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Supply and commissioning of 6(six) of different medical equipment for Department of <u>Urology at Calcutta National Medical College & Hospital</u> (Submission of Bid through *online*)

Bid Reference No.: WBMSCL/NIT-090/2025

Dated-31.01.2025

Amendment-I

REVISED TECHNICAL SPECIFICATION

<u>Schedule-I</u>

Telescope (4 MM)

- a) Should be 4 mm diameter, Angle of view 30 degree
- b) Should have length of 30 cm
- c) Should be autoclavable
- d) Should be fiber optic light transmission incorporated
- e) Should have instrument tray for sterilization purposes with fixing system of telescope.
- f) Should have CDSCO approved.
- g) Should have 2 yrs manufacture warranty
- h) Should be compatible with existing resectoscope

Schedule-II Morcelloscope with 4 blades

- 1. It should be panoview plus operating lelescope
- 2. Angle of view 12/0 digree

- 3. Parallel eyepiece capacity 5mm for anxiliary instruments up to 4.8 mm diameter.
- 4. It should be rod lense system with automatic valve on the working channel
- 5. Continuous irrigation through continuous irrigation sheath 26Fr
- 6. It should be compatible with existing sheath
- 7. It should be compatible with existing morcellator in dept.
- 8. Reusable morcellation blade set for existing set (4 Set).

Schedule-III Pneumatic Lithoclast Machine

- 1. It should be light weight, compact and mobile.
- 2. Air pressure control should be between 3.5 bar -6.5 bar to generate highly accurate pulses in the form of single pulse operating mode and continuous pulse operating mode.
- **3.** It should be able to control power to the hand piece for better stone fragmentation.
- **4.** Displacement measured under standard conditions (2 bar) should be ideally less than 1.6 mm to give safety to endoscope and to avoid possible stone migrations
- 5. No possibility of heat generation inside, hence; no chance of any thermal injury.
- 6. Pressure setting knob to set the desired pressure, which also facilitates constant monitoring of pressure by display.
- 7. Single and multiple mode operations.
- 8. In multiple modes, options available to change the frequency should be at least from 1 pulse/second to 15 pulses
- 9. Input Gas: Compressed Dry Air
- **10.** Inlet pressure to control unit should be maintained between 3.5 to 6.5 bar. Facility to adjust outlet pressure between 1-5 bar
- Facility to adjust frequency in single pulse mode and continuous pulse mode between 1to 15 Hz. Dual pedal footswitch should be able to deliver two different frequencies
- **12.** Control unit (Made from rust free material), completely sealed hand piece (to support water proof nature and for autoclaving) and solid probes for transmission of pneumatic energy
- **13.** Manual override to operate the machine in case of electronic failure of the foot control unit should be available.
- 14. Should be supplied with probes as listed: -
 - Ureteroscopy probe size: length 600-610 mm; 0.8mm 8 such, 1mm 8 such. PCNL probe size: length 400-450 mm; 1.3mm 2 such, 2mm 2 such, 3.2mm-2 such.
- 15. Medical grade Air Compressor should be supplied.
- 16. Stable and sturdy trolley to be supplied along with the equipment

Schedule-IV Diathermy Machine with Vessel Sealer

- Single /combine Generator with Single footswitch that should pro-Ultrasonic energy and Advanced RF energy technology for soft tidissection and vessel sealing up to 7mm.
- System should have a universal connector to connect Ultrasonic energy and Advanced RF energy instruments.
- System should have automatic instrument recognition.
- System should be from same manufacturer.
- Should provide temperature-controlled energy delivery which should maintain tissue temperature approximately at 100 degree Celsius and hand instruments that provide tissue vessel seal strength to withstand bursting pressure of 3 or more times the systolic pressure.
- System should have the integrated facility with the same generator to deliver the other energy modality like Monopolar, bipolar, advance bipolar and saline bipolar resection energy both for open as well as Endoscopic surgery. If it is not integrated in the same generator, a separate CDSCO Certified energy generator for monopolar, bipolar, advance bipolar and saline resection should be provided with the main machine with foot switches.
- System should have a touch screen display for fast and setup, operation and on-screen diagnostics.
- System should have a high-resolution display with wide viewing angles.
- System should have the ability for software upgrade via USB/LAN and other sources
- System should provide Ultrasonic energy and Advanced RF energy technology for soft tissue dissection and vessel sealing up to 7mm through single probe or different probes
- System should conform to the following international standards EN (IEC) 60601-1, EN (IEC) 60601-1-2, EN (IEC) 60601-2-2, EN (IEC) 60601-1-8
- System should provide Class 1 protection against electric shock
- System should have a single footswitch for operating ultrasonic energy &advanced RF energy instruments
- System should have standby mode to ensure safety.
- System should come equipped with system diagnostics and troubleshooting guide to pin point any problems in the systems.
- System should have onscreen warning display system for generator overheating, generator software upgrade, hand piece errors and instrument errors
- System should work in the frequency of 47 KHZ to 56 KHz
- System should be compatible for open surgery and for laparoscopic surgery.
- System should be compatible with both 5mm and 9/10mm instruments.
- System should have atleast 3 power or more settings levels with power level display for ultrasonic energy instruments.
- System should be able to power energy instruments with microprocessor controlled bipolar electrosurgical radiofrequency technology with a quasi/sinusoidal forced impedance output.
- System should be equipped with advanced RF energy technology that can simultaneously seal and transect vessels up to and including 7mm, large tissue pedicles and vascular bundles

• Manufacturer should have dedicated direct service center in India and have installation in repute Government Institutes

This system should be compatible with following procedures:

- Saline TURP
- Conventional TURP
- -TUVP (Trans urethral vaporization of prostate)
- -TUEB (Transurethral Enucleation with Bipolar)
- -TURBT (Transurethral resection of the bladder tumour)
- Open Monopolar
- Open Bipolar
- Laparo-Monopolar
- Laparo-Bipolar

System Should have following features :

Output mode : Monopolar, Bipolar and Saline

Monopolar cutting: PURE, BLEND, PULSE CUT Fast, PULSE CUT SLOW

Monopolar Coagulation: SOFT COAG, FORCE COAG, SPRAY, Power COAG

Bipolar Cutting: Bipolar CUT

Bipolar Coagulation: Bi SOFT Coag, RF Coag, AUTO Coag, HARD Coag, Fine COAG

Saline cutting: Saline CUT

Saline coagulation: Saline COAG,

Base Frequency: 430kHz

Protection against electric shock: Class I Type CF

Weight should not be more than 12.5 Kg.

Automatic Smoke Evacuation facility

Outer Sheath Should have Maintenance free stop cocks

Electrosurgery unit should be upgradeable to Vessel sealer for Lap-Uro procedures like: Prostatectomy, Nephrectomy etc.

The Energy System Should Have The following features:

- Large Illuminated Touch Screen Panel
- Simple preset functions for upto39 Memory Spaces
- Automated saline detection to ensure safe procedure
- Leakage protection Sensor to permanently ensure the highest degree of safety for the user and patient
- High Power Cut Support for optimizing resection in saline
- Fast Spark Monitor for constant cutting quality
- Three Effect Optionto control the coagulation zone

System should comprise of the following:

- Generator
- Footswitch & Cable
- Communication Cable

Accessories:

• Hand-piece (Transducer) - for ultrasonic & for advanced bipolar for the

quoted probes – <mark>2</mark> no's

- Generator Cart(OEM).
- Hand probes of working length 35 cm for Laparoscopic dissection and sealing up to 7mm – 10 No's each
- Hand probe of working length of 10/20 cm for Open surgerieswhich includes dissection and sealing vessels up to 7mm 10 No's each

System should includes following :

- Electrosurgical Unit(QTY-1)
- Footswitch(QTY-1)
- Telescope, 30 Degree, 4 mm, Autoclavable(QTY-2)
- Bipolar Passive Working Element(QTY-2)
- Bipolar HF-Cable(QTY-2)
- Rotatable Outer Sheath, 26 Fr., 2 stopcock(QTY-1)
- Resection Inner Sheath, 24 Fr.(QTY-1)
- -Medium LoopElectrode(24 Pcs)
- -Large Loop Electrode (12 Pcs)
- Roller Electrode (12 Pcs)
- Needle Electrode (12 Pcs)
- Button Electrode for TUVP and TURBT (12 Pcs)
- Enucleation Electrode for TUEB (12 Pcs)
- Cystoscope Sheath, 22.5 Fr. 19.8 Fr(QTY-1 Each)
- Cystoscope Bridge, 1Way(QTY-2)
- Ellik Evacuator(QTY-2)

<u>Schedule-V</u>

Flexible Uretero Renoscope

- 1. Should be extremely thin at tip for smooth insertion (distal end 7.9 Fr)
- 2. Instrument channel should be of 3.6 Fr
- 3. Should have 275 degree down angulations for optimum visualization in the lower calyx
- 4. Detachable light guide adaptor should be supplied to accommodate other make light cable
- 5. Scope should be designed to maintain excellent tip deflection even when laser fiber is inserted
- 6. Should have built in moir6 filter for good opto-digital imaging performance
- 7. should have leakage tester in instrument set
- 8. Should have with standard accessories,
- 9. Compatible forceps to be provided -3
- 10. Ureteric Access Sheeth to be provided : 45 CM -<mark>5</mark>, 35 CM -<mark>5</mark> & 28 CM-<mark>5</mark>
- 11. Should be repairable in India
- 12. Flexible Ureteric Access Sheeth to be provided : 3

Schedule-VI URETERO-RENOSCOPE (4.5/6.5)

- 1. It should be semi rigid Uretero-Renoscopes with lateral off set eye piece
- 2. It should have facilities of stone therapy with laser, ultrasound, electro hydraulic or ballistic lithotripsy
- 3. Should have working length 430 mm and minimum total length approx 550 mm to 500 mm
- 4. Should have irrigation and instrument Channel FR approximate 3
- 5. Should have with standard accessories,
- 6. Compatible forceps to be provided Tripong/Bipong 3