



South Eastern Railway

Office of the
Chief Medical Superintendent/Chakradharpur
Rly.Tel.No.72470(O) – 72471(R)
Fax No. & 72259 & 72495 (Rly.) – 06587-239998 (P&T)
Email address: cmsckpser@gmail.com

No: CMS/CKP/Pathology/Outsourcing/2598

Dt:06.10.2025

To
The CPRO,
S.E.Railway, Garden Reach,
KOLKATA – 43

Sub : Publication of expression of interest (EOI) for the under mentioned work.

Applications are invited from various Hospitals/Investigation centers near Divisional Railway Hospital/Chakradharpur, Sub-Divisional Hospital/TATA & BNDM along with all Health Units (Jharsuguda, Dangoaposi etc.)/S.E.Railway for undertaking investigations like Pathological, CT Scan, MRI, USG etc. for Railway beneficiaries on CGHS (Non-NABH) rates of RANCHI for a period of one (01) year. Interested Hospitals/Investigation centers near Divisional Railway Hospital/Chakradharpur, Sub-Divisional Hospital/TATA & BNDM along with all Health Units should apply to the Chief Medical Superintendent, Divisional Railway Hospital, Chakradharpur, Dist- West Singhbhum, Jharkhand – 833102 by post/by hand at CMS Office, Chakradharpur along with relevant documents in sealed cover. (E-mail addressed of CMS/CKP cmsckpser@gmail.com)

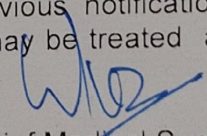
Closing date and time :- **15:00 Hrs of 22.10.2025**

Details are available at the website :-
[www.ser.indianrailway.gov.in\(gotodivision>Chakradharpur>Department>Medical>notification\) for details](http://www.ser.indianrailway.gov.in(gotodivision>Chakradharpur>Department>Medical>notification) for details)

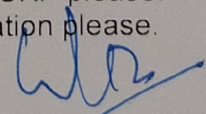
Two copies of expression of interest (EOI) notice for the above mentioned works are enclosed herewith for publishing in local & also reputed news papers.

Fund exists under head of allocation J 215-32 (Medical) under CMS/CKP.

CPRO/GRC is requested to publish the expression of interest (EOI) through news papers and intimate to the undersigned. The previous notification published through news papers on 07.08.2025 vide PR No. 490 may be treated as cancelled due to administrative reason.


Chief Medical Superintendent
S.E.Railway / Chakradharpur

Copy to :- PCMD/SER/GRC for kind information please.
Copy to :- PS to DRM/CKP for kind information of DRM/CKP please.
Copy to :- Sr.DFM/CKP,CMS/TATA & BNDM for information please.


Chief Medical Superintendent
S.E.Railway / Chakradharpur

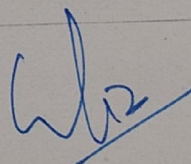
E O I NOTICE

South Eastern Railway

Medical Department / Chakradharpur Division

For & Behalf of President of India, Divisional Railway Manager, (Medical), Chakradharpur, S.E.Railway invites with "Expression of Interest (EOI) for tie-up with various hospitals/Health Units of S.E.Railway, Chakradharpur Division for the under mentioned work.

Srl No	Description of Work
01	Applications are invited from various Hospitals/Investigation centers near Divisional Railway Hospital/Chakradharpur, Sub-Divisional Hospital/TATA & BNDM along with all Health Units (Jharsuguda, Dangoaposi etc.)/S.E.Railway for undertaking investigations like Pathological, CT Scan, MRI, USG etc. for Railway beneficiaries on CGHS (Non-NABH) rates of RANCHI for a period of one (01) year. Interested Hospitals/Investigation centers near Divisional Railway Hospital/Chakradharpur, Sub-Divisional Hospital/TATA, BNDM & HU/JSG,HU/BUF,HU/SINI, HU/DPS,HU/ADTP,HU/RKSN should apply to the Chief Medical Superintendent, Divisional Railway Hospital, Chakradharpur, Dist:- West Singhbhum, JHARKHAND – 833102 by post/by hand at CMS Office, Chakradharpur along with relevant documents in sealed cover.
	Closing date and time :- 15:00 Hrs of 22.10.2025
	Details are available at the website:- Chakradharpur>Department>Medical>notification">www.ser.indianrailway.gov.in/gotodivision>Chakradharpur>Department>Medical>notification for details



Chief Medical Superintendent
S.E.Railway / Chakradharpur

(Expression of Interest)

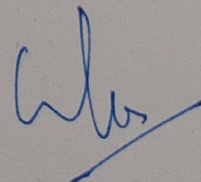
Sub: EOI for Pathological/Radiology Investigation Service Provider for Railway Patients of Chakradharpur Division i.e. DRH/CKP,SDRH/BNDM & TATA & all Health units of CKP Division.

Ref: Ministry of Railways/Rail Board's Letter No 2011/H/6-4/Policy dated 03/02/2015.

Chief Medical Superintendent, Divisional Railway Hospital, S. E. Railway, Chakradharpur hereby invites "Expression of Interest (EOI)" from the interested and reputed diagnostic centers/ hospitals for shortlisting the interested parties to provide Pathological/Radiological investigation facility (as detailed in Annexure A) to the railway beneficiaries of Chakradharpur Division i.e. Div. Railway Hospital Chakradharpur, Sub-Divisional Railway Hospital Bondamunda, Sub-Divisional Railway Hospital Tatanagar, Health unit Dangoaposi, Health Unit Jarsuguda, Health Unit Rourkela, Health Unit Rajkharsawan, Health Unit SINI, Health Unit Adityapur and Health Unit Bimalgarh. The successful service provider(s) will formulate a mutual agreement with the Chief Medical Superintendent Chakradharpur and will work on the basis of terms and condition of the MOU (Memorandum of understanding) immediately from the date of finalization of the MOU. The responses on the prescribed format (as enclosed in annexure-B) may be submitted to the Chief Medical Superintendent, Divisional Railway Hospital, S. E. Railway, Chakradharpur on or **before 22.10.2025**.

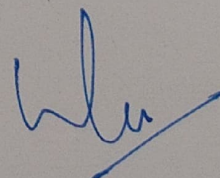
Special terms and conditions: -

- (1) The Diagnostic center should be of good standard, preferably NABL accredited. Testing center should have all necessary valid documents issued by regulatory bodies to operate such centers.
- (2) All tests must be carried out in house in the diagnostic center with good quality report. Special investigations, if done from other centre must be mentioned. List of major equipment/instruments available in the Diagnostic center may be submitted with EOI.
- (3) Name & educational qualification of Doctors, Technicians etc. who are appointed/ engaged at the testing center may be submitted with EOI.
- (4) In Railway Hospitals or Health Units **where in-house pathology facilities are not available**, the selected agency shall **install essential equipment/machines for basic investigations** within the hospital premises itself to ensure **prompt and same-day reporting**.
- (5) The agency shall ensure that **minimum basic tests** are conducted **during OPD hours** at the Railway Hospital premises to provide timely diagnostic support to patients.
- (6) In case of **specialized or advanced investigations** not feasible on-site, samples may be sent to the agency's main diagnostic centre. However, the agency must ensure that **reports are received within the minimum possible turnaround time, preferably within 24 to 48 hours**.

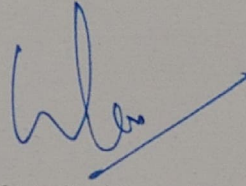


- (7) All patient investigations shall be conducted **strictly as per the prescription/requisition** issued by an **authorized Railway doctor** or any other person **nominated by the Chief Medical Superintendent (CMS)**.
- (8) The agency shall maintain **strict confidentiality** of all medical records and patient data. Reports must be delivered to the hospital in both **hard copy and digital format (if required)** for record-keeping.
- (9) The agency shall ensure that all installed equipment remains **in good working condition** and that the **quality of reagents and consumables** used in testing adheres to **standard medical and safety norms**.
- (10) The performance of the agency will be **periodically reviewed** by the Railway administration, and any deviation from agreed terms may lead to **termination or penalty** as deemed appropriate.
- (11) The test reports will be delivered to the (i) Authorized person of the Railway Hospital/Health Unit and (ii) The patients/patient party in case of OPD patients. The delivery of report shall be done under clear signature of receipt.
- (12) There shall be alternative back up arrangement in the diagnostic center to handle any failure and testing not to be refused.
- (13) Pre-Qualifying Criteria - A team of three nominated Railway Medical Officers of the Division will inspect the facilities available in diagnostic center and will submit their report to CMS/CKP. Final MoU/agreement will be signed on the basis of satisfactory report submitted by the three member committee.
- (14) The decision of the Railway authority for selection of diagnostic center is binding and final.
- (15) GST will be applicable as per extant rule. Only GST Registered firm will be considered for empanelment.
- (16) The rates to be paid by Railway to the diagnostic center shall be as per the CGHS rate; In case CGHS rate for a particular investigation is not available then AIIMS rate or any other Govt. hospital rate shall be applicable. In case no govt. rate is available then reasonable rate as per mutual agreement between Railway and the center shall be payable.
- (17) The services will be cashless for the patients duly referred by the person authorized by CMS/ACMS(I/C) of the railway Hospital/Health Unit. Bills to be submitted every month along with a copy of the referral letter. Payment will be arranged by the Railway administration through RTGS/ NEFT. Details about the bank's name, account no., branch, IFSC code etc. to be provided for this purpose.
- (18) MOU will be valid for 01 (one) years. MOU may be entered with more than one testing centers.

On receiving the EOIs, a nominated team of doctors from the Railways will inspect the diagnostic centres, if necessary. On being selected for empanelment, the diagnostic centres will be informed over phone or/and by speed post. The diagnostic centres may depute their authorised representative for signing of MOU. The patient's ID Card No/ Medical Treatment



Identity Card Number will be mentioned on the said referral letter. The agency/diagnostic centre will verify the identity card of the Rly. patient/Rly. beneficiary and satisfy themselves prior to conducting the tests/investigations. In case of any doubt, the diagnostic centre will contact the authorized person from the Railways whose name(s) and telephone number(s) will be provided at the time of signing of MoU. The bills to be prepared in triplicate by the Diagnostic Centre on monthly basis and submitted to the office of the Chief Medical Superintendent, Divisional railway Hospital, Chakradharpur, West-singhbhum, Jharkhand 833102 along with copies of referral letter, for arranging payment. Payment will be made through NEFT/RTGS. For any other information, the office of the undersigned may be contacted. For specific queries, Dr. Subrat Kumar Mishra, CMS/Div. Rly Hospital, Chakradharpur(Mob no: 9771482500 & email: cmsckpser@gmail.com) may also be contacted.



Chief Medical Superintendent
S.E. Railway, Chakradharpur
West-Singhbhum
Jharkhand- 833102

Name of the Work:- Tie -up with Hospital/Investigation centres with Divisional Railway Hospital, Chakradharpur, Sub. Divisional Railway Hospital, Tatanagar, Sub. Divisional Railway Hospital, Bondamuna and all Health Units of CKP Division (JSG, BUF, DPS, ROU, SINI, ADTP, RKSNI)

ANNEXURE-A (List of Investigation)

Sl. No.	CGHS SL.NO	Name of Investigation	CGHS approved rate Ranchi /BBS NABL/Non-NABL ,Rate offered by the Firm/Agency
1	1435	Histopathology Frozen Section	
2	1436	Paraffin section	
3	1439	FNAC	
4	1438	Body Fluids (Malignant test)	
5	1416	Thalassemia studies	
6	1460	Body fluid (CSF/Ascitic) Sugar, protein etc	
7	1437	Cx Smear (PAP smear)	
8	1394	Complete hemogram (DC, HB, RBC, count and indices, TLC, DLC Platelets, ESR, Peripheral Smear, examination	
9	1389	Hb	
10	1390	TLC	
11	1391	Differential count	
12	1395	Platelet count	
13	1393	Red cell count with MCV, MCH, MCHC, RDW, (Red cell width)	
14	1398	Packed cell volume (PCV)	
15	1399	Comment on peripheral smear examination body	
16	1392	ESR	
17		L. e cell	
18	1417	Sickling	
19	1420	Combs test	
20	1402	OFT (Osmotic fragility test)	
21	1492	PT	
22	1406	APTT (Activated partial thromboplastin time)	
23	1401	BT	
24	1409	Bleeding disorder panel, PT, APTT, Thrombin time, Fibrinogen D-dimer, FDP	
25	1400	Malaria Parasite (side test)	
26	1403	Bone marrow smear exam	
27	1404	Bone marrow smear exam with iron	
28	1405	Bone marrow smear exam with cyto chemistry.	
29		Bone marrow Biopsy	
30	1426	HIV I & II	
31	1424	Hb S Ag	
32	1425	HCV	
33		ASO quantitative	
34	1459	CRP Quantative	
35	1427	VDRL	
36	1453	RA factor	
37	1508	Pregnancy test	
38	1407	Malaria Antigen (card test)	
39	1388	Semen Analysis	
40	1383	Urine RE	
41	1385	Stool RE	
42	1386	Stool Occult Blood	
43	1559	T3, T4, & TSH	
44	1,481	Electrolytes (Na+)	
45	1,482	Electrolytes (K+)	
46	1,531	Electrolytes (Cl+)	
47		Urine culture & sensitivity	

48		Pus culture & sensitivity	
49		Other body fluids etc culture and sensitivity.	
50		Blood culture and sensitivity	
51	1823	Widal test for tube agglutination method	
52	1510	HBA1C	
53	1473	ANA	
54	1539	PSA -Total	
55	1543	CA 125	
56	1565	PRL	
57	1563	LH	
58	1564	FSH	
59	1470	Serum IgG	
60	1517	Ferritin	
61	1528	Hb Electrophoresis	
62	1529	Serum Protein Electrophoresis	
63	1444	FBS	
64	1446	Urea	
65	1447	Creatinine	
66	1463	Total cholesterol	
67	1475	SGPT	
68	1476	SGOT	
69	1487	TRIGLYCERIDE	
70	1514	Lipid Profile	
71	1456	S.Bilirubin	
72	1455	Uric Acid	
73	1418	Blood grouping & typing	
74	1555	Anti CCP antibody	
75	1477	Serum AMYLASE	
76	1534	Serum Lipase	
77	1517	Serum Ferritin	
78	1384	Urinary Microalbumin	
79	1466	Serum Calcium ,	
80	1524	CD3/CD4/CD8 cell count	
81	1552	Vitamin D	
82	1518	Vitamin B12 Assay	
83	1519	Folic Acid Assay	
84	1567	Serum Parathormone phosphate(PTH)	
85	1454	Serum BensJones Protein	
86	1569	Serum insulin	
87	1574	Testing Growth Hormone assay	
88	1566	Serum Cortisol	
89		Dengue Card test IGM	
90	1615	DigitalX-Ray (Skull Other part of Body)	
91	1637	CT-Scan Brain Plain	
92	1638	CT-Scan Brain contrast	
93	1639	CT-Scan Thorax	
94	1642	CT-Scan Abdomen	
95	1641	CT-Scan Pelvis	
96		MRI any part with contrast	
97		MRI any part without contrast	
98	1627	IVP	
99	1628	MCU	
100		Upper GI Endoscopy	
101		Total Colonoscopy	
102	595	ECHO Cardiogram	
103	1375	Tread Mill	
104	590	12 Led ECG Multi channel	
105		Digital ECG	
106	586	24 Hrs Holter Monitoring	
107	1513	Liver function test	
108	1718	Nerve conduction velocity (at least 2 limbs)	
109	1516	Total Iron binding capacity	
110	1442/677	Karyotyping	

111	1524	CD3,CD4,CD8, count	
112	1525	CD3,CD4,CD8, percentage	
113	1574	Growth Hormone estimation	
114	1468	Serum Phosphorus	
115	1498	Tropinin -I	
116	1542	HCG	
117	1577	Echinococecus ig/Hydalic Serology	
118	1445	24 hours urinary for protein sodium & creatinine	
119	1584	Mycobacterium Tuberculosis for PCR	
120	1792	Procalcitonin/Calcitonin	
121	1562	TSH	
122	1499	Troponin-T	
123		blood alchohol examination	
124	1512	Kidney Function test	
125	1824	dengue serology	
126	1496	CPK MB/CK MB	
127	1579	Hepatitis B virus(HBV)DNA Qualitative	
128	1580	Hepatitis B virus(HBV)DNA Quantitave	
129	1581	Hepatiti C Virus (HCV) RNA Qualitative	
130	1429	Hepatitis C	
131	1492	INR -PT	
132		USG Whole Abdomen	
133		USG Lower	
134		USG Pelvis	
135		EEG	
136		RBS,PPBS,CAN,PBS (Peripheril Blood Smers)	
137		X-ray Different part of body	

ANNEXURE-B

Prescribed Format for Application

1. NAME OF THE HOSPITAL, DIAGNOSTIC CENTRE/ORGANISATION/ ADDRESS/
TELEPHONE NUMBER/ E-MAIL ID.
2. NAME OF THE RAILWAY HOSPITAL(S)/HEALTH UNIT(S) WITH WHOM THE FIRM
(APPLICANT) IS INTERESTED FOR TIE-UP
3. EXPERIENCE OF WORKING WITH PRIVATE SECTOR/GOVT. SECTOR IF ANY (should be
attached)
4. PROPOSED RATES FOR VARIOUS PATHOLOGICAL/RADIOLOGICAL TEST/
INVESTIGATION AS PER FOLLOWING FORMAT (Anexure-A)

Srl. No.	CGHS Sl. No (If available)	Name of the Investigation	CGHS(NABL/Non- NABL) CGHS Rates Ranchi/BBS	Rate offered by the firm

5. DETAILS OF THE MACHINE-AVAILABLE WITH YOUR FACILITY.
6. LIST OF THE DOCUMENT SUBMITTED AS PER SPECIAL TERMS AND CONDITION OF
EOI.

(Signature)

HEAD OF THE INSTITUTION

ADDRESS:-

PHONE No.:-

E-mail ID:-

SEALS/STAMP

