

---

# The 2026 Kenya Medical Equipment Parts Sourcing Handbook

Dialysis & Imaging Equipment Focus

A Practical Guide for Health Facilities, Procurement Teams & Biomedical Engineers



© 2025 Nanto Med a division of [Nanto](#). All rights reserved.

## Why This Matters

Equipment downtime costs lives. And money.

In Kenya, you already know the challenge: a dialysis machine goes down on Friday, and you're scrambling to find parts through WhatsApp contacts, hoping someone knows someone who might have what you need. Meanwhile, your imaging equipment sits idle because that specific ultrasound probe is 'on order' with no clear delivery date.

The numbers tell the story: more than 70% of health-technology requirements in Kenya are imported, and over 90% of medical devices in public hospitals come from abroad. What this means for you: long lead times, foreign-exchange headaches, customs complexity, and the constant question of whether you're getting genuine parts at fair prices.

This handbook gives you the practical frameworks we use at Nanto to source dialysis and imaging parts faster, cheaper, and more reliably. Not theory; real tactics that work in Kenya today.

Whether you're a biomedical engineer keeping machines running, a procurement manager managing tight budgets, or a clinic administrator juggling everything, these five pages are designed to help you avoid the most expensive mistakes and build a smarter sourcing strategy.

*Fair warning: We're not going to sell you anything in this guide. We're going to show you how the system works, what to watch for, and how to get better results; whether you work with us or not.*

## The 5 Biggest Mistakes (And How to Avoid Them)

We've seen these patterns repeatedly across Kenyan facilities. Each mistake is expensive. All of them are avoidable.

- 1. Ordering at the last minute:** waiting until equipment has already failed.  
*Real cost:* A dialysis center in Nairobi had their Fresenius 4008S down for three weeks because they only started sourcing the conductivity sensor after the machine failed. Three weeks = 126 missed dialysis sessions at KES 10,650 per session (SHA rate) = KES 1,341,900 in lost revenue.  
**Fix:** Keep a '*critical spares list*' for each machine. Get quotes in advance. Know your lead times before you need them.
- 2. Not verifying compatibility before purchasing:** ordering generic part numbers without checking model, serial, or firmware.  
*Real cost:* A clinic ordered 'Mindray ultrasound probes' without specifying which model. Wrong connector type. Part sat unused for six months before they reordered correctly. Double the cost plus six months of reduced service offerings.  
**Fix:** Always record: machine make, model, serial number, firmware version, and specific part number. Take photos of the part and its label. Send these to your supplier before ordering.
- 3. Accepting 'landed cost' quotes without breakdown:** not understanding what you're actually paying for.  
*Real cost:* Many buyers pay 30-40% markup without knowing it. A part that costs USD 120 ex-factory might be quoted at KES 25,000 when the actual landed cost (including duty, VAT, shipping) is closer to KES 18,000. You're paying KES 7,000 extra per part.  
**Fix:** Always ask for the cost breakdown: supplier price + shipping + duty/VAT + margin. Compare the markup across quotes. Transparent suppliers will show you the math.
- 4. Assigning procurement to non-technical staff without oversight:** letting interns or junior admin staff order complex medical parts.  
*Real cost:* A hospital ordered dialysis bloodlines three times before getting the right specification. Each order took 2-3 weeks. Nine weeks of delayed

operations because technical specifications weren't checked by someone who understood the equipment.

**Fix:** Procurement can handle logistics, but biomedical engineers (BME) must verify specifications before ordering. Create a simple approval workflow: Procurement gets quotes → BME verifies specs → Procurement places order.

- 5. **Not keeping a parts history register:** forgetting what was replaced, when, and from whom.  
*Real cost:* Without records, you can't track failure patterns, warranty status, or supplier performance. You might order the same failing part three times instead of identifying the root cause (like voltage irregularities damaging sensors).

**Fix:** Simple Excel sheet:

Date	Machine	Part	Supplier	Cost	Failure Reason	Warranty Expiry
Sensor	5008	M001	ACME Med Part	10,000	Humidity	June 2025

Review quarterly to spot patterns.

## Your Quick-Win Sourcing Checklist

Use this checklist monthly to stay ahead of parts shortages. Takes 30 minutes.  
Saves weeks of downtime.

### Dialysis Equipment (Fresenius, Gambro, B. Braun)

- ✓ List all dialysis machines (model numbers, serial numbers, installation dates)
- ✓ Check last replacement date for: conductivity sensors, pressure transducers, hematocrit sensors, bloodline sets
- ✓ Identify 2-3 parts per machine that could fail in next 90 days (based on usage hours or age)
- ✓ Get quotes from 2-3 suppliers for these parts (compare landed costs)
- ✓ Verify stock availability: 'In stock now' vs 'Ships in 7-14 days' makes a huge difference

### Imaging Equipment (Ultrasound, X-Ray, CT)

- ✓ List all imaging equipment (models, serial numbers, most-used probes/detectors)
- ✓ Check cable integrity weekly: look for cracks, fraying, connector damage
- ✓ Track probe/detector lifespan: Most ultrasound probes last 3-5 years with proper care; X-ray detectors 5-7 years
- ✓ Keep backup cables on-site for highest-use equipment (SpO<sub>2</sub> cables, ECG leads, ultrasound probes)
- ✓ Document compatibility: Which cables/probes work with which machines (avoid ordering incompatible parts)

### Monthly Review Actions

- ✓ Update your parts history register (what failed, what was replaced, cost, supplier)
- ✓ Review supplier performance: Did they deliver on time? Correct part? Good communication?
- ✓ Check warranty expiration dates: Order warranty replacements before they expire
- ✓ Flag budget concerns early: Alert finance if major part replacement needed in next quarter

*Pro tip: Set a recurring calendar reminder for this checklist. 30 minutes per month prevents 3-week emergencies.*

# Understanding Medical Parts Pricing (What You're Really Paying For)

Most facilities in Kenya don't understand why medical equipment parts cost what they do. Let's fix that.

