# RFP# 31143 Questions - LEASED SURGICAL VIDEO IMAGING SYSTEMS

1. What format would you like the lease presented in? Monthly payment? Yes Monthly payments. The RFP is also asking for a purchase option as well. Page 18 of the RFP
2. Page 18, section 8, point 2, request to provide supporting documentation; Will DFUs that have been approved by the FDA with page, paragraph, and description highlighted fulfill the request for supporting documentation? I don’t see an issue with utilizing the documentation from the FDA. However, this documentation is also shared with end users. I encourage you to also provide user-friendly documents for clinical staff’s quick review.
3. Page 4, Section A-5, Regarding Preference to MO firm? How is this considered during the RFP review? Do you have documentation for the Missouri firm that confirms this is a regular place of business? If so, respond with this documentation. It carries some weight.
4. Page 18 section 8, point 1, sub point 2 “Future development” For our future platform that is not currently approved by the FDA, that your surgeons are aware of and saw at AAOS, we will plan to provide a detailed description and estimated release date via PDF, does that work? Only respond with equipment that is currently available in the market and approved by the FDA.

# Page 18, section 8, point 3, supplier must integrate with current imaging platforms. This was shown during our last business review. What documentation would you like us to provide? Live video? The submission of the video will be helpful, however if there is documentation as well, please submit this too.

# We heard in passing from a competitive source, that there has been mention of a separate integration RFP. Since integration is not spelled out in this RFP, will there be an integration RFP, separate from the imaging hardware components on this document? Arthrex currently provides integration at MOI and includes direct to the MUHC network via Oracle/Cerner including our mobile towers at UMH/WCH/MOI There is not a separate RFP for integration. Any integration required for new rooms will need to have all remodeling and site preparation requirements, and cost stated. Suppliers must integrate with current imaging platforms that are in place today.

# Page 18, section 8, point 2 sub point 2-3 re: instrument tracking active vs. semi-active. Can you please provide a current system or brand name and an example of this request? There are three types of Instrument utilization. Passive, Semi-active, and active. Most cases passive is the normal form devices are intended to be utilized. Passive is mechanical or optical, a surgeon, nurse or Tech manipulates said equipment. Semi-Active help guide the physician visually or mechanically during utilization of equipment. Active is the system performs on its own for the planned procedure. A good example of an item that is semi-Active is RF systems where there is metal proximity sensors that respond to scope or metal and suspend the power when in close proximity.

1. Page 18 section 8 point 2, sub-point 4, “System configurations” our DFU show configuration capability, will this fill this request? The DFU will is acceptable for the System configurations. If there is a need for additional configurations through the review process, these will be requested.
2. Can additional details be provided about proposal meetings? Will proposal meetings be conducted with each department/facility and clinical teams, in addition to administration?

Internal meetings will be held with stakeholders. If additional meetings are needed after the initial review these will be scheduled.

1. Are clinical evaluations planned within RFP assessment and decision?

This is contingent on the direction the stakeholders propose are the best next steps.

1. Are onsite service technicians being considered? (Page 18, under the pricing section, cost for case support after implementation and training)

If onsite service technicians are how Karl Storz approaches case support after implementation and training, that will need to be included in the RFP.

1. Please provide any additional detail on integrating with current imaging platforms (noted on page 18 under facility/support heading)

Current imaging platforms are Arthrex, Stryker and Karl Storz. The product being proposed will need to be able to connect and work with existing platforms that are utilized that are in place today. These systems that are in place today are in Appendix A that are being crossed.

1. What will be the process and timeline assessing RFP proposals?

Proposals will take 2 months to work through, discuss, and for the next steps to be provided.

1. The existing leases do not expire by December.  Is the University looking to upgrade that equipment as well?

Karl Storz should present how they foresee replacing the current leases and competitive leases that are in place today for all facilities. If that includes upgrades those will need to be included in the proposal. The crosses of what is currently in place are in Appendix A

1. What is the asset list for each facility the University is looking for equipment-wise?

Is Karl Storz referring to MUHC’s owned equipment outside of the leases? This RFP is intended to replace the current leased systems. When a vendor is awarded the RFP, deeper discussions can be had if other equipment will need to be replaced. However, the systems being proposed need to work with the current Arthrex, Stryker and Karl Storz that are in place today.

1. Is there other equipment that you would like added to the leases from other vendors?  If so what type of equipment and what is the value?

This RFP is intended to replace the current leased systems. Refer to Appendix A for items that are being crossed.