DEPARTMENT OF MEDICINE

Sr.No.	Name of Equipment	Specification	Qty Required	Suggested Manufactures Name	Approx unit Usage Cost (Rs)
01	Defibrillator	1. The defibrillator should be biphasic and have Rectilinear	3	*Philips pvt.ltd.	330000/-Life support in ICCU /
		Biphasic waveform.			ICU emergency.
		2. It should have monitor display of both selected and energy		*BPL Ltd.	
		display.			
		3. It should have ability to provide verification of the			
		defibrillator charging and discharging without removing			
		paddles from storage wells.			
		4. In manual mode the unit should provide energy selection			
		at (1-10,15,20,30,50,70,85,100,150,200 or more) joules.			
		5. It should have default energy sequence 120,150,200			
		joules.			
		6. It should have ability to measure chest compression rate			
		and depth in real time and both visual and optional audible			
		feedback is provided.			
		7. It should have ability that all CPR data can be recorded			
		and reviewed by using software specially designed for			
		doing this (if needed).			
		8. It should have ability to see ECG signal processing			
		extracts CPR artifacts from the ECG so we can see the			
		organized rhythm without interrupting compression.			
		9. It should easy to read three mode of display enables it to			
		see in any envoirment.			
		10. It should be small, lightweight, compact and easy to			
		carry.			
		11. It should come with sealed lead acid battery			

		12. It should have voice and visual prompts and have GPS			
		clock.			
		13. It should have option to provide 3,5 0r 12lead ECG			
		cables.			
		14. It should have option to use with both pads and paddles.			
		15. The paddles should be adult and pediatric and pediatric			
		can			
		be exposed by just sliding of adult paddles.			
		17. The model should be FDA approved and should not be			
		banned by FDA in last two years.			
		18. It should have pacing with 40msec width and constant			
		current.			
		Optional			
		1. SPO2			
		2. ETCO2 main stream or side stream			
		3. NIBP			
		4. Charger for charging battery			
		5. 12 lead ECG interpretation and communication add			
		morediagnostic capability.			
		6. Soft pack carry case			
		7. Roll cage for greater protection of unit in emergency			
		medical services.			
		8. Paddles			
		9. Pads one piece for providing CPR feedback			
		10. Pads to piece for providing CPR feedback			
02	Multipara		16	*BPL Ltd	150000/-Continues monitoring of
	Monitor	TECHNICAL SPECIFICATION FOR BED SIDE		*Drager *Philips	patients pulse B.P., SPO2 ECG in critically ill
		MULTIPARA		Pillips	patients.
		MONITOR			patients.
		SALIENT FEATURE			
		Three channel portable anterior with colour TFT display			

In-built thermal array recorder (optional)			
Graded & Colour coded al			
Critical alarm review page			
Inbuilt rechargeable battery and slave display option			
DISPLAY			
Type _ High resolution colour TFT display			
Size: 6.4" (Diagonally)			
Resolution 640*480 dots or more			
Excellent viewing from distance and angle			
Parameters: ECG, Respiration, SpO2, NIBP and			
Temperature			
Trace speed: 12.5, 25,50 mm/sec. For ECG & SpO2			
6.25 ,12.5			
& 25 mm/sec. For respiration			
OPTIONAL ENCODER /KEYS			
Optional encoder: Rapid access to all the functions and			
settingsof parameters through single knob			
Hotkey: Quick action hot keys for alarm recall, NIBP			
start / stop, recorder start/ stop			
Freeze & Return to the main screen			
Smart alarm acknowledge key with flash indicator			
ECG MONITORING			
Lead: 3 lead ECG monitoring (I, II,III) with cascade			
wave form facility			
Protection : In built cautery and defibrillator protection			
Pacer detection: Possible			
HR range: 20 to 270 bpm			
Arrhythmia : Selectable arrhythmia detection for			
Bradycardia, Tachycardia, Asystolie.			
Irregular & Skipped beat			

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PULSE OXIMETRY (SpO2)	
PR range : 20 to 250 bpm (+/-3bpm)	
SpO2 range: 0 to 100%	
Display: Plethymograph, pulse strength & SpO2 values	
Accuracy: 100 tob 70% (+/- 2 digits) adult	
100 to 70% (+/-3 digits) neonatal monitoring	
NON-INVASIVE BLOOD PRESSURE (NIBP)	
Principle : Oscillometric	
Display : Systolic, Diastolic & Mean pressure	
Modes: Manual STAT (continuous 5 min, operation) and	
automatic (time interval 2-90 min selectable)	
Range: 20 to 250 mmHg	
RESPIRATION	
Principal impedance pneumography	
Display: Waveform with respiration rate	
RR RANGE: 4 to 150 BPM	
TEMPERATURE	
Range 12 degree C to 43 Degree C or equivalent	
ALARMS	
Alarm setting for all parameters	
Patient alarm: Red flashing with audio alarm &	
messages	

equipment alarm: Yellow flashing with audio alarm &
messages
Alarm suspend : Contineous yellow
Auto setting HR/PR, SpO2, RR & Temperature
Manual settings: HR/ PR. SpO2, systolic Diastolic, RR
aponea & temperature
TRENDS
24 hour of graphical and tabular trends for HR/ PR, SpO2
Respiration, Temperature, NIBP trend
Alarm recall: Critical alarms with date, time & Message
ADULT/PAEDIATRIC/NEONATE APPLICATION
All applications from neonate to adult possible
RECORDING (Optional)
Type: in-built dual channel thermal array recorder for
recording ECG, Plethysmograph &
respiration waveforms (any two user selectable) with
numerical data
Modes: Direct/delayed/contineous and record on alarm
features
POWER SUPPLY
Universal power: 95 V -265 V AC, 5060 Hz (+/- 5%)
Power rating 50W
Battery type 12 V -12 AH scaled lead acid 2 No. (inbuilt)
Battery operation: Rechargeable battery for 60 mm of
operation under full
External batter: 12 V DC input
ISO 9001-2000, CE mark / FDA approval

Electro- nystagmograph PC based Hardware Kit with following details	Castors having locking arrangement, Pullout keyboard shelf. Shelf for PC and Printer Hardware Interface Cart, Accessories, Computerized Light Bar, Patient safety through optical isolation. Computer controlled folding light Bar. Electro-nystagmograph PC based Software Kit with following details: Internal Loop-Back Test to check system integrity Notch filter and data validation. Portable Compact size. Electrodes: Type: Ag/Ag CI Disc Electrodes ENG Cart: Two tier heavy duty cart made of pre-laminated 18 mm thick board with: Standard Kit: Acquisition Box, Patient Connector, Accessories: Electrodes, Manual, Cables and Connectors,	*Novaplus *Phacon	330000/-To diagnose the cause of vertigo dizziness or balance dysfunction by testing vestibular system.
	system integrity		
	Notch filter and data validation. Portable Compact size.		
	Type: Ag/Ag CI Disc Electrodes		
	ENG Cart: Two tier heavy duty cart made of pre-laminated		
	18 mm thick board with:		
	Standard Kit: Acquisition Box, Patient Connector,		
	Accessories: Electrodes, Manual, Cables and Connectors,		
	Recording paste, Dust cover		
	· Acquisition software on CD		
	· Analysis software on CD		
	The ENG Tests: Saccades, Gaze, Pursuit, Positional,		
	Dix Hallpike, Caloric & Optokinetic		
	· User definable test sequence		
	Automatic calculation of Culmination Frequency with		
	manual override		

04	Ventilator	Automatic plotting of butterfly charts Auto calculation of Slow Phase Velocity (SPY) Auto derivation of Canal Perisis and Directional Preponderance Intuitive user interface software Patient data comparison (multiple sessions and/or with normative data) Efficient patient data management using single envelope Patient history chronologically documented Reformatting of Sensitivity &. Filters in Review & Analysis Optional data export to excel file for educational research. Fast response time combined with high peak flow up to 250 I/min, offer amazing performance. Very sensitive inspiratory & expiratory triggers, allow effective and effortless breathing Amazing sensitive pressure flow sensors and fast response time make it very gentle and synchronized ventilation despite of very efforts by patients. Patented "Flow by technology" makes at virtually effortless triggering in tracheostonized patients. Real time display of curves and loops with unique software. Display Pressure / time. Flow /time. Compliance loop (volume / pressure). Flow volume loop. Measured parameters, calculated parameters, trends, Alarms, Remote control	4	*Siemens Pvt ltd *Dragar Pvt Ltd	800000/-To give artificial breathing for critical ill patients needs life support

05	Upper GI Endoscope	1-A	3	*Karl storz	1320000/-	To diagnose and treat upper gastrointestinal
		Should have the following features & specifications:		*Olympus		pathology
		Slimmer/light weight and fully immerssible				
		Two / Single light guide / processor connector remote				
		switches on control body. Silicon free Air/water				
		and suction valve buttons. Field of view: 120 degree or				
		more. Depth of field : 9.8 mm or less. Distal end				
		& ins. Tube dia. Channel dia: 2.8 mm or more. Bending				
		range: Up - 210 deg Dn-90deg L&R -100 DEG.				
		Working length: 1010 mm or more				
		1-B				
		R.G.B. O/P processor and light source :				
		Should have the following features and specifications:				
		Processor / light source unit :Integrated or separate				
		units with Xenon or halogen. Processing: Digital signal				
		processing. Image display size/s: Full or small				
		screen display on monitor. Video out puts : RGB out				
		put				
		essential for compatible with RGB monitors.				
		Edge enhancement : three steps. Light control system				
		:Automatic and manual control. Cooling system				
		:Forced air cooling. Iris control, white balancing, "ON				
		SCREEN " colour control (10-14 incr. Steps).				
		Spare lamp facility with Quick changeover system from				
		Lamp 1 to Lamp 2 and vice versa. Compact &				
		light weight. 1-C. Monitor: 14" RGB (Medical grade).				
		2 COMPLETED. Dentium A soid model of CD society 8				
		2 COMPUTER: Pentium - 4 with multimedia, CD writer &				
		Drive, scroll mouse, 30 GB HD or more Special software for recording endoscopic procedures, 15 inches				
		recording endoscopic procedures, 13 inches				

	colour monitor, photo-quality inkjet printer, UPS(30 minutes for more back up). 3 ESOPHAGEAL DILATORS: Over the guide wire, boogie, length 70 cm or more, in increasing diameter 5 mm to 18 mm, tapering end, with radio-opaque markers, compatible with coated and steel guide wires. 4 SPRING TIPPED STEEL GUIDE WIRE, 0.38 ESOPHAGEAL ZEBRA OR SIMILAR GUIDE WIRES. 5 FOREIGN BODY FORCEPS: Compatible with standard 2.8 mm channels upper GI endoscope 6 POLYPECTOMY SNARE WITH CONNECTING CORD: Re-usable, compatible with 22mm working channel 7 BOYLE'S APPARATUS WITH PULSE OXIMETER (JUSTIFICATION: FOR DOING ENDOSCOPIES IN PEDIATRIC PATIENTS, UNCOOPERA-TIVE PATIENTS AND SERIOUS PATIENTS PROPER			
06 Colonoscope RGB O/P processor and light source CD Rom /Writer	Slimmer / light weight and fully immerssible 3-4 remote switches on control body Graduated stiffness for better operational control Field of view wide 145 degree or more Depth of field: 3 mm to 100 mm or better Distal end diameter: 13.3 mm or less Insertion tube diamter: 13.0 mm or less	*Karl storz *Olympus	300000/-	To diagnose and treat lower gastrointestinal pathology

Channel diameter: 3.7 mm or more	
Bending range: up & Dn - 180 degree I & R -160	
degree Working length: 1675 mm or more	
Processor / light source unit : integrated or separate	
unit with senon or halogen lamp	
Processing: Digital signal processing	
Image display size: Full and small screen display	
Video output: RGB and composite with simultaneous	
display	
Edge enhancement : 3 steps mode	
Light control system : Automatic and manual control	
both	
Colling system: Forced air cooling	
Spare Lamp: Halogen 150 watts	
Iris control, white balancing on screen colour control	
with 12 or more incremental steps	
*We already have this processor and light source in	
department)	
COLOUR MONITOR	
Compatible high resolution ICL colour monitor, 14	
inches with RGB, external sync (Video input)	
Computer specification	
PIV	
Con /Game port	
On PCI slot free	
2576 MB RM 40 GM	
MS office	
Window XP	
1024 x 768 - 14 inch monitor	

07	Video ERCP	ERCP Scope with Processor ar	nd other accessories	3	*Karl storz	4400000/-	To diagnose and treat
	Scope	(Video ERCP (Side Viewing) S	cope):		*Olymanus		hepatobiliary and pancreatic disease
		• Dual (separate) inlet port transmission.	s for better air and water		*Olympus		pancreatic disease
		• Compatible with leak tes air flow and pressure.	ting device with auto regulated				
		 Four or more no of use properties on control body 	rogrammable remote control				
		Field of View	: 100 degree or more				
		Direction of View	: 5 degree backward oblique viewing				
		Depth of field	: 5 to 60 mm or better				
		Distal end out diameter	: 13.5 mm or less				
		Insertion tube outer diameter	: 12.5 mm or less				
		Tip bending range	: Up 120°, down & left 90°, right 110°				
		Working length	: 1240 mm or more				
		Channel inner diameter	: 4.2 mm or more				
		Instrument should be computable	e with narrow band				
		imaging / FICE / I-Scan and other	er high advance				
		definition technology)					
		I-B: Light source & Video following features and specific					
		XENON Light source 300 W or					
		(halogen light), capable of ger	nerating special band of light				
		(narrow band imaging / FICE					
		mucosal diagnosis. Automatic I with image size adjustment (
		display), electronic zoom upto					

		brightness control, Forced air cooling, white balancing, o screen color control, Compact and light weight, Medical grad 14" monitor (RGB) video output RGB output for compatable with RGB monitor. 1-C Computer: Window 7 with multimedia DVD writer and Drive, Scroll Mouse, 500 GB HHD or more, special software for recording endoscopic procedures, 15" colour monitor, Photo quality inkjet printer, UPS with 1 hour back up.	e e			
08	Haemodialysis machine	1.Computerized Screen 2. On Line Treatment Chart 3. Auto Self Test 4. Acetate & Bicarbonate Dialysis System 5. Chemical Disinfection with auto-shut off 6. Auto-shut Off Heat Dis-infection 7. Sodium, Bicarbonate and U.F. Profiling1 8. Single Needle Double Clamp 9. Variable Dialysate Flow 10. Blood Leak Detector 11. Integrated Blood Pressure Monitor 12. Volumetric U.F Control 13. Blood Pump 14. Heparine Pump 15.Arterial & venous Pressur Monitoring with Auto Limit setting 16. Auto Start features 17. Variable Sodium Bicarbonate Control System 18. Automatic Drip Chamber Level Adjust 19. Inbuilt Dialyser Holder 20. Heat Exchanger	10	*B.Braun Medical India pvt. Ltd *Fresenius medical care	850000/-	For dialysis of kidney failure patients

09	RO Plant	Sodium hypochlorite Dosing Through Electronic Dosing Pump	1	*Seion pvt ltd	250000/-	Used in filtration of water
09	KO FIAIII	Raw Water Storage Tank 5000 Lts , Loft Tank 500 Lts (Plastic)	1	*Aqua Care	230000/ -	in dialysis Unit
		Raw Water Feed Pump Monoblock Horizontal		Aqua Carc		in diarysis Onit
		(a) Capacity 1000Lts/Hrs				
		(b) Head 35 MVC				
		Multi Grade Sand Filter				
		(a) Size of Vessels - 185 Dial X 944 Hos				
		(a) Size of vessels - 183 Dial X 944 Hos (b) Graded Sand Quantity 50 Kgs				
		Activated Carbon Filter				
		(a) Size of Vesels - 185 Dia X 944 Hos				
		(b) Activate d Carbon Media - 800-900 mg/gm(c) Body of Vessels - Fiber Reinforced Plastic				
		Anto Scalent Dosing System Through Electonic Dosing Pump				
		Micron Cartidge Filter 20 - Poly Proplene PTI, USA				
		Hydropenumatic System - Pressure Tank Flexcon USA				
		RO Feed Puimp Grund FOS (Den Mark) Stainless Steel Body				
		with 3 phase electric connection				
		R.O System should be completely skid mounted				
		R.O System should be completely skid mounted				
		RO Module with programmable logic control operation				
		(a) R.O Capacity 200ltrs / Hrs permeate				
		(b) Recovery 40%				
		(c) Hydronauties USA membrane Size 4" DIa, 40" long				
		(c) Trydronauties OS/Thiemorane Size + Dia, 40 long				
		Control Panel				
		(a) Pressure Gauges - Glycerin Filled - 02 nos				
		(b) Rota Meters - 03 nos				
		(c) Digital Conductivity Meter - Two- One For Inlet Water				
		and Second for outlet Water				
		(d) Pressure Switches - Two				
		()				
		Hydropneumatic System with One feed pump and pressure				
		tank Interconnecting Pipe work (ISIMarked) from Raw Tank				
		to RO system and from outlet of RO to trated water tank.				
10	ECHO machine	e 1.System should be a fully digital colour oppler e	1	*Philips pvt ltd	1550000/-	For Cardiac structural and
				• •		valvular abnormality.
-	•	Page 12 of 21				

		*GE tech ltd	
	chocardiography system.	"GE teen ita	
	2 Contain the old one distallance from the local one		
	2. System should use digital beamformer technology,		
	capable of Doppler future techniques,		
	should be upgradable through software and hardware.		
	1. system should have multi array probe technology for		
	phased array, linear array, curved array and multiplane		
	TEE Transducer,		
	4. System should have high resolution wide field view, flat		
	15" LCD Screen		
	5. Should have capability user to adjust screen, key board		
	height and rotate for increased operator comfort.		
	6. The system should be capable of providing the		
	following imaging and operating modes1		
	a. Sector, Linear, Convex, TEE-imaging.		
	b.2D, M-Mode colour M-Mode.		
	c. Colour flow oppler imaging.		
	d.Ultrasound/colour angio mode.		
	e. Fully steerable pulsed Doppler.		
	f. Fully Steerable continuous wave oppler.		
	g. Digital cine replay of all imaging & Doppler Modalities.		
	h. On Screen cine oppler & image recall, with large		
	memory HHD.		
	i. Digital Image storage and patient archive with true		
	scanner frame rates.		
	j. Tissue Doppler imaging tissue colour Doppler coding.		
	k.Full Measurement and Analysis capabilities.		
i i			
	1. Imaging Frequencies from !.5MHZ to 10.0 MHZ.		

 ,
n. User adjustable colorigation mass gain setting colour
Doppler Angle Correction & other important
parameters with live/frozen/archived images/loops
7. Software driven backlit & illuminated digital touch panel
assignable rotary knobs & keys for easy mode & setting
changes.
8. System integrated key board for easy patient data
annotations & report entries.
9. Should have a Display of single dual or Quad images
side by side.
10. System should have a programmable architecture data
proceesing of phase amplitude & frequency.
11. Images should be stored & analysed with true frame
rates, Extensive post processing remeasurement
analysis generation of new reports, CD/DVD & USB flash
card drive should be avalaible.
12. Should have a optional digital stress echo pakage of
acquiring & display of images.
o. Both pharmacological & Exercise stress exam
capabilities.
p.Poosibility to modify & create protocol templates.
q.Image Acquigition review wall motion abnormalities &
its reporting.
Digital Sign Replay, allowing to store & Repaly ultrasound
images including 2D, colour, Colour angio, Doppler. The
cine repaly should allow to user to change gain contrast
sweep speed, base line etc.Image parameters.

11 3 CHANNEL ECG	4" Inbuilt printer 12 Lead Simultaneous Acquisition Leads Off Indication Name / Id label on printout Printer Status Internal SMPS Last print memory HR printout ECG Print style = 3 leads + long lead Axis, Interval printout Defib. and Cautery protection as per standards Li ion Battery with backup of more than 50 ECG's	06	*BPL India Pvt ltd *Schiller	175000/-	Functioning and diagnosing of heart pathology (M.I)
12 PULSE OXIMETER WITH NIBP:	A portable and light weight NIBP/Spo2 monitor with plethysmographic waveform display. Features include: High resolution graphic LCD with backlit with a plethysmographic display Display of plethysmograph with numerics of %O2, Pulse Rate, Systolic, Diastolic & Mean BP Easy menu driven operation Programmable audiovisual alarms Trend - 24 hour SPO2 / 100 NIBP readings Mains and battery operated Specifications Electrical: Power supply: 230V AC / 50Hz	3	*BPL Medical Pvt ltd *L & T Pvt ltd	20000/-	Oxygen saturation of patients

Power Consumption: 3 W		
Inbuilt battery: NimH 7.2V / 1600 mAH		
Operating time: >3 Hrs		
Spo2(NELLCOR):		
SpO2 range: 40 -100%		
SpO2 accuracy: $\pm 2\%$ for $70-100 / \pm 3\%$ for $40-69$		
Pulse Rate range: 30 -240 BPM		
Pulse Rate accuracy: ± 2 BPM	1	
Messages: Pulse Search		
Check sensor		
No Finger in probe		
Low battery		
Alarms SpO2: High / Low 40 - 100%]	
Alarm Pulse Rate: High / Low 30 - 240 BPM		
NIBP:		
Technique used: Oscillometric measurement]	
Operation modes: Auto/Stat/Manual	1	
Patient type: Adult/Pediatric/Infant/Neonate	1	
Cuff pressure display: 0 - 300 mmHg	1	
Systolic BP range: 30 - 245 mmHg	1	
Diastolic BP range: 25 - 195 mmHg	1	
Mean BP range: 50 - 215 mmHg	1	
NIBP accuracy: +/- 3 mmHg	1	
Cuff deflation: Automatic]	
Physical:		
Weight: < 2 kgs]	
Dimensions: 198(L) * 132(W) * 178(H)]	
Display type: High resolution Liquid Crystal Display]	

13	ECG Machine	12 lead simultaneous acquisition Digital filters and baseline control Configurable printing format Automatic measurements of axis, amplitude & intervals Unlimited data storage, review & printing Long term monitoring mode Adjustable sweep speed & gain Facility to store and print immediate & offline comments Selectable Rhythm lead Automatic Heart Rate calculation	08	*Schiller *BPL.Medical India Pvt ltd *GE	250000/-	Functioning and diagnosing of heart pathology (M.I) –
14	Pulse Oxymeter	Product description: Pulse oximeters should have rigorous environmental/ mechanical stress testing such as rough handling and free fall drops, exposure to extreme temperatures and humidity, chemical and cleaning solvent resistance tests. Features 1 year warranty 110/220 volt compatible 60/50 Hz & Excellent condition Product specifications: More stable SpO2 values providing fever, false alarms Rapidly locate the sensor site with the strongest pulse signal	14	*Nidek medical Pvt ltd *BPL *Life Care	3000/-	Oxygen saturation of patients.

High visibility for quick decisions-backlit, always on	
screen illuminates large numbers.	
Full compatibility with all patient types and clinical	
situations	
24 hrs trend of memory.	
TeleOximetry PC Access software, which allows the	
SpO2 trend data to be download and previewed on PC	
Dimensions:	
Weight 6.5 to 7 16	
Alarm:	
Low/High SpO2	
Low/High pulse	
Display:	
Digital: LED	
Waveform: Backlit LCD	
Clock:	
24 hrs clock	
Electrical:	
Battery B volt, 3.2 ampre-hours sealed lead-acid	
Charge time: 8 hours	
Operational time: 5.5 hrs-6 hoov	
Power consumption:15 watt-20 watt	
Input voltage: 100 to 240 V, 50/60 Hz	
Following transducers must be provided with the	
unit:	
Convex Probe with triple frequencies & THI frequencies	
should be available.	
Linear Probe for Peripheral Vascular with Fundamental	
frequencies should be available.	
Phased Array Sector Probe with fundamental requencies	
& THI frequencies should be available	
Following facilities should be provided along with the	
equipment:	
Suitable stabilizer	

15	Nebulizer	Thermal Printer Following facilities should be available: HPRF Real time 3d Panoamic view Automatic cardiac flow measurment (acm) Ultra Light Only 1.4 Kg1.5 Kg. Air Flow Rate 10 LMP - 12 LMP Output Air Pressure: 30 Psi - 35 Psi	15	*Philips *Omron *Equinox	2200/- Aerosol Drug Delivery System for Asthmatic and COPD Patients
		Low Power Consumption Only 60 W Rise Time Range: 100 to 600 MS adjustable Durable Body: ABS injection moulded body.			
16	Suction Machine	Should be based on diaphragm technology. Vacuum should be more than - 60 mmHg with flow rate of at least 8 Ltr. per minute or more. Should be made for continuous purpose. Should be operated from mains or battery mode (over 100 minutes). Should have optical and acoustic warming signal for battery charge. Jar capacity should have minimum 2 Ltrs. (Non breakable). Should have provision for trolley	07	*Anand Medicaids *Narang Medical *Or any other company equivalent CE,& ISO Approved.	12000/- Aspiration of Gastric Contents in Aspirated Patients
17	Infusion Pump	With accuracy of Drop Counts 0.05 %	30	*Brion *Plenumtech	151000/-For Continues delivery of drugs which are to be given at a constant rate
18	Laryngoscope	With Infant to adult size all blades	05	*Bajaj Life Care *Anesthetics India	2500/-For intubation of critically ill patients to give artificial ventilation
19	Refrigerator 165 Ltrs.	165 Lts temperature maintaining between two to 8 degree centigrade	03	*Kelvinator *Whirlpool	9000/-For keeping drugs and vials

20	Bipap Machine	Fast response time combined with high peak flow upto 250	04	*Philips pvt ltd	275000/-To wash out CO2 from
	(Ventilator Non	liter per min. Offer amazing performance very sensitive			body in Co2 narcotic
	Invasive)	inspiratory and expiratory allow effective and effortless		*Refmed Asian	patient and COPD
		breathing. Amazing sensitive pressure flow sensors and fast		pacific ltd	patients
		response time. Make it very gentle and synchronized			
		ventilation despite of very efforts by patients			