



TREASURY BOARD SECRETARIAT

PROCUREMENT SERVICES

95 Rochford Street, 2nd Floor South, Shaw Building, Room 27

PO Box 2000, Charlottetown, PEI, C1A 7N8

Telephone: (902) 368-4040 or Facsimile (902) 368-5171

ADDENDUM # 7
for RFP # 4521

TO: All Bidders

FROM: Todd Miller

DATE: Dec 24, 2016

SUBJECT: Clarifications (9 points)

- (1) Equipment disposal and Value

- o Typically this is done during the construction / room modification phase. The old equipment has to be taken away before modifying the ceiling structure. Our install team would come later. In this context, it appears more cost effective for the hospital to have the construction company deal with the old equipment disposal. We would like to explore this alternative with your team.

Reply: The tender documents provide a space for value of the displaced equipment. Additionally, proponents should outline and costs associated with removal and disposal in their proposal. Health PEI will be able to then make an informed decision as to what to include in the proponents responsibilities.

- (2) Pre-install requirements

- o Is there a plan for adding/modifying the current cable conduits in the ceiling? We would like to discuss to pros and cons of keeping the current conduits, which has a major impact on equipment positioning and future room ergonomics.

Reply: The intent is to utilize the current cable conduits where possible. Major modifications are not part of the scope of the project. Please detail any proposed changes including cost and benefits within your proposal.

- (3) Ceiling structure
 - o Do we need to keep the current ceiling equipment positions?

Reply: Yes, the intent is to utilize the current ceiling structure.

- (4) Scheduling:
 - o Should vendor's details 3 separate installs or one install visit?

Reply: Vendors should provide the installation time line to complete the three (3) OR Suites. This shall include presenting as 3 individual installs as well as a single install.

- (5) Engineering

Clarification: Proponents should provide a install manual document that will provide details for Health PEI Engineers to make their calculations. Eg. Boom Weights (collapsed and extended).

- (6) Guest Plates for C-Arm :

o Will additional guest plate(s) on wall(s) for C-Arm be required? Should proponents make recommendations on placement of the guest plate?

Reply: We presently view C arm images on our OR integration displays, this is done via a connector plate on the rear of the equipment Boom with our current set up. Having an additional plate for the C-Arm would definitely be an asset. Proponents are invited to make a recommendation on placement.

- (7) Nurse Computer :

Clarification: The Nurse's Computer is connected to the Hospital Network and can serve to remotely access PACs. This requires to be collocated with the integration control station. The video signal from this computer will need to be integrated into the system.

- (8) Equipment Boom :

Clarification: A drawer under the bottom shelf of our equipment booms would be beneficial; but not mandatory.

- (9) Anesthesia Monitor; ability to display the anesthesia monitor video signal on the other room monitors :

Clarification: Integrating an anesthesia monitor would be a very good future ready requirement. Something that should be done during this install rather than trying to implement later. Presentation of this as an option would be useful.

END OF ADDENDUM.

Please return this sheet with your formal bid proposal.



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**ADDENDUM # 6
for RFP # 4521**

TO: All Bidders

FROM: Todd Miller

DATE: December 21, 2016

SUBJECT: Last Questions

Please be advised that with a closing date of Jan 6, 2017; last questions must be received by 12 Noon (AST) on Dec 24th.

thank you,

Todd Miller
902-894-2377
tojmiller@ihis.org

A handwritten signature in black ink, appearing to read 'Todd Miller', with a long horizontal flourish extending to the right.

END OF ADDENDUM.

Please return this sheet with your formal bid proposal.



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**ADDENDUM # 5
for RFP # 4521**

TO: All Bidders

FROM: Todd Miller

DATE: December 19, 2016

SUBJECT: Further to Situation Overview 2.1 - Clarification

Please be advised:

Situation Overview Excerpt (Section 2.1)

The equipment assets to be replaced at the Prince County Hospital in each of the three surgical suites include a surgical light system with two light heads, one equipment management boom, one AV matrix with work station, one insufflator, one camera control unit, one xenon light source, and 3 surgical displays.

Clarification

We will require a Nurse's work station cabinet for the physical components of the integration control system that requires to be located within the suite.

thank you,
Todd Miller
902-894-2377
tojmiller@ihis.org

A handwritten signature in cursive script that reads "Todd Miller".

END OF ADDENDUM.

Please return this sheet with your formal bid proposal.



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**ADDENDUM # 4
for RFP # 4521**

TO: All Bidders

FROM: Todd Miller

DATE: December 19, 2016

SUBJECT: AUTO CAD DRAWING CLARIFICATION

Please be advised of the following clarification to Addendum # 3.

The drawings sent out are meant to give the proponents a starting point for creating their own drawings, the drawings we sent out are for the original construction of PCH, any equipment shown was during original construction. It is up to proponents to confirm all dimensions on site as required. Again the drawings we sent out are meant as a base point for proponents to create their own drawings, bidders are not to call myself or Kari Salo to confirm measurements or to take measurements, they should come to site themselves if they require further info. (per Don Vaniderstine, PCH)

thank you,
Todd Miller
902-894-2377
tojmill@ihis.org

A handwritten signature in cursive script that reads "Todd Miller".

END OF ADDENDUM.

Please return this sheet with your formal bid proposal.



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ADDENDUM # 3

for RFP # 4521

TO: All Bidders

FROM: Todd Miller

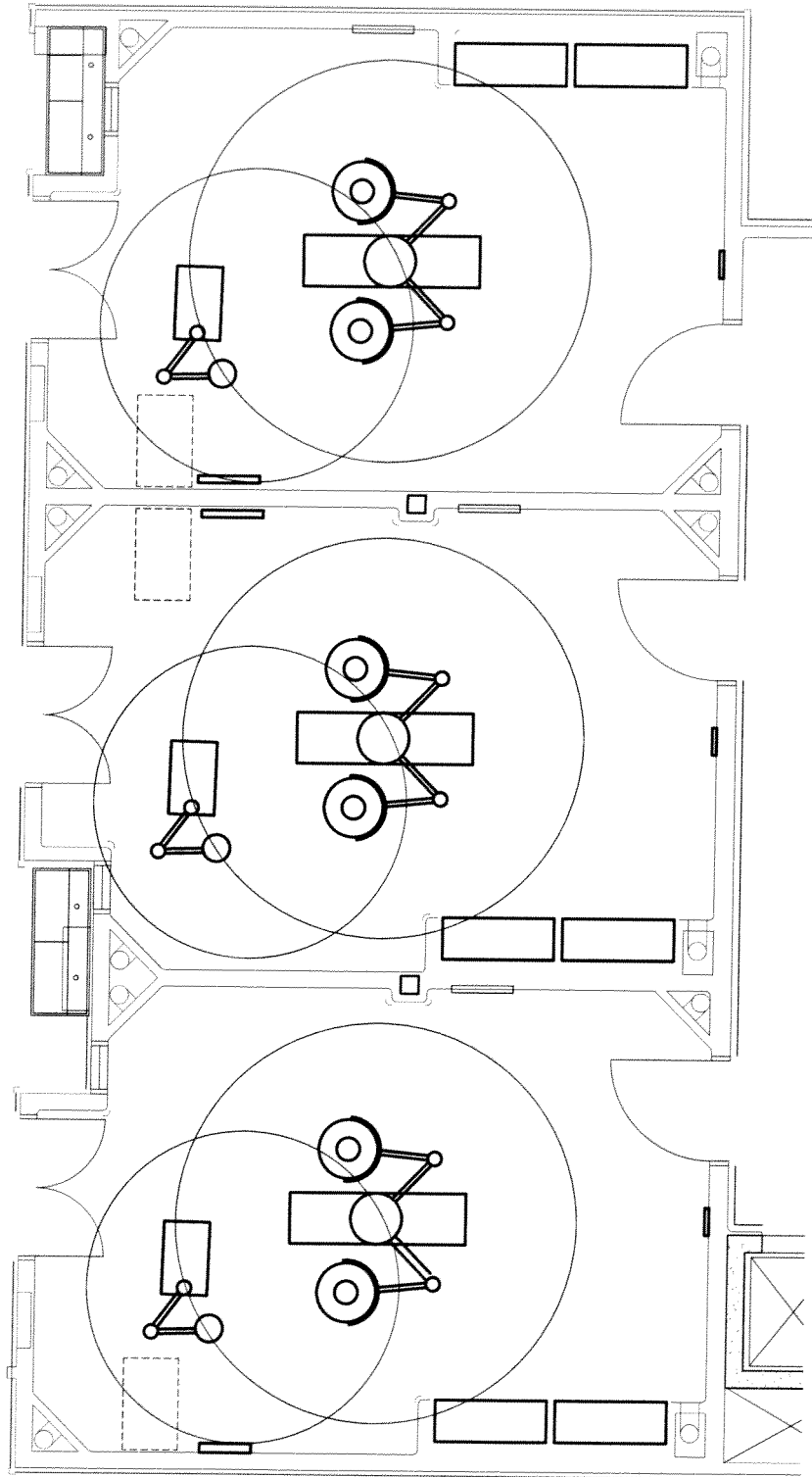
DATE: December 8, 2016


SUBJECT: AUTO CAD DRAWING

Please find attached an AUTO CAD drawing of the OR Suites which had been requested by a number of proponents

thanks
Todd

please return these sheets with your formal bid proposal.



| | | |
|--|---|---|
|  <p>Tel 902 368 5100 Fax 902 569 0590 http://www.gov.pe.ca/</p> <p>Transportation, Infrastructure and Energy</p> <p>PO Box 2000 Charlottetown Prince Edward Island Canada C1A 7N8</p> | <p>Project Title :</p> <p><i>Prince Country Hospital</i></p> | <p>Scale : 1:50</p> <p>Design By : NA</p> |
| | <p>Drawing Title :</p> <p><i>Partial Floor Plan - OR Suites</i></p> | <p>Drawn By : ADR</p> <p>Date : Dec 6, 2016</p> |
| | <p>Project No.:</p> <p>2655-16085</p> | <p>Drawing No.:</p> <p>A1 of 1</p> |



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**ADDENDUM # 2
for RFP # 4521**

TO: All Bidders

FROM: Todd Miller

DATE: December 8, 2016

SUBJECT: Closing Date Change

Please note that the RFP will now close January 6th at 2 PM AST.

thanks
Todd

A handwritten signature in cursive script that reads "Todd Miller".

Please return this sheet with your formal bid proposal



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ADDENDUM # 1

for RFP # 4521

TO: All Bidders

FROM: Todd Miller

DATE: November 24, 2016

SUBJECT: Table of Contents

The Table of contents has been updated to correct errors in page #'s. No changes have been made to content, simply updating page #'s where required. The RFP document on the site will be replaced with this correct version.

thank you
Todd Miller
902-894-2377
tojmillier@ihis.org

Jordan Neuk

END OF ADDENDUM.

Please return this sheet with your formal bid proposal.



REQUEST FOR PROPOSALS

Tender Number: 4521

Closing Date: Dec 16, 2016

Closing Time: 2:00PM

1. Check for changes to this request

Before submitting this proposal, visit the Procurement website or phone our office to see if any Addenda detailing changes have been issued on this tender. Changes may be posted up until the tender closing time. It is your responsibility to acknowledge and take into account **ALL** Addenda.

2. Give your business information (please print)

Name of Company: _____
(if you are not a registered company, give your name)

Street Address: _____

City: _____ Province: _____

Postal Code: _____ Email Address: _____

Mailing Address (if different): _____

Phone Number: _____ Fax Number: _____

HST/GST Registration Number (BN): _____ (leave blank if NOT applicable)

3. Follow any special instructions

The full RFP document is attached to this PDF.

4. Review the following documents, which will form part of your proposal

(All documents can be found on the Procurement Services website at <http://www.gov.pe.ca/tenders>)

o [Atlantic Standard Terms and Conditions](#)

o [Applicable Trade Agreements](#)

5. Acknowledge receipt of addenda (if any)

| ADDENDUM | SIGNATURE |
|-------------|-----------|
| Addendum #1 | |
| Addendum #2 | |
| Addendum #3 | |

Were there more than 3 addenda for this proposal? YES NO

Indicate the number of additional Addendums you have received.

Please sign indicating that you acknowledge the additional addenda noted above

6. Sign your Proposal

I confirm that the information I provided on this proposal is complete and accurate and that I am authorized to sign on behalf of the company.

Name (please print): _____ Position or Title: _____

Signature: _____ Date: _____

7. Submit Proposal To:

PROCUREMENT SERVICES
95 Rochford Street
2nd Floor South, Shaw Building, Room 27
PO Box 2000, Charlottetown, PE, C1A 7N8
Telephone: (902)368-4040

Fax and E-mail submissions are not accepted.

Health PEI

Materials Management

65 Roy Boates Avenue
Summerside, PEI, C1N 2A9

Telephone: (902)438-4275 or Facsimile (902)438-4271

REQUEST FOR PROPOSAL (RFP) #4521

OR INTEGRATION

Sponsored by Health PEI – Prince County Hospital (PCH)

Links to Online Documents

The proponent should use the following online documents when preparing its proposal:

- <http://www.gov.pe.ca/finance/index.php3?number=1042475&lang=E>

Important Notes for Bidding:

- The complete tender document (52 Pages) is comprised of the 'Health PEI Request for Proposal' (PEIRFP) Form (2 pages) and this RFP specifications document (50 pages). In the file that is downloaded from our public Web site, the PEIRFP Form **always precedes** this RFP specifications document. Please contact the Procurement Services Office if any pages are missing.
- Financial information must **not** be reflected on the PEIRFP Form.
- The proposal must be submitted in **paper form** at the address given above. Any proposal that is submitted via facsimile or electronic mail **will not** be accepted.

