<u>Refer to Section III Technical Part - Technical Evaluation (ITB 32.4)-</u></u> <u>Technical Part Scoring Methodology: Rated Criteria</u>

Criterion	Weight of criterion	0–4 Score Guidance
pH Range	5	$4: \ge 6.7 - 8.0$
		$3: \ge 6.8-7.9$
		2: Meets 6.8–7.8
		1: Slightly narrower
		0: Does not meet
PO ₂ Range	5	4: 0–800 mmHg
		3: 0–780 mmHg
		2: Meets 0–760 mmHg
		1: Narrower
		0: Does not meet
pCO ₂ Range	5	4: 4–110 mmHg
		3: 5–105 mmHg
		2: Meets 5–100 mmHg
		1: Narrower
		0: Does not meet
Na ⁺ Range	5	$4: \ge 95-190 \text{ mmol/L}$
0		$3: \ge 100-185$
		2: Meets 100–180
		1: Narrower
		0: Does not meet
K ⁺ Range	5	4: 0.8–11 mmol/L
C		3: 1–10.5
		2: Meets 1–10
		1: Narrower
		0: Does not meet
Ca ²⁺ Range	5	4: 0.2–5.2 mmol/L
C		3: 0.25–5.1
		2: Meets 0.25–5.00
		1: Narrower
		0: Does not meet
Hct Range	5	4: 10–75%
		3: 12–72%
		2: Meets 15–70%
		1: Narrower
		0: Does not meet
Cl [−] Range	5	4: 18–210 mmol/L
-		3: 19–205
		2: Meets 20–200
		1: Narrower
		0: Does not meet
tHb	5	4: 2.5–24 g/dL
		3: 2.8–23.5
		2: Meets 3.0–23

Rated Evaluation Criteria Table – Blood Gas Analyzer

		1: Narrower
		0: Does not meet
Additional Calculations	5	4:>4
		3: >3
		2:>2
		1:1
		0: None supported
Optional Analytes	5	4: All 3 integrated
		3: 2 integrated
		2: 1 integrated
		1: External accessory
		0: None supported
Analyzing Time	5	$4:\leq 60 \text{ sec}$
		3: 61–90 sec
		2: 91–105 sec
		1: 106–120 sec
		0: > 120 sec
Sample Volume	5	$4: \le 60 \ \mu L$
		3: 61–100 μL
		2: 101–150 μL
		1: 151–200 µL
		$0: > 200 \ \mu L$
Display	5	4: ≥12" touch
		3: 10.5–11.9" touch
		2: 10" touch
		1: 9–9.9 touch"
		0: < 9" or no touch

Rated Evaluation Criteria Table – Bilirubinometer

Criterion	Weight of criterion	0–4 Score Guidance
Linear Range	12	4: 0–35 mg/dL+
		3: 0–32 mg/dL
		2: Meets 0–30
		1: Below 30
		0: < 25 mg/dL or not
		specified
Accuracy	12	4: ±2%
		3: ±3–4%
		2: ±5%
		1: ±6–7%
		$0:>\pm7\%$
Sample Site	12	4: Forehead, sternum, ear
		3: Any 2 of 3
		2: 1 site only
		1: Limited
		0: Unclear
Consumables	12	4: Fully reusable
		3: Minimal needed
		2: Few required

		1: Regularly needed 0: Per reading
Display Size	12	4:≥2"
		3: 1.5–1.9" 2: ≥ 1"
		1: 1" fixed
		0: < 1"
Memory	10	$4: \ge 500$ patients
		3: 200–499
		2: 100–199
		1: 50–99
		0: < 50 or none

Rated Evaluation Criteria Table – Central Station

Criterion	Weight of criterion	0–4 Score Guidance
Waveforms displayed per	8	$4: \geq 4$ waveforms
patient		3: 3 waveforms
		2: Meets 2 waveforms
		1: Only 1 waveform
		0: Not supported
Max simultaneous monitors	8	4: > 20 monitors
		3: 16–20 monitors
		2: 10–16 monitors
		1: < 10 monitors
		0: Not declared
Main display size and type	8	$4: \geq 27"$ LED full HD with
1 5 51	_	colored waveforms
		3: 25–26" LED with color
		2: Meets 24" LED color
		display
		1: < 24" or grayscale
		0: No color or < 20"
Number of patients viewable	7	$4: \ge 16$ patients
at once		$3:\overline{12}-15$ patients
		2: 8–11 patients
		1: < 8 patients
		0: Not mentioned
Repeater display	8	$4: \ge 42"$ screen, clear at $>4m$
1 1 5		$3: \ge 42$ " clear at 3–4m
		2: $\overline{32}$ -41" clear at 3-4m
		1: Smaller or unclear
		0: No repeater
Full disclosure (waveform	3	$4: \geq 72$ hours
recall)	_	3: 48–71 hours
,		2: Meets 48 hours
		1: < 48 hours
		0: Not supported
Post-discharge data retrieval	3	$4: \geq 30 \text{ days}$
	_	3: 21–29 days
		2: Meets 20 days

