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Your letter of	
Our reference	HC/RESER/CT/TA/02-2026-2027/PIMS
Date	June 12, 2026

**Project Director,
PIMS Hospital,
Sector G-8/3, Islamabad**

SUBJECT: GREVEINCES AGAINST THE TENDER SPECIFICATION PROCUREMENT OF HIGH END CT SCAN SYSTEM FOR TENDER NOTICE NO. 02/2026-2027 WHICH WILL BE DUE ON 18.06.2026

Dear Sir

We would like to thank you for issuing the tender documents for the procurement of high end CT scan Systems.

After carefully reviewing the tender documents, we have observed that certain technical tender specifications of the high end CT scan System appear to be restrictive and may limit broader participation. In the interest of promoting fair and healthy competition among qualified manufacturers and suppliers, we respectfully request that the technical specifications be reviewed and revised. Our reservations and suggestions are enclosed here with as **Annexure-A**

We believe that revising these specifications will encourage wider participation, provide the procuring authority with a broader range of technologically advanced solutions, and ensure greater value and competitiveness in the tender process.

We would also like to highlight that Siemens Healthineers is one of the leading manufacturers of high end CT Scan systems worldwide with a significant market presence and one of the largest installed bases globally as well as in Pakistan.

Over the past several years, Siemens Healthineers has successfully supplied and installed High end CT Scan Systems at some of Pakistan's most prestigious healthcare institutions. These include Armed Forces Institute of Radiology and Imaging (AFIRI) Rawalpindi, 09 Combined Military Hospital (CMH) across the country, Aga Khan University Hospital Karachi and Shifa International Hospital Islamabad etc.

Siemens Healthcare (Pvt.) Ltd.,
Khurram Jameel – MD, CEO and Chairman of the Board
Ayesha Agha – CFO
Nils Vormelker – Company Secretary

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However, we regret to note that the advertised tender specifications discourage our participation in the bidding process. We are particularly surprised that the technical requirements appear to place greater emphasis on cardiology related features rather than the clinical needs of stroke and Interventional Radiology procedures. Furthermore, the specifications do not appear to adequately consider internationally recommended detector sizes for neurovascular and stroke interventions, dedicated stroke-related clinical applications and advanced post-processing workstations that are essential for comprehensive neurointerventional practice.

You are therefore requested to kindly review and amend the technical specifications by incorporating the following proposed parameters and revisions. These changes will help ensure a fair, transparent, and competitive procurement process, providing all qualified manufacturers an equal opportunity to participate and submit their offers.

Furthermore, considering the technical complexity and high value of this procurement, we strongly recommend conducting a pre-bid meeting with all prospective bidders. Such a meeting would provide an appropriate platform for clarification of technical requirements, discussion of clinical and operational needs, and resolution of any ambiguities in the tender documents, thereby ensuring the procurement of the most suitable solution for the end user.

In view of the above, we also respectfully request an extension of the tender submission deadline for at least **10–12 working days** to be granted after the issuance of **revised or amended tender specifications** and the subject tender is not visible on EPADS 2.0 website due to which we are unable to upload our grievances and technical offer.

This extension will enable all prospective bidders to adequately incorporate the changes and prepare comprehensive and competitive proposals, thereby ensuring a fair and healthy competitive bidding process.

We trust that our request will receive your kind consideration.

Thanking you and assuring you for our closest cooperation always, we remain.

With Kind Regards,



Electronically signed by:
Rahat Hussain
Reason: I am approving
this document
Date: Jun 15, 2026
12:23:19 GMT+5

(Rahat Hussain)
Commercial Controller



Electronically signed by:
Shoaib Rashid
Reason: I am approving
this document
Date: Jun 15, 2026
11:37:00 GMT+5

(SHOAIB RASHID)
Manager Sales

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Sr.No	Tender Requirement	Siemens Suggestions/Amendment request	Reason
1	Latest top of the line model having fast iterative reconstruction to minimize dose and noise with volume detector coverage area minimum of 16 cm or more in one gantry rotation.	Latest top of the line model having fast iterative reconstruction to minimize dose and noise with volume detector coverage area minimum of 12 cm or more in one gantry rotation.	It's a lock for Siemens, kindly amend to 12 cm coverage, this system is indented for purchase for Stroke and not for cardiac only. Specs designed for a cardiac CT only.
2	Dual Source / single source with two layers of detector/ single source with ultrafast KV switching of high and low energy, Spectral Imaging required at full 16cm area coverage for all axial	Dual Source / single source with two layers of detector/ single source with ultrafast KV switching of high and low energy, Spectral Imaging required	Kindly remove 16cm, as no vendor can scan full 16cm Spectral CT for all application.
3	Spectral Imaging CT scanner having 512 slices or more generation per gantry rotation along with latest hardware and software systems	Spectral Imaging CT scanner having 256 slices or more generation per gantry rotation along with latest hardware and software systems	512 is designed by GE only. Specs are GE favorable and bound competition to qualify. Therefore request to please all vendors an equal opportunity. For Stroke number of slices are not matter, its about the hyperdensity and ASPECT applications which are not asked in tender.
4	System should be capable to scan whole heart within single heartbeat or less at all heart rates (Bradycardia and tachycardia) without betablockers/ medication with sub-milli Sieverts cardiac Imaging	System should be capable of scanning whole heart and cater Stroke Patients .	Single beat cardiac is not required for stroke patients, therefore should be remove

