



Request for Written Quotes

Solicitation:	PTC-334 Portable CVT Ultrasound System
Date Issued:	11/30/2023
Procurement Officer:	Brian K. McKenna
Phone:	864-941-8314
E-Mail Address:	mckenna.b@ptc.edu
Mailing Address:	Piedmont Technical College Procurement Office – 195A PO Box 1467 Greenwood, SC 29648

DESCRIPTION: **Laptop Portable Cardiovascular Ultrasound System with 2D Imaging Technology for both Echo and Vascular Exams**

USING DEPARTMENT UNIT: **Cardiovascular Technology**

The Term "Offer" Means Your "Bid" or "Proposal." Solicitation Number & Opening Date must appear on your quote.

SUBMIT OFFER BY (Opening Date/Time): 12/14/2023 2:00 PM (See "Deadline for Submission of Offer" provision)

QUESTIONS MUST BE RECEIVED BY: **12/07/2023 10:00 AM** (See "Questions from Offerors" provision)

NUMBER OF COPIES TO BE SUBMITTED: **ONE (1) copy to be emailed to mckenna.b@ptc.edu**

By submitting a quote, you agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of thirty (30) calendar days after the Opening Date. (See "Signing Your Offer" and "Electronic Signature" provisions.)

Written quotes must be received by **December 14, 2023, at 2:00pm EST**. Offerors must submit a Supplier Classification form (included in this document) and a current W9 with their offer. Products should meet or exceed the specifications below for quotes to be accepted. By submitting an offer, you are confirming that your product meets or exceeds the specifications in this document.

Pursuant to Section 19-445.2141. of the SC Consolidated Procurement Code, Piedmont Technical College is accepting bids from qualified suppliers for the purchase of **ONE (1) Laptop Portable Cardiovascular Ultrasound System with 2D Imaging Technology for both Echo and Vascular Exams**. Systems must offer the following technology:

Cardiovascular Ultrasound System: Qty (1)

- 2D and 4D echo capabilities with transthoracic scanning capabilities with programmable and flexible software beamforming technology, cSound, provides exceptional power compared to that of traditional ultrasound systems.
- In 2D it offers True Confocal Imaging (TCI) without focal zones or sacrifice of frame rate and spatial resolution, in addition to Adaptive Contrast Enhancement (ACE).
- **AI Auto Measure.** With the power of AI, the manual caliper measurements can be completed with 3 clicks: Freeze – Measure – Auto. A full set of reproducible measurements will instantly appear on the screen. Enables fewer manual interactions by automatically opening the appropriate measurement tool.
- **Automated Function Imaging (AFI 3.0).** Allows comprehensive assessment at a glance by combining three apical longitudinal views into one comprehensive bull's eye view. Simplified and flexible workflow with fully automated ROI tracing (if configured), adaptive ROI width and combined display of traces from all segments.
- **Cardiac Auto Doppler.** Offers Doppler measurement in multiple cardiac cycles as recommended by guidelines for irregular heart rhythms.
- **Blood Flow Imaging.** Combines color Doppler with grayscale speckle imaging. Helps improve delineation of blood flow without bleeding into tissue or vessel wall.
- **Scan Assist Pro.** Customizable automations that assist the user through each step of the scan. Helps enhance consistency and reduce keystrokes.
- 15.6" ultra-high-resolution, wide format, color screen.
- Multi-touch LCD technology allowing double-click, pinch[1]to-zoom, and swipe to adjust and browse.
- Ultra-lightweight (11.5lb./5.2 Kg.)
- Sealed user interface allows fast and easy cleaning.
- Glass trackpad allows click-to-set and 2-finger gestures to adjust gain and depth.

2D transthoracic probe: Qty (1)

- Matrix Phased Array probe transducer technology
- Innovative combination of advanced materials and acoustic design
- Ultra-wide bandwidth and superb image quality.
- Applications including Cardiac, Pediatrics, Fetal Heart, Abdominal, Coronary, Transcranial, Contrast, and Stress Echo.

2D vascular linear Probe: Qty: (1)

- Wideband linear array probe

Non-Imaging Pencil probe Qty (1)

- Pedoff probe

2D vascular convex Probe Qty: (1)

- Wideband convex array probe

Three (3) days of onsite Clinical Applications training: Qty: (1)

Raw Data image platform: Qty: (1)

- Format that enables the user to take advantage of all the raw acoustical data collected during an ultrasound exam.
- Enable users to post process on saved images in the following manner:
- Change base lines
- Change gains
- Zoom in and zoom out on all images
- Produce M-mode on 2D images after acquisition
- Store in DICOM format when required.

Portable cart to house the CV ultrasound laptop unit: Qty: (1)

Purchase Order from Piedmont Technical College is required for order placement. No supplies or services are to be furnished under this RFQ without the issuance of a purchase order.

Delivery will be to Piedmont Technical College, 620 N. Emerald Rd., Greenwood, SC 29646

System must be delivered to PTC no later than June 28, 2024. Payment will be made within thirty (30) days after receipt of all items and a valid invoice.

Business name and contact information must be included on the quote. Please email quotes to mckenna.b@ptc.edu

Any questions can be emailed to: mckenna.b@ptc.edu no later than 12/07/2023 at 10:00 AM.



SUPPLIER CLASSIFICATION FORM

Company Name:		Phone: ()
Address:		
City:	State:	Zip Code:
Contact Person:	Title:	Phone: ()
Company Email Address:		
Principal Product/Service:		I am <input type="checkbox"/> am not <input type="checkbox"/> a current supplier.

Complete below to identify and certify your company qualifies as Large, Small, Women or Minority owned:
(Check only those that apply):

- ☐ **Large Business Concern** – A Major Corporation with more than 500 employees.
- ☐ **Small Business Concern** – A business concern, including its affiliates, independently owned and operated which is not dominant in the field of operation and which meets Small Business Administration standards as to the number of its employees and/or dollar volume of its business. (Generally under 500 employees)
- ☐ **Minority Business Concern** – A business at least 51% of which is owned (or, in the case of publicly owned businesses, at least 51% of the stock of which is owned) by one or more minority individuals or other individuals found to be economically and socially disadvantaged as established by the South Carolina's Division of Small and Minority Business Contracting and Certification (SMBCC) and whose management and daily operation are controlled by such individuals. **Check all appropriate boxes below:**
- | | |
|---|---------------------------------|
| <input type="checkbox"/> African American | <input type="checkbox"/> Female |
| <input type="checkbox"/> Hispanic American | <input type="checkbox"/> Male |
| <input type="checkbox"/> Asian-Pacific American | |
| <input type="checkbox"/> Native American (American Indian, Eskimo, Aleut) | |
- ☐ **Women Owned Business Concern** – A business that is at least 51% owned by a non-minority woman who controls the daily management.
- ☐ **Veteran Owned** – A business at least 51% of which is owned (or, in the case of publicly owned businesses, at least 51% of the stock of which is owned) by one or more Veterans.

CERTIFICATION STATUS:

- ☐ My company is certified by an authorized agency (attach copy).

Signature of Preparer

Printed Name of Preparer

Date

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ►

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.