

Purchase and Stores Section, SMBBMU, Larkana.

Phone # 074-4752408

Issued to:

Requirement of Manikins & Instruments for Shaheed Mohtarma Benazir Bhutto Medical University, Larkana

TERMS AND CONDITIONS:

- 1. Bid should remain valid for 90 days from the date of financial opening.
- Bidders shall quote their prices on CIF and free Delivery at Consignee's end Shaheed Mohtarma Benazir Bhutto Medical University Larkana basis. FOR Offer should be inclusive of all duties/Taxes/Octroi/transportation etc., and all other expenses on free delivery to consignee's end.
- 3. Price should be quoted on CIF and FOR basis in Figure & words failing which the offer will be ignored.
- 4. Free installation along with all accessories including labor charges / Demonstration at consignee's end must be borne by the bidder.
- 5. 03 year free service from the date of installation and undertaking regarding availability of spare parts for at least 10 years may also be confirmed by the bidder.
- 6. Sole agent certificate for the quoted items from the Manufacturer must be attached by the bidder. Certificate should valid for three years from the date of issue which should be verifiable by concern authority.
- 7. Bidders are required to submit proof of past import of quoted items from Manufacturer by submitting copy of bill of entry (custom clearance documents), bill of landing /Air way bill and etc. along with their bid.
- 8. The supplier will be bound to train nominated technical personnel to operate /repair and maintain the supplied equipment.



- Bidders should confirm the presence of Manufacturer's trained service/installation engineers/technicians and provide the detail of their working experience, Manufacture's training certificate, list of tools and test equipment.
- 10. List of hospitals, name of department, contact numbers of the end users, in which the quoted equipment are working must be attached. Copy of previous installation report in a reputed Govt./Private Teaching Hospitals/repair certificate if any, of the similar quoted items from the end user should be attached along with the bid.
- 11 Evaluation of equipment will be carried out in accordance with specifications of the equipment and evaluation criteria as mentioned in the bid documents
- 12 In case of purchase on CIF, the bidder will bear the charges of clearing agent, Godown rent, DO Charges and all other charges including transportation to
 - a. Consignee end excluding custom duty and tax of whatsoever, Certificate will
 - b. issued by this office to clarify that the import has been made for the hospital in
 - c. Question so as to avail the facility of exemption of duties / taxes as per
 - d. Government Rules
- 13. In this tender envelopes procedure as per <u>SPPRA 2010</u> rules will be followed i.e. Technical and Financial proposal each item separately, i.e. single stage two envelops system. The envelope must contain tender enquiry no. on the top and **TECHNICAL / FINANCIAL PROPOSAL** clearly in order to avoid any confusion. The tenders shall be submitted with all documents, drawing literature & catalogue (in equipment) in Technical proposal, with sealing wax. The name of manufacturer or supplier should be affixed on the face of envelope at the left side, moreover, financial envelope should contain financial bid for each item separately.
- 14. Tenders must be filled in with Blue or black ink in the column provided and or

- a. Separate letterhead duly signed.
- 15. The tenders must be free from erasing, cutting and over writing. In case of erasing, cutting and over writing, authorized person should initial it.
- 16. The rates of each item should be written in figures as well as in words. In case of discrepancy the price in words will be taken as authenticate and final.
- 17. Conditional/Optional tenders will be ignored and will not be considered entertained/accepted.



