

Nuclear Medicine Capital Equipment Summary
Diagnostic SPECT/CT – Saint Louis (657-B20012)

Items in red were updated on 7/19/2016

VA Saint Louis Healthcare System is requesting a diagnostic Nuclear Medicine Gamma SPECT/CT. This equipment will be used to provide diagnostic quality Nuclear Medicine, and a multitude of CT scans to include but not limited to low dose lung nodule screening. Nuclear examinations to include but not limited too – Octreoscans, Parathyroid scans, MIBG scans, I-131/I-123 scans, Liver scans with labeled red blood cells, infection imaging with labeled white blood cell scans, bone imaging in obese patients, and other miscellaneous gamma SPECT/CT uses. This document outlines the current state of the medical center and why this NAC Special Consolidation is being entered into.

The VASTLHCS recently completed a 3-phase renovation of our entire Nuclear Medicine wing located at the John Cochran campus. This renovation included complete rework of all offices, meeting rooms, patient waiting areas, as well as equipment control and scan rooms. At the time of design and construction the Medical Center renovated a control room and scan room with the expectation of installing a Philips Healthcare BrightView XCT system. At this time, VA is seeking bids for a new system, including work to modify the existing room as needed, to fill the need. Due to this unforeseen circumstance the Medical Center is in need of an expedited award of both the replacement medical equipment and the extended installation work necessary to prepare the space for patients.

Existing conditions are described in the provided Construction Scope of Work and vendors will be given the opportunity to perform a site walkthrough at the VASTLHCS to field verify what has been presented.

The Medical Center has a requirement to have this equipment installed and inspected by the NAC no later than April 30th, 2017. However as the space has already been prepared and a majority of construction completed in the above mentioned phased project the Medical Center would like to install the equipment as soon as possible to ensure appropriate use of available space.

Nuclear Medicine Capital Equipment Specifications

Diagnostic SPECT/CT – Saint Louis (657-B20012)

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Main Nuclear Medicine System

1. Dual Detector with Variable Angle
2. Large Field of View: minimum UFOV 50cm x 38cm
3. Table Weight Limit > 400lbs
4. Energy Range Minimum 60-550keV
5. Hi Resolution Detector – 3/8" Crystal
6. High Performance Dual Head Configuration
7. Our room size is limited therefore, please provide dimensions of the system H x D x W (in), as this will be important evaluation information.

CT Specifications

1. Number of simultaneously acquired CT slices - minimum 16
2. Field of View: minimum 50cm
3. Rotation time: minimum 0.5 seconds
4. mA equal to or greater than 300 with dose modulation
5. CTAC Timing Resolution equal to or less than 0.5 Sec, multiple kVp, mA
6. Iterative Reconstruction for SPECT which shall include 1)CTAC, and 2) Scatter Correction, and 3) Ordered Subset Expectation Maximization (OSEM) reconstruction algorithm

Collimators

1. Low Energy High Resolution (LEHR) Collimators (x2) – to be used for General All Purposes Images
2. Medium Energy General Purpose Collimators (x2) – to be used for OctreoScan, Indium imaging
3. High Energy General Purpose Collimators (x2)– to be used for I-131 imaging
4. Pinhole Collimator
5. Collimator Cart(s) – as required by vendor

Accessories/Additional Items

1. ECG/Cardiac Gate
2. Flood Source/Holder
3. Four Quadrant Bar Phantom
4. Point Source/COR Source/Holder
5. Low Contrast CT Phantom/Holder
6. Scanner UPS

7. Main Disconnect Panel
8. Head Holder
9. Patient Arm Support
10. Patient Leg Rest
11. Patient Pallet Extender
12. Patient Table Multi-angle Pivot – to perform stand up images
13. ~~CT Contrast Injector~~ not required

Acquisition Workstation (*located in the control room*)

1. Acquisition/Console Hardware
2. Minimum 19" LCD Monitor (quantity as required by vendor)
3. Keyboard/Mouse
4. Latest Operating Systems (e.g. Windows 7 or greater)
5. Workstation UPS (as defined by vendors)
6. Hardware memory upgrade (ex: 24GB RAM)

Processing Workstation (*located in the control room – to mimic reading workstation configuration*)

1. Acquisition/Console Hardware
2. Minimum 19" LCD Monitor (quantity as required by vendor)
3. Keyboard/Mouse
4. Latest Operating Systems (e.g. Windows 7 or greater)
5. Workstation UPS (as defined by vendors)
6. Hardware memory upgrade (ex: 24GB RAM)

Software

1. Acquisition Software
2. DICOM 3.0 Compatible Worklist
3. SPECT/CT Processing
4. Nuclear Medicine Diagnostic Applications
5. SPECT/CT Fusion Applications
6. Software Licenses

Advanced Applications (*all applications to be included on the all processing and reading workstations*)

1. Whole Body SPECT Capability
2. Advanced Nuclear Cardiology SPECT/CT
3. Advanced Nuclear Cardiology Configuration/Hardware/Processing
4. SPECT/CT MPI Registration/QC Package (ex: Cedars QGS/QPS, Emory TB, 4DM)
5. Advanced Nuclear Oncology
6. Advanced Nuclear Neurology
7. Advanced Iterative Reconstruction/Processing for Nuclear Medicine/Nuclear Cardiology (OSEM 3D)
8. Advanced Resolution Recovery
9. ½ time/dose Planar
10. ½ time/dose SPECT

Training

1. Initial Onsite Applications Training (1 week) – to be used 1 week prior to Go-Live for technologist
2. Go-Live onsite Applications Training (1 week) – to be used for technologists
3. Go-Live onsite Applications Training (1 week) – to be used for Physicians
4. Follow-up Onsite Applications Training (1 week) – to be used with the first 12 months from Go-Live for Technologists
5. Follow-up Onsite Applications Training (1 week) – to be used with the first 12 months from Go-Live for Physicians
6. Offsite Training for two Technologists
7. Offsite Training Travel Package (Lodging/Meals/Transportation)
8. Technical Biomedical Engineering Training for one Biomedical Engineering staff
9. Technical Biomedical Engineering Training Travel Package (Lodging/Meals/Transportation) for one Biomedical Engineering staff

Delivery

1. Equipment is required to be delivered no later than April 30, 2017.

Turnkey site prep/installation

1. Room B233, Main Building, John Cochran campus has been generally prepared for installation of a SPECT/CT
 - See included Statement of Work for details
 - See included drawings of current room
 - Encouraged to attend the Site walk through on July 13th from 10-1pm (central) – meet in room B233, Main Building, John Cochran campus

Support and other Documentation to Provide

1. Provide DICOM Conformance Statement
2. Provide completed Pre-procurement Assessment form (6550)
3. Provide information about your companies support structure during the warranty period (i.e. a listing of Field Service Engineer locations and availability, support 800 phone number(s), remote support, etc.)
4. Provide a detailed plan to meet the delivery date of April 30, 2017.
5. Provided single point of contact for implementation of the system including but not limited to – working with facilities management, construction coordinator and Imaging service management.

Trade-in

None

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STATEMENT OF WORK (SOW)
As of 6/27/2016

1. Contract Title

Site Prep for new SPECT-CT Suite
Equipment order 657-B20012

2. Background

HTHC Turnkey project to construct and renovate the existing space as needed to create a new SPECT-CT suite within the Nuclear Medicine Service located in Main Building 1, in accordance to the VA and the Manufacture requirements & specifications and local & state standard and regulation.

3. Scope of Work

The vendor shall provide the following professional scopes;

A. Design Package:

Complete design package shall be prepared by a licensed professional AE firm and include a complete set of drawings, specifications and a detailed estimate of construction cost in accordance to the VA standard requirements and equipment manufacture.

B. Construction / Renovation for the defined SOW include fully function equipment:

Work includes general construction, existing structural alterations and, utility provisions that support set medical equipment inside room B233.

