Sub:- Purchase of machineries and equipments for year 2014 -15to SNM Hospital/ CMO Leh vide this office .NIT NO ;- SNM/HL/M&E/14-15/1929-35 Dated 04/08/2014.

Corrigendum

Referred to advertisement number above cited NIT (uploaded on www.jkhealth.org/www.leh.nic.in) The corrigendum/Addendum has been made to add the specification to the following items at S.NO,6 (Sec B), S.NO, 1 & 2 (of Sec D), S.NO, 3 (of sec E) and S.NO,8 & 9 (of General Equip), (enclosed specification list) and following items are deleted from list, are S.NO, 8 (of Sec-B), The date for obtaining tender documents will be extend up to 30/08/2014, and submission /Closing of tender up to 05/09/2014.before 2.00 pm sharp.

No: -SNM/HL/M&E/14-15/ 238/-87 Dated: - 28/08/20114

Copy to the: -

Medical Superintendent
(Member Secretary, DPC)
Leh.

1. Deputy Commissioner/CEO, LAHDC/Chairman, DPC, Leh.

2.-3. Joint Director, Information, Srinagar/Jammu for publication of the NIT in two reputed English Dailies of Jammu and Srinagar especially Daily Excelsior, Kashmir Times, Greater Kashmir and one National English News Paper.

4.-5. General Manager, Ranbir Govt. Press, Jammu/Srinagar for publication of the NIT in the next issue of the Govt. Gazette.

6. Technical Director, NIC, Leh with the request to place the NIT on the official web site.

7. Chief Medical Officer, Leh for information.

8. Assistant Director, Information Department, Leh with the request to pursue the concerned to get the NIT published in leading Regional English Dailies.

9. P.A. to Hon'ble Executive Councillor (Health) for information of the EC.

	Laryngoscope Adult/ Pediatric, 3 size of blade, operate with big cell, and spare bulbs.	-do-
	CTG Foetal Monitor with display and printer Should have 12.1" high resolution colour TFT Display with Tiltable Screen for better viewing.	D, Gynea Equip
	Should display FHR, TOCO, Foetal Movement in numeric values.	
	Should display 2 X FHR and TOCO graphs in different colours.	
	Should have the facility for data save with play back & print facility	
	Should have facility to monitor information of last 25 hours	
	Should have special high sensitive watertight probe for better durability	
	Should have the low ultrasound power for the safety of the foetus	
	Should have automatic foetal movement detection	r
	Should have event marking facility by mother and user	1
	Thermal printer with minimum 152MM paper width is essential for broader printouts	
	Standard configuration should be FHR, TOCO, and Foetal Movement	
	Twin FHR monitoring is essential	
	Should have volume control for FHR beep sound and alarm.	
	Should have alarm setting for Weight should be less than 4 kg for easy portability	
	Should have Foetal stimulator built in to FHR probe and activation key should be there on the front panel. Stimulation should be recorded on the recording paper and should be displayed on the screen.Built in rechargeable Li-on battery for backup Should work with input 200 to 240Vac 50 Hz supply	
	Central monitoring system software up gradability should be possible (optional)	
	Should be supplied with the following standard accessories:	PERSON
	Power Cord- 01 / FHR Probes – 02 Nos / TOCO Probe -01	
	Patient Event Marker/ Belts – 03 Nos,	
•	Pulse Oximeter for continuous monitoring with monitor, with digital display of oxygen saturation and pulse rate with an integral signal strength bar graph indicator. (for use of adult and pediatric)	-do-
).	Bronchoscope (Rigid) with fibro optic light carrier a. i.3mm x27cms / ii.7mmx35cms / iii. 9mm x 45cms x 1 no. b. Bronchoscope biopsy cup forceps 45cms c. Bronchoscope Jackson Foreign body forceps 45cms d. Bronchoscope Suction Tube / 35cms /45cms / 55cms.	I.General Equip.
3.	Phacoemulsification Machine:- Specification 1. Torisional phacoemulsification. 2. Vaccum 600+ and more. 3. Disposable cassettes. 4. Programmable foot switch customized. 5. Good monitor and surgeon parameters. 6. Vitrectomy 23 gauge up to 1000 cuts	E. Ophtho

