30	24667	24667	
	Providing and fixing Openable door comprising of 3mm thick UPVC hollow profile chowkat frame of 60mmx64mm and leaf frame 60 mmx106 mm both duly reinforced with G I box frame inside the void with 20 mm wide panel with grooves on both sides <i>i</i> /c the cost of hardwares, hinges, four bolt and cutting changes on approved & directed by the Engineer Incharge	0.	1	Sû	0.00	0	700	1	Sû	850.00	595000	595000	
	Providing and fixing auotomatic hydraulic operated door closer imported heavy duty complete in all respect as approved and directed by the Engineer Incharge.	0	1	Sft	2800,00	()	50	J	Each	2932.00 ,	146600	146600	
48	Counter	0	1	Each	0,00	0	1		Each	563456.00	563456	563456	
	Total					18,650,995.00		<u> </u>			17,815.648.55	15900405	
	Credit of Old material		1					<u> </u>					
	Doors	19	I	Each	7000.00	-133000	19	1	Each	7000,00	-133000	0	
		7	1	Each	5000.00	-35000	20	1	Each	6000.00	-120000	-85000	
L	Windows	18	1	Each	2500.00	-45000	4	1	Each	2500,00	-10000	35000	
L							10	1	Each	5000,00	-50000	-50000	
	Net Total					18,437,995.00	•	[17,502,648.55	-100000]

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Sr. No.	Descriptio	n		As per Approved Rough cost Estimate (1st July to 31st December 2021)						er Amende scember	ed Rough cost Esti 2022)	(+)Excess (-) Saving (10-6)	Remarks		
			Qty	r	Unit	it	Rate	Amount	Qty	U	Init_	Rate	Amount		
1	2		3		4		5	. 6	7		8	9	10	11	12
	Electric Installation	· · · · · · · · · · · · · · · · · · ·									[
	Area of Old Building		0	-	1	Sft	0.0	0	10441	1	Śfi	228 00	2380548	2380548	
		-	Fotal					0					2380548	2380548	
	2							-							
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ir. Io.	Description				ed Rough cost E ber 2021)	stimate (1st July			per Ameno 1 Decemb	ded Rough cost E: er 2022)	stimate (1st july	(+)Excess (-) Saving (10-5)	Remarks
		Qty	L	Jnit	Rate	Amount	Qty	U	nit	Rate	Amount		
1	2	3		4	5	6	7		8	9	10	11	12
	Internal Sanitary Work				·			+					
	Providing and fitting Europeon Coupledset of Water Closet(WC) and flushing Cisternof PORTA brand(fullsize)i/c the cost of CP/rubber connection.thimble.seatcoverandrawalholtscompleternallrespectsasappr oved and directed by the Engineer Incharge	0	1	sn	0.0		8	1	Each	19987,90	159903	159903	
	Providing and fitting glazed earthen ware water closet, squatter type (Orisa pattern), Seperate with foot rest.	0	1	50	0.0	o	32	1	Each	2458,35	78667	78667	
	Providing and fitting glazed earthen ware wash hand basin 56x40 cm (22"x16") including bracket set, waste pipe and waste coupling, etc.coloured, with pedestal	0	I	SA	0.0	0	32	ı	Each	5450,60	[744]9	174419	
	(b) Vanity Basin	0	1	Sñ	1.0	0	40	1	Each	4329.95	173198	173198	
	Providing and fitting plastic made low down flushing cistern 13.63 litre (3 gallons) capacity, including blacket set, copper connection, etc. complete (coloured)	0	ı	Sft	0.0	0	32	I	Each	2649.35	84779	84779	
	P/F P-Trap 4" dia glazed	0	1	sn_	1.0	0	60	1	Each	283 15	16989	16989	
	Providing and fixing looking glass 55x40 cm (22"x16") size and 5 mm thick, first quality.	0	ı	sn	0.0	0	30	ı	Each	638,15	19145	19145	
	P/F C.P Bib cock 3/4" dia.	0	1	≦ S∩	0.0	0	40	1	Each	775 00	31000	31000	
	P/F C.P Bib Tee STop cock 1/2" dia.	0	}	<u>sn</u>	0.0	0	80	<u> </u>	Each	955.00	76400	76400	
	P/F Chromium plated shower rose: 3/4"x6"	0	1	sri	0.0	0	0	1 1	Each	1198.00	0	0	
	Providing and fixing, chromium plated mixing valve, for washe hand basin, sink or shower.	U		sn	0.0	0	30		Each	2228.75	66863	66863	
-	Providing, laying, testing and commissioning of POLYPROPYLENE RANDOM COPOLYMER (PPRC) water supply pipe (Dadex /Popular/ Beta or equivalent) with specified pressure rating PN (PRESSURE NOMINAL)and conforming to DIN 8077-8078 code i/c cost of solvent, specials, making tharries complete in all respect as approved and directed by Engineer Incharge.(Internal/External Diameters mentioned) PN-16 pipe												
	(ii)(3/4") 25 mm	0	1	รถ	0.0	0	200	+	Rfi	57.95	11590	11590	
	(iii)(1") 32 mm	0	Ĺ	\$A.	0.0	0	300	† †	Rat	93.65	28095	28095	
	Providing, fixing, testing and commissioning of μ-PVC (Unplasticized Polyvinyl Chloride) Nikasi/ waste pipe make of Dadex /Popular/Beta or equivalent, plan /socket ended conforming to code EN-1329 of specified SDR (Standard Dimension Ratio) including the cost of specials and Solvents complete in all respect as approved and directed by the Engineer Incharge Type (SDR 41/SN-4)												
	(v)4"(110 mm)	0	<u> </u>			 		<u> </u>					
	(ii)2"(60 mm)	0		Sfi Sfi	0,0	0	0	1	Each	217 25	0	0	
	Providing and fixing stainless steel sink with drain board size (48"x24")	·	+-						Each	88.45	0	0	
	i/c bracket set.	0	I	Sfi	1.0	0	1	1	Each	6405,30	6405	6405	

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Providing and fixing CP bath Room Set made of Sonex/Master/Faisal comprising of 3-No Tee stop cocks, lever type Basin Mixer, double Bib Cock, open wall shower, Muslim shower, waste coupling and bottle trap etc. complete in all respect as approved and directed by the Engineer incharge.	0	1	Sû	2 0	0	- y	1	Each	33004.00	297036	297036	
Providing/fixing Electric water heater (Goyser) comprising of tank of 14 SWG, GI sheet and external cover of 22 SWG MS sheet, insulated with 4" thick high density glass wool, imported thermostat <i>i/c</i> electric rod, safety valve (Ambassador / Canon) <i>i/c</i> cost of accessories & making connection complete in all respect as approved and directed by Engineer. Incharge.(i) 15 Gal	0	1	Sń	30	ñ	y	ı	Each	19819,00	178371	178371	
Providing, laying, cutting, jointing, testing and disinfecting G I. pipeline in trenches, with socket joints, using G.I. 2 bends, valves, crosses, unions and pipes of B.S.S. 1387-1967 complete in all respects, with plugs, etc. is included in the rates, specials and valves												
ii) Medium Quality		<u> </u>								1	<u> </u>	
(a) ½" i/d (15 mm) 2 65mm thick	0	1	RA	00	9	250		Rft	168 30	42075	42075	
b) ½" t/d (20 mm) 2 65mm thick	0	1	Rű	0.0	0	300	1	Rft	216.00	64800	64800	
C') 2" i/d (65 mm) 3.65mm thick	Û	_!	Rfi	0.0	0	150	1	Rfi	469,70	70455	70455	
Total		· · ·-·			0					1580190	1580190	
				·								
								<u> </u>				
				<u>-</u>	<u> </u>						<u> </u>	

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MAIN	BUILDIN	G

Cement plaster	1:4 upto	> 20' (E	6.00 m) he	ight:	- ½" (13 m	im) th	ick					
E M.O Room G.F	2	(10	+	20)	5	. I	=	300	Sft	
L H V Room	2	(10	+	13 5/8)	5.	1	=	307	Sft	
Bllod Transfar	2	(10	+	20)	5		=	300	Sft	
Lab	-2	(12	+	19)	5		. = .	310	Sft	
Blood Bank	2.	(10	+	19)	5		=	290	Sft	
M.O Room	2	(16 1/2	+	13 5/8)	5		=	301	Sft	
waiting	2	(10 3/4	+	20)	5		=	307	Sft	
specilist	2	(21	+	12)	5		=	330	Sft	
Treatment	2	(10	+	16)	5		=	260	Sft	
Rataring ,M S Offic	2	(8 2/3	+	11)	5		=	197	Sft	
Rataring ,M S Offic	2	(16 2/3	+	13 5/8)	5		=	303	Sft	
Adman office	2	(16 2/3	+	13 5/8)	5		= .	303	Sft	
Madicine	2	(13 1/2	+	12)	5		= .	255	Sft	
N.H.Q	2	(16 1/2	+	12)	5		. =	285	Sft	
office	2	(10	+	12)	5		=	220	Sft	
lab	2	(12	+	12)	5		=	240	Sft	
Corri Door	2	х	87 3/4	х	5				=	878	Sft	
Corri Door	2 [.]	х	58 3/4	х	5				=	588	Sft	
Corri Door	2	x	148 5/8	x	5				=	1486	Sft	
Corri Door	2	х	31 1/2	x	5				=	315	Sft	
								Total	=	7774	Sft	

