

Fort Bend County Specification Download Acknowledgment



Invitation for Bid Term Contract for Medical Supplies BID 16-010

VENDORS MUST IMMEDIATELY RETURN THIS FORM BY FAX TO 281-341-8645.

- Vendor Responsibilities:**
- Vendors are responsible to download and complete any addendums. (Addendums will be posted on the Fort Bend County Website no later than 48 hours prior to Bid Opening)
 - Vendors will submit responses in accordance with requirements stated on cover of document.
 - Vendors may not submit responses via email or fax.

Henry Sherman Inc
Legal Name of Contracting Company

Scott Bruner
Contact Person

PO Box 3227, Lamo, SC 29063
Complete Mailing Address

800 845 3550 Telephone Number 800 533 4793 Facsimile Number

Scott.bruner@henry-sherman.com
Email Address

[Signature] Signature 7/30/15 Date

Vendor Information

Henry Schein Inc
Legal Name of Contracting Company

[REDACTED]
Federal ID Number (Company or Corporation) or Social Security Number (Individual)

800 845 3550
Telephone Number Facsimile Number

PO Box 3227
Complete Mailing Address (for Correspondence)

IRMO, SC 29063
City, State and Zip Code

DEPT CH 10241
Complete Remittance Address (if different from above)

PALM TINE, IL 60055-0241
City, State and Zip Code

Jesse A. Garringer Vice President
Authorized Representative and Title (printed)

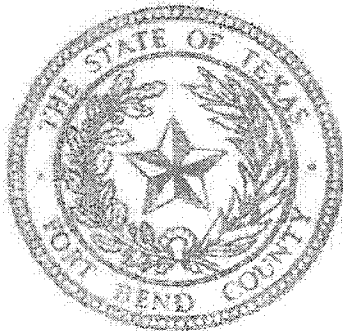
Jesse.Garringer@HenrySchein.com
Authorized Representative's Email Address

[Signature] 8/12/15
Signature of Authorized Representative Date

Initials of Bidder: SAG

ORIGINAL

**Fort Bend County, Texas
Invitation for Bid**



**Term Contract for the Purchase of Medical Supplies
for Fort Bend County
BID 16-010**

SUBMIT BIDS TO:

Fort Bend County
Purchasing Department
Travis Annex
301 Jackson, Suite 201
Richmond, TX 77469

****NOTE:**

All correspondence must include the term
term "Purchasing Department" in address
to assist in proper delivery.

SUBMIT NO LATER THAN:

Thursday, August 13, 2015
1:30 PM (Central)

LABEL ENVELOPE:

BID 16-010
MEDICAL SUPPLIES

**ALL BIDS MUST BE RECEIVED IN AND TIME/DATE STAMPED BY THE PURCHASING OFFICE
OF FORT BEND COUNTY BEFORE THE SPECIFIED TIME/DATE STATED ABOVE.**

BIDS RECEIVED AS REQUIRED WILL THEN BE OPENED AND PUBLICLY READ.

BIDS RECEIVED AFTER THE SPECIFIED TIME, WILL BE RETURNED UNOPENED.

Results will not be given by phone.
Results will be provided to bidder
in writing after the Commissioners
Court awards.

Fort Bend County is always conscious
and extremely appreciative of your effort
in the preparation of this bid.

Requests for information must be in writing
and directed to:

Cheryl Krejci, CPPB
Senior Buyer
cheryl.krejci@fortbendcountytexas.gov

Prepared: 06/06/15
Issued: 07/29/15

1.0 GENERAL REQUIREMENTS:

- 1.1 Read this entire bid document carefully. Follow all instructions. You are responsible for fulfilling all requirements and specifications. Be sure you understand them.
- 1.2 General Requirements apply to all advertised bids; however, these may be superseded, whole or in part, by the scope, special requirements, specifications, special specifications or other data contained herein.
- 1.3 Governing Law: Bidder is advised that these requirements shall be fully governed by the laws of the State of Texas and that Fort Bend County may request and rely on advice, decisions and opinions of the Attorney General of Texas and the County Attorney concerning any portion of these requirements.
- 1.4 Bid Document Completion: Fill out, initial each page, sign, and return ONE (1) complete bid document to the Fort Bend County Purchasing Department. An authorized representative of the bidder must sign the Contract Sheet. The contract will be binding only when signed by the County Judge, Fort Bend County and a purchase order authorizing the item(s) desired has been issued. The use of liquid paper is not acceptable and may result in the disqualification of bid. If an error is made, vendor must draw a line through error and initial each change. All response, typed or written, information must be clear and legible.
- 1.5 Bid Returns: Bidders must return entire completed bid document to the Fort Bend County Purchasing Department at 301 Jackson, Suite 201, Richmond, Texas no later than 1:30 P.M. on the date specified. Late bids will not be accepted. Bids must be submitted in a sealed envelope, addressed as follows: Fort Bend County Purchasing Agent, Travis Annex, 301 Jackson, Suite 201, Richmond, Texas 77469.
- 1.6 Governing Document: In the event of any conflict between the terms and provisions of these requirements and the specifications, the specifications shall govern. In the event of any conflict of interpretation of any part of this overall document, Fort Bend County's interpretation shall govern.
- 1.7 Addendums: No interpretation of the meaning of the drawings, specifications or other bid documents will be made to any bidder orally. All requests for such interpretations must be made in writing addressed to Ms. Cheryl Krejci, Senior Buyer, 301 Jackson, Suite 201, Richmond, Texas 77469, e-mail: cheryl.krejci@fortbendcountytexas.gov. Any and all interpretations and any supplemental instructions will be in the form of written addenda to the contract documents which will be posted on Fort Bend County's website. Addenda will **ONLY** be issued by the Fort Bend County Purchasing Agent. It is the sole responsibility of each bidder to insure receipt of any and all addenda. All addendum issued will become part of the contract documents. Bidders must sign

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and include addendum in the returned bid package. Deadline for submission of questions and/or clarification is **Thursday, August 6, 2015 at 9:00 a.m. (CST)**. Requests received after the deadline will not be responded to due to the time constraints of this bid process.

- 1.8 **Hold Harmless Agreement:** Contractor shall indemnify and hold Fort Bend County harmless from all claims for personal injury, death and/or property damage arising from any cause whatsoever, resulting directly or indirectly from contractor's performance. Contractor shall procure and maintain, with respect to the subject matter of this bid, appropriate insurance coverage including, as a minimum, public liability and property damage with adequate limits to cover contractor's liability as may arise directly or indirectly from work performed under terms of this bid. Certification of such coverage must be provided to the County upon request.
- 1.9 **Waiver of Subrogation:** Bidder and bidder's insurance carrier waive any and all rights whatsoever with regard to subrogation against Fort Bend County as an indirect party to any suit arising out of personal or property damages resulting from bidder's performance under this agreement.
- 1.10 **Severability:** If any section, subsection, paragraph, sentence, clause, phrase or word of these requirements or the specifications shall be held invalid, such holding shall not affect the remaining portions of these requirements and the specifications and it is hereby declared that such remaining portions would have been included in these requirements and the specifications as though the invalid portion had been omitted.
- 1.11 **Bonds:** If this bid requires submission of bid guarantee and performance bond, there will be a separate page explaining those requirements. Bids submitted without the required bid bond or cashier's checks are not acceptable. Bond/s or cashier's check must be complete with all required signatures.
- 1.12 **Taxes:** Fort Bend County is exempt from all federal excise, state and local taxes unless otherwise stated in this document. Fort Bend County claims exemption from all sales and/or use taxes under Chapter 20, Title 122a, Vernon's Texas Civil Statutes, as amended. Texas Limited Sales Tax Exemption Certificates will be furnished upon written request to the Fort Bend County Purchasing Department.
- 1.13 **Fiscal Funding:** A multi-year lease or lease/purchase arrangement (if requested by the specifications), or any contract continuing as a result of an extension option, must include fiscal funding out. If, for any reason, funds are not appropriated to continue the lease or contract, said lease or contract shall become null and void. After expiration of the lease, leased equipment shall be removed by the bidder from the using department without penalty of any kind or form to Fort Bend County. All charges and physical activity related to delivery, installation, removal and redelivery shall be the responsibility of the bidder.


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- 1.14 Pricing: Prices for all goods and/or services shall be firm for the duration of this contract and shall be stated on the bid sheet. Prices shall be all inclusive. No price changes, additions, or subsequent qualifications will be honored during the course of the contract. All prices must be written in ink or typewritten. Pricing on all transportation, freight, and other charges are to be prepaid by the contractor and included in the bid prices. If there are any additional charges of any kind, other than those mentioned above, specified or unspecified, bidder MUST indicate the items required and attendant costs or forfeit the right to payment for such items.
- 1.15 Silence of Specifications: The apparent silence of specifications as to any detail, or the apparent omission from it of a detailed description concerning any point, shall be regarded as meaning that only the best commercial practice is to prevail and that only material and workmanship of the finest quality are to be used. All interpretations of specifications shall be made on the basis of this statement. The items furnished under this contract shall be new, unused of the latest product in production to commercial trade and shall be of the highest quality as to materials used and workmanship. Manufacturer furnishing these items shall be experienced in design and construction of such items and shall be an established supplier of the item bid.
- 1.16 Supplemental Materials: Bidders are responsible for including all pertinent product data in the returned bid package. Literature, brochures, data sheets, specification information, completed forms requested as part of the bid package and any other facts which may affect the evaluation and subsequent contract award should be included. Materials such as legal documents and contractual agreements, which the bidder wishes to include as a condition of the bid, must also be in the returned bid package. Failure to include all necessary and proper supplemental materials may be cause to reject the entire bid.
- 1.17 Material Safety Data Sheets: Under the "Hazardous Communication Act", commonly known as the "Texas Right To Know Act", a bidder must provide to County and using departments, with each delivery, material safety data sheets, which are, applicable to hazardous substances defined in the Act. Bidders are obligated to maintain a current, updated file in the Fort Bend County Purchasing Department. Failure of the bidder to maintain such a file will be cause to reject any bid applying thereto.
- 1.18 Name Brands: Specifications may reference name brands and model numbers. It is not the intent of Fort Bend County to restrict these bids in such cases, but to establish a desired quality level of merchandise or to meet a pre-established standard due to like existing items. Bidders may offer items of equal stature and the burden of proof of such stature rests with them. Fort Bend County shall act as sole judge in determining equality and acceptability of products offered.
- 1.19 Color Selection: Determination of colors of materials is a right reserved by the

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using department unless otherwise specified in the bid. Unspecified colors shall be quoted as standard colors, not colors, which require up charges or special handling. Unspecified fabrics or vinyl should be construed as medium grade. If bidder fails to get color/material approvals prior to delivery of merchandise, the using department may refuse to accept the items and demand correct shipment without penalty, subject to other legal remedies.

