

The Technical Specifications are the minimum requirements that Invasive and Non-Invasive Ventilators used for the management of COVID-19 must comply to ensure quality, safety and effectiveness.

All these equipment require a source of air and oxygen to operate the internal blenders. Some of the equipment has internal air compressor but all of them require either a low flow oxygen source (e.g. oxygen concentrator) or a high flow oxygen (e.g. oxygen tank, piped oxygen). External air compressors that are oil-based, can ruin ventilator sensors because of the produced vapor.

All these equipment should be provided with accessories, consumables and spare parts as required to operate for minimum 3 months. Follow the Maintenance Guidance for replacement of accessories and consumables and safe decontamination of the reusable parts provided by the manufacturer.

Important considerations:

- Invasive Ventilators require a highly trained medical staff to perform the intubation and to set
 the pressure settings controls and alarms of the equipment. Provision must also be made in terms
 of infrastructure specially if available high pressure oxygen and / or air sources, controlled
 temperature and humidity of the environment, and availability of technical staff to perform
 troubleshooting protocols and maintain the equipment and finally for the decontamination
 procedures.
- 2. The Non-Invasive Ventilators, mainly CPAP, BPAP and High Flow oxygen systems require high controls in terms of Infection Control to reduce the risk of contagion of the health care providers by the aerosol generated, for example used of airborne precautions with respirators.

Some advantages of Non-Invasive Ventilators are avoiding intubation and easier and decontamination processes. In the case of the High Flow Nasal Cannula, it can provide a higher flow (up to 50 to 70 L/min) than a nasal cannula connected to a standard flowmeter, which is up to about 15 L/min.

Follow the Clinical Guidelines for selection of equipment for treatment of critical and severe patients in the context of COVID-19 [link].

1. Definitions and intended use.

1.1 Invasive Ventilators.

1.1.1 Patient Ventilators for Intensive Care Unit: Designed to provide temporary ventilatory and respiratory assistance to adult and paediatric patients who cannot breathe on their own or who require assistance to maintain adequate ventilation. The equipment is usually connected to a 50 psi gas supply. Some ventilators have their own air compressor but still need the oxygen source. The mixed, heated and humidified gas is delivered to the patient using a double-limb breathing circuit (one for inspiratory and one for expiratory phases). Different parameters can be controlled by the user and displayed in a screen



(e.g. Fraction of Inspired Oxygen (FiO₂), trigger, Respiratory Rate (RR), positive end expiratory pressure (PEEP), control modes).

1.1.2 Patient Ventilators for Transport/Mass-casualty Care: Similar to an Intensive Care Ventilator, it is capable to provide temporary ventilatory assistance by controlling flow, rate, FiO₂ and PEEP. The degree of portability (including weight and manageability), as well as is battery life are important considerations. The equipment should have the ability to operate on external battery for four hours, minimise the oxygen consumption, and operate without any compressed gas source (e.g. by a turbine). It should work when connected to a 50 psi or a low flow oxygen supply. Simplicity of use and low cost are advantages in front of advanced ventilatory features.

1.2 Non-Invasive Ventilators.

1.2.1 Continuous Positive Airway Pressure (CPAP): Designed to apply continuous positive airway pressure to non-intubated adult or paediatric patient. Commonly used in spontaneously-breathing patients who require short term mechanical assistance.

These units can deliver air or a mixture of air and oxygen (O_2) at high flow rates and a single set pressure, typically between 3 and 20 cmH₂O, through a circuit and patient interface. The effectiveness of the treatment is closely related to the proper sealing of the nasal or oral-nasal mask to the face of the patient.

1.2.2 Bi-level Positive Airway Pressure (BiPAP or BPAP): Designed to apply continuous positive airway pressure to non-intubated adult or paediatric patient, allowing clinicians to adjust two different pressures during the inspiratory and expiratory phases of a breath. Commonly used in spontaneously-breathing patients who require short term mechanical assistance.