- 18. Tender shall be accompanied by Bid Security @ 1% of the value of stores quoted by them in form of call deposit/pay order/demand draft/Bank guarantee in the name of Vice Chancellor, Shaheed Mohtarma Benazir Bhutto Medical University Larkana.
- 19. Copy of Bid Security (without amount) must be attached along with the technical bid and the original along with financial bid. In case of disclosure of price or amount of Earnest money in the technical bid, the bid will be rejected.
- 20. Original purchase receipt must be enclosed with their technical offer.
- 21 The tendered rate CIF and FOR (free Delivery at Consignee's end) should be inclusive of all taxes, income and sales tax etc. payable to federal and provincial Govt. or local bodies and no claims on these account shall be entertained.
- 22 For the X-Ray Equipments, bidders must submit a valid copy of registration with PNRA (Pakistan Nuclear Regulatory Authority)
- 23. The original printed catalogue/technical brochure showing detail technical specification, clear photo/picture of the quoted item, Manufactures address, phone number, e-mail address and website must accompany with offer.
- 24. The equipment to be imported comply/certified at CE/FDA standards. Certificate should be attached along with the offer.
- 25. Store is required immediately. The tenderer may, however give their short guaranteed delivery period by which the supply will be completed positively.
- 26. f the Contractor fails to attain completion of the supply or installation within the time for completion, he shall pay to the purchaser liquidated damages at the rate of 2% per month (0.5% per week) of the Contract Price, or the relevant part thereof. The aggregate amount of such liquidated damages shall in no event exceed 10% of the bid amount. Once the "Maximum limit" is reached, the Purchaser may consider termination of the Contract.
- 27. Tenderers are required to furnish a detail technical quotation on their letter head and specify the standard and optional items /accessories as required in the tender specification. Bidder should clearly mention make, model, and country of crigin of the quoted items.
- 28. Choice to select/ignore any alternate offers shall rest with the purchaser.
- 29. Tenders shall purchase separate tender documents and furnish purchases receipt for each alternate offer in case they want to submit alternate offer for any



item. All the bids with alternate offers without separate purchase receipt (original) are supposed to be rejected.

- 30 No Manufacturer shall authorize their distributor/agent/any firm or person to quote the same item which manufacturer quoted it-self in any tender. Failing that offer of both the manufacturer as well as other bidder shall be ignored.
- 31. The Bid shall comprise a single package containing two separate envelops. Each envelops shall contain separately the financial proposal and the technical proposal.
- 32. The envelop shall be marked as "FINANCIAL PROPOSAL" and TECHNICAL PROPOSAL "in bold and legible letters to avoid confusion.
- 33. Initially only envelops marked as "TECHNICAL PROPOSAL" shall be opened.
- 34. The envelop marked as "FINANCIAL PROPOSAL" shall be retained in the custody of the procuring agency without being opened.
- 35. The bidder should have the relevant experience of the quoted item.

PURCHASER'S RIGHT TO VARY QUANTITIES AT TIME OF AWARD.

The purchaser reserves the right to increase/decrease or delete the quantities of goods etc. at the time of award of contract and also reserves the right to enhance the quantity of goods and services up-to originally specified in the schedule of requirements without any change in unit price of other terms and conditions of goods at any time during contract period.

NOTIFICATION OF AWARD/ADVANCE CONTRACT:

- 1. Prior to the expiration of the period of bid validity, the purchaser will notify the successful bidder in writing, delivery by hand or by register letter by cable to be confirmed that their bid has been accepted.
- 2. The notification of award will constitute the formation of the contract.

AWARD OF CONTRACT AND CONTRACT AGREEMENT

Subject to the fulfillment of all codal formalities, the purchaser will award the contract to the successful bidder whose bid has been determined to be qualified to perform the contract satisfactory.



The successful Tenderers will have to deposit with the purchase security deposit as under in shape of call deposit/pay order/bank guarantee at the rate of 5% of the value of contract.

PAYMENT TERM:

- In case of purchase on CIF this office will establish Letter of Credit for 100% of contract value in favor of manufacturer. insurance charges for opening L/C will be borne by bidder.
- 2. Terms of payment for FOR purchase Part Delivery, Part Payment not allowed.

FEE FOR AWARD OF CONTRACT:

Stamp duty @0.3% shall be borne by the suppliers.

UNDERTAKING

- 1 That I/We agree whether our tender accepted for total, partial or enhanced quantity for all or any single item. I/We also agreed to supply and accept the said item at the rates for the supply of contracted quantity within the stipulated period shown in the contract.
- 2 I/We understand and confirm the refund of cost different if the same goods is/was supplied at lower rates to any other Govt. /Semi Govt. institution in the province in the same fiscal year.
- 3 I/We undertake that; if any of the information submitted in accordance to this tender enquiry found incorrect our contract may be cancelled at any stage on our cost and risk.

CERTIFICATE



We guarantee to supply the source exactly in accordance with the requirement specified in the invitation to this tender.

