

MYH KAYAKALP-2014 Model Ward Requirement**Name of Department: Ophthalmology**

S.NO	NAME OF ITEMS	QTY.	Suggested Approx rates (Rs)	AMOUNT
1	Bedside Cabinat/Locker	22	1500.00	33000.00
2	Examinatiion Table	1	5000.00	5000.00
3	Glucometer	2	1500.00	3000.00
4	I/v stands	5	2000.00	10000.00
5	Patient Attendent stool (Stainless Steel)	22	1500.00	33000.00
6	Spot light portable	1	10000.00	10000.00
7	Sterilizer (Boiler)	1	5000.00	5000.00
8	Wheel Chair	1	5000.00	5000.00
Grand Total Rs.				104000.00