

## राजस्थान चिकित्सा सेवा निगम

स्वास्थ्य भवन, सी-स्कीम, जयपुर

फोन नः 0141-2223887, फैक्स नः 0141-2228065

ई-मेल : [rmsc@nic.in](mailto:rmsc@nic.in)

No. F-8( )RMSC/EPM/M-2/NPCDCS/12-14/NIT-12/12/ 260

Dated : 08.01.2013

09.01.2013

**CORRIGENDUM**

**Subject: -** Amended technical Specifications other conditions of Bid document after Pre-Bid dated 11.12.2012 and clarifications for the tender of Equipment & Instruments, under NIT No. F-8( )RMSC/ EPM/ M-2/ NPCDCS/ 12-14/ NIT-12/12/142 Dated 22.11.12 opening on dated 11.01.2013

**Reference: -** Pre Bid Conference held on 11.12.2012

In Reference to above sited subject and NIT, The Technical Specification (Annexure-C), other conditions of bid document and clarifications are here by Amended as below:-

S. N.	Name of the Item with full specification for the Rate Contract period 2012-2014	Amended specification after pre bid
1	2	3
1	<b><u>ECG Monitor</u></b> 1. Should have at least 5" Color TFT Display 2. Should have ECG as standard parameter 3. Should monitor Lead I, II, III, aVr, aVl, aVf & V with help of 5 lead ECG cable 4. Should have builtin rechargeable battery 5. Should have battery backup of atleast 90 minutes 6. Should have 24 hours graphical and tabular trends 7. Should have facility to store ECG waveforms 8. Options : Quote for SpO2 & NIBP parameter	<b><u>ECG Monitor</u></b> 1. Should have at least 5" Color TFT Display 2. Should have ECG as standard parameter 3. Should monitor Lead I, II, III, aVr, aVl, aVf & V with help of 5 lead ECG cable 4. Should have built-in rechargeable battery 5. Should have battery backup of atleast 90 minutes 6. Should have 24 hours graphical and tabular trends 7. Should have arrhythmia detection 8. Should have facility to store ECG waveforms 9. Should be CE Europe or USFDA approved 10. Optional : Quote for SpO2 & NIBP parameter
2	<b><u>Syringe Infusion Pump-</u></b> Microprocessor controlled syringe infusion Pump. Rechargeable Battery Battery operating time Approx. 10 Hours during rate < 10 ml/hr with Alternative 4x1.5V alkaline battery. Delivery Range 0.1 ml/hr to 99.9 ml/hr. Front load syringe. Syringe of size 20 ml & 50 ml can be used. Delivery Volume pre selection 1 to 999.0 ml. Online changing of delivery rate possible. Variable occlusion pressure. Bolus function, Online bolus, One touch bolus. Bolus delivery rate 800 ml/hr. Stand by function : Pump can terrain data when disconnected from patient in this mode. ALARM SYSTEM : Occlusion pressure alarm, 3 Min pre-alarm, syringe empty alarm, syringe incorrect place & Volume infused alarm. Battery charged low alarm (3 min pre-alarm). Internal function alarm. Drive disengaged alarm & should have KVO (KEEP VEIN OPEN) Mode. Should Be CE/USFDA Certification.	<b><u>Syringe Infusion Pump-</u></b> Microprocessor controlled syringe infusion Pump. Rechargeable Battery operating time Approx. 4 Hours during rate > 5 ml/hr. Delivery Range 0.1 ml/hr to 99.9 ml/hr. Front load syringe. Syringe of size 20 ml & 50 ml can be used. Delivery Volume pre selection 1 to 999.0 ml. Online changing of delivery rate possible. Variable occlusion pressure. Bolus function, Online bolus, One touch bolus. Bolus delivery rate 800 ml/hr. Stand by function : ALARM SYSTEM : Occlusion pressure alarm, 3 Min pre-alarm, syringe empty alarm, syringe incorrect place & Volume infused alarm. Battery charged low alarm (3 min pre-alarm). Internal function alarm. Drive disengaged alarm & should have KVO (KEEP VEIN OPEN) Mode. Should Be CE Europe / USFDA Certified.

