



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 ICU Equipment for Critical Care and Renal Science Departments to Adichunchanagiri Hospital & Research Centre as per section I & II.

1	Name of the work	Procurement of ICU Equipment for Critical Care and Renal Science Departments at Adichunchanagiri Hospital & Research Centre
2	Last date for tender submission	On or Before 20.10.2023 up to 05:00 PM

Sl.No.	EQUIPMENT	Quantity
1	Multiparametric Patient monitor with IBP, EtCo2 (can be used as a detachable extension to the basic monitors) - mainstream preferred.	3
2	Multiparametric patient monitor with IBP	5
3	Inflatable Air mattresses (some local companies supply on demand)	10
4	Syringe pumps	20
5	Infusion pumps	11
6	Defibrillator	2
7	ECG machine	5
8	Transport monitor	1
9	DVT pumps	5
10	Video laryngoscope	1
11	NIV machines (portable Bipap)	3
12	HHHFNO2	3
13	5 function motorised cot	20
14	5 function manual cot	20
15	Over head table	40
16	Bed side locker	40
17	Crash cart	2
18	Procedure carts	5
19	Linen cart	1
20	Wheel chair	2
21	Foldable recliner chairs	5

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

1. Tender for[name of service | Contract]



2. Tender Reference No.....[insert number]

3. Address to “The Registrar, Adichunchanagiri University, B.G. Nagara -571448, Nagamangala (T), Mandya (D)”

4. 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:** As per the Standards. Preferably 03 years
- **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.
- **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.
- **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.
- **Validity of the Bid:** 90 Days from the last date of submission of bid
- **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.

- **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.

Technical Specifications:**1) Multi parameter patient monitor with IBP and ETCO2**

1. Should have TFT/LCD/Touchscreen display with at least 10-15 inches and at least 4-5 wave forms touch screen and numeric display simultaneously
2. The waveform should be user selectable with preset user defined settings for varying care locations.
3. Should be portable with carrying handle.
4. Monitor should have in built Lithium-ion type battery for 2 Hrs. continuous operation in case of mains failure
5. Should have keys for quick access to main functions.
6. Should be able to monitor ECG, SPO2, NIBP, 2 IBP, Respiration Rate, 1 temp & ETCO2, for adult, paediatric and neonatal patients as standard with adult, paediatric by default. IBP should in corporate SVV/SPV/PPV monitoring.
7. 5 Lead ECG monitoring.
8. Respiration & Apnea alarm
9. Manual, Auto and STAT mode for NIBP monitoring and ranges should be 30 to 230mmHg.
10. Pulse Oxymeter (SPO2) with Plethysmograph & Pulse strength indicator With Variable pitch with change in SpO2. Should has low perfusion compensation and motion tolerance technology. Documentary proof shall be submitted
11. Side-stream / Micro stream Capnography with display of CO2 wave form & digital values (ETCO2, FiCO2, RR).
12. Should have separate volume control for beep sound for QRS and alarm sound.
13. The display setting should have at least 4 user defined setups variable as per applications for flexible use of the monitoring various clinical environments
14. Monitor should have networking options
15. Should provide following accessories
 - a. Micro stream / Side stream ETCO2 disposable kit for Adult - 1 each,
 - b. 5Nos of Disposable IBP transducers with all standard accessories & Reusable adapter cable 1 each.
 - c. Reusable adult 5 lead ECG cable set (Clip type) – 3 nos.
 - d. Reusable adult and paediatric SPO2 finger probes 1 each, Extension cable -1 each
 - e. NIBP cuffs for standard Adult- 1Nos, Obese Adult -1 Nos, Child– 1 each
 - f. Temperature Probe-2Nos (oesophageal / rectal/ surface)
16. Equipment performance should not be affected by electromagnetic radiation or conducted through power lines from another device.
17. Should work on 200-240V AC/ 50Hz with inbuilt rechargeable battery.
18. Should have safety certificate from a competent authority CE issued by a notified body registered in European Commission/ FDA (US
19. Facility for last 24 hours full disclosure with wave forms trend review & facility for patient data entry
 - a. Monitor stand as per the following specification should be available
 - b. Monitor stand - extruded Aluminium, powder coated.
 - c. Load bearing capacity 20 kgs approximately.
 - d. Should supply, install with necessary anchor fasteners at the site



2) Multi parameter patient monitor with IBP

1. Should have TFT/LCD/Touchscreen display with at least 10-15 inches and at least 4-5 wave forms touch screen and numeric display simultaneously
2. The waveform should be user selectable with preset user defined settings for varying care locations.
3. Should be portable with carrying handle.
4. Monitor should have in built Lithium-ion type battery for 2 Hrs. continuous operation in case of mains failure
5. Should have keys for quick access to main functions.
6. Should be able to monitor ECG, SPO₂, NIBP, 2 IBP, Respiration Rate IBP should in corporate SVV/SPV/PPV monitoring.
7. 5 Lead ECG monitoring.
8. Respiration & Apnea alarm
9. Manual, Auto and STAT mode for NIBP monitoring and ranges should be 30 to 230mmHg.
10. Should have separate volume control for beep sound for QRS and alarm sound.
11. Should provide following accessories
 - a. 5 Nos of Disposable IBP transducers with all standard accessories & Reusable adapter cable -1each.
 - b. Reusable adult 5 lead ECG cable set (Clip type) – 1each
 - c. , Extension cable -1each
 - d. NIBP cuffs for standard Adult- 1Nos, Obese Adult -1 Nos, Child– 1each
 - e. Temperature Probe-2Nos (oesophageal / rectal/ surface)
12. Equipment performance should not be affected by electromagnetic radiation or Conducted through power lines from another device.
13. Should work on 200-240V AC/ 50Hz with inbuilt rechargeable battery.
14. Should have safety certificate from a competent authority CE issued by a notified body registered in European Commission/ FDA (US
15. Facility for last 24 hours full disclosure with wave forms trend review & facility for patient data entry
 - i. Monitor stand as per the following specification should be available
 - ii. Monitor stand - extruded Aluminium, powder coated.
 - iii. Load bearing capacity 20 kgs approximately.
 - iv. Should supply, install with necessary anchor fasteners at the site

3) Air Mattress with Machine: -

- Should be pneumatically controlled alternating pressure pad system for prevention of pressure sores.
- Should be on an alternating basis, number of uniform sacks in the mattress inflate and deflate.
- Should be alternating pressure pad device aids in the movement of body fluids.
- Should be gradual pressure changes with no vibration or noise.
- Power supply: 220V, 50Hz, 5 amps.
- Dimension of mattress: 1 meter x 2.5 meter approx.
- Warranty 1 year.
- Price of mattress & machine should be quoted separately. Their total will be eligible for price comparison.



4) Syringe Pump

1. Should be easy to use and nurse friendly.
2. Should have automatic syringe size and model detection
3. Should have large format LCD/TFT display.
4. Should have a minimum flow rate range from 0.1 – 1200 ml/hr. for 50ml syringe, 0.1 – 100 ml/hr for 20ml syringe and 0.1 – 60 ml/hr. for 10ml syringe.
5. Syringe range from 20-50/60 ml.
6. Should have a flow rate accuracy of $\pm 2\%$
7. Should have a bolus rate up to 1000ml/hr for 50 ml syringe.
8. Should have automatic and manual bolus.
9. Should have at least 3 levels of programmable occlusion pressure.
10. Should have automatic bolus reduction system to avoid accidental bolus delivery after occlusion incident.
11. Should have a rechargeable battery with back up time of minimum 3 hours.
12. Pump must trigger following alarms with visual indication:-
 - i. Occlusion Pressure Alarm
 - ii. KVO or 3 min pre- alarm
 - iii. Syringe empty and volume infused alarm
 - iv. Internal malfunction and Battery Charge Low Alarm Syringe disengaged and Incorrectly placed alarm.
 - v. Line disconnected (rapid pressure drop).
13. Should work with input 200 to 240Vac 50 Hz supply.

5) Infusion Pump

1. Should be operated on drip rate Peristaltic finger pump method.
2. Should compatible with most of the IV set (macro/micro drip sets).
3. Should have the following flow rates.
4. IV Set ml/hr. drops/min
 - 15 drops/ml 3~450ml/hr. 1~100drops/min
 - 20drops/ml 3~450ml/hr. 1~100drops/min
 - 60drops/ml 1~100ml/hr. 1~100drops/min
5. Should have a flow rate accuracy of $\pm 10\%$ and drip rate accuracy of $\pm 2\%$.

6. Should have a volume infused display from 0 to 999.9ml.
7. Should have a purge and KVO facility.
8. Should have a audible and visual alarm for occlusion pressure, air alarm, door open, empty, low battery.
9. Should have a LCD display with backlight and graphical display of infusion Should have a minimum 2hr battery back up at highest delivery rate.
10. Should work with input 200 to 240Vac 50 Hz supply.

6) Defibrillator Machine

1. It should be a latest technology, advanced biphasic waveform defibrillator.
2. It should have integrated Automated External Defibrillator (AED).
3. It should be light weight, compact, easy to carry and easy to operate.
4. It should have device status indicator for readiness of use.
5. It should have facility of manual defibrillation and upgradable to External Pacing.
6. It should have at least 6 inch, high resolution colour monitor for ECG (3 to 5 leads) with three waveform capability; upgradable to SpO₂, NIBP and EtCO₂.
7. It should have in built 3 channel ECG recorder.
8. It should be capable of storing trends and patient data
9. Should have Arrhythmia alarms.
10. Should have synchronous cardio version.
11. It should have both adult and pediatric external paddles.
12. It should have biphasic mode, with range of 1 to 200 joules, charge time less than 5 seconds.
13. Fully charged in-built battery backup with provision for 20 shocks of 200 joules with 3 hours monitoring OR at least 150 shocks of 200 joules without monitoring.
14. Should have battery capacity indicator on battery.
15. It should meet international safety standards, US-FDA and CE certification.
16. It should be capable of transferring data to PC through USB flash memory.
17. System configuration, accessories, spares and consumables:
 - Adult external paddles- 01
 - Pediatric external paddles -01 (preferably built-in adult paddles)
 - Patient cables- 01
 - ECG Rolls- 2
18. It should be capable of operating continuously in Indian conditions.
19. It should be capable of operating on mains power input of 120-240 V, 50/60Hz

7) ECG MACHINE

1. Should acquire simultaneous 12 lead ECG for both adult and paediatric patients.
2. Should have Real time Colour display of ECG waveforms with signal quality indication for each lead.
3. Should have Artifact, AC, and low and high pass frequency filters.
4. Should have a storage memory of at least 100 ECGs with easy transfer by modem and data card.
5. Should have full screen preview of ECG report for quality assessment checks prior to print.
6. Should have interpretation facility of the amplitudes, durations and morphologies of ECG waveforms and associated rhythm for adult and paediatric patients.
7. Should have alphanumeric Keyboard for patient data Entry. (Virtual or hard keys).
8. Should have High resolution (200 dpi x 500 dpi on 25 mm/sec speed) digital array A4 size printer.



9. Should have report formats of 3 x4; 6 x2, Rhythm for up to 12 selected leads; 12 Lead Extended measurements, 1 minute of continuous waveform data for 1 selected lead.
10. Should have battery capacity of at least 30 ECGs or 30 minutes of continuous rhythm recording on single charge.
11. Should be able to be connected to HIS /LAN/Wireless LAN
12. Should display ECG on LCD/TFT Display of 640x480 pixel resolution.
13. USB Support for Storage on external portable memories.
14. Multimode of ECG Storage capability, 150 ECG on Internal Flash Memory System Configuration
Accessories, spares and consumables:
 - a) ECG Machine 12 Leads with Interpretation
 - b) Patient Cable
 - c) Chest Electrodes Adult (set of six) -02 sets.
 - d) Chest Electrodes Paediatric (set of six) -02 sets
 - e) Limb Electrodes (set of 4) 02 sets of Adult and 02 sets of Paediatrics
 - f) Thermal Paper A4 Size for 50 patients

8) Transport Monitor.

1. Portable and Light weight preferably <10kg should have TFT/LCD display with at least 10.4 inches with 4 wave forms and numeric display simultaneously. The waveforms Should be user selectable.
2. Transport Monitor is required to monitor vital parameters of patients during
Capability Of storage of patient data and printing of patient reports. Transport Monitor should be Portable and light weight and should monitor vital parameters of Patients. Transportation to and from OT; Emergency; Trauma ambulances.
3. Should be portable with carrying handle.
4. Monitor should have in built Lithium-ion type battery for 2 Hrs. continuous operations in case of mains failure
5. Should have keys for quick access to main functions.
6. Should be able to monitor ECG, SPO2, NIBP, 5 Lead ECG monitoring.
 - a. Respiration & Apnea alarm
 - b. Manual, Auto and STAT mode for NIBP monitoring and ranges should be 30 to 230mmHg.
7. Should have separate volume control for beep sound for QRS and alarm sound.
8. Should provide following accessories
 - i. 5Nos of Disposable IBP transducers with all standard accessories & Reusable adapter cable -1each.
 - ii. Reusable adult 5 lead ECG cable set (Clip type) – 1each
 - iii. Extension cable -1each
 - iv. NIBP cuffs for standard Adult- 1Nos, Obese Adult -1 no's, Child- 1each

9. Pneumatic Compression System (DVT Pump)

1. Sequential Compression at Ankle than calf than thigh with circumferential compression around the extremity.
2. Gradient compression around off 45 mm Hg at the ankle/40 mmHg of calf/ 30 mmHg at high.
3. Compression cycle of frequency is to be dependent on individual venous return to should be sensed by compression system itself provide animated alarm resolution where animated icons communicate the cause of alarm and remedies for alarm.
4. Controller should have USB Port .Controller should have adjustable bed hook which attaches easily and securely to most footboards.
5. Battery backup with heavy duties batteries
6. US FDA / European CE certified.
7. Controller should have LCD Display
8. Demonstration of machine is must.

10. Video laryngoscope

1. Should be a video laryngoscope convenient for tracheal intubation.
2. Should have a camera for live Image capturing
3. Should have LED light illumination
4. Should have color Image display facility LCD/TFT display
5. Should have provision to insert all sizes of end tracheal tube
6. Should have a provision to introduce all sizes of suction catheters
7. Should have water proof protection
8. Should be supplied with rechargeable battery and provision for re-charge.
9. Should have a battery backup facility of minimum 1 hr.
10. Should have all blade sizes/adjustable for adult and paediatric laryngoscope. If the blades are disposable, should supply 5nos. of blades compatible for both adult and paediatric along with each unit.
11. 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.

11. NIV machines (portable Bi-pap)

1. Non Invasive Ventilator having invasive application capabilities for adult & Paediatric usage (above 13kgs).
2. It should be a light & compact device combining unique latest NIV features with simplicity in use.
3. Modes of Ventilation:
ST (Spontaneous/ Timed), PAC (Pressure Assisted Control),
CPAP (Continuous Positive Airway Pressure), S(Spontaneous),
T (Timed), Volume Assured Pressure Support (to ensure alveolar ventilation), AVAPS.
4. Should incorporate latest algorithms for leak compensation & Synchronization. Both should work together to provide control & flexibility to improve ventilation, comfort & sleep, better disease

12. HHHFNO2 (HEATED HUMIDIFIED HIGH FLOW NASAL OXYGEN TUBE)

Suitable for treatment of Hypoxemic patients with respiratory distress

1. It should be complaint for use on patients in ICU, wards, emergency department
2. It should be single system for treating infants, paediatric and adult patients
3. Inbuilt flow generator capable of delivering wide range of flows:2-25 litres or above in paediatric mode and 10-60 litres or above in adult mode
Inbuilt Air/O₂ blending and Fio₂ monitoring, facility to deliver wide range of oxygen concentration (Fio₂) from 21 to 100%
4. It should have inbuilt Air source without need for external compressor
5. Integrated heated humidifier
6. Display to monitor humidity setting, flow, Fio₂ and faults
7. Visual and audible alarm indication for:
 8. Tubes disconnect leaks, tube blockages and water out and hardware fault with error codes.
 - Audible power failure alarm
9. Disinfection mode with heated disinfection tube for sterilization of the device after patient use
10. Supplied with heated wire patient breathing tube and nasal cannula of different sizes, tracheotomy interfaces and mask with standard 22 mm medical taper accessories
11. Paediatric nasal cannula should be made of kink proof material and has adhesive wiggle pads to stick on skin to facilitate kangaroo care
12. It should be compatible for use on tracheotomy patients
13. Should have safety certificate from a competent authority CE issued by a notified body registered in the European commission / FDA (US)/ or valid detailed electrical and functional safety test. Copy of the certificate/ test report shall be produced along with the technical bid.

13. FIVE FUNCTION ICU MOTORISED BED

1. Fully automatic wire remote control Intensive care unit bed with back rest up down, knee rest up-down, trendelenburg position and reverse trendelenburg position, hi-low position controlled through noiseless electro mechanical actuators operated by soft touch attendant(nurses') control panel.
2. The overall dimension should be 2200mm (+/- 10mm) (L) x 1005mm (+/- 10mm) (W) x Height adjusted from 450 mm to 825 mm (+/- 10mm) without mattress.
3. Base frame should be made of 30mmx60mm, 2mm thick CRCA rectangular tube with the bed frame of 50 mm x 25mm and 40mmx20mm, 2mm thick rectangular tube
4. The fully automatic wire remote controlled intensive care unit emergency bed should have four section lying surface with ABS vacuum form with antimicrobial property which should be easily removable, washable to maintain hygiene with integrated mattress retainer.
5. The bed should have four numbers of polypropylene (PP) moulded side board with drop down mechanism, completely collapsible to maintain zero transfer gap.
6. There should be 4 no's of bumpers given at the four corners made up of neoprene with excellent shock absorbing property.
7. There should be two no's of Cardiopulmonary Resuscitation (CPR) lever, one at either side of the bed for quick release of the back rest.



- management, increased patient comfort & therapy acceptance (patients breathing “ in sync” with their device.
5. It should have color screen for real time monitoring to provide essential information including simultaneously viewed flow & pressure curves, the Ti-bar graph to fine tune ventilation & FIO₂ monitoring option.
 6. The machine should have a choice of disease specific preset value defaults (for obstructive, restrictive, normal lung mechanics & obesity hypoventilation) based on commonly used clinical values to help the users for optimizing settings.
 7. Should have built in internal battery for minimum 2 hours of backup time & also should have provision to add external battery.
 8. Should include user adjustable alarms & essential non-adjustable, fixed alarms for patient’s safety.
 9. Should have oxygen inlet port to accept higher flow up to 30L/min of oxygen to achieve a high Fio₂ with built in Fio₂ monitoring.
 10. It should be approved for use in invasive tracheotomy patients.
 11. Data download capability- The usage & summary data for up to 365 treatment sessions & seven days of high resolution, breath by breath data(FIO₂) should be stored in the device ; data can be downloaded via USB or Cable, using a data management PC application.
 12. It should also provide patients reminders, such as filter & mask replacements.
 13. The NIV should comply with following technical specification:
 - a. Pressure range: IPAP: 2-40cm H₂O & EPAP: 2-25 cm H₂O.
 - b. Ti –control settings: Ti max 0.1- 4 sec & Ti min 0.1- Ti max.
 - c. Respiratory rate: 5-60bpm.
 - d. Rise time: min 150-900msec.
 - e. Trigger & cycle: min 5 sensitivity settings.
 - f. Adjustable alarms: High leak, low minute ventilation, high pressure, low pressure, low/high respiratory rate, apnea, low/high Fio₂, low Spo₂, Non-vented mask.
 - g. Standard fixed alarms: circuit disconnected, over pressure, blocked tube, internal battery empty.
 - h. Weight: less than 3kgs.
 - i. Air filter: Electrostatic fiber mesh.
 - j. Air outlets: compatible with ISO 5356-1:2004.
 - k. Power supply: AC 100-240V, 50-60Hz.
 - l. Device DC input: 24v/3A.
 14. Should be supplied with autoclavable patient’s circuit, oxygen connector, disposable full face mask (small & medium) 1 each.
 15. Company has to provide training to all the staff, as & when required.
 16. Should be US FDA approved & European CE certified.



8. In order to achieve the Deep Vein Thrombosis (DVT) position, the lower leg rest portion of the bed frame should have the provision of a ms zinc plated ratchet. The ratchet should be adjustable in eight different positions.

9. The back rest, Knee rest, TR & ATR positions should be operated up to 70 degree, 24 degree and 15 degree respectively. Safe working load should be 300 kgs (+/- 10 kg).
10. The back rest should be made of 6mm thick compact laminate with x-ray cassette hold mechanism to perform x-ray on the bed itself.
11. The digitally Patient weight display and recording facility must be inbuilt with Bed.
12. The head board and leg board should be with 3mm wall thickness. The headboard, leg board & side boards should have provision for color stickers & made of moulded pp with antibacterial additives. Both the head & leg board should be removable without locking mechanism for ease of use during emergency.
13. There should be four nos. of nylon moulded patient lifting pole holders and saline stand holders provided at the four corners of the bed.
14. The bed should be provided with 125mm (+/-5mm) plastic injection moulded twin wheel castors with central and directional locking facility. The castors should be provided with MS round tube made auxiliary brake.
15. It should have accessories like urine bag holders; M.S. chrome plated linen tray and provision for bed extension up to 180mm.
16. The bed should have provision for front loading medium sized M.S. made oxygen cylinder cage.
17. The unit should have the total load bearing capacity of 300kg (+/- 10kg).
18. The unit should work on power input of 230v +/- 15% and 50-60 HZ as appropriate fitted with Indian plug.
19. The IV pole stand should be the proof loading test, cycle tests, impact test, horizontal & vertical load tests for side rails, salt spray test, castor break test, pull test for head and foot board
20. The Hospital bed Chart holder easy to fix/removal type made with clear high quality acrylic sheet of 4mm thick of the size of 250 mm (W) x 90 mm (D) x 350mm (H) in the Foot end of the Bed should be provided.
21. Bed should be provided with telescopic IV pole. This SS made IV pole should be of MS frame and SS made saline stand which can be fitted on the bed.
22. The bed should be provided with 45-
50 density 100 mm thick PU foam mattress which should be covered by heavy helium material which is water proof, flame retardant, vapour & X- ray permeable. The zip & stitches for the mattress cover should be concealed.

14. FOWLERS' COT FIVE FUNCTION MANUAL

1. Should be a height adjustable, manually operated, four section cot with perforated top.
2. The size should be approximately 2250mm length, 1015mm width and an approximate height adjustable from 520 to 820mm with ±5% tolerance
3. Should have a trendelenburg and reverse trendelenburg movements.
4. Should have swivelling non-corrosive, fibre/synthetic wheels of 125mm dia. 2 with brake and 2 without brake.
5. Should provide with a detachable and collapsible railing made of stainless steel of minimum 19mm diameter and 18 gauge tubes housed in mild steel tubular frame, with a locking facility for raised position.

6. Should provide with removable heavy duty saline stand made of stainless steel.304 grade. Should have a provision to fix on all four corners of the bed and also in the middle of the bed on either side
7. Should be provided with mattress of 4 sections, 4" thick PU foam of 40 density and pillows covered with soft water proof material, PVC rexin.
8. Should be supplied with mattress size should be approximately 2010mmx910mmx100mm with 10% tolerance.
9. All IMS components should be 7 diptank pre-treated and epoxy powder coated with 50-60 microns.
10. ICU bed should be of minimum 130Kg weight bearing capacity.
11. All MS Sheets/tubes must be CRCA.

15. OVER HEAD TABLE.

1. The Overall dimensions of over bed table fixed height type should be 1000mm (Length) (+/-10mm) x 380mm (Width) (+/-10mm) x 950mm (Height) (+/-10mm)
2. The top should be made of Pre- Laminated MDF Board of 18mm thick and should be finished with membrane foil. Bottom of the table top should also be Pre-laminated of approved color. 2mm thick bidding in all
3. All the edges of the MDF board shall have the edge band of 2.0mm thickness to be applied by a through feel edge binding machine with D-3 glue, of preferably.
4. Flat Single Layer pre-laminated MDF board should be conforming to having designation
5. Bottom structure of the table, should be made of ERW round tube of dia 25.4mm and thickness 1.6mm. It should have members of dia 19mm and thickness 1.2mm (2 nos on each side) for rigidity. For ease in mobility, it should have castors of 50mm dia.

16. BED SIDE LOCKER.

1. Overall dimensions should be 400mm (W) (+/-10mm) x 425 (D) (+/-10mm) x 850mm (H) (+/-10mm).
2. The Locker should have one drawer unit and one cabinet unit fitted with Cam lock.
3. Gap should be provided between the drawer and Cabinet unit for storage.
4. The locker top should be of 1mm thick SS 304 Grade sheet.
5. The SS sheet should be finished in buff-matt finish.
6. The top should have raised border of 10mm height on three sides.
7. Drawer should be made 1mm thick CRCA sheet.
8. It should be fitted with ball slides for smooth drawer movement.
9. It should be provided with recess to serve as handle.
10. It should be fitted with lock.
11. Cabinet should be made 1.2mm thick CRCA sheet.
12. It should be fitted with hinge door and lock.
13. The door should have louvers for ventilation.
14. It should be provided with recess to serve as handle.
15. Back of the locker should be provided with vertical spacer made of nylon.
16. It should have uniformly distributed total load bearing capacity of 20 kg (+/-2 Kg).

17. CRASH CART.

1. Size - 960 L x 500 W x 1545 H mm approx.
2. Trolley with 25 mm diameter SS tubular frame

3. Drawers maximum number possible of adequate size
4. Flat surfaces should be stainless steel.
5. Two/three rows of hand out bins of different size & color to hold different sizes of ampoules/vials of emergency medicine.
6. Light weight plastic box with drawers of different sizes and colors to hold emergency medicines, ambu bag, IV solution, catheters etc. separately.
7. Facility to carry monitor & suction apparatus.
8. Stainless steel saline rod-one.
9. Castor wheels of 12.5 cm dia- Two having locking arrangement.
10. Pull out cardiac massage board above drawers.
11. Oxygen cylinder stands on one side.
12. All parts should be epoxy polyester coated with 50 micron thickness approx. ebonite rubber, PVC and castor wheel etc.
13. Whole crash cart should be washable.
14. All the Stainless Steel should be 304 grade/ 16 gauge.

18. Procedure carts (Stranded size for hospital).

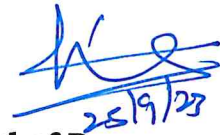
19. Linen cart (Stranded size for hospital)

20. Wheel chair (Stranded size for hospital)

a) Foldable type.

b) Fixed type.

21. Foldable recliner chairs

A handwritten signature in blue ink, appearing to be 'W. S.', with the date '28/9/23' written below it.

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