"Providing and laying Cermices tiles skirting / dado 16"x16"x3/8" light colour laid in white cement and matching pigment over 3/4" thick cement sand mortar (1:2) i/c filling joints in white cement and matching pigment complete in all respect. (master dwv series class sb or equivalent)

pignient compres			•		•						
E M.O Room G.F	2	(10	+	20)	5		=	300	Sft
L H V Room	2	(10	+	13 5/8)	5		=	307	Sft
Bllod Transfar	2	(10	+	20)	5		=	300	Sft
Lab	2	(12	+	19)	• 5		5	310	Sft
Blood Bank	2	(10	+	19)	5		=	290	Sft
M.O Room	2	¹ (16 1/2	+	13 5/8)	5	•	Ξ	301	Sft
waiting	2	(10 3/4	+	20)	5		=	307	Sft
specilist	2	(21	+	12)	5		=	330	Sft
Treatment	2	(10	+	16)	5		=	260	Sft
Rataring ,M S Offic	2	(8 2/3	+	. 11)	5	į	=	197	Sft
Rataring ,M S Offic	2	(16 2/3	+	13 5/8)	5		=	303	Sft
Adman office	2	(16 2/3	+	13 5/8) ·	5		=	303	Sft
Madicine	2	(13 1/2	+	12) '	5		=	255	Sft
N.H.Q	2	(16 1/2	+	12) .	5		=	285	Sft
office	2	(10	+	12)	5		=	220	Sft
lab	2	(12	+	12)`	5		=	240	Sft
Corri Door	2	х	87 3/4	х	5				=	878	Sft
Corri Door	2	х	58 3/4	x	5				=	588	Sft
Corri Door	2.	х	148 5/8	х	5			· · ·	=	1486	Sft
Corri Door	2	x	31 1/2	х	5				=	315	Sft
								· Tota	=	7774	Sft
Providing and La	aying we	eather	shield pa	int							
old building	1	x	87 3/4	х	14 1/2				=	1272	Sft ·
	1	х	80	х	14 1/2				=	1160	Sft ·
Sides	2	́х	48 1/2	х	14 1/2					1407	Sft
Corri Door	2	х	25 3/4	X	14 1/2				=	7 47	Sft
										Page 11	3

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Back And Front Side	2	x	148	x	14 1/2			=	4292	S
Sides	2	x	50 1/2	x	14 1/2	2		=	1465	S
Sides	2	^	50 112	^			Total	=	10342	S
Providing and fix aluminum frame 1/2"x1/2" and 1.6 incharge. compl	of appro 6mm thic	ved i k wit	manufactı h rubber ç	irer b	rownze C	olour / pow	der coated of	size 1-	ted by the eng	gin
old building	16	x	5	х	6			=	480	S
C.Window	4	x	5	х	2		·	=	40	S
							Total	=	520	S
	-		So 1	/2 qty	will use	<u>,</u>		=	260	S
Providing and fit sliding using de frame sections o rubber gasket us	lux secti	ons o) mm	of approve	d ma all of '	nufacture 1.6mm thi	r having fra ckness incl	uding 5 mm th	ick importe	a tinted glass	aı
old building	16	х	5	х	6			=	480	S
C, Window	4	х	5	x	2			=	40	S
O. Maldon	•	~	-				Total	=	520	S
and lacquar poli lipping as appro	shing to wed and 10	show direc x	v the grain sted by the 3 1/2	nș of (e Eng x	ply proper ineer inch 8 1/2	iy, sand pa arge.	pering and 3/8	- unck mat	298	، ٤
old Building	9	x	4	x	8 1/2			=	306	S
old Bulaing	9	^	7	^	0 2		Total	=	604	S
Providing and fin approved design	xing 3 <u>/</u> 8" n includi	'M.S. ng pa	square bailt	ar 'gr oat ce	ill includir omplete in	ig 1-1/4"x3/ all respect	16" M.S. Flat F	rame 'of w		
old building	16	х	5	х	6			=	480	5
C.Window	4	х	5	х	2			=	<u>40</u> 520	5
P/L, Anti-static a leveling floor / D	ado PVC	MFF	RP Conduc	ctive	flooring (imported) to	o avoid firction	n with all ch	emical polish	ing
etc.					·				070	c
etc. L.R	1	x	16	x	17			Ξ	272	8
	1 1	x x	16 7	x x	17 10 5/8			=	74	S
L.R	1 1 1								74 272	3
L.R L.R	1 1 1 1	x	7	x	10 5/8			=	74 272 288	() () ()
L.R L.R O.T new O.T Old Building	1 1 1 1 1 1	x x	7 16	x x	10 5/8 17			= - =	74 272	() () ()
L.R L.R O.T new O.T Old Building O.T Old Building		x x x	7 16 16	x x · x	10 5/8 17 18			= - =	74 272 288	
L.R L.R O.T new O.T Old Building	1	x x x x	7 16 16 7	x x x x	10 5/8 17 18 8		Total	= = =	74 272 288 56	
L.R L.R O.T new O.T Old Building O.T Old Building	1 1	x x x x x	7 16 16 7 7	x x x x	10 5/8 17 18 8		Total	= = = =	74 272 288 56 67	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door	1 1	x x x x x	7 16 16 7 7	x x x x	10 5/8 17 18 8		Total	= = = =	74 272 288 56 67	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building	1 1	x x x x x	7 16 16 7 7	x x x x	10 5/8 17 18 8		Total	= = = = =	74 272 288 56 67 1030	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door	1 1	x x x x x	7 16 16 7 7	x x x x	10 5/8 17 18 8			= = = = = =	74 272 288 56 67 1030 1	97 9
 L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building	1 1 with cho	x x x x wkat.	7 16 16 7 7	x x x x	10 5/8 17 18 8 9 5/8		Total Total	= = = = = =	74 272 288 56 67 1030 1 19	0) 0) 0) 0) 0) N
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building	1 1 with cho	x x x x wkat.	7 16 16 7 7	x x x x	10 5/8 17 18 8 9 5/8			= = = = = = =	74 272 288 56 67 1030 1 19 20	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building	1 1 with cho	x x x x wkat.	7 16 16 7 7	x x x x	10 5/8 17 18 8 9 5/8		Total		74 272 288 56 67 1030 1 19 20 18	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Removing wind	1 1 with cho	x x x x wkat.	7 16 16 7 7	x x x x	10 5/8 17 18 8 9 5/8			= = = = = = =	74 272 288 56 67 1030 1 19 20	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Removing wind	1 1 with cho lows and	x x x wkat.	7 16 7 7	x x x x	10 5/8 17 18 8 9 5/8	· · ·	Total		74 272 288 56 67 1030 1 19 20 18	97 9
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Old Building Distempering tw	1 1 with cho lows and	x x x x wkat.	7 16 7 7 lights with	x x x x	10 5/8 17 18 8 9 5/8 wkat.	· ·	Total		74 272 288 56 67 1030 1 19 20 18 18	
L.R D.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Removing wind Old Building	1 1 with cho lows and	x x x wkat.	7 16 7 7	x x x x	10 5/8 17 18 8 9 5/8	· ,	Total		74 272 288 56 67 1030 1 19 20 18 18 18 353	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Distempering tw old building Femail	1 1 with cho lows and	x x x x wkat.	7 16 7 7 lights with	x x x x	10 5/8 17 18 8 9 5/8 wkat.	· ,	Total		74 272 288 56 67 1030 1 1 9 20 18 18 18 353 153	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Old Building Distempering tw old building Femail Ward	1 1 with cho lows and	x x x x wkat.	7 16 7 7 lights with rface 20 3/4	x x x x	10 5/8 17 18 8 9 5/8 wkat.		Total		74 272 288 56 67 1030 1 19 20 18 18 18 353	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Cld Building Distempering two old building Femail Ward Bed	1 1 with cho lows and	x x x wkat. Id Su x x	7 16 7 7	x x x x x x x x	10 5/8 17 18 8 9 5/8 wkat. 17	·	Total		74 272 288 56 67 1030 1 1 9 20 18 18 18 353 153	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Old Building Old Building Removing wind Old Building Distempering tw old building Femail Ward Bed Lav Store	1 1 with cho lows and	x x x wkat. Id Su x x x x	7 16 7 7 7 lights with rface 20 3/4 9 13 9 3/4	x x x x x x x x x x x x	10 5/8 17 18 8 9 5/8 wkat. 17 17 17 10 5 7/9	· · ·	Total		74 272 288 56 67 1030 1 1 9 20 18 18 18 18 353 153 130	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Removing wind Old Building Distempering tw old building Femail Ward Bed Lav Store T.B	1 1 with cho lows and vo coat o 1 1 1 1 1	x x x wkat. wkat.	7 16 7 7 8 13 9 3/4 6 3/4	x x x x x x x x x x x x x	10 5/8 17 18 8 9 5/8 wkat. 17 17 17 10 5 7/9 18	· · · · · · · · · · · · · · · · · · ·	Total		74 272 288 56 67 1030 1 1 9 20 18 18 18 18 353 153 130 56 122	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Old Building Old Building Removing wind Old Building Distempering tw old building Femail Ward Bed Lav Store T.B offic	1 1 with cho lows and	x x x wkat. sky id Su x x x x x x x x x	7 16 7 7 7 Iights with rface 20 3/4 9 13 9 3/4 6 3/4 12	x x x x x x x x x x x x x x x x	10 5/8 17 18 8 9 5/8 wkat. 17 17 17 17 10 5 7/9 18 18	· · ·	Total		74 272 288 56 67 1030 1 1 19 20 18 18 18 353 153 130 56 122 216	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Removing wind Old Building Distempering tw old building Femail Ward Bed Lav Store T.B offic Corri Door	1 1 with cho lows and vo coat o 1 1 1 1 1	x x x wkat. sky id Su x x x x x x x x x x x x x x	7 16 16 7 7	x x x x x x x x x x x x x x x x x x x	10 5/8 17 18 8 9 5/8 wkat. 17 17 17 10 5 7/9 18 18 18 18 6	· · · · · · · · · · · · · · · · · · ·	Total		74 272 288 56 67 1030 1 1 9 20 18 18 353 153 130 56 122 216 267	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Old Building Old Building Removing wind Old Building Distempering tw old building Femail Ward Bed Lav Store T.B offic Corri Door Store	1 1 with cho lows and vo coat o 1 1 1 1 1	x x x x x x wkat. Id Su x x x x x x x x x x x x x x x	7 16 16 7 7 8 Iights with rface 20 3/4 9 13 9 3/4 6 3/4 12 44 1/2 16	x x x x x x x x x x x x x x x x x x x	10 5/8 17 18 8 9 5/8 wkat. 17 17 17 17 17 10 5 7/9 18 18 18 6 18	· · · · · · · · · · · · · · · · · · ·	Total		74 272 288 56 67 1030 1 1 19 20 18 18 18 353 153 153 130 56 122 216 267 288	
L.R L.R O.T new O.T Old Building O.T Old Building O.T Old Building Removing door New Building Old Building Removing wind Old Building Distempering tw old building Femail Ward Bed Lav Store T.B offic Corri Door	1 1 with cho lows and vo coat o 1 1 1 1 1	x x x wkat. sky id Su x x x x x x x x x x x x x x	7 16 16 7 7	x x x x x x x x x x x x x x x x x x x	10 5/8 17 18 8 9 5/8 wkat. 17 17 17 10 5 7/9 18 18 18 18 6	· · · · · · · · · · · · · · · · · · ·	Total		74 272 288 56 67 1030 1 1 9 20 18 18 353 153 130 56 122 216 267	