Contractor shall completely retrofit, upgrade, and renovate area within the documented space to create the new SPECT-CT suite approx. 400 sf, including Scan & Control rooms, and rooms as needed to fulfill the service need.

The existing room has been recently renovated with the following installations: lead shielding, new HVAC, new lighting, and new finishes. However, all structural and utility provisions that support set medical equipment inside B233 shall be installed as necessary to support the new system operation.

4. Specific Tasks

A. Fire Safety Plan:

Establish and maintain a fire protection program in accordance with 29 CFR 1926. Prior to start of work, prepare a plan detailing project-specific fire safety measures, including periodic status reports, and submit to Project Engineer and Facility Safety Officer for review for compliance with contract requirements in accordance with Section 013323, SAMPLES AND SHOP DRAWINGS. Prior to any worker for the contractor or

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subcontractors beginning work, they shall undergo a safety briefing provided by the general contractor's competent person, per OSHA requirements. This briefing shall include information on the construction limits, VAMC safety guidelines, means of egress, break areas, work hours, locations of restrooms, use of VAMC equipment, etc. Documentation shall be provided to the Project Engineer that individuals have undergone contractor's safety briefing.

B. Temporary Construction Partitions:

1. Install and maintain temporary construction partitions to provide smoke-tight separations between construction areas and adjoining areas. Construct partitions of gypsum board or treated plywood (flame spread rating of 25 or less in accordance with ASTM E84) on both sides of fire retardant treated wood or metal steel studs. Extend the partitions through suspended ceilings to floor slab deck or roof. Seal joints and penetrations. At door openings, install Class C, ¾ hour fire/smoke rated doors with self-closing devices.
2. Close openings in smoke barriers and fire-rated construction, including existing floor slabs above and below, to maintain fire ratings. Seal penetrations with listed through-penetration firestop materials in accordance with Section 078400, FIRESTOPPING.

C. Infection Prevention Measures:

1. Implement the requirements of VAMC's Infection Control Risk Assessment (ICRA) team. ICRA Group may monitor dust in the vicinity of the construction work and require the Contractor to take corrective action immediately if the safe levels are exceeded.
2. Establish and maintain a dust control program as part of the contractor's infection preventive measures in accordance with the guidelines provided by ICRA Group as specified here. Prior to start of work, prepare a plan detailing project-specific dust protection measures, including periodic status reports, and submit to Project Engineer and Facility ICRA team for review for compliance with contract requirements.

D. Utilities Services:

Maintain existing utility services for Medical Center at all times. Provide temporary facilities, labor, materials, equipment, connections, and utilities to assure uninterrupted services. Where necessary to cut existing water, steam, gases, sewer or air pipes, or conduits, wires, cables, etc. of utility services or of fire protection systems and communications systems (including telephone), they shall be cut and capped at suitable places where shown; or, in absence of such indication, where directed by Project Engineer.

E. Phasing:

The Medical Center shall maintain its operation 24 hours a day, 7 days a week. Therefore, any interruption in service shall be scheduled and coordinated with the COR to ensure that no lapses in operation occur. The CONTRACTOR shall develop a work plan and schedule detailing, at a minimum, the procedures to be employed, the equipment

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and materials to be used, the interim life safety measure(ILSM) to be used during the work, the phasing of the project, and a schedule defining the duration of the work with milestone subtasks.

Contractor shall furnish the COR with the work plan and schedule including approximate phasing dates on which the Contractor intends to accomplish work in each specific area of site, building or portion thereof, and independent project phase. In addition, Contractor shall notify the COR two weeks in advance of the proposed date of starting work in each specific area of site, building or portion thereof. Arrange such phasing dates to insure accomplishment of this work in successive phases mutually agreeable to the Medical Center Director, COR, and Contractor as follows:

1. After award of Contracts, the Contractor, including all sub-Contractors shall meet with Owner's representatives to establish the exact procedure and sequence of construction to be followed. Following this meeting, the Contractor shall meet with all sub-Contractors to prepare a coordinated Schedule of Construction incorporating the established procedure, sequence of construction and work of all Contractors. The Contractor shall submit for review and approval this coordinated schedule.
2. The intent of this PHASING is to outline a coordinated construction program which minimizes disruption to the operation of the existing facility while allowing construction to proceed in as efficient manner as possible. The safety and well-being of patients and staff utilizing the facility in and around the various construction sites is the major concern of all involved. All steps, whether specifically outlined in this section or not, should be taken to ensure patient/staff safety and access.

F. Project Duration:

1. Immediately after award of the Contract, a period of sixty (60) days (maximum) shall serve as a design period and an Administrative Submittal Period. Contractors will not be permitted to perform any work on site during this time. At the completion of this Period, construction will commence.
2. The construction duration is hundred eighty (120) days, project shall be substantial completed no later than April 30, 2017.

G. As-Built Drawings:

1. The contractor shall maintain two full size sets of as-built drawings which will be kept current during construction of the project, to include all contract changes, modifications and clarifications.
2. All variations shall be shown in the same general detail as used in the contract drawings. To insure compliance, as-built drawings shall be made available for the Project Engineer's review, as often as requested.
3. Contractor shall deliver two approved completed sets of as-built drawings to the Project Engineer within 15 calendar days after each completed phase and after the acceptance of the project by the Project Engineer.

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H. Place of Performance:

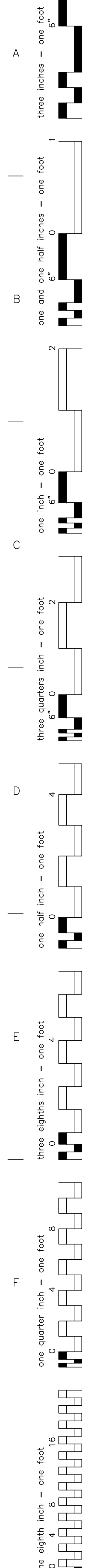
VASTL JC, St. Louis Campus, Main Building 1.