		1: 7–19 days
		0: Not possible
Data storage duration	3	$4: \ge 30 \text{ days}$
Data storage duration	5	•
		3: 15–29 days
		2: Meets 7 days
		1: < 7 days
<u> </u>		0: Not supported
System license capacity &	7	$4: \geq 20$ beds & upgradeable
upgradeability		3: 16–19 beds + upgradeable
		2: Meets 16 beds
		1: < 16 or fixed
		0: Not stated
Hardware – Processor	3	$4: \geq 4.0 \text{ GHz}$ with CD/DVD
		+ SSD
		3: 3.5–3.9 GHz with
		CD/DVD
		2: Meets 3.5 GHz with
		CD/DVD
		1: Lower CPU or no
		CD/DVD
		0: Not compliant
Hardware – RAM	3	$4: \ge 8 \text{ GB}$
		3: 6–7 GB
		2: Meets 4 GB
		1: 2–3 GB
		0: < 2 GB
Hardware – Storage	3	$4: \geq 2 \text{ TB}$
C		3: 1.5–1.9 TB
		2: Meets 1 TB
		1: 500 GB-999 GB
		0: < 500 GB
Hardware – USB ports	3	$4: \ge 6$ USB ports
	C C	3: 5 USB ports
		2: Meets 4 USB ports
		1: 2–3 USB ports
		0: < 2 USB ports
Hardware – Printer	3	4: Color laser, A4, duplex +
	5	network
		3: Color laser, A4, duplex 2: Meets A4 laser
		1: Monochrome/small format
		0: No printer

Rated Evaluation Criteria Table – Humidifiers Neonatal

Criterion	Weight of criterion	0–4 Score Guidance
Ventilation Modes	15	4: All modes supported &
		auto switching
		3: All modes supported
		manually selectable
		2: Both invasive & one non-

	invasive supported
	1: Only invasive or non-
	invasive mode
	0: Not supported
10	4: Ultra-lightweight &
	compact < 2.5 kg
	3: Lightweight < 3 kg
	2: Compact but > 3.5 kg
	1: Heavy but portable
	0: Bulky, not portable
20	4: Digital display with 0.1°C
	resolution + trend
	3: Digital with 0.1°C
	2: °C display, no decimal
	1: Basic numeric or analog
	0: No temp display
15	$4: \leq \pm 0.2^{\circ}\mathrm{C}$
	$3: \leq \pm 0.3^{\circ}\mathrm{C}$
	$2: \le \pm 0.4^{\circ}\mathrm{C}$
	1: ±0.5–0.6°C
	$0:>\pm 0.6^{\circ}C$
10	$4: \le 15 \min$
	3: 16–20 min
	2: 21–30 min
	1: 31–40 min
	0: > 40 min
	15

Rated Evaluation Criteria Table – Infant Radiant Warmer

Criterion	Weight of criterion	0–4 Score Guidance
Swiveling Heater Head +	7	4: better
Auto Shutoff		3: ±100
		2: ±90°
		$1: < \pm 90^{\circ}$
		0: Fixed unit
Manual Power Range &	7	4: 0–100% ≤5% incr.
Increment		3: 0–100% 6–7%
		2: 0-100% 8-10%
		1: <100% or >10%
		0: Not adj.
Output Power Range	7	4: Up to 650 W
		3: Up to 600 W
		2: 550–599 W
		1: 450–549 W
		0: <450 W
Air Temp Control Range	7	4: 30–38°C + fine res.
		3: 30–38°C
		2: 31–37°C
		1: < 30–38°C
		0: Not spec.

7	1 < 10 200
/	$4: \le \pm 0.2^{\circ}C$
	$3: \leq \pm 0.3^{\circ}\mathrm{C}$
	$2: \le \pm 0.4^{\circ}\mathrm{C}$
	$1:>\pm 0.4^{\circ}C$
	0: Not declared
7	$4: \le \pm 0.05^{\circ} C$
	$3: \le \pm 0.1^{\circ} C$
	$2: \le \pm 0.2^{\circ} C$
	$1:>\pm 0.2^{\circ}C$
	0: Not declared
7	4: better
	3: ±15°
	2: ±10°
	1: Non-lock tilt
	0: No tilt
7	$4: \ge 10"$ color touch
	3: 8–9.9" color touch
	2: 8" touch
	1: <8" touch
	0: not specified
7	$4: \ge 7 \text{ days}$
	3: 5–6 days
	2: 3–4 days
	1: 1–2 days
	0: None
7	$4: \geq 40 \text{ hrs}$
	$3:\overline{24}-39$ hrs
	2: 12–23 hrs
	1: <12 hrs
	0: None
	7

Rated Evaluation Criteria Table – Infusion Pump

Criterion	Weight of criterion	0–4 Score Guidance
Flow rate range	9	4: 0.1–1200 mL/h or more
		3: 0.1–1000 mL/h
		2: 0.1–999 mL/h
		$1: \geq 1 \text{ mL/h lower start}$
		0: < 999 mL/h
Flow rate increments	9	$4: \le 0.1 \text{ mL/h}$
		3: 0.5 mL/h
		2: 1 mL/h
		1:>1 mL/h
		0: Not adjustable
VTBI (Volume to be Infused)	9	4: 1–10,000 mL
		3: 1–9,999 mL
		2: Meets 1–9,999 mL
		1: < 9,999 mL
		0: Not adjustable
Flow rate accuracy	9	$4: \le \pm 2\%$
		$3: \leq \pm 3\%$

	$2: \leq \pm 5\%$
	1: ±6–7%
	$0:>\pm7\%$
9	$4: \leq 700 \text{ mmHg}$
	3: 701–850 mmHg
	$2: \le 1000 \text{ mmHg}$
	1: > 1000 mmHg
	0: Not specified
9	4: better
	3: 1–5 mL/h configurable
	2: 1–5 mL/h fixed
	1: Fixed w/o control
	0: No KVO
8	$4: \geq 3.5"$ color
	3: 3"-3.4"
	2: Meets 2" min
	1: < 2"
	0: No screen/LED only
8	4: All 6 + trend graph
	3: All 6
	2: 4–5 parameters
	1: 2–3 parameters
	0: Fewer/unclear
	9

Rated Evaluation Criteria Table – Neonatal Nebulizer

Criterion	Weight of criterion	0–4 Score Guidance
Device Type	12	4: Both ultrasonic &
		compressor
		3: Selectable ultrasonic or
		compressor
		2: Only one type supported
		1: Fixed without choice
		0: Not stated
Nebulization Cycle Duration	12	4: 15 min without bottle
		3: 15 min optional bottle
		2: \sim 15 min w/ bottle
		$1: > 20 \min$
		0: No cycle spec
Medication Cup Capacity	12	4: > 6 mL
		3: 5–6 mL
		2: 2–6 mL
		1: 1–2 mL
		0: < 1 mL
Nebulization Rate	12	4: > 0.5 mL/min
		3: 0.4–0.5 mL/min
		2: 0.3–0.39 mL/min
		1: < 0.3 mL/min
		0: Not specified
Air Flow Rate	12	$4: \geq 7 \text{ mL/min}$
		3: 5–6.9 mL/min

		2: 4–4.9 mL/min 1: 3–3.9 mL/min 0: < 3 mL/min
Battery Backup	10	$4: \ge 2 \text{ hrs full use}$ $3: 1-2 \text{ hrs}$ $2: < 1 \text{ hr}$
		1: Mentioned only 0: Not available

Rated Evaluation Criteria Table – Bubble CPAP with blender

Criterion	Weight of criterion	0–4 Score Guidance
CPAP Pressure Range	9	4: 3–10 cm H ₂ O fine-step
		3: 4–10 cm H ₂ O manual
		2: Meets 3–10 cm H ₂ O
		1: 3–9 cm H ₂ O
		0: Not adjustable
Output Flow Range	9	4: 3–18 L/min
		3: 4–15 L/min
		2: 5–15 L/min
		1:>5 L/min only
		0: Not adjustable
Humidifier Water Chamber	9	4: Auto-fill + manual
		3: Auto-fill only
		2: Manual refill only
		1: Needs external refill
		0: Not declared
Temp Display	9	4: Digital $+ 0.1^{\circ}C + trend$
		3: Digital with 0.1°C
		2: 0.1°C display
		1: No decimal
		0: Not displayed
Temp Accuracy	9	$4: \le \pm 0.3^{\circ} C$
		$3: \le \pm 0.4^{\circ}\mathrm{C}$
		$2: \le \pm 0.5^{\circ} C$
		$1:>\pm 0.5^{\circ}C$
		0: Not declared
Warm-up Time	9	$4: \leq 20 \min$
		3: 21–29 min
		$2: \leq 30 \min$
		1: 31–40 min
		0: > 40 min
Blender Flowmeter Range	8	4: 0–35 L/min
		3: 0–30 L/min
		2: 5–30 L/min
		1: <30 L/min
		0: Not adjustable
FiO ₂ Range	8	4: Cont. 21–100% + fine
		control
		3: Cont. 21–100%
		2:21–95%

	1: Stepped/tiers 0: Not adjustable
	0. Not adjustable

Rated Evaluation Criteria Table – NICU Patient Monitor

Criterion	Weight of criterion	0–4 Score Guidance
Screen Size	9	$4: \ge 15$ " LCD medical-grade
		3: 13–14.9" LCD
		2: 12" LCD (meets min)
		1: 10–11.9" LCD
		0: < 10" or non-color
Waveform Channels	7	$4: \ge 10$ channels
		3: 9 channels
		2: 8 channels (meets)
		1: 6–7 channels
		0: < 6 channels
SpO ₂ Accuracy	7	4: ±2%
		3: ±2.5%
		2: $\pm 3\%$ (meets min)
		$1:>\pm 3\%$
		0: Not stated
Pulse Rate Range	7	4: 20–250 bpm
6		3: 30–240 bpm (meets)
		2: 35–230 bpm
		1: 40–220 bpm
		0: < 200 bpm
Pulse Rate Accuracy	7	4: ±2 bpm
1 0100 1 000 1 000 0100 9		$3: \pm 3$ bpm (meets)
		2: ±4 bpm
		1: ±5 bpm
		$0: > \pm 5$ bpm
Respiration Range	7	4: 1–200 rpm
ge		3: 1–150 rpm (meets)
		2: 5–150 rpm
		1: 10–150 rpm
		0: Not adjustable
Respiration Accuracy	6	4: ±1 rpm
Respiration receives	0	$3: \pm 2$ rpm (meets)
		2: ±3 rpm
		$1: > \pm 3$ rpm
		0: Not defined
ETCO ₂ Range	6	4: 0–12%
	0	3: 0-10% (meets)
		2: 0.5–9%
		1: 1-8%
		1.1-870 0:<8%
ETCO ₂ Accuracy	6	$\frac{0. < 8\%}{4: < \pm 2.5\% \text{ CO}_2 \pm 1.5 \text{ mmHg}}$
LICO2 Acculacy	0	$4. < \pm 2.5\% \text{ CO}_2 \pm 1.5 \text{ minfig}$ $3: < \pm 3\% \text{ CO}_2 \pm 2 \text{ mmHg}$
		-
		(meets) $2: +35 - 40$
		2: ±3.5–4%

		$\begin{array}{c} 1: \pm 4 - 5\% \\ 0: > \pm 5\% \end{array}$
Battery	8	4: more than 5 hrs 3: more than 4hrs
		2: 2 hrs
		1: more than 1 hr
		0: < 1

Rated Evaluation Criteria Table – PICU Patient Monitor

Criterion	Weight of criterion	0–4 Score Guidance
Screen Size	7	$4: \ge 15$ " LCD medical-grade
		3: 13–14.9" LCD
		2: 12" LCD
		1: 10–11.9" LCD
		0: < 10" or non-color
Waveform Channels	7	$4: \geq 10$ channels
		3: 9 channels
		2: 8 channels (meets)
		1: 6–7 channels
		0: < 6 channels
SpO ₂ Accuracy	7	4: ±2%
		3: ±2.5%
		$2: \pm 3\%$ (meets min)
		$1:>\pm 3\%$
		0: Not defined
Pulse Rate Range	7	4: 25–250 bpm
C		3: 30–240 bpm (meets)
		2: 35–230 bpm
		1: 40–220 bpm
		0: < 200 bpm
Pulse Rate Accuracy	7	4: ±2 bpm
Ş		$3: \pm 3$ bpm (meets)
		2: ±4 bpm
		1: ±5 bpm
		$0: > \pm 5$ bpm
Respiration Range	7	4: 1–200 rpm
1 0		3: 1–150 rpm (meets)
		2: 5–150 rpm
		1: 10–150 rpm
		0: Not adjustable
Respiration Accuracy	7	4: ±1 rpm
	-	$3: \pm 2 \text{ rpm (meets)}$
		2: ±3 rpm
		$1: > \pm 3$ rpm
		0: Not declared
ETCO ₂ Range	7	4:0-12%
6-		3: 0-10% (meets)
		2: 0.5–9%
		1: 1–8%
		0: < 8%

