Project Sponsor:

Project Beneficiary:





MPESA FOUNDATION

KWALE COUNTY GOVERMENT

MPESA FOUNDATION HEALTH SECTOR SPONSORSHIP

SUPPLY OF MEDICAL EQUIPMENT'S AT MSAMBWENI COUNTY REFFERAL HOSPITAL

MSAMBWENI SUB-COUNTY, KWALE COUNTY

TENDER FOR SUPPLY OF MEDICAL EQUIPMENT'S TENDER REF: RFQ/MF/CP-EQ/03/24

PROJECT MANAGER



AUGUST, 2024

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SECTION 1: TENDER QUESTIONNAIRE

(Please fill in block letters.) Full names of Tenderer: Full address of Tenderer to which tender correspondence is to be sent (unless an agent has been appointed below): Telephone number (s) of Tenderer: E-mail Address of Tenderer: Name of Tenderer's representative to be contacted on matters of the tender during the tender period: Details of Tenderer's nominated agent (if any) to receive tender notices. This is essential if the Tenderer does not have his registered address in Kenya (name, address, telephone, telex):

Signature of Tenderer

SECTION 2: INVITATION TO TENDER

MPESA FOUNDATION HEALTH SECTOR SPONSORSHIP

REQUEST FOR QUOTATIONS (RFQ) FOR HEALTH CENTRE SUPPLY OF MEDICAL EQUIPMENT'S

To:	
From:	
	The Director,
	Msambweni Level V Hospital,
	P.O. Box 8,
	Msambweni,

RFO No: RFO/MF/CP-EQ/03/24

Kenya.

The <u>Director Mpesa Foundation</u> invites you to submit quotations for <u>Supply of Medical equipment's At Msambweni County Refferal</u> indicated in detail in "Table A. Schedule of Requirements and Specifications and attached BQs and drawings". The quotation shall follow the instructions and documents in this RFQ document and shall be in English Language. Bidders may obtain further information during office hours <u>0900 to 1600 hours</u>] at the address given below.

1.

Address to obtain the Tender.

a) Mailing Address: . Kwale County Website (www.kwalecountygov.com)

Or Public Procurement Information Portal (www.tenders.go.ke)

Tender Documents will be obtained by requesting from the following emailaddress: (www.kwalecountygov.com) or Public Procurement Information Portal (www.tenders.go.ke)

- 2. Quotations shall be submitted in accordance with the instructions in Part 1: Quotation Procedures and in a sealed envelope clearly indicating name and address of the Bidder, the quotation name and title and must reach the Procuring Entity at the address indicated below not later 19th August, 2024 at 11.00am. Electronic RFQs will NOT be permitted. Quotations can be delivered by registered mail, courier or hand delivery. Quotations can be delivered by registered mail, courier or hand delivery in the Tender box Located at the Kwale County Procurement Office located next to the County Treasury. at the Bidder's option. Late quotations shall be rejected.
- Clarifications once the tender has been received may be addressed to Tel +254 020 2531381 E-mail Address: info@plateauconsultants.com. This should be received by the Project Manager 3 Days Before Closure of RFQ.
- 4. Any resulting contract shall be subject to the terms and conditions detailed in Part 3: Contract.
- **5.** Please inform by email on the **E-mail Address: info@plateauconsultants.com** within <u>3 days</u> of receipt of this RFQ if you will be submitting a quotation.

Yours sincerely,

PART 1: INSTRUCTIONS TO BIDDERS

- 1. **Bidders are advised to read carefully** these instructions and the Conditions of Contract in **Part 3**: Contract, before preparing the quotation. The standard forms in this RFQ may be photocopied for completion but the Bidder is responsible for their accurate reproduction. The <u>term Bidder</u> shall mean the firm or person invited to submit a quotation. The <u>term Quotation</u> herein shall mean the quotation submitted as usually understood in public procurement.
- 2. Tender Documents will be obtained by requesting from the following email address
- 3. **Validity of Quotations**: The quotation will be held valid for <u>60</u> days from the date of submission.
- 4. **The Quotation shall consist of** completed Schedules 1&2, Tables and the Form of Quotation all indicated in Part 2 of this Request for Quotations and documents to evidence Eligibility and Conformity to Technical Specifications.
- 5. **Sealing and Marking of Quotations**: Quotations in one "one original" & "One Copy" should be sealed in a single envelope, clearly marked with the **Quotation Reference Number** in the RFQ, the Bidder's name and the name of the Procuring Entity. Envelopes should be sealed in such a manner that opening and resealing cannot be achieved undetected.
- 6. **Submission of Quotations:** Quotations, and any alternatives if allowed as per Item 11 below, should be submitted to the address below, on or before the date and time indicated in sub-item 4 below. Late quotations will be rejected.

Date of Submission (deadline): 19th August, 2024

Time of Submission (deadline): 11.00am

Electronic Bids will NOT be permitted.

- **6. Opening of Quotations**: Quotations will be opened publicly immediately after the closing date and time specified in item (6) above, by at least three appointed officials of the Beneficiary Entity in the presence of the Bidders' designated representatives who choose to attend at the Kwale County Procurement Office located next to the County Treasury. at the Bidder's option. Late quotations shall be rejected.
 - 1.
 - 2. **Bidder Eligibility:** Bidder must submit Documentary evidence to show his/her eligibility to be awarded a contract to cover each of the following:
 - (i) See suppliers' requirements attached

 The Bidder shall also complete attached forms to confirm eligibility and non-existence of a conflict of interest in relation to this procurement requirement by signing the attached Forms.
 - 3. **Invitation not transferable**: This invitation is not transferable to other firms or individuals not so invited.

- 4. **Goods Eligibility:** Bidder must submit as evidence documents to show the country of origin of any goods to be supplied or incorporated in the work or services
- 5. **Technical Specifications:** Documentary evidence to show that the goods meet the technical specifications.
- 6. **Alternative Quotations:** Bidders **are not permitted** to submit alternative quotations for alternative technical solutions. Only the alternatives, if any, of the Bidder with the winning quotation conforming to the basic technical requirements shall be considered by the Procuring Entity.
- 7. **Currency:** Quotations shall be priced in Kenya Shillings. Quotations in other currencies will be rejected.

& Evaluation of Quotations;

- a) Tenders submitted will be evaluated in three stages: Preliminary, technical and financial. Tenderers will proceed to technical stage only if they qualify in compliance with the preliminary evaluation.
- b) The criteria to be followed at technical evaluation stage is contained in evaluation process and bidders are urged to follow the format outlined therein which is critical in determining the responsiveness of the bids.
- c) To be eligible for financial evaluation bidders must pass technical evaluation stage.
- d) The financial committee will determine whether the financial proposals are complete i.e (whether the tenderer has quoted all the items of the corresponding technical proposal and correct any computational errors). The cost of any unpriced item shall be assumed to be included in other costs in the proposal. In all cases, the total price of the financial proposal as submitted shall prevail.
- **9. Award of contract**: Award of contract shall be by placement of a Letter of Acceptance in accordance with Part 3: Contract. Unsuccessful Bidders who responded will be notified of the accepted quotation, indicating the name and the amount of the accepted quotation.
- 10. **Right to Reject**: The Procuring Entity reserves the right to accept or reject any quotation or to cancel the quotation process and reject all quotations at any time prior to contract award.
 - i) Clarifying details that were not apparent or could not be finalized at the time of tendering
 - ii) Clarifications shall not change the substance of the Tender.
- 11. Cost of Tendering: The Tenderer shall bear all costs associated with the preparation and submission of its Tender. The Procuring Entity will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the tendering process.

PART 2: QUOTATION AND QUALIFICATION DOCUMENTS

<u>Instructions to Bidder</u>. Bidder must complete and submit as part of the Form of quotation.

