



RETURN BIDS TO:

RETOURNER LES SOUMISSIONS À:

Travaux publics et Services gouvernementaux
Canada

Voir dans le document/

See herein

NA

Québec

NA

**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

Travaux publics et Services gouvernementaux Canada
Place Bonaventure, portail Sud-Oue
800, rue de La Gauchetière Ouest
7^e étage, suite 7300
Montréal
Québec
H5A 1L6

Title - Sujet Portable bladder volume scan device	
Solicitation No. - N° de l'invitation 21301-223983/A	Amendment No. - N° modif. 001
Client Reference No. - N° de référence du client 21301-223983	Date 2021-06-07
GETS Reference No. - N° de référence de SEAG PW-SMTA-030-16178	
File No. - N° de dossier MTA-1-44012 (030)	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM Eastern Daylight Saving Time EDT on - le 2021-06-14 Heure Avancée de l'Est HAE	
F.O.B. - F.A.B. Specified Herein - Précisé dans les présentes Plant-Usine: <input type="checkbox"/> Destination: <input type="checkbox"/> Other-Autre: <input checked="" type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: Pommet, Bruno André	Buyer Id - Id de l'acheteur mta030
Telephone No. - N° de téléphone (514) 702-9582 ()	FAX No. - N° de FAX () -
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

AMENDMENT 001:

This amendment is to publish a question & answer related to the Requirement, to modify the Requirement and to extend the solicitation closing date.

New closing date: Monday June 14, 2021, at 02:00pm (EDT).

Question 1: Does a 2D system with HD quality is acceptable? (Ref. Annex A – 1.9)

Answer 1: No. Criterion 1.9 remains as is.

DELETE:

Annex “Requirement”

1.0 MANDATORY TECHNICAL CRITERION

- 1.7 The devise must operate on an intern battery with power cord and/or adapter (minimal battery autonomy: 5 hours).

INSERT:

Annex “Requirement”

1.0 MANDATORY TECHNICAL CRITERION

- 1.7 The devise must operate on an intern battery with power cord and/or adapter (minimal battery autonomy: 1 hour).

3.0 DELIVERABLES

- 3.5 2 batteries must be provided with the device.

DELETE:

Annex “Mandatory Technical Criteria”

No.	Mandatory technical Criteria (Ref.: Annex REQUIREMENT)	Please specify where these technical criteria are demonstrated within your technical bid. (Page-s #, section-s # or title-s and/or document's title).
1.1	Non-invasive measurements with probe. (Volume range: 0 - 1000ml or more);	
1.2	Scan angle: $180^{\circ} \pm 2^{\circ}$ – Wipe-angle: $120^{\circ} \pm 2^{\circ}$;	
1.3	Review of scanned bladder images;	
1.4	Color touch screen, minimal size of 6.5”;	
1.5	The device must be portable and must not exceed 2.5 pounds;	
1.6	Integral printer for immediate printing of results;	
1.7	The devise must operate on an intern battery with power cord and/or adapter (minimal battery autonomy: 5 hours);	
1.8	The device with tablet style must give the scan results within seconds;	
1.9	A 3D ultrasound probe of 2.6 MHz must be included with the device;	

INSERT:

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N° de la modif - Amd. No.
001
File No. - N° du dossier
MTA-1-44012

Id de l'acheteur - Buyer ID
MTA030
N° CCC / CCC No./ N° VME - FMS

DELETE:

Annex "Basis of Payment"

Item	Item description	Quantity	Price *
1	Portable device that measures bladder volume with probe.	1	_____ \$
2	Deliverables : - 1 Rolling cart - 1 Ultrasound gel container of at least 250 ml - 1 Box of 6 thermal paper rolls for the printer - 1 Instructions manual in French and English, hard copy and/or electronic version.	Lot	_____ \$
3	Shipping costs including packaging, shipping costs, freight and insurance, up to the stated point of delivery.	1	_____ \$
4	Installation and commissioning.	1	_____ \$
5	Preventive maintenance program of 5 years.	1	_____ \$
6	Training approximately of 1h.	1	_____ \$
TOTAL			_____ \$*

***Currency (if other than \$ CAD):** _____

***Customs Duties included.**

***Plus applicable taxes.**

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OPTIONAL GOOD: Purchase option valid until March 31, 2023.

Item	Item description	Quantity	Price *
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***Currency (if other than \$ CAD):** _____

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***Plus applicable taxes.**

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME.