

Equipment Specifications

Digital Radiography and Fluoroscopy

[VISN 01/CWM VA Healthcare System Site 631]

631-B80017

A. REQUIREMENT OVERVIEW

This document highlights the requirements, technical specifications, and services being requested by VA Central Western Mass Healthcare System towards the purchase of a Radiographic/Fluoroscopic table system that is used for diagnostic radiographic and fluoroscopic examinations. Contractor shall provide all labor, equipment, materials, parts, tools, software, project management and disposal necessary to furnish and install a fully functional Radiographic/Fluoroscopic table system at 421 N Main St, Leeds MA 01053.

Facility	Quantity
VA Central Western Mass. Healthcare System Leeds Campus	1

B. TECHNICAL REQUIREMENTS

1. Unit physical specifications

a. Maximum patient weight [lbs]	Approx. 600lbs
b. Minimum table tilt [deg]	90 deg upright
c. Minimum generator power [kW]	80kW
d. Radiographic kVp range [kVp]	50 to 120kVP
e. Fluoroscopy kVp range [kVp]	50 to 120kVP
f. Minimum pulse rate [frames/sec]	Up to 30 frames/sec
g. Minimum SID range [in]	40in

2. Additional specifications

Generator	
<input checked="" type="checkbox"/>	a. Continuous and pulsed fluoroscopy ma modes
Fluoroscopic Tube	
<input checked="" type="checkbox"/>	b. Configuration
	<input checked="" type="radio"/> Overhead tube
	<input type="radio"/> Floor-mounted
<input checked="" type="checkbox"/>	c. Collimation – fully adjustable manual and automatic exposure control with visible light field display. Rotatable +/- 45 degrees
Fluoroscopic spot device/Imaging tower	
<input checked="" type="checkbox"/>	d. Flat panel detector technology
<input checked="" type="checkbox"/>	e. Automated image capture and save, to include last image hold
<input checked="" type="checkbox"/>	f. Variable speed power assist controlled in all directions



<input checked="" type="checkbox"/>	g. Footswitch and tower controls, to provide the following:	
	h. Control of both fluoroscopy and spot shots	
	i. Automatic shut-off when footswitch or tower control is released	
<input checked="" type="checkbox"/>	j. Tabletop travel controls	
<input checked="" type="checkbox"/>	k. Collimation control	
Radiographic/overhead tube crane system		
<input checked="" type="checkbox"/>	l. Patient alignment system (laser alignment/positioning lights)	
<input checked="" type="checkbox"/>	m. Table and upright auto tracking package	
<input checked="" type="checkbox"/>	n. Pre-programmed exposure settings located on tube or in control room	
<input checked="" type="checkbox"/>	o. Ability to change between table top, upright bucky, and table bucky from tube head	
<input checked="" type="checkbox"/>	p. Ability to lower tube to within 16" of the floor when used with the wall stand	
Control room fluoroscopic/radiographic control panel		
<input checked="" type="checkbox"/>	q. Auto HIS/RIS refresh package	
<input checked="" type="checkbox"/>	r. Quality control tracking package	
<input checked="" type="checkbox"/>	s. UPS for x-ray control/image memory	
<input checked="" type="checkbox"/>	t. Ability to send images directly from the control panel (no separate workstation required)	
<input checked="" type="checkbox"/>	u. Ability to capture live video	
<input checked="" type="checkbox"/>	v. DVD recorder/burner	
Wall stand/fixed wall detector		
<input checked="" type="checkbox"/>	w. Tilt-able detector holder with inherent grid (-20 degrees to 90 degrees)	
<input checked="" type="checkbox"/>	x. Height minimum – low enough to complete standing knee exams while patient is standing on the floor	
<input checked="" type="checkbox"/>	y. Height maximum – high enough to complete AP C-spine exams while patient is standing on the floor	
In-room monitor		
<input checked="" type="checkbox"/>	z. LCD in-room monitor	<input checked="" type="radio"/> Ceiling-mounted <input type="radio"/> Pedestal-mounted
Table requirements		
<input checked="" type="checkbox"/>	aa. Full articulation	
<input checked="" type="checkbox"/>	bb. Auto-centering option to exact middle while the table is in horizontal or vertical position	
<input checked="" type="checkbox"/>	cc. Table movement controls	<input type="radio"/> Tableside <input checked="" type="radio"/> Trolley
<input checked="" type="checkbox"/>	dd. Removable/adjustable patient handgrips	
<input checked="" type="checkbox"/>	ee. Removable/adjustable footrest	
<input checked="" type="checkbox"/>	ff. Removable/adjustable shoulder rests	
<input checked="" type="checkbox"/>	gg. Motor driven table top movement in the X and Y axis at stated maximum weight capacity.	