These units can deliver air or a mixture of air and oxygen (O₂) at high flow rates. The higher inspiratory pressure off-loads the patients breathing effort while the lower pressure helps to preserve an adequate alveolar volume and prevent collapse of unstable alveolar units during-expiration. The effectiveness of the treatment is closely related to the proper sealing of the nasal or oral-nasal mask to the face of the patient. There are also more novel helmets that can be used as interface.

1.2.3 High Flow Nasal Cannula (HFNC); or, Heated Humidified High Flow (HHHF) therapy; or, High Flow Nasal Oxygen (HFNO): Designed to deliver high flow rates with heated humidification to non-intubated adult or paediatric patient. Warm and humidify gas decreases airway inflammation and reduce the caloric expenditure in acute respiratory failure. The maximum flow varies according to the manufacturers going up to 50 to 70 L/min. A specialized flowmeter and a heated humidifier are incorporated into the unit to



deliver heated and humidified gases, through a circuit and patient interface. There is a low level of positive pressure at the patient's airway. The FiO_2 can be set by the clinician. The effectiveness of the treatment is related to the high flow generated rather than the proper sealing of the nasal mask to the face of the patient (reduced exhaled air dispersion).



2. Technical specifications for procurement.

2.1 Invasive Ventilators.

	2.1.1	Intensive-Care Patient Ventilator, for adult and paediatric
1	General technical	Inlet gas: From Internal Air Compressor + External low pressure Oxygen (concentrators),
	requirements	preferable.
		→ If two high-pressure input ports (50 psi), to provide a means to limit reverse gas flowrate
		(leakage) and cross leakage when flowrate is < 100 mL/min.
		→ Each high-pressure input port with a filter having a pore size <=100 μm.
		Mechanical safe valve that opens at 80 cm H ₂ O.
		Internal function testing/leak testing.
		Event log for errors traceability, preferable.
		All parts withstand high disinfection procedures.
		At least IP21 degree of protection to the harmful ingress of water.
		Polyvinyl chloride (PVC) materials must be avoided in the patient gas pathway.
2	Ventilation	Continuous Mandatory ventilation (CMV) pressure regulated volume control, or with
	modes	Pressure Control (PC) or volume control (VC);
		Synchronized Intermittent Mandatory Ventilation (SIMV) with VC/PC capacity and Pressure
		Support Ventilation (PSV) Non-Invasive Ventilation capability.
3	Monitored and	FiO ₂ : 21 to 100%;
	controlled	Tidal Volume: 20 - 2,000 mL, ideally;
	parameters (by	→ At least one setting of 400 mL +/- 10 mL; alternative settings from 250 to 800 mL,
	user)	increments of 50 mL.
		Inspiratory flow: 1 - 160 [L/min];
		Inspiratory pressure: 0 – 40 [cmH ₂ O], increments of 5 [cmH ₂ O];
		I:E ratio: 1:1, 1:2, 1:3;
		RR: 10 to 60 [breaths/min];
		Inspiratory pause manoeuvre capability to measure plateau pressure
		Peak pressure limited to 2 [cmH ₂ O] below Plateau Pressure;
		PEEP: 5 to 20 [cmH ₂ O], increments of 5 [cmH ₂ O].
		Pressure Control/Pressure Support with an adjustable driving pressure range between 0 to
		50 cmH ₂ O (i.e. 0 cmH ₂ O during PSV allows for CPAP, whereas during PCV at maximum PEEP
		of 20 cmH ₂ O can achieve a peak pressure of 70 cmH ₂ O.
4	Displayed	3 scalar waveforms: Pressure, Volume and Flow.
	parameters	3 loop (axis) displays: Pressure-Volume, Flow-Volume and Pressure-Flow.
	(colour and	Status indicators for ventilator mode, battery status, patient data, alarm settings.
	graphic are	FiO ₂ .
	preferable)	Airway pressures (Peak, Plateau Mean and PEEP).
		Tidal volume (Inspired and Expired).
		Minute volume (Inspired and Expired).
		I:E ratio.
		RR (Spontaneous and Mechanical)



		End tidal CO ₂ .	
5	Alarms, related to	Adjustable, visual and audible for:	
	gas delivered	High/Low FiO ₂ ;	
		High/Low Inspiratory pressure and PEEP;	
		High/Low Tidal Volume (not achieved or exceeded);	
		Apnoea, adjustable from 10-30 sec;	
		High/Low Respiratory Rate;	
		Continuously high pressure/occlusion;	
		Breathing circuit disconnect.	
6	Alarms, related to	Visual and audible for:	
	equipment	Gas supply failure;	
	operation	Power failure;	
		Low battery.	
7	Consumables,	Breathing circuits: double-limb with standard outlet/inlet	30 per equipment.
	labelled	connectors with 22 mm of outside diameter.	
	"single use",	Bacteria filters, if applicable.	30 per equipment.
	(included and		
	mentioned in a		
	disaggregated		
	list)		
8	Accessories,	Breathing circuits: double-limb with standard outlet/inlet	10 per equipment.
	reusable	connectors with 22 mm of outside diameter. Expiratory housing with	
	(included and	built-in bacteria filters; as well as the possibility to accommodate	
	mentioned in a	Heat Moisture Exchangers (HMEs).	
	disaggregated	Flex adapters for placement between the circuit way-adapter and	10 per equipment.
	list)	the ETT (protects from unnecessary trauma from eve small circuit	10 per equipment.
		repositioning.	10 per equipment.
		Exhalation valve.	10 per equipment.
		CO ₂ sensors.	1 per equipment.
		Servo-controlled Heated Humidifier; alternatively access to HMEs.	1 per equipment.
		Internal air compressor capacity (or high-performance turbines).	As required to
		Connector 30 mm, if required for the gas exhaust port.	operate.
		Standard connectors to air and oxygen wall pipelines.	
9	Spare parts		
	(included and		
	mentioned in a		
	disaggregated		
	(list)		
10	Portability	Mounting tray and support stand (cart for transport with at least 2 cas	tors fitted with
		breaks).	
11	Power supply,	Operates from AC power electric line: 100 to 240 V~ / 50 to 60 Hz.	
	Voltage,	In built rechargeable battery.	
	Frequency and	Automatic switch from AC power electric-line mode to battery operati	ng mode and vice
	Plug vary across	versa.	
	the countries	Continuous in battery operating mode with standard ventilation not le	ess than 1 hour.
		Total re-charging time not greater than 6 hours.	
		Equipment must be connected to a reliable and continues source of e	energy.



12	Documentation	Instruction for use; service manual and product information to be provided in English	
	(included)	language, at least.	
13	Primary	Labelling on the primary packaging to include: Name and/or trademark of the manufacturer.	
	packaging	Model or product's reference.	
		Information for particular storage conditions (temperature, pressure, light, humidity).	
14	Standards, for the	Certified Quality Management System for medical devices (e.g. ISO 13485 or Good	
	manufacturer	Manufacturing Practice (GMP)).	
15	Standards, for the	Free Sales Certificate (FSC) provided by any of the following countries:	
	product	Australia, Canada, Japan, USA and European Community (e.g. FDA and/or CE certificate	
	performance	given by a third certified party for the specific medical devices proposed (no only declaration	
		of conformity).	
		If the FSC comes from other national regulatory agency, it should be supported by the	
		following certificates of quality performance, alternative national equivalent test are	
		acceptable:	
		ISO 18562-1:2017: Biocompatibility evaluation of breathing gas pathways in healthcare	
		oplications — Part 1: Evaluation and testing within a risk management process.	
		ISO 20789:2018: Anaesthetic and respiratory equipment — Passive humidifiers.	
		ISO 80601-2-12:2020 Medical electrical equipment — Part 2-12: Particular requirements for	
		basic safety and essential performance of critical care ventilators.	
		O 80601-2-74:2017 Medical electrical equipment — Part 2-74: Particular requirements for	
		asic safety and essential performance of respiratory humidifying equipment.	
		O 80601-2-79:2018 Medical electrical equipment — Part 2-79: Particular requirements for	
		basic safety and essential performance of ventilatory support equipment for ventilatory	
		impairment.	
		IEC 60601-1-1:2015 Medical electrical equipment - Part 1-1: General requirements for safety	
		- Collateral standard: Safety requirements for medical electrical systems.	
		IEC 60601-1-2:2014 Medical electrical equipment - Part 1-2: General requirements for basic	
		safety and essential performance - Collateral standard: Electromagnetic compatibility -	
		Requirements and tests.	
16	Warranty	Minimum 2 years.	
10	vvairanty	Availability of accessories, consumables and spare parts for at least 2 years.	
		Any variation to be indicated in the offer.	

