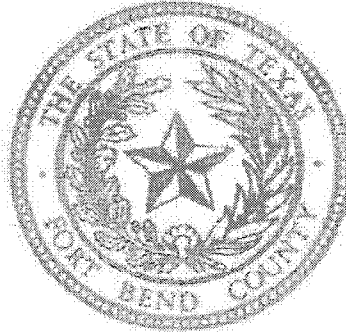


Midwest Medical Supply Co., LLC
13400 Lakefront Drive
Earth City, MO 63045
888-540-3232

*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

SUBMIT NO LATER THAN:

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

LABEL ENVELOPE:

BID 16-010
MEDICAL SUPPLIES

****NOTE:**

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

**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 Kreier, CPPB
Senior Buyer
cheryl.kreier@fortbendcountytexas.gov

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

Vendor Information

Midwest Medical Supply Co., LLC
Legal Name of Contracting Company

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

888-540-3232 Telephone Number
800-545-0165 Facsimile Number

13400 Lakefront Drive
Complete Mailing Address (for Correspondence)

Earth City, MO 63045
City, State and Zip Code

2675 Solution Center
Complete Remittance Address (if different from above)

Chicago, IL 60677-2006
City, State and Zip Code

Jo Ann Rudd, EMS Specialist
Authorized Representative and Title (printed)

JoAnn.Rudd@mmsmedical.com
Authorized Representative's Email Address

Jo Ann Rudd Signature of Authorized Representative
8/12/13 Date

Initials of Bidder *JR*

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- 1.2 General Requirements apply to all advertised bids; however, these may be superseded, whole or in part, by the scope, special requirements, specifications, special specifications or other data contained herein.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


Initials of Bidder: JK

- 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

Initials of Bidder: *JK*

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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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

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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.

Initials of Bidder: 

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

Fort Bend County BID 16-010

Section I: Airways	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
40mm Berman (dual channel) Oral Airway	TEL121801	10	Each	\$ 1.14	\$ 1.40
60mm Berman (dual channel) Oral Airway	TEL121802	10	Each	\$ 1.14	\$ 1.40
80mm Berman (dual channel) Oral Airway	TEL121803	10	Each	\$ 1.14	\$ 1.40
90mm Berman (dual channel) Oral Airway	TEL121804	100	Each	\$ 1.14	\$ 14.00
100 mm Berman (dual channel) Oral Airway	TEL121805	100	Each	\$ 1.14	\$ 14.00
Thomas E.T. Tube Holder Adult size	LAE100-10000	300	Each	\$ 2.58	\$ 774.00
Thomas E.T. Tube Holder Pediatric size	LAE100-20000	20	Each	\$ 2.58	\$ 51.60
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	TEL506225 <i>See Rusch</i>	10	Each	\$ 3.26	\$ 32.60
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	FOR100/103/030	10	Each	\$ 1.31	\$ 13.10
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	FOR100/103/035	10	Each	\$ 1.31	\$ 13.10
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	FOR100/103/040	10	Each	\$ 1.31	\$ 13.10
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	FOR100/103/045	10	Each	\$ 1.31	\$ 13.10
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	FOR100/103/050	10	Each	\$ 1.31	\$ 13.10
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	FOR100/102/055	20	Each	\$ 1.34	\$ 26.80

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Section 1: 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. <i>Smiths</i>	POE100/102/060	10	Each	\$ 1.34	\$ 13.40
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. <i>Smiths</i>	POE100/102/065	20	Each	\$ 1.34	\$ 26.80
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. <i>Smiths</i>	POE100/102/070	200	Each	\$ 1.34	\$ 268.00
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. <i>Smiths</i>	POE100/102/075	150	Each	\$ 1.34	\$ 201.00
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. <i>Smiths</i>	POE100/102/080	20	Each	\$ 1.34	\$ 26.80
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. <i>Smiths</i>	POE100/102/085	10	Each	\$ 1.34	\$ 13.40
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. <i>Smiths</i>	POE100/102/090	10	Each	\$ 1.34	\$ 13.40
30F Nasopharyngeal Airways	MSMS-23920	40	Each	\$ 1.56	\$ 62.40
36F Nasopharyngeal Airways	MSMS-23926	20	Each	\$ 1.56	\$ 31.20
1200cc Replacement/Disposable Suction Canister, for S-Scott "Ten" suction unit	DYN4675	200	Each	\$ 2.53	\$ 506.00
8F whistle tip Suction Catheter	DYN4808	20	Each	\$.17	\$ 3.40
10F whistle tip Suction Catheter	DYN4810	50	Each	\$.17	\$ 8.50
18F whistle tip Suction Catheter	DYN4818	50	Each	\$.17	\$ 8.50

Initials of Bidder: *JF*

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Section 1: Airways (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Yankaur Suction Tip w/Control	DYNM1690	300	Each	\$.34	\$ 102.00
Yankaur "Big Yank" Suction Tip w/Control Vent, Sterile, 11/32" open tip, integral blister tube and canister connector pre-attached	CONDCS19200	200	Each	\$ 6.45	\$ 1290.00
Suction Tubing Non Conducting Vinyl 72" x 1/4" ID	DYNM1686	300	Each	\$.60	\$ 180.00
Infant Medium Concentration Oxygen Mask	VEN2300	20	Each	\$.68	\$ 13.60
O2 Mask Pediatric Partial Non-Rebreather w/safety vent, 50/cs	VEN2201	4	Case	\$32.90	\$ 131.60
O2 Mask Adult Non-Rebreather w/o safety vent, 50/cs	VEN2102	60	Case	\$31.76	\$ 1905.60
O2 Nasal Cannula Adult, 7ft 50/cs	VEN1007	60	Case	\$12.40	\$ 744.00
O2 Supply Tubing 7ft 50/cs	VEN3007	1	Case	\$11.20	\$ 11.20
Bougie-to-go ET Tube Introducer, Adult 15F x 60cm with Coude Tip	SUN9-0212-82	100	Each	\$3.96	\$ 396.00
Bougie ET Tube Introducer, Pediatric 10F x 70cm with Coude Tip	SUN9-0211-70	25	Each	\$3.96	\$ 99.00
Scott Quickdraw Cannister w/short barbed tip	STESS2480-20	10	Each	\$15.19	\$ 151.90
O2 Nebulizer w/Tubing and Mouthpiece 50/cs	MQMS-22883	12	Case	\$36.70	\$ 440.40
Disposable Humidifier	TEL3230	10	Each	\$ 1.31	\$ 13.10
AMBU Spur II Bag Valve Mask Adult (with mask)	AMB520-211-000	400	Each	\$ 10.82	\$ 4328.00
AMBU Spur Bag Valve Mask Infant/Child (with Infant and Child masks)	AMB530-214-000	40	Each	\$16.68	\$ 667.20
Oxygen Nut & Stem (Plastic)	SUN8-2311-50	10	Each	\$.36	\$ 3.60
Magill Forceps Adult sizes	AME316	5	Each	\$3.93	\$ 19.65
Magill Forceps Child sizes	AMEB15	5	Each	\$3.60	\$ 18.00
Gastric Sump Tube, 48", 18F, Sterile	KEN98824986	30	Each	\$ 1.64	\$ 49.20
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 2	SUN5-S332-02	40	Each	\$ 3.84	\$ 153.60
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 3	SUN5-S332-03	100	Each	\$ 3.84	\$ 384.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 4	SUN5-S332-04	200	Each	\$ 3.84	\$ 768.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 0	SUN5-S333-00	20	Each	\$ 3.84	\$ 76.80
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 1	SUN5-S333-01	20	Each	\$ 3.84	\$ 76.80
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 2	SUN5-S333-02	40	Each	\$ 3.84	\$ 153.60