3. Software Requirements

<input checked="" type="checkbox"/>	a. Monitoring of Dosage- The system must be able to supply a technology that allows for monitoring and tracking of radiation dose provided to a patient; DICOM structured reporting is preferred. DAP accuracy must be 99% reproducible with <2% deviation.
<input checked="" type="checkbox"/>	b. Repeat rate – ability to track repeat/retake data to include such items as technologist (required unique identifier), reason for repeat, patient dose, exam type, etc. The data should be exportable to Excel or other databases for tracking, trending, and combining with data from other imaging sources within the facility.
<input checked="" type="checkbox"/>	c. Dose Reduction- The system must have systems in place to facilitate regular protocol optimization and reduced radiation dose to the patient.
<input checked="" type="checkbox"/>	d. Fluoroscopy Loop – Ability to record and store dynamic fluoroscopy sequences. Storage capacity may be variable according to pulse per second settings (please specify). Please include storage and display options for recorded data review and archive.

4. Security/Connectivity Requirements

<input checked="" type="checkbox"/>	a. OEM-supported operating system
<input checked="" type="checkbox"/>	b. DICOM 3.0 print, store, commit, and modality worklist
<input checked="" type="checkbox"/>	c. HL7 integration (HIS/RIS)
<input checked="" type="checkbox"/>	d. Wireless connectivity to VA network – Compatible with 802.11b/g/n and FIPS 140-2 compliant
<input checked="" type="checkbox"/>	e. Encrypted hard drive
<input checked="" type="checkbox"/>	f. PACS compatibility – vendor neutral

C. TRAINING REQUIREMENTS

Description	No. of Personnel
1. On-site clinical applications training for technologists during go-live	10
2. On-site follow-up clinical applications training after technologists have hands-on experience with the system	10
3. Biomedical technician training package (to include tuition)	1

Biomedical technician training shall include any prerequisites required prior to the training and shall be equivalent to the training received by OEM field service representatives. Technicians shall be given all service manuals, schematics, diagrams, diagnostic software, other special tools, and keys equivalent to what OEM field service representatives have available to diagnose, troubleshoot, repair, and maintain the equipment.



Technologists who complete the clinical applications training shall receive continuing education credits (CMEs).

Off-site training will not be purchased at the time of award. Vendors must demonstrate that they can provide any required off-site training listed above, therefore off-site training should be quoted as an optional item. Travel for VA employees is not authorized under the HTME contracts. In no case should any training include expenses for travel or travel for VA personnel at no cost.

D. SERVICE REQUIREMENTS

1. VPN/Remote Access – The vendor shall provide, at no additional cost, any and all equipment service programs, such as remote diagnostics, during the warranty period. The vendor shall provide post-warranty remote diagnostic service program as an “Add Option” with the offer. The system shall provide vendor remote diagnostics via VPN. The vendor shall either utilize the VA national site-to-site VPN or work with the Office of Cyber and Information Security and the VAMC Information Systems Security Officer to establish a client-based VPN.
2. Service and Operator Manuals – The vendor shall provide the following documentation for the proposed systems:
 - a. Two (2) copies of operator instruction manuals (one (1) electronic and one (1) physical copy)
 - b. Two (2) copies of a system manager (super user) manual outlining back-up procedures, managing privilege group limits, routine tasks, etc.
3. Minimum Warranty – The system and accessories shall be covered under the manufacturer’s warranty and shall include all parts and labor for one year following acceptance by the VAMC. This warranty must include PMs as required by the manufacturer. The manufacturer’s factory-trained field service representatives shall perform installation and maintenance during the warranty period.

Vendors are encouraged to include any offerings for service, warranty, and training that may exceed the requirements with their proposals. Vendors who do not include any added value offerings for service, warranty, and training will not be docked or excluded from consideration. However, any such offerings will be evaluated based on added value.

E. OTHER INFORMATION/DOCUMENTATION REQUESTED

1. Product brochures
2. Technical specification sheets, to include dimensions and weight of the system
3. DICOM Conformance Statement
4. IHE integration statement
5. FIPS 140-2 certification
6. Completed pre-procurement assessment form (6550)
7. Completed MDS2 form
8. Detailed information about the curriculum and length of the biomedical technical training
9. Details on any off-site training offered for technologists
10. Information about your company’s support structure during the warranty period
 - a. Describe on-line or telephonic applications support and availability (include third party coverage)
 - b. Provide a listing of field service engineer locations and availability
 - c. Provide a listing of part depots



11. Information about your company's support options following the warranty period, including a description of on-line or telephonic applications support and availability
12. Version/platform long-range plan
13. Two (2) copies of the product service manual (1 hard copy and 1 digital copy)

F. TRADE-IN

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | a. In instances where sanitization of ePHI compromises the OS and/or application software, or requires the removal of internal storage media, the vendor accepts the equipment "as is" and can elect at their own discretion to contract with the original equipment manufacturer (OEM) to restore the system. |
|-------------------------------------|--|

The following equipment is available for trade-in. Please reflect any credits provided for trade-in equipment in the proposal.

Station	631 Leeds Campus
Manufacturer	Toshiba
Model	Kalare
EE/Asset Number	18863
Serial Number	10C002