- (i) FORM OF QUOTATION
- (ii) SCHEDULE OF REQUIREMENTS TABLE (See BQs Attached)

FORM OF OUOTATION [To be completed by Bidder]

	otation Addressed to (Procuring tity)
Dat	te of Quotation
Que	otation Reference Number:
Sub	pject of Quotation
1.	We have examined and have no reservations to the Request for Quotation document, and understand its full content and intent.
2.	In compliance with your request for quotations dated, referenced above, we offer to
	(Complete the works) to cover and conform to our pricing listed in the attached in Table i. Quotation Submission TABLE at a total price of Kenya Shillings (in words)
	Inclusive of VAT
	Inclusive of VIII
3.	We confirm that we are eligible to participate in public procurement and meet the eligibility criteria specified in Part 1: INSTRUCTIONS TO BIDDERS.
4.	We also confirm that the(works to be constructed) conform to the BQs and specifications attached and in conformity with technical specifications listed in PART 2: SCHEDULE OF REQUIREMENTS of this RFQ Document.
5.	We undertake to adhere by the Code of Ethical Conduct for Suppliers, Contractors and Service Providers, copy available from_(<i>specify website</i>) during the procurement process and the execution of any resulting contract.
6.	We confirm that the prices quoted are NON-FLUCTUATING (FIXED PRICES/RATES) for the duration of the validity period and performance of the contract and will not be subject to revision or variation.
7.	The validity period of our quotation is:days from the time and date of the submission deadline (number to be same as in the instructions to Bidders).
8.	We confirm we are not submitting any other Quotation as an individual or firm, and we are not participating in any other Quotation as a Joint Venture member or as a subcontractor.

- 9. We, along with any of our subcontractors, suppliers, Engineer, manufacturers, or service providers for any part of the contract, are not subject to, and not controlled by any entity or individual that is subject to a temporary suspension or a debarment imposed by the Public Procurement Regulatory Authority or any other entity of the Government of Kenya, or any international organization.
- 10. We hereby certify that we have taken steps to ensure that no person acting for us or on our behalf engages in any type of Fraud and Corruption.
- 11. We hereby certify and confirm that the Quotation is genuine, non-collusive and made with the intention of accepting the contract if awarded. To this effect we have signed the "Certificate of Independent Quotation Determination" attached below.
- 12. We, the Bidder, have completed fully and signed the **FORM FOR DISCLOSURE OF INTEREST** interest of the firm in the Procuring Entity, attached below.

The Delivery/Completion period offered is:	days from date of acceptance
of Quotation. The warranty period offered isweeks.	
Quotation Authorized by:	
Name and designation:	
Signature:	

i) SCHEDULE OF REQUIREMENTS TABLE (see also BQs ATTACHED)

(Procuring Entity will complete the list of items to be same as those attached as Schedule $1\ \&\ 2$).

Α	В	C	D	E
Item	Description of Goods/works/services	Quantity	Sub Total price	Total Price in Ksh
	(Procuring Entity to select one)		•	
1	Supply Of Medical Equipment – Schedule 1	1		
2	Supply Of Medical Equipment – Schedule 2	1		
3	Supply Of Electronic Goods- Schedule 3	1		
4	Supply Of Furniture - Schedule 4	1		
5				
6				
7				
8				
9				
10				
11				
12				
ETC.				
TOTA	AL PRICE IN KSH.			

Signature:	
And seal/Stamp	
Name:	-
Position:	
Authorized for and on behalf of (specify name of tenderer)	
Date	

ii) CERTIFICATE OF INDEPENDENT QUOTATION DETERMINATION

		[Name of Procuring Entity] for:
r Di	de m	[Name and number of +-+quotations] in response to the request [Name of Bidder] do hereby make the
		nade by:[Name of Bidder] do hereby make the statements that I certify to be true and complete in every respect:
		n behalf of [Name of Bidder] that:
		ve read and I understand the contents of this Certificate;
		derstand that the Bidder will be disqualified if this Certificate is found not to be true and
		rplete in every respect;
		a the authorized representative of the Bidder with authority to sign this Certificate, and to
		mit the quotation on behalf of the Bidder;
		the purposes of this Certificate and the quotation, I understand that the word "competitor"
		ll include any individual or organization, other than the Bidder, whether or not affiliated with
	a)	Bidder, who:
	a) b)	has been requested to submit a quotation in response to this request for quotations; could potentially submit a quotation in response to this request for quotations based on
	0)	their qualifications, abilities or experience;
		,,,,,
	The	Bidder discloses that [check one of the following, as applicable]:
	a)	The Bidder has arrived at the quotation independently from, and without consultation,
	,	communication, agreement or arrangement with, any competitor;
	b)	the Bidder has entered into consultations, communications, agreements or arrangements
		with one or more competitors regarding this request for quotations, and the Bidder
		discloses, in the attached document(s), complete details thereof, including the names of
		the competitors and the nature of, and reasons for, such consultations, communications,
	Inn	agreements or arrangements; articular, without limiting the generality of paragraphs (5)(a) or (5)(b) above, there has been
		consultation, communication, agreement or arrangement with any competitor regarding:
	a)	prices;
	b)	methods, factors or formulas used to calculate prices;
	c)	the intention or decision to submit, or not to submit, a quotation; or
	d)	the submission of a quotation which does not meet the specifications of the request for
		quotations; except as specifically disclosed pursuant to paragraph (5) (b) above;
		addition, there has been no consultation, communication, agreement or arrangement with
		competitor regarding the quality, quantity, specifications or delivery particulars of the works
		services to which this request for Bids relates, except as specifically authorized by the curing authority or as specifically disclosed pursuant to paragraph (5)(b) above;
		terms of the quotation have not been, and will not be, knowingly disclosed by the Bidder,
		ectly or indirectly, to any competitor, prior to the date and time of the official quotation
		ning, or of the awarding of the Contract, whichever comes first, unless otherwise required
		aw or as specifically disclosed pursuant to paragraph (5)(b) above.
	Nar	ne
	Titl	e
	— Dat	e

iii) SELF-DECLARATION FORM

	the Bidder (insert_name) submitting our Quotation in ect of Quotation No for
respe	ect of Quotation Nofor(insert quotation Title Description) for
	(insert Name of Procuring Entity)
	DECLARE AS FOLLOWS:
by o	We the Bidder including any entity or individual that directly or indirectly controls, is controlled or is under common control with us, and any subcontractors, suppliers, project managers, ultants, manufacturers, service providers, agents, individuals, or any other party involved or to be lived for any part of the processes of procurement and contract execution related to the above ation:
a)	have not engaged/will not engage in any corrupt or fraudulent practices in the processes of procurement and contract execution related to the above quotation as defined and/or described in the following:
	 i) the RFQ for the above Quotation; ii) Kenya's Public Procurement and Asset Disposal Act, 2015) and its attendant Regulations;
	iii) Kenya's Anti-Corruption and Economic Crimes Act, 2013; and
	iv) any such other Acts or Regulations of Government of Kenya;
b)	have not offered/will not offer any inducement to any member of the board, management, staff and/or employees and/or agents of(name of the procuring entity);
c)	have not engaged/will not engage in any collusive or corrosive practice with other BIDDERS participating in the subject quotation;
d)	have not been sanctioned or debarred by any entity from participation in public procurement proceedings of Kenya.
	That, what is deponed to herein above is true to the best of our knowledge, information and believe
Nam	ne of the Bidder:[insert complete name of Bidder signing the quotation]
	ne of the person duly authorized to sign the quotation on behalf of the Bidder:[insert complete name of person duly authorized to sign the quotation]
	e of the person signing the Quotation[insert complete title of the person signing the ation]
	tature of the person named above

EVALUATION AND QUALIFICATION CRITERIA

Suppliers Minimum Requirements

Preamble

The Mpesa Foundation Focuses on health, education, economic empowerment. Funded by Safaricom PLC it Has a Footprint in all the 47 Counties. - Health, Education, Empowerment, Emergency

Response.

The Foundation's purpose to transform lives is supported by its vision to transform lives through

partnering for impactful community investments.

Mpesa Foundation is financing Msambweni County Referral Hospital for **Supply of Medical Equipment's At Msambweni County Refferal.**

Plateau Consultants has been appointed by Mpesa Foundation as the Project Manager. The Supplier may bid in any of the following two categories:

1. MANDATORY REQUIREMENTS

No	Requirements
MR 1	Copy of Registration Certificate /Certificate of Incorporation.
MR 2	Pin Certificate
MR 3	Valid Tax Compliance Certificate
MR 4	Company Brochure
MR 5	Tender validity duration 60 days from the date of opening.
MR 6	Duly filled and signed and stamped Price Schedule.
MR 7	The delivery period within 14 days from the date of signing the Contract.
MR 8	All items in the schedule must be quoted to be considered responsive.
MR 9	A certificate of warranty for all the goods offered must be submitted. The warrant shall be signed against defective design, defective quality material supplied, manufacturing defects, poor workmanship etc.
MR 10	Indication of after-sales services to be provided and duration. (where application)
MR 11	Indication of OEM items/spares/materials or services that will be sourced locally from Kenya, (where applicable)
MR 12	Manufacturer's authorization (where applicable)
MR 13	Mandatory brochures specifying the Technical specifications of the components

NB: bidders who do not satisfy any of the above requirements shall be considered non-Responsive and their tenders will not be evaluated further.

2. TECHNICAL REQUIREMENTS

i. Evidence of Personnel Academic & Professional Qualifications

No	Requirements	Tenderer's response (PASS/FAIL)
TR 1	Compliance to Technical Specifications and requirements, delivered items MUST be Branded with the MPESA FOUNDATION LOGO	
TR 2	As a minimum, the equipment must meet stipulated Ministry of health Standards.	
TR 3	As a minimum, the equipment must meet descriptive Technical Specifications and must have the relevant Quality certificates/ Test Certificates and Warranty (Two (2) Years)	
TR 4	Proof that equipment supplier, is well established, has supplied similar equipment in the recent past and is committed to offer technical support when required technology should not be obsolete at the time of commissioning.	
TR 5	Bidders must attach a catalogue indicating the equipment they intend to supply and highlight the relevant pictures and tabulate a clause-by-clause description of the items against the specified requirements. Bidders are advised to strictly adhere to the outlined format in the Technical Schedule when making an offer; deviations will be deemed to be non-responsive. (include photos)	
TR 6	Indicate the relevant technical characteristics of your offer in an itemized manner as tabulated in the Technical Schedule.	
TR 7	The winning bidder must supply the brand that is highlighted in the submitted catalogue, failure to which will lead to rejection during inspection at delivery.	
TR 8	The equipment will be subjected to pre-delivery acceptance tests and approval by Project Manager	
TR 9	All items will be subjected to functional and performance test on delivery prior to acceptance and hand over to User.	
TR 10	Bidder should show financial capacity to supply products as per the Mpesa Foundation terms indicated in part 4 below.	
TR 11	Bidders must quote for all items indicated in each of the Technical and Financial Schedules to be considered responsive; Any partial quote will be considered to be non-responsive and will lead to disqualification.	
TR 12	The bidder must provide training and training certificates issued to the beneficiary personnel prior to completion certificate	

The bidder must meet the following Technical Specifications:

- All the goods supplied shall be new and genuine unused, of the latest design and supplied as specified.
- The delivery completion period shall be within two (2) weeks after the date of signing the Contract. Delivery must be for a complete schedule. Partial delivery shall not be accepted.
- All equipment shall be of the following characteristics:
- Tested to current Ministry of health Standards
- Supplied with test certificate/ Quality certificates where applicable
- Two-year warranty
- Tenderers shall provide catalogues and photos for each of the item quoted for.

3. FINANCIAL REQUIREMENTS

- Financial evaluation shall involve checking completeness and arithmetic errors of financial bid
- Presence of a duly filled signed and stamped Price Schedule.
- Financial evaluation shall be based on quoted price and subject to negotiations.
- All prices quoted must be included delivery to User/ Beneficiary Community Bidders must quote for all items in each Schedule to be considered responsive. Partial quote in each Schedule shall be considered to be non-responsive and shall lead to disqualification.
- The lowest evaluated price per schedule shall be recommended for award. Award can be based on One Schedule or more.

4. PAYMENT TERMS

- There will be No Early Payments or Advance Payments for this Delivery Works
- The bidder must provide training and training certificates issued to the beneficiary personnel
- All Payments will be made after Delivery, Commissioning and Certification by Mpesa Foundation as per the Terms of Engagement
- Payment Period will be as per the terms of Engagement with Mpesa Foundation.

NOTE:

- Only the suppliers who provide the requested details will be considered for further discussions.
- Contracting Authority reserves, at its sole discretion, the right to select or reject, either in totality or partially, any or all proposals made in the context of this RFQ. Any such decisions made will be final and no correspondence will be engaged in, other than for the purpose of informing the bidders of the outcome of the process.

5. CONFIDENTIAL BUSINESS QUESTIONNAIRE

You are requested to give the particulars indicated in Part 1 and either Part 2 (a), 2 (b) or 2(c) and (2d) whichever applies to your type of business.

You are advised that it is a serious offence to give false information on this Form.

Part 1 – General
Business Name
Location of business premises: Country/Town
Plot No
Postal Address Tel No
Nature of Business
Maximum value of business which you can handle at any time: Kenya Shillings
Name of your bankers
Branch
Part 2 (a) – Sole Proprietor
Your name in full
Nationality Country of Origin
Citizenship details

Part 2 (b) – Partnership

Give details of partners as follows:

	Name in fu	ll Nat	ionality	Citizenship Details	Shares
1.					
2.					
3.					
Part 2	R(c) – Registered Con	npany			
	e or Publicthe nominal and issue				
Nomi	nal Kshs				
	l Kshsdetails of all directors				
	Name in full	Nationality		Citizenship Details*	Shares
1.					
2.			••••		
3.					

^{*} Citizenship either by birth, nationalization or

6. BOQS – SCHEDULES OF EQUIPEMNT AND FURNITURE

SCHEDULE 1 : SUPPLY OF MEDICAL EQUIPMENT OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL

SCHEDULE 2 : SUPPLY OF MEDICAL EQUIPMENT OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL

SCHEDULE 3 : SUPPLY OF ELECTRONIC GOODS OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL

SCHEDULE 4 : SUPPLY OF FURNITURE OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL

SCOPE & TERMS OF REFERENCE MEDICAL EQUIPEMTS - MSAMBWENI

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SCOPE

- > Supply, installation as per specifications given above
- > Supplier shall bring with him all tools required for installation testing and commissioning of the medical equipment's above

TESTING

Testing to be done after installation at Msambweni County Referral Hospital

STANDARDS

Should have local service facility provider, the service provider should have necessary equipment recommended by manufacturer to carryout installation and preventive maintenance

GUARANTEE

Equipment supplied shall be guaranteed against any manufacturing defect or trouble-free performance for a period of 2 years for complete unit after commissioning.

During this guarantee period of 2 years servicing shall be carried out at free of cost as per manufacturer standard

ACCEPTANCE

Acceptance shall be based on the testing and performance.

DOCUMENTATION

- User/operation manual
- Maintenance manual
- Warranty document
- Delivery note

DELIVERY POINT

Msambweni Referral Hospital County Government of Kwale

Supplier is responsible for any transit damages and same shall be rectified/replaced free of charge.

MEDICAL EQUIPMENT SPECIFICATIONS

1. Specifications of resuscitaire

- Must have automatic, manual and baby (Servo) modes
- Skin temperature display can be converted from °C to °F by push of a button.
- Skin/Air temperature display is larger than other set temperature displays.
- A digital timer is standard, which signals when 1, 5 and 10 minutes have elapsed.
- A full panel of alarms provides safety and convenience, with both audible and visual indicators in the event of Probe Failure, Skin Temperature Low/High, Low Battery, Timer, Power and System Failure.
- The system comes with air sensor. This is added safety with exclusive feature of switching OFF the heater in case the AIR temperature goes above 39°C irrespective of what the skin temperature is at the time of event
- The system automatically starts heating from 40% in manual mode and the same can be changed through settings up to 100%. The system automatically converts from servo mode to manual mode in case of probe failure thus providing nonstop working of the unit.
- System is moveable, fitted with 4" high quality castors having brakes in front 2 castors.
- The spacious oval shape bed incorporates easy drop down/ fold down side panels for maximum access to the patient
- Maximum power requirement 220-240 volts 50-60 Hz 750 w
- Illumination >0.11 lumens/cm2 (100 ft. Candles)
- Set temperature range 34–38 °C (>37.0° override)
- Heater output0–100%, 10% increments
- Skin temperature display 18–43 °C
- Accuracy±0.2 °C (31 to 37° C)
- Wall supply pressure 40–75 psi (275–517 kPa)

- Cylinder pressure 2,900 psi max (19,994 kPa)
- Patient gas flow control range 0–15 LPM
- Patient gas adjustable 0–50 cm H2O (0–4.9 kPa)
- Patient gas supply internal preset limit 60 cm H2O (5.9 kPa)
- Auxiliary flow range 0–15 LPM
- Suction circuit adjustable 0–150 mmHg (0–20 kPa)
- Suction disposable collection container 40 ml
- Adjustable breath rate range 18–60 BPM (±10% of setting)
- Pressure (PEEP) 0–18 H2O (0–1.77 kPa)
- Gas bleed 5 LPM Max
- Precision blender (optional) 21–100% ±3% O2

2. Specifications of room heaters

- Electric quartz heater
- 400-1600 watts
- Adjustable thermostat
- High- quality Quartz tube
- Overheat protection
- 220-240V

3. Specifications of procedure trolley

- Material should be made of high-quality stainless steel
- Anti –corrosion and easy to clean
- Durable, noiseless and stable casters of 4*75mm universal casters (2 with brakes)
- Should have bright and smooth surface
- Platform of 2 layers or 3 layers surrounded with stainless guiderails for each layer and handrails
- Should be easy to assemble
- Safe loading capacity 180 kgs

4. Specifications of patient bed

Manual crank 1 pc.

5" covered castors. TPR tire no worn out after running 10 km. Anti-winding hard shell cover, united forming without bolts 4pcs

L –shaped foldable side rail (patent), bended tube, solid installing, 0 shaking, anti-pinch, ensure patients safety

PP bed ends with safe lock with 65mm horizontal corner bumper wheels at the outermost periphery of the bed, 1 set

PP bed platform with integrated mattress retainer at the both sides of the back and leg section, with a boarder of 33mm height, 1 set

IV pole, bearing 15kg, 4 hooks 1 set

IV pole prevision 4 pcs

Mobile plastic drainage hooks, 2 pcs

External size (L x W x H) 2130x1020x420-730mm

Safe working load 200kg

Back-rest adjustment 0-70°

Knee -rest adjustment 0-38°

5. Specifications of infant incubator

General Description

The unit should have a Microprocessor based servo-controlled temperature system with two control modes: Air mode and baby skin mode.

Humidity should be adjustable continuously. Should be fitted with audible and visual alarms for failure functions.

Technical specifications

- Cabinet; Should be fitted with a cabinet for 4 drawers and a RS232 connector, Oxygen inlet Should be made of Single wall hood with at least 4 operating windows and 2 iris ports
- Hood; the inclination of infant bed is adjustable, Triple protection for over temperature with separate cut off device, more safety
- Safety; 700~1060 hPa < 0.3m/s
- Ambient velocity; Set Temperature, air temperature, baby skin temperature, timer and heating power
- Control panel; should be well displayed by LED or its equivalent.
- The control panel should be under lock to prevent inadvertent changes of the setting
- Security; The control panel should be under lock to prevent inadvertent changes of the setting. Over temperature should be amendable in the front panel directly.
- Temperature control; Skin 32oC to 38oC, accuracy ≤0.5oC, Mattress temperature uniformity: <2oC, skin. Temperature sensor accuracy ± 0.3oC, warm up time: ≤45min
- Temperature control 670mm x 540mm
- Mattress dimensions Approximately 800 mm
- Distance from heater to mattress AC 220V-240V 50Hz ± 2 %

6. Specifications of Phototherapy unit

• Electrical requirement; 120VA

≥425 nm – 475nm

≥500µw/cm2

- Power supply;180 mm 240mm
- Wavelength; 0o-90o
- Light output; 2h ± 1 min
- Tilt able light unit
- LED type with adjustable frame.

7. Specifications of suction machine

General Description

It should be Manufactured in grey white ABS high-resistance material (RAL 9002), -provided with 4 Ø80mm wheels (1 of them antistatic, 2 of them with brakes).

It should have Long-life piston type, oil free, non-maintenance required Suction Pump.

With 2 polycarbonate collection jars (4 litres – scale up to 3500ml) each, with safety valve to prevent overfilling. The Collection jar should be supported according to EN 12218:1998.

Hydrophobic PTFE bacteria filter, guaranteeing over 99,95% particle retention and 99,99% bacterial challenge efficiency.

It should have an On/Off Switch.

Precise, continuous suction pressure-regulating Knob.

High Vacuum Gauge (0-100kPa / 0-760 mmHg) using a high-visibility display (Ø67mm).

3m PVC suction tube (Ø8mm inside – Ø13 mm outside).

3m electric cable housing

To be supplied with 100 pcs bacterial filters

Technical specifications

- Maximum pump flow 40L/Min
- Maximum Vacuum 86Kpa- 866m bar 650mmHg
- Noise Level<45 1.5dB (AS)/ 1 m
- Power 250W
- Voltage 200 240V Ac (50-60 Hz)
- Intensity 1.7A
- Product life 10,000 h
- Storage temperature -40°C 70°C
- Operating temperature 7°C 40°C
- Dimensions 960 x 430 x 340 mm
- Weight 23.4 Kg

8. Specifications of nebulizer machine

Item Code	Item Description	Nebulizer Machine
No.		

1. General Description

Piston compressor for aerosol therapy, designed for hospital use, with a comfortable handle and a large compartment to facilitate handling together with its accessories and medicines

Technical Specifications

2.1	Main Structure	
	Main Structure	
2.1.1	Compressor	dry pump no lubrication and / or maintenance
2.1.2	Standard power Absorbed	230 V-50 Hz
2.1.3	power	170 VA
2.1.3.1	Max pressure	2.5 bar 36 psi 250 Kpa
2.1.3.2	Operating pressure	1.1 bar
2.2	Free flow	14 L / min
2.3	Operational flow	5 L / min
2.4	Neb-rate with 4 ml of 0.9%	
	0.40 ml / min NaCl Solution	
2.5	Average mass aerodynamic	2.44
	μm (MMAD)diameter	
2.6	Respirable fraction (<5 μm)	> 80%
2.7	Operation	Continuous
2.8	Noise level (EN 13544-1	55 dB standard)
2.9	Weight	1.65 Kg
2.10	dimensions	140x120x220 mm

9. Specifications of a washing machine

Output: 2000W.

Voltage: AC 220-240V/50Hz.

Wash Capacity: 12Kgs.Spin Speed: 1400 RPM

Temperature Selection up to 90°C

A+++

Brushless Inverter Motor with 10-Year Warranty on Motor

Spa Care – Washes clothes with steam which kills allergens, and viruses up to 99.99%

Drum Clean

Pre Wash – for very dirty clothing

- Add Garment Allows clothes to be added mid cycle
- Speed Wash Reduces Washing time
- Delay Start Up to 24Hrs
- Power Out Auto Restart
- 15 Min Quick Wash
- 14 Programs
- Child Lock
- Self Diagnose
- IP Rating: IPX4
- Product Size (MM): 595x595x850
- Gross Weight / Net Weight: 78kgs / 73kgs
- 2 YEARS WARRANTY
- 10 YEARS WARRANTY ON COMPRESSOR

10. Specifications of Baby cot

Item Code		Item	Baby Cot/Crib
No.		Description	
3. Ge	neral Description		
	To be used after delivery. Must be mobile and easy to move around. The Castors should beantistatic with brakes on either sides.		
2	Specifications		
2.1	Structure	Made of epoxy coat	ed frame, with mattress
2.2	Crib	Preferably made of	transparent plastic to hold the baby
2.3	Approximate dimensions	Length 875 Width 52	25 with a good ground clearance
3	Warranty		
3.1	Equipment	Minimum of one yea	ar after commissioning on all parts.
3.2	Equipment System	Nil	

11. Specifications of a CPAP machine

Item Code		Item	CPAP MACHINE WITH AUTO MODE
No.		Description	
1. General De	•		
Features			
Gas mixin			
Humidifie	r Patient		
circuit Pu	se		
oximeter	Air		
compress	or		