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1.0 Definitions and Administrative Requirements

1.1 Definitions

Throughout this Request for Proposals, the following definitions apply:

- a) “Contract” means the written agreement resulting from this Request for Proposals executed by Health PEI and the Contractor;
- b) “Contractor” means the successful Proponent to this Request for Proposals who enters into a written contract with Health PEI;
- c) “must”, or “mandatory” means a requirement that must be met in order for a proposal to receive consideration;
- d) “Proponent” means an individual or a company that submits, or intends to submit, a proposal in response to this Request for Proposals;
- e) “Request for Proposals” or “RFP” means the process described in this document;
- f) “Should” or “desirable” means a requirement having a significant degree of importance to the objectives of the Request for Proposals;
- g) “New Technology” means newly developed technology, as distinct from the Updates and Upgrades described in Section 3.4, that improves the operation, safety or efficiency of the equipment or improve patient care using evidence based outcome criteria as a measure.

1.2 Terms and Conditions

The following terms and conditions will apply to this Request for Proposals. Submission of a proposal in response to this Request for Proposals indicates acceptance of all the terms that follow and that are included in any addenda issued by Health PEI. Provisions in proposals that contradict any of the terms of this Request for Proposals will be as if not written and do not exist.

1.3 Additional Information Regarding the Request for Proposals

All subsequent information regarding this Request for Proposals, including changes made to this document will be posted on the PEI website at www.gov.pe.ca/tenders. It is the sole responsibility of the Proponent to check for amendments on the PEI Tender website.

1.4 Late Proposals

Proposals will be marked with their receipt time at the closing location. Only complete proposals received and marked before closing time will be considered to have been received on time. Hard-copies of late proposals will not be accepted and will be returned unopened to the Proponent. In the event of a dispute, the proposal receipt time as recorded at the closing location shall prevail whether accurate or not.

1.5 Eligibility

- 1.5.1** Proposals will not be evaluated if the Proponent’s current or past corporate or other interests may, in Health PEI’s sole opinion, give rise to a conflict of interest in connection with the project described in this Request for Proposals. This includes, but is not limited to, involvement by a Proponent in the preparation of this Request for Proposals. If a Proponent is in doubt as to whether there might be a conflict of interest, the Proponent should consult with the Health PEI Contact Person listed on page 9 prior to submitting a proposal.
- 1.5.2** Proposals from not-for-profit agencies will be evaluated against the same criteria as those received from any other Proponents.

1.6 Evaluation

Evaluation of proposals will be by a committee formed by Health PEI (“Evaluation Team”) and may include employees and contractors of Health PEI. All personnel will be bound by the same standards of confidentiality. Health PEI’s intent is to enter into a contract with the Proponent who has the highest overall ranking.

1.7 Negotiation Delay

Health PEI will only award a contract to the Proponent(s) it considers offers the best value for money and may seek Best and Final Offers (BAFO) as part of the evaluation and negotiation process. Should a BAFO be issued to the Proponent and the Proponent does not provide an offer acceptable to Health PEI within one week of such request, Health PEI may, at its sole discretion at any time thereafter, terminate negotiations with that Proponent and either commence negotiating a contract with the next qualified Proponent or choose to terminate the Request for Proposals process and not enter into a contract with any of the Proponents.

1.8 Debriefing

At the conclusion of the Request for Proposals process, the successful Proponent and the value of the award will be posted on the PEI Tender website. *Unsuccessful Proponents may request a debriefing meeting with Health PEI officials within 30 calendar days of the award notification.*

1.9 Alternative Solutions

If alternative solutions are offered, please submit the information as a separate proposal, ensuring the same format is followed.

1.10 Changes to Proposals

By submission of a clear and detailed written notice, the Proponent may amend or withdraw its proposal prior to the closing date and time. Upon closing time, all proposals become irrevocable. The Proponent will not change the wording of its proposal after closing and no words or comments will be added to the proposal unless requested by Health PEI for purposes of clarification.

1.11 Proponents’ Expenses

Proponents are solely responsible for their own expenses in preparing a proposal and for subsequent negotiations with Health PEI, if any. If Health PEI elects to reject all proposals, Health PEI will not be liable to any Proponent for any claims, whether for costs or damages incurred by the Proponent in preparing the proposal, loss of anticipated profit in connection with any potential contract, or any other matter whatsoever.

1.12 Limitation of Damages

Further to the preceding paragraph, the Proponent, by submitting a proposal, agrees that it will not claim damages, for any reason whatsoever, relating to or in respect of the competitive process, in excess of an amount equivalent to the reasonable costs incurred by the Proponent in preparing its proposal and the Proponent, by submitting a proposal, waives any claim for loss of profits if no contract is made with the Proponent.

1.13 Proposal Validity

Proposals will be open for acceptance for at least 180 days after the closing date, during which time the pricing and other elements contained in the proposal will remain firm.

1.14 Firm Pricing

Prices will be firm for the entire contract period, unless this Request for Proposals specifically states otherwise.

1.15 Currency and Taxes

Prices quoted are to be:

- a) In Canadian dollars;
- b) Inclusive of duty, where applicable; FOB destination, delivery charges included where applicable;
- c) Exclusive of applicable taxes; and
- d) Include payment terms and early payment incentives.

1.16 Completeness of Proposal

By submission of a proposal the Proponent warrants that, if this Request for Proposals is to design, create or provide a system or manage a program, all components required to run the system or manage the program have been identified in the proposal, or will be provided by the Proponent at no additional charge to Health PEI if the Proponent is the successful Contractor.

1.17 Sub-Contracting

- 1.17.1** Using a sub-contractor is acceptable, provided the intention to sub-contract and the specific sub-contractor that will be used by the Proponent are clearly identified in the proposal. This includes a joint submission by two Proponents having no formal corporate links. However, in the case of a joint submission, one of the Proponents must be prepared to take overall responsibility for successful performance of any contract in the event the proposal is successful, and this should be clearly defined in the proposal.
- 1.17.2** Sub-contracting to any firm or individual who's current or past corporate or other interests may, in Health PEI's sole opinion, give rise to a conflict of interest in connection with the project or program described in this Request for Proposals will not be permitted. This includes, but is not limited to, any firm or individual involved in the preparation of this Request for Proposals. If a Proponent is in doubt as to whether a proposed sub-contractor gives rise to a conflict of interest, the Proponent should consult with the Health PEI Contact Person listed on page 9 prior to submitting a proposal.
- 1.17.3** Where applicable, the names of approved sub-contractors listed in the proposal will be included in the contract if the proposal is successful. No additional sub-contractors will be added or other changes made, to this list in the contract without the prior written consent of Health PEI.

1.18 Acceptance of Proposals

1.18.1 This Request for Proposals should not be construed as an agreement to purchase goods or services. Health PEI is not bound to enter into a contract with the Proponent who submits the lowest priced proposal or with any Proponent. Proposals will be assessed in accordance with the evaluation criteria. Health PEI will be under no obligation to receive further information, whether written or oral, from any Proponent.

1.18.2 Neither acceptance of a proposal nor execution of a contract will constitute approval of any activity or development contemplated in any proposal that requires any approval, permit, or license pursuant to any federal, provincial, regional, district, or municipal statute, regulation, or by-law.

1.19 Definition of Contract

Notice in writing to a Proponent that it has been identified as the successful Proponent and the subsequent full execution of a written contract will constitute a contract for the goods or services, and no Proponent will acquire any legal or equitable rights or privileges relative to the goods or services until the occurrence of both such events. *(All contracts are only awarded after due internal approval processes and any contractual obligations occur only after issue of an official Health PEI purchase order or an executed contract signed by both parties.)*

1.20 Liability for Errors

While Health PEI has used considerable efforts to ensure information in this Request for Proposals is accurate, the information contained in this Request for Proposals is supplied solely as a guideline for Proponents. The information is not guaranteed or warranted to be accurate by Health PEI, nor is it necessarily comprehensive or exhaustive. Nothing in this Request for Proposals is intended to relieve Proponents from forming their own opinions and conclusions with respect to the matters addressed in this Request for Proposals.

1.21 Modification of Terms

Health PEI reserves the right to modify the terms of this Request for Proposals at any time, in its sole discretion. This includes the right to cancel this Request for Proposals at any time prior to entering into a contract with the successful Proponent.

1.22 Ownership of Proposals

All proposals submitted to Health PEI become the property of Health PEI. They will be received and held in confidence by Health PEI, subject to the provisions of the Prince Edward Island *Freedom of Information and Protection of Privacy Act* and this Request for Proposals.

1.23 Use of Request for Proposals

Any portion of this document, or any information supplied by Health PEI in relation to this Request for Proposals, may not be used or disclosed for any purpose other than for the submission of proposals. Without limiting the generality of the foregoing, by submission of a proposal the Proponent agrees to hold in confidence all information supplied by Health PEI in relation to this Request for Proposals.

1.24 Reciprocity

Health PEI may consider and evaluate any proposals from other jurisdictions on the same basis that the government purchasing authorities in those jurisdictions would treat a similar proposal from a Prince Edward Island supplier.

1.25 No Lobbying

Proponents must not attempt to communicate directly or indirectly with any employee, contractor or representative of Health PEI, including the Evaluation Team, or any elected officials of the Province of Prince Edward Island, or with members of the public or the media, about the project described in this Request for Proposals or otherwise in respect of the Request for Proposals, other than as expressly directed or permitted by Health PEI.

1.26 Proponent Policy

All proponents must abide by Health PEI's Proponent Policy when dealing with Health PEI personnel or visiting Health PEI facilities. A copy of the Proponent policy can be obtained by emailing contractshpei@ihis.org. *(this has not been completed as of this date)*

1.27 Collection and Use of Personal Information

Proponents are solely responsible for familiarizing themselves with, and ensuring that they comply with, the laws applicable to the collection and dissemination of information, including but not limited to resumes and other personal information concerning employees of the Proponent and employees of any sub-contractors. If this RFP requires Proponents to provide Health PEI with personal information of employees who have been included as resources in response to this RFP, Proponents will ensure that they have obtained written consent from each of those employees before forwarding such personal information to Health PEI. Such written consents shall specify that the personal information may be forwarded to Health PEI for the purposes of responding to this RFP and may be used by Health PEI for the purposes set out in the RFP. Health PEI may, at any time, request the original consents, or copies of the original consents, from Proponents and, upon such request being made, Proponents will immediately supply such originals, or copies if so requested, to Health PEI.

2.0 Introduction

Prince County Hospital (PCH) is located in Summerside, PEI and is the second largest Hospital and one of two main referral hospitals that provide a range of in-patient, out-patient, community and specialty services within Prince Edward Island for surrounding communities and visitors.

The PCH is a 110 bed acute care facility that provides services in surgery, internal medicine, obstetrics, pediatrics, ENT, psychiatry, radiology, pathology, endoscopy, anesthesia, rehabilitation, oncology, and emergency.

The Surgical Services at PCH has three fully equipped integrated OR theatres. The OR theatres are fully equipped to allow surgeons to perform various types of procedures such as but not limited to; Laparoscopic general, laparoscopic Gyne, Endoscopic flexible, endoscopic Sinus, Arthroscopic and open procedures by any service.

There are 10-12 scheduled procedures performed each day on average. Annually there are approximately 2500 surgeries performed. Currently PCH has a compliment of 3 anaesthesiologists, 3 general surgeons, 3 obstetrician/gynecologists, 2 ENT, 5 orthopedic surgeons who travel between PCH and QEH, one dental and one plastic surgeon.

2.1 Situation Overview

Prince County Hospital (PCH) has a requirement to replace its existing three integrated operating room systems due to forecasted end of life issues. The need to implement modern technologies at the same time is also recognized. Therefore, electronic devices, installation kits and accessories required to complete this project are expected to be supplied through a single proprietor. This is to ensure equipment standardization, coherent support and compatibility of all software and hardware acquired.

The selected proprietor will oversee, and direct the installation of all materials from start to finish within the period of time agreed upon.

The equipment assets to be replaced at the Prince County Hospital in each of the three surgical suites include a surgical light system with two light heads, one equipment management boom, one AV matrix with work station, one insufflator, one camera control unit, one xenon light source, and 3 surgical displays. These items are listed below. They may also be found in Appendix C – Existing Equipment with trade in/disposal values to be provided in Appendix E – Pricing.

In addition the department has 5 endoscopic camera heads also requiring replacement. The installer must also remove and dispose of the existing equipment and materials.

Existing Equipment

| | |
|--------|-----------------------------|
| 6 each | Camera Head |
| 1 each | Camera Head(ENT) |
| 3 each | Computer |
| 9 each | Display Standard Definition |
| 3 each | Video Processor |
| 3 each | Laparoflator |
| 3 each | Light Source |
| 6 each | Surgical Lights |
| 3 each | Equipment Management Boom |

2.2 Project Schedule, Contract Period and Primary Work Location

Below is the approximate schedule that is expected to be followed for this RFP. However, this may be subject to change and is therefore presented primarily for guidance:

- Preferred work start date: August 1st,2017
- Preferred work completion date: August 31st 2017

Note these dates are tentative and are contingent on the award notification. Final schedule to be determined by the successful Proponent and Prince County Hospital

The initial contract for purchase of equipment will be for a period of 12 month(s). Health PEI reserves the right to extend the contract for up one (1) twelve (12) month period beyond the initial contract period, for an overall maximum of twenty four (24) months in total. Any extension will be granted upon agreement from both Health PEI and the Proponent, and will be upon the existing terms and conditions. In some circumstances the granting of an extension or extensions may require prior approval by the Government of Prince Edward Island Treasury Board.

The Proponent will also outline the plan for disposal of equipment and what the trade in value of current equipment listed is. The trade in value will be used to offset the overall cost of purchased equipment.

The primary work location for the work reflected in this RFP is Prince County Hospital, 65 Roy Boates Avenue, Summerside, PEI, C1N 2A9.

2.3 RFP Contacts

Questions about this RFP should be directed to the individuals listed below, or their designate(s). Information that is obtained from any other source is not official and may be inaccurate.

| For PCH Facility | For PCH Bio-Medical | For Materials Management |
|---|--|---|
| <p>Margie Kays Health PEI Director Support Services Prince County Hospital 60 Roy Boates Avenue Summerside, PE C1N 2A9 Email: mrkays@gov.pe.ca Phone: 902-438-4530</p> | <p>Kari Salo Health PEI Bio-Medical Technician Prince County Hospital 60 Roy Boates Avenue Summerside. PEI C1N 2A9 Email: kjsalo@ihis.org Phone: 902-438-4262</p> | <p>Todd Miller Health PEI Materials Management Coordinator Queen Elizabeth Hospital 60 Riverside Drive Charlottetown, PEI C1A 8T5 Email tojmiller@ihis.org Phone: 902-894-2377</p> |

3.0 System/Acceptance Requirements as per Appendix A

Summary

PCH requires a solution to all work relating to the supply, installation and servicing of new OR equipment and the removal/disposal of the existing equipment. Part of that solution will also include education and training of all end user staff including any training required by bio medical staff to ensure the new system is fully functioning and to maintain preventative maintenance requirements.

3.1 System Information

The Proponent is to provide details on system history which should include but is not limited to time on the market as well as examples of recent installations of same or similar models and comparable scope.

Proponent to provide information as per Section 3.1 Appendix A

3.2 Equipment Requirement /Specifications

The system must be fully integrated and suitable for use in endoscopic, open, or minimally invasive modes of surgery. Operation of integrated components and accessories through a touch controlled interface located in each of the three OR suites with customizable operator presets.

The Proponent must demonstrate the integration between all equipment and components by providing a master schematic of the integration.

The proposal shall include complete manufacturer's specifications and product literature for the proposed equipment identified in Sections 3.2.1 to 3.2.12 of Appendix A. This will include product number, product name, three dimensions of product with service clearances, power consumption, heat rejection, environmental operating conditions, cable connections and terminations, features and options. Where applicable list comparable manufacturers that equipment can interface with; Specify type of cable required for inputs and outputs or software interfaces where applicable regarding printers, DVD recorders.

All equipment must have full CSA compliance and must have CSA certification label.

Equipment must be licensed with Health Canada as a medical device.

The equipment specifications contained in this tender shall be the minimum considered for submitting quotations. Each Proponent shall quote his highest quality line of equipment to fulfill these specifications

If the equipment does not meet the manufacturer's published specifications, the equipment must be replaced by the Proponent with equipment that meets or exceeds the specifications outlined herein and approved by us, or the equipment shall be completely removed by the Proponent at no cost to the Hospital.

PCH reserves the right to return equipment, should it fail more than three (3) times during the warranty period, for a full refund or request a new replacement of the same type to be delivered, with full warranty, at no charge to the hospital. Failures that result from user negligence or unfamiliarity with the system shall not constitute equipment failure in this regard.

3.3 Installation Requirements

Refer to Appendix A - Section 3.3 (System Acceptance and Installation Requirements)

The equipment, when installed, will operate with Prince County Hospital's existing equipment (or exchanged equipment) in full satisfaction requirements and will be fit for their intended purpose(s) and for those purpose(s) made known to the Proponent.

If applicable, all hardware, software, supplied under this RFP, will be able to accurately process data to data, including, but not limited to, calculating, comparing and sequencing from, into and between the 20th and 21st centuries, including leap year calculations.

The Proponent's submission of bid shall be construed by the Hospital as acceptance of all conditions outlined in these tender documents. Any proposed variations must be clearly identified.

Following installation of equipment, the Proponent shall provide to the hospital a report certifying that such equipment has been fully and completely supplied and or installed, is mechanically complete, is fully commissioned and meets the Proponents technical specifications. Title to the equipment will pass to the Hospital upon final acceptance by the Hospital representative of the equipment.

All potential Proponents must inspect the existing equipment at the facility in order to familiarize themselves with all of the potential conditions that may hinder the successful installation of the equipment. A site visit is a mandatory as indicated in Section 7.3. Completion of the site visit shall not relieve or excuse the Proponent from completing the requirements contained in this document or associated Appendices.

The successful bidder will verify all physical requirements at the installation site to ensure successful delivery and installation. Responsibilities of the site (Owner) to prepare for installation must be clearly stated in the bidder's response.

Proponents are required to request site visits by contacting the tender contact at the facility as detailed in section 2.3.

3.4 User Training

Upon completion of the installation the Proponent shall provide Application Specialists for a comprehensive training program to all staff and in-depth training key staff as selected by the Hospital. This includes but is not limited to physicians, nurses and Bio medical technicians.

- a) The successful Proponent shall state the subject matter to be reviewed and the methods used to train staff. The hospital reserves the right to review, change and/or augment the Proponent's in-service material content.
- b) The successful Proponent will specify if all user training is to take place in house. The proponent shall specify location of training facility and be responsible for all expenses (travel, accommodations, tuition) if operational training is to be conducted outside hospital facility.
- c) Specify what off site training options are available for technologists.

Refer to Section 3.4 Appendix A User Training.

3.5 Product Manuals

The successful Proponent will provide two (2) hard copies of both technical and operational manuals as well as an electronic version of both. Manuals are to be kept current for 5 years.

Refer to section 3.5 Appendix A

3.6 Performance Testing

Following installation of the equipment the Proponent shall provide the hospital with a report certifying that all equipment has been fully and completely supplied and or installed , is mechanically complete, fully commissioned and meets the Proponents' technical specifications. Title to the equipment will pass to the hospital upon final acceptance by the hospital of the equipment.

See additional requirements under section 3.6 Appendix A

3.7 Technical/Field Service Support

Proponent shall provide details regarding technical and field service support as outlined in **Section 3.7 of Appendix A.**

3.8 Service Options

Prince County Hospital has in-house biomedical services. Their purpose is to decrease downtime and limit risk to patients as well as rationalize savings. Proponents are to provide details of service options which may be of interest to the hospital and are to include items **outlined in section 3.8 of Appendix A.**

3.9 Service Training

Proponent is to provide details regarding training options for Biomedical Engineering Technologists **as outlined in section 3.9 of Appendix A.**
Detailed costing of training options should also be included.

3.10 Service Manuals

The proponent is to provide a copy of all service manuals during the RFP process for review. If manuals are not available during the RFP process the proponent should guarantee availability of the above content and will supply if successful.

See details as outlined in Section 3.10 of Appendix A.

3.11 Software

Provide details as per section 3.11 of Appendix A

3.12 Warranty

At minimum, a twelve (12) month, one hundred percent (100%) warranty is required for all equipment. The Proponent shall identify all OEM warranties and shall pass through and assign ALL OEM warranties to the owner. The twelve (12) month warranty shall commence upon clinical acceptance of the equipment.

Any defective component or software replaced during the warranty period shall be covered by a full twenty-four (24) month warranty, regardless of the warranty on the original system or component.

3.13 Technical

Provide details as per section 3.13 of Appendix A

3.14 Value Add

Provide details as per section 3.14 of Appendix A

4.0 Costing/Additional Pricing Information

4.1 Purchase Price

Except as otherwise provided under this Agreement, the Hospital agrees to pay to the Proponent the purchase price for the Equipment as follows:

- (a) 30% percent upon execution of this Agreement by both parties to this Agreement;
- (b) 20% percent upon delivery of all of the Equipment associated with OR suite number one, and upon completion and commissioning of the first OR suite.
- (c) 20% percent upon delivery of all of the equipment associated with OR suite number two and upon completion and commissioning of the second OR suite.
- (d) 20% percent upon delivery of all of the equipment associated with OR suite number three and upon completion and commissioning of the third OR suite.
- (e) 10% percent upon successful performance testing of all OR Suites over a continuous clinical operation period of 30 working days.

Note: Acceptance of work means that all of the features in the system are fully functioning to the hospital's satisfaction.

Post-Warranty Services Fee

The Hospital agrees to pay to the Proponent for annual Post-Warranty Services if required.

4.2 Additional Pricing Information

The Hospital agrees to pay the Proponent for any additional equipment and services that it may elect to receive under this Agreement.

4.3 Invoicing

Except as otherwise provided under this Agreement, the Proponent shall submit invoices to the Hospital for payment in accordance with "Purchase Price" and "Additional Pricing Information" hereto. No additional or contrary terms or conditions, which may be contained in the Proponent's invoice, shall have any application to this Agreement. Invoices shall reference this Agreement number and shall contain a brief, point form narrative relating to the amounts set out in it. The Hospital's payment term is net thirty (30) days following receipt of an invoice from the Proponent submitted in accordance with this Agreement.

4.4 Taxes

All payments to be made by the Hospital under this Agreement shall be exclusive of all applicable taxes, except Value Added Taxes, the Value Added Taxes shall be clearly set out on the Proponent's invoice and paid by the Hospital unless it provides evidence of exemption there from.

4.5 Delivery Costs

The Purchase Price is inclusive of all costs related to the delivery of the Equipment to the Hospital including, without limitation, all packing, boxing, cartage, freight and insurance, brokerage and all taxes, fees and duties related thereto, except any Value Added Taxes. No additional charges shall be made by the Proponent with respect to such delivery costs.

5.0 Administrative and Legal Requirements

5.1 Health PEI 'Request for Proposal' (PEIRFP) Form

As noted on the front page of this specifications document, the PEIRFP Form is the first two/three pages of the file that is downloaded from our public Web site. It should be completed, signed and included in the proposal.

5.2 Business Registration

The Government of Prince Edward Island requires all businesses operating within the Province of PEI to register with the PEI Consumer, Corporate and Insurance Division of the Department of Environment, Labour and Justice as outlined under *the Extra-Provincial Corporations Registration Act* R.S P.E.I. 1988, Cap. E-14.

OR

Alternately, if your company is currently not registered in PEI, describe your plan to become registered in PEI should your firm be selected for a contract emerging from this RFP.

Further details on PEI business registration are available at <http://www.gov.pe.ca/infopei/index.php3?number=16920&lang=E>.

5.3 Contract

After the evaluation, the successful Proponent(s) will be expected to sign a contract that will constitute the legal agreement with Health PEI for this project and govern all aspects of the services to be delivered. It will incorporate the content of this RFP and the successful proposal, and any other relevant terms.

5.3.1 Contract Terms

There are two options available for the contract. The first is to sign the standard Health PEI Services Contract. The second is to sign the Proponent(s)' contract. In either case the contract must be updated to reflect the requirements and terms of the RFP.

Option One – Health PEI Services Contract - The terms of our standard services contract are available by emailing contractshpei@ihis.org. Describe in Appendix B any required changes that your legal counsel wishes to be made to the contract, or the standard services contract will be used “as is”. The Proponent who requests multiple and/or major changes to the contract risks disqualification. Alterations should reflect only those changes that the Proponent considers to be vital.

Option Two - If using the Proponent(s)' contract the terms of the contract that will be used for this project are to be provided in Appendix B. This document will always be updated as a part of the award process to reflect the Proponent's name, contact information, address, applicable schedules, etc. If the Proponent's contract reflects major deviations from the terms and/or conditions in the standard Health PEI services contract, the Proponent risks disqualification.

5.3.2 Compliance with Laws

The successful Proponent will be required to comply with all federal, provincial, municipal and regional laws applicable to the work or performance of obligations under the contract, and shall ensure all required codes and standards are complied with. The successful Proponent will be required to give all the notices and obtain all the licences and permits required to perform the work and obligations under the contract.

5.3.3 Indemnification and Insurance

The successful Proponent will be required to provide an indemnity to Health PEI from and against all claims arising out of or resulting from the performance of the work under the contract including, but not limited to, negligence of the Proponent or anyone directly or indirectly employed by the Proponent or anyone for whom the Proponent may be liable, and such indemnity shall not be limited in any way or degree by any insurance the Proponent may have, nor by the limits of any such insurance.

The successful Proponent will be required to have and maintain insurance throughout the entirety of the contract Term, which shall be primary insurance, in the following types and minimum amounts:

- (a) General Liability Insurance, including but not limited to bodily and personal injury, property damage, non-owned automobile liability, cross liability, and blanket contractual liability, in an amount not less than Five Million Dollars (\$5,000,000.00) coverage per occurrence;
- (b) Automobile Liability Insurance providing not less than Two Million Dollars (\$2,000,000.00) coverage on all vehicles owned, operated or licensed in the name of the Proponent.

The successful Proponent shall be required to add Health PEI as an additional insured on all required insurance, and all insurance shall be endorsed to provide Health PEI with 30 days' advance written notice of cancellation or material change.

5.3.4 Confidentiality and Intellectual Property Rights

Any and all information, knowledge or data made available to the Proponent as a result of or in relation to this RFP shall be treated as confidential information. The Proponent will not directly or indirectly disclose or use it for purposes unrelated to this RFP process at any time without first obtaining the written consent of Health PEI, unless the information, knowledge or data is generally available to the public.

