

RETURN BIDS TO:
RETOURNER LES SOUMISSIONS À:
Bid Receiving - PWGSC / Réception des soumissions -
TPSGC
11 Laurier St./ 11 rue, Laurier
Place du Portage, Phase III
Core 0A1 / Noyau 0A1
Gatineau, Québec K1A 0S5
Bid Fax: (819) 997-9776

SOLICITATION AMENDMENT
MODIFICATION DE L'INVITATION

The referenced document is hereby revised; unless otherwise indicated, all other terms and conditions of the Solicitation remain the same.

Ce document est par la présente révisé; sauf indication contraire, les modalités de l'invitation demeurent les mêmes.

Comments - Commentaires

Vendor/Firm Name and Address
Raison sociale et adresse du
fournisseur/de l'entrepreneur

Issuing Office - Bureau de distribution
Scientific, Medical and Photographic Division /
Division de l'équipement scientifique, des produits
photographiques et pharmaceutiques
11 Laurier St./ 11 rue, Laurier
6B1, Place du Portage
Gatineau, Québec K1A 0S5

Title - Sujet PHARMACY PRESCRIPTION DISPENSER	
Solicitation No. - N° de l'invitation W3931-130234/A	Amendment No. - N° modif. 001
Client Reference No. - N° de référence du client W3931-130234	Date 2013-07-03
GETS Reference No. - N° de référence de SEAG PW-\$\$PV-941-62836	
File No. - N° de dossier pv941.W3931-130234	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2013-08-15	
Time Zone Fuseau horaire Eastern Daylight Saving Time EDT	
F.O.B. - F.A.B.	
Plant-Usine: <input type="checkbox"/> Destination: <input checked="" type="checkbox"/> Other-Autre: <input type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: Martins, Christina	Buyer Id - Id de l'acheteur pv941
Telephone No. - N° de téléphone (819) 956-6911 ()	FAX No. - N° de FAX (819) 956-3814
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction: CENTRAL MEDICAL EQUIPMENT DEPOT 105 MONTGOMERY RD, BLDG BB104A OTTAWA ON K8H 2X3 ATTN: RECEIPTS SUPERVISOR	

Instructions: See Herein

Instructions: Voir aux présentes

Delivery Required - Livraison exigée	Delivery Offered - Livraison proposée
Vendor/Firm Name and Address Raison sociale et adresse du fournisseur/de l'entrepreneur	
Telephone No. - N° de téléphone Facsimile No. - N° de télécopieur	
Name and title of person authorized to sign on behalf of Vendor/Firm (type or print) Nom et titre de la personne autorisée à signer au nom du fournisseur/ de l'entrepreneur (taper ou écrire en caractères d'imprimerie)	
Signature	Date

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W3931-130234

Amd. No. - N° de la modif.

001

File No. - N° du dossier

pv941W3931-130234

Buyer ID - Id de l'acheteur

pv941

CCC No./N° CCC - FMS No/ N° VME

Amendment 001 has been raised to extend the closing date, revise the Delivery Destination and answer questions pertaining to the requirement.

Closing Date:

The solicitation closing date is hereby extended from July 15, 2013 to August 15, 2013 at 02:00PM EDT.

Delete:

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CENTRAL MEDICAL EQUIPMENT DEPOT
105 MONTGOMERY RD, BLDG BB104A
OTTAWA ON K8H 2X3
ATTN: RECEIPTS SUPERVISOR

Insert:

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101 Colonel By
Ottawa, ON
K1A 0K2

Q1./ Is the Pharmacy Prescription Dispenser completely automated-requiring no staff at all (ATM style machine) or is the system going into a pharmacy that would have staff working with the unit, ie: the machine would count into a vial, apply a label and then the staff would pass the filled prescription to a pharmacist to have it checked.

A1./ The unit will be stand-alone and not in a pharmacy.

Q2: For purposes of installation, technical support and training, the one-year rental will be located where?

A2./ The location will be in Ottawa. Specifically, 101 Colonel By in Ottawa.

