

CLARIFICATIONS 1: ITB/NCD/0052024 - Medical Supplies for Breast and Cervical Cancer

1. Thermal Ablation Device

What is the required operating temperature range? See REQUIREMENT 18: “Benchtop device: user can adjust temperature between 60°- 120°C”...

Should it be compatible with rechargeable power sources for low-resource settings? Not necessary, but if an “handheld” device is offered, and not a “bench-top” one, an equipment which is also battery operated is requested.

Is portability a priority? If an “handheld” device is offered, YES

2. Loop Electrosurgical Excision Procedure (LEEP)

What power output is required for the electrosurgical unit? See REQUIREMENT 17 where operations mode are requested

Are specific electrode sizes needed? No. Just the type of electrodes. See REQUIREMENTS 17, 24 and 26 for details

Is compatibility with other accessories like smoke evacuators necessary? YES, sure, with the SMOKE EXTRACTOR which is offered.

3. Surgical Smoke Evacuator

What is the required suction power and filtration level (e.g., ULPA or HEPA filter)? See REQUIREMENT 16 for details

Should it be compatible with existing LEEP equipment? It should be compatible with the LEEP equipment proposed. Possibly also with the existing ones

4. Ring Forceps, Tischler Cervical Biopsy Forceps, and Lateral Wall Retractors

What material is preferred (e.g., stainless steel, titanium)? See REQUIREMENTS 16 and 21 of each device technical specification tab.

Are reusable or single-use instruments preferred? See REQUIREMENT 21 for details.

What sizes or configurations are needed for specific procedures? See REQUIREMENT 16 for details.

5. Colposcope Video System

What level of magnification is required? See REQUIREMENT 19 for details.

Should it include integrated video recording or live-streaming capabilities? Both capabilities would be preferred even if at least Video recording would be requested.

Is compatibility with external monitors or telemedicine systems required? External monitors YES since a monitor is requested. See REQUIREMENTS 18 and 26 for details.

6. Graves Speculum & Spectrum with Smoke Tube

Are there specific sizes needed (small, medium, large)? ALL 3 REQUESTED. See REQUIREMENT 16 for details.

Is smoke evacuation compatibility required? YES. See REQUIREMENT 16 for details.

7. Ultrasound Machine

Should the machine be portable or cart-based? Portable. See the Technical specifications requirements.

What probes are required (e.g., transabdominal, transvaginal)? See REQUIREMENT 16 and 20 for details.

Is compatibility with telemedicine or cloud storage needed? See REQUIREMENT 18 for details.

8. Core Biopsy Gun and Needles

What needle gauge sizes are required? See REQUIREMENT 16 for details.

Should the device support adjustable penetration depths? Preferably yes

9. Electronic Microscopes (Pathology)

What resolution and magnification levels are needed? See REQUIREMENT 16 for details.

Should it have image capture and digital storage capabilities? YES. See REQUIREMENTS 16 and 23 for details.

10. Digital BP Machine & Digital No-Touch Thermometer

Should the devices support large data storage for patient records? Preferably yes, even if not mandatory requested.

Is Bluetooth or other connectivity required? Preferably yes, even if not mandatory requested.

11. Electronic Weighing Scale with Stadiometer

What weight and height measurement ranges are required? See REQUIREMENT 17 for details.

Is portability or wall-mounting an option? Portable, See REQUIREMENTS 17, 21 and 23 for details.

12. Measuring Tape

What material is preferred (e.g., retractable or non-retractable)? See REQUIREMENTS 16 and 21 for details.

13. Electrocardiogram (ECG)

Should the device be portable or cart-based? Portable device. [See the dedicated Tech Specs for details](#)

How many leads are required (e.g., 3-lead, 12-lead)? [See REQUIREMENTS 17 and 24 for details.](#)

14. Microtome Machine (Manual Rotary)

What thickness range is required for sections? [See REQUIREMENT 17 for details](#)

Should it include a specimen cooling system? [PREFERABLY YES even if not mandatory requested](#)

15. Histology Tissue Processor and Embedding Machine

What sample throughput is required? [See REQUIREMENT 17 for details](#)

Should the devices support specific reagent types? [See REQUIREMENTS 17 and 25 for details.](#)