No.GHD/TENDER/2015-2016/ Administration of Daman and Diu, O/O The Medical Superintendent, Government Hospital, Daman.

No.GHD/TENDER/2015-2016/くんと

Dated: 4.12.2015

#### E-TENDER (ON LINE NOTICE)

The Medical Superintendent, Government Hospital, Daman on behalf of President of India, invites tender for purchase of High End Neonatal Paediatric Ventilator online on Http.www.nprocure.com. from manufacturer/Authorized Dealers/Suppliers having valid license. The tender notice also available on www.daman.nic.in

(Dr.Sumi P.Amonkar) Medical Superintendent, Government Hospital, Daman

# ADMINSTRATION OF DAMAN AND DIU, O/O. THE MEDICAL SUPRINTENDENT, GOVERNMENT HOSPITAL, DAMAN.

No. GHD/PAEDIATRIC. VENT. /2015-2016/2/42 Dated: - 22/12/2015.

#### E-TENDER (ON LINE) NOTICE

The Medical Superintendent, Government Hospital, Daman on behalf of President of India, invites tender for following item through on-line on http://daman.nprocure.com from Original equipment manufacturer, Authorized Dealers , Authorized Suppliers having valid License. The tender notice also available on <a href="https://www.nic.daman.in">www.nic.daman.in</a>

| Sr.<br>No. | Description of Items  | Estimated cost  | EMD (in the form of FDR) | Tender Fees<br>(Non-<br>refundable) |
|------------|---|-----------------|--------------------------|-------------------------------------|
| 1          | Purchase of "High End<br>Neonatal Peadiatric<br>Ventilator" | Rs. 15,00,000/- | Rs. 45,000/-             | Rs.2000/-                           |

Last date of downloading of on line tender documents: Upto 12.01.2016 by 12.00 hours.

Last date of Submission of Tender bid in hard copy: Upto 12.01.2016 by 13.00 Hours.

Last date of submission of online tender document: Upto 12.01.2016 by 15.00 hours Opening of Technical Bid submitted in hard copy: On 12.01.2016 by 15.30 hours

On line opening of Price Bid: If possible on 12.01.2016 at 17.00 hours

Bidders have to submit price bid in Electronic Format only on <a href="www.nprocure.com">www.nprocure.com</a> till the last date and time for submission. Price Bid in physical format shall not be accepted in any case.

Submission of tender fees in the form of DD, EMD in the form of Nationalized od any Bank and other supporting documents i.e. copy of valid licence from competent authority, copy of VAT/ST/ Registration and copy of PAN/TAN of Income Tax etc., and terms and conditioned duly signed in hard copy to the undersigned by RPAD/Speed Post / by hand on or before 12.01.2015 upto 13.00 hours, however, Tender Inviting Authority shall not be responsible for any postal delay.

The tender inviting authority reserves the right to accept or reject any or all the tenders to be received without assigning any reasons thereof.

Bidders shall have to post their queries on E-Mail address: <a href="mailto:ddmssu.idsp@nic.in">ddmssu.idsp@nic.in</a> on or before dated 12.01.2016 upto 10.30 hours.

In case bidder needs any clarification or if training required for participating in online tender, they can contact the following office.

"(n) Code Solution - A division, GNFC Ltd.",

403, GNFC Info Tower, Bodakdev,

Ahmedabad-380054, Gujarat (India).

E-Mail-nprocure@ncode.in Fax: + 917926857321

Website: www.nprocure.com

( Dr. Suhil P. Amonkar ) Medical Superintendent, Government Hospital, Daman

# ADMINSTRATION OF DAMAN AND DIU, O/O. THE MEDICAL SUPRINTENDENT, GOVERNMENT HOSPITAL, DAMAN.

No. GHD/PAEDIATRIC. VENT. /2015-2016/2142/

Dated: - 22/12/2015.

## TERMS AND CONDITIONS FOR PURCHASE OF HIGH END NEONATAL PAEDIATRIC VENTILATOR

| 1.   | ( ) 1   |   |  |  |  |
|------|---|---|--|--|--|
| 1888 | Daman and will be valid and operative for supply orders issued for one ye   |   |  |  |  |
|      |   | the date of invitation of tenders and inclusive of all Taxes, installation &  |  |  |  |
| 2.   |   | missioning charges.   |  |  |  |
| 4.   |   | Taxes/ Duties/ Royalties charges payable on sales/transport etc. within   |  |  |  |
| 2    | and / or outside the UT / State shall be payable by the supplier.   |   |  |  |  |
| 3.   | No extra charge for packing, forwarding and insurance etc. will be paid on the  |   |  |  |  |
| 4.   | rates quoted.   |   |  |  |  |
| т.   | The rates should be quoted only for the items specified in the list of requirement and should be for the items of given special mark / manufacture. |   |  |  |  |
| 5.   |   | s quoted for items other than required specification/mark/manufacturer  |  |  |  |
|      |   | not be considered. However, indigenous manufactures may quote their   |  |  |  |
|      |   | makes provided the specifications/mark/manufacturer.  |  |  |  |
| 6.   |   | ere specification / mark/ manufacture are not specifying by this office, the s should be quoted only for the first class and standard quality only.     |  |  |  |
| 7.   |   | tenderer should specify the name of the manufacturer for the item   |  |  |  |
| 50.5 |   | ted by him along with catalogue of the item.  |  |  |  |
| 8.   |   | decision of the E-Tender Inviting Officer for acceptance/rejection of   |  |  |  |
|      |   | GH END NEONATAL PAEDIATRIC VENTILATOR" supplied including the   |  |  |  |
|      | 1 22  | decision for equivalent specifications, standard and quality etc. shall be final.   |  |  |  |
| 9.   |   | tenderer should send in advance or enclose along with technical bid an  |  |  |  |
|      |   | unt of Rs.45,000/- as Earnest Money Deposit in form of Nationalized of  |  |  |  |
|      | 100   | any Bank payable at Daman in favour of the officer inviting tender i.e. Medical   |  |  |  |
|      |   | Superintendent, Government Hospital, Daman. The EMD submitted other than  |  |  |  |
|      | form mentioned above will not be accepted. Tender received without Earnest  |   |  |  |  |
| 10.  |   | ey Deposit will be summarily rejected.  |  |  |  |
| 10.  | (a)   | The successful tenderer will have to pay within 10 days from the date of demand, an amount equal to 5% to 10% of the total value of articles,           |  |  |  |
|      |   | that may be order, as the amount of Security Deposit.   |  |  |  |
|      | (b)   | Non-receipt of Security Deposit within stipulated time limit will result in   |  |  |  |
|      | ( )   | automatic cancellation of the order for supply without any intimation.  |  |  |  |
|      | (c)   | However in case if any articles are received for which the Security   |  |  |  |
|      |   | Deposit may not have been deposited, the full Security Deposit as may be  |  |  |  |
|      |   | due from the supplier will be recovered from the bills for such articles.   |  |  |  |
| 11.  | 100000000000000000000000000000000000000   | amount of Earnest Money paid by the successful Tenderer(s) will be  |  |  |  |
|      | adjusted against the amount of Security Deposit to be paid by the successful  |   |  |  |  |
| 10   | 1   | erer(s) as per condition No. 10 above.  |  |  |  |
| 12.  |   | All bills for amount above Rs.5000/- should be pre-receipted on a Revenue Stamp of proper value. Bills for amount exceeding Rs.5000/- not pre-receipted |  |  |  |
|      |   | on Revenue Stamp of proper value will not be accepted for payment.  |  |  |  |
| 13.  |   | bill in which Sales Tax/Vat is charged must contain the following   |  |  |  |
| 20,  | certificate on the body of the bill.  |   |  |  |  |
|      |   | "CERTIFIED that the goods on which Sales Tax/VAT has been   |  |  |  |
|      | charged have not been exempted under the VAT/ Central Sale Tax Act or   |   |  |  |  |
|      | 7 1000000000000000000000000000000000000   | the Rules made there under and the amount charged on account of   |  |  |  |
|      | - 141   | VAT/Sales Tax on these goods is not more than what is payable under the   |  |  |  |
| 1.4  | 1-7-  | risions of relevant Act or Rules made there under".   |  |  |  |
| 14.  |   | right to accept or reject without assigning any reasons or all tenders in or whole is reserved with the E-Tender Inviting Officer and his               |  |  |  |
|      | decision(s) on all matters relating to acceptance or rejection of the tenders as  |   |  |  |  |
|      | 100   | a whole or in part will be final and binding to all.  |  |  |  |
|      | d WII   | ole of the part will be that and billiang to all.   |  |  |  |



If the tenderer whose tender is accepted, fails to execute the supply order within stipulated time the Earnest Money Deposit of such tenders will stand forfeited to the Government. 16. In case, the supplier does not execute the supply order placed with him, the EMD of the supplier will be forfeited to the Government and the contract for the supply shall terminated with no further liabilities on either party to the 17. No separate agreement will be required to be signed by the successful tender(s) for the purpose of this contract for supply. Rates tendered/offered in response to the concerned Tender Notice shall be considered as acceptance of all above terms and conditions for supply for all legal purpose. The E-Tender should be neatly typed only on letterhead carry the name of 18. supplier and the signature of the tenderer. No overwriting correction or erasures will be considered. 19. The rates quoted should be inclusive of all taxes, duties, surcharges, cess, freight, loading, unloading, insurance, road permits, packing, (VAT and other taxes if applicable) as applicable. No extra taxes will be given. All bills should be in **TRIPLICATE** and should invariably mention the number 20. and date of supply order. 21. Tenders and financial bid should be submitted www,nprocure.com in two bid system. 22. Orders once placed should be delivered within the given time period and item should be door delivered. 23. No extra charge for packing, forwarding and insurance etc. will be paid on the rates quoted. 24. The rates should be quoted only for the items specifies in the list of requirement and should be for the items of given special mark/manufacture only. 25. Rates quoted for items other than the required specification / mark / manufacture will not be considered. 26. The amount of Earnest Money paid by the tenderer(s) whose tenders are not accepted will be refunded to them. 27. Only on satisfactory completion of the supply order for and on payment of all bills of the supplier, as to be admitted for payment, the amount of Security Deposit/Earnest Money will be refunded after expiry of guarantee/warranty period, if any, or any such date/period as may be mutually agreed upon 28. The E-tender inviting officer will consider extension of time for remitting the Security Deposit as demanded. However, in case of denial to consider such extension the supplier is bound to abide by the limit given and liable to make good any loss to the Government on account of his failure to abide by the time limit. 29. Railway Receipt or other transport document should be drawn in favor of (a) the Officer Inviting Tenders. Railway Receipt or other transport document should not be send by V.P.P. or through any Bank as this being a Government Office it is not possible to clear cash demands of Post Office/Bank for delivery of R.R. or other transport documents unless we have agreed to it as a special Railway Receipt or transport receipt should be sent to this Office by Registered Post immediately on dispatch of goods from dispatching end. 30. The supplies of "HIGH END NEONATAL PAEDIATRIC VENTILATOR" of inferior quality standard or of different specifications, doses/content, brand, manufacturer etc. other than that ordered specified and/or incomplete or broken articles will not be accepted. The supplier has to replace the same at his own cost and risk. Intimation of non-acceptance of any "HIGH END NEONATAL PAEDIATRIC VENTILATOR" will be sent to the supplier within 10 days from the date of receipt of the stores and the same will be returned to the supplier at his own cost and risk, if he so desires and intimates accordingly within 15 days from the date of dispatch of intimation of the non-acceptance. However, if no communication is received within 15 days from the date of



