

Amendment No.1

Date: 20/12/2013

Subject: Amendment to the tender Enquiry Document

Ref:Tender Enquiry No.: HLL/PCD/PMSSY/AIIMS-II/03/13-14 dated 02/12/2013

The pre-bid meeting for the referred tender enquiry was held on 09/12/2013. Based on pre-bid discussions following amendments are being incorporated in the referred tender enquiry document.

Section IV **General Conditions of Contract**

(1) For:-

21.4: Irrevocable & non – transferable LC shall be opened by the respective consignees.

Read as:

21.4 Irrevocable & non – transferable LC shall be opened by **the purchaser**.

Section VI **List of Requirements**

(1) For:-

Part II: Required Delivery Schedule:

b) For Imported goods directly from foreign:

75 days from the date of opening of L/C. The date of delivery will be the date of Bill of Lading/Airway bill. (Tenderers may quote the earliest delivery period).

Read:

b) For Imported goods directly from foreign:

90 days from the date of opening of L/C. The date of delivery will be the date of Bill of Lading/Airway bill. (Tenderers may quote the earliest delivery period).

Section – VII **Technical Specifications**

Schedule no. 1 **Anesthesia Machine with Integrated Monitor & Ventilator**

1.Existing Para:-

4. Should have cascade double tube bobbin type flow meters for oxygen and nitrous oxide and single for air. There should be digital control and display for oxygen & electronic gas mixing.

Read as:-

There should be digital control and display for oxygen & electronic gas mixing.

2.Existing Para:-

5. Should have safety features like :

- a. Minimum oxygen flow of 50ml/min or more even when the machine is in on position.
- c . Should be provided with mechanical hypoxic guard.

Read as:-

5. Should have safety features like :

a. Deleted

- c. Should be provided with “**pneumatic/ electronic**” hypoxic guard.

3.Existing Para:-

7. Should be able to hold three seletatec vaporizers (Isoflurane, Sevoflurane & Desflurane) simultaneously. Vapourizers should be maintenance free. Cost of vaporizers to be quoted separately. The anesthesia machine should provide desflurane compensation.

Read as:-

7. Should be able to hold two seletatec vaporizers (Isoflurane, Sevoflurane & Desflurane) simultaneously. Vapourizers should be maintenance free. Cost of vaporizers to be quoted separately. The anesthesia machine should provide desflurane compensation.

4.Existing Para:-

8 c. Canister capacity of 1.2kg or more.

Read as:-

8 c. Canister capacity of 0.8 kg or more.

5.Existing Para:-

11. Should be provided with two or more drawers.

Read as:-

11. Should be provided with one or more drawers.

6.Existing Para:-

13 c. It should have coloured touch screen.

Read as:-

13 c. It should have coloured touch screen 12” or more.

7.Existing Para:-

13 i I:E ratio : 1:0.04 to 1:6

Read as:-

13 i I:E ratio

8.Existing Para

14. Should have independent oxygen sensor for FiO₂ monitor and flow sensor for spirometry.

Read as:-

14. Should have independent paramagnetic oxygen sensor for FiO₂ monitor and flow sensor for spirometry.

9.Existing Para

15. Should be able to display atleast two waveforms at a time either of the following :

- a. Pressure Vs time
- b. Volume Vs time
- c. Pressure Vs volume

Read as:-

15 Should be able to display

- a. Pressure Vs time
- b. Volume Vs time

10.Existing Para

16. Ventilator should have automatic mode detection.

Read as:-

Deleted.

11.Existing Para :-

17. Should have a battery backup of atleast 30 minutes.

Read as:-

17. Should have a battery backup of atleast 2 Hr.

The Monitor should have the following

12.Existing Para :-

2. Should have atleast 14”TFT colour display with up to 12 waveforms at a time.

Read as:-

2. Should have atleast 19”TFT colour display with up to 12 waveforms at a time.

13.Existing Para :-4. a. 3/5 lead ECG with electrocautery & defibrillator filter with ST Segment & arrhythmia detection with analysis,

Read as:- 3 and 5 lead ECG with electrocautery & defibrillator filter with ST Segment & arrhythmia detection with analysis,

14.Existing Para :-11. Trends – Upto 24 Hours or more, trend analysis, upto 24 hours full disclosure.