The successful Proponent will be required to relinquish all intellectual property rights to any product or products created pursuant to this project and under the contract with Health PEI (the "Work Product"), and irrevocably assign to Health PEI, without further compensation, all of its right, title and interest, in Canada, the United States and worldwide, in any intellectual property rights, including without limitation all copyright and all moral rights, in all software or hardware developed in furtherance of, or any changes made to Government or Health PEI Software, in carrying out its obligations under any contract between Health PEI and the Proponent resulting from this RFP process. This shall include but not be limited to raw data, analyses, database entries, software or hardware code of any kind or in any form whatsoever, including but not limited to object code and source code and any necessary information with respect to the use of such code such as encryption keys, compiler information and version number. The successful Proponent will also be required to ensure that all its employees and any subcontractors are similarly bound to assign their intellectual property rights to Health PEI.

Licensing and marketing rights to any developed products or Work Product will not be granted under any contract with Health PEI resulting from this RFP process. Health PEI will own all graphics developed by the successful Proponent under the contract for this project.

Any materials provided by Health PEI to assist the successful Proponent in carrying out the terms of a contract between the Proponent and Health PEI shall be treated as confidential and returned to Health PEI at the conclusion of the contract. Any reports or materials prepared for Health PEI in the course of the contract will be the property of Health PEI.

The successful Proponent may be required to enter into a Confidentiality and Non-Disclosure Agreement with Health PEI prior to commencing any work, and may be required to execute the "Acceptable Use Agreement for Province of PEI Provided Computer Technology for External Contractors".

5.4 Provincial / Atlantic Initiative Clause

The Province of Prince Edward Island encourages greater collaboration and the identification of strategic procurement opportunities among all public sector entities. These entities include, but are not limited to, Provincial Government Departments, Municipalities, Academic Institutions, School Boards, Health Authorities, Housing Authorities, and Crown Corporations.

In support of the objectives of the initiative, the Proponent shall make available the goods and services as defined in this RFP to any public sector entity on the terms and conditions set out in this RFP (including, but not limited to pricing). Entities eligible to participate in this RFP are defined as 'public sector entities'.

Each Proponent acknowledges, confirms and agrees that by submitting a bid in response to this RFP, it irrevocably waives and releases Health PEI from any claim or right of recourse resulting or arising from acts or omissions of any entity participating in this RFP.

Health PEI's role in this RFP with respect to the joint procurement initiative for entities that choose to participate is limited to Health PEI acting as an administrative facilitator to enable their

participation. The entities that choose to participate are expected to carry out the procurement resulting from this RFP on their own.

The Proponent may only provide the goods and services specified under this RFP to additional public sector entities not explicitly listed in the original scope of this RFP by entering into a separate contract with the new entities which shall contain the following minimum terms:

- a) The Proponent and the other public sector entity acknowledge and agree that Health PEI shall not have any contractual or financial obligation, or any liability of any kind or nature whatsoever to either the Proponent or the other public sector entity for any matter arising under the agreement or through the provision of goods and services specified in this RFP and, without limiting the generalities of the foregoing, the Proponent and other public sector entity acknowledge and agree that:
 - i) Health PEI will not be liable or responsible for any act or omission of the other public sector entity in relation to the other public sector entity's access to the provisions of goods or services under this RFP;
 - ii) The other public sector entity shall make its own enquiries and satisfy itself as to the suitability of the Proponent or its products or services for the other public sector entity;
 - iii) The other public sector entity shall be responsible for obtaining its own professional advice, including its own independent legal advice, and for including any additional business and legal terms and conditions in the other public sector entity's contract as may be necessary and appropriate in its specific circumstances;
 - iv) The other public sector entity shall be responsible for its own contract administration with the Proponent and shall not direct any Proponent service issues that may arise to Health PEI; and
 - v) The other public sector entity consents to the release of its usage information by the Proponent to Health PEI in the Proponent's usage reports.
- b) No other public sector entity contract shall have a contract term that extends beyond the contract term for the contract with Health PEI that may result from this RFP.

5.4.1 Other Jurisdictions

The Proponent acknowledges that, in line with supporting the objectives of the Council of Atlantic Premiers Joint Procurement initiative, the Proponent agrees to make available the goods and services as defined in this RFP to other Atlantic Provinces and Government entities (members of the Atlantic Premiers Joint Procurement Initiative) on the terms and conditions set out in this RFP and the resulting Agreement (including, but not limited to pricing).

Other jurisdictions eligible to participate in the same contractual arrangement resulting from this RFP shall enter into a separate contract with the Proponent. The Proponent may only provide the goods and services specified in the contract with Health PEI to the public sector entities or other Atlantic provinces by entering into a separate contract with them.

5.5 Other Important Provisions

5.5.1 Asking Questions

The Proponent is responsible for obtaining any needed clarification of the RFP requirements, while the RFP is open. Questions should be directed **in writing** to the RFP Contacts identified. **Email is the preferred method of contact.** Verbal questions and responses that are not later confirmed in writing with the RFP Contacts will not be considered an official response.

Questions and responses that are deemed to materially affect the RFP requirements, project scope, time lines, etc. or to be of interest to all prospective proponents **may** be made available at Health PEI's option. If questions and responses are determined by Health PEI to be made available to other prospective proponents, this would be handled as an addendum while the RFP is open and made available for download from the Procurement Services Web site at: www.gov.pe.ca/tenders.

5.5.2 Addenda and Addenda Acknowledgement

Proponents are responsible to ensure that they are aware of and have complied with any addenda issued by visiting the Procurement Services Web site (www.gov.pe.ca/tenders).

Responding to this RFP **may** require the acknowledgement of a specific addendum or multiple addenda as part of the submission. Acknowledgement requirements, whether optional or mandatory, will be defined in the addendum. The Proponent must monitor for any addenda that may be issued during the full open period of the RFP.

5.5.3 Additional Phases of Work

If additional phases of work are required, Health PEI reserves the right to amend any contract that may emerge from this RFP to complete these phases of the project, but is under no obligation to do so. Health PEI also reserves the right to issue a subsequent tender to address any of these additional phases. The decision whether to amend an existing contract and/or to issue a subsequent tender is at the sole discretion of Health PEI.

5.5.4 Constraints

In addition;

- 1) The Proponent shall apply and pay for all necessary permits or licenses required for the execution of the work and pay all fees required by law and comply with all laws, ordinances, rules and regulations relating to the work and to the preservation for the public health.
- 2) The Proponent shall be responsible for the safety of all workers and equipment under applicable safety legislation passed by Federal, Provincial and Municipal authorities governing safety. The Contractor must follow all regulations issued by the PEI Department of Labour, Occupational Health and Safety Division.
- 3) The Proponent must comply with all other applicable laws, regulations, and standards, whether these are federal, provincial, or municipal.
- 4) The Proponent will provide the hospital with information to facilitate installation of the Proponents' equipment. At a minimum, the following information will be provided:

- a) Equipment mounting requirements
 - b) Equipment size and weight
- 5) The Bidder shall be responsible for all additional work for complete installation beyond the services, etc., specified as being the responsibility of the Owner. The Bidder shall indicate all of his service requirements to be done by the Owner. The Owner will not entertain inclusion of additional work, or extra payments, beyond that incurred for services as indicated on approved in specifications.
- 6) The bidder **must** describe with the bid the required installation schedule for the Equipment showing:
- i) Expected date of delivery
 - ii) Number of workers committed to site
 - iii) Expected date of completion

5.5.5 Conflict of Interest

Health PEI reserves the right to disqualify any Proponent that in Health PEI's sole opinion has an actual, potential, or perceived conflict of interest or an unfair advantage, whether existing now or is likely to arise in the future, or may permit the Proponent to continue and impose such terms and conditions as Health PEI, in its sole discretion, may require.

Proponents are required to disclose, to the RFP contacts listed in section 2.3, any actual, potential, or perceived conflict of interest issues prior to RFP closing date and time.

5.5.6 Financial Contribution Disclosure

Proponents must fully and accurately disclose, to the RFP Contacts in section 2.3, all funding provided by the Proponent or the Proponent's company or any subsidiary or partner thereof, to any Health PEI employee, staff member or associated individual in the past 24 months.

5.5.7 Special Conditions

Medical Alerts and Safety Notifications

Medical Alert Notification

In the event that a medical alert, recall, safety notification, advisory or warning is issued or communicated, at any time, by the Proponent or manufacturer of the equipment or a recognized reporting agency involving any of the equipment or posted on the Health Canada website, the Proponent shall;

- a. Communicate the medical alert, recall, safety notification, advisory or warning by registered mail and by facsimile to QEH and PCH Bio-Medical Department.
- b. Follow any Health Canada protocols and requirements; and
- c. Take all steps necessary to remedy the situation at no cost to the Hospital.

Notice of Defect or Malfunction

The Proponent shall also;

- a) Inform the Hospital of any possible design defect or malfunction condition occurring anywhere in the world with the equipment, or equipment similar to the equipment supplied under this agreement, at its earliest possible opportunity, but in no event, more than five (5) days after the Proponent becomes aware of the existence of such a defect or malfunctioning condition; and
- b) Communicate any such defects or malfunctions to the Hospital in the same manner as set out in Section "Medical Alerts and Safety Notifications" above.

WHMIS

Prior to the initial shipment of Equipment hereunder, the Proponent shall provide the Hospital with, and during the term of this Agreement the Proponent shall provide and continuously update, a list of all Equipment containing hazardous materials, or any physical agents or devices or equipment producing or emitting physical agents or any substance, compound or product that is deemed to be or contains a designated substance under the *Occupational Health and Safety Act* (Prince Edward Island). In accordance with the WHMIS Regulation, the Proponent shall provide the appropriate Material Safety Data Sheets, including all updates, during the term of this Agreement. All Material Safety Data Sheets documentation will be provided to the Hospital as directed by the Hospital in the format requested by the Hospital.

Government or Regulatory Actions

If Health PEI decides, in its sole discretion, to recall or cease using any Equipment due to health or safety concerns, or if any governmental or regulatory authority having jurisdiction requires Health PEI or the Proponent to recall or cease using any Equipment, Health PEI or the Proponent, as the case may be, shall promptly notify the other of such decision or requirement and all particulars thereof.

In the case of any recall, seizure or requirement to cease using any of the Equipment by any governmental or regulatory authority having jurisdiction, the Proponent, without limiting Health PEI's rights or remedies, shall have the opportunity to provide the Hospital with corrective action satisfactory to Health PEI as follows:

- a) replace or repair the Equipment and deliver replacement or repaired Equipment to Health PEI satisfactory to the Hospital; or
- b) credit the Hospital an amount equal to the remaining undepreciated Purchase Price, calculated on a 10 year straight line basis, for such Equipment and any other reasonable costs incurred by Health PEI in operating or complying with any such recall, seizure or order to cease using.

In any event, the Proponent shall defend, indemnify and hold the Hospital and its officers, directors, agents, physicians or employees harmless from and against all damages, liabilities, and costs including legal costs on a solicitor and client basis, arising from or related to such recall, seizure or order to cease using.

5.5.8 Health PEI Divisional/Program Responsibilities

Health PEI will assign a clinical/technical contact within Health PEI's sponsoring division or program to work in conjunction with the successful Proponent during the project:

Prince County Hospital

Julie Chisholm
Manager – Surgical Services, SPD
Telephone #902-438-4468
Email address: jechisholm@ihis.org

5.5.9 Business Hours

Proposed personnel are expected to work within the normal business hours of the RFP sponsoring division, which are:

- Monday to Friday, excluding holidays
- 7:00 AM to 3:30 PM Atlantic time, excluding one hour for lunch

During the project, Health PEI will identify any need to work outside the above business hours including evenings and weekends. This will include any needed special arrangements, such as an escort or any required security clearances/passes.

5.5.10 Environmental Requirements

In order to contribute to waste reduction and promote environmental responsibility, Health PEI will endeavour to acquire goods and services that support these principles wherever possible. Therefore, product(s) quoted should address:

- a) Minimizing packaging;
- b) Minimizing environmental hazards and waste generation; and
- c) Energy efficiency.

5.6 Proposal Format

To help ensure consistency in Proponent responses and ease the evaluation process, the proposal should be prepared and packaged as outlined in the sections that follow. Please print double-sided whenever possible and limit promotional and/or marketing materials to the information specifically requested in this RFP.

5.6.1 Structure of Proposal Document

The proposal document should be comprised of the sections below, presented in the order listed:

- a) **Title page** – This should clearly identify the Proponent’s legal business name and any “doing business as” name that may be applicable, postal address, telephone number, and email address, as well as the project title as shown on page 1 of this specifications document and RFP # .
- b) **Table of Contents**
- c) **Body of proposal** – This should include the Proponent’s Technical and Pricing responses.
- d) **Appendices** – These should include any response forms included in the RFP and any additional information, brochures, etc. that support the proposed services. Entries for each Appendix should appear in the Table of Contents.

5.6.2 Bid Package

A complete bid package is comprised of the elements below, presented in the order listed:

- a) **Administrative Elements** – The following items should be placed on top of your bid, in the order listed:
 - i) **One (1) PEIRFP Form** – One original of this Form should be completed, signed and included in your proposal. The business name provided under ‘NAME OF COMPANY’ on page 1 of this Form should be the same name as that reflected on your company’s business registration profile. Ideally, this Form should be placed on **top** of your bid and will be retained by Procurement Services;
 - ii) **One (1) Letter of Introduction** – This should identify the Proponent and be signed by a signing officer for the Proponent in order to bind the Proponent to the statements made in the proposal;
- b) **One (1) Original Proposal** – This is the Proposal Document containing the Technical and Pricing responses. The title page should be marked with the text ‘ORIGINAL’ at the top. The Original should be left **unbound**;
- c) **Two Copies of the Proposal** – Proposals without the correct number of copies may be rejected. The title pages for the Copies should be prepared in the same way as the title page for the Original, except these should be marked with the text ‘COPY’ at the top. Include the completed PEIRFP form in each copy. One of the Copies should be left unbound;
- d) **One (1) Electronic Copy** – Prepare an electronic copy of your proposal as a Portable Document Format (PDF) file (preferably), or alternately as a Word or WordPerfect file, and include this in your bid. The file name should include an abbreviated form of the Proponent’s name and RFP #. Electronic copy must be on a virus-free compact disc (CD), virus- free digital versatile disc (DVD) or virus free memory stick. Label the disc or memory stick with the Proponent’s name and RFP #.

5.6.3 Bid Submission

External packaging – Ensure the external packaging reflects the information listed below:

- a) Proponent’s name
- b) Shipping address
- c) Telephone number
- d) Fax number
- e) RFP #

5.6.4 Official Record of Submission

The Original and Copies should be identical (excluding any obvious differences in labelling, as noted). If discrepancies between these items are discovered during the evaluation or during the life of any contract that emerges from this RFP, the Original retained by Health PEI’s sponsoring division shall be taken as the correct version.

6.0 Response Requirements

This section describes the technical and pricing responses to be included in the proposal.

6.1 Technical Response

6.1.1 Executive Summary

Provide a 1-2 page summary of your Technical Response, highlighting the key features of your proposal. It should allow the Evaluation Team to quickly gain an overall perspective of your proposal, prior to reviewing it in detail.

6.1.2 Understanding of Service Requirements

Provide a 1-2 page summary of your understanding of the service requirements defined in this RFP. This content should be expressed in your own words and not simply recite the requirements as defined in Appendix A.

6.1.3 Proposed Approach/Process and Project Plan

Describe the approach and/or process proposed to address the service requirements. Include any notable methodologies, tools and techniques, and their respective suitability to this project.

Also provide a project plan that reflects your proposed approach/process and demonstrates your ability to meet the milestones.

6.1.4 Demonstrated Expertise

Outline experience with comparable projects. Describe any similarities to or differences from this project.

6.1.5 Project References

Provide references for the last three projects by your firm that are similar in nature to the requirements defined in this RFP. Select clients that are similar to Health PEI, and for each reference provide a contact's name, along with his/her phone number, fax number and email address. The reference information provided should identify the size of the projects conducted for them as well as demonstrate the extent of your previous experience, the client's overall satisfaction with your services and the results achieved, including your adherence to interim and final deadlines. Health PEI reserves the right to reject any proposal that has, in Health PEI's sole opinion, unsatisfactory references.

6.1.6 Proposed Project Manager, Resume and References

The successful Proponent is expected to identify the project manager proposed for the project and describe his/her experience.

Include his/her resume. This should be structured to emphasize his/her qualifications and project management experience in successfully managing projects of a similar size and scope to that required in this RFP.

The resume should include at least two references, including:

- Name of client organization;
- Name, title, telephone number and email of a client contact; and
- Brief description of the scope, complexity, dates and duration of the project

Project Manager

- a) be responsible for co-coordinating with the hospital the delivery, installation and testing of the equipment and provision of the related services including the Post-Warranty Services;
- b) oversee the various stages of the delivery and installation of the equipment to ensure their effective and timely delivery;
- c) ensure that the Proponent's obligations are completed in an efficient and timely manner;
- d) be readily available by telephone and electronic communication during hours mutually agreed upon in writing to interface with the hospital regarding this Agreement, including, without limitation, responding to requests, queries and complaints from the hospital and communicating them to the Proponent.
- e) Identify the contact for the project and describe his or her experience.

Proponent Personnel

All Proponent's personnel shall be competent workers, fit and skilled in the work assigned to them and shall function under the direction and control of the Proponent's Project Manager. The Proponent shall be responsible to the Hospital for the acts and omissions of the Proponent's personnel.

6.1.7 Proposed Resources, Resumes and References

The Proponent should be able to demonstrate that its **proposed team as a whole** meets or exceeds the service requirements. Prepare the table below to identify **all** personnel who will be assigned to the project and contribute to;

- (i) the **routine management** and/or
- (ii) The **performance** of the required services.

As shown, provide each person's name, title, role on this project, experience in this role and his/her respective employment status.

| Name | Title | Project Role | Role Experience (# months) | Employment Status (E = employee, |
|------|-------|--------------|----------------------------|----------------------------------|
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Health PEI encourages innovation and competition in the proponent community through arrangements such as partnerships and consortiums. If contactors or partners are to be used for this project, they must be identified in the table. If so, describe the general range of services that the respective contractors (companies or individuals) will provide and how this benefits your company. If no contactors are identified, this will be interpreted to mean that only “own resources” will be used.

Submit the individual resumes for each proposed resource. The resumes should be structured to emphasize their relevant qualifications and experience in successfully completed projects of a similar size and scope to that required by this RFP.

Each resume should include at least two project references where proposed individual served in a similar role, including:

- Name of client organization
- Name, title, telephone number and email of a client contact;
- Brief description of the scope, complexity, dates and duration of the project; and
- Role the proposed individual played in the reference project.

6.1.8 Management of Project Risk

Health PEI will be looking to minimize interruptions to patient services during the implementation of this project. Describe your strategies to minimize the time frame that service will be unavailable and outline risk mitigation strategies to reduce these risks.

6.1.9 Resource Management

By virtue of responding to this RFP, the Proponent is committing to make the proposed resources available to this project when needed and, once the project begins, the Proponent agrees to take any steps necessary to ensure the ongoing availability of its proposed resources during this project.

Health PEI acknowledges that instances can arise where a proposed resource is no longer employed by or associated with the Proponent, or is otherwise unavailable to the Proponent at the time of the service requirement. In these cases, the Proponent agrees to provide replacement resources with equivalent (or greater) experience and capability, and the selection of the replacement resources will be subject to the approval of Health PEI.

In the proposal, describe the process that would be used for including Health PEI in the selection of replacement resources and for securing Health PEI approval. Describe how changes in the project manager in particular would be handled, if this becomes necessary.

If new service requirements emerge during the project, Health PEI will make every effort to provide the successful Proponent with as much advance notice as possible. Describe the process and typical timelines involved in making additional resources available to this project.

Describe the process that would be used to resolve a situation where Health PEI concludes that an assigned resource from the Proponent is not performing their responsibilities adequately.

6.1.10 Added Value

“Added value” is the realization of additional benefits beyond the inherent worth of a good or service. Some examples for services include approach, expertise, references, resources, management, tools and/or methodologies, etc., or a combination of these.

If additional equipment is required to enhance the upgraded equipment PCH would be willing to explore these options.

Describe the aspect(s) of your proposal you believe will result in notable added value for this project and/or Health PEI as a whole.

6.1.11 Pricing Response

1. Proponent to provide pricing for :
 - a) OR Equipment and Accessories as outlined in Appendix A, D and E. (Proponents are to provide pricing for individual components indicating the OEM(Original Manufacturer of Equipment)
 - b) Service Options
 - c) Trade in Value of all existing equipment as outlined in Section 2.1 of the tender document as as well as Appendix E (pricing).
2. Proponent to provide incentive opportunities and the relative value of same.
3. Proponents to provide innovative and alternative proposals.
4. Pricing to be fixed for a twenty four (24) month period and detail any pricing increments during the term of the contract.

6.1.12 Estimated Cost – Listing of Time and Materials

Prepare the following table for inclusion in your proposal. Please refer to Appendix E - Pricing.

Provide appropriate details to support your figures, including estimates of the work effort and a breakout of expected expenses.

6.1.13 Travel and Project Expenses

Estimate the travel and living expenses associated with any proposed personnel who will need to travel to and from the primary work location in order to perform the required work during the Term of the contract. Provide relevant details to support your estimates.

6.1.14 Other Expenses

Estimate any other project expenses that may be incurred, once the proposed personnel are on site at the primary work location. These types of expenses will require prior approval from Health PEI after the contract begins and also must comply with Health PEI standards. These should be included in your estimated costs.

7.0 Proposal Evaluation

7.1 General Information

The Evaluation Team will consist of representatives of the Health PEI division and/or program that are sponsoring this RFP. It is understood and accepted by the Proponent that all decisions about the degree to which a proposal meets the requirements of this RFP are the judgment of this Evaluation Team.

To assist in the evaluation of the Responses, the Evaluation Team may, but is not required to:

- a) Conduct reference checks relevant to the proposal with any or all of the references cited in a response to verify any and all information regarding a Proponent, and rely on and consider any relevant information from such cited references in the evaluation of responses;
- b) Conduct any background investigations that it considers necessary in the course of the evaluation process, and consider any resulting relevant information when evaluating the responses; and
- c) Seek clarification from a Proponent if the requested information is ambiguous or missing, but only if such clarification does not offer the Proponent the opportunity to improve the competitive position of its response. Requests made by the Evaluation Team will be sent from the email addresses of the RFP Contacts.

The proposal will be examined in accordance with the evaluation process and criteria outlined in the sections below.

7.2 Evaluation Process

The bid will be evaluated using the following process:

- Stage 1: Verify each bid's compliance to the Mandatory Criteria identified below, and disqualify any bids that fail to meet these.
- Stage 2: For bids that pass the Mandatory Criteria, evaluate and score each one, using the Desirable Criteria and weights identified below.

7.3 Stage 1 – Mandatory Criteria

The proposal must meet **all** of the following mandatory criteria and clearly demonstrate that these are met in a substantially unaltered form. If the proposal fails to meet any one of these criteria, it will be deemed to be non-compliant and will receive no further consideration during the evaluation process:

1. The proposal must clearly demonstrate the Proponent's experience and ability to fulfill the service requirements identified;
2. All proposals must have resources fully qualified/certified and experienced in the supply, delivery, installation, training and service maintenance of proposed OR Equipment.

3. All proposals must provide certifications (CSA, Health Canada Device Licenses, etc.) for the equipment submitted;
4. Proponent must participate in site visits to determine scope of work verifying all physical requirements at the installation site to ensure successful delivery and installation. Responsibilities of the site to prepare for installation must be clearly stated in the bidder's response. Proponents may contact the listed tender contact in section 2.3 of this document.
5. The proponent must provide a detailed floor plan to scale which includes all equipment with proposed layout and integration via a master schematic diagram.
6. The Proponent must create an electrical /data plan before actual construction begins and if successful the Proponent must provide structural schematics as necessary.
7. Proponent must provide acceptable Project References as defined in Section 6.1.5, 6.1.6 and 6.1.7. This will be at the sole discretion of Health PEI;
8. All proposals must be submitted in Canadian Dollars (CDN) exclusive of all taxes.

7.3 Stage 2 – Desirable Criteria

If the proposal meets the Mandatory Criteria it will be further evaluated using the Desirable Criteria. Scores will be recorded for each criterion and a total score will be determined.

Prepare the table below, inserting references to the appropriate sections within your proposal that deal with each criterion under evaluation.

| Criterion | Weight (points) | Minimum Score Required (points) | Reference Page Number |
|--|-----------------|----------------------------------|-----------------------|
| Clinical/Technical Scoring | | | |
| Technical Components - Equipment | 15 | | |
| Technical Components – Installation Requirements | 15 | | |
| Training (User and Service) | 10 | | |
| Implementation Plan | 10 | | |
| Warranty, Service Support & Maintenance | 10 | | |
| References | 5 | | |
| Added Value | 5 | | |
| Subtotal A – Clinical/Technical Score | 70 | 49 | |
| Financial Scoring | | | |
| Price | 15 | | |
| Service and Warranty Agreement Costs | 5 | | |
| Post Warranty/Parts | 5 | | |
| Implementation (transition plan, training, cost mitigation, etc) | 5 | | |
| Subtotal B – Financial Score | 30 | | |
| Administrative and Legal Requirements | | | |

| | | | |
|--|---------------------------------------|--|--|
| <ul style="list-style-type: none"> • PEIRFP Form is signed & included • Business registration profile &/or plan have been included • No or minimal alterations to standard contract have been requested • Bid format reflects substantial adherence to instructions provided | <p>5 (points may be deducted)</p> | | |
| Maximum Score Possible | 100 | | |

Notes:

1. **A minimum qualifying score of 49 points** is required at Subtotal A for the bid to be deemed compliant
 - If the proposal's score meets or exceeds the minimum qualifying score, the Pricing response will then be evaluated using the formula: $\text{score} = \text{weight} \times (\text{low} / \text{bid})$
2. *The second phase of the evaluation may be a presentation. This will include a question and answer session which will last a maximum of one hour. Only the top 3 bidders (based upon the evaluation criteria) may be invited to present. Proponents will be asked to briefly present their proposal (30 minutes) followed by a question & answer session (30 minutes). **Technical & Financial Scoring will be adjusted to represent the clarifications and information presented by the Proponent in the meeting.***
3. *A third phase may include a trial of certain pieces of the equipment to assess the clinical use and quality of the laparoscopic equipment. It is the expectation of Health PEI that such an agreeable trial would serve to validate the equipment at no cost to Health PEI. Participating Proponents to be determined by Health PEI.*

Appendix A: Requirements Document

Appendix B: Contract Terms (Refer to section 5.3.1)

Appendix C: Existing (Current) Equipment

Appendix D: Future (Required) Equipment

Appendix E: Pricing Sheet

APPENDIX A -RFP REQUIREMENTS

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|---------------------|----------------------------|--|-------------------|
| PRODUCT | Evaluation | 3.1 PROPOSED SYSTEM | SYSTEM INFORMATION | |
| PRODUCT | Technical Equipment | 3.1.1 | Model # per component | |
| PRODUCT | Technical Equipment | 3.1.2 | Manufacturer(s) | |
| PRODUCT | Technical Equipment | 3.1.3 | Equipment life-span projections per component. (years) | |
| PRODUCT | Technical Equipment | 3.1.4 | First production date per component | |
| PRODUCT | Technical Equipment | 3.1.5 | Is there Research & Development still being done on these models? | |
| PRODUCT | Technical Equipment | 3.1.6 | Number sold. (Units and Installations)in Atlantic Canada/Canada with contact information and purchase/Installation dates. | |
| PRODUCT | Evaluation | 3.2.1 | OPERATING ROOM INTEGRATION SYSTEM | |
| PRODUCT | Technical Equipment | 3.2.1-1 | Each operating room must have a fully integrated system suitable for use in endoscopic, open, or minimally invasive modes of surgery | |
| PRODUCT | Technical Equipment | 3.2.1-2 | Operation of the integrated components and accessories will be through a touch controlled interface, located in each of the 3 OR suites | |
| PRODUCT | Technical Equipment | 3.2.1-3 | Must have customizable operator presets. | |
| PRODUCT | Evaluation | 3.2.2 | IN ROOM OPERATOR CONTROL STATION | |
| PRODUCT | Technical Equipment | 3.2.2-1 | Must remotely operate surgical lights, room lights, digital recording device, image capture, surgical displays, endoscopic equipment, and image routing. | |
| PRODUCT | Technical Equipment | 3.2.2-2 | Must integrate with an external PC for connectivity with hospital applications. | |
| PRODUCT | Technical Equipment | 3.2.2-3 | Must be connected to the hospital network with access to PACS to display archived patient diagnostic images such as radiology, fluoroscopy , CT etc. | |
| PRODUCT | Technical Equipment | 3.2.2-4 | Must include an integrated microphone and audio system suitable for in-situ telephone consultations | |
| PRODUCT | Technical Equipment | 3.2.2-5 | Must provide full operator control to route digital HD, or Ultra HD video signals from the surgical image source to the integrated displays. | |
| PRODUCT | Evaluation | 3.2.3 | EQUIPMENT HANDLING MATRIX | |
| PRODUCT | Technical Equipment | 3.2.3-1 | Must be modular in design, and ready to accept future expansion. | |
| PRODUCT | Technical Equipment | 3.2.3-2 | Must be easy to access and service. | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|---------------------|--------------|---|-------------------|
| PRODUCT | Technical Equipment | 3.2.3-3 | Must have sufficient input and output channels to accommodate all integrated devices required. | |
| PRODUCT | Technical Equipment | 3.2.3-4 | Must have extra unallocated input and output channels ready to accept future integrated surgical consoles, and diagnostic equipment. | |
| PRODUCT | Technical Equipment | 3.2.3-5 | Video Matrix inputs must include connectivity to the surgical camera, patient monitoring, PACs, room camera, plus two additional compatible inputs. | |
| PRODUCT | Technical Equipment | 3.2.3-6 | Supported video formats; 3G/HD-SDI,3G-SDI, DVI, RGB/Composite/S-Video (if required for legacy equipment), 6G/HD if required | |
| PRODUCT | Technical Equipment | 3.2.3-7 | Supported video resolution must be full HD 1080p or greater. | |
| PRODUCT | Technical Equipment | 3.2.3-8 | Must supply all wire kits and material required for a complete install. | |
| PRODUCT | | 3.2.4 | SURGICAL DISPLAYS | |
| PRODUCT | Technical Equipment | 3.2.4-1 | Must include 2 Surgical field displays, plus 1 large wall mounted surgical display in each surgical suite. | |
| PRODUCT | | 3.2.5 | WALL MOUNTED DISPLAY UNITS | |
| PRODUCT | Technical Equipment | 3.2.5-1 | One(1) Per OR Suite | |
| PRODUCT | Technical Equipment | 3.2.5-2 | Minimum 55 inch LCD professional grade display | |
| PRODUCT | Technical Equipment | 3.2.5-3 | Full HD 1080p or better resolution | |
| PRODUCT | Technical Equipment | 3.2.5-4 | LED Backlight | |
| PRODUCT | Evaluation | 3.2.6 | SURGICAL FIELD DISPLAY | |
| PRODUCT | Technical Equipment | 3.2.6-1 | Two(2) per OR suite | |
| PRODUCT | Technical Equipment | 3.2.6-2 | Ceiling Mounted with jointed articulating arms allowing 360 degree rotation | |
| PRODUCT | Technical Equipment | 3.2.6-3 | Collocated with surgical lights or as specified | |
| PRODUCT | Technical Equipment | 3.2.6-4 | Minimum size, 26 inch LCD display or larger | |
| PRODUCT | Technical Equipment | 3.2.6-5 | Full HD 1080p or better resolution | |
| PRODUCT | Technical Equipment | 3.2.6-6 | Contrast ratio of 1000-1 or better | |
| PRODUCT | Technical Equipment | 3.2.6-7 | LED backlight | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|---------------------|--------------|--|-------------------|
| PRODUCT | Evaluation | 3.2.7 | SURGICAL LIGHTS | |
| PRODUCT | Technical Equipment | 3.2.7-1 | Require two (2) LED surgical light heads per OR suite. | |
| PRODUCT | Technical Equipment | 3.2.7-2 | Must be 100% compatible with the OR matrix. | |
| PRODUCT | Technical Equipment | 3.2.7-3 | Light heads must be ceiling mounted in combination with a central ceiling tube mount. | |
| PRODUCT | Technical Equipment | 3.2.7-4 | Flush Ceiling Mount to fit if possible. | |
| PRODUCT | Technical Equipment | 3.2.7-5 | Central ceiling mount can be used in combination with surgical displays | |
| PRODUCT | Technical Equipment | 3.2.7-6 | Surgical lighting head should be mounted on its own horizontal arm allowing for 360 degree swivel. | |
| PRODUCT | Technical Equipment | 3.2.7-7 | Each surgical light head should be height adjustable and allow for easy articulation with stable positioning over the surgical suite. | |
| PRODUCT | Technical Equipment | 3.2.7-8 | Horizontal and vertical tension of lighting should be easily adjusted without excessive disassembly. | |
| PRODUCT | Technical Equipment | 3.2.7-9 | Light field size must be easily adjusted. | |
| PRODUCT | Technical Equipment | 3.2.7-10 | Light functions can be controlled from a minimum of 2 locations(i.e. on or near the light head or control pad and through the integration system workstation). | |
| PRODUCT | Technical Equipment | 3.2.7-11 | Must have maximum light intensity level of 140,000 Lux per 1 meter distance or greater. | |
| PRODUCT | Technical Equipment | 3.2.7-12 | Light intensity range must allow adjustment from 30% or lower up to 100% | |
| PRODUCT | Technical Equipment | 3.2.7-13 | Must have a minimum of 3 colour temperature ranges. | |
| PRODUCT | Technical Equipment | 3.2.7-14 | Surgical light heads to be pre wired to accept a camera if required | |
| PRODUCT | | 3.2.8 | EQUIPMENT MANAGEMENT BOOM | |
| PRODUCT | Technical Equipment | 3.2.8-1 | Require one (1) each per OR suite. | |
| PRODUCT | Technical Equipment | 3.2.8-2 | Must have multiple shelves or platforms to safely accommodate a light source, camera control unit, endoflator apparatus, electrical surgical generator, smoke evacuator, and accommodate an additional console if necessary. | |
| PRODUCT | Technical Equipment | 3.2.8-3 | Must contain all of the signal, and power wiring with connections necessary to integrate the above noted devices to the workstation. | |
| PRODUCT | Technical Equipment | 3.2.8-4 | Must have a minimum of two medical vacuum DISS connector plates installed to the existing hospital vacuum system, and ready for use with a suction regulator. | |
| PRODUCT | Technical Equipment | 3.2.8-5 | Must have two CO2 DISS plates installed to the existing hospital CO2 gas supply and ready to use with the electronic endoflator device. | |
| PRODUCT | Technical Equipment | 3.2.8-6 | Must have a minimum of 8 duplex 110v 60 Hz AC receptacles | |
| PRODUCT | Technical Equipment | 3.2.8-7 | The boom and support arms must have an internal conduit size that will easily accommodate all wiring and gas requirements for this installation. | |
| PRODUCT | Technical Equipment | 3.2.8-8 | The boom support and articulated joints must be easily repositioned so as not to damage wiring kits and gas hoses within its normal range of motion. | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|---------------------|---------------|---|-------------------|
| PRODUCT | Technical Equipment | 3.2.8-9 | Operator breaking controls should be relocatable or mountable on various locations such as the front or rear of the unit. | |
| PRODUCT | Evaluation | 3.2.9 | CAMERA HEAD | |
| PRODUCT | Technical Equipment | 3.2.9-1 | Require six (6) high definition camera heads for the department. | |
| PRODUCT | Technical Equipment | 3.2.9-2 | Must be designed to work with endoscopes, camera control unit, and other ancillary devices used for endoscopic diagnosis, treatment and observation. | |
| PRODUCT | Technical Equipment | 3.2.9-3 | Must have programmable buttons to accommodate custom settings. | |
| PRODUCT | Technical Equipment | 3.2.9-4 | Operator must have direct control to focus and image capture as required | |
| PRODUCT | Technical Equipment | 3.2.9-5 | Compatible and easily coupled to a variety of rigid endoscopes manufactured by Karl Storz, used for laparoscopy, arthroscopy, cystoscopy, and ENT procedures. | |
| PRODUCT | Technical Equipment | 3.2.9-6 | Must provide full service and repair of camera heads and provide a loaner option if required. | |
| PRODUCT | Evaluation | 3.2.10 | CAMERA CONTROL UNIT/VIDEO PROCESSOR | |
| PRODUCT | Technical Equipment | 3.2.10-1 | Require one (1) each per OR suite. | |
| PRODUCT | Technical Equipment | 3.2.10-2 | To be used as an endoscopic accessory with rigid or flexible endoscopes when the camera head is coupled to the endoscope. | |
| PRODUCT | Technical Equipment | 3.2.10-3 | To be used with multiple chip high definition and or ultra high definition cameras | |
| PRODUCT | Technical Equipment | 3.2.10-4 | The capability to use more than one camera head at once is preferred. | |
| PRODUCT | Technical Equipment | 3.2.10-5 | Must have the capability to display the surgical source image in high or ultra-high definition on any integrated operating room video monitor. | |
| PRODUCT | Technical Equipment | 3.2.10-6 | Must be compatible with the integrated operating room control system. | |
| PRODUCT | Technical Equipment | 3.2.10-7 | Has integral digital video and still picture storage | |
| PRODUCT | Technical Equipment | 3.2.10-8 | USB and or SD media sockets to easily transfer and or store image files | |
| PRODUCT | Technical Equipment | 3.2.10-9 | A stand alone digital video capture device will be considered if required. | |
| PRODUCT | Evaluation | 3.2.11 | ELECTRONIC ENDOFLATOR INSUFFLATION DEVICE | |
| PRODUCT | Technical Equipment | 3.2.11-1 | Require one (1) each per OR suite. | |
| PRODUCT | Technical Equipment | 3.2.11-2 | A microprocessor controlled high flow insufflator designed to deliver CO2 gas that can be used during laparoscopic surgical and diagnostic procedures. | |
| PRODUCT | Technical Equipment | 3.2.11-3 | Performs a power - on self test and verifies if the unit is operating within normal parameters | |
| PRODUCT | Technical Equipment | 3.2.11-4 | Has overpressure detection and negative pressure alarms | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|------------------------|------------------------------|---|-------------------|
| PRODUCT | Technical Equipment | 3.2.11-5 | Settings can be operator controlled remotely from the integration control panel, or from the endoflator device. | |
| PRODUCT | Technical Equipment | 3.2.11-6 | CO2 gas supply monitor | |
| PRODUCT | Technical Equipment | 3.2.11-7 | Passive pressure release | |
| PRODUCT | Technical Equipment | 3.2.11-8 | Gas flow 0 to 20 L/min or greater | |
| PRODUCT | Technical Equipment | 3.2.11-9 | Insufflation Pressure 30 MM/Hg or greater | |
| PRODUCT | Evaluation | 3.2.12 | LIGHT SOURCE | |
| PRODUCT | Technical Equipment | 3.2.12-1 | Require one each per OR suite. | |
| PRODUCT | Technical Equipment | 3.2.12-2 | A microprocessor regulated xenon light source suitable for endoscopic intervention. | |
| PRODUCT | Technical Equipment | 3.2.12-3 | Settings can be operator controlled remotely from the integration control panel, or from the light source console. | |
| PRODUCT | Technical Equipment | 3.2.12-4 | Must be compatible with a variety of generic fiber optic light cables and connectors. | |
| PRODUCT | Technical Equipment | 3.2.12-5 | Must have variable light intensities, and brightness control. | |
| PRODUCT | Technical Equipment | 3.2.12-6 | Must be compatible with the integrated operating room control system. | |
| PRODUCT | Technical Equipment | 3.2.12-7 | Test equipment necessary to verify light intensity must be included with the submission if required. | |
| PRODUCT | Evaluation | 3.3 SYSTEM ACCEPTANCE | INSTALLATION REQUIREMENTS | |
| PRODUCT | Technical Installation | 3.3.1 | Delivered components and related equipment will be transported, uncrated, inspected, assembled, calibrated and tested by the Proponent according to manufacturer's instructions, specifications and procedure. Assistance from the Biomedical Engineering Department may be requested if necessary. | |
| PRODUCT | Technical Installation | 3.3.2 | The Vendor will coordinate and make arrangements with PCH Materials Management, in advance, the arrival date of equipment and components so as not to disrupt the ongoing operations of the hospital and to ensure appropriate storage. | |
| PRODUCT | Technical Installation | 3.3.3 | The Proponent should assume the full duty, obligation and expense of obtaining and maintaining necessary insurance, for all staff that may be assigned to the installation as part of an agreement to purchase and install hardware and/or software. | |
| PRODUCT | Technical Installation | 3.3.4 | The Proponent will submit a mutually designed and accepted installation schedule. All equipment shall be installed and tested no later than anticipated install date. | |
| PRODUCT | Technical Installation | 3.3.5 | Any cost associated with damage of the hospital property will be the proponent's responsibility. The hospital will invoice the proponent for the repair of any such damage. | |
| PRODUCT | Technical Installation | 3.3.6 | The Proponent shall also be responsible for the clean up and removal of all debris during installation as per any applicable CSA or Infection Control standards. | |
| PRODUCT | Technical Installation | 3.3.7 | The Proponent will be responsible for decommissioning and removal of all equipment from each OR suite. | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|------------------------|--------------------------|--|-------------------|
| PRODUCT | Technical Installation | 3.3.8 | The Proponent will outline a disposal plan for equipment. | |
| PRODUCT | Technical Installation | 3.3.9 | Work will be carried out in such a manner as to cause a minimum of interference with the normal operation of the hospital's departments, specifically the Operating Room. The Proponent will consult with and secure the approval of the Operating Room Manager, Facilities Manager and Biomedical Engineering Department before proceeding with any work which may cause such interference. | |
| PRODUCT | Technical Installation | 3.3.10 | As part of the installation plan the proponent must use existing gas lines in each OR suite | |
| PRODUCT | Technical Installation | 3.3.11 | Upon completion of equipment installation ,the vendor shall test the equipment as to its proper functioning, with all test results in writing. All quality assurance equipment necessary to carry out the test protocol shall be provided as part of the acquisition. No acceptance testing shall be valid without the signatures of one of PCH's Biomedical Technologists. | |
| PRODUCT | Technical Installation | 3.3.12 | Normal working hours are from 7:00am to 3:00pm (Monday to Friday). The Proponent will consult with and secure the approval of the Facilities Manager and Operating Room Manager before proceeding with any work outside the normal working hours. | |
| PRODUCT | Technical Installation | 3.3.13 | The Proponent shall ensure that all work in conjunction with equipment installation shall be in accordance with the applicable editions of all applicable federal, provincial and local codes and standards including but not limited to CSA Standards, NFPA70, and The Canadian Electrical Code. | |
| PRODUCT | Technical Installation | 3.3.14 | The owner will be responsible for all line voltage and structural mounts. | |
| PRODUCT | Technical Installation | 3.3.15 | The Proponent shall advise the Facilities Manager and Operating Room Manager of any delays and/or holdups as soon as they become evident so as to expedite satisfactory resolution of the problem. | |