Initials of Bidder: *df*

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	SUNS-5333-00	80	Each	\$ 3.84	\$ 307.20
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 4	SUNS-5333-04	80	Each	\$ 3.84	\$ 307.20
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, Ohmeda connector, w/ Adult Medium Full Face Mask and Head Strap Pulmodyne # 313-7556XN	SUNS-02410-S2	20	Each	\$ 6.02	\$ 120.40
Pulmodyne O2 Max Vriable Trio Control Unit w/6" O2 Hose and DISS Connector, Pulmodyne #313-8000		20	Each	\$	\$
Pulmodyne replacement full Face Mask and Head Strap, Adult Small		20	Each	\$	\$
Pulmodyne replacement full Face Mask and Head Strap, Adult Large		20	Each	\$	\$
emergent respiratory products PORTO2VENT CPAP Soft-Seal Masks, size Small Adult		25	Each	\$	\$
emergent respiratory products PORTO2VENT CPAP Soft-Seal Masks, size Medium Adult		25	Each	\$	\$
emergent respiratory products PORTO2VENT CPAP Soft-Seal Masks, size Large Adult		25	Each	\$	\$
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		200	Each	\$	\$
9" x 3" IV Arm Board	PKDHS004-11-MPG	20	Each	\$ 1.49	\$ 29.80
12" x 3" IV Arm Board	PKDHS002-11-MPG	20	Each	\$ 1.07	\$ 21.40
18" x 3" IV Arm Board	PKDHS002-11-MPG	10	Each	\$ 0.65	\$ 6.50
14g x 5 1/4" Needle, Becton Dickinson # 382269	BID382269	50	Each	\$ 14.92	\$ 746.00
TOTAL for Section 1:					\$ 1586.80

Initials of Bidder: *JK*

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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	MSOMS-11101	500	Each	\$ 2.31	\$ 118.50
Transparent Film Dressing, Tegaderm, 4" x 4 3/4", Frame Style, 50/bx	3M11626	100	Each	\$ 82	\$ 82.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 14gauge x 2"	BEM49252594-02	120	Each	\$ 1.47	\$ 176.40
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 16gauge x 1 1/4"	BEM49252586-02	500	Each	\$ 1.47	\$ 735.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 18gauge x 1 1/4"	BEM49252560-02	1800	Each	\$ 1.47	\$ 2646.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 20gauge x 1 1/4"	BEM49252535-02	7500	Each	\$ 1.47	\$ 11,025.00
B BRAUN Introcan Safety IV Catheter, Universal bevel needle, Passive design for automatic safety activation, Color-coded packaging, 22gauge x 1"	BEM49252519-02	800	Each	\$ 1.47	\$ 1176.00
18g x 1 1/2" Needle Only 100/bx	BEM465120-02	1	Box	\$ 2.27	\$ 2.27
20g x 1 1/2" Needle Only 100/bx	EXE26418	1	Box	\$ 3.79	\$ 3.79
22g x 1 1/2" Needle Only 100/bx	EXE26412	1	Each	\$ 3.79	\$ 3.79
23g x 1" Needle Only 100/bx	EXE26408	1	Each	\$ 3.79	\$ 3.79
1cc 25g x 5/8" Syringe & Needle 100/bx	EXE26044	4	Box	\$ 9.32	\$ 37.28
3cc Syringe, Luer lock	BEM4610303-02	4	Box	\$ 4.04	\$ 16.16
5cc 22g x 1" Syringe & Needle 100/bx	BEM49252530	12	Box	\$ 21.24	\$ 254.88
10cc Syringe Luer Lock 100/bx	BEM4617100V-02	6	Box	\$ 7.65	\$ 45.90
30cc Syringe Luer Lock 30/bx	EXE26690	2	Box	\$ 11.70	\$ 23.40
60cc Syringe Luer Lock 30/bx	EXE26300	2	Box	\$ 17.47	\$ 34.94

Sold 100/bx
- \$ 23.70
SOLD 50/bx
\$ 41.00

Sold 50/bx
\$ 19.50
SOLD 25/bx
\$ 14.56

Initials of Bidder: JFC

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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	EXE26304	2	Box	\$14.56	\$29.12
Vacutainer Holder	BID361815	4000	Each	\$0.45	\$180.00
Vacutainer Luer Adapter 100/bx	EXE26537	60	Box	\$11.07	\$664.20
Latex Free Tourniquet, 1" x 18", 25 per roll, color = Blue	BID367203	2000	Each	\$3325	\$665.00
Glucometer Test Strips for Abbott OptimumEZ glucose meter, capillary, 100 strip/bx	MED11042	100	Box	\$44.32	\$4432.00
Control solution, tri-level, 1 row 1 mid 1 high per box for OptimumEZ or Precision XTRA	MED10551	10	Each	\$10.21	\$102.10
Maxi Drip Set, 82" 10GTTW/Bravo 24, Pre-slit Port, Removable 7" Extension, 50/bx	BAM352240	2500	Each	\$1.65	\$4125.00
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.	BAM352237			\$1.39	\$139.00
9% Sodium Chloride Injection USP-1000ml, 10/cs	BAY261324X	2500	Each	\$2.18	\$5450.00
9% Sodium Chloride Injection USP-500ml, 24/cs	BAY2613230	96	Each	\$2.36	\$226.56
9% Sodium Chloride Injection USP-250ml, 24/cs	BAY2613220	50	Each	\$2.25	\$112.50
9% Sodium Chloride for Irrigation, 500mL	BAY267123	500	Each	\$2.17	\$1085.00
Sterile Water for Irrigation, 500mL	BAY267113	100	Each	\$2.13	\$213.00
Safeline Injection Site: split septum access with two-piece male luer lock. Priming Volume: 0.25mL	BAMNF9100	50	Each	\$0.91	\$45.50
Smallbore Extension Set with bonded Ultrasite Injection site, Length: 7 in, Priming Volume: 0.6mL (approx)	BAM352244	8000	Each	\$1.27	\$10160.00
TOTAL for Section 2:					\$40829.07

Sold 25/06 \$11.25
 Sold 25/11 \$8.31
 4432.00
 Sold 10/05 \$364.00
 Sold 10/05 \$121.00
 J. W. O. N. M. J. S.

Initials of Bidder: *JW*

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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	DUN3172	10	Each	\$ 5.88	\$ 5.80
4" x 5yd Bandage, Self-Adherent, , individually packaged	DUN3174	20	Each	\$ 1.02	\$ 20.40
Combat Application Tourniquet (CAT), One-handed Tourniquet Utilizing Windlass System, Tactical Black	NAR30-0001	25	Each	\$ 24.81	\$ 620.25
Occlusive, non-adhering dressing, impregnated with white Petrolatum, 3" x 9" 50/bx	KEN0888041360S	2	Box	\$ 28.23	\$ 56.46
Small Oval Eye Pad 50/bx	DUN3360	1	Box	\$ 3.43	\$ 3.43
4x4 Non Sterile, non-woven, 4ply, 200/pkg	EMPH44420	100	Pack	\$ 2.00	\$ 200.00
4x4 Sterile 12 ply - 10/tray	DUK412-10	800	Tray	\$.59	\$ 472.00
4 1/2" x 4.1yd 6 ply Non Sterile Gauze Roll	DUK54S	100	Each	\$.43	\$ 43.00
4 1/2" x 4.1yd 6 ply Sterile Gauze Roll	DUK6NS	600	Each	\$.61	\$ 366.00
36" x 51" Triangular Bandage	MISM-11050	200	Each	\$.19	\$ 38.00
8" x 10" Abdominal Pad, 20/tray	DUK3503	80	Tray	\$ 2.47	\$ 197.60
1" x 3" Adhesive Strip Bandage 50/bx	ASAP02019-012000	40	Box	\$.54	\$ 21.60
Burn Sheet Sterile 60" x 96"	MISM-630033	40	Each	\$ 1.48	\$ 59.20
Trauma Dressing Sterile 10" x 30"	MISM-624001	60	Each	\$.73	\$ 43.80
Rapid Heat Instant Heat Pack, Pull Apart Style, 6/bx	RPD205H	60	Each	\$ 1.29	\$ 77.40
Rapid Cold Instant Cold Pack, Pull Apart Style, 24/css	RPD2004	250	Each	\$ 1.24	\$ 310.00
Ferno KED forehead/Chin Strap Replacement set of 2	MICK1418TAN	5	Set	\$ 5.76	\$ 28.80
54" Padded Board Splint	DHM60054	6	Each	\$ 3.85	\$ 23.10
3M Transpore Tape 1" x 10yd 12/bx	3MISA2-1	50	Box	\$ 10.09	\$ 504.50
1" x 10yd Paper Tape, hypo-allergenic	DUN3552	50	Box	\$ 3.51	\$ 175.50
2" x 10yd Waterproof Tape Kendall #3267 6/bx	KEN3267C	30	Box	\$ 16.89	\$ 506.70

Sold 2/26/15
\$20.88
sold 1/18/15
\$18.36

Initials of Bidder: *gf*

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	DYN3828	150	Each	\$ 2.95	\$ 442.50
One piece foil bunting with hood. Latex Free 17.5"x30" 18 micron/.70 gauge. Sterile	DNT650-4006-0060	5	Each	\$ 4.04	\$ 20.20
TOTAL for Section 3:					\$ 4236.21
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	LED12394	1000	Each	\$ 1.73	\$ 1730.00
Medicost Blue Sensor Disposable Electrodes # R-00-S-10 10/pk	AMR-00-S/10	8000	Pack	\$ 3.95	\$ 31,600.00
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables Kimberly Clark #3112-1730 (pediatrics)	CON3112-1730	20	Each	\$ 17.20	\$ 344.00
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables Kimberly Clark #3112-1731 (adult)	CON3112-1731	250	Each	\$ 15.05	\$ 3762.50
FilterLine H Set Adult/Pediatric Medtronic Ref# XS04660	PHC11996-00080	400	Each	\$ 14.47	\$ 5788.00
Nasal FilterLine Adult Medtronic Ref# XS04664	PHC11996-00081	1200	Each	\$ 9.21	\$ 11,052.00
TOTAL for Section 4:					\$ 54,276.50