- 1.20 Evaluation: Evaluation shall be used as a determinant as to which bid items or services are the most efficient and/or most economical for the County. It shall be based on all factors, which have a bearing on price and performance of the items in the user environment. All bids are subject to tabulation by the Fort Bend County Purchasing Department and recommendation to Fort Bend County Commissioners Court. Compliance with all bid requirements, delivery and needs of the using department are considerations in evaluating bids. Pricing is NOT the only criteria for making a recommendation. The Fort Bend County Purchasing Department reserves the right to contact any bidder, at any time, to clarify, verify or request information with regard to any bid.
- 1.21 Inspections: Fort Bend County reserves the right to inspect any item(s) or service location for compliance with specifications and requirements and needs of the using department. If a bidder cannot furnish a sample of a bid item, where applicable, for review, or fails to satisfactorily show an ability to perform, the County can reject the bid as inadequate.
- 1.22 Testing: Fort Bend County reserves the right to test equipment, supplies, material and goods bid for quality, compliance with specifications and ability to meet the needs of the user. Demonstration units must be available for review. Should the goods or services fail to meet requirements and/or be unavailable for evaluation, the bid is subject to rejection.
- 1.23 Disqualification of Bidder: Upon signing this bid document, a bidder offering to sell supplies, materials, services, or equipment to Fort Bend County certifies that the bidder has not violated the antitrust laws of this state codified in section 15.01, et seq., Business & Commerce Code, or the federal antitrust laws, and has not communicated directly or indirectly the bid made to any competitor or any other person engaged in such line of business. Any or all bids may be rejected if the County believes that collusion exists among the bidders. Bids in which the prices are obviously unbalanced may be rejected. If multiple bids are submitted by a bidder and after the bids are opened, one of the bids is withdrawn, the result will be that all of the bids submitted by that bidder will be withdrawn; however, nothing herein prohibits a vendor from submitting multiple bids for different products or services.
- 1.24 Awards: Fort Bend County reserves the right to award this contract on the basis of lowest and best bid in accordance with the laws of the State of Texas, to waive any formality or irregularity, to make awards to more than one bidder, to reject

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any or all bids. In the event the lowest dollar bidder meeting specifications is not awarded a contract, the bidder may appear before the Commissioners Court and present evidence concerning his responsibility. An award is final only upon formal execution by the Fort Bend County Commissioners Court or the Fort Bend County Purchasing Agent. Fort Bend County reserves the right to withdraw any award until execution by the proper authority.

- 1.25 Assignment: The successful vendor may not assign, sell or otherwise transfer this contract without written permission of Fort Bend County Commissioners Court.
- 1.26 Term Contracts: If the contract is intended to cover a specific time period, said time will be given in the specifications under scope.
- 1.27 Maintenance: Maintenance required for equipment bid should be available in Fort Bend County by a manufacturer authorized maintenance facility. Costs for this service shall be shown on the bid sheet as requested or on a separate sheet, as required. If Fort Bend County opts to include maintenance, it shall be so stated in the purchase order and said cost will be included. Service will commence only upon expiration of applicable warranties and should be priced accordingly.
- 1.28 Contract Obligation: Fort Bend County Commissioners Court must award the contract and the County Judge or other person authorized by the Fort Bend County Commissioners Court must sign the contract before it becomes binding on Fort Bend County or the bidders. Department heads are not authorized to sign agreements for Fort Bend County. Binding agreements shall remain in effect until all products and/or services covered by this purchase have been satisfactorily delivered and accepted.
- 1.29 Title Transfer: Title and Risk of Loss of goods shall not pass to Fort Bend County until Fort Bend County actually receives and takes possession of the goods at the point or points of delivery. Receiving times may vary with the using department. Generally, deliveries may be made between 8:30 a.m. and 4:00 p.m., Monday through Friday. Bidders are advised to consult the using department for instructions. The place of delivery shall be shown under the "Special Requirement" section of this bid document and/or on the Purchase Order as a "Ship To:" address.
- 1.30 Purchase Order and Delivery: The successful bidder shall not deliver products or provide services without a Fort Bend County Purchase Order, signed by an authorized agent of the Fort Bend County Purchasing Department. The fastest, most reasonable delivery time shall be indicated by the bidder in the proper place on the bid sheet. Any special information concerning delivery should also be included, on a separate sheet, if necessary. All items shall be shipped F.O.B. inside delivery unless otherwise stated in the specifications. This shall be understood to include bringing merchandise to the appropriate room or place designated by the using department. Every tender or delivery of goods must fully

comply with all provisions of these requirements and the specifications including time, delivery and quality. Nonconformance shall constitute a breach, which must be rectified prior to expiration of the time for performance. Failure to rectify within the performance period will be considered cause to reject future deliveries and cancellation of the contract by Fort Bend County without prejudice to other remedies provided by law. Where delivery times are critical, Fort Bend County reserves the right to award accordingly.

- 1.31 Contract Extension: Extensions may be made only by written agreement between Fort Bend County and the bidder. Any price escalations are limited to those stated by the bidder in the original bid.
- 1.32 Termination: Fort Bend County reserves the right to terminate the contract for default if Seller breaches any of the terms therein, including warranties of bidder or if the bidder becomes insolvent or commits acts of bankruptcy. Such right of termination is in addition to and not in lieu of any other remedies, which Fort Bend County may have in law or equity. Default may be construed as, but not limited to, failure to deliver the proper goods and/or services within the proper amount of time, and/or to properly perform any and all services required to Fort Bend County's satisfaction and/or to meet all other obligations and requirements. Contracts may be terminated without cause upon thirty (30) days written notice to either party unless otherwise specified.
- 1.33 Recycled Materials: Fort Bend County encourages the use of products made of recycled materials and shall give preference in purchasing to products made of recycled materials if the products meet applicable specifications as to quantity and quality. Fort Bend County will be the sole judge in determining product preference application.
- 1.34 Interlocal Participation: Additional governmental entities may purchase from this bid. Vendor agrees to accept purchase orders from those participating entities and to invoice each entity separately.
- 1.35 Escalation Clause: Successful bidder may apply for a price increase to the Fort Bend County Commissioners Court. Price increase will be the amount increased to the vendor from his supplier. Written documentation of the increase must be provided to the Purchasing Agent. No application for a price increase may be submitted within the first four (4) months of this contract. Increases of more than 25% of the original bid price will not be considered.

2.0 TERMS & CONDITIONS:

- 2.1 Seller to Package Goods: Seller will package goods in accordance with good commercial practice. Each delivery container shall be clearly and permanently marked as follows (a) Seller's name and address; (b) Consignee's name, address and purchase order number and the bid number if applicable; (c) Container

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number and total number of containers (e.g. box 1 of 4 boxes); and (d) the number of the container bearing the packing slip. Seller shall bear cost of packaging unless otherwise provided. Goods shall be suitably packed to secure lowest transportation costs and to conform to requirements of common carriers and any applicable specifications. Fort Bend County's count or weight shall be final and conclusive on shipments not accompanied by packing list.

2.2 Shipment Under Reservation Prohibited: Seller is not authorized to ship goods under reservation and no tender of a bill of lading will operate as a tender of goods.

2.3 Title and Risk of Loss: The title and risk of loss of the goods shall not pass to the County until a County employee actually receives and takes possession of the goods at the point or points of delivery.

2.4 Delivery Terms: F.O.B. Destination Freight Prepaid, Inside Delivery, unless delivery terms are specified otherwise on Purchase Order.

2.5 No Replacement of Defective Tender: Every tender or delivery of goods must fully comply with all provisions of the Purchase Order as to time of delivery, quality and the like. If a tender is made which does not fully conform, this shall constitute a breach and Seller shall not have the right to substitute a conforming tender.

2.6 Place of Delivery: The place of delivery shall be that set forth in the block of the purchase order entitled "Ship To". Any change thereto shall be effective by modification as provided for in Clause number 2.20 "Modifications", hereof. The terms of this agreement are "no arrival, no sale", at the discretion of Fort Bend County.

2.7 Invoices and Payments:

2.7.1 Seller shall submit separate invoices, in duplicate. Invoices shall indicate the purchase order number and the bid number if applicable. Invoices shall be itemized and transportation charges, if any, shall be listed separately. A copy of the bill of lading, and the freight waybill when applicable should be attached to the invoice.

2.7.2 Fort Bend County's obligation is payable only and solely from funds available for the purpose of this purchase. Lack of funds shall render the order null and void to the extent funds are not available and any delivered but unpaid goods will be returned to Seller by the county.

2.7.3 Do not include Federal Excise, State, or City Sales Tax. Fort Bend County is a tax-exempt governmental entity.

2.8 Gratuities: Fort Bend County may, by written notice to the Seller, cancel any

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order without liability, if it is determined by the County that gratuities, in the form of entertainment, gifts, or otherwise were offered or given by the Seller, or any agent or representative of the Seller to any officer or employee of Fort Bend County with a view toward securing an order. In the event an order is canceled by the County pursuant to this provision, the County shall be entitled, in addition to any other rights and remedies, to recover or withhold the amount of the cost incurred by Seller in providing such gratuities.

2.9 Special Tools and Test Equipment: If the price stated on the face of an order includes the cost of any special tooling or special test equipment fabricated or required by Seller for the purpose of filing this order, such special tooling equipment and any process sheets related thereto shall become the property of the County and to the extent feasible shall be identified by the Seller as such.

2.10 Warranty/Price:

2.10.1 The price to be paid by the County shall be that contained in Seller's quote or bid which Seller warrants to be no higher than Seller's current prices on orders by others for products of the kind and specification covered by an order for similar quantities under similar or like conditions and methods of purchase. In the event Seller breaches this warranty the prices of the items shall be reduced to the Seller's current prices on orders by others. Fort Bend County may cancel this contract without liability.

2.10.2 The Seller warrants that no person or selling agency has been employed or retained to solicit or secure any County order based upon any agreement or understanding for commission, percentage, brokerage, or contingent fee excepting bona fide employees of bona fide established commercial or selling agencies maintained by the Seller for the purpose of securing business. A breach or violation of this warranty gives the County the right, in addition to any other right or rights, to cancel this contract without liability.

2.11 Warranty Product: Seller shall not limit or exclude any implied warranties and any attempt to do so shall render an order voidable at the option of the County. Seller warrants that the goods furnished will conform to the specifications, drawings, and description listed in the bid invitation and purchase order as applicable, and to the sample(s) furnished by Seller if any. In the event of a conflict between the specifications, drawings, and descriptions, the specifications shall govern.

2.12 Safety Warranty: Seller warrants that the product sold to Fort Bend County shall conform to the standards promulgated by the U.S. Department of Labor under the Occupational Safety and Health Act of 1970. In the event the product does not conform to OSHA standards, the County may return the product for correction or replacement at the Seller's expense. In the event Seller fails to make the

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appropriate correction within 10 days, correction made by the County will be at Seller's expense.

- 2.13 **No Warranty by Fort Bend County Against Infringements:** As part of a contract for sale Seller agrees to ascertain whether goods manufactured in accordance with the specifications will give rise to the rightful claim of any third person by way of infringement. Fort Bend County makes no warranty that the production of goods according to the specification will not give rise to such a claim and in no event shall Fort Bend County be liable to Seller for indemnification in the event the Seller is sued on the grounds of infringement or the like. If Seller is of the opinion that an infringement will result, he will notify Fort Bend County to this effect in writing within two days after the receiving Purchase Order. If the County does not receive notice and is subsequently held liable for the infringement, Seller will defend and save the County harmless. If Seller in good faith ascertains that production of the goods in accordance with the specifications will result in infringement, this contract shall be null and void except that the County will pay Seller the reasonable cost of his search as to infringements.
- 2.14 **Right of Inspection:** The County shall have the right to inspect the goods at delivery before accepting them.
- 2.15 **Cancellation:** Fort Bend County shall have the right to cancel for default all or any part of the undelivered portion of an order if Seller breaches any of the terms hereof including warranties of Seller, or if the Seller becomes insolvent or files for protection under the bankruptcy laws. Such rights of cancellation are in addition to and not in lieu of any other remedies, which Fort Bend County may have in law or equity.
- 2.16 **Termination:** The performance of work under a Purchase Order may be terminated in whole or in part by the County in accordance with this provision. Termination of work there under shall be effected by the delivery to the Seller of a "Notice of Termination" specifying the extent to which performance of work under the order is terminated and the date upon which such termination becomes effective. Such right of termination is in addition to and not in lieu of rights of Fort Bend County set forth in Clause 15 herein.
- 2.17 **Force Majeure:** Force Majeure means a delay encountered by a party in the performance of its obligations under this Agreement, which is caused by an event beyond the reasonable control of that party. Without limiting the generality of the foregoing, "Force Majeure" shall include but not be restricted to the following types of events: acts of God or public enemy; acts of governmental or regulatory authorities; fires, floods, epidemics or serious accidents; unusually severe weather conditions; strikes, lockouts, or other labor disputes; and defaults by subcontractors.

In the event of a Force Majeure, the affected party shall not be deemed to have

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violated its obligations under this Agreement, and the time for performance of any obligations of that party shall be extended by a period of time necessary to overcome the effects of the Force Majeure, provided that the foregoing shall not prevent this Agreement from terminating in accordance with the termination provisions. If any event constituting a Force Majeure occurs, the affected party shall notify the other parties in writing, within twenty-four (24) hours, and disclose the estimated length of delay, and cause of the delay.

- 2.18 Assignment-Delegation: No right or interest in an order shall be assigned or delegation of any obligation made by Seller without the written permission of Fort Bend County. Any attempted assignment or delegation by Seller shall be wholly void and totally ineffective for all purposes unless made in conformity with this paragraph.
- 2.19 Waiver: No claim or right arising out of a breach of any contract can be discharged in whole or in part by a waiver or renunciation of the claim or right unless the waived or renunciation is supported by consideration and is in writing signed by the aggrieved party.
- 2.20 Modification: A Purchase Order can be modified or rescinded only by a writing signed by both of the parties or their duly authorized agents.
- 2.21 Parol Evidence: This writing is intended by the parties as a final expression of their agreement and is intended also as a complete and exclusive statement of the terms of this agreement. No course of prior dealings between the parties and no usage of the trade shall be relevant to supplement or explain any terms rendered under this agreement and shall not be relevant to determine the meaning of this agreement even though the accepting or acquiescing party has knowledge of the performance and opportunity for objection. Whenever a term defined by the Uniform Commercial Code is used in this agreement, the definition contained in the Code is to control.
- 2.22 Applicable Law: This agreement shall be governed by the Uniform Commercial Code. Whenever the term "Uniform Commercial Code" is used it shall be construed as meaning the Uniform Commercial Code as adopted in the State of Texas and in effective on the date of the purchase order.
- 2.23 Advertising: Seller shall not advertise or publish, without the County's prior consent the fact that Fort Bend County has entered into any contract, except to the extent necessary to comply with proper requests for information from an authorized representative of the federal, state, or local government.
- 2.24 Right to Assurance: Whenever the County in good faith has reason to question the other party's intent to perform. The County may demand that the other party give written assurance of his intent to perform. In the event that a demand is made and no assurance is given within five (5) days, the County may treat this

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failure as an anticipatory repudiation of the contract.

2.25 Venue: Both parties agree that venue for any litigation arising from this contract shall lie in Richmond, Fort Bend County, Texas.

2.26 Prohibition Against Personal Interest in Contracts: No officer or employee of the County shall have a financial interest, direct or indirect, in any contract with the County, or shall be financially interested, directly or indirectly, in the sale to the County of any land, materials, supplies, or service, except on behalf of the County as an officer or employee. Any willful violation of this section shall constitute malfeasance in office, and any officer or employee guilty thereof shall be subject to disciplinary action under applicable laws, statutes and codes of the State of Texas. Any violation of this section, with the knowledge, expressed or implied of the person or corporation contracting with the County shall render the contract involved voidable by the County Commissioners Court.

3.0 SCOPE:

It is the intent of Fort Bend County to purchase medical supplies from one (1) or more vendors which meet or exceed the following specifications

4.0 TERM OF CONTRACT:

This contract is for the term 1 October 2015 through 30 September 2016, renewable annually for four (4) years (through 30 September 2020) under the same terms and conditions if mutually agreeable by both parties. This contract may be terminated by either party for any reason by giving thirty (30) days written notice of intent to terminate.

5.0 BID DOCUMENT COMPLETION:

Fill out, initial each page, SIGN CONTRACT SHEET, and return ONE (1) complete bid document to the Fort Bend County Purchasing Department. An authorized representative of the bidder MUST sign the contract sheet. The bid must be in a sealed envelope and marked with the appropriate bid number. The contract will be binding only when signed by the County Judge, Fort Bend County and a purchase order authorizing the item(s) desired has been issued. The use of liquid paper is NOT acceptable and may result in the disqualification of bid. If an error is made, vendor MUST draw a line through error and initial each change. All response, typed or written, information must be clear and legible.

6.0 DELIVERY:

6.1 Delivery within seven (7) working days is required unless otherwise specified at time of order.

6.2 Items ordered from this bid must be delivered to Fort Bend County EMS, 4332 Highway 36 South, Rosenberg, TX 77471 unless otherwise stated on purchase order.

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7.0 AWARD:

This contract will be awarded to the lowest and best bid per section.

8.0 GENERAL INFORMATION:

- 8.1 Quantities listed are estimates only. Fort Bend County does not guarantee the quantities stated will be purchased.
- 8.2 No minimum orders, by quantity or dollar amount.
- 8.3 No substitutes when name brand specified.
- 8.4 Vendor must bid on all items in section for bid to be considered.