Read as:- 11. Trends – Upto 48 Hours or more, trend analysis, upto 24 hours full disclosure.

15.Existing Para :- 12.2. Bidder must ensure regular supply of Sodalime .

Read as:- 12.2. Bidder must ensure regular supply of medical grade Sodalime with rate quoted separately.

16.Added Para

4.g Integrated modular NMT monitor parameter display on the main monitor

4 h . Upgradable to modular EEG monitoring

Added Para. 1.It should have alternet O2 supply mode in case electronic gas mixture failure.

2. ready to run Web based application like PACS,HIS,RIS,LIS,Cath lab Report, X-Ray as standard on the patient monitor.

3. Display of Anaesthesia ventilator data like wave forms for flow, pressure ,agent and loops, and trends on patient monitors.

4 The work station should be capable of delivery of low and minimal flow anaesthesia even at 350 ml of total fresh gas to reduce patient consumption

5. All the components like anaesthesia ventilator ,vaporiser, Anaesthesia charting and patient monitor should be from same manufacturer.

6. Demonstration is must.

7. System should have Anaesthesia Charting facility.

Schedule no. 3

Defibrillator with CPR monitoring and TC pacing

1.Existing Para:-

4. It should have ability to energy selection from Paddles as well as unit.

Read as:-

It should have ability to energy selection from **Paddles or Unit.**

2.Existing Para:-

10. The defibrillator should have facility to monitor following parameters

C. NIBP

Read as:-

10. C Deleted.

3.Existing Para:-

In addition to standard accessories following items have to be supplied with unit

b) NIBP pediatric cuff with hose -1 nos

Read as:-

b) Deleted.

Schedule no. 4

SPECIFICATION FOR PATIENT WARMING SYSTEM

1.Existing Para:-

3. Should be based on semiconductor polymer foil for precise warming of entire patient body during & after surgery.

Read as:-

3. Should be based on semiconductor /**carbon fibre** polymer foil for precise warming of entire patient body during & after surgery.

2.Existing Para:-

5. Control unit should be capable of warming minimum four segments at a time.

Read as:-

5. Control unit should be capable of warming minimum two segments at a time .

3.Existing Para:-

7. Control unit should have touch screen display to select & display temperature of all segments at a time.

Read as:-

7. Control unit should have touch screen /**key pad** display to select & display temperature of all segments at a time.

4.Existing Para:-

10. Arm cum shoulder segment should be divided in two sections capable of being switched ON or OFF independently depending upon the nature of surgery and condition of patient.

Read as:-

Deleted.

5.Existing Para:-

12. Should also have on screen graphical display of patient body temperature for the entire duration of surgery.

Read as:-

12. Should also have on screen graphical/**digital** display of patient body temperature for the entire duration of surgery.

6.Existing Para:-

13. Should have facility to independently adjust the temperature of individual segment.

Read as:-

Deleted.

Schedule no. 5
Blood & Fluid Warmer

1.Existing Para:-

2. Should be able to maintain or warm the water/blood when at a flow rate of 5L/hr.

Read as:-

2. Should be able to maintain or warm the water/blood when at a flow rate of 3L/hr.

2.Existing Para:-

4. Should have inbuilt water tank to warm the infused fluid/blood.

Read as:-

Deleted.

3.Existing Para:-

5. Should have an warm water column till the patient end of the tubing to maintain the temperature of the infused fluid.

Read as:-

Deleted.

4.Existing Para:-

6. Alarms for disconnections, less water & over temp.

Read as:-

6. Alarms for disconnections, less water (if applicable)& over temp.

5.Existing Para:-

7. Disposable tubing set for Fluid/Blood.

Read as:-

7. Disposable tubing set for Fluid/Blood-100 Nos.

6.Added Para:- Should be USFDA/European CE.