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### Multi-Para Monitor

1. Should have ECG, SpO<sub>2</sub>, NIBP, Respiration & Temperature as standard parameters.
2. Should have facility to display ECG, RR, HR, SpO<sub>2</sub>, NIBP, Temperature.
3. Monitor should be upgradable to CO (Cardiac Output), ETCO<sub>2</sub> (Capnography) (Side Stream or Main Stream or Micro Stream), IBP or Multigas.
4. Should display at least 9 waveforms of selected parameters simultaneously.
5. Should have built in rechargeable battery.
6. Monitor should work on battery for at least 100 minutes.
7. Display: Color TFT display size of 14" or more.
8. Should have single skin temperature monitoring either in °Celsius or °Fahrenheit.
9. Should have facility for displaying multi - screen configurations
10. Should be able to store & display at least 80 hours of graphical trends of all parameters.
11. Should be suitable for monitoring adult, pediatric & neonatal patients.
12. The SpO<sub>2</sub> technology should sense SPO<sub>2</sub> in hypotensive, shivering & motion condition.
13. Should have Oscillometric Technology for measurement of NIBP with Auto, STAT and manual modes.
14. Should have different patient type selection (from neonate to Adult).
15. The pulse rate should be displayed either with ECG or SpO<sub>2</sub>.
16. The respiration rate should be calculated through Impedance method.
17. Should be able to analyze arrhythmia minimum 18 types & ST segments for all the leads.
18. Memory should not wipe off when the power is turned off
19. Should be able to give visual & audible alarms with three levels of volume adjustment.
20. Should have connectivity to Central station through Ethernet card or Wireless Connectivity.
21. Should have USB connectivity and monitor should be European CE or USFDA approved.
22. Should have software's like Drug dose calculation and OXY - CRG as standard.
23. Should be supplied with:
  - a) 5 lead ECG cable - 1
  - b) SpO<sub>2</sub> (Adult) probe with extension cable - 1
  - c) NIBP Cuff with extension cable for Adult, Pediatric and neonate - 1 each
  - d) Temperature probe - 1
  - e) Operating Manual - 1

### Multi-Para Monitor

1. Should have ECG, SpO<sub>2</sub>, NIBP, Respiration & Temperature as standard parameters.
2. Should have facility to display ECG, RR, HR, SpO<sub>2</sub>, NIBP, Temperature.
3. Monitor should be upgradable to CO (Cardiac Output), ETCO<sub>2</sub> (Capnography), 2 IBP & Multigas.
4. Should display at least 7 waveforms of selected parameters simultaneously.
5. Should have battery back up of one hour.
6. Display: Color TFT display size of 15" or more.
7. Should have dual temperature monitoring either in °Celsius or °Fahrenheit.
8. Should have facility for displaying multi - screen configurations.
9. Should be able to store & display at least 24 hours of graphical trends of all parameters.
10. Should be suitable for monitoring adult & pediatric patients.
11. The SpO<sub>2</sub> technology ( masimo / equivalent) should be sense SPO<sub>2</sub> in hypotensive, shivering & motion condition.
12. Should have Oscillometric Technology for measurement of NIBP with Auto, STAT and manual modes.
13. Should have different patient type selection.
14. The pulse rate should be displayed either with ECG or SpO<sub>2</sub>.
15. The respiration rate should be calculated through Impedance method.
16. Should be able to analyze arrhythmias & ST segment changes.
17. Memory should not wipe off when the power is turned off.
18. Should be able to give visual & audible alarms with three levels of volume adjustment.
19. Should have connectivity to Central station through Ethernet card or Wireless Connectivity.
20. Should be European CE/USFDA approved.
21. Should have Three year guarantee and provision for next five year Comprehensive Annual Maintenance Charges.
22. Should be supplied with:
  - a) 5 lead ECG cable - 2
  - b) SpO<sub>2</sub> (Adult) probe with extension cable - 2
  - c) NIBP Cuff with extension cable 2 each of Large Adult, Adult & Pediatric
  - d) Temperature probe - 2
  - e) Operating Manual - 1

The rates of all upgradable items & their accessories should be quoted separately.