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Labour Room	1	x	16	x	17					=		272	Sft
W C	<u>1</u>	x	7	x	17					=		: 119	: Sft
Corri Door	1	x	87 3/4	x	9					=		7,9,0	Sft
W.Shop	1	x	8	x	12					=		96	Sft
Dentest	1	x	16	x	12					=		192	Sft
M.O 🥠	1	x	14	x	12					_ =		168	Sft
S.M.O	1	х	14	х	12					=		168	Sft
S.M.O	1	Χ,	8	х	» 12					=		96	Sft
emergency	1	х	12	x	12 1/2					=		150	Sft
Doctor	1	[`] x	12	x	12 1/2					=		150	Sft
	1	х	6	х	8 5/8					=		52	Sft
X Ray	1	х	16	х	18					=		288	Sft
T.B	່ 1	х	6 3/4	х	18					_ =		122	Sft
offic	1	х	18	х	5 3/8					=		97	Sft
Ultra Sound	1 [·]	х	10 1/8	Χ.	20					=		203	Sft
L.H.V	1	x	11	х	• 13					=		143	Sft
Madicine Store	1	х	11	x	6 1/4					=		69	Sft
EPI	1	х	10 3/4	х	13					=		140	Sft
Parchi	1	х	14	х	13					=		182	Sft
Lab	1	х	12	×	12					=		144	Sft
Office	· 1	x	10	Χ.	12					=		120	Sft
NHQ	1	х	16 1/2	х	12					=		198	Sft
Madicine	1	х	13 1/2	х	12				•	=		162 96	Sft Sft
Lav	1	х	8	х	12					=		. 790	Sft
Corri Door	1	X	87 3/4	x	9					_		353	Sft
Corri Door	1	x	58 3/4	X	6. 8					_		1189	Sft
Corri Door	1	x	148 5/8 31 1/2	X	о 6					=	•	189	Sft
Corri Door E M.O	1	x		x			_					x	
Room G.F	2	(10	+	20)	5		•	=		300	Sft
L H V Room	2 .	(10	+	13 5/8)	5			=		307	Sft
Bllod Transfar	2	(10	+	20)	5			_ =		300	Sft
Lab	2	(12	+	19)	5			•=		310	Sft
Blood Bank	2	(10 [·]	+	19)	5			·, =		290	Sft
M.O Room	2	(16 1/2	+	13 5/8)	5			= `		301	Sft
waiting	2	(10 3/4	+`	20)	5			=		307	Sft
specilist	2	, (21	+	12)	5			=		⁵ 330	Sft
Treatment	2	· (10	+	16)	5			=		260	Sft
Rataring ,M S Offic	2	, (8 2/3	+	11	, N	5			=		197	Sft
		(13 5/8)	5			=		303	Sft
Rataring ,M S Offic	2	(16 2/3	+) ·						303	Sft
Adman office	2	(16 2/3	+	13 5/8)	5			=		· .	
Madicine	2	(13 1/2	+	12)	5			=		255	Sft
N.H.Q-	2	(16 1/2	+ '	12)	5			=		285	Sft
office	2	(10	+	12)	5			= .		220	Sft
lab	2	(12	+	12)	5			=		240	Sft
Corri Door	2	x	87 3/4	x	5					=		878	Sft
Corri Door	2	х	58 3/4	х	5			:		=		588	Sft
Corri Door	2	х	148 5/8	х	5	•				_ =		1486	Sft
Corri Door	2	, X	31 1/2	х	5					=		315	Sft
	Celing	old Bi	uilding						Total			10097 26463	Sft No
Raking and wash	ing join	nts of :	stone mas	sonry	(old worl	<).			iotai	-			
old building	2	x	87 3/4	×	5					=		878	Sft
old building	2	x	48 1/2	X	5					=		[`] 485	Sft
old building	· 2	×	148 1/2	x	5					=		1485	Sft
old building	2	x	42 1/2	x	5					_ =	· ·	425	Sft
· ·									Total	=		3273	Sft
												Dage 11'	

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		and the second									22	
	Cement pointi	na etwok	iointo	on welle	unte	י 20' /ה חי)m)h	iehat:	-		•	
3	-	-								=	878	Sft
	old building	2	х	87 3/4	X	5				=	485	Sft
	old building	2	×	48 1/2	X	5 5					1485	Sft
	old building	2	x	148 1/2	x	5				=	425	Sft
	old building	2	x	42 1/2	х	5			Total		3273	Sft
			_	_					Total	-		
4	Painting to do	or and win	dow a	any type								
	New Building	2	х	15	х	3 1/2	Χ.	8 1/2		=	893	Sft
	New Building	, 2	х	16	х	2 1/2	×	7		=	560	Sft
	New Building	2	х	2	х	4	x	8 1/2		=	136	Sft
	New Building	2	х	9	х	3 1/2	х	8 1/2		=	536	Sft
	New Building	. 2	х	5	х	4	х	8 1/2	-	=	340	Sft
	New Building	, 2	х	1	x	5	Χ.	8 1/2		=	85	Sft
	New Building	2	х	14	ż	2 1/2	х	7		=	490	Sft
	Windows	· 2	x	43	х	5	х	6		=	2580	Sft
	C.W	2	х	50	х	5	х	2			. 1000	Sft
•							•	1	Total	=	`6619	Sft
												4
15	Extracostform	akingholei	nMar	bleslabfor	fixtu	res,Sink,I	ourne	rs,basinVa	initiesi/cco	stotbeve	llingofinternale	ugea
15	sapprovedand	directed b	y the	Engineer	Incha	irge.				=	50	No
	• ·		-						Total	=	50	No
	ExtraforPoyoll	inacharae	eofm:	arbleedaei	inann	roveddes	ianco	ompleteina			stofCarborandar	ndisc
16	asapprovedan	d directed	by th	e Enginee	r Incl	harge.			•			
	Venty	50	x	2	+	3				. =	250	Rf
	Counter	1.	×	19	+ .	6				=	25	R
									Total	=	275	Rf
17	Providingandla niformtexture(mpleteinallres	Spotless)v pectsasap	vithac prove	lhesivebo ed and dire	ndov ected	er3/4"thic by the E	:k(1:2)cementsa	andmortori	rona	tormatchingsea	erco
17	niformtexture(Snotless)v	vithac	ihesivebo	ndov	er3/4"thio	:k(1:2)cementsa	e.China Ve	ctnecos	.750	Rft Rft
	niformtexture(mpleteinallres	Spotless)v pectsasap 100	vithac prove	lhesivebo ed and dire	ndov ected	er3/4"thic by the E	:k(1:2)cementsa	andmortori	rona =	tormatchingsea	Rft
	niformtexture(mpleteinallres Dismentling P.	Spotless)v pectsasap 100 .C.C 1:2:4	vithac prove x	Ihesivebo ed and dire 5	ndov ected x	er3/4"thic by the Er 1 1/2	:k(1:2 ngine	er Incharg	e.China Ve	rona =	.750	Rft
	niformtexture(mpleteinallres Dismentling P. Corri Door	Spotless)v pectsasap 100 .C.C 1:2:4 2	vithac prove x x	Ihesivebo ed and dire 5 87 3/4	ndov ected x x	er3/4"thic by the Er 1 1/2 4 1/2	:k(1:2 ngine x	i)cementsa er Incharg 1/8	e.China Ve	rona =	. 750 750	Rft Rft
	niformtexture(mpleteinallres Dismentling P. Corri Door Corri Door	Spotless)v pectsasap 100 .C.C 1:2:4 2 2	vithac prove x x x x	thesivebo d and dire 5 87 3/4 58 3/4	ndov ected x x x x	er3/4"thic by the Ei 1 1/2 4 1/2 4 1/2	:k(1:2 ngine x x	i)cementsa er Incharg 1/8 1/8	e.China Ve	/ctnecos irona = =	750 750 99	Rft Rft Cft
	niformtexture(mpleteinallres Dismentling P. Corri Door Corri Door Corri Door	Spotless)v pectsasap 100 .C.C 1:2:4 2 2 2 2	vithac prove x x x x x x x x	thesivebo d and dire 5 87 3/4 58 3/4 148 5/8	ndov ected x x x x x x x	er3/4"thic by the Er 1 1/2 4 1/2 4 1/2 4 1/2	:k(1:2 ngine x x x x	i)cementsa er Incharg 1/8 1/8 1/8	e.China Ve	/ctnecos rona = = = =	750 750 750 99 66	Rft Rft Cft Cft
	niformtexture(mpleteinallres Dismentling P. Corri Door Corri Door	Spotless)v pectsasap 100 .C.C 1:2:4 2 2 2 2 2 2	vithac prove x x x x x x x x x x	thesivebo d and dire 5 87 3/4 58 3/4 148 5/8 31 1/2	ndov ected X X X X X X	er3/4"thic by the Ei 1 1/2 4 1/2 4 1/2 4 1/2 4 1/2 4 1/2	:k(1:2 ngine x x x x x x	1/8 1/8 1/8 1/8 1/8 1/8 1/8	e.China Ve	/ctnecos irona = = = = =	750 750 750 99 66 167	Rft Rft Cft Cft
	niformtexture(mpleteinallres Dismentling P. Corri Door Corri Door Corri Door	Spotless)v pectsasap 100 .C.C 1:2:4 2 2 2 2 2 1	vithac prove x x x x x x x x x x x x	thesivebo d and dire 5 87 3/4 58 3/4 148 5/8 31 1/2 6 3/4	ndov ected x x x x x x x x x x x	er3/4"thic by the Ei 1 1/2 4 1/2 4 1/2 4 1/2 4 1/2 4 1/2 6 1/4	:k(1:2 ngine x x x x x x x x	1/8 1/8 1/8 1/8 1/8 1/8 1/8 1/8	e.China Ve	/ctnecos rona = = = = = = =	750 750 99 66 167 35	Rft Rft Cft Cft Cft
	niformtexture(mpleteinallres Dismentling P. Corri Door Corri Door Corri Door	Spotless)v pectsasap 100 C.C 1:2:4 2 2 2 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2	vithac prove x x x x x x x x x x x x x x x x	thesivebo d and dire 5 87 3/4 58 3/4 148 5/8 31 1/2 6 3/4 6 3/4	ndov ected x x x x x x x x x x x x	er3/4"thic by the Ei 1 1/2 4 1/2 4 1/2 4 1/2 4 1/2 6 1/4 4 1/2	:k(1:2 ngine x x x x x x x x x x	1/8 1/8 1/8 1/8 1/8 1/8 1/8 1/8 1/8	e.China Ve	/ctnecos rona = = = = = = = = = =	750 750 750 99 66 167 35 5	Rft Rft Cft Cft Cft Cft
	niformtexture(mpleteinallres Dismentling P. Corri Door Corri Door Corri Door	Spotless)v pectsasap 100 .C.C 1:2:4 2 2 2 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2	vithac prove x x x x x x x x x x x x x x x x x x x	thesivebo d and dire 5 87 3/4 58 3/4 148 5/8 31 1/2 6 3/4 6 3/4 6 1/4	ndov ected x x x x x x x x x x x x x x x x x x x	er3/4"thic by the Ei 1 1/2 4 1/2 4 1/2 4 1/2 4 1/2 6 1/4 4 1/2 4 1/2 4 1/2	:k(1:2 ngine x x x x x x x x x x x x	1/8 1/8 1/8 1/8 1/8 1/8 1/8 1/8 1/8 1/8	e.China Ve	/ctnecos rona = = = = = = = = = = =	750 750 99 66 167 35 5 8	Rft Rft Cft Cft Cft Cft Cft
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F.F New	9	X	5	x	5 1/2	x	1/8		=.		62	Cft
	18	X	6		5 1/2	x	1/8	•	÷		74	Cft
	· 18	X	5	X X	7	x	1/8		=			Cft
	1	X	5 5 /	x	5 1/2	x.	1/8		. =		· 7	Cft
	2 '	x	7		5 1/2	x	1/8				· 10	Cft
	2	X		x	20	x	1/8		=		25	Cft
F.F New	1	X	10	X	20 5 1/2		1/8		=		69	Cft
	5	x	20	X	5 1/2	x	1/8		=		60	Cft
	8	х	10 7/8	X		x	1/8		=		99	Cft
Corri Door	1 .	X	87 3/4	X	9	x	1/8		=		44	Cft
Corri Door	. 1	×	58 3/4	X	6	X	1/8		=		[:] 149	Cft
Corri Door	1	x	148 5/8	X	8	x	1/8		=		24	Cft
Corri Door	÷ 1	x	31 1/2	x	6	х	1/0	Total			1502	Cft
	•							Total	-		1	0.1
Dismentling B	rick or flag	ged flo	ooring					,				
	1	х	6 3/4	х	6 1/4	х	1/3		=		<u>ן</u> 14	Cft
	1	х	8	х	12	х	1/3		=		32	Cft
	1	x	7	х	4	х	1/3	·	=		. 9	Cft
	1	. x	5 1/8	х	9	х	1/3		=		15	Cft
	1	x	6	х	7	x	1/3		=		14	Cft
	1	х	6 3/4	х	6	х	1/3		=	•	13	Cft
	1	х	13	х	10	х	1/3		=	/	43	Cft
New	8	х	[.] 5	Х,	· 6	х	1/3		=		79	Cft
	1	x	1	х	20 [`]	х	· 1/3		=		7	Cft
•	2	x	7 1/8	х	5	х	1/3		=		24	Cft
F.F New	9	x	5	х	6	х	1/3		=		89	Cft
1 · · · · ·	1	х	5	х	7	x	1/3		=		- 12	Cft
F.F New	1	х	10 [.]	х	20	x	1/3		=		<u>(</u>) 66	Cft
Corri Door	1	х	87 3/4	х	9	х	1/3		=		261	Cft
Corri Door	1	х	58 3/4	, x	6	x	1/3		=		116	Cft
Corri Door	1	х	148 5/8	x	8	x	1/3		=		392	Cft
Corri Door	1	x	31 1/2	x	6	x	1/3		=		62	Cft
								Totai	=		1248	Cft
Cement concr washing of sto	ete plain i one aggreg	ncludi gate):	ing placing (f) Ratio 1	g,con : 2: 4	npacting,	finish	ing and cu	uring com	olete	(including		
	1	x	6 3/4	x	6 1/4	х	1/8		=		5	Cft
	1	х	8	х	12	х	1/8		=		12	Cft
	1	х	7	х	4	х	1/8		=		4	Cft
	1	х	5 1/8	х	9	х	1/8	· .	=		6	Cft
	1	х	6	х	7	x	1/8		=		5	Cft
	1	х	6 3/4	х	6	x	1/8		=		5	Cft
	1	х	13	х	10	x	1/8		=		16	Cft
New	8	x	5	х	6	x	1/8		=		30	Cft
	1	х	1	х	·20	x	1/8		=		3	Cft
	2	х	7 1/8	х	5	x	1/8		=		9	Cft
F.F New	9	x	5	x	6	x	1/8		=		34	Cft
	1	x	5	x	7,	x	1/8		=		4	Cft
F.F New	1	x	-10	x	20	x	1/8		=		25	Cft
Corri Door	1	x	87 3/4	x	9	x	1/3	-	. =		261	Cft
Corri Door	1	x	58 3/4	x	6	x	1/3		=		116	Cft
Corri Door	1	×	148 5/8	x	8	x	1/3		=		392	Cft
Corri Door	1	x	31 1/2	x	6	x	1/3		=	•	Page ⁶ f2	₁ Cft
0011 0001	•	~	2 .		-						1 uze 12	· .