communication the tender Inviting Officer will not be responsible for any damage, loss etc. of such rejected articles. In case of failure to replace the accepted and rejected articles from supplies 31. made, as mentioned in the conditions, the loss undergone by the Government will be recovered from the suppliers Security Deposit/Earnest Money or payment due of any bill(s) to the extent required. 32. In case of failure to Purchase of "HIGH END NEONATAL PAEDIATRIC VENTILATOR" ordered for, as per conditions and within the stipulated time, the same will be obtained from the tenderer who offered next higher rates or from any other sources, as may be decided by the tender inviting Officer and the loss to the Government on account of such purchases(s) shall be recovered from the former suppliers Security Deposit/Earnest Money or bills payable. The suppliers shall have no any right to dispute with such procedure. Extension of time limit for supplies shall be consider by the Tender Inviting Officer. The extension so granted may be with levy of compensation for delay in execution of supply order up to 5% of the cost of supplies ordered for at the discretion of the authority competent to grant extension of time limit provided such request is made well in time, depending upon the circumstances and such decision in the matter will be final. 34. Demurrage charges paid by the E-Tender Inviting Officer on account of delayed receipt of dispatch documents intimation will be recovered from the bills payable to the supplier. If at any time after the order for "HIGH END NEONATAL PAEDIATRIC 35. VENTILATOR" the E-Tender Inviting Officer shall for any reason whatsoever not require the whole or part of the quantity thereof as specified in the order the tender Inviting Officer shall give notice in writing of the fact to the supplier(s) who shall have no claim to any payment of compensation what so ever on account of any profit or advantage which the supplier(s) might have derived from the supply of articles in full, but which did not derive in consequence of the full quantity of articles not having been purchased, nor shall have any claim for compensation by reasons of any alterations having been made in the original instructions which shall invoice any curtailment of the supply originally contemplated. 36. Rates should be quoted as per the forms prescribed by the department and as per the requirement asked for. 37. The Earnest Money(s)/Security Deposit(s) paid by the tender(s) earlier against any tender(s) or supply order(s) is/are not adjustable with Earnest Money or Security Deposit required by these conditions. 38. The Tenders/offers received which do not confirm with the terms and conditions of this office will be summarily rejected. If any firm desires to consider exemption from payment of Earnest Money Deposit, certified copies of its Registration with D.G.S. & D. should be attached to their tenders. 39. Supplier may ensure the goods at his own cost to safeguard the delivery of such goods dispatched by him to the consignee; the department will not be responsible for the damage or pilferage of goods during transit. 40. The tenderer should attached Scanned copies of Certificate from the respective manufacture company indicating your firm as authorized dealer/supplier for their product, certificate of experience in the field of "HIGH END NEONATAL PAEDIATRIC VENTILATOR" valid license, proof of fulfilling the norms of ISI/ISO/WHO/GMP, CE Certified specification if any, copy of dealership letter, licence for import, PAN No, Sales Tax No., The supplier must have at least 03 years experience of supplying such good and shall average annual turnover of Rs.4,50,000/- suring last three years ending by 31.12.2015 A letter indicating last three financial year Turnover figures and profit & Loss Accounts should accompany with Technical Bid for Verification. Please note that the balance sheets should carry average annual financial turnover during last 3 years up to 31/12/2015 and should be at least 30% of the estimated cost. Rates quoted are for "HIGH END NEONATAL PAEDIATRIC VENTILATOR" to be supplied at Government Hospital, Daman.