	4 / with appointment	Remarks
S.NO,	Name of the Machineries & equipment / with specification	
As last		D OT Fauin
main l.	Multiparameter Monitor -	B, OT Equip
0.	quitable for Usage in Operation Room and ICU Capable of Molliforning Ecc, of 2,1100	
	. Di i D (MIDD) L'I'('()') Respiration Rate and Temperature	4
ř	• Should have a large colour TFT display 12" or more with 10 waveforms display.	
	Woveform Channels should be user selectable.	
	Should be capable of displaying waveforms and numeric values simultaneously.	
	 User selectable color for waveforms. Should have various selectable display modes including Big font, Oxy CRG, Short 	а
	Should have various selectable display inodes including Big felling trend, NIBP review, 7 lead ECG and Bed to Bed view.	
	Tachnology for SPO2 Monitoring	
	at 111 and a second ECG display with selectable leads of 1, 11, 111, avis, avis,	
	ovE & V by using a five lead patient cable	
	Should have on screen display of HR & ST value with pacemaker detection	
	of and house 2 lead and 5 lead ECG cable selection option.	
	 Should have 3 lead and 3 lead ECG class setemation. Should have user selectable Operation, Monitoring & Diagnostic modes for ECG for 	
	OT ICII & words	
	of 1111 and an agreen display of Respiration wave form and Respiration rate	
	ranges from 0 to 150 breaths/minute derived through ECG leads with wave form	
	filling option. Respiration leads should be user selectable. Should be capable of measuring SPO2 value for Adult, Pediatric and Neonata	
	Should be capable of measuring SPO2 value for reduction of reductions applications using Nellcor Oximax module. Sensors for various applications should be applications using Nellcor Oximax module.	
	ilable lecally	
	 Should have on screen display of Numeric value for SPO2, PR with signal strength bar 	r
	and Plethismograph	
	Ghand have pitch tone variation for been tone on varying SPO2 values.	1
	 Should have a separate NIBP inflation range and alarm value for adult, Pediatric and 	1
	and applications	1
	Should have Manual, Continuous & Auto mode with measuring units in mmHg and	A STATE OF THE STA
an Compression	Kpa.	
	 NIBP Cuffs of various sizes should be available locally. Should have a temperature sensor of either skin or rectal with Celsius and Fahrenhe 	it
100		
	as units.Alarm settings should be provided for all parameters.	
	Should have short cut keys for NiBP start, Alarm mute and freeze.	
II III	Navigator wheel should be provided for easy selection of parameters.	
	Charled have CNS connectivity through Ethernet port.	
	Should have arrhythmia detection facility. Arrhythmia recall and printing facility.	TY
	should be provided	
	Should have separate volume control and QRS beep sound and alarm sound.	
	cl and have multi-colour alarm indication light clearly VISIBLE ITOHI any angle.	nd
	Should have an externally removable Lead Acid battery. Provision for adding secon Should have an externally removable Lead Acid battery.	id
	battery should be given for extending monitoring hours.	
	 Built-in Battery back up for at least 60 mins. Should have 168 hours of trend monitoring facility with both tabular and graphic 	al
		M
	form. • Should have drug dose calculation package and OxyCRG.	
	 Should have drug dose calculation package and Oxyone. Should be portable and handle should be provided. 	
	 Should be upgradable to 3 channel recorder, 2 IBP, EtCO2 	
	Should have CE/FDA marking.	
	 Should be supplied with following standard accessories. 	
	5 Lead ECG Cable - 01	
	A dult SDO2 Sensor with Extension Cable - 01 Each	ital
	NIBP Hose and Standard Reusable Adult, Pediatric and Disposable Neona	
	size Cuff – 01 Each	
	Temperature Probe – 01 (Skin) Power Cord – 01	
	Earth cable – 01	
	Disposable Electrodes – 1 Pack/ User manual - 01 (extra cables)	
	2.0	

Yag Laser
for Laser peripheral iridectomy and capsulotomy with peripheral iridectomy and capsulotomy

No: -SNM/HL/M&E/14-15/238|-87 Dated: -28 /08/20114

Medical Superintendent (Member Secretary, DPC) Leh.

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