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**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
Public Works and Government Services Canada
Ontario Region
33 City Centre Drive
Suite 480
Mississauga
Ontario
L5B 2N5

Title - Sujet Human Mannequin Simulators	
Solicitation No. - N° de l'invitation W6369-16A044/A	Amendment No. - N° modif. 002
Client Reference No. - N° de référence du client W6369-16A044	Date 2017-07-28
GETS Reference No. - N° de référence de SEAG PW-\$TOR-011-7318	
File No. - N° de dossier TOR-7-40016 (011)	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2017-08-09	
Time Zone Fuseau horaire Eastern Daylight Saving Time EDT	
F.O.B. - F.A.B. Plant-Usine: <input type="checkbox"/> Destination: <input type="checkbox"/> Other-Autre: <input type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: Kane, Rachel	Buyer Id - Id de l'acheteur tor011
Telephone No. - N° de téléphone (905) 615-2467 ()	FAX No. - N° de FAX (905) 615-2060
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction:	

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

SOLICITATION AMENDMENT No. 002

This solicitation amendment No. 002 is raised to:

- 1) publish questions and answers that have been received in relation to this solicitation;

- 1) The following Questions and Answers have been provided:

QUESTION 1:

M5.4 (Page 9) – Bronchial occlusion –can do tongue edema, pharyngeal swelling and laryngospasm. Is this enough to meet the requirement?

ANSWER 1:

The mannequin must have the ability to reproduce a partial and/or complete bronchial spasm (ie Asthma; edema...). We will accept a mannequin which simulates the condition through sound.

QUESTION 2:

Is a product demonstration required?

ANSWER 2:

No, a product demonstration in not required.

QUESTION 3:

“Drug Recognition” is noted as a requirement as part of General Characteristics in Annex A under 3.1.4 (d); however, it is not mentioned in 4.1 Mandatory Technical Criteria. Can you please confirm is this is a requirement?

ANSWER 3:

We have pulled out some mandatories to be in the evaluation criteria, thus that is why there are some similarities. The evaluation criteria is what your bid we will evaluated on and used for evaluation purposed. For the mandatories, by submitting a bid you are indicating that your proposed requirement meets all the mandatories but they are not used by the evaluation team.

QUESTION 4:

When responding with Technical information, which list do we use for our response: Pages 8-11 Mandatory or 20-27 for General Characteristics?

ANSWER 4:

You must demonstrate that your proposed unit meets both the requirements and the evaluation criteria. The evaluation criteria will be the only portion that will be evaluated by our team of evaluators and required for the technical bid. By submitting a bid, you are indicating that your proposed unit is compliant with all the mandatories as well.

QUESTION 5:

In Appendix 2 to Annex A, a firm requirement of 8 training opportunities are identified: 4 in English, 4 in French. Does this mean 8 X 4 day operator training sessions? Or does this mean 8 X ½ day operator training sessions?

ANSWER 5:

This means that there are 8 operator trainings, 4 in English and 4 in French.

QUESTION 6:

For question 3, since this does not meet the requirement, what will your team accept as a minimum for Bronchial Occlusion?

ANSWER 6:

The mannequin must have the ability to reproduce a partial and/or complete bronchial spasm (ie Asthma; edema...). DND would prefer a mannequin which can produce the physiological condition mechanically but are willing to accept a mannequin which simulates the condition through sound.

QUESTION 7:

Is there a need for an Audio Video capture system for In Situ/mobile field training?

ANSWER 7:

No, there is no need.

QUESTION 8

Is your training going to require Pre-Validated programmed scenarios?

ANSWER 8

No, the training will not require Pre-Validated programmed scenarios.

QUESTION 9

Is a Rugged Carry Case for both the operating tablet and patient monitor more suitable than the requested "soft carrying case" as stated in Section 6 line (c) page 24?

ANSWER 9

A Rugged case is acceptable.

QUESTION 10

M5.2 Bilateral and unilateral chest rise and fall, normal and abnormal anterior and posterior breath sounds. The lungs are independently controlled and synchronised with the sound. The sounds are 4 quadrants, only anterior. Is this sufficient?

ANSWER 10

No. We require posterior sounds as well.

QUESTION 11

M5.3 Cyanosis, bilateral needle thoracentesis, unilateral and lobar chest sounds, bilateral chest tube insertion. For bilateral needle thoracentesis: two pneumothorax decompression sites on the 5th ICS and also two hemothorax sites to practice chest tube insertion. Is this sufficient?

ANSWER 11:

No, we require bilateral needle thoracentesis at the 2nd Intercostal Space in order to train in accordance with our approved medical directives. Two hemothorax sites for chest tube insertion at the 5th Intercostal Space is acceptable.

QUESTION 12:

M5.4 Bronchial occlusion can be simulated by combining: adjusting the volume or turning off independently the lung(s) and/or using the respiratory sound library (include normal, wheezing, inspiratory squeaks, crackles, and rales). Is this sufficient?

ANSWER 12:

Yes, this is acceptable.

QUESTION 13:

M12.1 Peripheral IV cannulation in both upper and lower extremities. The IV veins of our simulator are antecubital, lower arm veins and dorsal veins of the hand. Is this sufficient?

ANSWER 13:

Yes, this is acceptable.

QUESTION 14:

3.1.1 (b) Must have disarticulation of major joints: hips, knees, ankles, shoulders, elbows, and wrists. Limbs are removable (for exchange and replacement). Is this sufficient?

ANSWER 14:

No, we need to have the capability to recreate partial and/or complete amputation or deformities at different levels.

QUESTION 15:

3.1.4 (d) Drug recognition capability

- a. The option we can offer is a profile loaded with a drug library of medications. It is an intuitive interface that generates vital signs in real time in response to virtually applied medications that change the simulator's conditions to mimic real clinical situations. Is this sufficient?
- b. This is an additional option for our simulator. It can be included in the price, but we want to confirm as this does not appear in the mandatory specifications.

ANSWER 15:

It is acceptable to have a drug library that generates mannequin responses to the drugs, as long as the library is not restricted to a specific patient profile or scenario. It is also acceptable to have a system that uses wireless or RFI tags to simulate the administration of medications through syringes etc. The requirement to have drug recognition software is listed in 3.1.4.(d) of Annex A, Statement of Requirement.

QUESTION 16:

6. (i) Detachable sling for the included laptop or tablet. The tablet comes with a protective bump case which has a handle. Is this sufficient?

ANSWER 16:

Yes, this is acceptable.

QUESTION 17:

3.1.6 (g) The included laptop or tablet must communicate with the HMS mannequin utilizing 802.11 communications protocols. Our mannequin uses radio frequency (RF) communication. Our mannequin chose this instead of WiFi (802.11) as it is more reliable and can communicate effectively at distances up to 900 ft. Is this sufficient?

Solicitation No. - N° de l'invitation

W6369-16A044/A

Client Ref. No. - N° de réf. du client

W6369-16A044

Amd. No. - N° de la modif.

002

File No. - N° du dossier

TOR-7-40016

Buyer ID - Id de l'acheteur

tor011

CCC No./N° CCC - FMS No./N° VME

ANSWER 17:

Yes, this is acceptable.

QUESTION 18:

3.2 (b) airway resistance- Our proposed mannequin can simulate resistance by turning off independently the lung, adjusting volumes, tongue edema, laryngospasm, pharyngeal swelling. Is this sufficient?

ANSWER 18:

Yes, this is acceptable as long as the combined effect alerts the trainee that the mannequin is not ventilating well and cannot be confused with tracheal resistance.

QUESTION 19:

3.8 (a) interchangeable male and female genitalia

Our proposed model does not have female genitalia specifically, however the male genitalia can be removed to simulate a female genitalia. Is this sufficient?

ANSWER 19:

No, we require the ability to practice both male and female urinary catheterisation.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED