



ACU/PS/AH & RC-900(2)/ 33 /2023-24

Date: 12 JUL 2023

### TENDER NOTIFICATION

The Adichunchanagiri University invites **closed tenders** from eligible tenderers or bonafide licensed manufacturer or their authorised local supplier/dealer/distributor in the state of Karnataka for the procurement of the Anaesthesia work Stations & ICU Ventilators as per section I & II.

1	Name of the work	Anaesthesia work Stations & Seven Ventilators to the Adichunchanagiri Hospital and Research Centre, BG Nagara
2	Last date for tender submission	On or Before 31.07.2023 up to 05:00 PM

Sl. No.	Name of the consumables   Particulars	Provisional Qty. (In No's)
1.	Anesthesia work Stations	4
2.	ICU Ventilators	7

### SECTION -I

#### Instruction to Tenderers

- The Tenderer shall send quotes in 2 bid formats (Technical and Financial bids sealed separately inside the main envelope for any or all list of items) on professional business letterheads. The inner and outer sealed cover must bear the following identification
  - Tender for .....[name of service | Contract]
  - Tender Reference No.....[insert number]
  - Address to "The Registrar, Adichunchanagiri University, B.G. Nagara -571448, Nagamangala (T), Mandya (D)"
  - The tenderer who prefers to submit the tender through Post can dispatch the same through Registered Post / Speed Post or Courier so as to reach the above address on or before the due date and time specified in the Tender Notice. Tenders received after the due date and time, for what so ever reasons will not be considered and the authority, ACU BG-Nagara will not be liable or responsible for the same.
- Tender Currency:** Prices shall be quoted in Indian Rupees Only
- AMC/CMC (If any)** is subject to the Adichunchanagiri University's norms.
- Warranty:** 3 years of warranty period



- ADICHUNCHANAGIRI UNIVERSITY
5. **Amendment of Tender Documents:** At any time prior to the deadline for submission of tenders, the University may, for any reason, whether at its own initiative or otherwise, modify the tender documents by amendment. Adichunchanagiri University reserves all the rights to accept, reject, incorporate changes and re-tender without giving any reasons.
  6. **Documents Comprising the Tender:** Shall attach Brochure, Certification of the product, Bank/account details, PAN, GSTIN, Good Standing Certificate and 02 Years of ITR declaration inside the envelope and company contact details with email ID on the main envelope cover for further correspondence.
  7. **Tender Prices:** Prices indicated on the Price Schedule shall be entered separately I.e. the price of the goods, quoted (ex-works, ex-factory, ex-showroom, ex-warehouse, or off-the-shelf, as applicable), including all duties and sales and other taxes already paid or payable. Any Indian duties, sales and other taxes which will be payable on the goods if this Contract is awarded. Conditional tenders will not be considered.
  8. **Validity of the Bid:** 90 Days from the last date of submission of bid
  9. **Corrupt or Fraudulent practices:** The Adichunchanagiri University requires that the Tenderers, observe the highest standard of ethics during the procurement and execution of such contracts. In pursuance of this policy:
    1. will reject a proposal for award if it determines that the Tenderer recommended for award has engaged in corrupt or fraudulent practices in competing for the contract in question;
    2. will declare a firm ineligible, either indefinitely or for a stated period of time, to be awarded a university contract if it at any time determines that the firm has engaged in corrupt or fraudulent practices in competing for, or in executing, a University contract.
  10. **Process to be confidential:** Information relating to the examination, clarification, evaluation, and comparison of Tenders and recommendations for the award of a contract shall not be disclosed to Tenderers or any other persons not officially concerned with such process until the award to the successful Tenderer has been announced. Any effort by a Tenderer to influence the Employer's processing of Tenders or award decisions may result in the rejection of his Tender.
  11. **Clarification of Tenders:** To assist in the examination, evaluation, and comparison of Tenders, the Employer may, at his discretion, ask any Tenderer for clarification of his Tender, including breakdowns of unit rates. The request for clarification and the response shall be in writing or by cable, but no change in the price or substance of the Tender shall be sought, offered, or permitted except as required to confirm the correction of arithmetic errors discovered by the Employer in the evaluation of the tenders.





12. **Delivery:** The successful BIDDER should commence the services as per tender document/Work or Purchase Order. For any queries/ assistance, please write to registrar@acu.edu.in or telephone to purchase section +91 -98458 35834.
13. **Penalty Clause:** Non-execution of supply order - For the reasons of failure to supply partially or completely within the stipulated time or any event of breach of contract. In case at any following stages
1. For the delayed supply (3 days of grace period) - 5% deduction
  2. Quantity issues - 5% deduction
  3. Quality issues - 10% deduction

## **SECTION -II**

### **Technical Specification:**

#### **I. Equipment Name: Anesthesia Workstation**

1. The workstation should have a built-in anesthesia ventilator with pressure, volume controlled and pediatric modes.
2. It should be electronically controlled, pneumatically operated.
3. Should provide with adult and pediatric reusable and autoclavable lightweight tubing breathing circuit.
4. Should be able to deliver a tidal volume from 100ml to 1200ml.
5. Should have a battery backup for 30 minutes with low battery alarm and over charge protection.
6. Should have monitoring facility of airway pressure, tidal volume, frequency and oxygen concentration.
7. Should have display of at least 6 inches for set parameters and graphical display for measured parameters
8. Should have automatic self-test and leak test.
9. Anesthesia machine should be with 3 gas supply system (O<sub>2</sub>, N<sub>2</sub>O, Air) with pipeline connections and reserve cylinder yokes.
10. Gas cylinder (pin indexed) yokes with sturdy clamping bars for easy handling.
11. Two Pin index yokes for connecting cylinders each for O<sub>2</sub>, N<sub>2</sub>O and air through pipeline.
12. Regulator two each for O<sub>2</sub> and N<sub>2</sub>O. N<sub>2</sub>O should be activated only with oxygen on flow.



13. Should have pressure gauge for all gas inlets including central lines mounted on the front panel for easy visibility
14. Should have audible alarm for O<sub>2</sub> failure
15. N<sub>2</sub>O supply should cut off if O<sub>2</sub> supply fails. (Anti-hypoxic guard).
16. Oxygen and Nitrous oxide should be linked either mechanically or pneumatically to ensure a minimum of 25% oxygen delivery at all times to avoid delivery of hypoxic mixture.
17. Should have dual cascade type flow meter for O<sub>2</sub> and N<sub>2</sub>O and air calibrated in multiple scale.
18. The anesthesia machine should have a master control ON/OFF switch.
19. Provision to mount any two selectable vaporizer with interlocking facility to allow use of only one vaporizer at a time.
20. Iso-flurane vaporizer of newer generation having specifications equivalent to tech 7/8 type to be provided.
21. Non-return cum pressure relief valve when pressure exceeds 120cm of H<sub>2</sub>O.
22. Should have only one common gas outlet.
23. Should provide with oxygen flush switch.
24. Circle absorber with corrugated reusable breathing circuit for closed circuit system with each unit. It should be autoclavable. It should be with ventilator selector switch and circle on/off switch.
25. Should have low flow anesthesia technique.
26. Should have a facility to connect the scavenging system.
27. Should have safety certificate from a competent authority CE / FDA (US) / STQC CB certificate / STQC S certificate or valid detailed electrical and functional safety test report from ERTL. Copy of the certificate / test report shall be produced along with the technical bid.
28. Should have a provision for mounting monitors on top of the machine and with drawers.
29. Should have fiber wheels and Foot brakes.
30. Standard bair circuit: 2 nos. with each unit
31. Reservoir bag (2liters): 3 nos. with each machine



32. Connectors for baird circuit: 5 nos with each machine.
33. Should be supplied with driver gas hoses with necessary attachments (colour coded).
34. Should work in 220-240Vac 50 Hz input supply

## **II. Equipment Name: Ventilator ICU:-**

### **I. Ventilation modes:-**

1. Adult/Paediatric mode.
2. Volume Controlled mode.
3. Asst. Controlled mode.
4. Pressure Controlled Ventilation.
5. SIMV/V and SIMV/P.
6. Bi pressure Ventilation.
7. CPAP and PEEP.
8. Facility for Non-Invasive ventilation
9. Plateau Facility

### **II. Ventilation parameters: -**

1. Tidal volume- 200 – 2000 ML (Adult patient). a.  
50 to 300 ML (Paediatric PC mode).
2. Respiratory rate - 5 – 100 BPH.
3. Pressure - 0 – 100 cm H<sub>2</sub>O.
4. Inspiratory Peak Flow - 4 – 100 l/min.
5. Minute volume - 1 – 30 l/min.
6. Oxygen Concentration - 21 –100 %
7. Inspiratory pause - 0.1 – 5.5 sec.
8. PEEP/CPAP- 30 cm H<sub>2</sub>O.

### **III. Standard Accessories (with each machine): -**

1. Patient circuit (Adult reusable) - 2 complete set.
2. Patient circuit (Paediatric reusable) - 1 complete set.





3. Nebulizer Ultrasonic one - Complete set.
4. Humidifier - 1 No.
5. O2 Pressure Regulator with hose - 1 No.
6. AIR Pressure Regulator with hose - 1 No
7. 5 meters (conversion kit)
8. Hose for O2 connection with connector - 5 mts.
9. Hose for compressed air with connector - 5 mts.
10. Test lung - 1 Nos.

**IV. Features: -**

1. Back up mode for apnea.
2. Full alarm system for all ventilator settings and monitored values.
3. Monitor with LCD/TFT (10" or higher size) graphical display for real time simultaneous display of two waveforms. Should display minimum 3 graphs and 2 loops and may not simultaneously.
4. Monitoring of both patient data and set values should be possible with trend facility.
5. Direct access to vital settings
6. Transducer should be sterilizable and reusable.
7. PEEP valve should be built in.
8. Patient circuit should have a separate inspiratory and expiratory limb.
9. Should have safety certificate from a competent authority CE / FDA (US) / STQC CB certificate / STQC S certificate or valid detailed electrical and functional safety test report from ERTL.

**V. Pneumatic Gas Sources:**

1. In case of compressor failure it should also be operable with compressed

Air / oxygen supply of 45 to 60 psi.

**VI. Power Source: -**

220/240 V Ac 50 Hz supply.



Internal battery (maintenance free) with 1 hour minimum operating time for the ventilator

**Vii. Mounting**

Trolley/Cast mounting for easy transportation

**Head of Procurement  
Adichunchanagiri University  
B G Nagara -571448**

