

From: [Fyffe, Christopher](#)
To: [Carabajal, Jessica](#); [Krejci, Cheryl](#)
Cc: [Gray, Craig](#); [Fyffe, Christopher](#)
Subject: RE: Term Contract Renewal Form for B18-003 - Medical Supplies
[image001.png](#)
Attachments: [B18-003.2019.Ren Req Form.Bound Tree Signed.pdf](#)
[Renewal Item List - Fort Bend County 18-003.xls](#)

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good Evening Jessica & Cheryl,

Bound Tree would like to move forward with the renewal of the above contract for renewal period of October 1, 2018 and September 30, 2019. Prior to the renewal going into effect, it is vital to discuss price increases.

We have received notification of price increases from multiple manufacturers that have recently taken effect. These were nationwide increases not just increases for Bound Tree. We are requesting that our contract prices be amended to reflect the amount of those manufacturer increases.

Please review the attached excel spreadsheet "Renewal Item List-Fort Bend County 18-003" for all items and increases associated with this contract.

If you have any questions regarding this renewal, please let Craig Gray or me know.

Kind regards,

Chris Fyffe

Bound Tree Medical | Senior Pricing Analyst, Bids & Contracts

5000 Tuttle Crossing, Dublin, Ohio 43016

Direct 800.533.0523 x 5374

Christopher.fyffe@boundtree.com | www.boundtree.com

.....
...**Customer Service** 800.533.0523|Fax 800.257.5713

Fort Bend County Bid No. 18-003 "Term Contract for Medical Supplies"

Vendor Name	Item ID	Item Description	Uo M	Current Price	New Price	Increase %
B. BRAUN MEDICAL, INC	519-474921	Extension set, small bore, 7 in, w/bonded ULTRASITE Needlefree valve, kink-resistant tubing, 50/cs	CS	\$ 105.50	\$ 113.98	8.03%
COVIDIEN	47-31439766PK	Electrode, Medi-Trace Mini, ECG monitoring, pediatric, foam, teardrop shape, adhesive hydrogel 5/pk	PK	\$ 0.84	\$ 0.90	7.04%
BAXTER HEALTHCARE-DMG	607113	Sterile Water for Irrigation, 500ml Plastic Pour Bottle 18ea/cs	EA	\$ 2.61	\$ 2.69	3.01%
ANIMAL HEALTH	620038	NEEDLE HYPODERMIC 23 GAUGE X 1 IN 100/BX 10BX/CS	BX	\$ 6.15	\$ 7.07	15.00%
PHYSIO-CONTROL, INC.	11260-000029	BACK POUCH FOR LP12 - NOT FOR USE W/SLA BATTERY	EA	\$ 70.65	\$ 76.15	7.78%
PFIZER INC. (HOSPIRA)	2305-17	C4 MIDAZOLAM 2MG, 2ML VIAL 25/BOX	BX	\$ 25.47	\$ 27.98	9.84%
PHYSIO-CONTROL, INC.	2748-01011	REPLACEMENT SHOULDER STRAP FOR LP12	EA	\$ 28.80	\$ 31.14	8.11%
PHYSIO-CONTROL, INC.	2748-03022	BASIC CARRY CASE FOR LP12 BLACK, INCL SHOULDER STRAP, RT AND LT POUCH, FRONT COVER	EA	\$ 279.00	\$ 299.23	7.25%
PFIZER INC. (HOSPIRA)	371104	*MFG B/O* SEE NOTES C4 DIAZEPAM 5MG/ML 2ML LUER LOCKING CARPUJECT 10/BX CS04	BX	\$ 294.00	\$ 321.79	9.45%
EMERGENCY MEDICAL PRODUCTS INC	LA0700	LA RESCUE Cervical Collar Bag, Navy, 24 in L x 11 in H x 5 in W	EA	\$ 16.49	\$ 19.92	20.82%



OFFICE OF COUNTY PURCHASING AGENT
Fort Bend County, Texas

Term Contract Renewal Form

emailed
6/5/18
10:35am

Solicitation #: Bid 18-003

Title: Term Contract for Medical Supplies

Contracted Vendor: Concordance/MMS

Ms. Boggan,

Our contract with your company for the above referenced expires September 30, 2018. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through September 30, 2019 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to cheryl.krejci@fortbendcountytexas.gov. Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by Monday, June 4, 2018, 4:00 PM.

☒ Yes, I agree to renewing our agreement with Fort Bend County under the same terms and conditions.