9.0 REQUIRED FORMS:

All vendors submitting are required to complete the attached and return with submission:

- 9.1 Vendor Form
- 9.2 W9 Form
- 9.3 Tax Form/Debt/Residence Certification

Section 1: Airways	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
40mm Berman (dual channel) Oral Airway	8570640	10	Each	\$ 26	\$ 260
60mm Berman (dual channel) Oral Airway	8570660	10	Each	\$ 25	\$ 250
80mm Berman (dual channel) Oral Airway	8570680	10	Each	\$ 26	\$ 260
90mm Berman (dual channel) Oral Airway	8576256	100	Each	\$ 25	\$ 2500
100 mm Berman (dual channel) Oral Airway	8579780	100	Each	\$ 26	\$ 2600
Thomas E.T. Tube Holder Adult size	2202270	300	Each	\$ 2.59	\$ 777.00
Thomas E.T. Tube Holder Pediatric size	4990708	20	Each	\$ 2.57	\$ 51.40
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 2.5 Uncuffed	4994854	10	Each	\$	\$
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 3.0 Uncuffed	4994851	10	Each	1.71	17.10
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 3.5 Uncuffed	4996132	10	Each	\$	\$
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 4.0 Uncuffed	4998532	10	Each	1.73	17.30
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 4.5 Uncuffed	4996565	10	Each	\$	\$
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 5.0 Uncuffed	4995730	10	Each	1.71	17.10
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 5.5 Cuffed	4999751	20	Each	\$	\$
				1.71	34.20

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Section I: Airways (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 6.0 Cuffed	4994847	10	Each	\$ 1.71	\$ 17.10
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 6.5 Cuffed	4994848	20	Each	\$ 1.71	\$ 34.20
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 7.0 Cuffed	4994850	200	Each	\$ 1.71	\$ 342.00
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 7.5 Cuffed	4994851	150	Each	\$ 1.71	\$ 256.50
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 8.0 Cuffed	4999427	20	Each	\$ 1.71	\$ 34.20
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 8.5 Cuffed	4999338	10	Each	\$ 1.71	\$ 17.10
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free. Medstorm brand or equivalent, 9.0 Cuffed	4994853	10	Each	\$ 1.71	\$ 17.10
30F Nasopharyngeal Airways	4999314	40	Each	\$ 1.55	\$ 62.00
36F Nasopharyngeal Airways	4999317	20	Each	\$ 1.55	\$ 31.00
1200cc Replacement/Disposable Suction Canister, for S-Scott "Ten" suction unit	1532494	200	Each	\$ 2.57	\$ 514.00
8F whistle tip Suction Catheter	4995810	20	Each	\$.21	\$ 4.20
10F whistle tip Suction Catheter	4995084	50	Each	\$.21	\$ 10.50
18F whistle tip Suction Catheter	4995930	50	Each	\$.21	\$ 10.50

Initials of Bidder: JAC

Section 1: Airways (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Yankaur Suction Tip w/Control	4995371	300	Each	\$.48	\$ 144.00
Yankaur "Big Yank" Suction Tip w/Control Vent, Sterile, 1 1/32" open tip, integral blister tube and canister connector pre-attached	1106352	200	Each	\$ 1.82	\$ 364.00
Suction Tubing Non Conducting Vinyl 72" x 1/4" ID	7893320	300	Each	\$ 1.37	\$ 411.00
Infant Medium Concentration Oxygen Mask	4990671	20	Each	\$ 2.83	\$ 56.60
O2 Mask Pediatric Partial Non-Rebreather w/safety vent, 50/cs	1207139	4	Case	\$ 49.51	\$ 274.04
O2 Mask Adult Non-Rebreather w/o safety vent, 50/cs	1204128	60	Case	\$ 87.51	\$ 5250.60
O2 Nasal Cannula Adult, 7ft, 50/cs	9007035	60	Case	\$ 8.83	\$ 529.80
O2 Supply Tubing 7ft, 50/cs	5643585	1	Case	\$ 18.01	\$ 18.01
Bougie-to-go ET Tube Introducer, Adult 15F x 60cm with Coude Tip	7000566	100	Each	\$ 4.34	\$ 434.00
Bougie ET Tube Introducer, Pediatric 10F x 70cm with Coude Tip	4997218	25	Each	\$ 4.92	\$ 123.00
Scott Quickdraw Cannister w/short barbed tip	4996911	10	Each	\$ 12.69	\$ 126.90
O2 Nebulizer w/ Tubing and Mouthpiece 50/cs	4999867	12	Case	\$ 35.01	\$ 420.12
Disposable Humidifier	1209983	10	Each	\$ 1.71	\$ 17.10
AMBU Spur II Bag Valve Mask Adult (with mask)	4993946	400	Each	\$ 8.27	\$ 3308.00
AMBU Spur Bag Valve Mask Infant/Child (with Infant and Child masks)	4996431	40	Each	\$ 10.96	\$ 438.40
Oxygen Nut & Stem (Plastic)	1012406	10	Each	\$ 1.04	\$ 10.40
Magill Forceps Adult sizes	499185	5	Each	\$ 3.36	\$ 16.80
Magill Forceps Child sizes	4991845	5	Each	\$ 3.37	\$ 16.85
Gastric Sump Tube, 48", 18F, Sterile	1201782	30	Each	\$ 2.01	\$ 60.30
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 2	8579052	40	Each	\$ 3.79	\$ 151.60
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 3	8572059	100	Each	\$ 3.80	\$ 380.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 4	8571785	200	Each	\$ 3.80	\$ 760.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 0	8575363	20	Each	\$ 3.80	\$ 76.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 1	8571425	20	Each	\$ 3.80	\$ 76.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 2	8575266	40	Each	\$ 3.80	\$ 152.00

Initials of Bidder: JOC

Section 1: Airways (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 3	8573605	80	Each	\$3.80	\$304.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 4	4993890	80	Each	\$3.82	\$305.60
Greenline/D Fiber Optic, 10/32" Halogen/Xenon Reflector Lamp for Medium Pulmodyne Portable/Disposable O2-Max Bitrac ED Mask w/Nebulizer, with 3-set O2 CPAP Valve, Ohreda connector, w/ Adult Medium Full Face Mask and Head Strap Pulmodyne # 313-7556XN	1523890	20	Each	\$9.65	\$193.00
		200	Each	\$	\$
Pulmodyne O2 Max Variable Trio Control Unit w/6" O2 Hose and DISS Connector, Pulmodyne #313-8000	No Bid	Bid	Each	\$	\$
Pulmodyne replacement full Face Mask and Head Strap, Adult Small	No Bid	Bid	Each	\$	\$
Pulmodyne replacement full Face Mask and Head Strap, Adult Large	No Bid	Bid	Each	\$	\$
emergent respiratory products PORTO2VENT CPAP Soft-Seal Masks, size Small Adult	4998950	25	Each	9.93	248.25
emergent respiratory products PORTO2VENT CPAP Soft-Seal Masks, size Medium Adult	4998949	25	Each	9.04	226.00
emergent respiratory products PORTO2VENT CPAP Soft-Seal Masks, size Large Adult	4998948	25	Each	13.02	325.50
emergent respiratory products PORTO2VENT CPAP Breathing Circuit & Mask to include Pressure Balanced Inhalation/Exhalation Valve (Single patient use), Soft-seal Mask size medium adult (single patient use) (color of seal : Yellow), Integral Proximal Airway Pressure Line w/Bacterial/Viral Filter, Six foot corrugated tube with locking bayonet connector, Soft-Seal Mask - Black Neoprene Head Harness	4998946	200	Each	\$	\$
9" x 3" IV Arm Board	2205595	20	Each	42.51	8502.00
12" x 3" IV Arm Board	2209065	20	Each	\$.80	\$ 16.00
18" x 3" IV Arm Board	2202636	10	Each	\$.68	\$ 13.60
14g x 5 1/4" Needle, Becton Dickinson # 382269	9870340	50	Each	\$ 1.11	\$ 11.10
			Each	\$ 15.01	\$ 750.50
TOTAL for Section 1:					\$ 26,886.37

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Initials of Bidder:

Section 2: IV/Syringes/Blood	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
MedStorm IV Guard IV Dressing, Breathable Foam Dressing, Curaplex	4996357	500	Each	\$.24	\$ 120.00
Transparent Film Dressing, Tegaderm, 4" x 4 3/4", Frame Style, 50/bx	779952	100	Each	\$.34	\$ 34.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 14gauge x 2"	5077712	120	Each	\$ 1.55	186.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 16gauge x 1 1/4"	5070660	500	Each	\$ 1.55	775.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 18gauge x 1 1/4"	5073345	1800	Each	\$ 1.96	3528.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 20gauge x 1 1/4"	5072272	7500	Each	\$ 1.96	14700.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 22gauge x 1"	5075328	800	Each	\$ 2.11	1688.00
18g x 1 1/2" Needle Only 100/bx	3372091	1	Box	\$ 315	\$ 315
20g x 1 1/2" Needle Only 100/bx	3372180	1	Box	\$ 313	\$ 313
22g x 1 1/2" Needle Only 100/bx	3373236	1	Each	\$.04	\$.04
23g x 1" Needle Only 100/bx	1005544	1	Each	\$.05	\$.05
1cc 2.5g x 5/8" Syringe & Needle 100/bx	3375566	4	Box	\$ 5.41	\$ 21.64
3cc Syringe, Luer lock	9009425	4	Box	\$ 4.30	\$ 17.20
5cc 22g x 1" Syringe & Needle 100/bx	3374140	12	Box	\$ 12.58	\$ 150.96
10cc Syringe Luer Lock 100/bx	1006667	6	Box	\$ 9.44	\$ 57.96
30cc Syringe Luer Lock 30/bx	1008334	2	Box	\$ 9.68	\$ 19.36
60cc Syringe Luer Lock 30/bx	1005188	2	Box	\$ 10.91	\$ 21.82

