

PURCHASING DEPARTMENT

دائرة المشتريات



Ref.: KD 18 – 23 Spectral CT Scan

Date: September 04, 2018

Invitation to BID

Purpose:

The American University of Beirut Medical Center invites proposals to bid for the following:

Item: Spectral CT Scan

QTY: 1 each

As per Specs – List attached

N.B: a - Items should be of U.S. origin and make and imported directly from the U.S.A. or any Trade Free Zone in a non-U.S. country of the free world.

b – Items should be covered by a valid approval letter from the Food and Drug Administration (FDA) Copy of the above documents should be included with your Technical Offer

Proposal Requirements:

1. Prices must be quoted in US \$ or Euro and include freight to Inwood, NY 11096
2. Proposal must mention the Gross weight, Gross Dimensions, and HS Code of the item(s).
3. Proposals must be inclusive of all expenses (unless otherwise specified in your proposal).
4. Prices should be quoted net of any discounts or allowances and exclusive of VAT
5. All proposal documents must be signed by an authorized representative of the supplier, each page must be initialed and the final page must be signed and dated.
6. Quotations related to above bid must be submitted in the following manner:
 - a. Technical Specs and related brochures (without prices) in one document.
 - b. Financial Proposal in a separate document
 - c. Failure to segregate technical file from financial file will lead to disqualification of supplier from the bid.

Submission Deadline Date and Venue:

Proposals must be submitted on or before: November 14, 2018 Monday to Friday: 9:00 a.m. till 1:00 p.m. to the following address:

By e mail to: medbids@aub.edu.lb (Please do NOT CC anyone)

Or as a hard copy to be delivered to the following address before the deadline:

American University of Beirut – Medical Center

KD 18 – 23 Spectral CT Scan

MAB Building, 6th Floor, Room 605

Souraty Street, Hamra

Beirut, Lebanon

No bids are accepted after the above mentioned date, in the event that AUB offices are officially closed on the date the proposals are due, the deadline for submission shall be automatically extended until the next business day

All Proposals shall be submitted in a sealed envelope carrying:

- a. Supplier's stamp
- b. Bid Reference
- c. Company's name

N.B: Bids submitted by fax or erroneously sent directly to Procurement department will not be considered or even acknowledged

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Suppliers Questions:

Inquiries related to specific parts of this RFP shall be addressed not later to Friday September 14, 2018

To: kd04@aub.edu.lb CC: ad44@aub.edu.lb

N.B.: Answers to the submitted questions will be communicated to all suppliers

Apology:

In case the requested items are not available, or you do not want to participate in this bid, you are kindly requested to respond by submitting a written apology indicating the reason and the bid reference number or you can send an apology by e-mail.

Payment:

AUB payment term is 100% "prepaid" (unless otherwise agreed upon).

Insufficient Data:

It is the responsibility of the person submitting the proposal to ensure the completeness of the information submitted. Failure to do so may result in the elimination of the proposal from consideration.

Costs:

The university will not be liable for any costs incurred by Suppliers for developing the proposal, performing presentations or demonstrations, and any other expenses incurred by the Suppliers before the award and contract signature

Disclosure:

Supplier represents and certifies that the offer has not been knowingly disclosed directly or indirectly to any competitor or AUB staff or other supplier before the opening of proposals by AUB. Supplier represent and certifies that the financial terms have been established independently without consultation, communication, or agreement for the purpose of restricting competition or any matter relating to such prices with any competitor or other supplier. Supplier represents and certifies that no attempt has been made to induce any other company or person to submit or not to submit a proposal in response to this RFP for the purpose of restricting competition.

Proposal award policy:

The University reserves the right to reject any or all proposals and to award this tender in whole or in part to the supplier or suppliers that, in its opinion, offers the most advantageous combination of cost, quality, service and other factors which in its sole discretion are deemed important to the University.

AUBMC may accept or reject any or all bids and shall not be required to provide justification for any such selection or rejection. AUBMC may also cancel this invitation to bid at any stage, whether before or after the selection of the successful bidder (but prior to signature of the contract) without having to provide any justification and without incurring any liability whatsoever as a result thereof.