5045/pk
48.65

Initials of Bidder: *[Signature]*

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Section 5: EKG Cables	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
LifePack12 Power Adapter Extension Cable Physio Control #11110-000051	PAC11110-000051	10	Each	\$ 117.42	\$ 1174.20
LifePack12 12-Lead ECG trunk cable with 4-wire limb leads, 5' Physio Control #11110-000018	PAC11110-000018	10	Each	\$ 309.25	\$ 3092.50
LifePack12 12-Lead ECG Patient Cable, 6-Wire Precordial Lead Attachment, Physio Control #11110-000022	PAC11110-000022	10	Each	\$ 124.30	\$ 1243.00
LifePack12 QUIK-COMBO Therapy Cable for use with LifePack12 defibrillator/monitor, Physio Control #11110-000040	PAC11110-000040	5	Each	\$ 323.10	\$ 1615.50
Masimo SET LNC-4 LNCS Patient Cable, 4-foot reusable connector cable, Physio Control #11171-000024	MAS2017	10	Each	\$ 140.05	\$ 1400.50
Masimo SET LNCS DCIP Reusable Sensor, Multise sensor for patients 10-50kg, Physio Control #11171-000018	MAS1864	25	Each	\$ 164.25	\$ 4106.25
Masimo SET LNCS DCI Adult Reusable Sensor, Multise sensor for patients >30kg, Physio Control #11171-000017	MAS1863	25	Each	\$ 153.33	\$ 3833.25
MNC-1 Adapter Cable (4 foot), allows LifePack 12 defibrillator/monitor with Masimo SpO2 to connect to Nellcor sensors, Physio Control #11996-000198	PAC11996-000198	5	Each	\$ 430.10	\$ 2150.50
NELLCOR SpO2 Sensor, DS100A, Adult reusable, Physio Control #11996-000060	NALCDS100A-1	25	Each	\$ 112.15	\$ 2803.75
NELLCOR SpO2 Cable Extension, DEC-4, Reusable, Physio Control #11110-000042	NALDDEC4	30	Each	\$ 38.05	\$ 1141.50
NELLCOR Oxisensor II Disposable Pediatric SpO2 Sensor, Physio Control #11996-000116	NALDZ0	100	Each	\$ 14.24	\$ 1424.00
NELLCOR Oxisensor II Disposable Infant SpO2 Sensor, Physio Control #11996-000115	NALIZ0	100	Each	\$ 18.50	\$ 1850.00

Initials of Bidder: *JK*

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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	PHC-11160-000009	10	Each	\$ 41.29	\$ 412.90
NIBP Large Adult Cuff for LifePack 15, reusable, Physio Control #11160-000007	PHC-11160-000007	10	Each	\$ 28.39	\$ 283.90
NIBP Adult Cuff for LifePack 15, reusable, Physio Control #11160-000005	PHC-11160-000005	10	Each	\$ 25.80	\$ 258.00
NIBP Pediatric Cuff for LifePack 15, reusable, Physio Control #11160-000003	PHC-11160-000003	5	Each	\$ 20.65	\$ 103.25
NIBP Infant Cuff for LifePack 15, reusable, 6x18cm, Physio Control #11160-000001	PHC-11160-000001	10	Each	\$ 18.06	\$ 180.60
NIBP Hose, 9 feet, reusable, Physio Control #21300-007299	PHC-21300-007299	10	Each	\$ 50.67	\$ 506.70
Extension Cable for AC/DC Power Adapter, Physio Control #11140-000080	PHC-11140-000080	10	Each	\$ 252.04	\$ 2520.40
Replacement Right Angle Power Cable for AC/DC Power Adapter, Physio Control #11140-000081	PHC-11140-000081	10	Each	\$ 252.04	\$ 2520.40
LifePack 15 defibrillator/monitor to PC USB Port cable, Physio Control #11996-000288	PHC-11996-000288	10	Each	\$ 244.82	\$ 2448.20
LifePack 15 Quik-Combo Therapy Cable, Physio Control #11113-000004	PHC-11113-000004	10	Each	\$ 323.10	\$ 3231.00
LifePack 15 Masimo Set Red LNCS Patient Cable 4ft, Physio Control #11996-000323	MAS2055	10	Each	\$ 140.05	\$ 1400.50
LifePack 15 NIBP Tubing 9ft, Physio Control #21300-007299	PHC-21300-007299	10	Each	\$ 50.67	\$ 506.70
LifePack 15 Pedi SPO2 Sensor Disposable, Physio Control #11171-000020	MAS2318	100	Each	\$ 13.61	\$ 1361.00
LifePack 15 Infant SPO2 Sensor Disposable, Physio Control #11171-000031	MAS1861	100	Each	\$ 13.59	\$ 1359.00
TOTAL for Section 5:					\$ 42927.50

Sold 20/6x
4/21/20
Sold 20/6x
4/21/20

Initials of Bidder: *[Signature]*

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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	MICFFS-700-XS	50	Box	\$ 9.28	\$ 464.00
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	MICFFS-700-S	250	Box	\$ 9.28	\$ 2320.00
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	MICFFS-700-M	600	Box	\$ 9.28	\$ 5568.00
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	MICFFS-700-L	800	Box	\$ 9.28	\$ 7424.00
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	MICFFS-700-XL	300	Box	\$ 9.28	\$ 2784.00
TOTAL for Section 6:				\$	\$ 18,560.00

Initials of Bidder: *SP*

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	MICFFE-775-S	50	Box	\$ 8.95	\$ 447.50
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	MICFFE-775-M	50	Box	\$ 8.95	\$ 447.50
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	MICFFE-775-L	50	Box	\$ 8.95	\$ 447.50
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	MICFFE-775-XL	50	Box	\$ 8.95	\$ 447.50
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	MICFFE-775-XXL	50	Box	\$ 8.95	\$ 447.50
TOTAL for Section 7:				\$	2237.50

Initials of Bidder: *JK*

Fort Bend County BID 16-010

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	1NN135650	1	Case	\$ 79.50	\$ 79.50
Sterile Gloves, Individually packed, ATM D6319 Standard Specification for Nitrile Exam Gloves for Medical Application, size: 8, 4 bx/cs, per case	1NN135800	1	Case	\$ 79.50	\$ 79.50
Sterile Gloves, Individually packed, ASTM D6319 Standard Specification for Nitrile Exam Gloves for Medical Application, size: 9, 4 bx/cs, per case	1NN135900	1	Case	\$ 79.50	\$ 79.50
TOTAL for Section 8:					\$ 238.50
Section 9: AMBU PERFIT Cervical Collars	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Infant	AMB600-264-S01	50	Each	\$ 3.84	\$ 192.00
Pediatric	AMB600-264-S02	50	Each	\$ 3.84	\$ 192.00
Regular	AMB600-264-S05	50	Each	\$ 3.84	\$ 192.00
Neckless	AMB600-264-S03	2000	Each	\$ 3.84	\$ 7680.00
Short	AMB600-264-S04	100	Each	\$ 3.84	\$ 384.00
Tall	AMB600-264-S06	20	Each	\$ 3.84	\$ 76.80
Perfit ACE Adjustable Cervical Collar, 16 setting (Neckless to Tall)	AMB600-281-000	2000	Each	\$ 5.55	\$ 11,100.00
Perfit Mimi ACE Adjustable Cervical Collar, 12 settings (Infant to Neckless)	AMB600-281-106	50	Each	\$ 5.55	\$ 277.50
TOTAL for Section 9:					\$ 20,094.30

