

MAHATMA GANDHI MISSION TRUST MGM INSTITUTE OF HEALTH SCIENCES, CENTRAL PURCHASE DEPARTMENT (CPD)

Plot 1 & 2, Sector -1 Kamothe, Navi Mumbai 410209

11. e-Tender for Verious Medical Equipment

Tenders invited from reputed Manufactures or their authorised distributors / dealers of verious Medical Equipment for MGM Medical College Hospital, Aurangabad, in the format given below:

Name & Address of Vendor:	

Sr. No.	Name of Items	Specifications for eTendering	Qty.	UOM	Make	Model	Rate per Unit (Excl. GST)	GST %
1	Multipara Monitor (PICU)	 NIBP Invasitve B.P (arterial B.P) ETCO2 CVP All monitors should be connected to Central pannel 	15	Nos				
2	Multipara Monitor (New Wards)	• Monitor should be portable and lightweight and should monitor vital parameters of patients. • Capanility of storage of patient data and printing of patients reports. 12" Multi color TFTdisplay. • Monitoring parameters - ECG, Respiration, NIBP, SpO2. • Digital and 4 waves / traces display. • Monitoring should have audioble and visual alarms capability. Alarm should have three. • Trends should be automatically stored for at least 24 hours in at least one-minute intervals. • Numeric monitored data trend shall be viewable and recordable in a patient chart type format in at least 1, 5, 15, 60 minutes intervals.	16	Nos				

3	Ventilator (PICU)	All advance modes with minimal tidal volume of 20cc Compatible with NIV CPAP	5	Nos		
4	Ventilator Transport (PICU)	Pediatric Min Tidal Vol = 10 MI, Battery backup = 2 hrs. Equipment Oxygen Facility 20ml	1	No.		
5	Syringe Pump (PICU)	Battery backup Alarm Flow rate programble	15	Nos		
6	Syringe Pump (New Wards)	Automatic detection of syringe size and model/should have large format of display /flow rate accuracy ±2%, Occlusion / Remaining parameters as per standard.	16	Nos		
7	Microscope	With Universal condensor bright field dark field dark field and phase contrast	1	Nos		
8	Elisa Reader & Washer		1	Nos		
9	Hysteroscope	4mm -30°C	1	Nos		
10	ECG Machine	12 Channel with all standard accessories	1	Nos		

their Contact numbers to **etenders@mgmuhs.com** only.

Date:	Signature of Tenderer:		
	Name:		
	Designation:		
	Email ID:		
Seal	Mobile No.:		
	Full Address:		