	2.1.2	Patient Ventilators for Transport/Mass-casualty Care, for adult and paediatric
1	General technical	Medical air compressor integral to unit, with inlet filter.
	requirements	External Low Flow Oxygen, preferable.
		→ If oxygen high-pressure input port (35 to 50 psi).
		→ Each high-pressure input port with a filter having a pore size <=100 µm.
		O ₂ - air mixture accuracy of 4%.
		O ₂ consumption with 660 L (E) tank:
		→ 104 minutes with 16 L/min, FiO ₂ 50%.
		→ 280 minutes with 6 L/min, FiO ₂ 50%.
		O ₂ conserve feature, preferable.



		Internal function testing/leak testing.	
		Event log for errors traceability, preferable.	
		All parts withstand high disinfection procedures.	
		At least IP21 degree of protection to the harmful ingress of water.	
		Polyvinyl chloride (PVC) materials must be avoided in the patient gas p	
2	Ventilation	Continuous Mandatory ventilation (CMV) with Volume Control (VC) an	d Pressure Control
	modes	(PC);	
		Synchronized Intermittent Mandatory Ventilation (SIMV) with VC/PC of	apacity and Pressure
		Support Ventilation (PSV);	
		CPAP/PSV;	
		Non-Invasive Ventilation capability.	
3	Monitored and	Air and externally supplied oxygen mixture ratios fully controllable.	
	controlled	FiO ₂ : 21 to 100%;	
	parameters (by	Tidal Volume: 20 - 1,000 mL, ideally;	
	user)	→ At least one setting of 400 mL +/- 10 mL; alternative settings from	n 250 to 800 mL,
		increments of 50 mL.	
		Inspiratory pressure: 15 – 40 [cmH ₂ O], increments of 5 [cmH ₂ O];	
		I:E ratio: 1:2;	
		RR: 10 to 60 [breaths/min].	
4	Displayed	Real time scalar waveforms for flow, volume and pressure at least 2 si	-
	parameters	Status indicators for ventilator mode, battery status, patient data, alar	m settings.
	(colour and	Airway pressure (Mean).	
	graphic are	Tidal volume (Expired).	
	preferable)	Minute volume (Expired).	
		I:E ratio.	
		Inspiration and expiration times.	
		Spontaneous Minute Volume.	
		RR.	
		FiO ₂ .	
		Occlusion pressure detection;	
		Air and oxygen pressure;	
		Spontaneous ventilation;	
		Leak percentage;	
5	Alarms, related to	Visual and audible for:	
	gas delivered	High/Low FiO ₂ ;	
		High/Low Flow;	
		High/Low Inspiratory pressure; Breathing circuit disconnect;	
		•	
6	Alarms, related to	Apnoea. Visual and audible for:	
0	equipment	Gas supply failure;	
	operation	Power failure;	
	operation	Low battery.	
7	Consumables		20 per equipment
7	Consumables,	Breathing circuits: double-limb with standard outlet/inlet connectors with 22 mm of outside diameter.	30 per equipment.
	labelled		20 nor oguinne
	"single use",	Bacteria filters, if applicable.	30 per equipment.
	(included and		



