Technical Specification for High Frequency Advance Electrosurgical Unit

Microprocessor Controlled High Frequency Advance Electrosurgical Unit:

Should have following specifications:

1) Should be Compatible with Existing Ultrasonic Generator USG – 400.
2) Operational compatibility for all Lap/Gyn/Uro/Open Surgery.
3) Should have boot time not more than 6 sec.
4) Should have built-in regulated fan.
5) Should have LCD and Touch Screen user interface.
6) Should have memory function with characters.
7) Should have 4000 times feedback control cycle per second.
8) Should have fast spark monitor ensures smooth and reproducible cutting in varying tissue (e.g., muscle & fat)
9) Should have automatic saline detection mode.
10) Should be supplied with disposable patient plates etc.
11) Upgradable system should have Rapid Dissection and Reliable Haemostasis up to 7 mm Vessels in a single instrument.
12) Instrument recognition and automatic application of default setting for ease of use.
13) Provision for automatic mist and smoke evacuation to maintain a clear laparoscopic view reducing delays associated with compromised visualization when combined with CO2 gas insufflators.
14) HF Unit should have operational compatibility for all Lap/Gyn/Uro/GL/Open Surgery and should have minimum 16 Monopolar & Bipolar modes to cover all OR requirements, boot time not more than 6 sec, 4000 times feedback control cycle per second.
15) LCD and Touch Screen user Interface.
16) HF Unit should have fast Spark Monitor ensures smooth and reproducible cutting in varying tissue (e.g., muscle & fat).
17) High Frequency device should have CF type Protection against electric shock.
18) Device should have dedicated seal and seal & cut mode by hand activation as well foot switch without exchanging the instruments.
19) Device should have best in class versatility, up to and including 7 mm vessel sealing capability, Fast cutting speed, Fine and easy dissection. Haemostatic seal mode, Optimized grasping etc for getting less instrument usage & exchange, uninterrupted operation flow and reduced OR time.
20) The device should be FDA approved and CE certified.
21) Should be compatible with existing Ultrasonic Generator & upgradable to a Vessel Sealer up-to 7 mm.
22) Should have minimum 16 output modes.
   a. Monopolar Cut Modes:
   b. Pure cut for continuous cutting.
   c. Blend cut for continuous cutting with coagulation.
   d. Pulse cut Slow for intermittent cutting with long coagulation.
   e. Pulse cut fast for intermittent cutting with short coagulation.
   f. Monopolar Coagulation Modes:
   g. SoftCoag for Soft and deep coagulation.
   h. PowerCoag for Fast coagulation and dissection.
   i. ForcedCoag for Fast coagulation.
   j. SprayCoag for Control-free superficial coagulation.
   k. Bipolar Cut Modes:
   l. BioplarCut for Continuous Cutting.
   m. SalineCut for Continuous cutting in saline.
   n. Bipolar Coagulation Modes:
   o. BiSoftCoag for soft coagulation (+/- Autostart).
   p. AutoCoag for soft coagulation with Autostop.
   q. SalineCoag for Coagulation in Saline.
   r. HardCoag for Clamp coagulation with Autostop.
   s. FineCoag for Fine coagulation.
   t. RFCoag for Deep (tumor) ablation with Autostop.

23) Device should be supplied with following instruments.
   a) Advance HF Generator with Foot Switch.
   b) Communication Cables.
   c) Autoclavable Transducer with cable (1 Pcs).
   d) Hand Piece probes for lap 5mm 35cm (2 Pcs).
   e) Hand Piece probes for open surgery 5mm 20cm (2 Pcs).

24) Should quote price for all the above accessories.
   1) Autoclavable Transducer & Cable.
   2) Hand Piece probes for lap 5mm
   3) Hand Piece probe for open surgery 5mm 20 cm.