Tenderer should enclose along with tender an amount of Rs. 45,000/- as Earnest Money Deposit in form of Fixed Deposit Receipt of any Nationalized/ Scheduled Bank payable at Daman in favour of Medical Superintendent, Government Hospital, Daman. The EMD Submitted other than Form mentioned above will not be accepted. Tender received without EMD will be summarily rejected. The tender fee must be enclosed in demand draft in favour of undersigned 43. with the tender documents. AMC: The rates of Annual Maintenance Contract (AMC) should be for the period of three years from the expiry of Guarantee / Warranty period of one year and should written separately in the Financial bid year-wise. The decision to accept the tender with or without AMC is reserve with the Purchase Committee. The tenderers should give the guaranty / warranty for the period of not less 45. than one year from the date of installation against any manufacturing defect. The tenderer may be called for a sample / demonstration of the items quoted 46. for which they will be informed one week in advance for arranging the necessary sample / demonstration in the hospital on a suitable date and time failing which the tender will be rejected. 47. The tenderers shall be bound to give assurance for undertaking the Annual Maintenance Contract after expiry of guarantee / warranty period. The successful tenderers shall be bound to provide training if any required 48. without any extra charges during commissioning. The successful tenderers should install and commissioning the equipment at 49. the site suggested by the office. The tendered quantity is tentative and the actual purchase can be 15% less or 50. more than the quantity put to tender for all items and the tenderer is bond to supply such requirement without any demur. 51. The tendering firm must be registered with the Sales Tax/ VAT department and a copy of their registration under the Sales Tax/ VAT bearing the TIN Number be provided. 52. The Tender should give the guaranty/warranty for the period of not less than one year from the date of installation against any manufacturing defect. The terms and conditions dully accepted and signed by the tenderer should 53. attached with the Technical Bid. 54. The Financial Bid has to filled in prescribed format. Tender should furnished a non black listed certificate that the firm has not 55. been black listed in the past by any Government/private institution that there is no vigilance / CBI case against the firms supplier and the firm has not been blacklisted in the past by any Government or private organization, the tenderers should be attached an undertaking. (Annexure-I) 56. The bidder should not have quoted price lower than quoted in this tender to any Govt./Semi Govt./public sector undertaking, bidder should enclosed affidavit to that effect on a non judicial stamp paper of Rs.20/-

Signature & Designation of Tender Inviting Officer (Dr. Sumil P. Amonkar) Medical Superintendent, Daman.

The above terms and conditions are accepted and are binding to me / us.

Place:

Signature of Tenderers Name of Tenderers with seal of the firm

Dated:

NOTE: Please return one copy of these terms and conditions dully sign with seal of firm along with the tender.

ANNEXURE - I

( to be submitted on the letter head of the company/firm)

I hereby certify that the above firm has not been ever blacklisted by any Central/State Government/Public Undertaking/Institution on any account.

I also certify that the above information is true and correct in any every respect and in any case at a letter date it is found that any details provided above are incorrect, any contract given to the above firm may be summarily terminated and the firm blacklisted.

I also certify that firm will supply the item as per the specifications given by institution and also a bide all the terms and conditions stipulated in tender.

Date: Place:

Name: Business Address: Signature Bidder: Seal of Bidder:

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### Annexure 'A'

ADMINSTRATION OF DAMAN AND DIU, O/O. THE MEDICAL SUPERINTENDENT, GOVERNMENT HOSPITAL, DAMAN.

# <u>Tender Notice No.GHD/paediatric.vent. /2015-2016/2142</u> <u>Dated:- 22 /12 /2015</u>

TECHNICAL BID FOR HIGH END NEONATAL PAEDIATRIC VENTILATOR.