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<p>4</p> <p><b><u>Cardiac Monitor with Defibrillator</u></b></p> <ol style="list-style-type: none"> <li>1. Defibrillator should be Bi-Phasic.</li> <li>2. Should have a high resolution colour TFT display of minimum 8 inch or more</li> <li>3. Should have direct trim knob and direct function keys for mute and freeze.</li> <li>4. Should have energy levels for defibrillation up to 200 joules or more</li> <li>5. Should be mains and battery operated. Internal battery should provide backup operation up to 2 -3 hours in monitoring or at least 90 defibrillation shocks should be delivered from fully charged battery.</li> <li>6. Integrated external re-usable adult and paediatric paddles for defibrillation.</li> <li>7. Should have non synchronised and synchronised cardio version.</li> <li>8. Facilities of ECG pickup from paddles in case of ECG electrodes are not connected to the Defibrillator.</li> <li>9. The charging time should be less than 10 seconds for charging up to 200 joules.</li> <li>10. System should have 24 hrs graphical as well as tabular trends for all parameters.</li> <li>11. Should have USB/Data Card /any other equivalent media storage facility wherein data gets recorded &amp; can be retrieved with the help of software on computer. The software and Data Card/USB storage should be provided as standard scope of supply</li> <li>12. Should have integrated Printer.</li> <li>13. Should be European CE or USFDA marked</li> <li>14. Should have Three year warranty</li> </ol> <p><b><u>System should be upgradable to following parameters</u></b></p> <ol style="list-style-type: none"> <li>1. NIBP</li> <li>2. SpO2</li> <li>3. External Pacemaker</li> <li>4. EtCO2 monitoring</li> </ol>	<p><b><u>Cardiac Monitor with Defibrillator</u></b></p> <ol style="list-style-type: none"> <li>1. Defibrillator should be Bi-Phasic.</li> <li>2. Should have a high resolution colour TFT display of minimum 5 inch or more</li> <li>3. Should have direct trim knob and direct function keys for mute and freeze.</li> <li>4. Should have energy levels for defibrillation up to 200 joules or more</li> <li>5. Should be mains and battery operated. Internal battery should provide backup operation up to 2 -3 hours in monitoring or at least 90 defibrillation shocks should be delivered from fully charged battery.</li> <li>6. Integrated external re-usable adult and paediatric paddles for defibrillation.</li> <li>7. Should have non synchronised and synchronised cardio version.</li> <li>8. Facilities of ECG pickup from paddles in case of ECG electrodes are not connected to the Defibrillator.</li> <li>9. The charging time should be less than 8 seconds for charging up to 200 joules.</li> <li>10. Should have USB/Data Card /any other equivalent media storage facility wherein data gets recorded &amp; can be retrieved with the help of software on computer. The software and Data Card/USB storage should be provided as standard scope of supply</li> <li>11. Should have integrated Printer.</li> <li>12. Should be European CE/USFDA approved.</li> <li>13. Should have Three year guarantee and provision for next five year Comprehensive Annual Maintenance Charges.</li> </ol> <p><b><u>System should be upgradable to following parameters</u></b></p> <ol style="list-style-type: none"> <li>1. NIBP</li> <li>2. SpO2</li> <li>3. External Pacemaker</li> <li>4. EtCO2 monitoring</li> </ol>
<p>5</p> <p><b><u>Ventilator (Adult, Paediatric and Neonatal)</u></b></p> <p><b>1 Description of Function</b></p> <p>1.1 ICU ventilators should provide artificial respiratory support to the critical patients in all the types of Intensive Care Units with altitude compensation for volume and BTPS correction for monitoring .</p> <p><b>2 Operational Requirements</b></p> <p>2.1 It should be microprocessor Controlled ventilator with integrated facility for Ventilation monitoring suitable for Neonatal ( including premature) to adult ventilation.</p> <p>2.2 The unit should be external compressor based for precise gas delivery (not a turbine / piston/ blower based) .It should have proximal flow sensor for neonatal patient category only. Demonstration of the equipment is a must.</p> <p><b>3 Technical Specifications</b></p> <p>3.1 Hinged arm holder for holding the circuit</p> <p>3.2 Should have Colored Touch screen, 12 Inch or more</p> <p>3.3 It should have inbuilt facility to measure and display for all patient category (Adult to neonatal)</p> <p>a) Integrated (in main unit) Mainstream End tidal CO2 with Capnography with monitoring of PeCO2,</p>	<p><b><u>Ventilator (Adult, Paediatric and Neonatal)</u></b></p> <p><b>Operational Requirements</b></p> <p>It should be microprocessor Controlled ventilator with integrated facility for Ventilation monitoring suitable for Neonatal to adult ventilation.</p> <p>The unit should be external compressor based for precise gas delivery (not a turbine / piston/ blower based) .It should have proximal flow sensor for neonatal patient category only. Demonstration of the equipment is a must.</p> <p><b>Technical Specifications</b></p> <p>1.1 Hinged arm holder for holding the circuit</p> <p>1.2 Should have Colored Touch screen, 12 Inch or more</p> <p>1.3 It should have inbuilt facility to measure and display for all patient category (Adult to neonatal)</p> <p>a) Should have Mainstream End tidal CO2 detection Capnography</p> <p>b) 3 waves- Pressure and Time, Volume and Time and Flow and Time.</p> <p>c) 3 loops- P-V, F-V, P-F with facility of saving of Loops for reference. Display of volumetric</p>