Initials of Bidder: *JF*

Fort Bend County BID 16-010

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.		2000	Each	\$	
	AMB000-264-086			5.19	10380.00
Lacralal Sia-Blok Head Immobilizer. Single use disposable device, radiolucent, Adjustable standard Velcro padded strap, latex free	LAEN00-00001	2000	Each	\$	8320.00
				4.16	
TOTAL for Section 10:					\$ 18,700.00
Section 11: Miscellaneous Supplies	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Disposable OB Kit, Soft Packaging	MMD17102	20	Each	\$	93.60
Alcohol Prep Pads, Medium Size FRAD-200/bx	EMP2200S	200	Box	\$	250.00
Bite Stick made of high density polyethylene	AME4010T	10	Each	\$	2.90
Bulb Syringe, 2oz size	AMSAS0050Z	10	Each	\$	3.30
Emesis Bags, single use, Clear, Graduate, 1000cc, latex free, rigid collar, automatic seal	MEDNON7060D	1000	Each	\$	390.00
Hydrogen Peroxide 16oz Plastic bottle	HYDD0012	96	Each	\$	53.76
Sterile Lubricating Jelly, 5g, 72/bx	DYM125T	400	Each	\$	31.44
Oxygen Cylinder Handwheel, Metal	ALL00286S	10	Each	\$	122.80
Large Oxygen Cylinder Wrench (aluminum)	TEL5082	5	Each	\$	73.80
Enconco Paramedic Shears Drk Blue 7 1/2"	MSONS-SH024BL	80	Each	\$	54.40
Disposable Penlight	VRD14-823	60	Each	\$	33.00
Single use push button activated, spring loaded, retractable Lancet, 100/bx	HYPA80121	40	Box	\$	300.00
Chloraprep 3mL Applicator, 2% Chlorhexidine Gluconate and 70% Isopropyl Alcohol	CFM260400	200	Each	\$	184.00
METTAG Triage Tags, with Bar code, single part 50/pk	METTMF-137	1	Pack	\$	42.55

5061 sales
\$34.00

Initials of Bidder: *off*

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Section 11: Miscellaneous Supplies (cont'd)	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Safety control seals, Pull Tite (numbered), 100/pkg	HCL7816	2	Pack	\$ 17.99	\$ 35.98
Razor, Medline Fixed Head, 100/bx	MEDLINE70867	2	Box	\$ 37.28	\$ 74.56
Disposable Polyester Patient Blanket, 50x84", Blue or Grey	GRAB2292	10	Each	\$ 4.48	\$ 44.80
Oxygen "D" Cylinder Gasket, Brass w/Rubber Center	MEFARG-100N050	5	Each	\$ 4.76	\$ 23.80
Disposable Probe Cover for SureTemp Plus Thermometer, 25/bx	WJ905031-750	20	Box	\$.86	\$ 17.20
Heavy Duty Ring Cutter	ATME380	5	Each	\$ 11.64	\$ 58.20
TOTAL for Section 11:					\$ 199.63

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	BEMIS0020	200	Each	\$ 3.96	\$ 792.00
Wrap around goggles with indirect shield-vent 24/cs	GFA9615	5	Each	\$ 1.18	\$ 5.90
Clear lens safety glasses, anti-fog contemporary styling, ANSI Z87.1 compliant	KK25679	10	Each	\$ 3.33	\$ 33.30
Fluid shield mask with clear visor, anti-fog, 2" wrap around, ear loops 25/bx	DUKIS60	2	Box	\$ 12.50	\$ 25.00
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	MOLISI x N95	48	Each	\$.98	\$ 47.04
3M Particulate Respirator and Surgical Mask 1860/1860S	3M1860, 3M1860S	25	Each	\$.79	\$ 19.75
3M Particulate Respirator, 8210	3M8210	25	Each	\$.62	\$ 15.50
TOTAL for Section 12:					\$ 938.49

sol 24/5
89501

Initials of Bidder: *gf*

Fort Bend County BID 16-010

Section 13: Capital	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	PHC11260-00030	5	Each	\$ 26.98	\$ 134.90
Lifepack 12 back pouch for carry case, Physio Control #11260-00029	PHC11260-00029	5	Each	\$ 71.83	\$ 359.15
Lifepack 12 top pouch for carry case, Physio Control #11220-00028	PHC11220-00028	5	Each	\$ 46.97	\$ 234.85
Lifepack 12 replacement should strap, Physio Control #11260-00037	PHC11260-00037	5	Each	\$ 29.42	\$ 147.10
Aneroid Sphygmomanometer, infant, Nylon cuff, minimum 10 year calibration Warranty, with zippered carry case	VRD02-1084	5	Each	\$ 4.74	\$ 23.70
Aneroid Sphygmomanometer, pedi, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	VRD02-1083	5	Each	\$ 4.74	\$ 23.70
Aneroid Sphygmomanometer, adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered	VRD02-1081	10	Each	\$ 4.74	\$ 47.40
Aneroid Sphygmomanometer, large adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	VRD02-1082	5	Each	\$ 4.89	\$ 24.45
Aneroid Sphygmomanometer, thigh, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	VRD02-1085	5	Each	\$ 5.22	\$ 26.10
Adult full arm splint Fracture-Pak		10	Each	\$ ---	\$ N/B
Adult full leg splint Fracture-Pak		10	Each	\$ ---	\$ N/B
Ankle/Elbow splint Fracture-Pak		10	Each	\$ ---	\$ N/B
Pedi full arm splint Fracture-Pak		10	Each	\$ ---	\$ N/B
Pedi full leg splint Fracture-Pak		10	Each	\$ ---	\$ N/B
Greenline/D disposable fiber optic Laryngoscope handle, medium	MSNMS-46003	20	Each	\$ 30.48	\$ 609.60
Oxygen flow meter with Ohmeda QC Adapter 1-15LPM	PRMFMFA1005	10	Each	\$ 30.43	\$ 304.30
ADScope 603 Stethoscope, Navy Blue, Stainless Steel, 21", w/additional eartips and diaphragm	AME603N	20	Each	\$ 23.73	\$ 474.60
CPAP starter kit promo w/CPAP unit, 1 breathing circuit with harness, back pack, Medium mask		2	Each	\$ ---	\$ N/B
Oxygen/Ventilator bag, yellow, D size, ProPak, #SA.06		2	Each	\$ ---	\$ N/B
Ohmeda Male and Ohmeda Female quick connect w/6" hose		5	Each	\$ ---	\$ N/B