| Sr.No   | Specification   | Remarks |
|---------|---|---------|
| 1       | It should be microprocessor controlled with active  |         |
|         | exhalation valve system   |         |
| 2       | It should be external air compressor based machine and  |         |
|         | Not Turbine/ Piston based.  |         |
| 3       |   |         |
| J       | Main ventilator unit should have international Certificate  |         |
|         | like "US FDA, CE and ISO"   |         |
| 4       | It should have automatic calibration system on start up.  |         |
| 5       | The ventilator system should be able to ventilate from  |         |
|         | neonate to Pediatric patients and upgradable in feature.  |         |
| 6       | It should have both volume & pressure Breath Delivery   |         |
| 7       | It should have following mode of ventilation  |         |
|         | <ul> <li>Assist / Control- V-CMV, V-SIMV + Pressure Support</li> </ul>  |         |
|         | <ul> <li>Assist / Control – P-CMV, P-SIMV + Pressure Support</li> </ul>   |         |
|         | CPAP with pressure support  |         |
|         | Bi- level / BIPAP/Bivent/APRV with pressure   |         |
|         | support (or Similar Mode)   |         |
|         | NIV/ NIPPV (Non-Ivasive Ventilation mode)   |         |
|         | <ul> <li>Pressure support with volume assured/ guarantee/</li> </ul>  |         |
|         | VAPS/volume support   |         |
|         | <ul> <li>Any one Advance mode like ASV/ PAV/MMV/</li> </ul>   |         |
| Pan Pan | NAVA/ AUTOMODE or similar mode  |         |
| 8       | It should have ideal Body weight setting with adjustable  |         |
| (Lda)   | IBW factor according to Hospital Protocol.  |         |
| 9       | It should provide Bi-directional Apnea back-up that means   |         |
|         | unit should start back up ventilation in case of Apnea and  |         |
|         | should shift to spontaneous mode in case unit detects two   |         |
| 10      | spontaneous efforts from patient.   |         |
| 10      | It should have detachable Graphic Display min 12" color   |         |
|         | touch screen TFT with Pressure, Volume, Flow waveforms  |         |
| 11      | and P-V, F.P, with freezing facility.   |         |
| 11      | Should display all waveform and loops, set parameters,  |         |
|         | delivered parameters, Alarm, message window, date time  |         |
| 12      | Should have facility to store minimum 3 laces and   |         |
| 13      | Should have facility to store minimum 3 loops as reference Should have manual as well as auto scale graph scale |         |
| 13      | adjustment  |         |
| 14      | Should Have SIGH Breath   |         |
| 15      | It should have trending facilities at least for 60 hours for  |         |
| 10      | important parameters  |         |
| 16      | It should have facility integrated Nebulizer without  |         |
|         | alternating the volume and manual Inspiration on the  |         |
|         | control panel for easy access.  |         |
| 17      | It should be driven by external compressor (work external   |         |
| The cut | Air compressor and no turbine or blower machine will be   |         |
|         | acceptable) and central air pipeline. Air compressor must   |         |
|         | be CE & ISO certified and should have automatic switch  |         |
| Mark 1  | over facility.  |         |
| 18      | It should have auto-clavable and interchangeable expired  |         |
| 1577    | valve/ block with flow sensor with life time guarantee. In  |         |
| F 500   | case of failure, the supplier will replace it on free of cost   |         |

|    | case of failure, the supplier will replace it on free of cost basis. The manufacture/ supplier must give declaration for |  |
|----|--|--|
|    | the same.  |  |
| 19 | It should have facility for Rise time factor, different  |  |
|    | inspiratory flow patterns.   |  |
| 20 | It should have exhalation sensitivity facility from 5% to 7%   |  |
|    | (termination criteria)   |  |
| 21 | It should have following settings  |  |
|    | Respiratory Rate: 5-120 bpm  |  |
|    | Tidal volume: 5-1000 ml in volume control  |  |
|    | • Fi02: 21-100%  |  |
|    |  |  |
|    | • I:E Ratio- 1:8 to 3:1  |  |
|    | • 1-Time: 0.1- 8s  |  |
|    | Flow trigger 0.6 to 12 lpm and pressure Trigger 0.6-   |  |
|    | 12 cm H2O  |  |
|    | Inspiratory pressure Control: 0-85cmH20 and  |  |
|    | pressire support: 0-80cm H20   |  |
|    | PEEP/CPAP: 0-45cm H20  Ideal Radio variable for ton 5 and the  |  |
|    | <ul> <li>Ideal Body weight factor 5 ml/kg</li> <li>Platue Time 0. To 1.5 sec</li> </ul>                                  |  |
|    | Peak flow: 3-150LPM for mandatory breath   |  |
|    | It should have following monitoring:   |  |
|    | a) Volume-Exhaled and inspired tidal volume, Exhaled   |  |
|    | minute volume, leak%, leak minute volume,  |  |
|    | spontaneous minute volume, Respiratory rate-   |  |
|    | spontaneous and mandatory.   |  |
|    | b) Pressure- Peak Pressure, Pressure mean PEEP   |  |
|    | Pressure Plateau, Auto PEEP  |  |
|    | c) Resistance (Insp. And exp) and Compliance (staitic  |  |
|    | and dynamics)  |  |
|    | d) Waveform- Pressure V/s Time, Flow V/s Time, Volume v/s Time   |  |
|    | e) Loops- Pressure-Volume Loop, Flow- Volume Loop,   |  |
|    | Flow-Pressure Loop   |  |
|    | f) It should respiratory mechanics package at least 6  |  |
|    | parameters to predict patient weaning like- rapid  |  |
|    | shallow breathing index (Freq./ resp. rate),   |  |
|    | occlusion pressure, slow vital capacity, max.  |  |
|    | inspiratory pressure, time constant, AUTO PEEP,  |  |
|    | trapped volume, work of breathing  |  |
|    | g) Should have PV tool facility to measure upper and lower inflection point and work of breathing.                       |  |
|    | h) Alrams: Audio-Visual alarms   |  |
|    | ➤ High RR, High & Low pressure, Low PEEP, High &   |  |
|    | Low tidal volume,  |  |
|    | ➤ High/Low exp. Min. Volume, High& Low fiO2,   |  |
|    | Disconnection,   |  |
|    | High leak, O2/Air/fail, Apnea.   |  |
| 22 | It should have control panel lock facility.  |  |
|    | It should have internal Battery Back-up of at least  |  |
|    | 100 min. for main unit.  |  |
|    | Should supply along with following accessaries     Main unit (200-230 V AC)  |  |
|    | <ul> <li>Main unit (200-230 V AC)</li> <li>Reusable Adult and Pediatric Patient Circuit-each 2</li> </ul>                |  |
|    | nos.   |  |
|    | Air and Oxygen Hose-each 1 no.   |  |
|    | Support Arm to hold the patient circuit- 1 no.   |  |
|    |  |  |
|    | > Trolley/ Cart- 1 no.   |  |