	Vmin VCO <sub>2</sub> , Curve Co <sub>2</sub> / time, Alveolar ventilation , expire Co <sub>2</sub> (VTCO <sub>2</sub> ) ,Vhigh and low alarms etc. external Etco <sub>2</sub> monitor will not be accepted.		capnography loops should be there.
	b) 3 waves- Pressure and Time, Volume and Time and Flow and Time., Co <sub>2</sub> and Time		d)Status indicator for Ventilator mode, Battery life, patient data, alarm settings, clock etc. Simultaneous display of set and exhaled parameter , 3 waveform and 2 loops and Alarm should have Trending facility for 24 hours
	c) 3 loops- P-V, F-V, P-F with facility of saving of 4 Loops for reference. Also facility to display volumetric capnography loops	1.4	
	d) Graphic display to have automatic scaling facility for waves	1.5	should have Automatic compliance & Leakage compensation for circuit and ET tube with ET Tube size and % of compensation
	e) Status indicator for Ventilator mode, Battery life, patient data, alarm settings, clock etc. Simultaneous display of SET and exhaled parameter , 3 waveform and 2 loops and Alarm	1.6	Should have Following settings for all age groups.
3.4	should have Trending facility for 72 hours		a) Tidal Volume 5 ml to 1500 ml
3.5	should have Automatic compliance & Leakage compensation for circuit and ET tube with ET Tube size and % of compensation		b) Pressure (insp) 2- 80 cmH <sub>2</sub> O
3.6	Should have Following settings for all age groups.		c) Pressure Ramp / Flow patterns
	a) Tidal Volume 5 ml to 2500 ml		d) Respiratory Rate 1 to 150 bpm, Insp. Time 0.1 to 3 sec,
	b) Pressure (insp) 2- 100 cmH <sub>2</sub> O		I : E Ratio 5:1 to 1:5
	c) Pressure Ramp/ Flow patterns		e) CPAP/PEEP 0-40 cmH <sub>2</sub> O
	d) Respiratory Rate 1 to 150 bpm, Insp. Time 0.1 to 3 sec, I : E Ratio 5:1 to 1:599		f) Pressure support 2-80 cmh <sub>2</sub> O
	e) Insp. Flow ( resultant) 0.2 to 180 LPM, continuous Flow 2-40 lpm ( in TCPL ode)		g) FIO <sub>2</sub> 21 to 100%
	f) CPAP/PEEP 0-50 cmH <sub>2</sub> O		h) Pause Time 0 to 2 sec
	g) Pressure support 2-100 cmh <sub>2</sub> O		i) Flow Trigger 0.2 to 15 lpm
	h) FIO <sub>2</sub> 21 to 100%		
	i) Pause Time 0 to 2 sec		
	j) Flow Trigger 0.2 to 15 lpm . Pressure Trigger 0.5 to 20 cmH <sub>2</sub> O	1.7	Should have ,monitoring of the following parameters
	k) Expiratory trigger or exhalation sensitivity - 5-80- % of flow		a) Airway Pressure (Peak & Mean)
3.7	should have ,monitoring of the following parameters		b) Tidal volume (Inspired & Expired)
	a) Airway Pressure (Peak & Mean)		c) Minute volume ( Expired)
	b) Tidal volume (Inspired & Expired)		d) Spontaneous Minute Volume
	c) Minute volume ( Expired)		e) Total Frequency
	d) Spontaneous Minute Volume		f) FIO <sub>2</sub>
	e) Total Frequency		g) Intrinsic PEEP
	f) FIO <sub>2</sub> dynamic		h) Plateau Pressure
	g) Intrinsic PEEP and PEEPi Volume (or trapped Volume)		i) Resistance (R <sub>insp</sub> & R <sub>exp</sub> )& Compliance (C <sub>dyn</sub> & C <sub>stat</sub> )
	h) Plateau Pressure		j) Use selector Alarms for all measured & monitored parameters
	i) Resistance ( R <sub>insp</sub> & R <sub>exp</sub> )& Compliance ( C <sub>dyn</sub> & C <sub>stat</sub> )	1.8	Should have following modes or equilant modes of ventilation
	j) Use selector Alarms for all measured & monitored parameters		a) Volume controlled
	should have following modes of ventilation		b) Pressure Controlled
	a) Volume controlled		c) Pressure Support
	b) Pressure Controlled		d) SIMV (Pressure Control and volume control) with pressure support
	c) Pressure Support		e) CPAP/PEEP, PSV + assured tidal volume / guarantee
	d) SIMV (Pressure Control and volume control) with pressure support		g) Advanced mode like pressure controlled volume guaranteed / PRVC / AUTOFLOW
	e) CPAP/PEEP, PSV + assured tidal volume / guarantee		h) Non Invasive ventilation
	g) Advanced mode like pressure controlled volume		i) MMV+PSV
			j) APRV
		1.9	should have Apnea /backup ventilation
		1.10	Expiratory block should be autoclaveable and no routine calibration required
		1.11	should have ,monitoring of the following parameters
			a. Occlusion Pressure( P <sub>0.1</sub> ) , Max Inspiratory