I. Period of Performance:

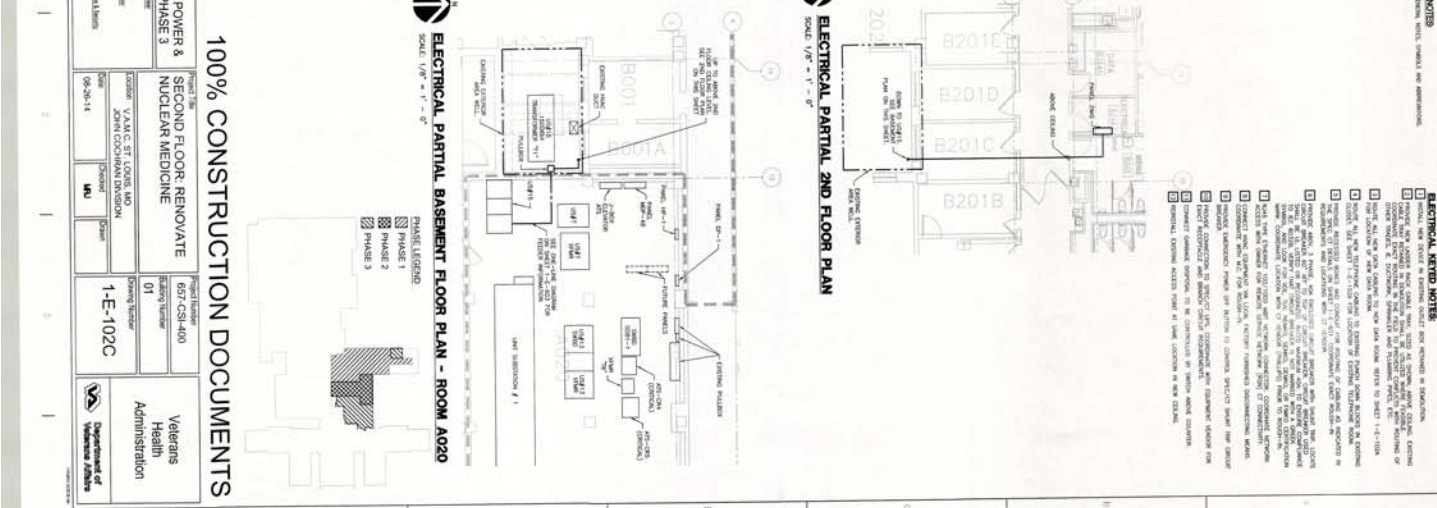
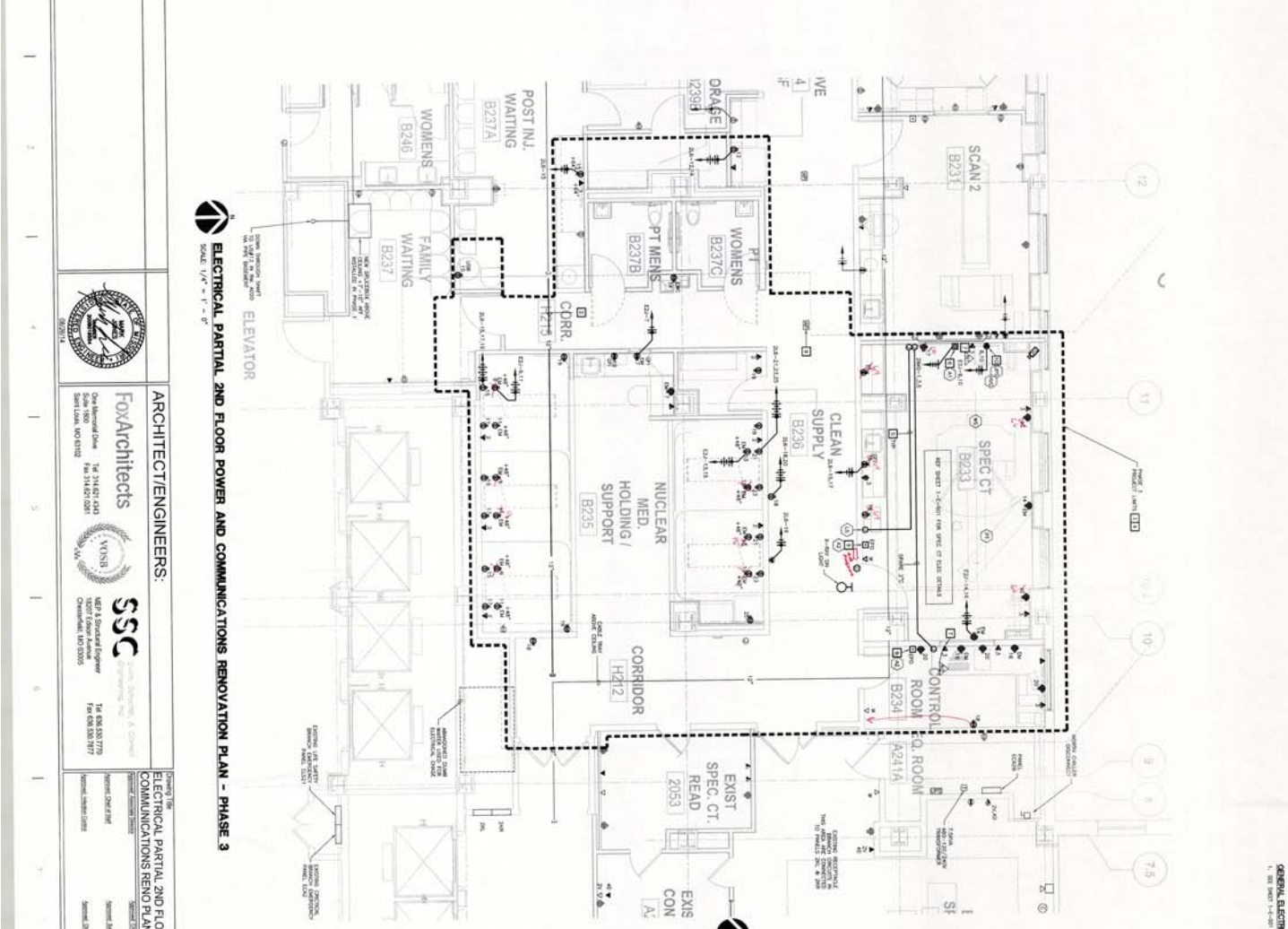
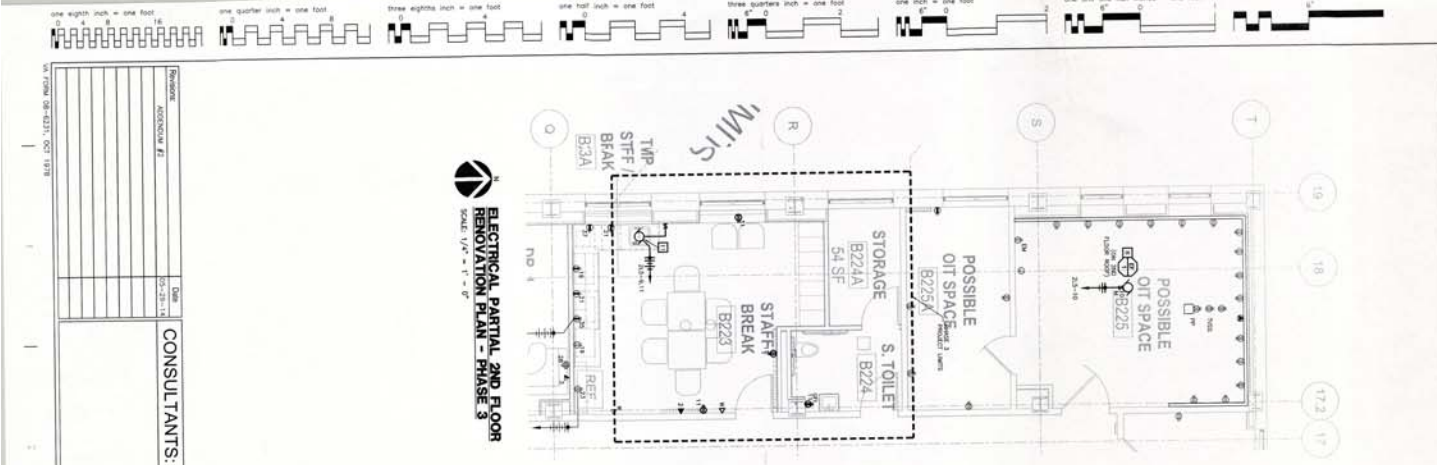
180 days from the NTP with a completion date **NO LATER THAN April 30, 2017.**