Signature of Tenderer:

Name & Designation: _____

Address: _____



Purchase and Stores Section, SMBBMU. Larkana

<u>Requirement of Manikins & Instruments for the Shaheed Mohtarma Benazir Bhutto</u> <u>Medical University, Larkana.</u>

(Bill of Quantity will be informed later on)

(Such quantity can be Reduced / Increased at any time)

Sr.	Name Of Equipment	Qty	C.I.F Price		F.O.R Price	
			<u>Unit</u> price	<u>Total</u> <u>Price</u>	<u>Unit</u> Price	<u>Total</u> <u>Price</u>
1	Male Pelvis Skeleton 3 Part	01				
-	3 Part Male Pelvis					
	This 3 part mc del is a natural cast of a male, bone pelvis.					
	It shows all anatomical structures in detail: both hip bones,					
	pubic symphisis, sacrum and coccyx as well as the fifth					
	lumbar vertebra with intervertebral disc. A median section					
	has been placed through the fifth lumbar vertebra, the					
	sacrum and the coccyx, so that the pelvis, which is held					
	together by practical magnets, can be separated into two					
	halves. This means that part of the cauda equina is also					
	visible in the vertebral canal. The left half of the fifth					
	lumbar vertebra is held together by magnets and can also					
	be removed.					
	be removed.					
	Male Pelvis with Ligaments,					
	2 Part					
	This 2 part model is a natural cast of a male, bone pelvis. It					
	shows all anatomical structures in detail: both hip bones,					
	pubic symph sis, sacrum and coccyx as well as the fifth					
	lumbar vertebra with intervertebral disc. A median section					
	has been placed through the fifth lumbar vertebra, the					
	corrum and the coccyx, so that the pelvis, which is					
	connected by practical magnets, can be separated easily					
	into two halves. This means that part of the cauda equina					
	is also visible in the vertebral canal. The model shows the					
	following pelvis ligaments:					
2	Male Pelvis with Ligaments, Vessels, Nerves, Pelvic	01				
2	Floor and Organ 7 Part					
	This 7 part model of the male pelvis shows in accurate					



	detail how the bones, ligaments, vessels and nerves as well as the pelvic flc or muscles and the external sex organs are connected to each other. It shows the whole pelvis, through which a median section has been placed. The model shows the following bones and ligaments: both hip bones, pubic symphisis, sacrum and coccyx as well as the fifth lumbar vertebra with intervertebral disc. A median section has been placed through the fifth lumbar vertebra, the sacrum and the coccyx, so that the pelvis can be separated into two halves. This means that part of the cauda equina is also visible in the vertebral canal. The left half of the fifth lumbar vertebra can be removed.		
3	Skull with Facial Muscles The facial and mastication muscles are illustrated on the right half of th s skull model. The face musculature can easily and precisely be differentiated from the mastication musculature by the use of two colours. On the left half the muscle origins and insertions are marked with colours (origin: red, insertion: blue). The jaw is movable and due to the flexible musculature a rudimentary chewing motion can be demonstrated. Cranium and m. masseter are detachable.	01	
1	Segmented Lungs This high qua ity Segmented Lung Model shows the lungs with represer tation of the bronchial tree close to the heart, trachea, oesophagus and aorta. The Lung is detachable into two lobes and single segments. The segments are colour coded and their position can be easily identified in the bronchial tree. The bronchial tree contains the lobar bronchi and segmental bronchi. All segments are connected by magnets which allow a safe and easy han dling of this very high quality didactic model.	01	
5	AirSim Bronchi Model with Nasal Passage The AirSim Eronchi is the latest product addition to the AirSim family, providing anatomically correct detail down to the fourth generation bronchi. The AirSim Bronchi provides exceptional detail in both internal and external features; made possible through a combination of cutting edge moulding technology and carefully handcrafted processes. The AirSim Bronchi unit will provid€ a solution to your training needs in:	01	