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<p>guaranteed / PRVC / AUTOFLOW</p> <p>h) Non Invasive ventilation</p> <p>i) MMV+PSV</p> <p>j) APRV</p> <p>k) Special Neonatal modes - TCPL, SIMV + TCPL + PSV, N-CPAP( with continuous flow) , PRVC, APRV, and above mentioned mode.</p> <p>3.9 should have Apnea / backup ventilation</p> <p>3.10 Expiratory block should be autoclaveable and no routine calibration required</p> <p>3.11 should have , monitoring of the following parameters</p> <p>a. Intrinsic Peep &amp; Intrinsic PEEP Volume ( Trapped Volume)</p> <p>b. Occlusion Pressure( P0.1) , Max Inspiratory pressure (Pi max)</p> <p>c. Non-forced Slow Vital Capacity , physiologic Dead space, RSBI, Imposed work of Breathing (WOBi), Expiratory Time constant ( Tcexp)</p> <p>d. Facility to calculate lower and upper inflection point ( P/V Flex points)</p> <p>e. Facility for ET Tube compensation with tube diameter ( 4mm onward) and % of compensation and Patient circuit compensation</p> <p>3.12 should have integrated Nebuliser with capability to deliver fine particle size of to be used in On line</p> <p>3.13 should have Ideal Body Weight facility</p> <p>3.14 should integrated Battery back up for minimum 2 hour for main unit</p> <p>3.17 RS 323C interface for communications with networked devices.</p> <p><b>4 System Configuration Accessories, spares and consumables</b></p> <p>4.1 ICU Ventilator with trolley - 01</p> <p>4.2 Adult , Paediatric , Neonatal autoclavable silicone patient breathing circuits -02 each</p> <p>4.3 Reusable and autoclavable Flow sensor and exhalation valve/ expiratory cassette - 4 nos . nos each. The expiratory flow sensor and valve should have 2 years replacement warranty</p> <p>Proximal Flow sensor for neonatal use - 10 nos</p> <p>Hinged Support Arm - 1no</p> <p>Air and Oxygen Hose - each 1 no</p> <p>4.4 Medical Air Compressor with CE mark</p> <p>4.5 Reusable Masks (Small, Medium, Large) with each machine.- 01 sets ea</p> <p>4.6 Humidifier -Servo controlled fisher and paykel MR 850 with digital monitoring of inspired gas temperature -01 . All accessories required like temp. probe , heating wire , draw, chamber etc - each 2 nos.</p> <p>4.7 Mainstream EtCo2 Sensor - 1no reusable Adult /ped, neonatal adaptor - each 1</p> <p><b>5 Inlet requirement</b></p> <p>5.1 Power input to be 220-240VAC, 50Hz</p> <p>5.2 Gas input( air and oxygen) - 50-100 psi</p> <p><b>6 Standards, Safety and Training</b></p> <p>6.1 Should be European CE or USFDA and CE approved product. The company should attach valid 510K and US FDA certificate along in the technical bid. The supplier must be ISO certified company.</p>	<p>pressure (Pi max)</p> <p>b.RSBI , Imposed work of Breathing (WOBi)</p> <p>1.12 should have integrated or synchronized ultrasonic Nebuliser with capability to deliver fine particle On line</p> <p>1.13 should integrated Battery back up for minimum 2 hour for main unit</p> <p><b>System Configuration Accessories, spares and consumables</b></p> <p>2.1 ICU Ventilator mounted on trolley</p> <p>2.2 Adult , Paediatric , Neonatal autoclavable silicone patient breathing circuits -02 each</p> <p>2.3 Reusable and autoclavable Flow sensor and exhalation valve/ expiratory cassette - 4 nos . nos each. The expiratory flow sensor and valve should have 5 years complete replacement (free of cost)</p> <p>Proximal Flow sensor for neonatal use - 10 nos</p> <p>Hinged Support Arm - 1no</p> <p>Air and Oxygen Hose - each 1 no</p> <p>2.4 Medical Air Compressor , with CE mark</p> <p>2.5 Reusable Masks (Small, Medium, Large) with each machine.