Initials of Bidder: YAG

Section 2: IV/Syringes/Blood (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
60cc Catheter Tip Syringe, 2oz	8908885	2	Box	\$6.33	\$12.66
Vacutainer Holder	1947243	4000	Each	\$0.09	\$360.00
Vacutainer Luer Adapter 100/bx	9877124	60	Box	\$27.45	\$1647.00
Latex Free Tourniquet, 1" x 18", 25 per roll, color = Blue	7545317	2000	Each	\$8.82	\$17640.00
Glucometer Test Strips for Abbott OptimumEZ glucose meter, capillary, 100 strip/bx	4998223	100	Box	\$67.28	\$6728.00
Control solution, tri-level, 1 row 1 mid 1 high per box for OptimumEZ or Precision XTRA	6573970	10	Each	\$10.14	\$101.40
Maxi Drip Set, 82" 10GTTW/Bravo 24, Pre-slit Port, Removable 7" Extension, 50/bx	8409700	2500	Each	\$2.55	\$6375.00
Mini Drop Basic Administration Set with One Injection Site, (60 Drops/mL)		100	Each	\$	\$
Control Clamp, injection site 28" above distal end, two-piece male luer lock. Priming Volume: 12mL, Length: 66 in.	4990712			1.35	135.00
9% Sodium Chloride Injection USP-1000ml, 12/cs	1534612	2500	Each	\$15.24	\$38100.00
9% Sodium Chloride Injection USP-500ml, 24/cs	1537162	96	Each	\$13.12	\$1259.52
9% Sodium Chloride Injection USP-250ml, 24/cs	5078002	50	Each	\$7.80	\$390.00
9% Sodium Chloride for Irrigation, 500mL	5075201	500	Each	\$5.40	\$2700.00
Sterile Water for Irrigation, 500mL	1530102	100	Each	\$9.20	\$920.00
Safeline Injection Site: split septum access with two-piece male luer lock. Priming Volume: 0.25mL	1191635	50	Each	\$	\$
Smallbore Extension Set with bonded Ultrastie Injection site, Length: 7 in, Priming Volume: 0.6mL (approx)	1192235	8000	Each	\$2.91	\$23280.00
TOTAL for Section 2:					\$121,210.89

Initials of Bidder: *JW*

Section 3: Bandage/Splints/Tape	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
2" x 5yd Bandage, Self-Adherent, , individually packaged	9004322	10	Each	\$.28	\$ 2.80
4" x 5yd Bandage, Self-Adherent, , individually packaged	9004324	20	Each	\$.51	\$ 10.20
Combat Application Tourniquet (CAT), One-handed Tourniquet Utilizing Windlass System, Tactical Black	4997818	25	Each	\$ 27.59	\$ 689.75
Occlusive, non-adhering dressing, impregnated with white Petrolatum, 3" x 9" 50/bx	1942093	2	Box	\$ 29.01	\$ 580.2
Small Oval Eye Pad 50/bx	8904207	1	Box	\$ 6.80	\$ 6.80
4x4 Non Sterile, non-woven, 4ply, 200/pkg	1014336	100	Pack	\$ 1.05	\$ 105.00
4x4 Sterile 12 ply - 10/tray	6474174	800	Tray	\$.60	\$ 480.00
4 1/2" x 4.1yd 6 ply Non Sterile Gauze Roll	8907346	100	Each	\$ 1.49	\$ 149.00
4 1/2" x 4.1yd 6 ply Sterile Gauze Roll	8904524	600	Each	\$ 1.25	\$ 750.00
36" x 51" Triangular Bandage	4675662	200	Each	\$.21	\$ 42.00
8" x 10" Abdominal Pad, 20/tray	1204756	80	Tray	\$ 2.77	\$ 221.60
1" x 3" Adhesive Strp Bandage 50/bx	9004504	40	Box	\$.72	\$ 28.80
Burn Sheet Sterile 60" x 96"	4993574	40	Each	\$ 1.66	\$ 66.40
Trauma Dressing Sterile 10" x 30"	1205576	60	Each	\$ 1.11	\$ 66.60
Rapid Heat Instant Heat Pack, Pull Apart Style, 6/bx	4991725	60	Each	\$.98	\$ 58.80
Rapid Cold Instant Cold Pack, Pull Apart Style, 24/cs	4990572	250	Each	\$.83	\$ 207.50
Ferno KED forehead/Chin Strap Replacement set of 2	4992722	5	Set	\$ 30.97	\$ 154.85
54" Padded Board Splint	2231922	6	Each	\$ 4.72	\$ 28.32
3M Transpore Tape 1" x 10yd 12/bx	7777805	50	Box	\$ 10.71	\$ 539.40
1" x 10yd Paper Tape, hypo-allergenic	1019673	50	Box	\$ 4.18	\$ 209.00
2" x 10yd Waterproof Tape Kendall #3267 6/bx	8902816	30	Box	\$ 15.48	\$ 464.40

Initials of Bidder: YAG

Section 3: Bandage/Splints/Tape (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Flex-All splint, orange, bendable foam and aluminum splint, 4" x 36" rolled	4992562	150	Each	\$ 4.80	\$ 720.00
One piece foil bunting with hood. Latex Free 17.5"x30" 18 micron/.70 gauge, Sterile	4990675	5	Each	\$ 3.09	\$ 15.45
TOTAL for Section 3:					\$ 5,275.49
Section 4: EKG	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Recording Paper for Physio Control Life Pak 12, 4" wide, 5/pk	8906868	1000	Each	\$ 3.46	\$ 3460.00
Medicotest Blue Sensor Disposable Electrodes # R-00-S-10 10/pk	3637922	8000	Pack	\$ 3.24	\$ 25,920.00
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables Kimberly Clark #3112-1730 (pediatrics)	6436213	20	Each	\$ 17.68	\$ 353.60
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables Kimberly Clark #3112-1731 (adult)	6430099	250	Each	\$ 32.43	\$ 8,107.50
FilterLine H Set Adult/Pediatric Medtronic Ref# XS04660	3737674	400	Each	\$ 98.2	\$ 35,280.00
Nasal FilterLine Adult Medtronic Ref# XS04664	3731168	1200	Each	\$ 13.86	\$ 16,632.00
TOTAL for Section 4:					\$ 59,130.39

Initials of Bidder: VRG

Section 5: EKG Cables	Vendors Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
LifePack 12 Power Adapter Extension Cable Physio Control #11110-000051	1085300	10	Each	\$ 112.92	\$ 1129.20
LifePack 12 12-Lead ECG trunk cable with 4-wire limb leads, 5' Physio Control #11110-000018	4996886	10	Each	\$ 119.54	\$ 1195.40
LifePack 12 12-Lead ECG Patient Cable, 6-Wire Precordial Lead Attachment, Physio Control #11110-000022	4995886	10	Each	\$ 119.54	\$ 1195.40
LifePack 12 QUIK-COMBO Therapy Cable for use with LifePack 12 defibrillator/monitor, Physio Control #11110-000040	1045832	5	Each	\$ 310.69	\$ 1553.45
Masimo SET LNC-4 LNCS Patient Cable, 4-foot reusable connector cable, Physio Control #11171-000024	1080274	10	Each	\$ 171.23	\$ 1712.30
Masimo SET LNCS DCIP Reusable Sensor, Multiuse sensor for patients 10-50kg, Physio Control #11171-000018	1107591	25	Each	\$ 354.04	\$ 8851.00
Masimo SET LNCS DCI Adult Reusable Sensor, Multiuse sensor for patients >30kg, Physio Control #11171-000017	1080275	25	Each	\$ 268.84	\$ 6721.00
MNC-1 Adapter Cable (4 foot), allows LifePack 12 defibrillator/monitor with Masimo SpO2 to connect to Nellcor sensors, Physio Control #11996-000198	4994954	5	Each	\$ 154.41	\$ 772.05
NELLCOR SpO2 Sensor, DS100A, Adult reusable, Physio Control #11996-000060	6082658	25	Each	\$ 250.44	\$ 6261.00
NELLCOR SpO2 Cable Extension, DEC-4, Reusable, Physio Control #11110-000042	1200004	30	Each	\$ 39.04	\$ 1171.20
NELLCOR Oxisensor II Disposable Pediatric SpO2 Sensor, Physio Control #11996-000116	1207661	100	Each	\$ 12.88	\$ 1288.00
NELLCOR Oxisensor II Disposable Infant SpO2 Sensor, Physio Control #11996-000115	9600004	100	Each	\$ 16.74	\$ 1674.00