2	Technical	Performance PEEP/CPAP type : buble
	Specification	•
		Pressure range 0- 10 cm H2O Gas mixing type : electronic
		Oxygen percentage /FiO2; 21 – 100%
		FLOW RATE 4 -9 Ltrs per minute Air
		compressor type: blower
		Power supply :Integrated
		Gas supply oxygen input range :25 -60 PSI
		Humidity 90% RH
		Warm up time :20 minutes at room temperature
		Gas temperature :37 – 40 degrees
		Pulse oximeter 1 -100% SPO2 BPM
		measurement : 25 – 240 bpm
		Electrical specification :240 VAC/50HzMax
		power:240W
		Over voltage /over current protection
_		
3	Warranty	
3.1	Equipment	Minimum of one year after commissioning on all parts.
3.2	Equipment System	Nil

12. Other items/ medical furniture/ appliances

Item No.	Description	Technical Specifications	
1	Laryngoscope	 With 3 blades The three blades to be of different sizes(100mm,130mm,155mm) Made of Autoclavable material(all stainless steel) Spare bulb 2No Dry cell battery, to be provided 	
2	Water Dispensers	 Hot, Normal & Cold water - Compressor Cooling with fresh cabinet Three push taps White/ silver/Black Colour Silver color sprout, drip tray & cover 	
3	Tables	 4 ft x 3 ft in size Wooden with a waterproof Formica With metallic legs With a chest of 3 drawers, the Top drawer been lockable 	
4	Normal Chairs	 The frame is made of steel The platform made of artificial leather with arm rest 	
5	Executive chairs	 The frame should be made of stainless steel Soft sponge with artificial leather on the platform With rotating qualities With arm rests 	

13. Specifications of Drip stand

General Description

It should be made of stainless steel with at least 2 hooks. Should be on lockable castors for ease of movement and an adjustable height.

Technical specifications

- Structure; preferably made of stainless steel or its equivalent
- Movement; It should be mobile with four castors with brakes
- Height; adjustable with a locking knob

14. Specifications of a baby weighing scale

Item Code No.		Item Description	Infant weighing scale
1. General Description		Electronic weigh scale	2.
2 Techni specifi	cation [S	Electronic Infant weig Display LED Should have zero calil Max Capacity 20kgs Minimum measuring capacity 25gms Readability 5gms Construction should r	oration not alloy baby to
3 Warra	nty		
3.1 Equipr	ment	Minimum of one year after commissioning on all parts.	
3.2 Equipr	nent System	Nil	

15. Specifications of Patient monitor.

Item Code		Item Description	Patient Monitor	
No.				

1. General Description

The Patient monitor is to be used in the nursing stations, wards and the ICU. It should be electric with a backup battery. It should perform the following parameters: ECG; RESP; NIBP; SPO2; CO2, TEMPERATURE, IBP.

2	Technical Specifications	
2.1	Performance	
2.1.1	ECG	
		3 lead ECG input; 5 lead ECG input;12 leads ECG input
2.1.2	Lead selection	I,II,III.; I,II,III, aVR, aVL, aVF, V.; I,II,III, aVR, aVL, aVF, V1-V6 2.1.3 Gain
	2.5mm/mV(0.25), 5 mm/mV(x0	0.5), 10 mm/mV(x1), 20 mm/mV(x2), 40mm/mV(x4), auto
2.1.4	CMRR	Monitor mode≥105dB; Surgery Mode≥105dB; Diagnostc Mode≥ 90dB Monitor Mode 0.5-40Hz; Surgery mode 1-25Hz; Diagnostic Mode 0.05-
2.1.5	Frequency response	150Hz ≥5.0 Mohm
2.1.6	Input impedance	± 10.0 mV
2.1.7	ECG signal range	± 500mV
2.1.8	Electrode offset potential	<10 μΑ
2.1.9	Patient leakage current	1 mV ± 5%
2.1.10	Standardization Signal	<5s after defibrillation. (Mon or Surg Mode)\
2.1.11	Baseline recovery	Every electrode (exclusive of RL)
2.1.12	Indication of electrode	

	Separation	
2.1.3.2		
2.2		Method: Thoracic impedance; Lead selection from: I(RA-LA) or II(Ra-
	RESP	LL); Default:I
2 2 4	Gain	X0.25, x1, x2 x4
2.2.1	Bandwidth	0.25 Hz to 2.0Hz (-3dB) 6.25mm/s, 12.5mm/s, 25mm/s
2.2.3	Sweep speed	0-150 rpm
2.2.4	Measurement Range	1 rpm
2.2.5	Resolution	± 2rpm or ± 2%, whichever is greater
2.2.6 2.2.7	Accuracy Delay of Apnea Alarm	10s, 15s, 20s, 25s, 30s, 35s, 40s, 45s, 50s, 55s, 60s
2.2.7	Delay of Aprica Alaitii	
2.3	NIBP	Automatic oscillometry
2.3.1	Mode of measurement	Adult: SYS 30-270 mmHg; DIA 10-220mmHg: MAP 20-235mmHg
2.3.2	Range of measurement	Child: SYS 30-235 mmHg: DIA 10-220mmHg; MAP 20-225mmHg
		Neonate: SYS 30-135mmHg: DIA 10-000mmHg; MAP 20-125mmHg
		0-300mmHg
		1 mmHg
2.3.3	Cuff pressure range Resolution	Static: ± 2% or 3mmHg, whichever is greater; Clinical ± 5mmHg average
2.3.4 2.3.5	Pressure accuracy	error; standard deviation:≤8 mmHg mmHg, kPa
2.3.3	r ressure decuracy	Manual, Auto, STAT
2.3.6	Unit	1,2,3,4,5,10,15,30,60,90 minutes; 2,4,8, 12 hrs
2.3.7	Measurement mode	
2.3.8	Intervals for Auto	Keep 5 minutes at 5 seconds interval
2.3.9	Measurements STAT mode cycle time	Hardware and software double protections 40-120 bpm
2.3.10	Overpressure protection	40 120 0pm
2.3.11	Pulse rate range	
		0-100%
2.4	SPO ₂ (Digital technic) Measurement Range	1% At 70-100%, ±2% (Adult); at 0-69%, ±2%, Unspecified
2.4.1	Resolution	At 70-100%, 12% (Addit), at 0-05%, 12%, Offspecified
2.4.2	Accuracy	
2.4.3		20-300 bpm
2.5	PR	1 bpm
2.5 2.5.1	Measurement range Resolution	± 1% or ± 1 bpm, whichever is greater
2.5.2	Accuracy	
2.5.3		8
2.6	TEMP (Celcius) Max channel	Thermal resistance mode $0.0^{\circ}\text{C} - 50^{\circ}\text{C}$
2.6.1	Measurement mode	±0.1 ^o C (exclusive of probe)
2.6.2	Measurement range	±0.1°C
2.6.3	Accuracy	
2.6.4	Resolution	
2.6.5		8 Directly invasive pressure measurement
2.7	IBP (mmHg,kPa cmH2O) Max channel	Directly invasive pressure measurement 5μV/V/mmHG, ± 2%
2.7.1	Measurement mode	300 to 3000Ω
2.7.2	Sensitivity of transducer	-50 to +350 mmHg
2.7.3	Impedance of transducer	1mmHg
2.7.4 2.7.5	Measurement range Resolution	Static: ±1mmHg or 2% whichever is greater (exclusive of transducer); Dynamic ±4mmHg or 4% whichever is greater
1,.5		= 1

2.7.6	Accuracy	Arterial pressure (ART), Pulmonary Artery Pressure (PA), Left Atrium Pressure (LAP), Right Atrium Pressure (RAP), Central Venous Pressure(CVP), Intracranial
	Transducer site	Pressure (ICP), P1/P2
2.7.8		ART: 0-+350mmHg, PA: -10 - 120mmHg,CVP/RAP/LAP/ICP:-10 - +40mmHg; P1/P2: -50 +350mmHg
	Selection of measurement	
2.7.9	range	
		Infrared spectrum
2.8	EtCO2 (Sidestream)	0.0 - 13.1% (0-99.6 mmHg)
2.8.1	Measure Method	1mmHg
2.8.2	Measurement Range	%, mmHg, kPa
2.8.3	Resolution	0% - 4.9% ± 0.3%(±2mmHg); 5% - 13.1% < ± 10% of reading
2.8.4	Unit	
2.8.5	Accuracy	3-150 rpm
2.8.6	Measurement range of awRR Calibration	Offset calibration: Auto, Manual, Gain calibration
2.8.7		
3	Warranty and Quality	
3.	Warranty	
3.11	Equipment Minim	um of two years after commissioning on all parts.
3.12	Equipment System	,
3.2	Quality	
_	• •	
3.21	RequirementsISO	
	Certificati	