SMBBRUT		
 LARKAN		
Diagnostic bronchoscopy		
 Lung isolation techniques using left and right 		
 endobronchial tubes and bronchial		
blockers		
 Lung suctioning techniques 		
 • For clinicians and industrial clients, the AirSim Bronchi is		
 a leading choice for		
demonstration of items such as:		
Fibreoptic bronchoscopic equipment		
Single and double lumen tubes and bronchial blockers		
Specialised bronchial stents		
Respiratory Models three types	01	
Infant Airway Management Trainer		
Lifelike airway develops skill proficiency.		
Realistic pract ce is the key to developing proficiency in		
 airway management skills. The Laerdal Airway		
Management Trainer's lifelike upper torso and head		
 simulates real world complication when practising a		
 variety of intubation,		
ventilation, and suction techniques.		
Realistic anatomical features allow demonstration		
 of The Sellick Manoeuver and laryngospam.		
Practical training in clearing an obstructed airway and		
suctioning of liquid foreign matter.		
Provides visual inspection of lung expansion and auscultation of breath sounds. Simulates stomach inflation		
and vomiting situation. Airway Demonstration Model is		
standard with each trainer. Can be used with Trachlight		
products. Improved airway allows insertion of laryngeal		
 mask airway and combi-tube.	01	
Infant Crisis Manikin	01	
in it is a similar in it is the similar		
This dramatic training mailikill is lucal IUI UCLIIIIIII		
practice and building skills to work on the more advanced skills of the		
skills to work on the more advanced skills of the Life/form® Infant or Deluxe Infant CRiSis™Manikins.		
Life/form® Infant or Deluxe Infant CRISIS Maintails. Visual and tactile realism are combined in the simulator to		
Visual and tactile realism are combined in the simulator to		
provide students with the most realistic training possible		
to learn with incredible accuracy. Anatomical landmarks		
provide key features necessary to learn proper infant care		
a security at the second s		
in emergency situations.		
it is an houngraded to the Life / form @ complete		
In emergency situations. Manikin can be upgraded to the Life / form® Complete Infant or Deluxe Infant CRi-Sis™ Manikins by adding the Manikin Modular Component upgrades available.		



This full body infant manikin was created to offer realistic training and practice of infant airway management and CPR education. Anatomically correct in both size and detail. Landmarks include gum line, tongue, oral and nasal pharynx, larynx, epiglottis, arytenoids, false and true vocal cords, cricoid rung, tracheal rings, trachea, and oeshophagus. Also allows practice of intubation, and suction technic ues can be performed and evaluated.		
Circumcision Training Kit Circumcision Trainers Kit infant and Pre Teen These Circumcision Trainers have been developed with the assistance of one of the top nedical schools in Wisconsin, USA, as well as medical professionals in South Africa and Indonesia. The trainers ir clude the foreskin, glans penis, frenulum, meatus, and coronal groove. They are made with soft, lifelike material, which is pliable, delicate, and realistic to the touch. Mec ical students, physicians, and other practitioners can learn, practice, and improve realistic, hands-on skills for this delicate procedure without the worry of learning on a live patient. Practise simulating dorsal block injection, separating the inner lining of the foreskin (preputial epithelium) from its attachment to the glans, surgical removal of the foreskin, and suturing techniques. These trainers may also be used to demonstrate the procedure and practise aftercare skills with family members. Since there are different methods of circumcision, the Circumcision Trainers have been designed for Mogen clamp method, Guillotine clamp method, Gomco clamp method, Plastibell method, dorsal slit method, forceps guided method, and sleeve circumcision.	01	
Catheterisation Male / Female Transparent Models for Catheterisation Male and Female Developed as a learning tool for both male and female catheter simulation and anatomical study, these transparent models allow viewing and practise of the proper insertion, position, and inflation of a balloon catheter. When pract sing catheter insertion, you will experience resistance and pressure as you would with an actual	01	

	patient. The inside of the bladder is observable. Urine (water) flows v/hen catheter is inserted properly. For added realism, external genitalia is made of a special soft material to simulate real tissue. With irrigator, irrigator stand, and case.			
10	Dual Sex Muscle Skeleton	01		
	The finest teac ing tool available! Standing over 138 cm tall, this ¾ life size human replica depicts deep and superficial musculature as well as the body's major nerves, vessels, tissues and organs in exquisite detail. The internal organs are re movable (45 pieces inall) to reveal the fundamental inter-relationships of human mor phology. Remove the calvarium to view the 3-part removable brain. Look beneath the liver to reveal the gall bladder and bile duct. Peer inside the appendix, stomach lungs, heart or kidney. Remove and view the details of 13 d fferent muscles of the arms and legs. This dual sex version has interchangeable genital inserts and a female mammary gland as well as a detailed multilingual key card identifying over 600 hand numbered structures. Hand painted in realistic colours and mounted on a convenient roller base. Includes the following features: • 5 arm / shoulder muscles • 8 leg / hip muscles • 2 part removable heart • 5 part head including removable brain • 2 part removable lungs • 2 part stomach • Removable 4 part male and 2 part female genital inserts • Detachable arms, leg, head, and abdominal wall for detailed study			
11	TEACHING AND LEARNING SKILL EQUIPMENT FOR LAPROSCOPIC CHOLECYSTECTOMY, INCISIONAL HERNIA, GASTRIC BYPASS GYN-SALPINGOSTOMY &			
	<u>SALPINGECTOMY, COLORECTAL – SIGMOIDECTOMY</u> <u>PROCEDURES</u>			
	 PC Base 1 Leaning Haptic Simulator, the standard system should includes: - 			

system should includes:



LARKANA	
 PC and simulation processor, 22" flat touch screen Foot switch for electrosurgical coagulation Robust simulator with advanced ergonomic design. A tactile experience of tissue resistance feedback via the surgical tools to provides a true-to-life feel of performing laparoscopic surgery. The operation table should houses the instruments and endoscopic camera, featuring: High performance force feedback, Five (5) degrees of freedom, H gh performance and precision, Original adapted instrument handles (graspers) Interchangeable suturing handles with purchase of suturing module One (1) encloscope featuring: A variety of optical angles: 0° and 30° 45° 	
➢ Four (4) d∈ grees of freedom	
 The platform should fully compatible with all simulation modules from basic laparoscopic tasks and skills and suturing, to complete procedure training. Camera should be Included angled optics and 	
simulation of different trocars configurations	
 Cognitive components should be Interactive - guidance, instructional & real-life videos, 3D maps, online learning material facility, ready-to-use courses. Facility of web-based online learning User's Performance reports directly from the system, 	
 based on customized instructor. Software containing 60 training exercises or more including Task Training with 8 exercises and with Camera Anatomy with 4 exercises. 	
Basic Laparoscopic Skills	
 9 laparoscopic basic tasks. Enables the trainee to acquire basic-level skills essential to building confidence and ease with laparoscopic techniques. Exercises in a non-anatomic setting provide a relaxed environm ent outside of the operating room for both individuals and teams, aimed at improving orientation, eye hand coordination and manual skills. 	
 Essential Laparoscopic Tasks 3 essential laparoscopic tasks. Provides practice on tasks including peg transfer, pattern cutting and placement of ligating loop, similar to the Fundamentals of Lapar pscopic Surgery Program. The module enables 	



implementing a training curriculum for the tasks, while heav ly relying on self practice and optimizing proctor time. Breakthrough virtual reality technology provides an efficient and enjoyable environment to practice the tasks repetitively and independently until reaching the desired proficiency level.

Suturing Modules

6 tasks for practicing the basic suturing skills. The Basic Suturing Module is a unique and realistic module designed to train until proficient at basic suturing techniques for all fields of laparoscopic surgery: All tasks are illustrated by instructional videos that great y enhance the training process. Real suturing handles enable realistic training of needle loading, needle insertion, knot tying, interrupted suture and continuous suture.

> Advanced Suturing:

7 tasl s for practicing advanced suturing skills. The Advanced Suturing Module is a unique and realistic module designed to train until proficient at intracorporeal suturing and knotting techniques for all fields of laparoscopic surgery. The advanced tasks incluce practicing 'backhand' technique, and suturing in difficult suture line angles as encountered in procedures. All tasks are illustrated by instructional video: that greatly enhance the training process. Real suturing handles enable realistic training.

General Surgery – LAP Cholecystectomy Procedural Tasks

4 didactic tasks provide a step-by-step tutorial of the Lap Chole procedure. Each task focuses on one critical step of the procedure: Achieving the critical view of the cystic duct and artery, safe clipping and cutting and dissection of gallbladder from the liver bed. Instructions on safe procedure performance are applied to the anatomical setting. This module helps surgeons identify the visual cues associated with traction/counter-traction of tissue as well as identifying areas requiring additional practice.

General Surgery – Cholecystectomy Procedure

6 simulation tasks, each with 3 anatomical variations,



provide 18 complete Lap Chole procedure cases. The realistic Lap Chole procedure simulation resembles a true-to life experience, enhanced even more by tactile feedback. The module provides patient cases of easy to difficult anatomical variations to the cystic duct and positions of arteries, which may otherwise not be experienced during a training period. The module enables free-style training using different techniques, alterr ative approaches, and acquisition of the skill and knowledge necessary to safely cope with possible complications.

> Full Frocedure Module Incisional Hernia

 Library of 6 virtual patients based on realistic anatomies created from CT/MRI images of real patients.

