

Supply of Medical Equipments (Biomedical Waste Autoclaves 60 L for DH/SDH, 40L for CHC and 20 L for PHC and Biomedical Shredder 25kg/hr for DH/SDH) to Department of Health and Family Welfare, Government of Mizoram under Mizoram Health System Strengthening Project (MHSSP); e-Sourcing reference: (ITB/2025/55990)

****Please submit the compliance sheet in Company (if it's a Manufacturer)/OEM's (if it's not a Manufacturer) letterhead duly signed by the authorised signatory**

Sl. No	UNOPS Minimum Technical Requirements	Compliance (Yes/No)	Remarks
1	Vertical Autoclave - Steam jacketed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Equipment should be designed for sterilization of regulated biomedical waste generated from hospital for destruction of bacteria and related organism (Spores).		
Product Eligibility Criteria:			
1	Should be CE certified and BIS approved product.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Manufacturer should be ISO certified for quality standards.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Shall meet General Requirements of Safety for medical devices from a competent authority.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Should have valid electrical and functional safety test report from ERTL / BIS or test report provided by Govt.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Copy of the certificate/test report shall be produced along with the technical bid	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Chamber Volume:			
1	Should have chamber volume of aprox. 60 Litres ($\pm 10\%$) for DH and SDH, 40 Litres ($\pm 10\%$) for CHC & 20 Litres ($\pm 10\%$) for PHC	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Should have a triple walled construction and steam jacketed type. (Operating a vacuum autoclave, medical waste shall be subjected to a minimum of three pre-vacuum pulse to purge the autoclave of all air.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	The working chamber, steam jacket, outer chamber and the lid should be made of SS 316 grade.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Should have water inlet and outlet valves.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Should have a water level gauge.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Should have gauges for measuring inner and outer steam pressure.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Should have an inner temperature indicator.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	Should have automatic pressure control switch, safety valve and eject valve.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9	Should have joint-less silicone gasket, with BIS rating	<input type="checkbox"/> Yes <input type="checkbox"/> No	

10	Should have automatic low water protection (cut off with audible alarm) and should not use high voltage earthing system.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	Should have 121°C working temperature at 15 psi pressure per autoclave residence time of not more than 45 minutes or 135°C working temperature at 31 psi pressure per autoclave residence time of not more than 30 minutes. The air removed during the pre-vacuum, cycle should be decontaminated by means of HEPA and activated carbon filtration, steam treatment, or any other method to prevent release of pathogen	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12	Chamber volume for 60 Liters should be approximately 375mm diameter and 550mm depth. For 40 Liters should be approximately 325mm diameter and 500mm depth. For 20 Liters should be approximately 275mm diameter and 350mm depth	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13	Should have foot operated lid opening with radial locking lid.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
14	Should have vacuum system with minimum vacuum of 6 inches mercury (- 0.2 kg/ cm ²)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15	Should supply minimum 2 nos of bins of compatible & suitable size for autoclave.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16	Water inlet and outlet pipe should be provided and connections should be done.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17	The piping and the fittings are of stainless steel and brass.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18	Epoxy powder coated compatible stand to place Autoclave	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Spore testing			
1	The autoclave should completely and consistently kill the approved biological indicator at the maximum design capacity of each autoclave unit. Biological indicator for autoclave shall be Geobacillusstearothermophilus spores using vials or spore Strips; with at least 1X10 ⁶ spores.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	The pressure test certificate should be submitted with the bid.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
The equipment (Autoclaves) should have following features:			
1	Heating Element, should be BIS rating	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Pressure Gauge	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Digital Temperature & Pressure Indicator	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Temperature recorder with printing facility	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Steam release valve	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Door lock	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Safety valve	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	User control	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9	Timer Alarm	<input type="checkbox"/> Yes <input type="checkbox"/> No	

10	Water Level Indicator	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	Biohazard symbol	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12	Warranty: 3 years on-site comprehensive warranty	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13	Documentation: 1. User's Manual, 2. Log-Book Epoxy powder coated compatible stand to place Autoclave	<input type="checkbox"/> Yes <input type="checkbox"/> No	
14	Accessories required: Heating Element- 05 Nos, should be BIS rating	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15	Spare Parts & Consumables- use only genuine OEM-approved spare parts	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16	Power Input voltage- 220V AC, 50Hz, single-phase fitted with Indian plug of appropriate rating.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

UNOPS Minimum Technical Requirements of Biomedical Waste Shredder (25Kg / hr)- For DH/SDH				
General			Compliance (Yes/No)	Remarks
1. Use				
1.1	Overview of Functional Requirement	A closed system shredder designed for shredding of recyclable plastic hospital where the final treated waste should be non- reusable & non recognizable and should be reduced to 70 to 80% of the volume.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Standards and Safety				
2. Quality Standard relating to				
2.1	Product	a) Product should be CE or BIS approved product. b) Cutter motor should be ISI marked. c) Should be CPCB approved with compliance under Gazette Notification 1998 and revisions there upon.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.2	Manufacturer	Should be ISO 9001 certified for quality standards.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.3	Electrical Safety	Should conform to the standards for electrical safety as per BIS.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.4	Test certificates	Test certificates from Govt. approved laboratory or NABL approved laboratory for Steel grade certificate should be furnished in the technical bid.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Technical				
3. Technical requirements, desirable characteristics:				

3.1	Operational requirement	<ol style="list-style-type: none"> 1. Should be of robust design with minimum maintenance requirement. 2. Should be properly designed and covered to avoid spillage and dust generation. It should be designed such that it has minimum manual handling. 3. The hopper and cutting chamber of the shredder should be so designed to accommodate the waste bag full of biomedical waste. 4. The shredder blade should be highly resistant and should be able to handle/ shred wet waste, especially after microwave/ autoclave/ hydroclave. 5. The motor should be connected to the shredder shaft through a gear mechanism, to ensure low rpm and safety for better gripping and cutting of the biomedical waste. 6. Should have induction motor and the minimum capacity of the motor attached with the shredder should be adequate enough for carrying out for 25 Kg/hr. This would ensure efficient cutting of the bio-medical waste as prescribed in the bio- medical waste (Management & handling) Rules. 7. Should be provided with sliding System to avoid spreading of waste during removal of collection trolley. 	<input type="checkbox"/> Yes <input type="checkbox"/> No	
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3.2	Technical characteristics:	<p>a) Capacity of Shredder: 25 Kg/Hr</p> <p>b) Type: Low Speed / Low RPM (preferably 30 to 40 rpm)</p> <p>c) Material of Construction of Outer Body: Mild Steel (M.S), 5 mm Thickness</p> <p>d) Material of Construction of Cutter : Non-Corrosive & hardened Alloy Steel</p> <p>e) Waste Feeding Platform: MS Structure having minimum 3 feet height from discharge point to ground level.</p> <p>f) Waste Feeding System : Manual Through Hopper</p> <p>g) Electric Load: 3 KW or less with at least 4HP induction motor</p> <p>h) Shaft : Double Shaft</p> <p>i) Drive : Belt or Gear Drive</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.7	Control Panel	a) Should be Pre-Wired and Powder Coated. Should be provided with auto stop/reversing, Emergency stop & Limit Switch with audio and/or visual alarm or indicator for the stoppage.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Safety Features to operate this type of device				
4.1	Operational Safeties	<p>a) Interlocking with Limit Switch</p> <p>b) Shock proof & insulated as per safety norms.</p> <p>c) Protection against scattering of shredded waste</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.2	Safeties for Overloading	<p>a) Reverse Motion to avoid overloading or jamming mechanism</p> <p>b) Motor overload protection.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.3	Automatic emergency stop	<p>a) Limit switch should be provided to switch off the Shredder if hopper lid or door of collection box is opened, so that shredder should stop automatically for safety of operator.</p> <p>b) In case of shock-loading (non-shred able material in the hopper), there should be a mechanism to automatically stop the shredder to avoid any emergency/ accident.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.4	General Safety	<p>a) The unit should be suitably designed for operator safety, mechanical as well as electrical.</p> <p>b) Anti-vibration mounting should be provided.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

5. Physical Characteristics				
5.1	Noise (in dBA) & Vibration	Low Noise (below 60 dB) and No Vibration	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.2	Heat dissipation	Should maintain nominal Temp & heat should be disbursed by a cooling mechanism.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.3	Mobility, portability	Stationary Installation Type	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Energy Source (electricity, UPS, solar, gas, water etc.)				
6.1	Power requirement	Power Input voltage- 220V AC, 50Hz, single-phase fitted with Indian plug of appropriate rating.	<input type="checkbox"/> Yes <input type="checkbox"/> No	