16. Specifications of Neonatal Oxygen flowmeter

- Gas Type: Oxygen (O2)
- Fitting Types: 1/8" NPTF, 1/4" NPTF, 1/4" MNPT, Chemetron Quick Connect, DISS Female Hand Tight, DISS Female Hex Nut, DISS Male, Puritan-Bennett Quick Connect
- Increments: Starts in increments of .5 from 0.5 to 5 LPM, then goes to increments of 1 from 5 to 15 LPM
- Calibration: 50 PSI
- Style: Thorpe Chrome-plated Brass Body
- Outlet: DISS 1240

17. Specifications of Baby measuring mat (Infantometer)

- DUAL SCALE with readings in cm and inches
- EASY TO READ scale
- FOLDABLE for easy storage and transport
- PVC MATERIAL Easy readable, washable, lightweight non-stretch, non-shrink, plastic.

18. Specifications of digital Flex thermometer (Contact)

- Fast 10 seconds measurement (Rectal: approx. 10 secs, Oral: approx. 20 secs, Armpit: approx. 25 secs.)
- Battery life should be approximately 2 years
- Flexible tip for maximum comfort during measurement
- Water resistant
- Memory function recalls last reading
- Temperature can be displayed in Celsius and Fahrenheit
- Measurement method is actual and non predictive
- Beeper guided operation
- Weight approximately 12g (including battery)
- External dimensions 19.4(w) x 132.5(l) x 10.0(d) mm
- Easy to use placement of the ON/OFF button
- Easy to read display
- Protective case included
- 15 language instruction manual

19. Specifications of Handheld Pulse Oximeter

- FDA Approved
- LCD display
- RTC (Real Time Clock) display
- Backlight control and automatic power-off function for power saving
- SpO2 and Pulse rate measurement
- Display numeric and waveform of SpO2 simultaneously
- Long battery life up to 48 hours on 4 "AA" or 36 hours on Ni-MH rechargeable batteries
- Powerful data storage capacity
- Data can be transferred to PC for storage, review and printing
- The latest 10 minutes trend graph and table of SpO2 and Pulse Rate can be reviewed in the screen
- Audible and visible alarm capability
- Pitch Tone

20. Specifications of Ambubag (Infant)

- Neonate with neonate pressure limiting valve
- Made of silicone rubber, 100% latex free

- Autoclavable device
- With infant and neonatal masks

21. Specifications of a Baby warmer

Physical Characteristics specifications

- 1. The unit should be made of mild steel tubular structure pretreated and powder coated.
- 2. Heater Rotation ±90° to the side to facilitate X-ray procedures.
- 3. The heater should automatically shuts off when in this position.
- 4. Bed Tilt should be ±15° Trendelenburg and Reverse Trendelenburg, continuous tilt
- 5. Mattress density should be approx. 21-25 kg/m3 and removable, washable, water proof cover
- 6. Should have plastic moulded storage drawers under baby's bed 2-3 in number.

System Control specifications

- 1. Should have microprocessor based heater control and manual modes of operation
- 2. Should have user friendly touch sensitive control panel with large easy to read LED displays for actual (patient and air temperature) and set temperatures.
- 3. LED indicator for selected mode.
- 4. Should have Quartz Infrared Heater with parabolic reflector for uniform heat Radiation.
- 5. The heater unit should be protected by a suitable grill.
- 6. The heater unit should be swiveling type and should be swiveled effortlessly.
- 7. The probes should be detachable type.
- 8. Should have memory back up to retrieve set data against power failure.
- 9. Should have calibration free temperature sensors.
- 10. Should have alarms with visual indicators for the following
- i. Temp high
- ii. Temp low
- iii. Probe failure
- iv. Power failure
- v. Heater failure
- 11. The heater should automatically cut off at 38 degree Celsius irrespective of the set parameters.
- 12. Should have an examination light with ON/OFF switch.
- 13. Should work with input 200 to 240Vac 50 Hz supply.
- 14. Should have 0-650 W heater output.
- 15. Heater output should be adjustable from 0 100% in 5% increments
- 16. servo Control should be between 30 38°C in increments of 0.1°C
- 17. Manual Mode should Indicate manual mode heat selection range from: 0-100% in 5% increments
- 18. Temperature Measurement Accuracy specification: ±0.3°C @ 30°C to 40°C
- 19. Temperature Display Resolution specification: ±0.1°C
- 20. Temperature Probe Accuracy specification: ±0.1°C @ 30°C to 42°C
- 21. Operating Temperature Range: +18 to +30°C
- 22. Humidity range: 30 to 95% RH

Regulatory Compliance specification

- 1. 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./test report from ETDC.
- 2. Copy of the certificate / test report shall be produced along with the technical bid.

Warranty specification

Should have One year on parts and services

22. Specifications of crash cart

- Made of high-strength ABS material
- One-piece ABS plastic top board with raised-edge design, covered transparent soft plastic glass.
- With five drawers: two small size, two middle size and one big size, each inner with partitions which can be organized freely
- One central lock or disposable seal for all drawers
- With transfusion hooks on top and medical equipment holding board
- ABS Medical Crash Cart with CPR Board for Patient with acute stroke
- Pull-out silding typed writing shelf makes efficiency of space application
- Four luxurious noiseless casters, two with brakes

23. Specifications of a Radiograph Viewer

Light frequency 50 KHz

Thickness Approx. 4.5cm Input voltage AC10O-250V Brightness 4000 lux LED light source 50.000 hours

Wall mounted

24. Specifications of blood gas analyzer

- 1. It should measure Blood Gas (full parameters) in its addition to measure Electrolytes like Na+, K+, Cl-, pH, pO2,pCO2. and Haematocrit.
- 2. Calculated parameters: TCO2, HCO3, Base Excess A-aDO2, Buffer Base etc.
- 3. Should display all results in print out.
- 4. Should have input parameters of patient Temperature, Hemoglobin FIO2, patient ID Etc.
- 5 Should have a sample temperature control of 37 degree centigrade.
- 6. It should have inbuilt printer.
- 7. Analysis time should not be more than 90 seconds.
- 8. System should be based on liquid / gas calibration technology.
- 9. System should not be a cartridge based system i.e. electrodes should not be in the cartridge system.
- 10. Should work on whole blood and should have syringe and capillary sampling.
- 11. Should be with numeric keypad, graphic / LCD display, and inbuilt printer and RS 232 port.
- 12. Analyzer with memory of storing patient data/result minimum 250 or more.
- 13. System should be supplied complete with all standard accessories, electrodes & start up kits.
- 14. Onboard life of reagents should not be less than one month.
- 15. Power input: 220 VAC + 10%, 50 Hz and a suitable one hr. back up UPS should be supplied along with analyzer. There should be storage facility of data in case of power failure.
- 16. Maintenance free electrode and the unit should be upgradeability for auto quality control.
- 17. System should be ISI /CE marked or US FDA approved.
- 18. Should submit certificate of relevant of IEC safety standards.
- 19. Any other parts except reagents to be replaced free of cost during warranty period.

25. Specifications of Oxygen Blender

- Safe, accurate and stable, especially for newborns and premature infants, providing safe and reliable oxygen
- Flow: 0 LPM-1.0 LPM, 0 LPM-10 LPM, 0 LPM-18 LPM
- Oxygen concentration adjustment: 21% to 100%; Accuracy: <±5%
- Pressure difference: when it is over 0.1MPa, alarm goes off
- Input gas pressure: 0.3MPa~0.4MPa

26. Specifications of Pedestal Bins

• Capacity (L) 30

Colour
 Yellow,Red,Black

Dimensions (mm)
 428 (L) x 402 (W) x 436(H)

• With foot pedal to enable non-contact operation.

