April 23, 2018

To: All Potential Respondents

From: Julie Janssen, Purchasing Agent

Subject: RFP0318588020 Medical Imaging Equipment

**Addendum Three**

**Please amend the subject RFP to include answers to the following timely received questions:**

Q1. Do you currently have a PACS System? And if so what kind?

A1. Yes. The brand is ClearCanvas.

Q2. Why is there a request for a standalone PACS system, when most PACS systems are proprietary?

A2. The Iowa Office of the State Medical Examiner may be upgrading the PACS system.

Q3. How should we respond in the proposal if there is a proprietary PACS system with the Equipment?

A3. Respond with the information if the PACS system will be a standalone system stored on the servers of the Iowa Office of the State Medical Examiner or if the PACS system is stored on the Respondents cloud or server and the Iowa Office of the State Medical Examiner is paying for service.

Q4. What equipment are you using currently?

A2. Currently in use is a Siemens Mobilette XP Hybrid portable, an Agfa CR Cassette and reader, and a Siemens C-ARM.

Q5. How old is your current Equipment?

A3. The current equipment was purchased in 2005-2006.

Q6. Why are you looking for new equipment?

A4. The Iowa Office of the State Medical Examiner’s current medical imaging equipment is nearing the end of its life cycle. The current setup struggles to meet the imaging needs of the office. It does not offer the flexibility or full range of imaging necessary for their work. Examples include but are not limited to: the need for better quality diagnostic images for Pediatrics or cases that show evidence of possible abuse, more power for general imaging and locating artifact such as knife tips or bullets on bariatric cases up to 700-800 pounds, the need for flexibility on non-traditional imaging such as burn victims or trauma victims, and the ability to do a scan/fluoro scout or stitch images together. Capability to perform full body scans could be used in certain circumstances of family opposition to autopsy to document injuries thus obviating the need to perform full autopsy. Ability to scan/fluoro like upper GI and having subtraction capabilities is a plus.

Q7. What is the typical case load?

A5. The Iowa Office of the State Medical Examiner’s current case load is 800-850 cases per year. Around 33% of those cases require X-ray. On rare occasions, when there is family opposition to autopsy (only 1-2 cases a year), the Iowa Office of the State Medical Examiner relies on full body scans to document injury and pathology in lieu of an Autopsy. In the next few years, the case load has the potential to increase to 1000 cases per year.

Q8. What/Who is the radiologist that would be reviewing these images?

A6. The Iowa Office of the State Medical Examiner works with a Radiologist from the University of Iowa.

Q9. Who are these images seen by?

A7 The images are seen by the University of Iowa Radiologist, Law Enforcement, court, and county attorneys throughout the State of Iowa.

Q10. Are jpeg images sufficient?

A8. No, the Iowa Office of the State Medical Examiner has the need for both jpeg images and DICOM images. They currently store and send their images as DICOM Lossless when possible. These are sent in original DICOM form with viewing software. Depending on needs of professional consultants such as the Forensic Anthropologist or Forensic Odonatologist, images may be sent in both DICOM and Jpeg. Currently fluoroscopy being used for locating foreign objects or doing vertebral runs accounts for a small percentage of the radiography being performed, but when it is needed, it is needed.

Q11. Is refurbished Equipment acceptable?

A11. The Iowa Office of the State Medical Examiner is open to refurbished medical imaging equipment if it has a warranty that is equivalent to new.

Q12. Do you want a C-ARM (portable fluoroscopy unit) as part of the Proposal?

A12. No. Do not propose a C-ARM. The Iowa Office of the State Medical Examiner will be keeping their current C-ARM. They are looking more towards Radiography or Radiography/Fluoroscopy unit.

Q13. Where is the new medical imaging equipment going to be placed?

A13. The new medical imaging equipment will be placed in the existing X-Ray room.

Q14. Will Service plans be included in the Proposal?

A14. Yes.

Q15. Will the 1-7 years of Service Plan cost proposals requested in the RFP document be included in the original capital purchase as a lump sum?

A15. Yes - if offered by the respondent.

Q16. What are the business hours of the Office of the State Medical Examiner?

A16. The Iowa Office of the State Medical Examiner is currently staffed 24 hours a day, 7 days a week. Their typical business hours are 8:00 AM CT – 5:00 PM CT Monday - Saturday and on Sundays as needed.

Q17. What are the hours of service requested for service plans?