Validity:

Proposals submitted shall be valid for at least 6 Months from the date of submission. Proposals will be treated as final and binding offers and may not be amended or withdrawn

Rania Mteirek
Director of Procurement, AUBMC
Cc. Medical bids / Internal Auditor

Required Specifications for:	Spectral CT Scan
FDA cleared, year / CE mark, year	Yes
Intended use	Spectral, Perfusion, Cardiac, Pediatric, Trauma, Neuro, General Radiology
GANTRY	
Geometry	To be specified
Detectors, type	To be specified
No. of rows	to be specified
Detector width, mm	to be specified, preferably ≥ 160 mm to cover the Heart in one beat
Reconstructed slice width options, mm	<0.625
Elements per row (Multi elements per row)	to be specified
No. of detection elements	>88000
Rotation times, sec., 360 degrees	between 0.20 & 0.30
Partial/Temporal Resolution	<0.2
X-ray fan beam angle, degrees	>48
Gantry tilt, degrees	to be specified
Gantry dimensions, H x W x D, cm	To be specified
Gantry weight, kg	To be specified
Gantry aperture, cm	>70
Scan localizer	Laser
X-RAY TUBE	
Number of X-ray Tubes	to be specified
X-ray tube anode	to be specified
Heat storage, HU	to be specified
Dissipation rate, HU/min	to be specified
Tube cooling	to be specified
Tube focal spot, mm	large 1.1 - 1.2 Small: 0.6-0.7
X-RAY GENERATOR	
kW output	>100
kVp range	70->140 KV
mA range	10 - >1000
SPIRAL SCANNING	
Max scan time, sec	>60 sec
Max scan volume, cm	>195
Spatial resolution, lp/cm	>20
Pitch	to be specified
Reconstruction time per image, sec	>33 images/sec
PATIENT TABLE	
Vertical, cm	to be specified

Longitudinal, cm	>200
Scannable range, cm	>200
Max load capacity with accuracy, kg	>250Kg

IMAGE RECONSTRUCTION	
Computer CPU	to be specified
Scan FOVs, cm	>50
Reconstruction matrices	512x512
Reconstruction time, sec	>33 images/sec
Per slice, sec	as low as 0.03
For localization scan	Real Time
DISPLAY	
Monitor size	Highest size available
Matrices, pixels	Medical Grade (highest Pixels Number)
Range of CT numbers	to be specified
Image enlargement	>8x
Max no. of slices displayed at once	to be specified
IMAGE STORAGE	
Hard disk, TB	Max TB available
No. online images	to be specified
Archival storage	to be specified
RADIATION DOSE	
Dose modulation technique	Must be available
Pediatric-specific dose control	Must be available
Prospective ECG gating	Must be available
Retrospective ECG	Must be available
Low-dose cardiac (axial acquisition)	Must be available
Iterative Reconstruction	Must be available
PERFORMANCE	
Min. interscan time, sec	to be specified
Dynamic scan rate	as low as 0.03
High-contrast spatial res.	>20
0% MTF, lp/cm	>20
Low-contrast resolution, mm at % at ≤ 4 rads	to be specified
Connectivity	
DICOM 3.0 interface	Must be available
HIS/RIS Interface	Must be available
MPPS	Must be available
Worklist	Must be available

<p>Other features</p>	<ul style="list-style-type: none"> - 4D imaging - Motion Correction Technology (Cardiac) - Low dose exposure - High resolution images - Low contrast , Noise free images - Fastest and most versatile scanning - Iterative Model Reconstruction - Fluoroscopy Technology - Spectral Imaging - Perfusion imaging (Neuro, Body) - Cardiac package - Virtual non contrast images - Automatic bone removal - Vessel Analysis - Colon scan - Lung noduls pos-processing - Liver segmentation - TAVI - Fusion (integration and registration) 						
<p>Application</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Radiation Dose Management</td> </tr> <tr> <td style="padding: 2px;">Routine Imaging Application</td> </tr> <tr> <td style="padding: 2px;">Cardiac Imaging Application</td> </tr> <tr> <td style="padding: 2px;">Pediatric imaging Application</td> </tr> <tr> <td style="padding: 2px;">Advanced Imaging Application</td> </tr> <tr> <td style="padding: 2px;">Dual Energy Application</td> </tr> </table>	Radiation Dose Management	Routine Imaging Application	Cardiac Imaging Application	Pediatric imaging Application	Advanced Imaging Application	Dual Energy Application
Radiation Dose Management							
Routine Imaging Application							
Cardiac Imaging Application							
Pediatric imaging Application							
Advanced Imaging Application							
Dual Energy Application							

Note : Workstation and software license to be added for Spectral imaging analysis
The supplier should provide the shielding calculation and the installation layouts
All options must be quoted and listed seperately

**AMERICAN UNIVERSITY OF BEIRUT
PRE-AGREEMENT PURCHASE EVALUATION FORM 1**

Rev.Oct. 2004

The successful bidder shall:

1. Within 10 working days, submit a complete set of:
 - a. operating manuals
 - b. training material,
 - c. circuit diagrams,
 - d. service / repair manuals,
 - e. service key,
 - f. diagnostic software,
 - g. and troubleshooting manual together with the preventive maintenance schedule and price list of spare parts & preventative maintenance supplies.
 - h. Warranty terms and conditions

2. Carry all the renovation work, install the support equipment and the medical equipment, commission and perform a full quality assurance test on the equipment before it is put in use.