	mentioned in a disaggregated list)		
8	Accessories, reusable (included and mentioned in a disaggregated list)	Breathing circuits: double-limb with standard outlet/inlet connectors with 22 mm of outside diameter. Expiratory housing with built-in bacteria filters. Exhalation valve. CO ₂ sensors. Internal air compressor capacity (or high-performance turbines). Standard connectors to air and oxygen wall pipelines.	10 per equipment. 10 per equipment. 1 per equipment. 1 per equipment. As required to operate.
9	Spare parts (included and mentioned in a disaggregated list)		
10	Portability	Portable equipment with mechanical strength to lever rough handling	
11	Power supply, Voltage, Frequency and Plug vary across the countries	Operates from AC power electric line: 100 to 240 V~ / 50 to 60 Hz. In built rechargeable battery. Automatic switch from AC power electric-line mode to battery operativersa. Continuous in battery operating mode with standard ventilation not leterated to be a standard ventilation no	
		Equipment must be connected to a reliable and continues source of	energy.
12	Documentation	Instruction for use; service manual and product information to be prov	
	(included)	language, at least.	
13	Primary packaging	Labelling on the primary packaging to include: Name and/or trademark of the manufacturer. Model or product's reference. Information for particular storage conditions (temperature, pressure, light, humidity).	
14	Standards, for the manufacturer	Certified Quality Management System for medical devices (e.g. ISO 13-Manufacturing Practice (GMP)).	485 or Good
15	Standards, for the product performance	Free Sales Certificate (FSC) provided by any of the following countries: Australia, Canada, Japan, USA and European Community (e.g. FDA and/or CE certificate given by a third certified party for the specific medical devices proposed (no only declaration of conformity) If the FSC comes from other national regulatory agency, it should be supported by the following certificates of quality performance, alternative national equivalent test are acceptable: ISO 18562-1:2017: Biocompatibility evaluation of breathing gas pathways in healthcare applications — Part 1: Evaluation and testing within a risk management process. ISO 20789:2018: Anaesthetic and respiratory equipment — Passive humidifiers. ISO 10651-5:2006: Lung ventilators for medical use — Particular requirements for basic safety and essential performance — Part 5: Gas-powered emergency resuscitators. ISO 80601-2-74:2017 Medical electrical equipment — Part 2-74: Particular requirements for basic safety and essential performance of respiratory humidifying equipment. IEC 60601-1-1:2015 Medical electrical equipment - Part 1-1: General requirements for safety - Collateral standard: Safety requirements for medical electrical systems	



		IEC 60601-1-2:2014 Medical electrical equipment - Part 1-2: General requirements for basic safety and essential performance - Collateral standard: Electromagnetic compatibility - Requirements and tests.
16	Warranty	Minimum 2 years.
		Availability of accessories, consumables and spare parts for at least 2 years.
		Any variation to be indicated in the offer.

2.2 Non-Invasive Ventilators.

	2.2.1	Continuous Positive Airway Pressure (CPAP), for adult and paediatric	
1	General	Maintains low flow and continuous positive pressure in airway.	
	requirements	Controls to be easy to operate, numbers and displays to be clearly visi	ble.
		Inspiration trigger for auto start.	
		Leakage compensation capability.	
		Servo control of the warming, preferable.	
		Humidity compensation system, preferable.	
		FiO ₂ : 21 to 100 %.	
		Flow: 4 to 40 L/min.	
		Pressure: 4 to 20 mbar.	
		Pressure support: 0 - 45 [cmH₂O].	
		Monitoring of the air temperature: precision ± 1 °C.	
		Noise level to be less than 35 dbA at mid pressure range.	
		In built air compressor.	
		All parts withstand high disinfection procedures.	
2	Displayed	Gas temperature; FiO ₂ ; Tidal volume; Inspiratory pressure; Inspiratory	and Expiratory time;
	parameters	I:E ratio.	
	(colour and		
	graphic are		
	preferable)		
3	Alarms, related to	Visual and audible for:	
	gas delivered	High/Low Temperature;	
		Breathing circuit disconnect.	
4	Alarms, related to	Visual and audible for:	
	equipment	Lack of water;	
	operation	System failure;	
		Air filter to be replaced;	
		Power failure;	
		Low battery.	
5	Consumables,	Inlet bacteria filters, if applicable.	30 per equipment.
	labelled		
	"single use",		
	(included and		
	mentioned in a		