A17. Please include the hours of service ability in your proposal response for each level of service plan.

Q18. How many users will be trained on the new medical imaging equipment?

A18. The Iowa Office of the State Medical Examiner anticipates training for five (5) main users after the new medical imaging equipment is installed.

Q19. Are portables an option?

A19. The Iowa Office of the State Medical Examiner is open to looking at medical imaging equipment that is portable. The portable x-ray equipment must have digital capabilities and stitching capabilities.

Q20. If a respondent would like to offer more than one option for new medical imaging equipment how should they respond?

A20. Each respondent should offer separate technical and cost proposals for multiple medical imaging equipment options proposed from the respondent.

Q21. What kind of equipment layout is the Iowa Office of the State Medical Examiner looking for?

A21. Propose the typical layout required for the proposed equipment. Respondents are welcome to offer any alternative layout options.

Q22. Are there any stipulations regarding US Steel for the medical imaging equipment?

A22. No, there are currently no stipulations for US Steel in the RFP.

Q23. Will there be a timeline delay for the Physicist testing of radiation for the Office of the State Medical Examiner? When was it last tested?

A22. No, there should not be a timeline delay for the State of Iowa required Physicist testing of the room. It was last tested in 2005.

Q24. Are there requirements for lead-lined walls?

A24. Yes, but those requirements will be met by the Iowa Office of the State Medical Examiner.

Q25. Are the respondents required to share the medical imaging equipment scatter data in the proposal Response?

A25. Yes.

Q26. Are there any provisions for custom equipment?

A26. Not currently.

Q27. Is there a project timeline, install end date?

A27. There is no current timeline. The timeline will include time to bid out for construction.

Q28. If construction is necessary, what is the construction timeline?

A28. One to two months after the Intent to Award.

Q29. What electrical power is available?

A29. Up to 480 - 3 phase capable. Amps are open.

Q30. If the respondent utilizes a non 80K generator size, can they bid?

A30. They bid a non 80K generator size only if it involves propriety technology and if it does not change the image quality. Explanation and specifications will be required along with the proposed generator specified out separately. This generator shall be bid as a second line item on cost proposal along with 80K generator option.

Q31. Are there existing X-Ray warning lights for the existing room?

A31. No, the warning lights will be added at time of construction and or installation.

Q32. Are renovations available if necessary to fit the new proposed medical imaging equipment?

A32. Yes, the Iowa Office of the State Medical Examiner would consider renovation. There is a possibility to alter or remove the control room wall to open up room if necessary. Moving the control room to the dark room or making minor modification to the darkroom is a possibility. Completely removing the dark room wall to open up the room would be the last option due to construction costs. The current door is fixed, but able to be temporarily removed.

Q33. Can the wall be moved, to make dark room part of the existing room?

A33. It is possible if necessary. Completely removing the dark room wall to open up the room would be the last option due to construction costs.

Q34. Can we receive a copy of the existing room plans?

A34. See the attached plans.

Q35. Can the counter be moved?

A35. The counter may be moved if necessary (all or part), but the Office of the State Medical Examiner's preference would be to keep the counter where it is.

Q36. What kind of mount?

A36. Ceiling Mount is preferred, unistrut is a possibility.

Q37. What is not movable in the existing room?

A37. There is a requirement in the room layout for the current portable unit to be stored in the x-ray room or dark room. Available room for a large cart is necessary for moving decedents on to x-ray table and would also be needed when the machine is down for maintenance and repair.

Q38. How many Amps will be needed?

A38. 60 Amps to 100 Amps plus.

Q39. Is there anything below the autopsy room?

A39. Concrete.

Q40. How thick is the concrete below the room?

A40. The concrete is about 6 inches thick.

Q41. How are the images from the proposed medical imaging equipment used?

A41. On two 2-3 monitors in the autopsy room, monitors in the pathologist office, and remotely to read radiological imaging.

Q42. What is the best day and time for delivery?

A42. Tuesday through Saturday in the afternoons.

Q43. What are the credentials for Respondent workers?

A43. All respondent employees will be specifically escorted for unloading, delivery and work. All respondent employees will need a background check from their state of residence.

Q44. Is there a dock available at the facility?

A44. No.

**Please acknowledge receipt of this addendum by signing in the space provided below, and return this letter with your offer (do not send back separately).**

I hereby acknowledge receipt of this addendum.

Signature Date

Typed or Printed Name