ETCO ₂ Accuracy	7	$\begin{array}{l} 4: < \pm 2.5\% \ \mathrm{CO}_2 \pm 1.5 \ \mathrm{mmHg} \\ 3: < \pm 3\% \ \mathrm{CO}_2 \pm 2 \ \mathrm{mmHg} \end{array}$
		(meets)
		2: ±3.5–4%
		$1:>\pm 4\%$
		$0:>\pm 5\%$
Battery	7	4: more than 5 hrs
		3: more than 4hrs
		2: 2 hrs
		1: more than 1 hr
		0: < 1

Rated Evaluation Criteria Table – Defibrillator

Criterion	Weight of criterion	0–4 Score Guidance
Manual Energy Selection	8	4: 1–200 J, ≤1 J steps,
Range		pediatric ≤50 J
		3: 1–200 J, 2–5 J steps
		2: 1–200 J
		1: Only 10 J or fixed steps
		0: Not full range
AED Mode for Pediatric	8	4: Full pediatric AED
		3: Semi-automated pediatric
		AED
		2: Adult-only AED
		1: Manual only
		0: Not supported
Charging Time	8	$4: \leq 5 \text{ sec}$
		$3:\leq 6 \sec$
		$2: \le 8 \text{ sec}$
		1: 9–10 sec
		0: > 10 sec
Display	8	$4: \geq 10"$ color
		3: 8–9.9" color
		$2: \geq 7"$ color
		1: 6–6.9"/non-color
		0: < 6" or basic
Event Storage Capacity	8	$4: \ge 100$ events
		3: 75–99 events
		$2: \ge 50$ events
		1: 30–49 events
		0: < 30 or none
Battery Monitoring Duration	8	$4: \ge 3$ hrs
		$3: \ge 2$ hrs
		2: 1.5–1.9 hrs
		1: 1 hr
		0: < 1 hr or not stated
Battery Shock Capacity	8	$4: \geq 150$ shocks
		3: 120–149 shocks
		$2: \ge 100$ shocks

		1: 80–99 shocks
		0: < 80 shocks
Recharge Time	7	$4: \leq 3 \text{ hrs}$
		$3: \le 4 \text{ hrs}$
		$2: \le 5 \text{ hrs}$
		1: > 5 hrs
		0: Not stated
Operation on Mains without	7	4: Full operation
Battery		3: Functional w/ limited
		display
		2: Partial operation
		1: Unstable operation
		0: Not operable

Rated Evaluation Criteria Table – Portable Ultrasound

Criterion	Weight of criterion	0–4 Score Guidance
Scanning Depth	9	$4: \ge 35 \text{ cm}$
		3: 30–34 cm
		2: 25–29 cm
		1: < 25 cm
		0: Not stated
Frame Rate (B & Color	9	$4: \ge 700 \text{ fps (B) } \& \ge 350 \text{ fps}$
Modes)		(Color)
		$3: \ge 600 \text{ fps (B) } \& \ge 300 \text{ fps}$
		(Color)
		$2: \ge 500 \text{ fps (B) } \& \ge 250 \text{ fps}$
		(Color)
		$1: \ge 400 \text{ fps (B) } \& \ge 200 \text{ fps}$
		(Color)
		0: Below thresholds
Cine Loop Review	9	$4: \ge 90 \text{ sec} / 1500 \text{ frames}$
*		3: 60–89 sec / 1000–1499
		frames
		2: 45–59 sec / 750–999
		frames
		1: < 45 sec / < 750 frames
		0: Not available
Display Screen Size	9	4: ≥ 17" LCD/LED
		3: 15–16.9" LCD
		2: 13–14.9" LCD
		1: ≤ 12"
		0: Not color screen
Weight (incl. battery)	9	$4: \le 10 \text{ kg}$
		3: 10.1–12 kg
		2: 12.1–14 kg
		1: > 14 kg
		0: Not stated
Active Ports	9	$4: \ge 5$ ports
		3: 4 ports
		2: 3 ports

		1: 2 ports
		0: < 2 or not mentioned
View Angle	8	$4: \ge 170^{\circ}$
_		$3: \ge 150^{\circ}$
		$2: \ge 120^{\circ}$
		1: < 120°
		0: Not declared
Storage Capacity	8	4: ≥ 1 TB
		3: 750–999 GB
		2: 500–749 GB
		1: < 500 GB
		0: Not available