P

|    | basis. The manufacture/ supplier must give declaration for   |  |  |
|----|--|--|--|
| 19 | the same.  It should have facility for Rise time factor, different                                   |  |  |
| 17 | inspiratory flow patterns.   |  |  |
| 20 | It should have exhalation sensitivity facility from 5% to 7%   |  |  |
|    | (termination criteria)   |  |  |
| 21 | It should have following settings  |  |  |
|    | Respiratory Rate: 5-120 bpm  |  |  |
|    | Tidal volume: 5-1000 ml in volume control  |  |  |
|    | • Fi02: 21-100%  |  |  |
|    | • I:E Ratio- 1:8 to 3:1  |  |  |
|    | • 1-Time: 0.1-8s   |  |  |
|    | Flow trigger 0.6 to 12 lpm and pressure Trigger 0.6-   |  |  |
|    | 12 cm H20  |  |  |
|    | Inspiratory pressure Control: 0-85cmH20 and  |  |  |
|    | pressire support: 0-80cm H2O   |  |  |
|    | • PEEP/CPAP: 0-45cm H2O  |  |  |
|    | Ideal Body weight factor 5 ml/kg   |  |  |
|    | Platue Time 0. To 1.5 sec  |  |  |
|    | Peak flow: 3-150LPM for mandatory breath   |  |  |
|    | It should have following monitoring:   |  |  |
|    | a) Volume-Exhaled and inspired tidal volume, Exhaled   |  |  |
|    | minute volume, leak%, leak minute volume,  |  |  |
|    | spontaneous minute volume, Respiratory rate-<br>spontaneous and mandatory.                           |  |  |
|    | b) Pressure- Peak Pressure, Pressure mean PEEP   |  |  |
|    | Pressure Plateau, Auto PEEP  |  |  |
|    | c) Resistance (Insp. And exp) and Compliance (staitic  |  |  |
|    | and dynamics)  |  |  |
|    | d) Waveform- Pressure V/s Time, Flow V/s Time,   |  |  |
|    | Volume v/s Time  |  |  |
|    | e) Loops- Pressure-Volume Loop, Flow- Volume Loop,<br>Flow-Pressure Loop                             |  |  |
|    | f) It should respiratory mechanics package at least 6  |  |  |
|    | parameters to predict patient weaning like- rapid  |  |  |
|    | shallow breathing index (Freq./ resp. rate),   |  |  |
|    | occlusion pressure, slow vital capacity, max.  |  |  |
|    | inspiratory pressure, time constant, AUTO PEEP,  |  |  |
|    | trapped volume, work of breathing  |  |  |
|    | g) Should have PV tool facility to measure upper and   |  |  |
|    | lower inflection point and work of breathing.  h) Alrams: Audio-Visual alarms                        |  |  |
|    | ➤ High RR, High & Low pressure, Low PEEP, High &   |  |  |
|    | Low tidal volume,  |  |  |
|    | ➤ High/Low exp. Min. Volume, High& Low fiO2,   |  |  |
|    | Disconnection,   |  |  |
|    | High leak, O2/Air/fail, Apnea.   |  |  |
| 22 | It should have control panel lock facility.  |  |  |
|    | It should have internal Battery Back-up of at least  |  |  |
|    | 100 min. for main unit.  |  |  |
|    | <ul> <li>Should supply along with following accessaries</li> <li>Main unit (200-230 V AC)</li> </ul> |  |  |
|    | Reusable Adult and Pediatric Patient Circuit-each 2  |  |  |
|    | nos.   |  |  |
|    | Air and Oxygen Hose-each 1 no.   |  |  |
|    | Support Arm to hold the patient circuit- 1 no.   |  |  |
|    | > Trolley/ Cart- 1 no.   |  |  |
|    | Auto- cleavable exhalation system with flow sensor-  |  |  |
|    | 4 nos.   |  |  |
|    | Reusable and autoclavable Flow sensor- 4 no. in case   |  |  |