Initials of Bidder: 706

Section 5: EKG Cables (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
NIBP XLarge Adult Cuff for LifePack 15, reusable, Physio Control #11160-000009	118-7342	10	Each	\$ 38.16	\$ 381.60
NIBP Large Adult Cuff for LifePack 15, reusable, Physio Control #11160-000007	4996886	10	Each	\$ 25.61	\$ 256.10
NIBP Adult Cuff for LifePack 15, reusable, Physio Control #11160-000005	4996882	10	Each	\$ 23.16	\$ 231.60
NIBP Pediatric Cuff for LifePack 15, reusable, Physio Control #11160-000003	1045832	5	Each	\$ 19.30	\$ 96.50
NIBP Infant Cuff for LifePack 15, reusable, 6x18cm, Physio Control #11160-000001	1280274	10	Each	\$ 17.37	\$ 173.70
NIBP Hose, 9 feet, reusable, Physio Control #21300-007299	1107591	10	Each	\$ 43.01	\$ 430.10
Extension Cable for AC/DC Power Adapter, Physio Control #11140-000080	1080275	10	Each	\$ 242.37	\$ 2423.70
Replacement Right Angle Power Cable for AC/DC Power Adapter, Physio Control #11140-000081	4994954	10	Each	\$ 265.40	\$ 2654.00
Lifepack 15 defibrillator/monitor to PC USB Port cable, Physio Control #11996-000288	6042659	10	Each	\$ 199.90	\$ 1999.00
Lifepack 15 Quik-Combo Therapy Cable, Physio Control #11113-000004	1200004	10	Each	\$ 310.69	\$ 3106.90
Lifepack 15 Masimo Set Red LNCS Patient Cable 4ft, Physio Control #11996-000323	1207661	10	Each	\$ 170.40	\$ 1704.00
Lifepack 15 NIBP Tubing 9ft, Physio Control #21300-007299	860004	10	Each	\$ 43.01	\$ 430.10
Lifepack 15 Pedi SPO2 Sensor Disposable, Physio Control #11171-000020	1187342	100	Each	\$ 14.22	\$ 1422.00
Lifepack 15 Infant SPO2 Sensor Disposable, Physio Control #11171-000031	4999144	100	Each	\$ 17.54	\$ 1754.00
TOTAL for Section 5:					\$ 49463.10

Initials of Bidder: *RB*

Section 6: Microflex Freeform SE Latex Free Powder Free Nitrile Exam Gloves	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Extra Small	565 9724	50	Box	\$ 8.66	\$ 433.00
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Small	565 1161	250	Box	\$ 8.66	\$ 2165.00
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Medium	565 7186	600	Box	\$ 8.46	\$ 5096.00
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Large	565 0983	800	Box	\$ 8.66	\$ 6928.00
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Extra Large	566 4683	300	Box	\$ 8.66	\$ 2598.00
TOTAL for Section 6:					\$ 17,320.00

Initials of Bidder: JAB

Section 7: Microflex Freeform EC Latex Free Powder Free Nitrile Exam Gloves	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Small	5654851	50	Box	\$ 8.73	\$ 436.50
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Medium	5658659	50	Box	\$ 8.73	\$ 436.50
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Large	5657996	50	Box	\$ 8.73	\$ 436.50
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Extra Large	5656512	50	Box	\$ 8.73	\$ 436.50
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Extra Extra Large	5654158	50	Box	\$ 8.73	\$ 436.50
TOTAL for Section 7:					\$ 2182.50

Initials of Bidder: RR

Section 8: Sterile Gloves	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Sterile Gloves, Individually packed, ASTM D6319 Standard Specification for Nitrile Exam Gloves for Medical Application, size: 6-1/2, 4 bx/cs, per case	1074222	1	Case	\$ 123.53	\$ 123.53
Sterile Gloves, Individually packed, ATM D6319 Standard Specification for Nitrile Exam Gloves for Medical Application, size: 8, 4 bx/cs, per case	1079978	1	Case	\$ 123.93	\$ 123.93
Sterile Gloves, Individually packed, ASTM D6319 Standard Specification for Nitrile Exam Gloves for Medical Application, size: 9, 4 bx/cs, per case	1076003	1	Case	\$ 123.53	\$ 123.53
TOTAL for Section 8:					\$ 370.90
Section 9: AMBU PERFIT Cervical Collars	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Infant	9850035	50	Each	\$ 3.09	\$ 154.50
Pediatric	9859681	50	Each	\$ 3.08	\$ 154.00
Regular	9852073	50	Each	\$ 3.08	\$ 154.00
Neckless	9857405	2000	Each	\$ 3.08	\$ 6160.00
Short	9852773	100	Each	\$ 3.08	\$ 308.00
Tall	9853555	20	Each	\$ 3.08	\$ 61.60
Perfit ACE Adjustable Cervical Collar, 16 setting (Neckless to Tall)	9851122	2000	Each	\$ 4.46	\$ 8920.00
Perfit Mini ACE Adjustable Cervical Collar, 12 settings (Infant to Neckless)	985604	50	Each	\$ 4.46	\$ 223.00
TOTAL for Section 9:					\$ 16,135.10

Initials of Bidder: JAC

Section 10: Head Immobilizers	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
AMBU Head Wedge Disposable Head Immobilizer, water-resistant, radiolucent, CT and MRI compatible, include 2 head straps. No substitutions.	9856178	2000	Each	\$ 3.61	\$ 7220.00
Laerdal Sta-Blok Head Immobilizer. Single use disposable device, radiolucent, Adjustable standard Vekro padded strap, latex free	2037034	2000	Each	\$ 3.70	\$ 7400.00
TOTAL for Section 10:					\$ 14620.00

Section 11: Miscellaneous Supplies	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Disposable OB Kit, Soft Packaging	3262005	20	Each	\$ 6.12	\$ 122.40
Alcohol Prep Pads, Medium Size TRIAD 200/bx	1048298	200	Box	\$.92	\$ 184.00
Bite Stick made of high density polyethylene	6675251	10	Each	\$.23	\$ 2.30
Bulb Syringe, 2oz size	9875548	10	Each	\$.93	\$ 9.30
Emesis Bags, single use, Clear, Graduate, 1000cc, latex free, rigid collar, automatic seal	6266991	1000	Each	\$ 1.11	\$ 1110.00
Hydrogen Peroxide 16oz Plastic bottle	1023816	96	Each	\$.63	\$ 60.48
Sterile Lubricating Jelly, 5g. 72/bx	1166726	400	Each	\$ 5.51	\$ 2204.00
Oxygen Cylinder Handwheel, Metal	1743752	10	Each	\$ 11.56	\$ 115.60
Large Oxygen Cylinder Wrench (aluminum)	6779948	5	Each	\$ 16.22	\$ 81.10
Encono Paramedic Shears Dk Blue 7 1/2"	4995723	80	Each	\$.86	\$ 68.80
Disposable Penlight	8310840	60	Each	\$.84	\$ 50.40
Single use push button activated, spring loaded, retractable Lancet, 100/bx	4963983	40	Box	\$ 11.17	\$ 446.80
Chloraprep 3mL Applicator, 2% Chlorhexidine Gluconate and 70% Isopropyl Alcohol	6020036	200	Each	\$.57	\$ 114.00
METTAG Triage Tags, with Bar code, single part 50/pk	4990468	1	Pack	\$ 38.08	\$ 38.08

Initials of Bidder: *DB*

Section 11: Miscellaneous Supplies (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Safety control seals, Pull Tie (numbered), 100/pkg	8860084	2	Pack	\$ 14.65	\$ 29.30
Razor, Medline Fixed Head, 100/bx	1113336	2	Box	\$ 13.20	\$ 26.40
Disposable Polyester Patient Blanket, 50x84", Blue or Grey	4996470	10	Each	\$ 3.89	\$ 38.90
Oxygen "D" Cylinder Gasket, Brass w/Rubber Center	4990776	5	Each	\$.76	\$ 3.80
Disposable Probe Cover for SureTemp Plus Thermometer, 25/bx	8402661	20	Box	\$ 7.73	\$ 154.60
Heavy Duty Ring Cutter	6357057	5	Each	\$ 26.47	\$ 132.35
TOTAL for Section 11:					\$ 499.58

Section 12: Infection Control	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Bemis bio hazard box wall safe type Bemis #150-020	8093581	200	Each	\$ 3.60	\$ 720.00
Wrap around goggles with indirect shield-vent 24/cs	7538492	5	Each	\$ 2.32	\$ 11.60
Clear lens safety glasses, anti-fog, contemporary styling, ANSI Z87.1 compliant	1074795	10	Each	\$	\$
Fluid shield mask with clear visor, anti-fog, 2" wrap around, ear loops 25/bx	1047324	2	Box	\$ 8.06	\$ 16.12
Inovel medical N95 respirator, all sizes, must meet CDC guidelines for tuberculosis exposure control in addition to NIOSH and CDC standards for N95 protection against airborne pathogens 24/pk	6835379	48	Each	\$	\$
3M Particulate Respirator and Surgical Mask 1860/1860S	7775551	25	Each	\$.80	\$ 20.00
3M Particulate Respirator, 8210	3359968	25	Each	\$.94	\$ 23.50
TOTAL for Section 12:					\$ 859.38

Initials of Bidder: VA

Fort Bend County BID 16-010

Section 13: Capitals	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Lifepack 12 basic carry case, to include Shoulder strap, right pouch, left pouch, and front cover, Physio Control #11260-00030	1100568	5	Each	\$ 255.77	\$ 1278.85
Lifepack 12 back pouch for carry case, Physio Control #11260-000029	4994550	5	Each	\$ 22.32	\$ 111.60
Lifepack 12 top pouch for carry case, Physio Control #11220-000028	4999402	5	Each	\$ 22.57	\$ 112.85
Lifepack 12 replacement should strap, Physio Control #11260-000037	4999120	5	Each	\$ 26.47	\$ 132.35
Aneroid Sphygmomanometer, infant, Nylon cuff, minimum 10 year calibration Warranty, with zippered carry case	1126090	5	Each	\$ 4.54	\$ 22.70
Aneroid Sphygmomanometer, pedi, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	1126087	5	Each	\$ 5.22	\$ 26.10
Aneroid Sphygmomanometer, adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered	1126088	10	Each	\$ 5.72	\$ 57.20
Aneroid Sphygmomanometer, large adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	1126092	5	Each	\$ 6.94	\$ 34.70
Aneroid Sphygmomanometer, thigh, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	1126091	5	Each	\$ 9.92	\$ 49.60
Adult full arm splint Fracture-Pak	4999265	10	Each	\$ 15.83	\$ 158.30
Adult full leg splint Fracture-Pak	4999266	10	Each	\$ 23.22	\$ 232.20
Ankle/Elbow splint Fracture-Pak	No Bid	10	Each	\$	\$
Pedi full arm splint Fracture-Pak	No Bid	10	Each	\$	\$
Pedi full leg splint Fracture-Pak	No Bid	10	Each	\$	\$
Greenline/D disposable fiber optic Laryngoscope handle, medium	8573609	20	Each	\$ 38.60	\$ 386.00
Oxygen flow meter with Ohmeda QC Adapter 1-15LPM	4997444	10	Each	\$ 11.36	\$ 227.20
ADScope 603 Stethoscope, Navy Blue, Stainless Steel, 21", w/additional eartips and diaphragm	4992009	20	Each	\$	\$
CPAP starter kit promo w/CPAP unit, 1 breathing circuit with harness, back pack, Medium mask	—	2	Each	\$ 26.67	\$ 266.70
Oxygen/Ventilator bag, yellow, D size, ProPak, #SA.06	—	No Bid	Each	\$	\$
Ohmeda Male and Ohmeda Female quick connect w/6" hose	—	No Bid	Each	\$	\$

Initials of Bidder: *JK*

Fort Bend County BID 16-010

Section 13: Capitals (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Thermometer, electronic, SureTemp Plus Model 690	2033856	2	Each	\$ 224.63	\$ 449.26
Probe and well kit, rectal 4', for SureTempPlus 690 thermometer	7418045	5	Each	\$ 66.41	\$ 332.05
Probe and well kit, oral 4', for SureTempPlus 690 thermometer	8030003	5	Each	\$ 14.87	\$ 74.35
Restraint strap seat belt buckle loop end, Black, 2 piece, 5'	3701050	10	Each	\$ 6.97	\$ 69.70
Restraint straps chest system, black, nylon, Metal push button, loop ends	2201285	10	Each	\$ 23.61	\$ 236.10
POSEY Locking Twice-as-Tough CUFF WRIST Restraint with lock on connecting strap, adjustable, machine washable	1198298	25	Each	\$ 70.05	\$ 1751.25
POSEY Locking Twice-as-Tough Ankle Restraint with lock on cuff and connecting strap, adjustable, machine washable	1198299	25	Each	\$ 70.05	\$ 1751.25
Oxygen cylinder with toggle, aluminum, D size	6778965	5	Each	\$ 39.65	\$ 198.25
Oxygen regulator/pressure reducer, brass, CGA 540 2800-R-2	4990448	10	Each	\$ 138.10	\$ 1381.00
Oxygen regulator, 1 DISS 1BARB 0-25 LPM	6773721	10	Each	\$ 57.29	\$ 572.90
Megamover plus transport unit, 40x80 Nonwoven ply gret w/backboard pockets, 1500 lb capacity	4992923	5	Each	\$ 17.19	\$ 85.95
Break-apart stretcher, aluminum, w/3 Patient restraint straps, minimum load Capacity 400 lb	4994965	2	Each	\$ 357.82	\$ 715.64
LP15 Standard Carry Case with Right & Left Pouches, Physio Control #11577-000002	4995532	5	Each	\$ 255.77	\$ 1278.85
LP15 Rear Pouch for carry case, Physio Control #11260-000039	4998146	5	Each	\$ 58.68	\$ 293.40
LP15 Shoulder Strap, Physio Control #11577-000001	4996043	5	Each	\$ 26.47	\$ 132.35
LUCAS 2 Disposable Suction Cup, 3/pk, Physio Control #11576-000046	7001374	6	Pack	\$ 102.30	\$ 613.80
LUCAS Patient Strap, Physio Control #11576-000050	No Bid		Each	\$ —	\$ —
LUCAS Stabilization Strap, Physio Control #21996-000064	7001644	6	Each	\$ 71.35	\$ 428.10
LUCAS Standard Back Plate, Physio Control #21996-000044	No Bid		Each	\$ —	\$ —
Replacement Ankle Hitch for QD3 & QD4 Traction	4990516	5	Each	\$ 8.73	\$ 43.70
Oxygen cylinder with toggle, aluminum, C size	1097410	5	Each	\$ 48.41	\$ 242.05

Initials of Bidder: *YAL*

Section 13: Capitals (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
S-Scott "ten" replacement battery, SN 3000 and below	4998206	5	Each	\$43.29	\$216.45
S-Scott Quickdraw replacement 12V rechargeable battery, Sealed Lead Acid	4999491	5	Each	\$44.12	\$220.60
Traction splint w/aluminum ratchet, Adult QD-4	8554046	2	Each	\$181.98	\$363.96
Traction splint w/aluminum ratchet, child QD-3	8551303	2	Each	\$181.98	\$363.96
Traction splint w/aluminum ratchet, Combination QD-3 and QD-4	8551485	2	Each	\$135.66	\$271.32
Kendrick KODE 1 vest, green	4998223	5	Each	\$79.55	\$397.75
S-Scott "ten" port suction unit w/charging shelf and power cord	4999873	2	Each	\$120.21	\$240.42
S-Scott "ten" replacement battery, SN >3001 and above	4998193	5	Each	\$	\$216.45
S-Scott Quickdraw w/spare battery, rechargeable 12V sealed lead acid	4996910	2	Each	\$	\$1292.40
Clipboard, 8.5" x 14" 6/cs Style-A holder	4526755	5	Each	\$	\$106.30
LA Rescue cervical collar bag, 24"L x 11"H x 5"W	NO BID		Each	\$	\$
Trauma/Air management bag III, 26" x 18.5" x 12.5", blue, Ferno #5111	6721719	5	Each	\$229.41	\$1147.05
S-Scott "ten" replacement battery, SN 3001 and higher	4998195	5	Each	\$	\$216.45
TOTAL for Section 13:					\$2256.02

Initials of Bidder: SPB

Section 14: Medication	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA.					
Adenosine 6mg/2mL (3mg/mL) 2mL Single dose	3230003	50	Each	\$ 144.17	\$ 7208.50
Adenosine 12mg/4mL (3mg/mL) 4mL Single dose	3230004	60	Each	\$ 273.44	\$ 16402.60
Acetaminophen 15mL Infant Drops (80mg per 0.8mL)	1100684	40	Each	\$ 2.19	\$ 87.60
Amiodarone, 150mg, 3mL Vial	1047056	50	Each	\$ 5.36	\$ 268.00
Aspirin 81mg Tablets 36/bottle	1022336	60	Each	\$.69	\$ 41.40
Atropine Sulfate 18g x 1 1/2", 0.1mg/mL, 10mL Prefilled Syringe with protected needle	2484141	200	Each	\$	\$
Atrovent Solution 0.5mg, 2.5mL	1181421	600	Each	\$.59	\$ 354.00
Cardizem 25mg 5mL Vial	1181983	50	Each	\$ 8.43	\$ 421.50
Diphenhydramine 50mg/mL, 1mL Vial	2585924	80	Each	\$ 4.68	\$ 374.40
Dextrose USP 50%, 18g protected needle, 25grams (0.5g/mL)	2583726	400	Each	\$ 35.81	\$ 14324.00
Diazepam Injection 10mg (5mg/mL) 2mL Single Dose	1046540	200	Each	\$ 60.02	\$ 12,004.00
Dopamine HCl in 5% Dextrose, 500mL IV Bag-800mg	9541035	5	Each	\$ 74.26	\$ 371.30
Epinephrine 1:1000, 1mg/mL, 1mL Single dose	1046844	50	Each	\$ 18.40	\$ 920.00
Epinephrine 1:1000, 30mg, 30mL Multi-dose Vial	1182741	50	Each	\$ 120.04	\$ 6,002.00
Epinephrine 1:10,000, 18g 1/2" (0.1mg/mL) 10mL Prefill Syringe with protected needle	2488161	800	Each	\$	\$
Amikate (Etomidate Injection), 20mg (2mg/mL), 10mL Single Dose Ampule	2580027	50	Each	\$ 43.15	\$ 2157.50
Fentanyl Citrate Injection USP, 250mcg (0.05mg per mL) in 5mL luer lock syringe	1047851	200	Each	\$ 62.96	\$ 12592.00
Glucagon 1mg Lilly Kit Red Box 2050A	2486064	40	Each	\$ 6.56	\$ 262.40
Glucose 37.5g Unit dose tube	2485965	200	Each	\$ 10.41	\$ 2082.00
Heparin Sodium 5000u, 1mL Carpuject	1049622	50	Each	\$ 6.64	\$ 332.00
Ibuprofen Oral Suspension 100mg, 5 mL	1240051	50	Each	\$ 1.96	\$ 98.00
C3 Ketamine 5mg/ml 10ml 10/box / controlled	1046874	50	Each	\$ 13.81	\$ 690.50
Lasix 40mg, 10mg/mL in 4mL Prefill Needleless Syringe	1047055	100	Each	\$ 25.00	\$ 2500.00

