

## **MOU MEDICAL GASES**

The memorandum of understanding (MOU) is made at 4<sup>th</sup> January 2023 between **SHAMRAO PATIL HOSPITAL, PANIV.**

**And Mr. Dushyant Tamhane. Safire marketing for availing gases services at the time of requirement.**

### **PURPOSE:**

**SHAMRAO PATIL HOSPITAL, PANIV.** Is committed to provide its patients timely and quality services to its patients to assure appropriate patient care by processes that are efficient and technology that is appropriate with whole hearted participation of every single member of its team.

**SHAMRAO PATIL HOSPITAL, PANIV.** Wants to take up the services of **MR. DUSHYANT TAMHANE**

### **TIME FRAME:**

This MOU will commence on 4<sup>th</sup> January 2023 and will dissolve at the end of 31 December 2025.

### **RULES AND RESPONSIBILITIES:**

- \* The vendor should have a valid license for storage, filling and cylinder testing license.
- \* All cylinders should be properly painted as per their respective color code. In case of oxygen, the shoulder should be painted white and remainder black. In case of nitrous oxide, the cylinder it to be painted French blue.
- \* The vendor agrees to maintain standards of the cylinders to be supplied.
- \* All cylinders supplied by the vendor must strictly be made as per the regulatory requirements including filling norms as per Gas Cylinder Rules 2004 as applicable.
- \* The vendor shall have to supply the medical gas in vendor's won cylinders.
- \* The rejected supply, if any, should be taken back and replaced by the vendor at its own cost within the specified period and without causing any interruption to the hospital services.

**SAFIRE MARKETING**  
**Mr. Dushyant M. Tamhane**  
**Malinagar**



\* All cylinders should be examined for their complete marking at the neck end to ascertain inter-alia the specifications, chemical symbol of the gas services, last date of hydrostatic pressure test, and symbol of the test station. If due for test,

\* The cylinder should be segregated. All observations should be recorded in the history card/data card of the cylinder.

\* The cylinder no, name of the company and name of gas cylinder contents should be clearly indicated on the neck of the cylinder.

\* Each and every supply may be delivered between office hours only. Monday to Saturday.

\* The vendor will ensure the exact quantity of medical gases is being supplied by proper measurement/Calibration of the cylinders, which shall be arranged by him failing which the supply will be replaced by the supplier on his own cost.

\* The vendor agrees that the filling station must maintain the following record in respect of each cylinder examined and tested for filling.

- a) Name of manufacturer and owner;
- b) Cylinder Serial number/Rotation number if different;
- c) Specifications to which the cylinder conforms;
- d) Date of original hydrostatic stretch test;
- e) Test reports and certificates furnished by the manufacturer; if available;
- f) Test pressure;
- g) Maximum working pressure;
- h) Water capacity;
- i) Date of the last hydrostatic stretch test and name of the testing station;
- j) Tare weight of the cylinder;
- k) Variation, if any, in the tare marked on the cylinder and actual tare at the time of hydrostatic stretch test;
- l) Name of gas



m) Remarks

\* The vendor should be able to maintain uninterrupted supply of medical gases even in emergencies. Vendor should give an undertaking to the hospital and make alternate arrangement for the supply of gases at their risk a responsibility.

\* The charges will be as per the mutually agreed list.


\* This agreement will be valid for two years from the date of agreement.

(SHAMRAO PATIL HOSPITAL, PANIV.)

On the behalf of Safire Marketing.

Name: - Mr. Dushyant Tamhane

Designation: - (Secretary)

  
SAFIRE MARKETING  
Mr. Dushyant M. Tamhane  
Malinagar

Authorized Signatory

Name: - Dr. Abhijit Ankush Magar

Designation: - Deputy Medical Superintendent.

  
**Deputy Superintendent**  
Shamrao Patil Hospital Paniv.  
Authorized Signatory  
Tal. Malinagar, Dist. Solapur 413113

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