| PRODUCT | Technical Installation | 3.3.16 | Prior to commencement of any work on site, the Proponent shall submit the name of their installation leader who will be responsible for all communications with the OR Integration Team. | |
| PRODUCT | Technical Installation | 3.3.17 | The successful vendor shall provide with this tender, and from time to time thereafter, proof of PEI Occupational Health and Safety (OH&S) Certificate of clearance and that their personnel have their applicable licenses and are fully covered under the Workplace Safety and Insurance Act. | |
| PRODUCT | Technical Installation | 3.3.18 | All contracted personnel must comply with applicable environmental regulations and hospital policies and procedures, including infection control measures, safety and emergency preparedness guidelines. | |
| PRODUCT | Evaluation | 3.4 USER TRAINING | | |
| PRODUCT | Training | 3.4.1 | The Proponent should submit a description of the training offered to all users stating who will be providing the training, area of expertise, subject matter and training methods. | |
| PRODUCT | Training | 3.4.2 | The Proponent should submit a tentative operational training schedule for all users of the equipment including but not limited to those listed on 3.4.3 to 3.4.6 below: | |
| PRODUCT | Training | 3.4.3 | i) normal users and operators of the equipment, | |
| PRODUCT | Training | 3.4.4 | ii) medical practitioners, | |
| PRODUCT | Training | 3.4.5 | iii) Biomedical engineering technologists, | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|------------------------------|--------------------|--|-------------------|
| PRODUCT | Training | 3.4.6 | iv) other support staff. | |
| PRODUCT | Training | 3.4.7 | The Operating Room Manager or designate will be responsible to coordinate the users training. The hospital will make its facilities available to the Proponent to conduct such training. | |
| PRODUCT | Training | 3.4.8 | Specify if all user training will be held in-house. The Proponent shall specify location of training facility and be responsible for all expenses (travel, accommodations, tuition, etc.) if operational training is to be conducted outside of the hospital facilities. | |
| PRODUCT | Training | 3.4.9 | Specify what off-site training options are available for the technologists and outline these costs in detail. | |
| PRODUCT | Evaluation | 3.5 MANUALS | | |
| PRODUCT | Warranty Service Maintenance | 3.5.1 | The Proponent will include two (2) complete sets of operational manuals and an electronic version of same for each piece of equipment outlined in section 3.2 of this document. | |
| PRODUCT | Warranty Service Maintenance | 3.5.2 | The manual should include service, maintenance and operating instructions for each piece of equipment required to form the system; descriptive and technical data; manual and schematic drawings for servicing and Quality Assurance; and wiring diagrams; | |
| PRODUCT | Warranty Service Maintenance | 3.5.3 | The manual should include warnings necessary to ensure patient and operator safety. | |
| PRODUCT | Warranty Service Maintenance | 3.5.4 | The manual should include a list of specialized test equipment , calibration devices and diagnostic software required for servicing and quality assurance. | |
| PRODUCT | Warranty Service Maintenance | 3.5.5 | The manual should include A list of recommended spare parts and copies of all field tests performed on the equipment. | |
| PRODUCT | Warranty Service Maintenance | 3.5.6 | All technical records, manuals and diagnostic software licenses pertaining to the system and its options at time of acceptance are part of the purchase of the system and shall be the property of the hospital. | |
| PRODUCT | Warranty Service Maintenance | 3.5.7 | The vendor shall provide all software, hardware, special tools and special devices required for the operation , calibration, maintenance and repair of equipment. | |
| PRODUCT | Warranty Service Maintenance | 3.5.8 | The hospital and its designated representatives shall have the right to use all software for the operation, repair and calibration of the equipment. | |
| PRODUCT | Warranty Service Maintenance | 3.5.9 | The vendor shall provide the hospital with a copy of all appropriate software licensing agreements | |
| PRODUCT | Warranty Service Maintenance | 3.5.10 | The vendor shall provide at no charge , any software(operational and diagnostic) or hardware upgrades that enhance existing capabilities of the equipment during the lifetime of the equipment at the hospital. | |
| PRODUCT | Warranty Service Maintenance | 3.5.11 | Where available , the vendor shall provide at no extra charge to the hospital all remote diagnostic software packages. | |
| PRODUCT | Warranty Service Maintenance | 3.5.12 | The manual should specify appropriate cleaning methods. | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|------------------------------|---|--|-------------------|
| PRODUCT | Warranty Service Maintenance | 3.5.13 | The Proponent will include two (2) complete set of technical service manual and an electronic version of same. | |
| PRODUCT | Warranty Service Maintenance | 3.5.14 | These manuals should be identical to those that are furnished to the manufacturer's service personnel. | |
| PRODUCT | Warranty Service Maintenance | 3.5.15 | The technical service manuals should contain a table of contents and an index; Proponent's address, phone and fax numbers for technical support; a list of all the system's parts with part number; block diagrams; safety test information; disassembly and reassembly information; circuit diagrams; and adequate documentation for the Biomedical Technologist to perform inspection and preventive maintenance, functional tests, and troubleshooting procedures | |
| PRODUCT | Warranty Service Maintenance | 3.5.16 | Required tools and test equipment and step-by-step instructions for performance testing should also be listed. Specialized tools or test equipment should also be listed here and generically described. If they can only be obtained from the proponent, pricing, good for 12 months, should be provided in appendix 7. | |
| PRODUCT | Evaluation | 3.6 PERMORMANCE TESTING | | |
| PRODUCT | Warranty Service Maintenance | 3.6.1 | The Proponent shall test the equipment in the presence of a Biomedical Engineering Technologist and submit a completed test report. | |
| PRODUCT | Technical Equipment | 3.6.2 | All equipment shall be CSA approved as a complete system including all options and/or subassemblies per applicable CSA standards or equivalent. | |
| PRODUCT | Technical Equipment | 3.6.3 | All importers of Distributors of Class II,III, and ivy Medical Devices require a valid "Establishment License" issued by Health Canada's Protection Branch Therapeutic products program. The vendor shall provide proof of such license. | |
| PRODUCT | Technical Equipment | 3.6.4 | If the installed equipment does not comply with the agreed upon performance requirements outlined in this document, the Proponent will upgrade the equipment to meet the agreed upon performance specifications within thirty (30) days at no additional cost. Should the equipment not be made compliant, the hospital, at its discretion, may require removal of the equipment at the expense of the vendor and claim a rebate in full for any payments made previously. | |
| PRODUCT | Technical Equipment | 3.6.5 | The Proponent agrees that the performance testing should include a continuous clinical operation period of 30 working days. | |
| PRODUCT | Technical Equipment | 3.6.6 | The Proponent shall outline the test methodology and tools/analyzers to be used. | |
| PRODUCT | Technical Equipment | 3.6.7 | Following installation of equipment, the vendor shall provide to the hospital with a report certifying that such equipment has been fully and completely supplied and/or installed, is mechanically complete, is fully commissioned and meets the vendor's technical specifications. Title to the equipment will pass to the hospital upon final acceptance by the hospital of the equipment. | |
| PRODUCT | Technical Equipment | 3.6.8 | The acceptance date will signify the beginning of the warranty period and of the interim payment. | |
| PRODUCT | Technical Equipment | 3.6.9 | The purchasing department in consultation with Facilities Management and Biomedical Engineering Services shall delay the acceptance date and/or final payment if all equipment, accessories and supplies are not received, installed and operational. | |
| SERVICE | Evaluation | 3.7 TECHNICALAND FIELD SERVICE SUPPORT | | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|------------------------------|-----------------------------|---|-------------------|
| SERVICE | Warranty Service Maintenance | 3.7.1 | The vendor will provide response times and coverage for items 3.7.2 to 3.7. 7 during the warranty period and upon expiration of the warranty. | |
| SERVICE | Warranty Service Maintenance | 3.7.2 | Specify guaranteed response times by telephone. | |
| SERVICE | Warranty Service Maintenance | 3.7.3 | Specify guaranteed response times to arrive on site. | |
| SERVICE | Warranty Service Maintenance | 3.7.4 | Specify guaranteed response times on line. | |
| SERVICE | Warranty Service Maintenance | 3.7.5 | Specify hours of coverage by phone. | |
| SERVICE | Warranty Service Maintenance | 3.7.6 | Specify hours of coverage for on-line service. | |
| SERVICE | Warranty Service Maintenance | 3.7.7 | State location of field service support. | |
| SERVICE | Warranty Service Maintenance | 3.7.8 | Specify availability and location of backup technical coverage with response times. | |
| SERVICE | Evaluation | 3.8 SERVICE OPTIONS | | |
| SERVICE | Warranty Service Maintenance | 3.8.1 | Prince County Hospital has in-house Biomedical services . Their purpose is to decrease downtimes and limit risk to Patients as well as rationalize savings. Proponents are to provide details of service options which are to include and not limited to the following requirements listed under the Service Section: | |
| SERVICE | Warranty Service Maintenance | 3.8.2 | Provide details of all available service arrangements between the manufacturer and Biomedical Engineering. Include percentage discounts with each option in the space provided in Pricing Appendix E. | |
| SERVICE | Warranty Service Maintenance | 3.8.3 | State the availability and inclusion of software support and upgrades. | |
| SERVICE | Warranty Service Maintenance | 3.8.4 | Indicate if any limitations on availability of service support to Biomedical Engineering in the absence of an agreement. | |
| SERVICE | Warranty Service Maintenance | 3.8.5 | Specify if there are any limitations or restrictions to servicing by in-house staff or restrictions due to specialized tools and equipment or warranty. | |
| SERVICE | Evaluation | 3.9 SERVICE TRAINING | | |
| SERVICE | Training | 3.9.1 | Provide information as to the availability of service training. Levels of service training and restricted service access associated with each level of training. | |
| SERVICE | Training | 3.9.2 | Provide information if proposal includes training for Biomedical Engineering Technologists. | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|------------------------------|-----------------------------|--|-------------------|
| SERVICE | Training | 3.9.3 | Provide information addressing if proposal includes training for Clinical Engineering Technologists and is all inclusive of such things as expenses (i.e. travel, hotel, meals). | |
| SERVICE | Training | 3.9.4 | Specify if service training will provide sufficient familiarity and knowledge of the device or system as to allow for the satisfactory maintenance, repair, calibration and functional verification of the device or system, as determined by our Biomedical Engineering. A syllabus of the course should be provided. | |
| SERVICE | Training | 3.9.5 | Provide details on any specialized test equipment or related devices that are required for the long term maintenance of the proposed device or system. | |
| SERVICE | Training | 3.9.6 | Provide information as to the location of training and indicate if the training is performed by the manufacturer or vendor. | |
| SERVICE | Training | 3.9.7 | The supplier is expected to provide Biomedical Engineering with a minimum of 2 complete set of service manuals and operation/user manuals. These manuals are to be provided regardless of the service option chosen in hard copy and/or electronic format. | |
| SERVICE | Training | 3.9.8 | Specify location of spare parts depot. | |
| SERVICE | Training | 3.9.9 | State guaranteed parts delivery time. | |
| SERVICE | Training | 3.9.10 | Describe if manufacturer provides a parts exchange program. What is the typical percentage discount from list prices? | |
| SERVICE | Training | 3.9.11 | Specify availability / accessibility of loaners if applicable. Provide costs, if applicable in the space provided in Pricing Appendix E. | |
| SERVICE | Training | 3.9.12 | Specify if proposal includes a parts/spares inventory. A recommended list of spare parts is to be provided as a minimum. | |
| SERVICE | Training | 3.9.13 | What is the guaranteed availability of parts beyond the availability of the product? Please specify in years. | |
| SERVICE | Training | 3.9.14 | In the event that the equipment is modified or upgraded during the warranty period, the vendor shall provide supplemental service training to the applicable technical service department staff of the hospital. | |
| SERVICE | Training | 3.9.15 | Specify if all parts for the repair of the device are available even without a service agreement. | |
| SERVICE | Evaluation | 3.10 SERVICE MANUALS | | |
| SERVICE | Warranty Service Maintenance | 3.10.1 | Specify if all service / technical support contact information is provided. | |
| SERVICE | Warranty Service Maintenance | 3.10.2 | Specify if the manuals include system parts and part numbers. | |
| SERVICE | Warranty Service Maintenance | 3.10.3 | Specify if the manuals include block diagrams. | |
| SERVICE | Warranty Service Maintenance | 3.10.4 | Specify if the manuals include safety test information. | |
| SERVICE | Warranty Service Maintenance | 3.10.5 | Specify if the manuals include disassembly / assembly information and procedures. | |
| SERVICE | Warranty Service Maintenance | 3.10.6 | Specify if the manuals include circuit diagrams. | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|----------------|------------------------------|----------------------|--|-------------------|
| SERVICE | Warranty Service Maintenance | 3.10.7 | The vendor shall keep all service manuals current for a period of five(5) years following the date of system acceptance | |
| SERVICE | Warranty Service Maintenance | 3.10.8 | Proponent to provide a copy of the service manual during the RFP process for review. If manual is unavailable during the RFP process the proponent should guarantee availability of the above content and will supply if successful. | |
| SERVICE | | 3.11 SOFTWARE | | |
| SERVICE | Warranty Service Maintenance | 3.11.1 | Describe the methods used to install or upgrade software related to the service of the device or system including method of connectivity. | |
| SERVICE | Warranty Service Maintenance | 3.11.2 | Specify if all service software required to diagnose or program the device or system components are provided along with interface and applicable costs. | |
| SERVICE | Warranty Service Maintenance | 3.11.3 | Describe the service related information which is stored in error logs and where they are located in the system. | |
| SERVICE | Warranty Service Maintenance | 3.11.4 | Proponent to provide technical requirements/specifications for any hardware and software if applicable | |
| SERVICE | Warranty Service Maintenance | 3.11.5 | Proponent to provide anti-virus policy and any other policies covering 3rd party software used for performing backups, monitoring connectivity, performance, storage etc. | |
| SERVICE | Warranty Service Maintenance | 3.11.6 | If proponent provides support remotely please describe the method used for remote connectivity. | |
| SERVICE | Evaluation | 3.12 WARRANTY | | |
| SERVICE | Warranty Service Maintenance | 3.12.1 | Proponents to provide details regarding standard warranty, extended warranty and lifetime warranty offerings for the proposed Device / System and software. | |
| SERVICE | Warranty Service Maintenance | 3.12.2 | Proponents to provide details regarding process for loaner equipment during and after the warranty period. | |
| SERVICE | Warranty Service Maintenance | 3.12.3 | Proponents to describe how all hardware and software upgrades are to be handled for the life of the equipment. Outline any costs associated with upgrades and expected release times of software and any associated hardware to support the upgrade. | |
| SERVICE | Warranty Service Maintenance | 3.12.4 | Proponents to provide warranty on replacement parts | |

