

Republic of the Philippines VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

PURCHASE REQUEST

PPMP No.: 39-2-1242-2024-1-0-0

PR No.: **GF-2024-02-00708**

Date: 02-28-2024

Dept./Office: CN

Section/End-User: Guada Fe D. Amihan

Category: Laboratory

Equipment

Funding Source: General Fund - CO

Project Title/Code: CoN BP202

Item #	Item Description	Unit	Qty	Unit Cost	PAR/ICS	Total Cost
1	AUTOMATIC EXTERNAL DEFIBRILLATOR TRAINER (AED TRAINER)	рс	1	210,000.00		210,000.00

Specification:

AUTOMATIC EXTERNAL DEFIBRILLATOR TRAINER

(AED TRAINER)-Schiller Fred Easy Trainer

S •Compliant with the latest AHA guidelines and

pre-configured with 10 training scenarios that

stimulate realistic sudden cardiac arrest episodes,

designed with a replaceable plug-in card, with

metronome added to the flashing lights

·can be used with the CPR manikin

capable of responding if the training pads

connect firmly or not (can prompt whether the

position of the electrode pads is proper)

•inclusive of DC and audio interfaces (the DC

interface can connect the adapter and the AUDIO

OUT can connect the speaker)

·bilingual (16 or more languages);

•with remote control;

•with full and semi auto scenarios modes

2 CPR TRAINER WITH TABLER pc 1 250,000.00

Specification:

CPR TRAINER WITH TABLER COMPUTER -BT

SEEM2

- LED Display for real-time feedback (Chest compression, Ventilation)
- Chest compression Total number, Good
 number, Depth, Speed, Incomplete recoil, Hand
 position
- Ventilation Total number, Good number,

Volume, Rate

- · Sound, LED ON / OFF
- · Head tilt-Chin lift Maneuver, Airway opening
- Visible Chest rising during ventilation
- Semi-permanent use of AED training pads with embedded magnets in manikin (Offering magnetic stickers)

SOFTWARE

- Preloaded into Tablet Computer
- Connect up to 6 manikins at the same time
- Editable guidelines
- Various Training modes: Game mode, Training mode, Evaluation mode
- Training for Chest Compression and Ventilation
- ? Count Total Number and Correct Number of Compressions Count Total volume and number of
- Assessment results exportable

7 (00000)				119,000.00
3 Electric Hospital Bed	рс	2	59,500.00	110,0001

Specification:

ventilation

The YA-D5-5 bed has all the necessary functions of a standard ICU Antbed, ergonomic design, elegant appearance, and economical purchase in the hospital. The four-piece long guardrail design prevents the patient from falling and is safer.

Main features

- Bed Frame Electrophoresis and powder coating
- Bed platform ABS material bed platform
- Motor Quiet and robust electric actuators provide reliable operation
- Hand remote controller of all electrically operated functions
- Handrails Four split side rail, drop down under the bed platform
- Detachable head/footboard with easy lock
- Castors Central brake system with a wheel diameter of 125mm
- Auto-counter to provide the patient from sliding onto foot end
- Manual CPR on both sides(optional)
- Angle indicator With angle indicator embedded in the railing for back and Trendelenburg adjustment

Technical parameter

Model

YA-D5-5

Size

2200*1060*510mm (86.6? x 41.7? x 20?)

Lying surface

1960*900mm (77.1? x 35.4?)

Overall Height

510-800mm (20? - 31.4?)

Back section adjustable 0° to 75°

Knee section adjustable 0° to 40°

Trendelenburg

0?12°

Reverse-Trendelenburg 0?12°

Safe working load

225kg?496 lbs?

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4 Female Catheterization Trainer	рс	1	230,000.00	230,000.00

Specification:

FEMALE CATHETERIZATION TRAINERS

Limbs & Things 60851 Female Catheterization

Trainer

The Female Catheterization Trainer allows the

trainee to learn urinary catheterization

techniques as well as care of a pre-inserted

suprapubic catheter via the pre-ported bung. The

feel of the catheter passing along the urethra into

the bladder corresponds closely to real life.

REALISM

? Supple urethra and resistant sphincter

providing realistic response

VERSATILITY

? Ability to view catheter path

? Non-drip valve

? Reusable double-sleeve catheter

packaging is supplied for teaching aseptic

technique

? Syringe supplied with water-based

lubricant to simulate proprietary local

anaesthetic gel

CLEANING

? Skin surface is washable using soap &

water

SAFETY

? Product is latex free (catheters provided

contain latex)

ANATOMY

? Soft labia allow trainees to practice

parting using aseptic no-touch technique

	7			
5 High Fidelity Simulator (HFS)	unit	1	8,300,000.00	8,300,000,00

Specification:

Specifications for High Fidelity Adult Simulator

Software:

- · Physiologically modelled
- Validated Physiological modelling
- Pharmacology modeling for drugs: with Pharmacokinetic and Pharmacodynamic programming for at least 60 medications.
- Pharmacology modeling must be automatic, dose dependent and follow appropriate time course of administered medication/s.
- Software must provide for ability to introduce pre-programmed conditions with or without a scenario running.

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- Software must be able to run additional scenarios while a scenario is already running.
- Software should run a separate patient profile from the medical scenario.
- Must be able to program scenarios without the simulator connected.
- Software must be pre-loaded into laptop/tablet computer.

Manikin/Simulator:

- · Adult Patient Simulator 188 cm length.
- 45.5 kg weight maximum
- Wireless patient monitor shall be an All-in-One Computer at least 21" monitor connected via

WiFi

- Material: High quality rubberized material throughout the manikin
- Head & Face: Lifelike skin with "hair" on the head and eyebrows for realism, not molded or painted hair
- No hard plastics should be visible on the simulator for better wear and tear, low chance of cracking of the simulator.

Simulator Features:

Airway:

- Anatomically realistic upper airway modeled from actual CT scan of real human.
- · Allows for intubation: orotracheal and nasotracheal, with detection of right mainstem intubation
- · Gastric Distension with esophageal intubation
- · ET Tube, LMA, Combitube and other airway adjuncts
- BVM Ventilation
- Emergency Airway Procedures: needle cricothyrotomy, transtracheal jet ventilation, retrograde wire techniques and cricothyrotomy.
- Must feature the following difficult airway: tongue swell, bronchial occlusion

Articulation:

· Articulated elbows, and knees (bi-lateral).

Breathing:

- Ability to exhale carbon dioxide.
- · Bilateral or unilateral chest rise and fall
- · Spontaneous breathing

- · Bilateral Chest tube insertion (sensored) with fluid output
- Bilateral Needle decompression generates changes in pulmonary mechanics and gas exchange
- Esophageal intubation fully supported with gastric distention.
- · Breathing/Lung sounds must include all the following: Normal, crackles, diminished, wheezing.
- · Lung sounds can be independently controlled.
- · Integrated SpO2 probe with simulated patient monitor

Circulation:

- · Bilateral carotid, brachial, radial, femoral, popliteal, and dorsalis pedis pulses
- (14 pulse sites minimum)
- · Decrease of systolic blood pressure beyond certain threshold automatically cause pulse deficit
- · Pulses synchronized with ECG
- · ECG monitoring with real ECG monitor possible
- Blood pressure can be measured by palpation and auscultation.
- · Hemodynamic monitoring for the following:
- o Arterial Blood Pressure
- o Left Ventricular Pressure
- o Central Venous Pressure
- o Right Atrial Pressure
- o Right Ventricular Pressure
- o Pulmonary Artery Pressure
- o Pulmonary Artery Occlusion
- o Thermodilution Cardiac Output

Cardiac:

- Cardiac Sounds must include ALL of the following: Normal, S3, S4, S3 and S4, Early Systolic Murmur, Mid Systolic Murmur, Late Systoloic Murmur, Pan Systolic Murmur, Late Diastolic Murmur.
- · 5-lead dynamic ECG Display
- · Allows for defibrillation, pacing and cardioversion using actual defibrillator
- · During live defibrillation energy is automatically detected, quantified and logged.