27. Specifications of Syringe pump

- Easy Observation: Large Alarm light, visible at 5 meters away
- Easy Carry: Compact design with handle in light weight.
- Easy Operation: friendly keypad, convenient to load syringe
- with only one hand.
- Long Battery Performance: suitable for using in emergency
- and patient transferring.
- High Protection Level: IP24, support cleanness with water.
- High Accuracy: achieved within ±2%.
- Multi Function: DPS, Fast start, Standby.
- Multi-Interface: RS232; WiFi connection; Ambulance
- supporting, etc.
- Multi language supporting.
- Advanced Docking Station: available for integrated power

28. Specifications of Infusion pump

Automatic calculation of third parameter when user enters other two parameters (volume, time, and flow rate). Minimum guaranteed flow rate range of 1-1500 mL/hr in either 0.1 or 1 mL/hr increments.

Keep Vein Open (KVO) rate of 1-5 mL/hr.

The accuracy of the flow rate should be 5% or better.

Robust design allow use in demanding environments, resistant against hospital-grade cleaning solutions, fluid proof.

Capable of being mounted on mobile pole/(roll) stand, bed rail and wall-mounted rail.

Open system, compatible with wide range brands of giving sets. Unit is to be calibrated to the characteristics of a specific brand infusion set through DIP switches prior to using the unit.

Designed for frequent and easy dismount and disinfection with hospital-grade products

Built in battery depending on the model either a lithium ion or a lithium metal hydride.

Battery life lasts at least 4 hours at 25mL/hr flow rate.

Automatic switch from mains to battery during power failure.

Auto-off when not in use.

Power requirements: 240 Volts – 50 Hz (110 Volts – 60 Hz available on request, indicate when ordering).

DISPLAY FEATURES.

An integrated display indicating following parameters/information:

- Alarms.
- Pumping status.
- Volume infused.
- Volume limit/Volume To Be Infused (VTBI).

ALARMS AND SAFETY FEATURES

Alarms are audible and visual.

Ability to silence audio alarms for maximum of 2 minutes.

The following alarms are included:

- Air-in-line alarm.
- Down-stream occlusion alarm.
- Open door alarm.
- Infusion complete notification.
- Low/depleted battery alarm.
- Incorrectly loaded set alarm.
- The unit should be protected against uncontrolled gravity flow, a so-called free-flow protection.
- The unit is equipped with a "control lock-out" feature, preventing tampering by patients or visitors with the controls of the unit. (depending on the supplied model).

WARRANTY

Two years.

ENVIRONMENTAL CONDITIONS

- Operating conditions: 10°C 30°C / 30% 75% RH.
- Storage conditions: -20°C 55°C / 20% 90% RH.
- Atmospheric pressure: 700 ~ 1060 hPa.
- Ingress protection rating: IPX3.

29. Specifications of Drier

- Brushless Inverter Motor
- Heat Pump Technology Most gentle on clothes
- Drum remains at high temperature after cycle for sterilization
- Cheapest to run save up to 50% of energy
- Easy installation Plug & Play
- No vent pipe install anywhere
- Eco Friendly, no humidity is let out
- 16 Programs
- Rated power 2000W
- Self Diagnosis
- Water Tank Indicator
- Drum interior light
- End of Cycle Buzzer
- Delay Function
- Child Lock

30. Specifications of Linen Trolley

- Trolley made of stainless steel.
- Size: 950 × 500 × 900 mm.
- 3 S.S. shelves with guard rails.
- Supplied with 1 bag for dirty linen.

• 4 swivel castors.

31. Specification for Laundry Baskets

- Ample Capacity: With a spacious design, this laundry basket provides room for all your laundry needs.
- Durable Construction: Made from high-quality plastic, it's built to withstand the rigors of everyday use.
- Easy-to-Carry Handles: The integrated handles make it convenient to transport laundry from room to room.
- Color Variety: Choose from a range of vibrant colors, including Blue, Pink, Purple, Green, White, and Silver, to match your style.
- Open Design: The open-top design allows for efficient ventilation, helping to keep your laundry fresh.

32. Specifications for Tapped Electric Can

- Electric type
- 10L
- With faucet/tap

33. Specifications for Fridge for EBM

- 24/7 automatic temperature data logging
- Controller and alarm battery back up and door open alarm
- Power failure alarm
- High temperature alarm
- Low temperature alarm
- Minimum/maximum temperature recording and display
- Off cycle auto defrost
- Fan assisted cooling
- Second temperature probe
- Environmentally friendly refrigerant
- Ammonia free
- Door lock
- Real time temperature display
- Internal light
- Optional micro SD card for transferring temperature data to your computer
- FREE 1 year parts and labour warranty
- Capacity 150L

34. Specifications of Crock shoes

Upper Water resistant micro fiber

Lining Soft sandwish mesh

Insock Anti-static breathable EVA insock

Outsole PU injection

Tested By UK Intertek lab (Approved body:0362)

Toe Steel toe cap 200 joules

Penetration Non steel plate

35. Specifications of Wall clocks

- Modern wall clock with extra narrow frame
- Large, easy-to-read dial
- Flat design

36. Speciications of Micro-wave

- Output: 800WCapacity: 25 Litres
- Voltage: AC 230-240V/50Hz
- Flat Bed:
 - o Wider cooking area for different shapes and sizes of trays
 - Easy to clean
 - No worry of glass turn table breaking
- Touch Control
- 8 Auto Cooking Menus
- 5 Power Levels
- Multi Stage Cooking Can set 2 different functions to run continously
- Speed & Weight Defrost Function
- Express Cooking
- Digital clock, Time & Display
- Child Lock
- Durable Glass Door
- Outside Handle Door Opening
- With grill
- With digital clock

37. Specifications for Plastic Bowls

- Heavy duty plastic
- Different bright colours

38. Specifications for Plastic Cups

- Heavy duty plastic
- Different bright colours
- Graduated

39. Specifications for Decontamination bucket

- Should have a lid
- 17L to 20L
- Should be transparent or translucent for easier inspection of liquid level

40. Specifications for Drug fridge

- Stainless steel construction
- Digital temperature display
- High temperature alarm
- Low temperature alarm
- Door open alarm
- Door lock
- Fan assisted cooling

- Internal LED light
- Access port
- Remote alarm contacts
- Free manufacturers' calibration certificate
- 2 year UK parts and labour warranty
- Configuration Under Counter
- Capacity (Litres) 150
- Height x Width x Depth 835mm x 600mm x 600mm
- Shelves 2
- Temperature Range +2°C to +8°C
- Door Type Solid
- Lock Type Key lock with 2 keys provided
- Temperature Display
- High/Low Temperature Alarm
- Door Open Alarm
- Auto Defrost
- Access Port
- Remote Alarm Contacts

	FOURDING OF THE EVALUATE MEMBRADH AND THE ATAMA PROFESSION AS THE ATAMA PROFES								
	EQUIPPING	EQUIPPING OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL							
	SCHEDULE 1	E 1 SUPPLY OF MEDICAL EQUIPMENT OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL							
		QUANTITY	UNIT PRICE ESTIMATE	TOTAL	MODEL				
A	TRIAGE AREA								
1	Oxygen flowmeter infant	1		-	2LPM				
2	Baby weighing scale	1		-	Baby				
	Measuring mat(Infantometer)	1		-	100CM (Foldable)				
4	Laryngoscope	1		-	Full Set (LED bulb)				
5	Digital thermometers(contact)	2		-	FLEX				
6	Handheld pulse oximeter	1		-	With infant and neonatal probe				
	Ambubag(infant)	2		-	With term and pre-term masks				
	Suction machine	1		-	7A-23D (Double jar,Electrical)				
9	PEDASTAL BINS	3		-	30L(PLASTIC) Yellow, Black and Red				
	NICU			-					
10	Suction machine	1		-	7A-23D				
11	Laryngoscope	1		-	Full Set (LED bulb)				
12	Handheld pulse oximeter	5		-	With infant and neonatal probe				
13	Nebulizer	1		-	Electric compressor				
14	Radiograph viewer	1		-	LED Large in size				
15	Digital thermometers(contact)	2		-	Flex (Contact) Digital				
16	PEDASTAL BINS	3		-	30L(PLASTIC) Yellow, Black and Red				
17	Oxygen flowmeter infant	1		-	2LPM				
	Drip stands	4		-	With Castors and adjusting knob				
19	Ambubag (infant)	2		-	With term and pre-term masks				
	Procedure trolley	1		-	Mechanical (Stainless aasteel) 2 shelves				
				-					
	HDU			-					
21	Suction machine	1		-	7A-23D				
22	Laryngoscope	1		-	Full Set (LED bulb)				
	Dripstands	3		-	With Castors and adjusting knob				
24	Handheld pulse oximeter	6		-	Edan(includes probes)				
25	Oxygen flowmeter infant	1		-	2LPM				
26	Ambubag(infant)	2		-	With term and pre-term masks				
27	PEDASTAL BINS	3		-	30L(PLASTIC) Yellow, Black and Red				
28	Procedure trolly	1		-	Stainless steel				
				-					
	NURSERY 01			-					
29	BABY COTS	6		-	Stainless steel(BC654)				
30	ROOM HEATER	1		-	Von (1600W)				
31	Medicine TROLLEY	1			Mechanica (stainless steel)				
	Oxygen flowmeter infant	1		-	2LPM				

	EQUIPPING OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL							
	EQUIPPING	G OF THE EXPANDED NEWBORN	N AND THE STANDARDISED NBI	J CARE AT MSAMBWENI COU	NIY REFERRAL HUSPITAL			
	SCHEDULE 1	SUPPLY OF MEDICAL E	QUIPMENT OF THE EXPANDED	NEWBORN AND THE STANDA	RDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL			
		QUANTITY	UNIT PRICE ESTIMATE	TOTAL	MODEL			
33	PEDESTAL BINS	3		-	30L(PLASTIC) Yellow, Black and Red			
				-				
	NURSERY 02			-				
34	Oxygen flowmeter Infant	1		-	10LPM			
35	Procedure TROLLEY	1		-	Mechanica (stainless steel)			
36	BABY COTS	6		-	Stainless steel(BC654)			
37	ROOM HEATER	1		-	Von (1600W)			
38	PEDESTAL BINS	3		-	30L(PLASTIC) Yellow, Black and Red			
				-				
	LAUNDRY			-				
40	Linen trolly	1		-	Mechanica (stainless steel) with castors			
				-				
	KANGAROO MOTHERS			-				
41	SINGLE CRANK BEDS	8		-	Mechanical(stainless steel)			
42	DECONTAMINATION BUCKETS	4		-	20L transparent or translucent			
43	PEDASTAL BINS	3		-	30L(PLASTIC) Yellow, Black and Red			
44	FRIDGE FOR EBM	1		-	Labcold			
				-				
	POSTNATAL			-				
45	PEDESTAL BINS	3		-	30L(PLASTIC) Yellow, Black and Red			
46	Croc shoes	50		-	Plastic			
				-				
	SLUICE ROOM			-				
47	DECONTAMINATION BUCKETS	4		-	20L transparent or translucent			
				-				
	PHARMACY			-				
48	DRUG FRIDGE	1		-	Labcold			
		TOTAL						

	EQUIPPING OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL						
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	SCHEDULE 1	SUPPLY OF MEDICAL EQUIPMENT OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL					
		QUANTITY	UNIT PRICE ESTIMATE	TOTAL	MODEL		
А	TRIAGE AREA						
1	Baby warmer	1		-	With examination light, heaters and baby mat.		
2	Crash cart	1		-	With lockable shelves and on casters.		
	NICU			-			
10	Baby warmer	1		•	With examination light, heaters and baby mat.		
11	CPAP	1		-	Full Set (LED bulb)		
12	Infant incubator	3	3	-	With humidifier,Temp regulator F degC, heaters,drawers and a canopy		
13	Blood gas analyzer	1		-	10 parameters (Lactate, calcium,pH,PO2,Pco2,Hct,Cl,Na,K,GIU,Anion Gap+J11:K11		
14	Oxygen blender	2	2	-	Flow 0-30 LPM, O2 Concentration 21% and 100%, with double output port and alarm system		
15	Phototherapy lights	2		-	Adjustable frame (LED)		
16	Patient monitor	1		-	With NIBP(neonatal cuff), SPo2,Temp,ECG Probes on stand with castors		
17	Syringe pump	2		-	Automatic syringe recognition and automatic infusion rate calculation		
18	Infusion pump	2		-	High accuracy and with 6 infusion modes		
				-			
	HDU			-			
19	Baby warmer	1		-	With examination light, heaters and baby mat.		
20	Syringe pump	2	2	-	Automatic syringe recognition and automatic infusion rate calculation		
	Infusion pump	2	2		High accuracy and with 6 infusion modes		
	Oxygen blender	2	2	-	Flow 0-30 LPM, O2 Concentration 21% and 100%, with double output port and alarm system		
	Phototherapy lights	2	2	-	Adjustable frame (LED)		
24	Infant incubator	3	3	-	With humidifier,Temp regulator F degC, heaters,drawers and a canopy		
				-			
	NURSERY 01			-			
	Baby warmer	1		-	With examination light, heaters and baby mat.		
26	Oxygen blender	2	2	-	Flow 0-30 LPM, O2 Concentration 21% and 100%, with double output port and alarm system		
				-			
	NURSERY 02			-			
	Baby warmer	1		-	With examination light, heaters and baby mat.		
28	Oxygen blender	2	2	-	Flow 0-30 LPM, O2 Concentration 21% and 100%, with double output port and alarm system		
		TOTAL					
		TOTAL		-			

	EQUIPPING OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL						
SCHEDULE 1		SUPPLY OF MEDICAL EQUIPMENT OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL					
	QUANTITY	UNIT PRICE ESTIMATE	TOTAL	MODEL			
A LAUNDRY							
1 Washing machine		1	-	12KG			
2 Drier		1	-	Dryer air vente(DV80TA020AX)			
3 Laundry baskets		3	=	Meshed(plastic)			
4 Tapped can (Water um)				10 Liters Electric			
POSTNATAL			-				
4 Wall clocks		3	=	QUARTZ with AA Batteries			
			-				
STAFF LOUNGE			-				
19 Microwave		1	-	25L With grill			
20 Plastic bowls		50	-	Heavy duty			
21 Plastic cups		50	-	Heavy duty (Graduated)			
			-				
	TOTAL		-				

EQUIPPING OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL							
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SCHEDULE 2	SUPPLY OF FURNITURE OF THE EXPANDED NEWBORN AND THE STANDARDISED NBU CARE AT MSAMBWENI COUNTY REFERRAL HOSPITAL						
	QUANTITY	UNIT PRICE ESTIMATE	TOTAL	MODEL			
TRIAGE AREA							
NURSE DRAWER TABLE		1	-	with drawers			
NURSE CHAIRS		4	-	3 position tilt lock (Easy to clean durable office chair)			
			-				
NICU			-				
NURSE DESK		1	-	with drawers			
NURSE CHAIR		2	-	3 position tilt lock (Easy to clean durable office chair)			
Patient chair		6	-	Heavy duty thermoplastic			
			-				
HDU			-				
NURSE DESK		1	-	With drawers			
NURSE CHAIR		2	-	3 position tilt lock (Easy to clean durable office chair)			
Patient chair		6	-	Heavy duty thermoplastic			
			-				
NURSERY 01			-				
NURSE CHAIR		2	-	3 position tilt lock (Easy to clean durable office chair)			
NURSE DESK		1	-	With drawers			
Patient chair		6	-	Heavy duty thermoplastic			
			-				
NURSERY 02			-				
NURSE CHAIR		2	-	3 position tilt lock (Easy to clean durable office chair)			
NURSE DESK		1	-	With drawers			
Patient chair		6	-	Heavy duty thermoplastic			
			-				
			-				
KANGAROO MOTHERS			-				
NURSE CHAIR		2	-	3 position tilt lock (Easy to clean durable office chair)			
NURSE DRAWER TABLE		1	-	With drawers			
Patient chair		6	-	Heavy duty thermoplastic			
			-	,,			