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Total =

989 Cft

24

Providing and laying superb quality Cermices glazed tiles flooring of MASTER brand of specifi ed si ze in approved design, Color and Shade with adhesi ve/bond ov er 3/4" thi ck (1:3) cement pl ast er i/c the cost of seal er for finishing the joints i/c cutti ng gri nding complete in all respect as approved and directed by the Engineer Incharge.Full body Glazed tiles (i i i) 600mmx 1200 mm

											04
	1	1	́ Х	6 3/4	Х	6 1/4			=	42	Sft
	1	1	x	8	х	12	. ,	-	=	96	Sft
	1	1	x	7	х	4			=	28	Sft
		1	x	5,1/8	х	9			Ξ	46	Sft
	-	1	x	6	х	ŕ			=	42	Sft
	-	1	x	6 3/4	х	6			=	.41	Sft
		1.	. х	13	х	10			=	130	Sft
New	8	3	х	5	х	6			=	240	Sft
	1	1	х	1	х	- 20			=	20	Sft
	2	2	х	7 1/8	x	5			=	71	Sft
F.F New	- 9	3	х	5	х	6			=	270	Sft
	1	1	х	5	x	7			÷	35	Sft
F.F New	1	1	х	10	x	20			=	200	Sft
Corri Door	1	1	х	87 3/4	x	9			=	790	Sft
Corri Door	1	1	х	58 3/4	x	6			=	353	Sft
Corri Door	1	1	·X	148 5/8	х	8			=	1189	Sft
Corri Door	,	1	x	31 1/2	x	6			=	189	Sft
		-				•	·	Total	=	3781	Sft

Providing and laying superb quality Cermices glazed tiles of M ast er brand, ski rti ng/dado of speci f i ed si ze, Col or and Shade with adhesi v e/ bond ov er 1/2" thi ck (1:2) cement pl ast er i/c the cost of and seal er f or f i ni shi ng the joints, cutti ng gri ndi ng compl et e in al I r espect as approved and di rected by the Engi neer Incharge.

	2	x	6 3/4	х	7				· = .	95	Sft
	2	х	6 1/4	х	7			•	=	. 88	Sft
	2	х	12	x	7				=	168	Sft
	2	х	8	х	7				=	112	Sft
	2	х	4	х	7				=	. 56	Sft
	2	х	7	x	7		· ·		=	. 98	Sft
	2	x	4	х	7	•••			=	56	Sft
	2	x	9	x	7				=	126	Sft
	2	x	5 1/8	x	7 7				=	72 84	Sft
	2	х	6	x	7				=	84	Sft
	2	х	7	x	7				=	98	Sft
	2	x	6 3/4	x	7				, =	95	Sft
	2	x	6	х	7				Ξ	84	Sft
	2	x	13	х	7				Ξ	182	Sft
	2	x	10	x	7				=	140	Sft
	6	x	5	x	7				=	~ 210	Sft
	8	x	5	x	7				=	280	Sft
	16	x	5	x	7				=	560	Sft
	16	x	6	х	7				=	672	Sft
	4	х	20	х	7			•	=	560	Sft
	8	х	5 3/8	x	7				=	301	Sft
	4	x	7 1/8	x	. 7				=	200	Sft .
	4	x	5	х	7				=	140	Sft
•	18	x	5	x	7				=	630	Sft
	18	x	6	х	7				=	756	Sft
	2	x	5	х	7				=	70	Sft
	2	x	7	х	7				= ,	98	Sft
	5	x	20	x	7	-	· .		=	700	Sft -
	8 -	x	10 7/8	×	7				=	609	Sft
		~			÷			Total	=	7338	Sft
	40	х	2 1/2	х	7				=	700	Sft
	4	x	4	x	7				Ξ	112	Sft
		~						Total	=	Pag 81 2	
				•						1 450 12	J .