CPR:

- · CPR Analysis AHA 2015 Compliant with CPR Matrix Display
- Proper CPR reflected in physiologic feedback of patient (i.e. changes in patient monitor display when CPR is performed)
- Proper CPR results in changes in circulation, cardiac output, central and peripheral blood pressure, and carbon dioxide return.

Neurological:

- · Reactive Pupils and blinking eyes
- Convulsions

Pharmacology System

- · Automatically calculates intravenous and inhaled medications for at least 60 drugs
- · Responses are automatic, dose dependent and follow appropriate time course

Secretions:

· Eyes, nose and mouth

Sounds:

- · Heart, Breath and Bowel sounds
- Vocal Sounds
- · Other sounds can be provided via wireless microphone

Trauma

- · Bleeding and fluid drainage linked to physiology
- · Two simultaneous bleeding sites
- 1.5 liter blood tank capacity minimum
- · Limbs can be removed at knees and elbows to support amputation scenarios

Urological:

- · Interchangeable male and female genitalia
- · Urine output
- · Rate and flow of urine controlled by instructor.

Vascular Access:

- IV insertion supported in right arm: cephalic, basilic and antebrachial veins
- · IO site on anterior tibia
- · Right jugular IV line for infusions

Scenarios and Patient Profile:

- · At least 2 patient profiles separate from scenarios
- · Scenarios programming should run over or in conjunction with patient profile (i.e. patient affects scenario outcome)
- · All scenarios provided must be evidence based and have the following:
- o Synopsis
- o Scenario Programming
- o Patient History
- o SBAR Handoff Report
- o Healthcare Provider Orders
- o Learning Objectives
- o Learning Performance Measures
- o Preparatory Questions
- o Suggested Equipment and Supplies needed
- o Facilitator Notes
- o Debriefing Points
- o Teaching Q & A
- o Clinical References (Evidence Based)

Included Scenarios: 4 Scenarios

- 1. Anaphylaxis
- 2. Heart failure with pulmonary edema
- 3. Severe young asthmatic
- 4. Subdural hematoma

Product Training:

- · Must include on-site product training for 14 personnel
- Training to be conducted over 2 days on the use of the simulator/scenario and patient programming/basic maintenance/on-off procedures.

6 TUBE FEEDIN TRACHEOSTO SUNCTIONING BT-CSIS		pcs	1	550,000.00		550,000.00
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Specification:

TUBE FEEDING & TRACHEOSTOMY CARE &

SUNCTIONING TRAINING MODEL- BT-CSIS

Various training with one simulator

Tube feeding. PEG care. Tracheostomy care.

Suction training can performed in 1 simulator

- Realistic training with anatomically correct

structures.

- Oral/Nasal feeding tube injection.
- Check tube placement by auscultation with stethoscope.
- Practicing with a real liquid food
- Easy to maintain; Detachable stomach and trachea.
- Positioning with a stand by adjusting the angle.

(0°, 21~45°, 90°)

- Checking tube placement through transparent

window

- Training tube feeding, PEG care, tracheostomy

care, suction, gastrostomy tube care

- Adult upper torso: 7.8? (310×700×238?)

- Storage case: 7? (380×820×270?)

- Total : Approximately 15?

	TOTAL			9,659,000.00				
Purpose: CoN	Purpose: CoN classroom for students							
Checked by:] /							
	ELIZABETH S. QUEVEDO	ALICIA M. FLORES M.CA						
	TWG - Laboratory Equipmen	HEAD, BUDGET OFFICE ७٩						
Signature:	Prepared by:	Noted by:	Approved by:					
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Designation:	`	UNIT HEAD, F	PROJECT LEADER	PRESIDENT, VSU				