Schedule no. 8
VIDEO BRONCHOSCOPE

The existing technical specification is replaced by the following:

- Flexible Intubation Endoscope with CMOS chip on tip for digitally transferring the image to the screen. Intubation Endoscope to display Full Frame 4:3 Imaging, replacing the circular display windows. The image can be displayed directly on a small 7" TFT monitor and in addition working size monitor not less than 15 inch.
- It should have a process to process CMOS video on screen and also to send signal to Video Bronchoscope to illuminate internal LED light for producing light to display surgical area.
- Automatic/ manual white balance facility should be available on the monitor as well as on the scope
- Documentation of Video & still images should be possible on data card or USB drive with JPEG and MPEG4 format which can be easily transferred to the computer/laptop. Documented videos & still images should be easily recalled on the monitor
- Screen should be rechargeable & runs on Lithium Ion Batteries (operating time- 1 hr or more)
- It should be light weight , high resolution & potable flexible scope
- Airway Guide (cum Bite block) for Oral intubation should be provided with the set (at least 10 airways)
- TUBE HOLDER should be a part of standard accessory.
- It should be supplied with mobile trolley with VESA stand for large monitor.
- The mobile trolley should have basket for keeping accessories.
- The Video scope should be supplied with tray system for disinfection and storage.
- Set should include- Suction Adaptors (Disposable), Cleaning brush & Leakage tester as standard accessories
- Suitable for following applications-
 - Bronchoscopy
 - Endotracheal Intubation (Gold standard for Difficult Airways)
 - Foreign body removal
 - Bronchial Lavage
 - Inspection of the Airways
 - Dilatation Tracheotomy

Technical Details of Flexible Video Endoscope-

- Tip deflection UP/DOWN: 140°/140° or more,
- Angle of view 110° or more,
- Working Length: at least 63 cm or more,
- Total length: at least 86 cm or more,
- Working Channel diameter: at least 2.2 mm or more,
- Distal Tip Outer Diameter: 5.5 mm or more

Schedule no. 9
TECHNICAL SPECIFICATIONS SYRINGE INFUSION PUMPS

1.Existing Para:-

3) Manufacturer should be ISO and CE certified for quality standards.

Read as:-

European CE or US-FDA approved product.

2.Existing Para:-

5) Bolus rate should be programmable to 40 to 1000 ml/hr or more with infused volume display and one key press bolus. Reminder audio after every 0.5 ml delivered .

Read as:-

5) Bolus rate should be programmable to 40 to 1000 ml/hr or more with infused volume display and one key press bolus. Reminder audio after every **1 ml** delivered.

3.Existing Para:-

13) Should have comprehensive ALARM package including: Occlusion limit exceed alarm. Near end of infusion pre-alarm & alarm, Volume limit pre-alarm & alarm, KVO rate flow, Low battery pre-alarm and alarm, AC power failure, Drive disengaged and preventive maintenance.

Read as:-

13) Should have comprehensive ALARM package including: Occlusion limit exceed alarm. Near end of infusion pre-alarm & alarm, Volume limit pre-alarm & alarm, KVO rate flow, Low battery pre-alarm and alarm, AC power failure and Drive disengaged alarm.

4.Existing Para:-

15) Mounting device/ Docking Station for two or four pumps as per requirement so as to enable to power up to 2-4 pumps with one power cord when mounted on IV pole (optional).

Read as:-

15) Mounting device/ Docking Station for at least four pumps as per requirement so as to enable to power up to 4 pumps with one power cord when mounted on IV pole –Twenty nos. for each AIIMS.

Schedule no. 10
SPECIFICATION FOR RECOVERY CUM TRANSPORT PATIENT
TROLLEY

1.Existing Para:-

1. Should have three sectional mattress base made of X- Ray translucent high pressure laminate .

Read as:-

1. Should have **Two or** three sectional mattress base made of X- Ray translucent high pressure laminate .

2.Existing Para:-

6. Should be convertible to chair position.

Read as:-

Deleted.

3.Existing Para:-

12. Should meet international quality directives such as CE, ISO 9001 & ISO14001.

Read as:-

should be European CE or US-FDA approved product.

4.Added Para :-

Safe working load at least > 200 Kg.