- 01 set each</p> <p>2.6 Humidifier -Servo controlled fisher and paykel MR 850 with digital monitoring of inspired gas temperature -01 . All accessories required like temp. probe , heating wire , draw, chamber etc - each 2 nos.</p> <p>2.7 Mainstream EtCo2 Sensor - 1no reusable Adult /ped, neonatal adaptor - each 1</p> <p><b>Standards, Safety and Training</b></p> <p>3.1 Should be USFDA/European CE approved product.</p> <p>The supplier must be ISO certified company.</p> <p>3.2 Demonstration of quoted equipment model is a must.</p> <p>3.3 Should have local service facility .The service provider should have the necessary equipments recommended by the manufacturer to carry out preventive maintenance test as per guidelines provided in the service/maintenance manual.</p> <p>3.4 Should have Three year guarantee and provision for next five year Comprehensive Annual Maintenance Charges.</p>
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	<p>6.2 Demonstration of quoted equipment model is a must.</p> <p>6.3 Should have local service facility .The service provider should have the necessary equipments recommended by the manufacturer to carry out preventive maintenance test as per guidelines provided in the service/maintenance manual.</p> <p>6.4 Comprehensive warranty for 2 year and provision of AMC for next 5 years.</p>	
6	<p align="center"><b><u>ITEM EMERGENCY FIRST AID KIT WITH RESPIRATOR CARE EQUIPMENT</u></b></p> <p><b>EACH KIT SHALL CONTAIN AUTOMATIC &amp; MANUAL RESUCITATOR, OXYGEN INHALATION SUCTION PUMP INTUBATION SET, DIAGNOSTIC INSTRUMENT, NEEDLE HOLDER &amp; INFUSION DRESSINGS ETC. AUTOMATIC RESUSCITATOR - ONE SET</b></p> <p>It Shall Work On Pneumatically Controlled, Time Cycled, Flow Adjustable, Positive Pressure Ventilator To Meet All Emergency Situation For Respiratory Support. The Equipment Shall Be Easy To Operate With Inspiratory, Expiratory And Flow Adjustments For Breathing Frequency Of Adult &amp; children for continuous ventilation automatically with following accessories:-</p> <ol style="list-style-type: none"> <li>1. Three sizes face masks with tubing</li> <li>2. Oxygen cylinder 3 ltr water capacity bull nose, Light Aluminum.</li> <li>3. Single stage gauge regulator</li> <li>4. Refilling kit for refilling the cylinder bull nose type with pressure. Gauge from a big Cylinder. Able to work with external cylinder. Working capacity of unit Tidal volume 100ml to 1500ml. Breathing Frequency 8 to 30 bpm. I/E ratio 1:1 to 1:4. Regulator pressure 50 Psi. oxygen.</li> </ol> <p><b>MANUAL RESUCITATOR-ONE SET</b> Manually operated resucitator with double inlet valves for air and oxygen . Attachment: Face masks 3 Nos. (1, 3, &amp; 5) should also be given.</p> <p><b>OXYGEN INHALATION - ONE SET</b> Oxygen flow control from 0 to 10 lt./min simply turning by 0 knob. Supplied with nasal oxygen catheter, Adult &amp; child poly mask &amp; Ventimask ( Adult-1 No) for concentration of air &amp; oxygen with tubing.