☐ No, I do not wish to renew our agreement with Fort Bend County.

*with attached price
adjustments

If Yes, please provide a Form 1295 along with this renewal form by replying to this email.

Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, extensions or renewals are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

On-line instructions:

Name of governmental entity is to read: Fort Bend County

Identification number used by the governmental entity is: B18-003

Description is to read: Term Contract for Medical Supplies

After receiving the Form 1295 with the Certification Number and Date Filed, please print the form, have notarized and sign, then email the Form 1295 and this Term Contract Renewal Form to cheryl.krejci@fortbendcountytexas.gov. However, if your company is publicly traded you are not required to complete this form.

JoAnn Rudd
Signature of Authorized Representative

6/5/18
Date

JoAnn Rudd, EMS Specialist
Printed Name and Title of Authorized Representative

ACCOUNT NAME:	Fort Bend, TX	3015932
BILL TO#:	AAEMSTX170	
EFFECTIVE DATE:	10/1/2018	
EXPIRATION DATE:	9/30/2019	
Bid #	18-003	

ITEM NUMBER	UNIT OF MEASURE	UNIT PRICE	2018 PRICE	FOR BID DEPT INFO ONLY	
				Description	Line #
WESMCW-2BC	EA	3.0500	3.2900	Metal Wrench W/ Chain	Sec 10
W/A05031-750	BX	0.8600	0.8800	Suretemp Prode Cover	Sec 10
3/M9660	EA	3.6000	3.9600	Clipper Blade	Sec 10

8%
2%
10%



OFFICE OF COUNTY PURCHASING AGENT
Fort Bend County, Texas

Term Contract Renewal Form

Solicitation #: Bid 18-003

Title: Term Contract for Medical Supplies

Contracted Vendor: Henry Schein

Mr. Goldy,

Our contract with your company for the above referenced expires September 30, 2018. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through September 30, 2019 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to cheryl.krejci@fortbendcountytexas.gov. Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by Monday, June 4, 2018, 4:00 PM.

☒ Yes, I agree to renewing our agreement with Fort Bend County under the same terms and conditions.

☐ No, I do not wish to renew our agreement with Fort Bend County.

If Yes, please provide a Form 1295 along with this renewal form by replying to this email.

Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, extensions or renewals are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

On-line instructions:

Name of governmental entity is to read: Fort Bend County.

Identification number used by the governmental entity is: B18-003.

Description is to read: Term Contract for Medical Supplies

Reading Program.

After receiving the Form 1295 with the Certification Number and Date Filed, please print the form, have notarized and sign, then email the Form 1295 and this Term Contract Renewal Form to cheryl.krejci@fortbendcountytexas.gov. However, if your company is publicly traded you are not required to complete this form.


Signature of Authorized Representative

6/27/18
Date

Andy Goldy, GM EMS
Printed Name and Title of Authorized Representative



OFFICE OF COUNTY PURCHASING AGENT
Fort Bend County, Texas

Term Contract Renewal Form

Solicitation #: Bid 18-003

Title: Term Contract for Medical Supplies

Contracted Vendor: Life-Assist

Mr. Nelson,

Our contract with your company for the above referenced expires September 30, 2018. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through September 30, 2019 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to cheryl.krejci@fortbendcountytexas.gov. Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by Monday, June 4, 2018, 4:00 PM.

☒ Yes, I agree to renewing our agreement with Fort Bend County under the same terms and conditions with the attached price increases.

☐ No, I do not wish to renew our agreement with Fort Bend County.

If Yes, please provide a Form 1295 along with this renewal form by replying to this email.

Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, extensions or renewals are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

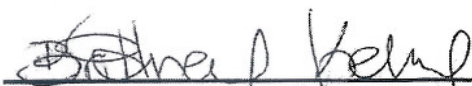
On-line instructions:

Name of governmental entity is to read: Fort Bend County.

Identification number used by the governmental entity is: B18-003.

Description is to read: Term Contract for Medical Supplies

After receiving the Form 1295 with the Certification Number and Date Filed, please print the form, have notarized and sign, then email the Form 1295 and this Term Contract Renewal Form to cheryl.krejci@fortbendcountytexas.gov. However, if your company is publicly traded you are not required to complete this form.