Schedule no. 11
Recovery ward modular Monitors

1.Existing Para:-

1. Integrated non-invasive measurements & features suitable for Neonate, Pediatrics & Adult patients

Read as:-

1. Modular monitor with Integrated non-invasive measurements & features suitable for Neonate, Pediatrics & Adult patients

2.Existing Para:-

3. Portable with weight less than 5 kg including battery.

Read as:-

3. Portable with weight less than **7 kg** including battery.

3.Existing Para:-

5. Facility to monitor ECG, SpO₂, NIBP, 2 IBP Respiration, temperature.

Read as:-

5. Facility to monitor ECG, SpO₂, NIBP, 2 IBP Respiration, temperature and **EtCO₂**.

4.Existing Para:-

6. Facility for enlarge numeric display to be visible from 10“distance. Advanced arrhythmia detection, ASYSTOLE, VF, VT, *EXT TACHY, *EXT BRADY, VPC RUN, *V BRADY, *SV, TACHY, TACHYCARDIA, BRADYCARDIA, *PAUSE, COUPLET, EARLY VPC, *MULTIFORM, *V RHYTHM, BIGEMINY, *TRIGEMINY, VPC, *IRREGULAR RR, *PROLONGED RR, *PACER NON-CAPTURE, *NO PACER PULSE

Read as:-

6. Facility for enlarge numeric display to be visible from 10 feet distance. arrhythmia detection, ST- analysis .

5.Existing Para:-

7. VPC count and ST level reading should be displayed continuously on the screen

Read as:-

Deleted.

6.Existing Para:-

8. Facility to monitor last min 24 Hours or more graphical and numerical trends having options to select the items to be displayed in NIBP trend table.

Read as:-

8. Facility to monitor last min **48 Hours** or more graphical and numerical trends having options to select the items to be displayed in NIBP trend table.

7.Added Para:-

The rate of NMT and EEG module should be quoted separately and data should be displayed on the monitor.

8.Existing Para:-

11. Review up to 24 hours files for the numeric data of alarm occurrences from the alarm history table.

Read as:-

11. Review up to **48 hours** files for the numeric data of alarm occurrences from the alarm history table.

9.Existing Para:-

13. Facility to detect sudden critical blood pressure changes which occurs in- between fixed periodic time interval of NIBP measurements.

Read as:-

Deleted.

Schedule no. 13
ICU VENTILATOR

1.Existing Para:-

2. Screen should be minimum of 12” inch or more.

Read as:-

2. Screen should be minimum of 12” inch or more **and integrated.**

2.Existing Para:-

4. Should have the following modes.

e. Advanced mode like Pressure Regulated volume control mode

g. Non-invasive ventilation in all modes

Read as:-

4. Should have the following modes.

e. Advanced mode like Pressure Regulated volume control mode and volume support mode.

g. Non-invasive ventilation.

3.Existing Para:-

5 Should have the facility for following settings:

- k. Manual Cycle, Inspiratory Pause, Expiratory Pause and Prolonged expiration..
- h. Pressure Support Slope: upto 150 cm H₂O / Sec.

Read as:-

5 Should have the facility for following settings:

- k. Manual Cycle, Inspiratory Pause, Expiratory Pause .
- h. **Deleted**

4.Existing Para:-

6. Should be able to monitor and measure the following parameters

RSBI (Rapid Shallow Breathing Index)- (optional)

Read as:-

6. Should be able to monitor and measure the following parameters

RSBI (Rapid Shallow Breathing Index)

5.Existing Para:-

11. Should have facility to measure:

- iii. Pressure/flow loops .

Read as:-

11. Should have facility to measure:

- iii. **Deleted.**

6.Existing Para:-

12. Should display minimum 4 curves/graphs simultaneously on the screen

Should have audio-visual alarms for the following parameters:

- a. FiO₂ peak inspiratory pressure – High & Low

Read as:-

12. Should display minimum 2 curves/graphs /loops simultaneously on the screen

Should have audio-visual alarms for the following parameters:

- a. Peak inspiratory pressure – High & Low

7.Existing Para:-

15. Event log: 10000 Alarm History .

Read as:-

15. Event log: **1000** Alarm History .

8.Existing Para:-

18. Should be supplied with 2 nos Reusable Silicon adult the 1 no Pediatrics tubing“ s and imported humidifier and 2 nos ultrasonic nebulizers.

Read as:-

18. Should be supplied with 2 nos Reusable Silicon adult the 1 no Pediatrics tubing“ s and imported humidifier and 2 nos ultrasonic nebulizers **chambers**

9.Existing Para:-

20. Cost of compressor should be quoted separately.

Read as:- Ventilator should have external compressor and cost should be quoted separately.

Existing Para:-

22 Oxygen sensor should be covered under warranty.

Read as:- 22. Oxygen sensor should be **paramagnetic and** covered under warranty.

10.Existing Para:-

23. Should provide facility for FRC measurement at different levels of PEEP (optional)

Read as:-

Deleted.

11.Existing Para:-

24. Should provide facility to calculate metabolic expenditure (optional

Read as:-

Deleted.

12.Added Para:-

1. **Should provide ET-tube leak compensation .**
2. **Compressor should be US-FDA approved.**
3. **Compressor, hinged arm and ventilator trolley should be from the same manufacturer.**

Schedule no. 14

Specification for high-end Monitor for ICU with CNS

1.Existing Para:-

1. Advanced high end patient monitor having integrated non-invasive, invasive measurement & features suitable for neonate, pediatrics & adult patients.

Read as:-

1. Advanced high end **modular** patient monitor having integrated non-invasive, invasive measurement & features suitable for neonate, pediatrics & adult patients.

2.Existing Para:-

2. Monitor must have bright, highly visible minimum 15” or more color TFT display with full touch screen facility.

Read as:-

2. Monitor must have bright, highly visible minimum **19”** or more color TFT display with full touch screen facility.

3.Existing Para:-

3. Monitor must have the facility to display min 8 waveform or more, along with related numerical parameters on single screen.

Read as:-

3. Monitor must have the facility to display min **12 waveform** or more, along with related numerical parameters on single screen.

4.Existing Para:-

4. Must display 30 min continuous short trends with related real time waveforms and numerical value of parameters on main screen

Read as:-

Deleted.

5.Existing Para:-

5. Monitors must be able to monitor ECG, SpO₂, NIBP, Respiration, dual temp, dual IBP, ETCO₂ and Noninvasive Continuous Cardiac Output.

Read as:-

5. Monitors must be able to monitor ECG, SpO₂, NIBP, Respiration, dual temp, dual IBP, **modular** ETCO₂ and **minimally invasive** Continuous Cardiac Output.

6.Existing Para:-

6. Monitor must be ready to connect for CO (Thermodilution), BIS, TOF, ICP monitoring, third IBP, 8 ch EEG, Flow / Paw module and Multi Gas measurements including CO₂, N₂O, O₂ and Anesthetic Agents including inspiratory & expiratory values.-

Read as:-

6. Monitor must be ready to connect for CO (Thermodilution), **BIS/Entropy, NMT**, ICP monitoring, three IBP, **4 ch EEG**, module.

7.Existing Para:-

7. Monitor must have technology to measure noninvasive continuous cardiac output and other related parameters form basic monitoring parameters such as ECG, SpO₂ and NIBP / IBP, without the need of any additional sensor, device or catheter.

Read as:-

Deleted.

8.Existing Para:-

8. Monitor must have advanced arrhythmia detection including life threatening arrhythmias such as ASYTOLE, VF, VT, EXT, TACHY, EXT BRADY, VPC RUN, V BRADY, SV TACHY, TACHYCARDIA, BRADYCARDIA, PAUSE, COUPLET, EARLY VPC, MULTIFORM, V RHYTHM, BIGEMINY, TRIGEMINY, FREQ VPC, VPC, IRREGULAR RR, PROLONGED RR as standard feature.

Read as:-

8 Monitor must have advanced arrhythmia detection and ST Analysis as standard feature.

9.Existing Para:-

9. Monitor must have facility to eliminate false arrhythmia alarms.

Read as:-

Deleted.

10.Existing Para:-

10. Monitor must have CVP-ET mode to display stable & physiologically correct value of CVP (Mean) at end- tidal point of capnogram.

Read as:-

Deleted.

11.Existing Para:-

11. Monitor must measure dynamic preload parameters such as pulse pressure variation (PPV) and systolic pressure variation (SPV) from arterial waveform and display on main screen.)

Read as:-

Deleted.

12.Existing Para:-

12. System must display perfusion index (PI %) from SpO₂ as an indication of pulse strength at the sensor site. The SpO₂ probes must durable and washable.

Read as:-

Deleted.

13.Existing Para:-

13. Should have facility for EEG trendgraph to view raw EEG data more easily, when 8 ch EEG module is connected. **(Optional, Price to be quote separately)**

Read as:-

Deleted.

14.Existing Para:-

16. Monitor must have Hemodynamic Graphs to view 2-dimensional Target graph representations of hemodynamics parameters based on Frank starling principle and EGDT protocol to monitor patient hemodynamics condition more easily and to visualize clinician treatment for improving patient condition form sepsis on monitor screen.**(optional)**

Read as:-

Deleted.

15.Existing Para:-

17. The hemodynamic graph should be target based and display target zone for achieving normal hemodynamics condition of Hypovolemic shock patients, the parameters of target graph should be user customizable**(optional)**

Read as:-

Deleted.

16.Existing Para:-

20. Must have small, lightweight infrared based sidestream EtCO₂ sensor

Read as:-

Deleted.

17.Existing Para:-

25. Monitor should be able to equipped with a compact 3 channel thermal recorder with a capacity to record any displayed waveforms and anesthetic gases concentration (CO₂, O₂, N₂O, Anesthetic Agents). **(Optional, Price to be quote separately)**

Read as:-

Deleted.

18.Existing Para:-

26. Recorder should be able to record selected waveforms and vital sign data in occurrence of any vital sign alarm or arrhythmia alarms. Must have function for both manual and periodic recording.

Read as:-

Deleted.

19.Existing Para:-

27. Must have the facility for wireless remote to control monitor function

Read as:-

Deleted.

20.Existing Para:-

28. Monitor must be U.S. FDA and CE approved.

Read as:-

28. Monitor must be U.S. FDA and European CE approved.

21.Existing Para:-

29. The monitor should have the facility of web viewing(**optional**)

Read as:-

Deleted.

22.Existing Para:-

30. Each monitor to be supplied with following:

g. ETCO2 sample line: 10 nos each for adult & neonatal.

Read as:-

30. Each monitor to be supplied with following:

g. ETCO2 sample line: 10 nos (if applicable)

23.Existing Para:-

31. price of following Optional items to be quote separately

a. Thermal Printer – 01

Read as:-

Deleted.

24.Existing Para:-

32. CNS of 21” LCD to be provided .The cabling has to be done by bidder in the ICU One CNS with 15 monitors.

Read as:-

32. CNS of 21” **LED** to be provided with one laser printer and one 21” slave monitor. .The cabling has to be done by bidder in the ICU One CNS with **16** monitors

25.Added Para:-

1. One module each for ECG, SpO2,NIBP, Respiration, dual temp, 2IBP,EtCO2 for each monitor(independent/dual)

2. Two Modules of minimally invasive CO monitor for each AIIMS.

3. Two modules of NMT, EEG and spirometer, BIS/Entropy for each AIIMS.

4. EtCO2 values should be should shown on main monitor screen.

5. the monitor should have monitor to monitor over view facility and data transfer over the network

6. web browsing facility to monitor each network monitor data through hospital LAN and through dial up facility from remote location.

7.monitor should be remote web viewing enable.

8. To provide suitable facility for sending and receiving DICOM compatible radiological images like Ultrasound, X-ray etc to and from monitoring network to and from HIS, RIS etc for integration of various information .

9.It should be possible to see data of other patient on the monitor in the same ICU and patients of other ICU's or the monitor by LAN cabling. The cabling should be done by the bidder.

10. Demonstration is must.

Schedule no. 15
DVT Pump

1. **Added Para:-1. Battery backup at least 4 hours.**
2. **US-FDA/ European CE approved product.**

Schedule no. 17
Specifications of Blood Gas Analyser (ABG Machine)

1.Existing Para:-

2. Essential Measured parameters; pH, pCO₂, pO₂, SaO₂ with co-oximetry, tHb, Hemotocrit Lactates, Na⁺, K⁺, Ca⁺⁺, Cl⁻. All these parameters should be measured simultaneously .

Read as:-

2. Essential Measured parameters; pH, pCO₂, pO₂, SaO₂ with co-oximetry, tHb, Hemotocrit Lactates, Na⁺, K⁺, Ca⁺⁺, **BUN**, Cl⁻. All these parameters should be measured simultaneously .

Schedule no. 18
Lead ECG Machine

1.Existing Para:-

1. Three channel adjustable folding LCD display for all 12 leads along with on screen details .

Read as:-

1. Twelve channel LCD display for all 12 leads along with on screen details .

2.Existing Para:-

2. Recording for 4 channels (3 leads and one user selectable any lead as Rhythm lead).

Read as:-

2. Recording for 12 channels (3 leads and one user selectable any lead as Rhythm lead).

3.Existing Para:-

5. Automatic adjustment of baseline for optimal recording.

Read as:-

Deleted.

4.Existing Para:-

8. Facility to enter patient information (Name, Age, Sex, Height, Weight < Blood pressure, doctor" s name, Hospital" s name which get updated in system and is recorded on the recorder thermal paper.

Read as:-

8. Facility to enter patient information (Name, Age, Sex, Height, Weight < Blood pressure, doctor" s name, Hospital" s name which get updated in system and is recorded on the recorder A4 paper

5.Existing Para:-

10. Graphical indication for lead disconnection.

Read as:-

Deleted.

6.Existing Para:-

11. Patient memory function, up to 10 patients

Read as:-

11. Patient memory function, up to 100 patients.

7.Existing Para:-

14. Optional , upgradeable, Interpretation software.

Read as:-

14. Interpretation software.

8.Existing Para:-

16. Mains and in built rechargeable Lithium battery with high capacity.

Read as:-

16. Mains and in built rechargeable Lithium battery .

Schedule no. 19 SPECIFICATION FOR TRANSPORT VENTILATOR

1.Existing Para:-

Should be less than 6 Kgs.

Read as:-

should be less than 10 kg inclusive batteries.

2.Existing Para:-

Volume controlled modes(CMV & ACMV) with PEEP

Read as:-

Volume controlled modes(CMV & ACMV) **BiPAP/PCV,PSV** with PEEP.

3.Existing Para:-

Should have simple LCD monitoring systems for Pressure, RR, I/E ratio and Bar graph to monitor PIP.

Read as:-

Should have simple**integrated** LCD monitoring systems for Pressure, RR, I/E ratio and Bar graph to monitor PIP.

4.Existing Para:-

Tidal Volume - 2 ml to 1500 ml

Read as:-

Tidal Volume - **50 ml** to 1500 ml.

5.Existing Para:-

Inspiratory Trigger - 0.5 to 4 cmH₂O

Read as:-

Inspiratory Trigger - **pressure/Flow**

6.Existing Para:-

Built in batter backup for at least 2 hours or more.

Read as:-

Built in batter backup for at least **4 hours** or more.

Schedule no. 20
TRANSPORT MONITOR

1.Existing Para:-

High – resolution colour TFT display of minimum screen size $\geq 6''$.

Read as:-

Modular monitor High – resolution colour TFT display of minimum screen size $\geq 6''$.

2.Existing Para:-

Plethysmograph with perfusion indicator (optional)

Read as:- Plethysmograph with perfusion indicator.

3.Existing Para:-

Should display Critical Alarm summary.

Read as:-

Deleted.

4.Existing Para:-

Suitable for Adult / paediatric

Read as:-

Suitable for Adult / paediatric/neonate.

5.Existing Para:-

User selectable screen formats and user– friendly menu driven functions through optical encoder

Read as:-

User selectable screen formats and user – friendly menu driven functions.

6.Existing Para:-

Battery backup for at least 1 Hrs.

Read as:-

Battery backup for at least **3 Hrs.**

7.Existing Para:-

It should be European CE / US FDA Certified

Read as:-

It should be European CE and US FDA Certified.

8.Existing Para:-

Should be supplied with:

One 3 lead ECG cable, Reusable SpO₂ sensor, NIBP cuffs (each for Adult and child), IBP cable

Read as:-

Should be supplied with:

One 3 lead ECG cable, Reusable SpO₂(adult, paediatric ,neonate) sensor, NIBP cuffs (each for Adult ,child and neotate), IBP cable

Schedule no. 21
Technical Specifications for non-invasive ventilator

1.Existing Para:-

3. Breath rate 0 to 30 BPM with spontaneous for time mode

Read as:-

3. Breath rate upto 50 BPM with spontaneous for time mode

2.Existing Para:-

6. Machine should be based on the solenoid valve technology and should offer preferably auto track sensitivity and adjustable rise time.

Read as:-

Deleted.

1.Existing Para:-

10. Should be USFDA, CE, UL or BIS approved product with ISO certification .

Read as:-

10. Should be USFDA and European CE, approved product.

2.Added Para:-

1. leakage compensation.

2. Mode:- CPAP withPS, Biphasic pressure control, apnea backup

All other terms and conditions of the tender enquiry remain unaltered.