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21

Deductions

:

							Net		6526
Fabrication of	heavy ste	eel w	ork,witl	n angl	e, tees, flat	ironround i	ron and s	heet i ron f or	maki ng
trusses, gi rde excl udi ng er	ers, tanks,	etc., i	ncl udi n	g cutti	ng, drilling,	revi tti ng, h	andl i ng, i	assembl i ng a	ind fixir
exci dui lig cit			_					=	. 48
	8	x	6					=	48
	8	X	6 · ·				Total		96
					0.25	400	TOtai	-	23
96 x	0.25	х	0.08	х	0.25 x	490	Total		23
					. '		TULAT		200
Providing and and specified of matchi ng s ed by the Eng	thickness, sealer , cut	with ting, g	adhesive Irinding a	bond Ind ch	over 3/4" thic emi calpoli s	k bedding c hi ng comple	ot (1:2) cer	nent sand mo	tor l/c th
	4			.,	10			Ξ	20
dentle	1	х	20	х	10		Total	=	20
					·		Total		
Providing and doors,et c.com	l fixing G.I. npiete in al	wire (II resi	gauze 24 pects.	SWG,	12x12 meshe	es per squar	'e inch, fix	ed to steel	windo
,	4	x	6	x	6			_ =	<u></u> 14-
	-	^	Ý	~	-		Total	=	14
·		4 - 4		, 6		sistumati in		nloss steel cor	nplete in
Dumpa celing respect.	for ots imp	poted	provisio	1 OT Ha	irmatic Asep	statument m	pann stan	11693 31661 001	inpiece in
		• *	16	U.	17	· ·		= '	27
L.R L R 🥍	1	x	16 16	X	17 17			=	. 27
L .1 X	1, ·	х	16	х	17			=	28
O.T	1	x	16	X	18				
			40	х	9			=	. : 37
O.T Providing and specied thicki board with ad	ness duly t hesive /sol	hermo vent f	oplastic v ixed over	aded / velded r 14 sv	scratch -resi conforming vg G.I Chann	to iso22196 al of size 3.5	and paste "x2"x3.5"	d over 12mm	all cladii thicnes (
Providing and	ness duly t hesive /sol	n pren hermo	nimum gi oplastic v ixed over	aded / velded r 14 sv	scratch -resi conforming vg G.I Chann	to iso22196 al of size 3.5	nic anti -m and paste 5"x2"x3.5"	icrobial pvc w d over 12mm	all cladii thicnes (
Providing and specied thick board with ad cost of hardw	ness duly t hesive /sol are asappr	n pren hermo	nimum gi oplastic v ixed over	aded / velded r 14 sv	scratch -resi conforming vg G.I Chann	to iso22196 al of size 3.5	nic anti -m and paste 5"x2"x3.5"	icrobial pvc w d over 12mm	all cladii thicnes (on wall
Providing and specied thick board with ad cost of hardw L.R	ness duly t hesive /sol are asappr 2	n pren hermo vent f oved x	nimum gr oplastic v ixed over and direc 16	aded / velded r 14 sv ted by	scratch -resi conforming vg G.I Chann the Engine	to iso22196 al of size 3.5	nic anti -m and paste 5"x2"x3.5"	icrobial pvc w d over 12mm duly screwed	all cladii thicnes g on wall 35
Providing and specied thick board with ad cost of hardw L.R L.R	ness duly t hesive /sol are asappr 2 2	n pren hermo vent f oved x x x	nimum gr oplastic v ixed over and direc 16 16	raded / velded r 14 sw ted by x x x	Scratch -resi conforming vg G.I Chann the Engine 11	to iso22196 al of size 3.5	nic anti -m and paste 5"x2"x3.5"	icrobial pvc w d over 12mm duly screwed =	all cladii thicnes (on wall 35 35
Providing and specied thick board with ad cost of hardw L.R L.R O.T	ness duly t hesive /sol are asappr 2 2 2 2	n pren hermo lvent f oved x x x x	nimum gi oplastic v ixed over and direc 16 16 16	raded / velded r 14 sv sted by x x x x	scratch -resi conforming g G.I Chann the Engine 11 11 11	to iso22196 al of size 3.5	nic anti -m and paste 5"x2"x3.5"	icrobial pvc w od over 12mm duly screwed = =	all cladii thicnes (on wall 35 35 35
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Providing and specied thick board with ad cost of hardw L.R L.R O.T O.T	ness duly t hesive /sol are asappr 2 2 2 2 2	n pren hermo vent f roved x x x x x x	nimum gr oplastic v ixed over and direc 16 16 16 42	raded / velded r 14 sw ted by x x x x x x	Scratch -resi conforming vg G.I Chann the Engine 11 11 11 11	to iso22196 al of size 3.5 er in Charge	nic anti -m and paste "x2"x3.5"	icrobial pvc w d over 12mm duly screwed = = = = = =	all cladin thicnes (on wall 35 35 35 92 198
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Providing and specied thick board with ad cost of hardw L.R L.R O.T O.T Providing and	ness duly t hesive /sol are asappr 2 2 2 1 Fixing U.F 40 1 Fixing Hyd 50	n pren hermo vent f oved x x x x x x x x x x x x	nimum gr oplastic v ixed over and direc 16 16 42 Door cor 2 1/2	raded / velded r 14 sw ted by x x x x x x nplete X	Scratch -resi conforming og G.I Chann the Engined 11 11 11 11 11 in all respec 7	to iso22196 al of size 3.5 er in Charge t as approve	nic anti -m and paste "x2"x3.5" Total d by engi Total approved l	icrobial pvc w d over 12mm duly screwed = = = = = neer incharge = = by engineer in =	all cladin thicnes (on wall 35 35 92 198 70 70 charge. 5
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Providing and specied thick board with ad cost of hardw L.R O.T O.T Providing and Providing and	ness duly t hesive /sol are asappr 2 2 2 1 Fixing U.F 40 1 Fixing Hyd 50 ation 1 1	h pren hermo vent f oved x x x x 2.V.C x dralic	nimum gr oplastic v ixed over and direc 16 16 42 Door cor 2 1/2 Door Clo 87 3/4 25 3/4	raded / velded r 14 sw ted by x x x x x mplete x ser co	As 1/2 8 1/4	to iso22196 al of size 3.5 er in Charge t as approve	nic anti -m and paste "x2"x3.5" Total d by engi Total approved l	icrobial pvc w d over 12mm duly screwed = = = = = = = by engineer in = = = = = = =	all cladin thicnes (on wall 35 35 92 198 70 70 70 70 70 charge. 5 425 21 238 138
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Providing and specied thick board with ad cost of hardw L.R O.T O.T Providing and Providing and	ness duly t hesive /sol are asappr 2 2 2 1 Fixing U.F 40 1 Fixing Hyd 50 ation 1 1 1 1 1	h pren hermo vent f oved x x x x 2.V.C x dralic	nimum gr oplastic v ixed over and direc 16 16 42 Door cor 2 1/2 Door Clo 87 3/4 25 3/4 65 1/4 31 1/2	raded / velded r 14 sw sted by x x x x x x x x ser co x x x x x x x x x x x x x x x x x x x	As cratch -resile conforming of G.I Channel of the Engine	to iso22196 al of size 3.5 er in Charge t as approve	nic anti -m and paste "x2"x3.5" Total ed by engin Total approved I Total	icrobial pvc w d over 12mm duly screwed = = = = = neer incharge = = by engineer in = = = = = = = = = = = =	1980 00 wall 35: 35: 92: 1980 700 700

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Pacca brick wor	k othei	r than	building	upto	10ft. (3 m) heig	ht.) cemer	nt, sand mo	rtar:-			
.'	1	х	18	x	3/4	x	4		Ξ	. 54	Cft	
	4	x	. 3	х	3/8	х	4		= ·	18	<u>Cft</u>	•
								Total	=	72	Cft	
									@	Rs.32,175.10/-	% Cft	Rs.23,1
1/2" Thick ceme	nt plas	ter in	CSM 1:4	upto	10' heigh	t						
		x	18	×	4	•			=	144	Sft	
	2		3		4				=	120	Sft	· 、
	10	×	3	×	4			Total	=	264	Sft	
								10101	@	Rs.3,245.95/-		Rs.8,5
									•			-
					marata (in	aludi	na proetra	eed concr	ete) u	sing coarse sand	and	
Providing and la screened grade	tying re d and v	eintor	d angreg	ate, in	ncrete (in i required	l shar	e and des	ign, includi	ing for	ms, moulds,	· .	
shuttering, liftin	g, com	pacti	ng curing	j, rend	lering an	d finir	Ig	•				· · ·
` L -	1		.18	x	2 3/4	x	1/3		=	16	Cft	
slab		x	18	x	1 1/2	x	1/3		=	9	Cft	
slab	1	х	10	^	1 1/2	Ŷ		Total	=	25	Cft	
								- Cui	@	Rs.556.50/-	P.Cft	Rs 14,0
	·						to includi	na cuttina	-			
making joints ar	nd fast	ening	s, includi	ing co	st of bind	ling w	ire and lat	our charge	es for	ing, laying in posi binding of steel	,	۰ .
reinforcement (a	also inc	cludes	s remova	l of ru	st						C#	1
Qty: as per item I	No.				25		_		Ξ	25	Cft	1
			25 1/4	4 x	6.75	x	0.454		=	77	Kg	
				. '					@	Rs.31,396.55/-	‰ K g	Rs.24,2
Shadewithadhes grindingcomple	sive/bo	ndove	e r1/2"th io	:k(1:2)	cementp	laster	i/cthecost	ofandseale	rrorțin je.	specifiedsize,Cold ishingthejoints,cu	nung	
	1	х	18	х		·X	4		=	72	Sft	
	1											
	1	х	10	х		х	4		Ξ	40	Sft	
	I	х	10	x		x	4	Total	=	112	Sft	Rs.57.3
									" @	112 Rs.510.85/-	Sft P.Sft	Rs.57,2
dhesivebondov	/ingPre er3/4"tl	epolis hick(1	hedGran :2)cemer	iteofsr	becifiedth Imortorbe	nickne	ssandsha	deoffullwid	= @ thofap	112	Sft P.Sft witha	Rs.57,2
dhesivebondov	/ingPre er3/4"tl ge.(i) 3	epolis hick(1 1/4" th	hedGran :2)cemer ick	iteofs ntsand	Imortorbe	nickne ed,cor	ssandsha npleteinall	deoffullwid	= @ thofap	112 <i>Rs.510.85/-</i> pprovedqualitylaid ed and directed b	Sft P.Sft witha y the	Rs.57,2
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dhesivebondove Engineer Inchar Providing and F P/F stainless ste	vingPre er3/4"ti ge.(i) 3 1 1 ixing 8 1 eel tube 1 nstalati Buildi	epolis hick(1 x/4" th x amm ti x elor p x ion of	hedGrani :2)cemer ick 18 18 hick Glas 18 ipe 16-sv 5 q.manag	iteofsp ntsand x x x is con x vg sup x	nplete in oport con	nickne ed,cor x x all res x	ssandshar npleteinall 2 1 1/2 spect. 3 in all resp 3 lete in all n Building	deoffullwid respectasa Total Total ect. 3'heigi Total respect Total	= @ thofap ipprov $= = @$ $= @$ $= @$ $= @$ $= @$ $= @$	112 <i>Rs.510.85/-</i> oproved qualitylaid red and directed b 36 27 63 <i>Rs.1,309.00/-</i> 54 54 54 54 54 54 54 54 54 54	Sft P.Sft witha y the Sft Sft P.Sft Sft P.Sft Rft Rft Rft Rft P.Rft	Rs.82,4 Rs.16,2 Rs.37,5 Rs.300,0

