AURORA, CO

PO# 554-B30030

Electrophysiology (EP) Lab Specifications
(Bi- Plane System)

Technical Requirements

1. System
   a. Bi-Plane
   b. Ability to offer either floor and/or ceiling mounted systems
   c. Ability to move system out of the way and park away from the table
   d. High-capacity x-ray tube
      80 kW Generator minimum
   e. Frontal and Lateral Flat Panel Detectors (Peripheral compliant)
   f. 1 Large display monitor (56 inch or greater) with ability to display at least eighteen (18) simultaneous input sources
   g. Control room slave monitor (≥30”) to display the same content as the large monitor described in letter “f” above.
   h. Backup monitors (at least two (2) each, minimum 21”)
   i. 2 Additional exam room displays on separate booms, switchable at tableside
   j. Rotational acquisition
   k. Run-off capability
   l. Ceiling mounted radiation shield
   m. Mobile radiation shield
   n. Staff Dose display system
   o. Wireless headset intercom system (≥ 10 simultaneous users with ptt and vox capabilities)
   p. Multi-function coronary and peripheral automated contrast injector with “sync” function for x-ray acquisition and contrast administration
   q. Multiple magnification ranges (6”-19”)
   r. Ability to capture and print still images (include printer)

2. Table
   a. 500 lb weight limit (minimum)
   b. Ability to tilt cranial and caudal
   c. Multiple options for controls (e.g. foot, at tableside, etc.)
   d. Integrated ultrasound capability
   e. Remote control capabilities (e.g. for exposure and monitors)
   f. Table must include arm rests for supine and prone procedures, including a detachable head rest
   g. Mattress pad
   h. Table side floor mats that are specifically antimicrobial
   i. Integrated IVUS
   j. Integrated FFR/OCT
   k. Hemodynamic monitoring system (compatible with system currently installed)
   l. EP Recording System
   m. Moveable/Adjustable integrated radiation shielding for EP device procedures

3. Hardware/Software
   a. Operators console with expanded memory
   b. Workstation UPS for operators console
   c. Integrated System Shielding
      Soft and hard shutter shielding
      Filters necessary for radiation safety efficacy

d. HL7 and necessary licenses for integration ancillary equipment
e. Dose reduction features including fluoro save, pulse fluoro
f. Real-Time patient radiation dose tracking
g. Software:
   Digital Subtraction Angiography
   Stenosis Measurement
   Vessel Analysis/Mapping
   Qualitative/Quantitative Peripheral Angiography (Post processing)
   Stent boost technology
   Trace-subtracted fluoro
   Dual fluoro
   X-res capable
   Digital subtracted live fluoro/Fluoro roadmapping (SmartMask)
h. System UPS to maintain total system functionality to allow for adequate time to close current cast
i. Power conditioner as recommended by vendor
j. Three (3) OR grade surgical lights with articulating arms

4. Interface Specifications
   a. Must be on the Vista Imaging Approved DICOM Modality Interface List
   b. Ability to interface with PACS
   c. 3rd party post processing workstation integration
   d. H7 integration/HIS/RIS (Worklist)
   e. VPN/Remote access for service
   f. Ability to interface with 3rd party integration system
   g. Ability to interface with CART (VHA Cath lab software application)
   h. Ability to interface with the Hemodynamic Monitoring and EP Recording systems

5. Advanced Applications
   a. Latest needle tracking, cryoablation software, and multi-modality software included
   b. The ability to fuse images from CT, MRI and ultrasound (EP Specific integration)
   c. Software to aide with positioning of a needle using an ultrasound device
   d. Cone Beam/3D image capable/CT-IR Imaging/Cross-beam for needle localization
   e. Post processing workstation
   f. Ability to integrate multiple modalities into the software/workstation of the EP unit
   g. IVUS/ICE integration
   h. FFR/OCT Integration
   i. Ability to do rotational imaging
   j. 3D Echo (TEE, ICE) with X-ray echo integration/registration for structural heart procedures

6. Training
   a. Off site – Basic Clinical Training for two lab staff members on main system to include tuition and travel
   b. On site – Clinical Training for a minimum of two physicians (minimum three, eight hour days)
   c. On site Clinical Applications Training for lab staff for startup (minimum three, eight hour)
   d. Follow up applications training to be performed after lab staff have hands-on experience with the system (40 hours)
   e. Off-site training for two Biomedical Engineering staff to include tuition and travel

7. Support and other Documentation to Provide
    a. Provide DICOM Conformance Statement
    b. Provide Completed Pre-Procurement Assessment form (6550) and MDS2 Document
    c. VPN connected remote service and applications support

8. Optional Components
    a. Foot extension for table
    b. Dynamic CT Package (Post processing)
    c. Patient comfort focused scanning environment