Rated Evaluation Criteria Table – Transport Monitor

Criterion	Weight of criterion	0–4 Score Guidance
Trend Storage Duration	7	$4: \geq 300$ hours
		3: 241–299 hours
		2: 240 hours
		1: 120–239 hours
		0: < 120 hours or none
Battery Duration	7	$4: \ge 8$ hours
		3: 6–7.9 hours
		2: 4–5.9 hours
		1: 2–3.9 hours
		0: < 2 hours
Screen Size	7	4: ≥ 10"
		3: 9–9.9"
		2:≥8"
		1: 6–7.9"
		0: < 6"
ECG Heart Rate Accuracy	7	4: $\pm 0.5\%$ or better
-		3: $\pm 1\%$ or ± 1 bpm
		2: $\pm 1.5\%$ or ± 2 bpm
		$1:>\pm 2$ bpm
		0: Not stated
SpO ₂ Accuracy (70–99%)	6	4: ±2%
		3: ±2.5%
		2: ±3%
		$1:>\pm 3\%$
		0: Not compliant
Pulse Rate Range	6	4: 20–270 bpm
C .		3: 30–250 bpm
		2: 35–240 bpm
		1: < 35 or > 240 bpm
		0: Not specified
Pulse Rate Accuracy	6	4: ±2 bpm
-		3: ±3 bpm
		2: ±4 bpm
		$1: > \pm 4$ bpm
		0: Not declared

	ć	
Display Type & Input	6	4: Touchscreen + soft keys
		3: Touchscreen only
		2: Soft keys only
		1: Membrane/buttons
		0: None/knobs
Temp Range & Methods	6	4: 10–45°C,
		3: 15–45°C
		2: 15–45°C
		1: 15–45°C
		$0: < 15^{\circ}$ C or not specified
NIBP Ranges (Ped + Neo)	6	4: better
-		3: Meets both specs
		2: One range only
		1: Partial ranges
		0: Not suitable
Battery	6	4: more than 5 hrs
		3: more than 4hrs
		2: 4 hrs
		1: more than 3 hr
		0: < 2

Rated Evaluation Criteria Table – Pulse Oximeter(Bed Side)

Criterion	Weight of criterion		0–4 Score Guidance
SpO ₂ Measurement Range	1	4	4: 1–100% with 0.5% or finer
			3: 1-100% (1% increment)
			2: 2–100%
			1: 5–100%
			0: Not declared
SpO ₂ Accuracy	1	4	4: ±2%
			3: ±2.5%
			2: ±3%
			$1:>\pm 3\%$
			0: Not stated
Pulse Rate Range	1	4	4: 20–250 bpm
			3: 30–240 bpm
			2: 35–230 bpm
			1: 40–220 bpm
			0: < 200 bpm or not stated
Pulse Rate Accuracy	1	4	4: ±2 bpm
			3: ±3 bpm
			2: ±4 bpm
			1: ±5 bpm
			$0: > \pm 5$ bpm or not declared
Display Type & Visibility	1	3	4: ≥ 3.5"
			3:≥3"
			2: ≥ 2.5"
			1: < 2.5"
			0: Not stated

Criterion	Weight of criterion	0–4 Score Guidance
Flow Rate Range	8	4: 0.01–1500 mL/h
		3: 0.01–1200 mL/h
		2: 0.1–1000 mL/h
		1: 0.5–800 mL/h
		0: not specified
Accuracy	8	4: $\pm 1.0\%$ or better
		3: ±1.5%
		2: ±2.0%
		$1:>\pm 2\%$
		0: Not specified
Max Pressure	8	$4: \le 800 \text{ mmHg}$
		$3: \le 1000 \text{ mmHg}$
		$2: \le 1200 \text{ mmHg}$
		1: > 1200 mmHg
		0: Not specified
KVO Rate	8	4: Configurable &
		programmable
		3: Configurable
		2: Fixed range
		1: Limited preset
		0: Not available
Syringe Size Acceptance	8	4: 3–60 mL
		3: 5–60 mL
		2: 10–50 mL
		1: 10–30 mL
		0: Single size only
Event Log	8	$4: \ge 300$ events
-		$3: \ge 200$ events
		2: 100–199 events
		1: 50–99 events
		0: Not logged
Screen Size	8	$4: \ge 3$ " color touchscreen
		3: 2.5–2.9" color
		$2: \ge 2$ " (meets spec)
		1: < 2" screen
		0: No screen
Battery Backup Duration	7	$4: \ge 8$ hours
		$3: \ge 5$ hours
		2: $3-4.9$ hours
		1: 1–2.9 hours
		0: < 1 hour or N/A
Recharging Time	7	$4: \leq 4$ hours
		$3 \le 6$ hours
		$2: \le 8$ hours
		1: > 8 hours
		0: Not mentioned

Rated Evaluation Criteria Table – Syringe Pump

Cuitonian	Waisht of outonion	0 1 Same Cuidanas
Criterion	Weight of criterion	0–4 Score Guidance
Temp Rise Time at Startup	12	4: < 25 min
		3: < 30 min
		2: < 35 min
		1: 35–40 min
		0: > 40 min or not declared
Humidity Range	12	4: 50–75% RH
		3: 50–70% RH
		2: 45–65% RH
		1: < 45% or not stable
		0: Not present
Oxygen Control Range	12	4: 21–60%
		3: 21–58%
		2: 21–55%
		1: < 21% or non-
		programmable
		0: Not available
Display Parameters	12	4: All 9 parameters
		3: 7–8 parameters
		2: 5–6 parameters
		1: < 5 parameters
		0: Minimal or no display
Battery Backup	12	$4: \geq 8$ hours
		3: > 6 hours
		2: 4–6 hours
		1: 2–4 hours
		0: < 2 hours or not declared
Fast Charging	10	$4: \leq 3$ hours
		$3: \leq 4$ hours
		$2: \leq 6$ hours
		1: > 6 hours
		0: Not stated

Rated Evaluation Criteria Table – Transport Incubator

Rated Evaluation Criteria Table – Tunnel Phototherapy Machine

Criterion	Weight of criterion	0–4 Score Guidance
Treated Infant Weight	18	$4: \ge 15 \text{ kg}$
Capacity		$3: \geq 12 \text{ kg}$
		$2: \ge 10 \text{ kg}$
		1: 8–9 kg
		0: < 8 kg or not declared
LCD Display Size	18	$4: \geq 7$ inches
		$3: \ge 6$ inches
		$2: \ge 5$ inches
		1: 3–4.9 inches
		0: < 3 inches or none
LED Lamp Life	18	$4: \ge 50,000$ hours
		$3: \ge 40,000$ hours
		$2: \ge 30,000$ hours

		1: 20,000–29,999 hours 0: < 20,000 or not stated
Tunnel Part Flexibility	16	 4: Independent upper/lower 3: Controllable together/separate 2: Manual/mechanical split 1: Fixed with minor adjustability 0: Not available

Rated Evaluation Criteria Table – PICU Ventilator

Criterion	Weight of criterion	0–4 Score Guidance
Startup Time	9	4: < 30 sec
		3: < 45 sec
		$2:\leq 60 \text{ sec}$
		1: 61–90 sec
		0: > 90 sec or not declared
Display Screen Size	9	4: ≥ 12"
		3: ≥ 11"
		$2: \ge 10''$ (meets spec)
		1: 8–9"
		0: < 8" or not touchscreen
FiO2 Range	9	4: better
6		3: 21-100% with sensors
		2: 21-100% basic (meets
		spec)
		1: Fixed step FiO2 or manual
		0: No FiO2 control
Tidal Volume Range	9	4: 0–2000 ml
6		3: 10–2000 ml
		2: 20–2000 ml (meets spec)
		1: 30–2000 ml
		0: > 30 ml min or not stated
Battery Backup	9	4:>4 hrs
5 1		$3 \ge 3$ hrs
		$2: \ge 2$ hrs (meets spec)
		1: 1–2 hrs
		0: < 1 hr or not declared
Events Storage	9	$4: \geq 2000 \text{ events}$
		$3: \ge 1500$
		$2: \ge 1000$ (meets spec)
		1: 500–999
		0: < 500 or not available
Humidifier Accuracy	9	4: < ±0.3°C
	-	3: < ±0.35°C
		$2: < \pm 0.4$ °C (meets spec)
		$1: < \pm 0.5^{\circ} C$
		$0: > \pm 0.5^{\circ}$ C or not declared
Waveform Display	7	$4: \ge 6$ waveforms
·····		$3: \geq 5$
		1

$2: \ge 3 \text{ (meets spec)}$ $1: 1-2$
0: None or numeric only

NICU Ventilator

Weight of criterion	0–4 Score Guidance
9	4: < 30 sec
	3: < 45 sec
	$2: \le 60 \text{ sec}$
	1: 61–90 sec
	0:npt specified
9	4:≥12"
	3:≥11"
	$21: \ge 10"$ (meets spec)
	1: 8–9"
	0:not specified
9	4:better performance
-	3: 21-100% with sensors
	2: 21–100% basic
	1: Fixed
	0:not specified
	o.not specified
9	4: 0–2000 ml
	3: 10–2000 ml
	2: 20–2000 ml
	1: 30–2000 ml
	0:not specified
0	$4: \ge 4 \text{ hrs}$
9	$4. \ge 4 \text{ ms}$ $3: \ge 3 \text{ hrs}$
	$3 \ge 3$ hrs $2 \ge 2$ hrs
	2.22 ms 1: 1–2 hrs
	0:not specified
9	$4: \geq 2000 \text{ events}$
	$3: \ge 1500$
	$2: \ge 1000$
	1: 500–999
	0:not specified
9	4: < ±0.3°C
-	
	$3: < \pm 0.35^{\circ}C$
	3: < ±0.35°C 2: < ±0.4°C
	$2: < \pm 0.4^{\circ}C$
	$2: < \pm 0.4^{\circ}C$ $1: < \pm 0.5^{\circ}C$
7	2: < ±0.4°C 1: < ±0.5°C 0:not specified
7	$\begin{array}{c} 2: < \pm 0.4^{\circ}\mathrm{C} \\ 1: < \pm 0.5^{\circ}\mathrm{C} \\ 0: \mathrm{not\ specified} \\ 4: \geq 6\ \mathrm{waveforms} \end{array}$
7	$2: < \pm 0.4^{\circ}C$ $1: < \pm 0.5^{\circ}C$ $0:not specified$ $4: \ge 6 waveforms$ $3: \ge 5$
7	$\begin{array}{c} 2: < \pm 0.4^{\circ}\mathrm{C} \\ 1: < \pm 0.5^{\circ}\mathrm{C} \\ 0: \mathrm{not\ specified} \\ 4: \geq 6\ \mathrm{waveforms} \end{array}$
	9 9 9 9 9 9 9 9 9 9

Openable Incubator

Criterion	Weight of criterion	0–4 Score Guidance
Air Temp Range	9	4: 25–38°C
		3: 26–38°C
		2: 27–38°C
		1: Narrower than 28–38°C
		0: Not declared
Skin Temp Range	9	4: 34–38.5°C
		3: 34.5–38°C
		2: 35–38°C
		1: <35°C or <38°C max
		0: Not declared
Mode Switch Function	9	4: Auto & manual, seamless
		3: Auto/manual with delay
		2: auto
		1: Only manual
		0: Not available
Radiant Warmer Output	9	4: 800–1000 W
×.		3: 700–800 W
		2: 600–700 W
		1: <600 W
		0: Not declared
Humidity Control Range	9	4: 40–90% RH
		3: 45–85% RH
		2: 50–80% RH
		1: <50% o
		0: Not adjustable
Chamber Tilt Control	9	4: $\pm 8^{\circ}$ or better
		3: ±6°-7°
		2: ±5°
		1: Fixed/incline only
		0: Not provided
Access Ports	9	$4: \ge 4 \text{ ports}$
		3: 3 ports with iris
		2: 3 basic ports
		1: 2 or less
		0: Not declared
Battery Backup	7	$4: \ge 2$ hrs
_		3: 1.5 hrs
		2: 1 hr
		1: < 1 hr
		0: Not provided

Closed Incubator

Criterion	Weight of criterion	0–4 Score Guidance
Air Temp Control Range	9	4: 20–39°C
		3: 21–38°C
		2: 22–38°C
		1: Narrower than 22–38°C
		0: Not compliant

Temperature Accuracy	8	4: ±0.1°C
Temperature Accuracy	0	4. ±0.1 °C 3: ±0.2°C
		2: ±0.3°C
		2: ±0.5 C 1: ±0.4°C
Humidity Control Dongo	8	$0: > \pm 0.4^{\circ}C$
Humidity Control Range	8	4: 30-85%
		3: 35-80%
		2: 40–75%
		1: Narrower
TT 11 , T		0: Not compliant
Humidity Increment	5	$4:\leq 5\%$ steps
		$3: \le 10\%$
		$2: \le 15\%$
		1: Fixed only
		0: Not adjustable
Humidity Recovery Time	5	$4: \leq 10 \min$
		$3: \leq 15 \min$
		$2: \leq 20 \min$
		$1: \leq 30 \min$
		0: > 30 min
Humidity Accuracy	5	$4: \le \pm 5\%$
		$3: \le \pm 8\%$
		$2: \le \pm 10\%$
		$1:>\pm 10\%$
		0: Not stated
Oxygen Control Range	5	4:21–60%
		3: 22–58%
		2: 23–55%
		1: Narrower
		0: Not supported
Display Range	5	4: 20–70%
		3: 22–65%
		2: 25–60%
		1: < 25–60%
		0: Not stated
Oxygen Control Accuracy	5	4: ≤ ±3%
		$3: \le \pm 5\%$
		$2: \leq \pm 7\%$
		$1:>\pm7\%$
		0: Not accurate
Rise Time	5	4: <10 min
		3: <15 min
		2: <20 min
		1: <30 min
		0: >30 min
Recovery Time	5	4: < 5 min
	5	3: 5–7 min
		2: 8–10 min
		1: > 10 min
		0: Not stated

Access Ports	5	$4: \ge 4 \text{ w}/2 \text{ Iris}$
		$3: \ge 4$ basic
		2: 3 ports
		1: 2 ports
		0: <2 ports