#### ADMINSTRATION OF DAMAN AND DIU, O/O. THE MEDICAL SUPERINTENDENT, GOVERNMENT HOSPITAL, DAMAN.

### <u>Tender Notice No.GHD/ paediatric.vent. /2015-2016/214</u> 2. <u>Dated:-22/12/2015</u>

### FINANCIAL BID FOR HIGH END NEONATAL PAEDIATRIC VENTILATOR

| Sr.No. | Name of Items   | Rate per<br>unit. | Rate should be onlinewww.np rocure.com |
|--------|---|-------------------|--|
|        | Rate as per Technical Specification<br>for High End Neonatal Peadiatric<br>Ventilator                                 |                   |  |
| 1.     | High End Neonatal Pediatric<br>Ventilator   |                   |  |
| 2.     | The Annual Maintenance Contract (AMC) period of five years from the expiry of Guarantee/ Warranty period of one year. |                   |  |
| i      | First Year  |                   |  |
| ii     | Second Year   |                   |  |
| iii    | Third Year  |                   |  |
| iv     | Forth Year  |                   |  |
| V      | Fifth Year  |                   |  |



#### ADMINSTRATION OF DAMAN AND DIU, O/O. THE MEDICAL SUPERINTENDENT, GOVERNMENT HOSPITAL, DAMAN.

# <u>Tender Notice No.GHD/ paediatric.vent. /2015-2016/ 2142</u> <u>Dated:- 22/ 12 /2015</u>

### ELIGIBILITY PARAMETERS.

| 1.  | Name of the Organization   |  |
|-----|--|--|
| 2.  | Postal Address   |  |
| 3.  | Telephone / Fax / Mobile No. of the Organization / Firm.   |  |
| 4.  | Status of the Organization/Firm (whether Private or Public Sector undertaking or Sole Proprietor or Partnership or co-operative society etc.) The tender should attach a resolution passed by the Executive Body authorizing the specific officer / partner for signing the documents. |  |
| 5.  | Certificate from the respective manufacture company indicating your firm as authorized dealer/supplier for their product   |  |
| 6.  | Certificate of experience in the field of Purchase of<br>High End Neonatal Ventilator  |  |
| 7.  | Valid licence  |  |
| 8.  | Proof of fulfilling the norms of ISI/ISO/WHO/GMP   |  |
| 9.  | US FDA, CE and ISO Certified specified specification, if any   |  |
| 10. | Copy of dealership letter  |  |
| 11. | Licence for import   |  |
| 12. | PAN CARD No.   |  |
| 13. | Sales Tax / VAT No.  |  |
| 14  | Service Tax if any   |  |
| 15  | Copy of Turnover for Rs.4,50,000/- of the estimated cost during last 3 years up to 31/12/2015  |  |

Place:

Date:

Signature of Tenderer Name of Tender with Seal of the firm