Q3./ Is there a possibility that after the one-year rental period, you will wish to continue to rent the dispenser and if so, for what period of time until the equipment has been paid in full?

A3./ It should only be one year for rental to determine if this works as expected in a real-life environment. If it proves positive, then we would want to procure afterwards.

Q4./ Once again, for purposes of installation, technical support and training, the 16 other dispensers (option to purchase) will be located where?

A4./ Again, depending the outcome of the one year rental, we would potentially have units in the following locations: Ottawa (2nd unit), Halifax, Valcartier, Petawawa, Edmonton, Esquimalt, St-Jean, Borden, Gagetown, and potentially other bases across Canada.

Q5./ Before delivery and installation, there is an implementation process to be carried out which includes interfacing our technology with the site's technology, as well as configuration of the medications to be placed in the dispenser. On average, the process can take up to 3 months depending on the availability of

the client and the complexity of its IT system. As delivery of the dispenser is requested for September 4, 2013 (less than 3 months from now), will the timeframe for the implementation process be acceptable?

A5./ Yes.

Q6./ Please describe the five (5) users that we would be training. For users who will simply be utilizing the dispenser, we generally provide a more in-depth training to several "Super Users" in a "Train-the-Trainer" format, who then go on to train the rest of the users.

A6./ These would be either pharmacists or pharmacy techs, both of who will be using the machine. If needed, as a super user they could train a driver to fill the machine.

Q7./ Please describe the person(s) that will be in charge of stocking the dispenser. Generally, in a hospital setting, this is the task of a pharmacist or pharmacy technician under the pharmacist's supervision.

A7./ A pharmacist will be in charge. A non-medical person may be used to refill the machine, potentially a military driver who will be bringing the medications to the machine.

Q8./ Please confirm whether a pharmacist will have access and what his role will be regarding the dispenser. Moreover, is it an outside contract (i.e. the pharmacist arrives once a week for replenishment and prescription renewals).

A8./ A pharmacist will be in charge and the filling of the prescriptions will be done at the pharmacy but potentially a driver could be the person putting the filled prescriptions into the machine. These will be DND employees.

Q9./ Please confirm whether a doctor or nurse will have access and what their role will be regarding the dispenser. Moreover, is it an outside contract or are they military personnel?

A9./ No, a doctor or nurse will not need access. Only DND will have access.

Q10./ Please describe how the dispenser will be used. For example, is it for prescriptions for military personnel on base to obtain their prescriptions from the dispenser themselves? If not, please elaborate.

A10./ It will be used for prescription refills for military personnel.

Q11./ Once again, for purposes of regional technical support, please indicate where the dispenser will be installed.

A11./ The location will be in Ottawa. Specifically, 101 Colonel By in Ottawa.

Q12: You state that the dispenser must have a minimum of 300 prescription storage compartments. Is the purpose of this so that each patient's medications can be found in one compartment? Or, do you have 300 different medications? Please elaborate.

A12./ Each compartment will be for one patient. Each compartment could contain more than one medication for the same patient. Potentially, if a patient has many prescriptions and they do not fit inside one compartment, the use of additional compartment(s) for the same patient could happen.

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Q13./ How often do they intend to restock the unit? Once a week? Every two weeks? Once a month?

A13./ It's hard to answer these questions as it's contingent on who will be using the machines and how large the prescriptions are. This will vary immensely from day to day and how soon people come in for their refills. The machine will be restocked when the patients come in to pick up their refills from the machine and I cannot give a specific timing for that.

Q14./ Could we have a list of the medications that will be stocked in this first unit as follows? Straight list of all medications with an indication of how many patients are taking that medication and how often. (i.e. once a day, 3 times a day, etc.)

A14./ The machine is not intended to store medication waiting to be filled. The process involves having the patient first request their refill to the pharmacy, which in turn will prepare the prescription(s) and have them delivered to the machine. The machine will not count medication or label the medication containers.

ALL OTHER TERMS AND CONDITIONS IN THE RFP REMAIN UNCHANGED.