Initials of Bidder: *af*

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	WJA01690-200	2	Each	\$223.55	\$ 447.10
Probe and well k.t. rectal 4", for SureTempPlus 690 thermometer	WJA02892-000	5	Each	\$66.24	\$ 331.20
Probe and well k.t. oral 4", for SureTempPlus 690 thermometer	WJA02893-000	5	Each	\$66.24	\$ 331.20
Restraint strap seat belt buckle loop end, Black, 2 piece, 5'	DKM11826K	10	Each	\$6.30	\$ 63.00
Restraint straps chest system, black, nylon, Metal push button, loop ends	MPK12853K	10	Each	\$22.70	\$ 227.00
POSEY Locking Twice-as-Tough CUFF WRIST Restraint with lock on connecting strap, adjustable, machine washable	POS2792	25	Each	\$6.70	\$ 1417.50
POSEY Locking Twice-as-Tough Ankle Restraint with lock on cuff and connecting strap, adjustable, machine washable	POS2793	25	Each	\$6.70	\$ 1417.50
Oxygen cylinder with toggle, aluminum, D size	MEPK890MDT	5	Each	\$49.93	\$ 249.65
Oxygen regulator/pressure reducer, brass, CGA 540 2800-R-2	W02800-R-2	10	Each	\$78.75	\$ 787.50
Oxygen regulator, DISS 1BARB 0-25 LPM	MEPAK68125-B2D	10	Each	\$29.24	\$ 292.40
Megamover plus transport unit, 40x80 Nonwoven ply gret w/backboard pockets, 1500 lb capacity	GRAS3376	5	Each	\$ 70.71	\$ 353.55
Break-apart stretcher, aluminum, w/3 Patient restraint straps, minimum load Capacity 400 lb	WJNSA-400	2	Each	\$24.15	\$ 48.30
LP15 Standard Carry Case with Right & Left Pouches, Physio Control #11577-000002	PHC11577-000002	5	Each	\$26.98	\$ 134.90
LP15 Rear Pouch for carry case, Physio Control #11260-000039	PHC11260-000039	5	Each	\$68.13	\$ 340.65
LP15 Shoulder Strap, Physio Control #11577-000001	PHC11577-000001	5	Each	\$30.37	\$ 151.85
LUCAS 2 Disposable Suction Cup, 3/plk, Physio Control #11576-000046	PHC11576-000046	6	Pack	\$117.04	\$ 702.24
LUCAS Patient Strap, Physio Control #11576-000050	PHC11576-000050	6	Each	\$85.22	\$ 511.32
LUCAS Stabilization Strap, Physio Control #21996-000064	PHC21996-000064	6	Each	\$80.00	\$ 480.00
LUCAS Standard Back Plate, Physio Control #21996-000044	PHC21996-000044	2	Each	\$34.92	\$ 69.84
Replacement Ankle Hitch for QD3 & QD4 Traction	FAK1124200	5	Each	\$2.93	\$ 14.65
Oxygen cylinder with toggle, aluminum, C size	MEPK890MDT	5	Each	\$44.90	\$ 224.50

Initials of Bidder: *af*

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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		5	Each	\$ —	\$ NIB
S-Scott Quickdraw replacement 12V rechargeable battery, Sealed Lead Acid		5	Each	\$ —	\$ NIB
Traction splint w/aluminum ratchet, Adult QD-4	PAR1126524	2	Each	\$199.35	\$ 358.70
Traction splint w/aluminum ratchet, child QD-3	PAR1126522	2	Each	\$199.35	\$ 358.70
Traction splint w/aluminum ratchet, Combination QD-3 and QD-4	PAR1126726	2	Each	\$343.37	\$ 686.74
Kendrick KODE 1 vest, green	MOMS-ED2253	5	Each	\$51.35	\$ 256.75
S-Scott "ten" port suction unit w/charging shelf and power cord		2	Each	\$ —	\$ NIB
S-Scott "ten" replacement battery, SN >3001 and above		5	Each	\$ —	\$ NIB
S-Scott Quickdraw w/spare battery, rechargeable 12V sealed lead acid		2	Each	\$ —	\$ NIB
Clipboard, 8.5" x 14" 6/cs Style-A holder	SAV10019	5	Each	\$27.76	\$ 138.80
LA Rescue cervical collar bag, 24"L x 11"H x 5"W		5	Each	\$ —	\$ NIB
Trauma/Air management bag III, 26" x 18.5" x 12.5", blue, Ferno #5111	HER0819802	5	Each	\$280.00	\$ 1400.00
S-Scott "ten" replacement battery, SN 3001 and higher		5	Each	\$ —	\$ NIB
TOTAL for Section 13:				\$ 1995.31	

Initials of Bidder: *JL*

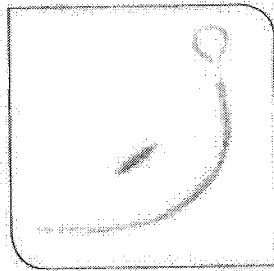
Section 14: Medication	Vendor's Item Number	Estimated Annual Quantity	Unit of Measure	Unit Price	Extended Price
Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA.					
Adenosine 6mg/2mL (3mg/mL) 2mL Single dose		50	Each	\$	\$
Adenosine 12mg/4mL (3mg/mL) 4mL Single dose		60	Each	\$	\$
Acetaminophen 15mL Infant Drops (80mg per 0.8mL)		40	Each	\$	\$
Amiodarone, 150mg, 3mL Vial		50	Each	\$	\$
Aspirin 81mg Tablets 36/bottle		60	Each	\$	\$
Atropine Sulfate 18g x 1 1/2", 0.1mg/mL, 10mL Prefilled Syringe with protected needle		200	Each	\$	\$
Atrovent Solution 0.5mg, 2.5mL		600	Each	\$	\$
Cardizem 25mg, 5mL Vial		50	Each	\$	\$
Diphenhydramine 50mg/mL, 1mL Vial		80	Each	\$	\$
Dextrose USP 50%, 18g protected needle, 25grams (0.5g/mL)		400	Each	\$	\$
Diazepam Injection 10mg (5mg/mL) 2mL Single Dose		200	Each	\$	\$
Dopamine HCL in 5% Dextrose, 500mL IV Bag-800mg		5	Each	\$	\$
Epinephrine 1:1000, 1mg/mL, 1mL Single dose		50	Each	\$	\$
Epinephrine 1:1,000, 30mg, 30mL Multi-dose Vial		50	Each	\$	\$
Epinephrine 1:10,000, 18g, 1/2" (0.1mg/mL) 10mL Prefill Syringe with protected needle		800	Each	\$	\$
Amidate (Etomidate Injection), 20mg (2mg/mL), 10mL Single Dose Ampule		50	Each	\$	\$
Fentanyl Citrate Injection USP, 250mcg (0.05mg per mL) in 5mL luer lock syringe		200	Each	\$	\$
Glucagon 1mg Lilly Kit Red Box 2050A		40	Each	\$	\$
Glucose 37.5g Unit dose tube		200	Each	\$	\$
Heparin Sodium 5000u, 1mL Carpuject		50	Each	\$	\$
Ibuprofen Oral Suspension 100mg, 5 mL		50	Each	\$	\$
C3 Ketamine 5mg/ml 10ml 10/box/ controlled		50	Each	\$	\$
Lasix 40mg, 10mg/mL in 4mL Prefill Needleless Syringe		100	Each	\$	\$