## The Traditional Supply Chain Problem

When you buy parts through typical channels, here's what happens:

1. **Manufacturer** sells part for USD 85
2. **International Distributor** adds 20-25% markup (now USD 106)
3. **Regional Importer** adds another 15-20% (now USD 125)
4. **Local Agent** adds 20-30% more (now USD 160+)
5. **You pay** the accumulated markups, often 80-100% above factory price

Each middleman adds cost but not necessarily value. They're managing relationships, inventory risk, and logistics, but you're paying for 3-4 layers of margin.

## What 'Landed Cost' Actually Means

Whether you buy from us or anyone else, every imported part has these REAL costs:

- **Supplier price** - What the manufacturer charges (ex-factory)
- **International shipping** - DHL/FedEx express OR sea freight
- **Kenya import duty** - Typically 25% for medical devices
- **VAT** - 16% on (supplier price + shipping + duty)
- **IDF & RDL fees** - Import Declaration Fee (2.5%) + Railway Development Levy (2%)
- **Customs clearance** - Agent fees, storage, documentation
- **Local delivery** - Getting it from JKIA to your facility

## Example: Fresenius Conductivity Sensor

Let's break down what goes into a typical part (all amounts in USD):

Cost Component	Amount (USD)
Supplier price (ex-factory)	\$85
Express shipping (DHL, 3-5 days)	\$22
Import duty (25% of CIF)	\$27
VAT (16% of CIF + duty)	\$21
IDF (2.5%) + RDL (2%)	\$5
Customs clearance & local delivery	\$8
<b>True Landed Cost (to get part to Kenya)</b>	<b>\$168</b>

Cost Component	Amount (USD)
Typical retail with 1-2 middlemen	\$200-250

**The difference?** Multiple middlemen layers, each adding markup. Kenya's import duties and taxes are significant; you're looking at 48-50% in government fees alone before any supplier markup.

## The Nanto Approach: Fewer Layers, Better Value

**We're honest:** As a startup, we don't have direct relationships with every manufacturer yet. For some products like patient monitoring cables, we've built direct manufacturer relationships. For others, we're still working through importers while we grow.

But here's what we commit to: eliminating unnecessary middlemen wherever possible. Instead of 3-4 markup layers, we aim for 1-2 maximum. More of your money goes to actual value: genuine parts, reliable supply, technical support, and equipment uptime.

We're not the cheapest, quality, reliability, and service cost something. But we work hard to offer better value than the traditional supply chain.

## How to Evaluate ANY Quote (From Us or Anyone)

When comparing suppliers, ask these questions:

- 1. What's included?** Just the part, or also warranty, technical support, training?
- 2. What's the lead time?** 'In stock' vs 'ships in 2-3 weeks' makes a huge difference for critical parts
- 3. Is this the landed price?** Including all duties, taxes, delivery to your facility?
- 4. What's your parts failure rate?** Cheap parts that fail twice as often cost more in the end
- 5. How many middlemen?** Each layer adds cost without necessarily adding value
- 6. What happens when it's wrong?** Return policy, replacement guarantee, who bears the risk?

*Smart facilities calculate total cost of ownership, not just purchase price.*

**Example:** A sensor that costs \$160 but includes free replacement within 48 hours if defective, plus technician training, plus 2-year warranty? That's better value than a \$130 sensor you have to ship back to China at your expense if it fails in 3 months.

## Next Steps: Let's Build This Together

If you made it this far, you care about getting parts sourcing right. So do we.

### Who We Are (The Honest Version)

Nanto Med is a Kenya-based startup building East Africa's essential medical equipment parts ecosystem. We're not the biggest. We're not the oldest. We don't have every part for every machine.

#### What we do have:

- Direct relationships with verified manufacturers and OEMs for dialysis and imaging parts
- Transparent pricing (we'll show you the full landed cost breakdown every time)
- Technical knowledge (we understand biomedical equipment, not just logistics)
- Honest communication (if we can't help, we'll tell you and suggest who can)

### What We Can't Promise (Yet)

- Same-day delivery outside Nairobi (logistics take time)
- Every part for every machine (we're adding products quarterly based on customer needs)
- Massive inventory sitting in warehouses (we source on-demand to keep costs down)

### What We Can Promise

Your equipment uptime matters more than our sale. If we're not the right fit, we'll tell you. If we can help, we'll prove it with transparent pricing, clear timelines, and reliable delivery.

*Ready to try a different approach to parts sourcing?*

### Get in Touch

**Email:** [med@nantomed.com](mailto:med@nantomed.com)

**WhatsApp:** +254 20 878 7990

**Website:** [www.nanto.com](http://www.nanto.com) | [www.nantomed.com](http://www.nantomed.com)

**What to send:** Equipment model, part needed (with photo), and urgency level. We'll respond within 4 business hours with pricing and availability.