Tel: 09957033199 / 09957033212

Office of the Director
DR. BHUBANESWAR BOROOAH CANCER INSTITUTE
A grant-in-aid institute of Department of Atomic Energy, Govt. of India
And a unit of Tata Memorial Centre (Mumbai)
Gopinath Nagar, Guwahati- 781016
*****

CORRIGENDUM

Sub: Corrigendum for Anesthesia Workstation
GeM Bid No: GEM/2023/B/4011784

Sl. No.	Technical Specifications of tender	Amendment Requested	Revised Technical Specifications
2	**Operational Requirements**		
2.1	**Anaesthesia machine complete and integrated with Anaesthesia gas delivery system; Circle absorber system; TEC Vaporisers for Isoflurane and Sevoflurane; Desoflurine (optional); Anaesthesia ventilator. Anaesthesia Gas monitoring with automatic Agent identification, EtCO2, Patient circuit Oxygenation status FiO2 and Et02 (using Paramagnetic cell for no recurring cost)**	**Paramagnetic cell/Galvanic Cell (for better accuracy)** *For wider participation.*	**Anaesthesia machine complete and integrated with Anaesthesia gas delivery system; Circle absorber system; TEC Vaporisers for Isoflurane and Sevoflurane; Desoflurine (optional); Anaesthesia ventilator. Anaesthesia Gas monitoring with automatic Agent identification, EtCO2, Patient circuit Oxygenation status FiO2 and Et02 (using Paramagnetic cell /Galvanic Cell)**
3.1	**Flow management**		
Ii	**Machine should provide electronic gas mixing. User should be able to set Fresh Gas flow and FiO2 on the screen. Direct setting of Fi02 should be available to make setting of 02 plus Air flows faster across all flow ranges instantaneously.**	**Machine should provide electronic gas mixing or Pneumatic gas mixing.** *For wider participation.*	**Machine should provide electronic gas mixing or Pneumatic gas mixing.. User should be able to set Fresh Gas flow and FiO2 on the screen. Direct setting of Fi02 should be available to make setting of 02 plus Air flows faster across all flow ranges instantaneously.**

Iii	**Multi-color Touch Screen TFT display of at least 25 cm (10 inch) size, with display of flow of 02, N20 or Air. The screen should be movable and angle should be tiltable for better veiwing.**	**The screen should be movable or Fixed.** *For wider participation.* *Kindly omit the highlighted point as this is a restricted specification. The screen should be movable and angle should be tiltable for better veiwing.* *Multi-color Touch Screen TFT display of at least 25 cm (10 inch) size, with display of flow of 02, N20 or Air. The screen should be movable for better viewing.*	**Multi-color Touch Screen TFT display of at least 25 cm (10 inch) size, with display of flow of 02, N20 or Air. The screen should be movable or fixed.**
Iv	**Dual flow sensing capability at inhalation and exhalation ports.**	**Should have single flow sensor indipendent or dual flow, sensing technology.** *Flow sensor independent operation will help to continue ventilation in case of flow sensor failure.*	**Should have single flow sensor indipendent or dual flow, sensing technology.**
3.2	**Breathing system**		
Ii	**Flow sensing capability at inhalation and exhalation ports, sensor connections shall be internal to help prevent disconnect.**	**Should have flow sensing capability in exhalation ports or both inhalation & exhalation sensor connections shall be internal to help prevent disconnect.** *For widder paticipation.*	**Flow sensing capability in exhalation ports or both inhalation & exhalation sensor connections shall be internal to help prevent disconnect.**
3.5	**Ventilator (Integrated)**		
Iii	**Ventilator should have Volume Control and Pressure Controlled ,SIM and PEEP, Dual control mode(PRVC/ PRVT/ PCV-VG etc.), Pressure Support**	**Ventilator should have Volume Control and Pressure Controlled ,SIM and PEEP and Pressure Support.** *For wider participation*	**Ventilator should have Volume Control and Pressure Controlled ,SIM and PEEP and Pressure Support.**

Iv	Ventilator should be capable of ventilating diverse range of patient groups from neonates to patients with restrictive airways with tidal volume range between 20 ml to 1500 ml with single bellows system. With option of delivering 5ml in neonatal mode.	Tidal Volume 20ml to 1400ml or more. *For wider participation*	Ventilator should be capable of ventilating diverse range of patient groups from neonates to patients with restrictive airways with tidal volume range between 20 ml to 1400 ml or more with single bellows system. With option of delivering 5ml in neonatal mode.
Viii	Ventilator should be capable of at least 120-150 L/min peak flow to facilitate rapid movement through physiologic "dead space" in the Pressure Control mode	Ventilator should be capable of at least 85 L/min or more peak flow to facilitate rapid movement through physiologic "dead space" in the Pressure Control mode. The point is company specific, so we request you to kindly omit this point or change it to 100 L/min peak flow for a wider participation.	Ventilator should be capable of at least 85 L/min or more peak flow to facilitate rapid movement through physiologic "dead space" in the Pressure Control mode.
Ix	Ventilator should also display waveforms for flow and airway pressure.	Ventilator should also display waveforms for flow or airway pressure.	Ventilator should also display waveforms for flow or airway pressure.
X	Ventilator should display spirometer loops including Flow-Volume and Pressure-Volume curves.	Please ammend this point as optional.	Ventilator Should display spirometer loops including Flow-Volume and Pressure-Volume curves. (Optional)
3.6	Display of Ventilator:		
Iv	Should display respiratory gas monitoring, and anesthetic agent monitoring. Values should display Automatic Agent identification, concentration, inspired and expired, Age corrected MAC value.	should display respiratory gas monitoring, and anesthetic agent monitoring data on ventilator monitor or patient monitor. Values should display Automatic Agent identification, concentration, inspired and expired, Age corrected MAC value.	Should display respiratory gas monitoring, and anesthetic agent monitoring data on ventilator monitor or patient monitor. Values should display Automatic Agent identification, concentration, inspired and expired, Age corrected MAC value.

Xvi	Should have min of 5hours of battery backup as standard in every monitor	Requesting you to kindly amend it to 1 hour for wider participation. Should have min of 3 or more hours of battery backup as standard in every monitor	Should have min of 90 minutes or more of battery backup as standard in every monitor
Xxi	Anti left lock facility should be possible for better hospital asset management	Requesting you to kindly remove this point as this is company specific.	This point is omitted.
9	Standards, Safety and Training		
vi	All components like anaesthesia machine, vaporisers, ventilator and patient monitor should be only from one manufacturer/principal.	Components like anaesthesia machine, vaporisers, ventilator should be only from one manufacturer/principal. All components like anesthesia machine, vaporizers, ventilator should be only from one manufacturer/ principal and the patient monitor should be from a reputed brand.	All components like anaesthesia machine, vaporisers and ventilator should be only from one manufacturer/principal.
8 xxiii 6			Additional Specifications: point 8: {xxiii (6)} Patient Monitor Accessories,spares and consumables:- (6) Monitor Mount on the wortkstation is to be included in the scope of supply.

BC 19 13/10/23

Chief Administrative Officer
Dr. B. Borooah Cancer Institute
Guwahati-16

तपन भट्टाचार्य / Tapan Bhattacharya
मुख्य प्रशासनिक अधिकारी / Chief Administrative Officer
डॉ. भुवनेश्वर बरुवा कैंसर संस्थान / Dr. B. Borooah Cancer Institute
टाटा स्मारक केंद्र / Tata Memorial Centre
परमाणु ऊर्जा विभाग, भारत सरकार का अनुदान प्राप्त संस्थान
A Unit of Dept. of Atomic Energy, Govt. of India
गुवाहाटी-781016, असम, भारत / Guwahati-781016, Assam, India