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Page 128

h	ANALYSIS OF MAN HOLE (3-1/4	'X <u>2-1/2')</u>	. I I	
			2nd	Bio Annual I	2022
	Earth work excavtion in open cutting for sewers and manholes				
1	i/e shuttering, OFt depth.				
	1x5-1/2x5x2=55 Cft		55 Cft		
				ł	
	· · · · · · · · · · · · · · · · · · ·	<u>@ Rs.</u>	11740.40	%0Cft	646
	Providing, laying, watering and ramming brick ballast 11/2" o				
	2"(40 mm to 50 mm) gauge mixed with 25% sand, for floor				
2	foundation, complete in all respects.				
	1x5-1/2x5x1/2=14 Cft		14 Cft	İ	
		.@ Rs.	9314.40	%Cft [']	1304
	P/L Plain cement concrete i/c placing compacting, Finshing and				
	curing complete i/c screening and washing stone aggregate				
3	1:2:4				
-	1.2.4 1x3x2-1/2x1/3 = 3 Cft				
	1,3,2-1/2,1/3 -3 Cit	· .	3 Cft	- · •	
		<u>.@ Rs.</u>	38178.90	%Cft	1145
	R.C.C in raft/ strip foundation base slab of columns and			1	
	retaining wall etc without shuttering complete in all respect usin			i i	
4	type "C" and nominal mix 1:2:4	•			
	1x4-1/2x4-1/3=6 Cft		6 Cft		0747
	· · · · ·	<u>.@ Rs.</u>	457.75	P.Cft 1	2747
	Fabrication of mild steel reinforvement for cement concrete				
	including cutting bending laying in position making joints,			I	
5	fastening, i/c bending wire and rust using (deformed bar)				
	6x6.75x0.454=18 Kg				
			18 Kg		
		<u>.@ Rs.</u>	31396.55	% Kg	5651
	Pacca brick work other then building up to 10 Ft height (1:4)				÷.,
6	2x(4-1/2+2-1/2)x3/4x3 =32 Cft		, 		
			32 Cft		40000
		<u>.@ Rs.</u>	32175. 1 0	% Cft	10296
	Cement sand Plaster 1:4 (1/2" thick).	· ,			
	2x(3+2-1/2)x3 =33 Sft				
7	2x(4-1/2+2-1/2)x3/4 =11 Sft			i I	
	2x(4-1/2+4)x1-1/2 <u>=26 Sft</u>			•	
	Total =70 Sft		70 Sft		2222
		<u>.@ Rs.</u>	3245.95	% Cft	2272
8	Applying floating coat of cement 1/32" thick.				
0	1x2(3+2-1/2)x3 =33 Sft		33 Sft		606
		<u>.@ Rs.</u>	1835.90	% Cft	606
	Extra for banching in manhole.				
ç	1x3x2-1/2 =7.50 Sft	_	7.5 Sft		4
		<u>.@ Rs.</u>	1816.40	% Sft	136
	·				
,					
				Total	24803
_					

Sub Engineer

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Sub Divisional Officer Buildings Sub Division Lalian.

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External Sewerage.

									i
1	Earth work excavation in open cutting for sewar and man hole i/c shuttring and timbing dressing to correct sectiondimension acording to templiates and remaning suface exterion all type of soil excep shingle groval rock lead up to 100' depth 0'	800	x	2.5	X	3.5	, 7000	Cft	
				<u>.@Rs.</u>	6683.30	%o Cft			46783
2 [.]	P/L reinforcment concrete pipe moulded with cement concrete 1:1/2:3 conforing to ASTM specification 14.73 class 2 i/c carriage of pipe from factory to site of work complete in all respect 9" dia.						500	Rft	
			┢──	.@Rs.	528.3	P.Rft		Rft	264150
	12" dia								
-	300	Rft		.@Rs.	695.6	P.Rft		Rft	208680
		<u> </u>							
	Const: of man hole.						20	No	, , }
				<u>.@Rs</u>	24803.26	Each		Each	496065.2
						Total			1015678 I
		<u> </u>	۰.						

Sub Engineer

SUB DIVISIONAL OFFICER BUILDINGS SUB DIVISION LALIAN. 28

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RECOVERY OF OLD MATRIAL

1	Wooden Door								
	•	19			=	19	No	;	
			• 1	Total	=	· 19	No		
	•				@	Rs.7,000.00/-	Each	•	Rs.133,000/-
2	Window		•	· · ·				ī.	
		20			=	20	No		
				Total	=	20	No		
					@	Rs.6,000.00/-	Each		Rs.120,000/-
3	C Window							-	
	,	4			=	4	No		· · .
				Total	=	• 4	Noʻ		
					@	Rs.2,500.00/-	Each		Rs.10,000/-
4	Collassible gate	e t						• .	-
					=	2	No	• .	
				Potal	<u></u>	2	No		
					@	Rs.15,000:00/-	Each	\checkmark	Rs.30,000/-
								۲.	
·	·					GRAND TOTAL		, '	Rs.293;000/-
								ľ.	2630001

É SUB ENGINEER

SUB DIVISIONAL OFFICER BUILDINGS SUB DIVISION LALIAN.

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		<u>SANITRY</u>	INSTALLATION		:	2nd Biant	nual 2022
ovi di na and fitting	1 000 D	i ece Europeon (Coupl ed set of W at er	· CI oset (W	C) and flushi	ng Ci	
er n of PORT A br a and r aw al bol ts o	and (ful	ll si ze) i/c the c(ost of CP/rubber connects as approved and di	cti on, unin	Die, normai sea	t cov	
harge.	8	No		=	8	No	
	o	INO -		a	Rs.19,987.90/-	Each	Rs.159,903/-
oviding and fitting ith foot rest. White	glazed	earthen ware wa	ater closet, squatter ty	pe (Orisa pa	ttern), combine	d	
	32	No		=	32	No	
				a)	Rs.2,458.35/-		Rs.78,667/-
rovi di ng and f i tti ≴i ng bracket set, w	ng gl a ⁄aste pi	zed earthen war pe and waste co	e wash hand basin /va oupling, etc.				11
	32	No		= @	32 -// <i>Rs.5,450.60</i>	No Fach	Rs.174,419/-
				÷			
oviding and fitting	glazed	earthen ware ve	enti (22"x16") including	j bracket se			-
	40	No		=	40 Rs.4,329.95/-	No Each	Rs.173,198/-
			Auching sisters 1262	@ litro (3 galle		Each	N3.170,100/
oviding and fitting cluding bracket set	t, copp	er connection, e	n flushing cistern 1363 tc. complete. White	ntre (5 gan	32	No	
	32	No .		- @	Rs.2,649.35/-		Rs.84,779/-
roviding and fitting	"P" tra	o 10 cm (4") ala:	zed.	÷			· .
origing and aring	60	No		=	60	No	Do 46 000/
				@	Rs.283.15/-	Each	Rs.16,989/-
roviding and fixing	looking	g glass 55x40 cn	n (22"x16") size,and 5	mm thick, fi	rst quality.		
	30	No		. =	30	No Each	Rs.19,145/-
				æ	Rs.638.15/-	Eduli	
roviding and fixing			OCK 1/2" dla	=	40	No	
	40	No		æ	Rs.775.00/-	Each	Rs.31,000/-
roviding and fiving	chrom	ium plated tee si	top cock 15mm (½'')	<i></i>			
roviding and fixing	80	No	•• P ••••• • •	=	80	No	
	00			a	Rs.955.00/-	Each	Rs.76,400/-
roviding and fitting	mixtur	e valve					
j	30	No		=	30	No Each	Rs.66,863/-
			•	a	Rs.2,228.75/-	Each	13.00,000/
Providing and fitting	g PPR F	Pipe 32 mm			300	Rft	-
	300	Rft		= @	Rs.93.65/-		Rs.28,095/-
Providing and fitting		2ine 25 mm		۳			·
roviding and muni	200	Rft		=	200		
		•		· @	Rs.57.95/-		Rs.11,590/
roviding and fixing	stainle	ess steel sink wi	th drain board, size 12	0x60 cm (48	"x24") including	9	· · ·
racket set, waste p	ipe and	l waste coupling	ļ.		.1	No	
	1	No		= @	Rs.6,405.30/-		Rs.6,405/
salas Issan huma Da	oin Miv	ar double Rib C	de of Sonex/Master/Fa Cock, open wall showe	isal compris r, Muslim sh	ing of 3-No Tee lower,waste co	stop upling	
nd bottle trap etc. o	comple	te in all respect a	as approved and direc	ted by the E	ngineer incharg	je	•
-	9	No		. =	. 9		
	9	NO		` @	Rs.33,004.00/-	Each	Rs.297,036/
over of 22 SWG MS	5 sheet, alvo (A	_insulated with 4 mbassador / Cal	ser) comprising of tank 4"thick high density gl non) i/c cost of access	ories & mak	ing connection	5 cut c 17 4	
omplete in all resp	ect as a	approved and di	rected by Engineer Inc	harge 5 Gal	capacity		
	9	No		=	9	No	
	-			æ	Rs.19,819.90/-		Rs.178,379/
roviding, laying, cu ints, using G.I. pip	utting, j bes of E	ointing, testing 3.S.S. 1387-1967	and disinfecting G.I. p complete in all respec	ipeline in tre ts, with spe	enches, with so cials and valves	cket 6.	
edium Quality		· -					
" dia	300	Rft		=	300 -/ <i>Rs.216.00</i>		Rs.64,800
	250	D#		. @ =			
	250	Rft	Λ.	-	Rs.168.30/-		Rs.42,075/
' dia	200		///		KS. 100.30/-		KS.42,073/
	1	R#>	//	=	150) Rft	
' dia ia	150			= @) Rft Per Rft	Rs.42,073/