Attachments;

- Red line DWG



		CONSULTANTS:		ARCHITECT/ENGINEERS:		Drawing Title		Project Title		Project Number		Office of Construction and Facilities Management	
						Second Level Floor Plan		As-Built Plans		000			
								Building Number 01					
								Drawing Number					
Added 657-CSI-400 renovations	MARCH2016					Approved Project Director		Location John Cochran VAHCS		A104		 Department of Veterans Affairs	
Added 657-CSI-500 renovations	MARCH2016							Date June 2012		Checked MH	Drawn KFC		Dwg. 6 of 50
Revisions:	Date												



GENERAL ELECTRICAL NOTES:

- SEE SHEET 1-100 FOR GENERAL NOTES, SYMBOLS AND CONVENTIONS.
- ALL NEW WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE NATIONAL ELECTRICAL CODE (NEC) AND THE NATIONAL FIRE PROTECTION ASSOCIATION (NFPA) 70B.
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ELECTRICAL PARTIAL 2ND FLOOR POWER AND COMMUNICATIONS RENOVATION PLAN - PHASE 3

100% CONSTRUCTION DOCUMENTS

PHASE LEGEND

- PHASE 1
- PHASE 2
- PHASE 3

CONSULTANTS:

ARCHITECT/ENGINEERS:

FOXA Architects

SSC

PROJECT TEAM

PROJECT NO.

DATE

REVISIONS

1-100C

Veterans Health Administration