A unique module that provides surgeons with life-like practice of laparoscopic incisional hernia, in a controlled and safe environment.

Enhances training techniques unique to laparoscopic incisional hernia repair, gaining an in-depth understanding of the abdominal anatomy, becoming skilled at carefully separating the adhesion to expose the hernia defect, appreciate potential complications, and practicing safe use of prosthetic mesh and devices used to fixate, suture and staple the mesh.

GYN Surgery – Hysterectomy

- This r ew industry first module enables to practice the key components of the Total Laparoscopic Hysterectomy procedure: Uterine manipulation; Superior pedicle division; Bladder mobilization; Exposure and division of the uterine artery and Colpotomy. The advanced and comprehensive simulation curriculum provides an opportunity for practicing a safe laparoscopic hysterectomy procedure and ir cludes educational aids such as videos of the real procedure, procedural instructions and performance reports.
- Hysterectomy Module: Should have learning Program for Hysterectomy Simulation including an integrated cognitive skills trainer, this module includes right and left uterine artery dissection, vaginal cuff opening and suturing of the cuff after removal of the uterus, Uterine Artery dissection, ureterus identification, pedicles





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		division, bladder mobilization and retroperitoneal		
		dissoction. Should be completed with video of real		
		procedure, step by step interactive guidance, 3D with		
		labe s, infra red illumination of the ureters.		
	>	The Simulator Should Includes With: -		
	>	Simi lator Main unit		
	2	Basic Laparoscopic Skills Module		
	>	Essential Laparoscopic Tasks		
	8	Suturing Basic & Advanced Module		
	>	General Surgery, Cholecystectomy Procedural Tasks		
	×	General Surgery, Lap Cholecystectomy Procedural		
		Tasks		
	>	Incis onal Hernia Module		
	>	Hysterectomy Module		
	>	OPTIONALMODULES TO BE QUOTED SEPARATELY		
	A	Bariatric Gastric Bypass		
		A unique module that provides surgeons with life-like		
		practice of laparoscopic gastric bypass procedures.		
		The rodule aims at practicing technical aspects of		
		laparoscopic Roux-en Y creation and the		
		jejunojejunostomy, acquiring skills of gastrojejunal		
		anastomosis creation and understanding intra-		
		operative problems during Lap Bypass and how to		
		avoid them.		
	2	This module includes 4 procedural cases examples of		
		stress ed points during the gastric bypass procedure.		
	8	Color ectal Surgery – Sigmoidectomy		
	>	A con plete procedure simulation. The module		
		provides an environment in which to perform a wide		
		range of tasks from vessel isolation through creation of		
		the ar astomosis before encountering them in the		
		operating room. Trainees learn to determine the best		
		approach to the procedure, practicing real-time clinical		
		decision-making and working safely to prevent		
		complications and respond to injuries. An anatomical		
		3D map, on-demand real-life videos, procedural		
		instructions and trocar placements complete this		
		exceptional training module.		
	8	<u>GYN Surgery – Essential GYN</u>		
	\mathbf{r}	7 patient cases: Laparoscopic tubal sterilization,		
		salpin;30stomy, salpingectomy and salpingo-		
		oophorectomy. Trainees encounter a range of patient		
		pathologies and gain experience with various		
		techniques and surgical instruments. Included in this		
		module are a variety of complications and emergency		



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situations such as bleeding at the implantation site, a ruptured fallopian tube and a blood-filled abdominal cavit *i*.

Urology – Nephrectomy Module

> A laparoscopic transperitoneal nephrectomy procedure. It has been estimated to take surgeons approximately 15 laparoscopic cases to become proficient with the nephrectomy procedure. The module is intended to provide an alternative platform for saining the learning curve experience, before proceeding to the clinical setting. Steps for successful and effective performance of the procedure may be pract ced: Colon mobilization; Exposure and dissection of the renal hilum; Mobilization of the upper pole. The adreral gland may be spared or removed. Potential errors and complications, and the methods by which to avoid or manage them are simulated, for example, injuries to the renal vessels and their tributaries may occur during unsafe electro-surgical dissection, clipping or stapling. Didactic step-by-step procedural instructions and videos of a real procedure may be displayed. Performance metrics are collected during the session to assess training success.

Name of Firm & Signature with Stamp

Purchase & Store Officer

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