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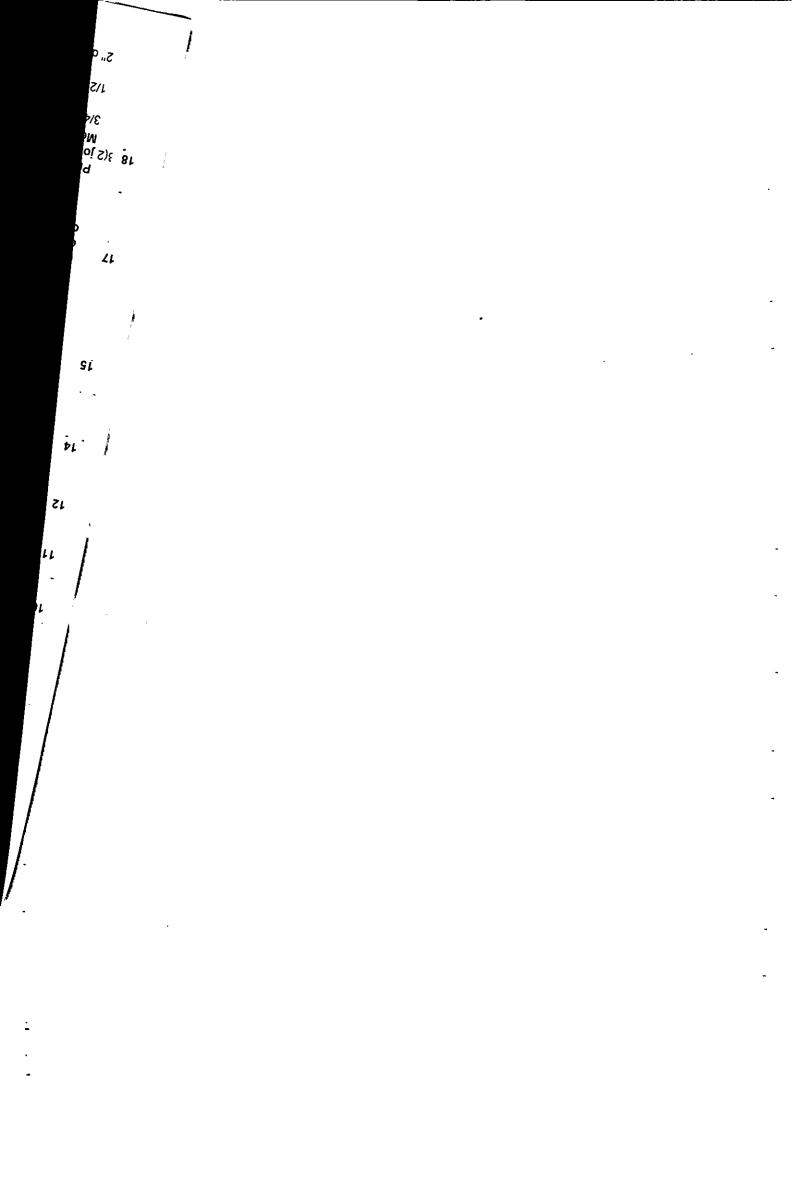
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AR SCIEN

Reference No.:

3111930/AR

To. ADNAN SB T H Q LALIAN CHINOT.

> Dated: NTN No.:

18-08-2022 4232594-3 .

QUOTATION FOR QUEUE MANAGEMENT SYSTEM

Multi Counter Queuing Token Display System is useful to Display and Call the Token/Ticket Number of the Customer where there is practice of serving clients/customers in the Queue. It is widely used by Banks, Railways, Airlines Ticketing Counters, Doctors, Hospitals, Visa Counters, Customer Service Counters of Mobile Phone Companies and many more places where large numbers of customers are to be served in Queue.

The Electronic Queuing System will have one Next Button Box with each Executive on all 3 to 99 counters.

The Operator/ Executive will have to just Press Next Button to Call the Next Customer. The Next Token Number will be Display with its Respective Counter Number with HUMAN FEMALE VOICE or with Bell.Sound.

We provide solution according yours requirements and prices.

Token Display System 1.

- 3 digits seven segment 4.2 inch metal body Counter Display :
- keypad Ticket Calling
 - Bell; Soft Tone and voice only Customer alert type
 - Included only extra material charges will be paid like conduct Patti etc. At site Cabling:
- One Year with Parts terms and conditions apply Warranty
- Power supply

system supply included, Total Price of One System including MODEL NO.TI 300

With special Discount offers with full integration 03 displays and 03 keypads with Integration embedded software 01 controller integrate with bell or voice calling Announcement And 01 ticket dispenser button based for ticket issuance price Rs. 250,000/= and same system with semi integration price Rs.220,000= Prices are exclusive of all taxes. It will be charged extra if applicable.

IN FUTURE THIS SYSTEM EXTENDABLE

NOTE. QUOTATION VALID FOR 14 DAYS ONLY.

AR SCIENTIFIC CORPORATION

C/S Manager Abdul Rehman sb

Page 1 of 8

25-LG, Mamoona Center, Syed Mouj Darya Road, Lahore. E-mail: a.r.s.c.1pk@gmail.com, Ph: +92 423 7116565, 03224577564

AR SCIENTIFIC CORPORATION

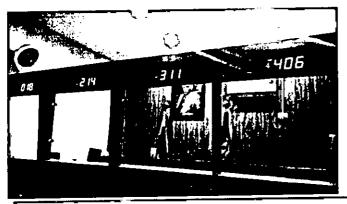
NOTE We have provided system in IRAN CONSULATE IN LAHORE, Telenor Office in phalia, jazz franchise Gujrat, Telenor franchise mindi bhauddin . Mcb bank in Hassan abdal, Babar Medicine Company in Lahore, Baliqees sarwar hospital Ferozepur road Lahore, Arif memorial hospital ferozpur road Lahore . bahria town hospital lahore .pac college gulberg Lahore. Bakhtawar Ameen memorial hospital Multan. Govt CSD department Rawalpindi. Excise and taxation office Rawalpindi, PAF Hospital Sargodha, The National hospital Faisalabad, DHQ hospital liver center Faisalabad. The national hospital Faisalabad. Govt, General hospital Faisalabad. Govt, General hospital Lahore. THQ hospital chak jumrah Faisalabad .T H Q hospital Haripur .oppo service center Faisalabad. Oppo sevice center Lahore. FBR Karachi, doctor hospital Lahore. Gov,t teaching hospital shahdra, Shalamar hospital Lahore . Police khidmat markaz hafizabad .Thai airline Lahore. Sheikh zayed hospital Lahore , govt, mozang hospital Ihr, govt services hospital Lahore. green plus pharmacy , Govt, Lahore general hospital SRO office Sargodha etc The Punjab school system Col sultan lab Sialkot , Tehsil office pasrur , govt, csd head office rwp al noor diagnostic center shadman , nono mommy poly clinic faisal town Lahore al nasar lab Lahore wasa cooperate office Lahore. all oppo and real me site in pakistan our more than 700 installation in all over Pakistan.

PAYMENT and General Terms & Conditions

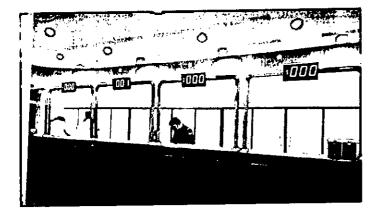
- Payment will be made by the client in two parts. 70% will be paid at the time of order as advance and the rest of 30% on delivery
- Delivery time at 15 workings days date. Which starts from the date of receipt of confirmed order with advance?