3. During the warranty period, the Supplier shall perform the necessary preventative maintenance on the equipment during its warranty period and a complete inspection prior to the end of its warranty under the supervision of the University.

4. Secure a guarantee from the Manufacturer in writing that:
 - a. The Manufacturer will honor the purchase agreement directly or via an Authorized Distributor and will provide direct backup of after sales service for the equipment, if so requested by the University in case of serious problems/ change of local dealer.
 - b. The University shall not be constrained as to the source of spare parts and supplies needed to repair or operate the equipment.

5. In case of failure on the part of the Supplier to observe the above conditions the University may, at its sole discretion, hold the Supplier responsible and liable for any damages suffered by the University.

6. The warranty period shall commence when the University confirms in writing that the equipment has been satisfactorily installed and is fully operational in accordance with the University's specifications. During warranty, if the down time is less than the one guaranteed, the warranty will be extended. (Refer to attached AUBMC Service Contract)

7. It is understood that any proposal, offer or tender submitted by you is, inter alia, subject to the terms and conditions stated in here.

Your authorized signature appearing hereunder is in acknowledgment of the foregoing.

Supplier:

Signature:

Date:

**AMERICAN UNIVERSITY OF BEIRUT
PRE-AGREEMENT PURCHASE EVALUATION FORM 1**

Rev.Oct. 2004

For below section use a separate sheet if more than one item is quoted (including support equipment)

Price of Unit (s)
Cost of accessories Included
Proposed yearly payments to AUBMC

Service terms

<u>First year is covered by warranty</u>	<u>with Parts</u>	<u>Without Parts</u>
<u>Cost of Service Contract US\$(Yearly & over 2 years)</u>		
<u>Cost of Service Contract US\$ With First Line</u>		
<u>Work by AUBMC: (Yearly& over 2 years)</u>		
<u>On Call Hourly Rate:</u>		
<u>Guaranteed Up Time: 98 %</u>		
<u>Mean Time Between Failure:</u>	<u>Yes</u>	<u>No</u>
<u>Response Time for Spare Parts Delivery (Days) :</u>		
<u>Response Time For Parts Sent For Repair (Days):</u>		
<u>Warranty on Spare Parts Policy</u>		
<u>Warranty on Repairs Policy</u>		
<u>Exchange Policy for Spare Parts:</u>		
<u>Max %. Yearly Inflation Rate of Spare Parts:</u>	<u>{ outside service contract}</u>	

Other Terms

<u>Cost of Training for an Engineer:</u>	<u>Should be offered free</u>
<u>Cost of Training for a Medical Staff:</u>	<u>Should be offered free</u>
<u>Upgrade Policy/ (Software & Hardware) Included</u>	<u>Yes</u> <u>No</u>

Your authorized signature appearing hereunder is in acknowledgment of the foregoing.

Supplier:

Signature:

Date:

**AMERICAN UNIVERSITY OF BEIRUT
PRE-AGREEMENT PURCHASE EVALUATION FORM 2**

Rev.Oct. 2004

Contact: _____
Address: _____
Tel: _____ Fax: _____ E-mail: _____

For below section use a separate sheet if more than one item is quoted (including support equipment)

Equipment: _____
Year of First Introduction to Market: _____
Year Production Will Stop: _____
Spare Parts Will Be Available Till (Date): _____
Warranty Period: _____
Response Time of Mother Company: _____
Spare Parts Will Be Available in Lebanon: _____
Evaluation of Third Party Included: _____
Comparison To Competitors Included: _____
Technical Specifications Included: _____
Documentation of Needed P.M./Time: _____
Documentation of Needed Calibration / Time: _____

<u>Site Plans Included</u>	<u>Yes</u>	<u>No</u>
<u>References:</u>	<u>Foreign</u>	<u>Local</u>
		<u>None</u>

IMPORTANT

1. Make sure to match the specifications of the unit you are proposing with the specification sheet (if supplied).
2. If, after installation, the equipment does not perform to the satisfaction of the University, it shall be replaced at no charge to the University.
3. In case of delay in delivering, installing and/or commissioning the machine, the University may, at its sole discretion, decide to either cancel the Purchase at the entire responsibility of the Vendor or Purchase another unit from others with the Vendor held liable for any difference in price or damages sustained by the AUB as a result of such delay.

Your authorized signature appearing hereunder is in acknowledgment of the foregoing.

Supplier:

Signature:

Date:

