त्रिभुवन विश्वविद्यालय
शिक्षण अस्पताल
तार-टुथमेड
महाराजगञ्ज
काठमाडौं, नेपाल ।

पत्र संख्या :-

मिति :.....

सूचना

२०८२।११।१९

यस त्रि.वि.शिक्षण अस्पतालको Paediatric विभागको लागी तपसीलमा उल्लेखित उपकरण खरिद गर्नु पर्ने भएकाले उक्त सामाग्री आपूर्ति गर्न इच्छुक इजाजत प्राप्त सप्लायर्स/कम्पनी/फर्महरुले यो सूचना प्रकाशित भएको मितिले **सात**(७) दिन भित्र आवश्यक सम्पुर्ण कागजात सहित शिलबन्दी दरभाउपत्र अस्पतालको सामान्य प्रशासन शाखा "क" मा पेश गर्नुहुन सूचित गरिन्छ । प्राविधिक विवरण र मुल्य विवरण फारम पनी यसै साथ संलग्न गरीएको छ । साथै थप जानकारीको लागी सामान्य प्रशासन शाखा 'क' मा सम्पर्क गर्न सकिनेछ ।

तपशिल :

S.N.	Description	Req.Unit
1.	NIV Ventilator (CPAP Blender With Humidifier)	1 Set.

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सरस्वती गुरुङ्ग
प्रमुख
सामान्य प्रशासन 'क'

फोन नं. : ४५-१२४०४, ४५-१२५०५, ४५-१२७०७, फ्याक्स : ९७७-१-४२२५५३, पोष्ट बक्स नं. : ३५७८
E-mail: tuthdirector@iom.edu.np, Website: www.iom.edu.np

1. Price Schedule for Machine

1	2	3	4	5	6	7	8
Item	Description	Unit	Quantity	Unit price (Site Delivery)	Total price in figure (cols. 4 x 5)	Total price in words	Remarks
1	NIV Ventilator (CPAP Blender With Humidifier)	Set	1 (One)				
				Total Amount			
				Add 13% Value Added Tax			
				Total Including VAT			

Total Price ……. …… (in words)

Signature and Stamp of Bidder _____

Note: In case of discrepancy between unit price and total, the unit price shall prevail

2. Schedule of Requirements

The delivery schedule expressed as days/weeks/months stipulates hereafter a delivery date which is the date of delivery to the final destination where the Goods is required to be delivered.

No.	**Description**	**Quantity**	**Place of Delivery**	**Delivery schedule days/weeks/months from date of Purchase Order**
	NIV Ventilator (CPAP Blender With Humidifier)	1(One) Set	TUTH, Maharajgunj, Ktm.	Seven Days

3. Technical Specifications of NIV Ventilator (CPAP Blender With Humidifier) :

S.No.	Technical specification	Bidders Offer
	Name of the bidder:	
	Manufacturer:	
	Country of Origin:	
	Made in:	
	Brand:	
	Type /Model :	
	Required Technical Specification	
1.	The equipment should be a dedicated neonatal-specific device with the following non-invasive modes in one device: i. BCPAP – Bubble Continuous Positive Airway Pressure ii. NCPAP – Nasal Continuous Positive Airway Pressure iii. HFNT – High Flow Nasal Therapy iv. OnCPAP – Oscillatory Nasal Continuous Positive Airway Pressure v. NIPPV – Non-Invasive Positive Pressure Ventilation vi. NISPPV – Non-Invasive Synchronized Positive Pressure Ventilation	
2.	Should have continuous real-time pressure, flow and Fio2 measurement, preferably at the patient end.	
3.	Should have servo control electronic blending mechanism for Precise controlling pressure, flow and Fio2.	
4.	The system should be suitable to deliver non-Invasive ventilation with leak compensation and real time Patient data should be displayed.	
5.	The system should be suitable to deliver Nasal CPAP with Leak compensation, Breath rate Monitoring, Apnea detection and Apnea backup Ventilation.	
6.	CPAP pressure with oscillations should be generated by creating resistance in water column and bubbling of exhaled gas in the water column	
7.	In Bubble CPAP mode the system should be capable for Real time measurement for CPAP Pressure, Flow and Fio2.	
8.	Should have settings for: i. Peak Inspiratory Pressure: 4 to 25 cmH2O ii. PEEP/CPAP: 1-15 cmH2O iii. Inspiratory Time: 0.2-4.00 sec iv. Rate: 10-90 bpm v. FIO2 (integrated blender without bleed flow): 21-100% vi. Pressure Trigger: 1-9 level vii. High flow 02 therapy: 2-60 Ipm with FiO2 from 21-100%	

9.	Should have following additional settings for High-frequency non-invasive CPAP (Oscillatory nasal CPAP) mode: i. Freq: 8-12 Hz ii. Amplitude/power: 1-5 Level	
10.	Should have apnea detection and back up ventilator.	
11.	It Should Have Visual and Audible alarm system with defined Priorities for each alarm.	
12.	Should have alarm settings for high and low delivery of pressure, and breathe rate.	
13.	Should have alarms with clear text messages/corrective action for: Disconnection, Ventilation hose kinked, High/low Pressure, High/low Minute Volume, High Rate, Apnea / apnea alarm time, High/low 02% (automatic settings), Oxygen line failure, Compressed air failure, Total electronic failure (with error code)	
14.	The system should be compatible with any patient circuit which has followed ISO standards.	
15.	Should have universal airway connector ports to connect almost any Patient circuit connectors which follows ISO Standards in the market.	
16.	It should have a TFT Color screen with 5 inch or higher in size.	
17.	The system should have Electronic and Mechanical safety inside ensures the safety of the patient in case of higher pressure in the circuit.	
18.	Should have with graphics display as below: i. Pressure Curves.	
19.	Should have internal battery for at least 3 hours back up.	
20.	Should be a modular design with upgradeable hardware and software functions.	
21.	Accessories to be provided with each unit: i. Oxygen connecting Hose (3 meters) - 1 no. ii. Air connecting Hose (3 meters) - 1 no.	
22.	It should have mobile trolley with castors to fix Equipment, Humidifier, Bubble jar.	
23.	Gas Input pressure range should be minimum 40 to 80 PSI.	
24.	It should Have Operating Atmospheric Pressure Range of 50 to 110kPa	
25.	It should have input power range of 100 to 230 VAC	
26.	It should Have Fio2 Delivery Accuracy of ±5%	
27.	It should Have Pressure Delivery Accuracy of ±2%	
28.	It should Have Flow delivery Accuracy of ±2 LPM	
29.	Unit should be light weight and easy to handle.	
30.	Should have valid Indian CDSCO certificate.	
	Terms and Conditions	
1	Manufacturer should be ISO certified for quality standards Electrical safety conforms to standards for electrical safety IEC 60601-1 (OR EQUIVALENT international/national standard)	
2	The supplier must submit the brochure or e-copy.	
3	Should have 2 years complete parts and service warranty excluding consumable and additional 3 years of service warranty	
4	Certification of manufacturer guaranteeing the availability of all spare parts for next 10 years.	

5	Onsite repair & maintenance training and operational training to the Hospital's technical, biomedical staffs and Users.	
6	1 copy of operating manual in English should be provided at the time of installation.	
7	The bidder should submit the valid authorization letter from the manufacturer.	
8	The machine supplied should be brand new with the date of manufacture mentioned and the country of origin should be clearly mentioned.	
9	All the standard accessories to run the machine shall be provided during the time of installation.	
10	The cost of important spares must be submitted; else bid will be disqualified.	