

क्षेत्रीयआयुर्विज्ञानसंस्थान, इंफाल: मणिपुर

REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL, MANIPUF webs (स्वास्थ्यऔरपरिवारकल्याणमंत्रालय,भारत सरकार केअंतर्गतएकस्वायत्तसंस्थान)

(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

0385-2414750 - e-mail : rims@rims.edu

CIRCULAR
Imphal, the 15th December, 2024

Subject: Lists of Equipment installed in College/Departments/Sections/Units of RIMS, Imphal.

No. 94/Pur/RIMS-2024: | 859 | This Institute is preparing an Annual Procurement Plan for Financial Year 2025-26 based on Budget allocation under GIA-Asset creation. Accordingly, all College/Departments/Sections/Units of RIMS, Imphal, are directed to submit the following information;-

- i) The existing equipment installed in the department in prescribed format (Annexure-I); and
- ii) Furnish the information for lists of investigations/tests/methods, and the equipment associated with them that are not available at RIMS, Imphal, in the prescribed format (Annexure-II).
- 2. The above information should be submitted in the prescribed format by e-mail to rims.imphal@gov.in latest by Thursday, the 19th December, 2024
- 3. This issues with the approval of the Director RIMS, Imphal.

(R.K. Mecolt Singh)
Deputy Director (Admn.)

Copy to:

- 1. P. S. to Director for keeping in Guard file
- 2. The Medical Superintendent, RIMS Hospital
- 3. The Dean (Academic), RIMS, Imphal
- 4. The Principal, Dental College, RIMS, Imphal
- 5. The Principal, College of Nursing, RIMS, Imphal
- 6. All Heads of Departments, RIMS, Imphal
- 7. The Chief Accounts Officer cum F.A., RIMS, Imphal
- 8. The Chief Nursing Officer, RIMS Hospital, Imphal
- 9. The Accounts Officer, RIMS, Imphal
- 10. All Section Officers, concerned Sections, RIMS, Imphal
- 11. The MSK-I and MSK-II, Store, RIMS, Imphal
- 12. The EE Civil)/Consultant (Elect.), Engineering Dept., RIMS, Imphal
- 13. The System Administrator for uploading in the RIMS website

Annexure-I

Report of status for Utilization of existing equipment

| SI. No | Name of Equipment | Date of Installation/Commissioning | Cost of equipment | Present status utilized/ not utilized | In case of utilization no. of cases done during 2023-24 may be furnished | Reason for non- utilization if any |
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Signature of Head of Deptt./In-Charge with Seal

Name of Department

Annexure-II

Report for lists of investigations/tests/methods, and the equipment associated with them that are not available at RIMS, Imphal

| SI. No. | Name of investigations/ tests/methods no available | Reason for non-available if any | Name of Equipment associated with of investigations / tests/methods |
|------------|--|---------------------------------|---|
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Signature of Head of Deptt./In-Charge with Seal

Name of Department