Initials of Bidder: *gl*

Fort Bend County BID 16-010

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 prefilled syringe, 100mg/5mL		200	Each	\$	\$
Lidocaine 2g in 500mL D5W		50	Each	\$	\$
Lidocaine 2%, 20mL Multidose Vial		50	Each	\$	\$
Magnesium Sulfate 50%, 1g/2mL Vial		20	Each	\$	\$
Metoprolol 5mg, 5mL Vial		50	Each	\$	\$
Midazolam 2mg, 2mL single dose		50	Each	\$	\$
Morphine Sulfate Injection, USP 1mg/mL, 10mL single dose		100	Each	\$	\$
Naloxone 2mg/2mL - 2mL Pre-filled Syringe		100	Each	\$	\$
Nitroglycerin Ointment, 2%, 30g Tube		20	Each	\$	\$
Nitrolingual Spray, 4.1g, 400mcg per Spray, 90 sprays per can		5	Each	\$	\$
Nitrostat, 0.4mg Sublingual Tabs, 25 per bottle		20	Each	\$	\$
Pepsid 20mg Tablet, Unit Dose		40	Each	\$	\$
Albuterol Sulfate, USP Inhalation Solution, 0.083%, 2.5mg/3mL (0.83mg/mL), 25/bx		52	Box	\$	\$
Rocuronium 10mg/mL, 10mL Vial		100	Each	\$	\$
Sodium Bicarb 8.4%, 50mEq, 50mL Prefilled luer lock syringe		160	Each	\$	\$
0.9% Sodium Chloride, 5mL in 12mL luer lock syringe		8000	Each	\$	\$
Solunadrol 12.5mg, 2mL Acto-vial		200	Each	\$	\$
Succinylcholine 200mg, 10mL vial		100	Each	\$	\$
Tetracaine Hydrochloride Ophthalmic Solution, 1/2%, 1mL Single Dose Units, 12/bx		12	Each	\$	\$
Thiamine 100mg/mL in 2mL Single dose vial		200	Each	\$	\$
Vasostriect 20 unit, 1mL vial		200	Each	\$	\$
Carpuleject Injector		20	Each	\$	\$
Ondansetron 4mg 2ml VIAL 25EA/BX 4BXCS		200	Each	\$	\$
Mucosal Automation Device, Nasal/Oral, Latex free, 3mL Syringe		50	Each	\$	\$
TOTAL for Section 14:					\$ <u>110</u>

Initials of Bidder: *JF*



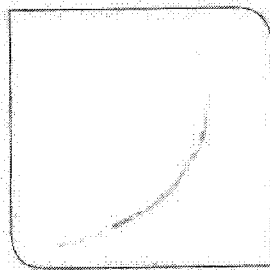
100/102/060
Clear PVC

AIRCARE® Cuffed Endotracheal Tubes (Oral / Nasal) with Preloaded Stylet



PRODUCT CODE	DESCRIPTION	I.D. (mm)	UNITS PER CASE
100/102/030	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	3.0	10
100/102/035	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	3.5	10
100/102/040	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	4.0	10
100/102/045	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	4.5	10
100/102/050	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	5.0	10
100/102/055	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	5.5	10
100/102/060	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	6.0	10
100/102/065	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	6.5	10
100/102/070	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	7.0	10
100/102/075	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	7.5	10
100/102/080	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	8.0	10
100/102/085	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	8.0	10
100/102/090	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	9.0	10
100/102/010	AIRCARE® Endotracheal Tube, Preloaded Stylet, Cuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	10.0	10

02 Intubation Systems



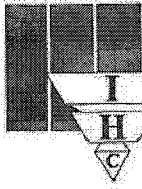
100/103/045
Clear PVC

AIRCARE® Uncuffed Endotracheal Tubes (Oral / Nasal) with Preloaded Stylet



PRODUCT CODE	DESCRIPTION	I.D. (mm)	UNITS PER CASE
100/103/030	AIRCARE® Endotracheal Tube, Preloaded Stylet, Uncuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	3.0	10
100/103/035	AIRCARE® Endotracheal Tube, Preloaded Stylet, Uncuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	3.5	10
100/103/040	AIRCARE® Endotracheal Tube, Preloaded Stylet, Uncuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	4.0	10
100/103/045	AIRCARE® Endotracheal Tube, Preloaded Stylet, Uncuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	4.5	10
100/103/050	AIRCARE® Endotracheal Tube, Preloaded Stylet, Uncuffed, Magill, Oral / Nasal, Standard Connector, Clear PVC	5.0	10

I.D.: Inner Diameter



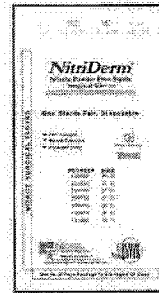
**INNOVATIVE
HEALTHCARE
CORPORATION**

www.ihsolutions.com

Product Literature

Characteristics

These nitrile synthetic surgical gloves contain no natural rubber latex proteins. Soft, highly elastic formulation provides the maximum in comfort, fit and protection, while offering exceptional tactile sensitivity.



**Surgical Glove
Sterile**



NitrDerm®

**Nitrile
Series 135**

PRODUCT DETAILS

SIZE	ITEM NO.	PACKAGING	DESCRIPTION
5.5	135550	25 pairs/box, 4 boxes/case	Gloves, Surgical, Nitrile, Sterile, Powder-Free, Textured
6	135600	25 pairs/box, 4 boxes/case	
6.5	135650	25 pairs/box, 4 boxes/case	
7	135700	25 pairs/box, 4 boxes/case	
7.5	135750	25 pairs/box, 4 boxes/case	
8	135800	25 pairs/box, 4 boxes/case	
8.5	135850	25 pairs/box, 4 boxes/case	
9	135900	25 pairs/box, 4 boxes/case	

Features

- Textured
- Low Modulus
- Non-Latex

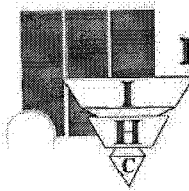
Benefits

- Improved Wet/Dry Grip
- Softer, More Comfortable Fit
- No Risk of Latex Allergens

Product Solutions You Trust

Specification Sheet on reverse side

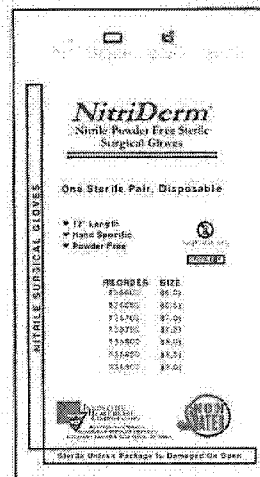
135L-051315



**INNOVATIVE
HEALTHCARE
CORPORATION**
www.ihcsolutions.com

Specification Sheet

NitriDerm® Nitrile Powder Free Sterile Surgical Gloves



Product Attributes

- Textured
- Low Modulus
- Non Latex

Benefits

- Improved Wet/Dry Grip
- Softer, More Comfortable Fit
- Reduced Chances of Latex Allergic Reactions

NitriDerm® is manufactured in compliance with multiple international standards, including the following:

Designation	Standard
ASTM D6319	Standard Specification for Nitrile Examination Gloves for Medical Application
ASTM D5151	Standard Test Method for Detection of Holes in Medical Gloves
ASTM F1671	Standard Test Method for Resistance of Materials Used in Protective Clothing to Penetration by Blood-Borne Pathogens
ASTM D3577	Standard Specification for Rubber Surgical Gloves

Average Length	Average Palm Thickness	Average Finger Thickness
11.5 in ± 290 mm	6.3 mil ± 0.16 mm	7.0 mil ± 0.18 mm

Tensile Strength & Elongation	Before Aging	After Accelerated Aging
Tensile Strength (Mpa)	26	23
ASTM Requirement Min. (Mpa)	14	14
Elongation (%)	670	620
ASTM Requirement Min. (%)	500	400

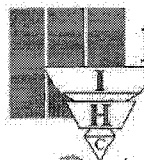


Intertek

Innovative Healthcare Corporation
is certified to both ISO 9001:2008
QMS and ISO 13485:2003 QMS
for medical devices.



Intertek



**INNOVATIVE
HEALTHCARE
CORPORATION**

Product Solutions You Trust.

1-800-272-1533

CONTRACT SHEET
B16-010

THE STATE OF TEXAS
COUNTY OF FORT BEND

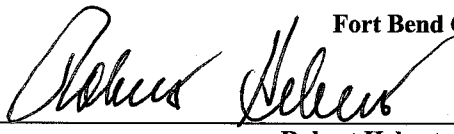
This memorandum of agreement made and entered into on the 8th day of September, 20 15
by and between Fort Bend County in the State of Texas (hereinafter designated County), acting herein by
County Judge Robert Hebert, by virtue of an order of Fort Bend County Commissioners Court, and
Midwest Medical Supply Co., LLC (hereinafter designated Contractor).
(company name)

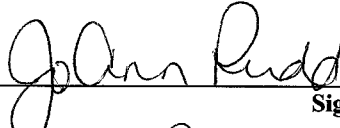
WITNESSETH:

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.

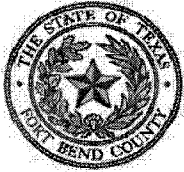
It is further agreed that this contract shall not become binding or effective until signed by the parties
hereto and a purchase order authorizing the items desired has been issued.

Executed at Richmond, Texas this 1st day of October, 20 15.

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

By: 
Signature of Contractor

By: JoAnn Rudd, EMS Specialist
Printed Name and Title



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 #	05-396-8590
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	Midwest Medical Supply Co., LLC		
Remittance Address	2675 Solution Center		
City/State/Zip	Chicago, IL 60677-2006		
Physical Address	13400 Lakefront Drive		
City/State/Zip	Earth City, MO 63045		
County	Fort Bend County	Other:	St Louis
Phone/Fax Number	Phone: 888-540-3232	Fax:	800-545-0065
Contact Person	Jo Ann Rudd		
E-mail	JoAnn.Rudd@mmsmedical.com		
Special Notes	orders can be emailed to EMSorders@mmsmedical.com		
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 checked="" 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 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.

Print or type
 See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. MIDWEST MEDICAL SUPPLY COMPANY LLC	
2 Business name/disregarded entity name, if different from above MMS/MMS a MEDICAL SUPPLY COMPANY/SAINT LOUIS HOMECARE, INC/A.O.S. INC.	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) S <small>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.</small> <input type="checkbox"/> Other (see instructions) ▶	
4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) 13400 LAKEFRONT DRIVE	Requestor's name and address (optional)
6 City, state, and ZIP code EARTH CITY, MO 63045-1516	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the 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								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-
-	-	-	-					
OR								
Employer identification number								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> </tr> <tr> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> </tr> </table>								

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 ▶

Date ▶ **7-27-15**

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.

OK

Job No.: _____

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

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

Company Name submitting Bid/Proposal: Midwest Medical Supply Co, LLC

Mailing Address: 13400 Lakefront Drive Earth City, MO 63045

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.)

<u>Fort Bend County Tax Acct. No.*</u>	<u>Property address or location**</u>
<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 Midwest Medical Supply Co, LLC is a Nonresident Bidder as defined in Government Code §2252.001 and our principal place of business is Earth City, MO.
[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

Certificate Number:
2016-9755

Date Filed:
02/05/2016

Date Acknowledged:
02/11/2016

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

Midwest Medical Supply Co., LLC
Earth City, MO United States

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

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 for 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