</p> <p><b>SUCTION PUMP - ONE SET</b> Manually operated suction pump to aspirate the mucus, blood or other. It can also be operated from gases by simply turning the suction knob, in the ventilator block, supplied with Suitable suction catheter.</p> <p><b>INTUBATIONS SET - ONE SET</b> Laryngoscope with three blades and handle, endotracheal tube with cuff &amp; plain four sizes , reusable type, endotracheal connection set of 12, magills forceps. introducing forceps, mouth bite .</p> <p><b>DIAGNOSTIC INSTUMENTS - ONE SET</b> Stethoscope - one No .ISI mark aneroid sphygmanometer - one No. Percussion hammer - one no .Tongue spatula - one no. Examination torch with two dry cell plastic body - 1 no. ISI mark clinical thermometer - 1 no.</p> <p><b>INFUSSIONS, DRESSINGS &amp; OTHER - ONE SET</b> I.V. rod in two sections -1 no., I.V. set disposable - 1 no. Adhesive plaster USP size 5cm. x 5mt. - one roll.</p>	<p align="center"><b><u>ITEM EMERGENCY FIRST AID KIT WITH RESPIRATOR CARE EQUIPMENT</u></b></p> <p><b>EACH KIT SHALL CONTAIN AUTOMATIC &amp; MANUAL RESUCITATOR, OXYGEN INHALATION SUCTION PUMP INTUBATION SET, DIAGNOSTIC INSTRUMENT, NEEDLE HOLDER &amp; INFUSION DRESSINGS ETC. AUTOMATIC RESUSCITATOR - ONE SET</b></p> <p>It Shall have electrically or battery operated Ventilator to meet all Emergency Situation For Respiratory Support. Battery back up of 4 Hrs. or more. The Equipment shall be easy to Operate with Non-invasive &amp; Invasive ventilation of Adult &amp; children, automatically with following accessories:-</p> <ol style="list-style-type: none"> <li>1. Three sizes face masks with tubing</li> <li>2. Oxygen cylinder 3 ltr water capacity bull nose, Light Aluminum.</li> <li>3. Single stage gauge regulator</li> </ol> <p><b>MANUAL RESUCITATOR-ONE SET</b> Manually operated resucitator with double inlet valves for air and oxygen . Attachment: Face masks 3 Nos. (1, 3, &amp; 5) should also be given.</p> <p><b>OXYGEN INHALATION - ONE SET</b> Oxygen flow control from 0 to 10 lt./min simply turning by 0 knob. Supplied with nasal oxygen catheter, Adult &amp; child poly mask &amp; Ventimask ( Adult-1 No) for concentration of air &amp; oxygen with tubing.</p> <p><b>SUCTION PUMP - ONE SET</b> Manually operated suction pump to aspirate the mucus, blood or other. <b>INTUBATIONS SET - ONE SET</b> Laryngoscope with three blades and handle, endotracheal tube with cuff &amp; plain four sizes , reusable type, endotracheal connection set of 12, magills forceps. introducing forceps, mouth bite .</p> <p><b>DIAGNOSTIC INSTUMENTS - ONE SET</b> Stethoscope - one No .ISI mark aneroid sphygmanometer - one No. Percussion hammer - one no .Tongue spatula - one no. Examination torch with two dry cell plastic body - 1 no. ISI mark clinical thermometer - 1 no.</p> <p><b>INFUSSIONS, DRESSINGS &amp; OTHER - ONE SET</b> I.V. rod in two sections -1 no., I.V. set disposable - 1 no. Adhesive plaster USP size 5cm. x 5mt. - one roll. Sterilized gauge 20cm. x 20cm. - 2 Nos. Rolled bandage 4 nos. Dressing scissor SS 15cm. S/B - one no., Dressing forceps SS 12.5cm - One. Tissue forceps SS - one no. Haemostatic forceps straight SS size 12.5cm. one no., Needle holder SS 15cm. - one no.</p>

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	<p>Sterilized gauge 20cm. x 20cm. - 2 Nos.                  Rolled bandage 4 nos.                  Dressing scissor SS 15cm. S/B - one no.,                  Dressing forceps SS 12.5cm - One.                  Tissue forceps SS - one no.                  Haemostatic forceps straight SS size 12.5cm. one no.,                  Needle holder SS 15cm. - one no.                  Disposable syringes 5ml. - 2 nos.                  Disposable needle 22/24g. ( 1 pack of 10-12)                  Splints - one set (Pack of 6).                  Cylinder key.                  Weight should not be more than 20 kg. And saixe should be either 24" or lesser.</p>	<p>Disposable syringes 5ml. - 2 nos.                  Disposable needle 22/24g. ( 1 pack of 10-12)                  Splints - one set (Pack of 6).                  Cylinder key.  <b>Weight should not be more than 20 kg. And size should be either 24" or lesser.</b>  <b>The company should be ISO certified.</b></p>																								
7	<p>आयातित आईटम की आपूर्ति अवधि के सम्बन्ध में:-                  Condition No. 18 (i) (ii)                  (i) All the supply orders will be placed to the approved supplier only (not Agents/ Suppliers/ Distributors etc.) by M.D., RMSCL/ E.D.(EPM), RMSCL/ Authorized Purchase Officers by M.D. RMSCL, Jaipur through registered post only and the date of registration at the post office will be treated as the date of order for calculating the period of execution. The supplying firms will execute all orders within 45 Days.                  (ii) In case of imported items 15 days will be given in addition to above mention period at condition No. 18 (i) above.</p>	<p>आयातित आईटम की आपूर्ति अवधि के सम्बन्ध में:-                  Condition No. 18 (i) (ii)                  (i) All the supply orders will be placed to the approved supplier only (not Agents/ Suppliers/ Distributors etc.) by M.D., RMSCL/ E.D.(EPM), RMSCL/ Authorized Purchase Officers by M.D. RMSCL, Jaipur through registered post only and the date of registration at the post office will be treated as the date of order for calculating the period of execution. The supplying firms will execute all orders within 45 Days.                  (ii) In case of imported items 30 days will be given in addition to above mention period at condition No. 18 (i) above.</p>																								
8	<table border="1"> <thead> <tr> <th colspan="3">Existing Dates</th> </tr> <tr> <th>Last Date for Sale of Tender Form</th> <th>Last Date of Receipt of Tender Form</th> <th>Date of Opening of Technical Bid</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>10.01.2013 upto 6.00 P.M.</td> <td>11.01.2013 upto 1.00 P.M.</td> <td>11.01.2013 From 3.00 P.M.</td> </tr> </tbody> </table>	Existing Dates			Last Date for Sale of Tender Form	Last Date of Receipt of Tender Form	Date of Opening of Technical Bid	1	2	3	10.01.2013 upto 6.00 P.M.	11.01.2013 upto 1.00 P.M.	11.01.2013 From 3.00 P.M.	<table border="1"> <thead> <tr> <th colspan="3">Extended Dates</th> </tr> <tr> <th>Last Date for Sale of Tender Form</th> <th>Last Date of Receipt of Tender Form</th> <th>Date of Opening of Technical Bid</th> </tr> </thead> <tbody> <tr> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>20.01.2013 upto 6.00 P.M.</td> <td>21.01.2013 upto 1.00 P.M.</td> <td>21.01.2013 From 3.00 P.M.</td> </tr> </tbody> </table>	Extended Dates			Last Date for Sale of Tender Form	Last Date of Receipt of Tender Form	Date of Opening of Technical Bid	4	5	6	20.01.2013 upto 6.00 P.M.	21.01.2013 upto 1.00 P.M.	21.01.2013 From 3.00 P.M.
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**Clarification :**


1. The rates asked in financial bid (BOQ/Annexure-D) for AMC (Annual Maintenance Contract Charges) shall mean as, Rates of Comprehensive Annual Maintenance Charges (CAMC).
2. For comparisons of rates, the 95% weight age will be given to price of Item/Equipment and 5% weight age will be given to average annual prices of CAMC (Comprehensive Annual Maintenance Charges)

Please note that above all Amendments in technical Specifications/bid conditions and clarification is the integral part of tender document. This corrigendum shall be signed and annexed with tender document.

  
**Executive Director (EPM)**  
**RMSC, Jaipur** 29.1.13

Copy to:

1. M.D., RISL, Yojna Bhawan, Jaipur
2. PA to M.D., RMSC, Jaipur
3. AGM (IT), RMSC, Jaipur
4. Guard File

  
**Executive Director (EPM)**  
**RMSC, Jaipur**