

Equipment Specifications

Ultrasound

VISN 21/VA Palo Alto Health Care System

640-B94010, 650-B94011, 640-B94012

A. REQUIREMENT OVERVIEW

Station 640, VA Palo Alto, is requesting three Point of Care ultrasound systems for use in the Nursing service for critical care units and the emergency department. The intended application of the ultrasound system is for venous and arterial access to decrease the amount of sticks to patients who are difficult access for IV catheters. The Nursing service is looking for better patient satisfaction and decreased patient pain level when performing insertion of specialized extended dwell IV catheters. The main requirement for the ultrasound system is the capability to be utilized by trained nurses on patients across the hospital for arterial and venous access. The ultrasound system will also be utilized by the vascular access team and intensivists in addition to the nursing staff in critical care and emergency department.

| Facility | Quantity |
|--------------|----------|
| VA Palo Alto | 3 |

B. TECHNICAL REQUIREMENTS

1. Unit physical specifications

| | |
|--|--------------|
| a. Minimum screen size [in] | 12 |
| b. Minimum active screen size [in] | 12 |
| c. Minimum number of split screens | 2 |
| d. Monitor height range from floor [in] | 40 to 60 |
| e. Minimum number of transducer ports | 2 |
| f. USB ports | 3 |
| g. HDMI video out | 1 |
| h. Minimum image storage [days or TB] | 16GB |
| i. Minimum battery life [min] | 120 |
| j. Maximum equipment dimensions (HxWxD) [in] | 20 x 12 x 10 |
| k. Minimum equipment dimension with stand (HxWxD) [in] | 65 x 18 x 18 |
| l. Maximum equipment weight [lb] | 15 |
| m. Equipment weight with stand [lb] | 65 |

2. Scanning modes

| | |
|-------------------------------------|-------------------------|
| <input checked="" type="checkbox"/> | a. Two-dimensional (2D) |
|-------------------------------------|-------------------------|

| | |
|-------------------------------------|----------------------------|
| <input checked="" type="checkbox"/> | b. Tissue Harmonic Imaging |
| <input checked="" type="checkbox"/> | c. M-Mode |
| <input checked="" type="checkbox"/> | d. Velocity Color Doppler |
| <input checked="" type="checkbox"/> | e. Color Power Doppler |
| <input checked="" type="checkbox"/> | f. Tissue Doppler Imaging |

3. Doppler displays

| | |
|-------------------------------------|-------------|
| <input checked="" type="checkbox"/> | a. Velocity |
| <input checked="" type="checkbox"/> | b. Duplex |

4. Control panel specifications

| | |
|-------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> | a. Touchscreen monitor |
| <input checked="" type="checkbox"/> | b. Control knobs |
| <input checked="" type="checkbox"/> | c. Keyboard on touchscreen |
| <input checked="" type="checkbox"/> | d. Physical keys (some controls) |

5. Additional specifications

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | a. Image annotation |
| <input checked="" type="checkbox"/> | b. Ability to enter standby mode or sleep mode |
| <input checked="" type="checkbox"/> | c. Needle guidelines |
| <input checked="" type="checkbox"/> | d. Multi-function foot pedal control (programmable preferred) |
| <input checked="" type="checkbox"/> | e. Image editing – easy video editing and annotation |
| <input checked="" type="checkbox"/> | f. Digital calipers |

6. Security/Connectivity requirements

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | a. OEM-supported operating system |
| <input checked="" type="checkbox"/> | b. Latest DICOM print, store, commit, and modality worklist |
| <input checked="" type="checkbox"/> | c. Wireless connectivity to VA network – Compatible with 802.11b/g/n and FIPS 140-2 compliant |
| <input checked="" type="checkbox"/> | d. Encrypted hard drive |
| <input checked="" type="checkbox"/> | e. PACS compatibility – DICOM, multimedia (.jpeg, .bmp, .avi), PACS, VNA, and other ultrasound data management systems |
| <input checked="" type="checkbox"/> | f. Capable of disabling USB ports without compromising operation |
| <input checked="" type="checkbox"/> | g. Auto run can be disabled for portable media |

7. Analysis packages

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | a. Abdominal |
| <input checked="" type="checkbox"/> | b. Musculoskeletal Clinical |
| <input checked="" type="checkbox"/> | c. Vascular – measurement and analysis of vessels |

☒ d. Cardiovascular Clinical

Vendors must include in their offers analysis packages that meet the criteria above. Please include all other analysis packages offered by your company in the optional section on the quotes.

8. Transducers

| Description | Qty | Frequency Range [MHz] |
|---|-----|-----------------------|
| a. L25X Transducer Transverse Biopsy Compatible. 6 cm scan depth. Applications: lung, musculoskeletal, nerve, superficial, arterial, venous, ophthalmic | 1 | 13-6 MHz Linear |

Vendors must include in their offers transducers that meet the criteria above. Please include all other transducers offered by your company in the optional section on the quotes.

9. Added Value

Specifications listed below are not required, but preferred. Vendors who do not include the below specifications in the submitted offer will not be docked or excluded from consideration. Specifications listed below will be evaluated based on added value.

☒ a. Additional year(s) of warranty

C. TRAINING REQUIREMENTS

1. Clinical Training

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | a. On-site clinical applications training for [50] nurses during go-live |
| <input checked="" type="checkbox"/> | b. On-site clinical applications training for [15] physicians during go-live |

2. Biomedical Technician Training

Please reference the “Instructions to Offers” section 2.8.g for further information about the type of information to provide by equipment type not by specific request. Please also reference the “Instructions to Offers” section 7.3.3. for response format.

Technical training information to include detailed information about the curriculum and length of the biomedical technical training required for each equipment type.

Although the NAC will not award this training along with the equipment, it is imperative that the customer is informed that this training is available. Vendors must demonstrate that they can provide any required



off-site training, therefore off-site training should be quoted as an optional item. Off-site training will be purchased at the time of need via a modification (if the original order remains open) or via a separate order. No travel expenses for any VA employees will be included in any HTME equipment or training order.

D. SERVICE REQUIREMENTS

1. VPN/Remote Access – The vendor shall provide 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 service manuals (one (1) electronic and one (1) physical copy)*Vendors can include the physical copy as a priced line item in their quote as applicable.
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 minimum requirements, to include information on their service support structure during and after the warranty period. 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

Please reference the “Instructions to Offers” section 2.8a-h for further information about the type of information to provide by equipment type not by specific request. Please also reference the “Instructions to Offers” section 7.3.3. for response format.

1. Completed pre-procurement assessment form (6550 Appendix A)
2. Completed Manufacture Disclosure Statement for Medical Device Security (MDS2) form
3. Federal Information Processing Standard (FIPS) 140-2 certification
4. Product brochures
5. Technical specification sheets, to include dimensions and weight of the system
6. Typical drawings (pdf version of the CAD drawings)
7. Technical training- Biomedical: information to include detailed information about the curriculum and length of the biomedical technical training required for each equipment type.
 - Although the NAC will not award this training along with the equipment, it is imperative that the customer is informed that this training is available. Vendors must demonstrate that they can provide any required off-site training, therefore off-site training should be quoted as an optional item. Off-site training will be purchased at the time of need via a modification (if the original order remains open) or via a separate order. No travel expenses for any VA employees will be included in any HTME equipment or training order.



8. Support information to include your company's support structure during and after the warranty period
- On-line or telephonic applications support and availability (include third party coverage)
 - A listing of field service engineer locations and availability
 - A listing of part depots

F. TRADE-IN

- | | |
|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | a. VA has no trade-in units to offer. |
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