Initials of Bidder: *TRC*

Section 14: Medication (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA					
Lidocaine 2% with male luer lock pre-filled syringe, 100mg/5mL	248 8012	200	Each	\$12.04	\$ 2408.00
Lidocaine 2g in 500mL D5W	153 6016	50	Each	\$21.04	\$1052.00
Lidocaine 2%, 20mL, Multidose Vial	104 7771	50	Each	\$4.32	\$ 216.00
Magnesium Sulfate 50%, 1g/2mL Vial	259 3331	20	Each	\$4.60	\$ 92.00
Metoprolol 5mg, 5mL Vial	248 8794	50	Each	\$9.32	\$466.00
Midazolam 2mg, 2mL, single dose	119 2041	50	Each	\$1.79	\$ 89.50
Morphine Sulfate Injection, USP 1mg/mL, 10mL, single dose	104 6550	100	Each	\$6.12	\$ 612.00
Naloxone 2mg/2mL - 2mL Pre-filled Syringe	929 8759	100	Each	\$55.02	\$5502.00
Nitroglycerin Ointment, 2%, 30g Tube	191 0001	20	Each	\$124.01	\$2480.20
Nitrolingual Spray, 4.1g, 400mcg per Spray, 90 sprays per can	248 0607	5	Each	\$520.19	\$2600.95
Nitrostat, 0.4mg Sublingual Tabs, 25 per bottle	258 0313	20	Each	\$52.65	\$1053.00
Pepsid 20mg Tablet, Unit Dose	228 3418	40	Each	\$3.65	\$146.20
Albuterol Sulfate, USP Inhalation Solution, 0.083%, 2.5mg/3mL (0.83mg/mL), 25/bx	116 1818	32	Box	\$	\$
Rocuronium 10mg/mL, 10mL Vial	122 5666	100	Each	\$21.20	\$2120.00
Sodium Bicarb 8.4%, 50mEq, 50mL Prefilled luer lock syringe	104 6895	160	Each	\$33.01	\$5281.60
0.9% Sodium Chloride, 5mL in 12mL, luer lock syringe	987 1964	8000	Each	\$ 58	\$4640.00
Solmedrol 12.5mg, 2mL, Acto-vial	248 2254	200	Each	\$27.65	\$5530.00
Succinylcholine 200mg, 10mL vial	104 6945	100	Each	\$62.10	\$6210.00
Tetracaine Hydrochloride Ophthalmic Solution, 1/2%, 1mL, Single Dose Units, 12/bx		12	Each	\$	\$
Thiamine 100mg/mL in 2mL, Single dose vial	102 9069	200	Each	26.23	320.76
Vasostriect 20 unit, 1mL vial	102 9045	200	Each	\$9.81	\$7962.00
Carpuleject Injector	321 0091	200	Each	\$387.90	\$77508.00
Ondansetron 4mg 2mL VIAL 25EA/BX 4BX/CS	159 4899	20	Each	\$ 0.3	\$ 0.06
Mucosal Automation Device, Nasal/Oral, Latex free, 3mL Syringe	120 3737	200	Each	\$ 3.00	\$ 600.00
	420 4674	50	Each	\$	\$154.50
TOTAL for Section 14:					\$271,865.11

Initials of Bidder: *SRK*

CONTRACT SHEET
B16-010

THE STATE OF TEXAS
COUNTY OF FORT BEND

This memorandum of agreement made and entered into on the 12th day of August, 2015
by and between Fort Bend County in the State of Texas (hereinafter designated County), acting herein by
County Judge Robert Hebert, by virtue of an order of Fort Bend County Commissioners Court, and
HENRY SCHEIN INC (hereinafter designated Contractor).
(company name)

WITNESSETH:

The Contractor and the County agree that the bid and specifications for **Medical Supplies** which are
hereto attached and made a part hereof, together with this instrument and the bond (when required) shall
constitute the full agreement and contract between parties and for furnishing the items set out and
described; the County agrees to pay the prices stipulated in the accepted bid.

It is further agreed that this contract shall not become binding or effective until signed by the parties
hereto and a purchase order authorizing the items desired has been issued.

Executed at Richmond, Texas this 1st day of October, 2015.

By: Robert Hebert Fort Bend County, Texas
Robert Hebert, County Judge

By: [Signature]
Signature of Contractor

By: JESSE A. GARRINGER, VICE PRESIDENT
Printed Name and Title

As Per Original



COUNTY PURCHASING AGENT
Fort Bend County, Texas

Gilbert D. Jalomo, Jr., CPPB
County Purchasing Agent

(281) 341-8640
Fax (281) 341-8642 or 341-8645

Vendor Information

Federal ID # or S.S #	[REDACTED]	Dun and Bradstreet # 012430880
Type of Business	<input checked="" type="checkbox"/> Corporation/LLC <input type="checkbox"/> Sole Proprietor/Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Tax Exempt Organization	
Legal Company Name	Henry Schein Inc	Year Business was Established 1932
Remittance Address	DEPT CH 10241	
City/State/Zip	PALATINE, IL 60055-0241	
Physical Address	DIVISION → PO BOX 3227 (140 CROUCH COMMERCIAL COURT)	
City/State/Zip	IRMO, SC 29063	
County	Fort Bend County	Other: Richland
Phone/Fax Number	Phone: 800 845 3550	Fax: 800 533 4793
Contact Person	Jesse A. Branger	
E-mail	Jesse.Branger@HenrySchein.com	
Special Notes		
The Company listed above is a (check all that apply and attached certificate).	<input type="checkbox"/> DBE-Disadvantaged Business Enterprise Certification # _____ <input type="checkbox"/> SBE-Small Business Enterprise Certification # _____ <input type="checkbox"/> HUB-Texas Historically Underutilized Business Certification # _____ <input type="checkbox"/> WBE-Women's Business Enterprise Certification # _____ <input type="checkbox"/> MBE-Minority Business Enterprise Certification # _____	
Company's gross annual receipts:	<input type="checkbox"/> < \$500,000 <input type="checkbox"/> \$500,000-\$4,999,999 <input type="checkbox"/> \$5,000,000-\$16,999,999 <input type="checkbox"/> \$17,000,000-\$22,399,999 <input checked="" type="checkbox"/> \$22,400,000	
NAICs codes (Please enter all that apply).		

PLEASE NOTE: W-9 needs to be attached in order to be entered into our system

Request for Taxpayer Identification Number and Certification

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

1 Name (as shown) on your income tax return. Name is required on this line; do not leave this line blank.
HENRY SCHEIN INC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
 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) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
135 DURYEA ROAD

6 City, state, and ZIP code
MELVILLE, NY 11747-7382

7 List account number(s) here (optional)

Requester's name and address (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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

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or

Employer identification number

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Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 on page 3.

Sign Here Signature of U.S. person ▶ [Signature] Date ▶ 8/12/15

General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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?* on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Job No.: RFO

TAX FORM/DEBT/ RESIDENCE CERTIFICATION
(for Advertised Projects)

Taxpayer Identification Number (T.I.N.): _____

Company Name submitting Bid/Proposal: Henry Schain Inc

Mailing Address: PO BOX 3227, Lamo, SC 29063

Are you registered to do business in the State of Texas? Yes No

If you are an individual, list the names and addresses of any partnership of which you are a general partner or any assumed name(s) under which you operate your business

I. **Property:** List all taxable property in Fort Bend County owned by you or above partnerships as well as any d/b/a names. Include real and personal property as well as mineral interest accounts. (Use a second sheet of paper if necessary.)

Fort Bend County Tax Acct. No.*	Property address or location**
_____	<u>None</u>
_____	_____
_____	_____

* This is the property account identification number assigned by the Fort Bend County Appraisal District.
** For real property, specify the property address or legal description. For business personal property, specify the address where the property is located. For example, office equipment will normally be at your office, but inventory may be stored at a warehouse or other location.

II. **Fort Bend County Debt** - Do you owe any debts to Fort Bend County (taxes on properties listed in I above, tickets, fines, tolls, court judgments, etc.)?

Yes No If yes, attach a separate page explaining the debt.

III. **Residence Certification** - Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Fort Bend County requests Residence Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contracts; pertinent provisions of §2252.001 are stated below:

- (3) "Nonresident bidder" refers to a person who is not a resident.
- (4) "Resident bidder" refers to a person whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

I certify that _____ is a Resident Bidder of Texas as defined in Government Code §2252.001.
[Company Name]

I certify that Henry Schain Inc is a Nonresident Bidder as defined in Government Code §2252.001 and our principal place of business is Lamo, SC.
[Company Name] [City and State]

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.	OFFICE USE ONLY CERTIFICATION OF FILING
1 Name of business entity filing form, and the city, state and country of the business entity's place of business. Henry Schein Irmo, SC United States	Certificate Number: 2016-8672
2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed. Fort Bend County	Date Filed: 02/03/2016 Date Acknowledged:

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the goods or services to be provided under the contract.

B16-010
term contract-medical supplies

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary


5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



 Signature of authorized agent of contracting business entity

AFFIDAVIT NOTARY STAMP / SEAL ABOVE
 Sworn to and subscribed before me, by the said Jesse A. Garthner, this the 3rd day of February
 20 16 to certify which, witness my hand and seal of office.

 Signature of officer administering oath
GLENN WATIS Printed name of officer administering oath
NOTARY - SOUTH CAROLINA Title of officer administering oath

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
 CERTIFICATION OF FILING**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Henry Schein
 Irmo, SC United States

Certificate Number:
 2016-8672

Date Filed:
 02/03/2016

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County

Date Acknowledged:
 02/11/2016

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the goods or services to be provided under the contract.

B16-010
 term contract-medical supplies

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath