

# ADVERTISED TENDER ENQUIRY

for the purchase of Adult/Paediatric ICU Ventilator

at

Jawaharlal Nehru Medical College Hospital  
AMU, Aligarh.

NIT Issue Date	: 23-10-2018
NIT No.	: JNMCH/Med/014/2018-19
Pre Bid Meeting	: 01-11-2018 at 2:30 PM
Last Date of Submission	: 13-11-2018 at 01:00 PM
Bid Opening	: 14-11-2018 at 1:00 PM

Tender documents may be downloaded from university website [www.amu.ac.in](http://www.amu.ac.in)



**Aligarh Muslim University Aligarh**

Office of the Medical Superintendent

JN Medical College Hospital

AMU Aligarh 202002

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Medical Superintendent  
J.N. Medical College Hospital  
A.M.U., Aligarh

Jawaharlal Nehru Medical College Hospital, AMU, Aligarh invites bids (**Technical & Financial**) from reputed, experienced and financially sound Companies/Firms/Agencies for the supply & installation of the **Adult/Paediatric ICU Ventilator** to the J.N. Medical College Hospital, AMU, Aligarh. Those who are in the similar business for the last five years and providing the same service to Central/State Govt./Reputed Private Hospitals or Autonomous Bodies may send their bids both Technical & Commercial in sealed envelopes.

The interested Companies/Firms/Agencies may send their bid complete in all respect along with Earnest Money Deposit (EMD) as mentioned below for each item separately in the form of Demand Draft/Bank Guarantee issued in favour of Finance Officer, AMU, Aligarh, drawn on any scheduled bank payable at AMU, Aligarh and other requisite documents to Medical Superintendent, J.N. Medical College Hospital, AMU, Aligarh-U.P. through registered/speed post. The Bids in sealed cover-I containing "Technical Bid" and sealed cover-II containing "Financial Bids" separately mentioning Tender No. JNMCH/Med/014/2018-19 on or before 01:00 PM on 13.11.2018. The bids received after this deadline shall not be entertained under any circumstances whatsoever. In case of postal delay this Institute will not be responsible. The offers submitted by Telegram/Fax/email shall not be considered and no correspondence will be entertained in this matter. The EMD, in case of unsuccessful bidders shall be retained by JN Medical College Hospital, AMU Aligarh till the finalization of the tender. No interest will be paid by J.N. Medical College Hospital, AMU, Aligarh on the EMD.

S. No.	Item Description	Qty	EMD (Rs.)
1	<b>Adult/Paediatric ICU Ventilator</b>	02	Rs.34,000.00

The following documents are to be furnished by the Supplier along with **Technical Bid** as per the tender document:

- i) Signed and scanned copy of valid registration certificate, experience certificate as per the tender notice, PAN, GST registration certificate and Tender Acceptance Letter.
- ii) Signed and Scanned copy of documents like (Earnest Money Deposit)
- iii) Signed and Scanned Copy of Make and model with HSN code of all systems, sub system send additional items should be mentioned in the technical bid and complete technical details should be provided in the form of Brochures and write-ups.

Bids will be opened on 14.11.2018 at 1:00 PM in the presence of bidders or their authorized representatives who wish to participate in the bidding process. If the opening date happens to be a closed day/holidays, the tender will be opened on the next working day.

Any future clarification(s) and /or corrigendum(s) shall be communicated by the Medical Superintendent through the website [www.amu.ac.in](http://www.amu.ac.in)

Medical Superintendent, J.N. Medical College Hospital, AMU, Aligarh reserves the right to amend or withdraw any of the terms and conditions contained in the Tender Document or to reject any or all tenders without giving any notice or assigning any reason. The decision of the Medical Superintendent, J.N. Medical College Hospital, AMU, Aligarh in this regard shall be final.

## Technical Specifications for Adult/Paediatric ICU Ventilator

1. Should be a microprocessor controlled ventilator with minimum inbuilt 8" colour TFT touch screen integrated graphics and easy to use rotary knob operation providing support to Adult and pediatric. Also ventilator should have option for upgradable to Neonatal ventilation tidal volume 2ml to 300 in case of requirement in hospital.
2. Ventilator should have air supply integrated ultra-quiet turbine from the same manufacturer no OEM.
3. Should be based on reliable flow measuring technology, preferably proximal flow sensor which ensures the most precise flow and pressure measurements for better patient assessment for all patient range.
4. **Ventilation modes:**  
Pressure Control: PCV, PSIMV, SPONT  
Volume Control: CMV, SIMV  
Noninvasive: NIV with option of rate and TI setting.  
Should be upgradable to Nasal High Flow Oxygen Therapy 2 to 80 ltr/pm and firm should quote rate in optional for future upgradation.
5. Ventilator should have close loop ventilation mode ASV (Compulsory)
6. Apnea Back-up and any other mode for safe ventilations offering both volume guarantee & lung protective strategies like volume limit etc.
7. **Controls:** Tidal volume 20 to 2000 ml in Volume Control Mode or better
8. Respiratory rates 4 to 80 BPM or better,
9. Peak flow upto 260 lpm or better
10. Trigger sensitivity: - Flow 1 to 20 l/min
12. PEEP: 0 to 35 cm H<sub>2</sub>O or better.
14. FiO<sub>2</sub>: 21 to 100 %.
15. I: E ratio 1:9 to 4:1 (DuoPAP/BiPAP/BiPhasic 1:599 to 149:1)
16. Inspiratory time (TI) 0.1 to 12 s
17. Pressure control 5 to 60 cmH<sub>2</sub>O, added to PEEP/CPAP
18. Pressure support 0 to 60 cmH<sub>2</sub>O, added to PEEP/CPAP
19. Pressure ramp 0 to 2000 ms
20. Expiratory trigger sensitivity (ETS) 5% to 80 % of inspiratory peak flow
21. Should have facility of Manual breath, O<sub>2</sub> enrichment, standby, screen-lock, apnea backup ventilation, inspiratory hold, screen-shot, suctioning tool, dimmable screen, configurable Quick start-Settings, startup settings based on patient height and gender, integrated pneumatic nebulizer, O<sub>2</sub> consumption display
22. Facility to permanently deactivate the O<sub>2</sub> alarm, if the O<sub>2</sub> cell is depleted or defective.
23. Ventilator should have integrated nebulizer synchronized with inspiratory cycle.
24. **Alarms:** low/high Minute Volume, Low/high Pressure, Low/high tidal volume, low/high Rate, Apnea time, low/high oxygen, Oxygen concentration, disconnection, loss of PEEP, exhalation obstruction, flow sensor, power supply, batteries, gas supply.  
Alarm Loudness: Adjustable (1 – 10), configurable minimum loudness
25. **Display:** Should have Real-time visualization of the lungs with representations of tidal volume, lung compliance, resistance, and patient activity
26. Should have Visual representation of ventilator dependency, grouped into oxygenation, CO<sub>2</sub> elimination, and patient activity
27. Should display at least 30 monitoring parameters including exhaled tidal volume, Breath rate, I: E ratio, FiO<sub>2</sub>, Peak Pressure, Mean Airway Pressure, etc...
28. Source input pressure of oxygen: 40 to 60 psi also facility for input low pressure O<sub>2</sub>.
29. Should work with double limb/ single limb patient circuit both reusable & disposable.
30. Complete with Reusable Silicon Breathing circuits (1 Nos. each) for Pediatric & Adult, autoclavable Expiratory valve complete. The complete unit must be mounted on a pedestal stand / for easy movement of the complete ventilator within hospital original from the same manufacturer no OEM