Page **2** of **8**





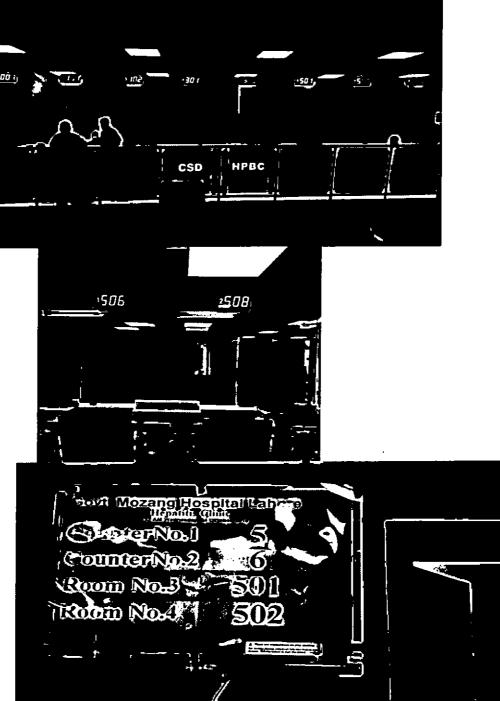




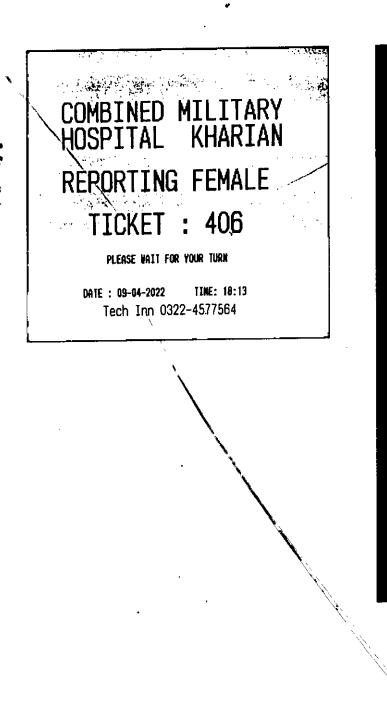
Page 3 of 8

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Dual line status display

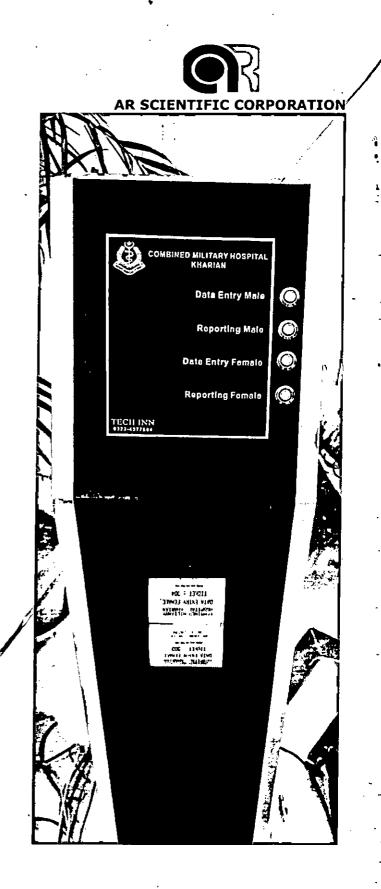




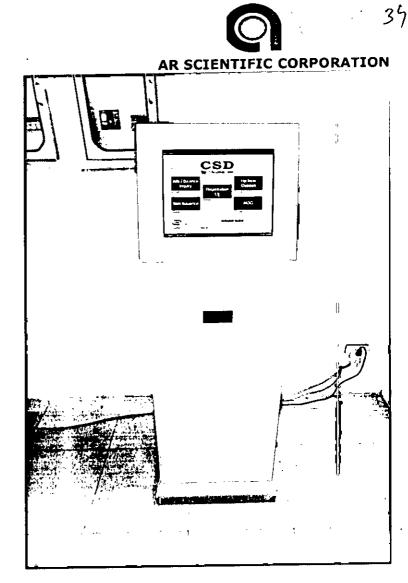
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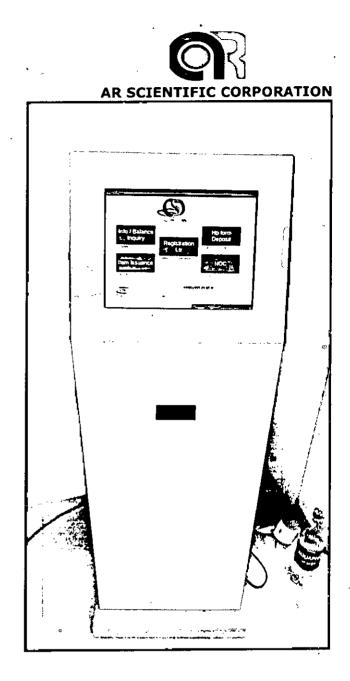
Page 6 of 8



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Page **7** of **8**

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C/S Manager AR Scientific Corporation -

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Financial Components: Capital **Cost Center:**OTHERS- (OTHERS) **Fund Center (Controlling):**LE4203

Grant Number:Government Buildings - (PC12042) LO NO:LO22010027 A/C To be Credited:Account-I

PKR Million

Sr #	Object Code	2025-2026		2026-2027		2027-2028		2028-2029		2029-2030	
		Local	Foreign								
1	A05270-To Others	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
2	A12403-Other Buildings	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
	Total	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000

Financial Components: Capital **Cost Center:**OTHERS- (OTHERS) **Fund Center (Controlling):**LE4203 Grant Number:Government Buildings - (PC12042) LO NO:LO22010027 A/C To be Credited:Account-I

PKR Million

Sr #	Object Code	2025-2026		2026-2027		2027-2028		2028-2029		2029-2030	
		Local	Foreign								
1	A12403-Other Buildings	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
2	A05270-To Others	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
	Total	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000

8. <u>Annual Operating and Maintenance Cost after Completion of the</u> <u>Project</u>

The Annual operating and maintenance cost after completion of the project will be borne by the concerned District Health Authority (DHA) as well as Primary and secondary healthcare Department, Lahore.

9. DEMAND AND SUPPLY ANALYSIS

Semi modern health facilities and scientific diagnostics are presently available in this Hospital. This initiative of revamping Hospital will cover all departments and components of healthcare including Medical, Surgical, psychiatric, Cardiac, ENT, Ophthalmic and Pediatrician components. Moreover, women health components i.e. Gynecology and obstetric will also be emphasized upon. In emergency, calamities and natural disasters, valuable lives will be saved through revamping of Emergency Units.

10. FINANCIAL PLAN AND MODE OF FINANCING

10.1 FINANCIAL PLAN EQUITY INFORMATION

10.2 FINANCIAL PLAN DEBT INFORMATION

undefined

10.3 FINANCIAL PLAN GRANT INFORMATION

attached

8. Financial Plan and Mode of Financing

The project will be executed / financed through Annual Development Program under the sector Primary and Secondary Healthcare Department, the Government of Punjab. Year wise financial utilization is as under:

Revenue Side

			(Rs.in Million)								
Year	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	Total				
Funds Released	38.000	18.823	2.545	2.646	3.692	7.42	73.126				
Utilization	17.656	18.722	2.343	2.240	1.782	0.63	43.343				

Capital Side:

Year	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	Total
Funds Released	0	0	0	0	0	19.914	19.914
Utilization	0	0	0	0	0	0	0

<u>Balance funds may be provided for completion of the project in</u> <u>subsequent years through ADP</u>

10.4 WEIGHT COST OF CAPITAL INFORMATION

undefined

11. PROJECT BENEFITS AND ANALYSIS

11.1 PROJECT BENEFIT ANALYSIS INFORMATION

Social Benefits with Indicators

Social economic burden will be decreased due to availability of better medical services in the district. Time and money of community will be saved which were expended in other cities like Lahore Islamabad etc. on treatment of patients and for boarding and logging of attendants. The social status of community will rise.

11.3.1 Social Impact:

A number of patients lose their lives or suffer serious disabilities for want of timely access to the health facilities. The project will ensure that no one is left to reach the health facilities. The most important beneficiaries will be mothers having complicated delivery conditions. The number of patients transferred to the health facilities for treatment and lifesaving will serve as indicators for performance evaluation. In long term the project will help in improving socio-economic indicators of IMR and MMR.

Employment Generation (Director and Indirect)

Revamping of this Hospital will lead to generation of employment for highly skilled /professional staff and unskilled staff leading to reduction of unemployment. Huge employments opportunity will be created from the establishment of the project. The Medical doctors and paramedics who are trained in this discipline or intended to specialize in this field can make maximum use of training. A large number of gazette and non-gazette posts will be available for employment directly or indirectly.

11.2 ENVIRONMENTAL IMPACT ANALYSIS

It will have no hazardous effect on the environment. On the other hand, addition of horticulture and landscaping will provide healthy environment to the general public. All the more, the program is environment friendly having no adverse environmental effects. Simultaneously, this shall further improve environment by creating sense of responsibility among employed and beneficiaries of the service.

11.3 PACT ANALYSIS

undefined

11.4 ECONOMIC ANALYSIS

Delay in the implementation of the project will lead to increase in cost and increase financial burden on the Government and general population of Punjab. Since the project is one of the major needs and a long awaited desire of the community, therefore, Government of the Punjab contemplated plan for early execution of Revamping of Emergency Units. The delay will not only deprive the patients of the state of the art facility but also distort the public image of the Government

11.5 FINANCIAL ANALYSIS

Financial Impact:

In the beginning, It is extremely difficult to put a money value on each life saved by taking/shifting a critically ill patient to the appropriate health facility for treatment. However, the exact amount spent shall be calculated against each patient shifted by analyzing data collected during operations.

11.2 Revenue Generation

Revenue will be generated from:

Indoor fee Laboratory fees Diagnostic facility fees Dental fee ECG fee Private room charges Ambulance charges

From other fees prescribed by Government

12. IMPLEMENTATION SCHEDULE

12.1 IMPLEMENTATION SCHEDULE/GANTT CHART

Original Gestation period (From September, 2017 to June, 2019)

Extension in Gestation period for one year with no change in cost & Scope till June 2020.

1st Revised gestation period till June, 2021

2nd Revised gestation period till June, 2023.

3rd Revised gestation period till June, 2025

12.2 RESULT BASED MONITORING (RBM) INDICATORS

undefined

12.3 IMPLEMENTATION PLAN

undefined

12.4 M&E PLAN

The operation team will monitor the progress of the project and will hold regular weekly meeting to review the progress under the supervision of Project Director.

12.5 RISK MITIGATION PLAN

undefined

RISK REGISTER

Programme for Revamping of all THQ Hospitals in Punjab

		RISK DATA			itigation / Cu tative Assess		MITIGATION
Risk Item No	Risk Description/Event	Cause	Effect / Consequences	Likelihood (1 to 3)	Impact (1 to 3)	Risk Score (1 to 9)	Mitigation / Actions
1	Due date for the completion of some hospital sites may be extended due to increase in scope from the Client	Direct instructions from the Medical Superintendents / Hospital Administration to revamp the remaining areas	Significant scope increase requested by the Hospital administration will result in: 1. Project delays 2. Contractor claims 3. Increase in project cost along with variations	3	3	9	Hospital administration is requested to finalize the scope during joint field visits o C&W and PMU
2	Various unexpected structural issues are being encountered	Unforeseen structural issues are expected to face during execution in hospital buildings approaching end of life	 Stoppage of work Performance of the Contractor has affected Delays in the project 	3	3	9	Various items which are unforeseen and expected to be used during execution may be taken in estimates so that those can be executed to address these issues
3	Change in management of the Client	Management change	Re-briefing is to be carried out	2	2	4	Acceleration of understanding for smooth and expeditious transition, without affecting the project
4	Financial Issues	Funds for these schemes should be provided as per the targets	 Delay in tendering Effect on quality as the Consultant supervision will not take place Inconvenience to the patients 	3	3	9	Approval of PCIs and early release of funds is requested
5	Nationwide spread of pandemic i.e. COVID-19 in 2nd and 3rd quarter of this year	Work delays during nationwide lockdown.	 Delays in completion of works Claim requests received by Contractor and Consultant 	3	3	9	Contractor will be asked to depute fully vaccinated labor

12.6 PROCUREMENT PLAN

undefined

13. MANAGEMENT STRUCTURE AND MANPOWER REQUIREMENTS

The Organogram of new Health Management Structure is available in PC-I

14. ADDITIONAL PROJECTS / DECISIONS REQUIRED

NA

15. CERTIFICATE

Focal Person Name:Mr. KHIZAR HAYAT **Email:**

Designation:Project Director, PMU P&SHD **Tel. No.:**042-99231206

Fax No: Address:31/E1, Shahrah-e-imam Hussain? Road? Block E 1 Gulberg III, Lahore, Punjab

15. It is certified that the project titled "Revamping of THQ Hospital Lalian

(3rd Revised)" has been prepared on the basis of instruction provided by the Planning Commission for the preparation of PC-I for Social Sector projects.

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17. RELATION WITH OTHER PROJECTS