OTS-15 - Oxygen kit

**Description**

*Complete oxygen kit*

**Reference Picture:**

*Note: The images below are intended solely as a guiding support and should be considered as purely indicative and not restrictive of the expected item characteristics*



| Brand / Marque | |  | |
| --- | --- | --- | --- |
| Model / Modèle | |  | |
| Model code as per manufacturer classification / Numéro de référence du produit fournisseur | |  | |
| Manufacturer name / Nom du Fabricant | |  | |
| Manufacturing site / Site du Fabricant | |  | |
| Country of manufacturing / Pays de fabrication | |  | |
| Country of origin / Pays d'origine | |  | |

|  | **UNOPS Minimum technical requirements // Exigences techniques minimales de l'UNOPS** | **Complies (Yes/No) // Conforme (Oui/Non)** | **Comments/ Technical data //**  **Commentaires/Données techniques** |
| --- | --- | --- | --- |
| **A** | **Functionality and Performance / Fonctionnalité et performances** |  |  |
|  | **Medical oxygen cylinder:** |  |  |
| 1 | With a bullnose valve (CGA 540) or equivalent valve to be defined by the user with the purchase order. |  |  |
| 2 | Minimum water capacity: 2 liters |  |  |
| 3 | Filling pressure: 150 bar (minimum) |  |  |
| 4 | Test pressure: 250 bar (approx.) |  |  |
| 5 | New, made of steel or aluminum |  |  |
| 6 | Cylinders must be compatible with local filling standards |  |  |
| 7 | Marking - The standard must be stamped onto the shoulder   1. Nominal and test pressures 2. Fill pressure 3. Cylinder capacity (water liters) 4. Weight (kg) 5. Date of manufacture 6. Serial number 7. Company and country of origin |  |  |
| 8 | Color coding: according to ISO/ANSI/CGA/NFPA |  |  |
| 9 | To be delivered empty |  |  |
|  | **Integrated pressure regulator and flow control.** |  |  |
| 1 | Outlet regulator pressure 3.5 bar (Approx.) |  |  |
| 2 | Pressure regulator assembly to have inlet connections compatible with the Bullnose valve or other defined, by the user with the purchase order, valve type. |  |  |
| 3 | With an integrated pressure gauge, at least 0-200 bar. |  |  |
| 4 | Allow a flow in the range of at least 0–15 L/min. Continuous or by steps adjustment, accuracy better than 10% |  |  |
| 5 | Outlet connection standard DISS, male, with oxygen tubing adapter, the user reserves the right to require a different outlet connection with the purchase order. |  |  |
|  | **At least following accessories:** |  |  |
| 1 | Disposable adult (1 pc) and infant (1 pc) BVM Resuscitator |  |  |
| 2 | Adult (1 pc) and infant (1 pc) resuscitation mask |  |  |
| 3 | Pack of disposable Airways |  |  |
| 4 | Adult (1 pc) and Pediatric (1 pc) disposable oxygen mask, partial re-breathing and tube.   * 1. Partial-rebreathing masks, vented and fitted with a reservoir for fresh air/oxygen mixture, connected with the gas supply.   2. Supplied with a detachable reservoir for fresh gas, connected with the gas inlet, minimum volume 0.5 l for infant masks and 0.75 l for pediatric/adult masks.   3. Made of non-toxic PVC,latex free.   4. Adjust nose clip to ensure comfortable fit.   5. Comfortable tight seal to the face of the patient.   6. Standard air/oxygen inlet, compatible with breathing circuits   7. Fitted with elastic strap fixing   8. The reservoir shall be fitted with an inlet valve |  |  |
| 5 | Disposable thermal blanket (1 pc) |  |  |
| 6 | Emergency Scissors (1 pc) |  |  |
| 7 | Mouth Opener (for emergency rescue purpose) |  |  |
| 8 | Transport bag (1 pc) |  |  |
| **B** | **Certifications and post sales included in the offered price** |  |  |
| 1 | The Supplier, included in the offered price, will provide the post sales services described in the document “OT-PS Type II post sales requirements for Medical Devices”. |  |  |
| **D** | **ANY DEVIATIONS OR SUPERIOR CHARACTERISTICS MUST BE INDICATED BELOW // TOUTE DÉVIATION OU CARACTÉRISTIQUE SUPÉRIEURE DOIT ÊTRE INDIQUÉE CI-DESSOUS\* :** | | |
|  | | |