| Category | Sub Category | Section | Requirements Details and/or Questions | Supplier Response |
|---------------------------|------------------------------|-----------------------|--|-------------------|
| SERVICE | Warranty Service Maintenance | 3.12.5 | Within 6 weeks prior to the end of the warranty expiration date the vendor shall perform a complete system performance check and ensure that it meets or exceeds those specifications initially provided at the time of system acceptance. Failure to perform this system check and any corrective procedures shall automatically extend the warranty period until such time as the system check is completed. | |
| SERVICE | Warranty Service Maintenance | 3.12.6 | After warranty has expired, describe response time for on-site repair. | |
| SERVICE | Warranty Service Maintenance | 3.12.7 | Guaranteed length of ongoing system support in years | |
| SERVICE | Evaluation | 3.13 TECHNICAL | | |
| SERVICE | Warranty Service Maintenance | 3.13.1 | Describe the process your company has for product recalls, service bulletins and / or service notifications including how they are communicated to the end User. | |
| SERVICE | Warranty Service Maintenance | 3.13.2 | Upgrades are defined as a new version of or addition to the equipment including any software, firmware, or hardware changes which constitutes an improvement or modification that enhances the performance of the equipment or provides a new feature or functionality. Describe your process regarding any upgrades. | |
| SERVICE | Warranty Service Maintenance | 3.13.3 | Updates are defined as any correction or change to the equipment made during the life of the equipment or as long as the hospital still requires the equipment and includes any modification, correction or adjustment associated with patient or operator safety. Please describe how updates will be managed. | |
| SERVICE | Warranty Service Maintenance | 3.13.4 | Please disclose any Alerts, Service Recalls, Service Bulletins, Safety Notifications and the like that may be outstanding at the time of this RFP. | |
| PRODUCT or SERVICE | Evaluation | 3.14 VALUE ADD | | |
| PRODUCT and or SERVICE | Value Add | 3.14.1 | "Added value" is the realization of additional benefits beyond the inherent worth of a good or service. Some examples for services include approach, expertise, references, resources, management, tools and /or methodologies, etc. or a combination of these. Please describe the aspect(s) of your proposal you believe will result in notable added value for this project and or Health PEI as a whole. | |

APPENDIX B

As per:

5.3.1 Contract Terms

There are two options available for the contract. The first is to sign the standard Health PEI Services Contract. The second is to sign the Proponent(s)' contract. In either case the contract must be updated to reflect the requirements and terms of the RFP.

Option One – Health PEI Services Contract - The terms of our standard services contract are available by emailing contractshpei@ihis.org. Describe in Appendix B any required changes that your legal counsel wishes to be made to the contract, or the standard services contract will be used “as is”. The Proponent who requests multiple and/or major changes to the contract risks disqualification. Alterations should reflect only those changes that the Proponent considers to be vital.

Option Two - If using the Proponent(s)' contract the terms of the contract that will be used for this project are to be provided in Appendix B. This document will always be updated as a part of the award process to reflect the Proponent's name, contact information, address, applicable schedules, etc. If the Proponent's contract reflects major deviations from the terms and/or conditions in the standard Health PEI services contract, the Proponent risks disqualification

Kindly provide any required information as detailed above within your proposal referencing Appendix B.

Thank you

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APPENDIX C - Existing Equipment

| Item Description | Pkg/Unit of Measure | Current Equipment Quantities |
|-----------------------------|---------------------|------------------------------|
| Camera Head | EA | 6 |
| Camera Head (ENT) | EA | 1 |
| Computer | EA | 3 |
| Display Standard Definition | EA | 9 |
| Video Processor | EA | 3 |
| Laparoflator | EA | 3 |
| Light Source | EA | 3 |
| Surgical llights | EA | 6 |
| Equipment Management Boom | EA | 3 |

Item specifics are available and may be viewed during site visit.

OR Integration - RFP

APPENDIX D- Future (Required) Equipment

| Item Description | Pkg/Unit of Measure | Quantities Required |
|---|---------------------|---------------------|
| In Room Operator Control Station | EA | 3 |
| Equipment Handling Matrix | EA | 3 |
| Surgical Field Display | EA | 6 |
| Wall Mounted Display Unit | EA | 3 |
| Surgical Lights (LED) | EA | 6 |
| Equipment Management Boom | EA | 3 |
| Camera Head | EA | 6 |
| Camera Head (ENT) | EA | 1 |
| Camera Control Unit/Video Processor | EA | 3 |
| Electronic Endoflator Insufflation Device | EA | 3 |
| Light Source | EA | 3 |



RFP - Appendix E

Proponents to follow the instructions listed hereto when submitting prices. Failure to submit Appendix E in the prescribed manner may result in your bid being disqualified. Tax is not included under the quote below.

Proponents are to provide line-item detailed pricing for all proposed base system pricing for OR Integration System for the Price County Hospital, Summerside PEI as described in Appendix A - Requirements.. Additional rows may be inserted as required. Proponent must enter N/A for any responses the proponent can not provide.

The awarded proponent will be responsible for the supply, delivery, implementation, and personnel training of OR Integration System requested in this RFP. In addition it is the intent to ensure sufficient, service, ongoing maintenance and repair support of the proposed OR Integration System requested in this RFP.

Part 1 - OR Integration Equipment

Proponent must provide line-item detailed pricing on proposed OR Integration System clearly identifying components with all the necessary subsystems, software and hardware. Base system must be broken down by components and priced individually. Failure to do so will result in the rejection of the proposal. Please do not leave any fields in Appendix E blank. Proponent must enter N/A for any responses the proponent can not provide.

| Item Number | Item Description | Pkg/Unit of Measure | Quantities Required | Net Cost of Item | Extended total |
|-------------|---|---------------------|---------------------|------------------|----------------|
| | In Room Operator Control Station | EA | 3 | | |
| | Equipment Handling Matrix | EA | 3 | | |
| | Surgical Field Display | EA | 6 | | |
| | Wall Mounted Display Unit | EA | 3 | | |
| | Surgical Lights (LED) | EA | 6 | | |
| | Equipment Management Boom | EA | 3 | | |
| | Camera Head | EA | 6 | | |
| | Camera Head (ENT) | EA | 1 | | |
| | Camera Control Unit/Video Processor | EA | 3 | | |
| | Electronic Endoflator Insufflation Device | EA | 3 | | |
| | Light Source | EA | 3 | | |
| TOTAL | | | | | |

Part 2 - OR Integration Equipment (Current)

Proponent must provide line-item detailed trade in / disposal value for the existing equipment at Prince County Hospital as indicated on Existing Equipment - Appendix C and section 2.1 Situation Overview of the Tender Document. Please do not leave any fields in Appendix E blank. Proponent must enter N/A for any responses the proponent can not provide.

| Item Number | Item Description | Pkg/Unit of Measure | Current Equipment | Net Cost of Item | Extended total |
|-------------|-----------------------------|---------------------|-------------------|------------------|----------------|
| | Camera Head | EA | 6 | | |
| | Camera Head (ENT) | EA | 1 | | |
| | Computer | EA | 3 | | |
| | Display Standard Definition | EA | 9 | | |
| | Video Processor | EA | 3 | | |
| | Laparoflator | EA | 3 | | |
| | Light Source | EA | 3 | | |
| | Surgical lights | EA | 6 | | |
| | Equipment Management Boom | EA | 3 | | |
| | | | | TOTAL | |

Part 3 - TRAINING, IMPLEMENTATION, DELIVERY, STORAGE, DISPOSAL

Proponents shall provide information on all levels of training, implementation, delivery for OR Integration Equipment system. Please do not leave any fields in Appendix E blank. Proponent must enter N/A for any responses the proponent can not provide.

| Item Number | Item Description | Pkg / Unit of Measure | Quantity of Purchase | Net Cost of Item | Extended total |
|-------------|-------------------------------------|-----------------------|----------------------|------------------|----------------|
| | Clinical Training - Users | EA | | | |
| | BioMed (Service) Training | EA | | | |
| | User Manuals [hard and soft copies] | EA | | | |
| | Technical and Service Manuals | EA | | | |
| | Implementation Services | EA | | | |
| | Installation | EA | | | |
| | Delivery | EA | | | |
| | Other | | | | |

Part 4 - SERVICE & RELATED SERVICE OPTIONS

Proponent to provide details of all available service arrangements between the manufacturer and Clinical Engineering. Include percentage discounts from list price per year with each option. Please do not leave any fields in Appendix E blank. Proponent must enter N/A for any responses the proponent can not provide.

| Item Number | Item Description | % Discount from List Price per Year | Annual cost per year | Extended Total |
|-------------|--------------------------|-------------------------------------|----------------------|----------------|
| | Full Service Agreement | | | |
| | Shared Service Agreement | | | |
| | Software Support | | | |
| | Software Upgrades | | | |
| | Other | | | |

Part 5 - WARRANTY

Proponents shall provide pricing on all standard and extended and lifetime warranties. Please do not leave any fields in Appendix E blank. Proponent must enter N/A for any responses the proponent can not provide.

| Item Number | Item Description | Number of Years | Net Cost per year | Extended Total |
|-------------|-------------------|-----------------|-------------------|----------------|
| | Standard Warranty | | | |
| | Extended Warranty | | | |
| | Lifetime Warranty | | | |
| | Other | | | |

Part 6 - SPARE/REPLACEMENT PARTS

Proponents shall provide a list of all replacement and spare parts with pricing. Please add additional rows, if required, to list all spare parts and replacement parts. Please do not leave any fields in Appendix E blank. Proponent must enter N/A for any responses the proponent can not provide.

| Item Number | Item Description | Unit of Purchase | Net Cost of Item |
|-------------|-------------------------|------------------|------------------|
| | Loaner Equipment | EA | |
| | Spare Replacement Parts | EA | |
| | Other | | |
| | | | |
| | | | |