5	Scan with at least 0.25 mm accuracy/ reproducibility on a 300kg patient or better.	Kindly remove 0.25 as its not available in all the datasheets.	
6	CT scan Spatial Resolution of 32lp/cm @ 0%MTF or better.	CT scan Spatial Resolution of 15lp/cm @ 2%MTF or better.	Lock for Siemens, as Siemens cut off values are at 2% MTF
7	One beat cardiac scan capable for producing CT Angio, calcium scoring, 4D cardiac volume etc, all in one beat scan.	cardiac scan capable for producing CT Angio, calcium scoring, 4D cardiac volume etc	One beat cardiac is not required for stroke patients, therefore should be remove
8	Temporal resolution at least 20 msec or less.	Native Temporal resolution at least 86 msec or less without using any motion correction software. equivalent values are not acceptable.	20msec is near to GE using freezing software, while native temporal resolution is too high , which Siemens offers the best temporal resolution required for cardiac scanning. Therefore kindly use the word Native to avoid equivalents vales.
9	Min gantry rotation time to be at least 0.24 sec or better, Min slice thickness 0.625 mm or less in axial and helical mode.	Min gantry rotation time to be at least 0.33 sec or better, Min slice thickness 0.625 mm or less in axial and helical mode.	Kindly amend for fair competition, in stroke fast scanning are not required
10	Triple Focal spot sizes should be available	Dual Focal spot sizes should be available	Generalize for all
11	Anode heat storage Capacity 30 MHU or more	Anode heat storage Capacity 14 MHU or more	30 MHU can not be actual values, no vendor can provide, therefore request to amend to 14 MHU or more.
12	mA range: 20-1250 or better.	mA range: 1500 or better.	1250 is too low for a 100KW system, should be at least 1500mA or more
13	Analysis software should be able to measure volume ratio, aspect ratio and diameter of angiogram to check for susceptibility to rupture	ASPECT V2 scoring software	World wide gold standard is ASPECT V2 for stroke, these wordings may be vendor specific and do not elaborate the requirement of ASPECT for stroke.

	thorough change caused during various cycle of the ECG.		
14	41. Cerebral multimodality fusion software for surgical planning and craniotomy, with fused modality images that provide an accurate overview of patient's brain and cranial anatomy.	Removed	Maybe vendor specific
15	CT Lung Density Assessment: 43. Track and quantity diffuse lung disease including congenital lobar emphysema, destructive lung disease, pulmonary hypoplasia/ agenesis, CCAM and laryngomalacia etc on workstation. 44. Nodule analysis program. 45. Automated/ single click segmentation of Right and left lung with display of volume rendered and MPR view to destruction for accurate quantification and Archive, Retrieve and Print on workstation.	already mentioned at point # 32, 33, 34	Repetition using different wordings
16	Needs to add Storke package	The following Stroke Package should be included Brain Hemorrhage, Brain, Brain Hemorrhage SAH, Brain Hyperdensity Dedicated software for LVO Detection Midline Shift software Vessel Hyperdensities Software Stroke Layout	Specs are designed for cardiac scanning only, it does not include any stroke applications. Kindly add the stroke applications if the system is intended to use for stroke patients also.

		Stroke V2 (latest Version)	
17	Maximum weight allowed on the couch up to 300kg or more to achieve speeds up to 55 mm/s 1for same 50cm FOV and uncompromised image quality	Maximum weight allowed on the couch up to 300kg or more to achieve speeds up to 200 mm/s for same 50cm FOV and uncompromised image quality	55 mm/s showing a slow scanning, there is no use of 0.24ms scanning with 55/m table speed. Siemens offers high speed table to cover the scan fast instead of increasing rotation speed to create image artifacts
18	Table with motorized height adjustment from 470mm to 1000mm to be offered	removed	May be vendor specific.
19	Reconstruction of at least 100 images per second or more with iterative reconstruction of 512 x 512 matrix.	Reconstruction of at least 80 frames per second or more without iterative reconstruction of 512 x 512 matrix.	Values are always high with iterative recons, but in actual system will be very slow. Kindly amend to high recon speed with equivalent values with iterative recon. It should be without iterative recon.
20	image reconstruction matrix of 512 x 512 and 1024 x 1024 should be available for full 16cm detector coverage.	Image reconstruction matrix of 512 x 512 and 1024 x 1024 should be quoted	Should be available and quote are two different requests. Word Available do not bound to quote also
21	Iso-phasic cardiac acquisition to allow for acquisition in systolic or diastolic as per user's requirement.	remove	Vendor specific wordings.
22	Software for the quantitative evaluation of lung tissues and 3D based visualization off pulmonary nodules and its analysis. Lung nodule detection software be provided at console/workstation.	Repeated	

23	Direct CT lung subtraction with and without contrast using deformable registration/ dual energy for lung perfusion defect detection using color body iodine mapping for low perfused areas.	remove	Vendor specific wordings.
24	Spectral imaging application available in the offered model should be provided included composition analysis for renal clinical, virtual non contrast imaging, iodine mapping/ iodine overlay.	Spectral imaging application available in the offered model should be provided included composition analysis for renal clinical, virtual non contrast imaging, iodine mapping	Iodine overlay cannot be equal to iodine mapping using spectral dual energy
25	Deep Learning reconstruction software must be offered as standard.	Deep Learning / Artificial intelligence-based reconstruction and workflow software must be offered as standard	Lock for Siemens. Siemen don't use word Deep learning in their datasheet. May please generalize.
26	Must have FDA 510k or CE MDR or MHLW	Must have FDA 510k and CE /MDR/MHLW	This will allow 2 certificates with FDA as mandatory.