	disaggregated list)		
6	Accessories, reusable	Nasal mask for adult and paediatric; withstands high level disinfection and steam sterilization.	10 per equipment.
	(included and mentioned in a	Helmet for adult and paediatric; withstands high level disinfection and steam sterilization.	5 per equipment.
	disaggregated	Flowmeter, graduated in L/min.	2 per equipment.
	list)	Humidifier. Connectors for air and oxygen.	2 per equipment. As required to operate.
7	Spare parts (included and		
	mentioned in a		
	disaggregated	\X ()	
	list)		
8	Portability	Portable equipment with mechanical strength to lever rough handling	<u>, </u>
9	Power supply,	Operates from AC power electric line: 220 to 240 V~ / 50 to 60 Hz. In built rechargeable battery.	
	Voltage, Frequency and	Automatic switch from AC power electric-line mode to battery operat	ing mode and vice
	Plug vary across	versa.	ing mode and vice
	the countries	Equipment must be connected to a reliable and continues source of	energy.
10	Documentation	Instruction for use; service manual and product information to be pro	vided in English
	(included)	language, at least.	
11	Primary	Labelling on the primary packaging to include: Name and/or trademar	k of the manufacturer.
	packaging	Model or product's reference.	light humiditu)
12	Standards, for the	Information for particular storage conditions (temperature, pressure, Certified Quality Management System for medical devices (e.g. ISO 13	
	manufacturer	Manufacturing Practice (GMP)).	
13	Standards, for the	Free Sales Certificate (FSC) provided by any of the following countries	
	product	Australia, Canada, Japan, USA and European Community (e.g. FDA and	
	performance	given by a third certified party for the specific medical devices propose of conformity)	ed (no only declaration
		If the FSC comes from other national regulatory agency, it should be s	upported by the
		following certificates of quality performance, alternative national equ	
		acceptable:	
		ISO 18562-1:2017: Biocompatibility evaluation of breathing gas pathw	-
		applications — Part 1: Evaluation and testing within a risk managemen	•
		ISO 20789:2018: Anaesthetic and respiratory equipment — Passive hu ISO 17510:2015 Medical devices - Sleep apnoea breathing therapy - N	
		accessories.	iasks and application
		IEC 60601-1-1:2015 Medical electrical equipment - Part 1-1: General r	equirements for safety
		- Collateral standard: Safety requirements for medical electrical syster	ns.
		IEC 60601-1-2:2014 Medical electrical equipment - Part 1-2: General r	
		safety and essential performance - Collateral standard: Electromagnet	tic compatibility -
14	Warranty	Requirements and tests. Minimum 2 years.	
14	Warranty	Availability of accessories, consumables and spare parts for at least 2 v	vears
		Attanasmy of accessories, consumasies and spare parts for at least 2	, ca. 3.



Any variation to be indicated in the offer.

	2.2.2	Bi-Level Positive Airway Pressure Unit (BiPAP), for adult and paediat	ric
1	General	Maintains low flow and continuous positive pressure in airway.	
	requirements	Provides a higher positive pressure airway upon inhalation than upon	
		Controls to be easy to operate, numbers and displays to be clearly visi	ble.
		Oxygen inlet port cable to enter 15 L/min, preferable.	
		Pressure ramp function required to assist falling asleep.	
		Servo control of the warming, preferable.	
		Humidity compensation system, preferable.	
		Spontaneous timing (S/T).	
		CPAP (Spontaneous), T (Timed), Pressure Assisted Control/Pressure Co	ontrol (PAC/PC),
		Volume Assured Pressure Support (VAPS), preferable.	
		FiO ₂ : 21 to 100 %.	
		Flow: 4 to 40 L/min.	
		Pressure: 3 to 25 mbar.	
		Pressure support: 0 - 45 [cmH ₂ O].	
		Trigger sensitivity range: 1-10, increments of 1 or automatic.	
		Monitoring of the air temperature: precision ± 1 °C.	
		Noise level to be less than 25 dbA at 10 cm H ₂ O.	
		In built air compressor.	
		All parts withstand high disinfection procedures.	
2	Displayed	Gas temperature; FiO ₂ ; Tidal volume; Inspiratory pressure; Inspiratory	and Expiratory time;
	parameters	I:E ratio; Mean Airway Pressure (MAP); Air leak [%].	
	(colour and		
	graphic are		
	preferable)	March and an dista fam.	
3	Alarms, related to	Visual and audible for:	
	gas delivered	High/Low Temperature;	
		High/Low Pressure; Breathing circuit disconnect;	
	. 6 0	Inlet air filter to be fitted.	
4	Alarms, related to	Visual and audible for:	
7	equipment	Lack of water;	
	operation	System failure;	
	operation	Air filter to be replaced.	
		Power failure;	
		Low battery.	
5	Consumables,	Inlet bacteria filters, if applicable.	30 per equipment.
	labelled	, ··	' ' '
	"single use",		
	(included and		



	mentioned in a disaggregated list)		
6	Accessories, reusable (included and mentioned in a disaggregated list)	Nasal mask for adult and paediatric; withstands high level disinfection and steam sterilization. Helmet for adult and paediatric; withstands high level disinfection and steam sterilization. Flowmeter, graduated in L/min. Humidifier. Connectors for air and oxygen.	10 per equipment.5 per equipment.2 per equipment.2 per equipment.As required to operate.
7	Spare parts (included and mentioned in a disaggregated list)		
8	Portability	Mounting tray and support stand with at least 2 castors fitted with br	eaks.
9	Power supply, Voltage, Frequency and Plug vary across	Operates from AC power electric line: 220 to 240 V~ / 50 to 60 Hz. In built rechargeable battery. Automatic switch from AC power electric-line mode to battery operat versa.	
	the countries	Equipment must be connected to a reliable and continues source of	
10	Documentation (included)	Instruction for use; service manual and product information to be provided in English language, at least.	
11	Primary packaging	Labelling on the primary packaging to include: Name and/or trademark of the manufacturer. Model or product's reference. Information for particular storage conditions (temperature, pressure, light, humidity).	
12	Standards, for the manufacturer	Certified Quality Management System for medical devices (e.g. ISO 13485), or Good Manufacturing Practice (GMP)).	
13	Standards, for the product performance	Manufacturing Practice (GMP)). Free Sales Certificate (FSC) provided by any of the following countries: Australia, Canada, Japan, USA and European Community (e.g. FDA and/or CE certificate given by a third certified party for the specific medical devices proposed (no only declaration of conformity) If the FSC comes from other national regulatory agency, it should be supported by the following certificates of quality performance, alternative national equivalent test are acceptable: ISO 18562-1:2017: Biocompatibility evaluation of breathing gas pathways in healthcare applications — Part 1: Evaluation and testing within a risk management process. ISO 20789:2018: Anaesthetic and respiratory equipment — Passive humidifiers. ISO 17510:2015 Medical devices - Sleep apnoea breathing therapy - Masks and application accessories. IEC 60601-1-1:2015 Medical electrical equipment - Part 1-1: General requirements for safety - Collateral standard: Safety requirements for medical electrical systems. IEC 60601-1-2:2014 Medical electrical equipment - Part 1-2: General requirements for basic safety and essential performance - Collateral standard: Electromagnetic compatibility - Requirements and tests.	
14	Warranty	Minimum 2 years.	



	Availability of accessories, consumables and spare parts for at least 2 years.
	Any variation to be indicated in the offer.

	2.2.3	High Flow Nasal Cannula (HFNC), for adult and paediatric			
1	General	Ability to generate flow from room air and mix with oxygen. The oxygen source could be a			
	requirements	oxygen concentrator or cylinder.			
		The mixed gas of air and oxygen is warmed up to 37 °C and 100% relative humidity.			
		FiO ₂ : 21 to 100 %.			
		Flow: 2 to 50 L/min (minimum).			
		Controls to be easy to operate, numbers and displays to be clearly visible.			
		Digital display of Temperature [°C], Flow [L/min], Oxygen concentration [%].			
		Humidity compensation system.			
		Noise level to be less than 35 dbA at mid pressure range.			
		Trigger sensitivity range: 1-10 cmH ₂ O, increments of 1 cmH ₂ O or automatic.			
		Monitoring of the air temperature: precision ± 1 °C.			
		Noise level to be less than 25 dbA at 10 cmH ₂ O.			
		In built air compressor.			
		All parts withstand high disinfection procedures.			
2	Displayed	Gas temperature; FiO ₂ ; Tidal volume; Inspiratory pressure; Inspiratory and Expiratory time;			
	parameters	I:E ratio; Mean Airway Pressure (MAP); Air leak [%].			
	(colour and				
	graphic are				
	preferable)	Visual and sudible for			
3	3 Alarms, related to Visual and audible for: gas delivered High/Low FiO ₂ ;				
	gas delivered	Incorrect Temperature/Humidity;			
		System leakage or blockage.			
4	Alarms, related to	Visual and audible for:			
'	equipment	Lack of water; System failure;			
	operation				
		Air filter to be replaced;			
		Power failure;			
		Low battery.			
5	Consumables,	Air filters.	30 per equipment.		
	labelled				
	"single use",				
	(included and				
	mentioned in a				
	disaggregated				
	.list)				
6	Accessories ,	Housing and patient interface for adult and paediatric; withstands	10 per equipment.		
	reusable	high level disinfection and steam sterilization.			



	(included and	Flowmeter, graduated in L/min.	5 per equipment.		
	mentioned in a	Humidifier.	2 per equipment.		
	disaggregated	Water chamber.	2 per equipment.		
	list)	Connectors for air and oxygen.	As required to		
	,	Internal air compressor capacity.	operate.		
7	Spare parts (included and mentioned in a disaggregated list)				
8	Portability	Mounting tray and support stand with at least 2 castors fitted with breaks.			
9	Power supply, Voltage, Frequency and Plug vary across the countries	Operates from AC power electric line: 220 to 240 V~ / 50 to 60 Hz. In built rechargeable battery: 12 or 24 V. Automatic switch from AC power electric-line mode to battery operating mode and vice versa. Continuous in battery operating mode withstands at least 1 hour. Equipment must be connected to a reliable and continues source of energy.			
10	Documentation (included)	Instruction for use; service manual and product information to be provided in English language, at least.			
11	Primary packaging	Labelling on the primary packaging to include: Name and/or trademark of the manufacturer. Model or product's reference. Information for particular storage conditions (temperature, pressure, light, humidity).			
12	Standards, for the manufacturer	Certified Quality Management System for medical devices (e.g. ISO 13485), Good Manufacturing Practice (GMP)).			
13	Standards, for the product performance	Free Sales Certificate (FSC) provided by any of the following countries: Australia, Canada, Japan, USA and European Community (e.g. FDA and/or CE certificate given by a third certified party for the specific medical devices proposed (no only declaration of conformity) If the FSC comes from other national regulatory agency, it should be supported by the following certificates of quality performance, alternative national equivalent test are acceptable: ISO 18562-1:2017: Biocompatibility evaluation of breathing gas pathways in healthcare applications — Part 1: Evaluation and testing within a risk management process. ISO 20789:2018: Anaesthetic and respiratory equipment — Passive humidifiers. ISO 17510:2015 Medical devices - Sleep apnoea breathing therapy - Masks and application accessories. IEC 60601-1-1:2015 Medical electrical equipment - Part 1-1: General requirements for safety - Collateral standard: Safety requirements for medical electrical systems. IEC 60601-1-2:2014 Medical electrical equipment - Part 1-2: General requirements for basic safety and essential performance - Collateral standard: Electromagnetic compatibility -			
14	Warranty	Requirements and tests. Minimum 2 years. Availability of accessories, consumables and spare parts for at least 2 years.	years.		
	Any variation to be indicated in the offe				