Signature of Authorized Representative

6/4/2018

Date

Brittney Kelly, Pricing Specialist

Printed Name and Title of Authorized Representative

Contract Price Comparison Report

Life-Assist, Inc.
11277 Sunrise Park Dr.
Rancho Cordova, CA 95742
800-824-6016 (Phone)
800-290-9794 (Fax)

Contract #: 77471EMS
Compare Pricing from Version: 16030 - 10/16/2017
Report Version: 17260 - 10/1/2018

Price INCREASES

Item No	BL	New Price	Old Price	Change	% Change	Description
CHI_DR0741-14	Y	13.41	12.75	0.66	5.2	Tetracaine HCL BPK 0.5%, 4ml Drops
DR0047-22	Y	10.69	9.9	0.79	8	Solu-Medrol (Methylprednisolone), 125 mg, 2 ml VIAL
DR0418-13	Y	39.9	36.46	3.44	9.4	Nitroglycerin Tablets (Nitrostat), 0.4 mg (Bottle of 25)
DR1775-01	Y	9.57	8.74	0.83	9.5	Dextrose Infant 2.5 gm, 25%, 10 ml ANSYR™ Syringe
DR3002-01	Y	17.96	17.1	0.86	5	Sodium Chloride Flush, 10 ml MONOJECT SYRINGE, BX/30
DR4200-06	Y	74.78	69	5.78	8.4	Rocuronium, 100 mg, 10 ml VIAL (Box of 10) REFRIGERATED
DR5238-64	Y	37.12	33.49	3.63	10.8	Ondansetron Oral Dissolving Tabs, 4 mg (Pack of 30)
HOSP_DR2267-20	Y	5.17	4.72	0.45	9.5	Labetalol, 100 mg, 20 ml VIAL
IT100	Y	7.3484	6.39	0.9584	15	MAD® Mucosal Atomization Device with 3cc Syringe
IT103	Y	6.4516	5.61	0.8416	15	MAD® Mucosal Atomization Device
KEND_8881570125	Y	19.53	18.6	0.93	5	Monoject Flush Syringe, Saline, 5ml/12ml Fill, bx/30



OFFICE OF COUNTY PURCHASING AGENT
Fort Bend County, Texas

Term Contract Renewal Form

Solicitation #: Bid 18-003

Title: Term Contract for Medical Supplies

Contracted Vendor: Nashville Medical and EMS Products, Inc.

Mr. Sadarangani,

Our contract with your company for the above referenced expires September 30, 2018. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through September 30, 2019 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to cheryl.krejci@fortbendcountytexas.gov. Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by Monday, June 4, 2018, 4:00 PM.

☒ Yes, I agree to renewing our agreement with Fort Bend County under the same terms and conditions.

☐ No, I do not wish to renew our agreement with Fort Bend County.

If Yes, please provide a Form 1295 along with this renewal form by replying to this email.

Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, extensions or renewals are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit:

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

On-line instructions:

Name of governmental entity is to read: Fort Bend County.

Identification number used by the governmental entity is: B18-003.

Description is to read: Term Contract for Medical Supplies

After receiving the Form 1295 with the Certification Number and Date Filed, please print the form, have notarized and sign, then email the Form 1295 and this Term Contract Renewal Form to cheryl.krejci@fortbendcountytexas.gov. However, if your company is publicly traded you are not required to complete this form.

Signature of Authorized Representative

Date

NARI SADARANGANI

PRESIDENT

Printed Name and Title of Authorized Representative

MAY 31, 2018

Fort Bend County Tabulation
Bid 18-003
Term Contract for Purchase of Medical Supplies

Term: through 30 September 2018

Awarded 10/10/17: Low Bidder per Section

Description	American Pride Paper & Plastic Lakewood, NJ	BoundTree Medical LLC Dublin, OH	Midwest Medical Supply, IL	Henry Schein Inc. Irmo, SC	Life-Assist, Inc. Rancho Cordova, CA	NAO Global Health LLC Houston, TX	Nashville Medical & EMS Products, Inc. Springfield, TN
Form 1295		Yes	Yes	Yes	Yes		Yes
Section 1: Airways	NB	\$ 18,369.01	Disqualified: Did not bid entire section.	\$ 19,902.02	\$ 19,879.01	\$ 33,900.96	\$ 20,708.79
Section 2: IV, Syringes, Blood	NB	\$ 84,088.22	Disqualified: Did not bid entire section.	\$ 131,218.05	\$ 105,273.45	NB	NB
Section 3: Bandages, Splints, Tape	NB	\$ 7,925.74	Disqualified: Did not bid entire section.	\$ 7,958.08	\$ 7,816.92	\$ 11,121.35	\$ 7,230.95
Section 4: EKG	NB	\$ 81,611.60	\$ 99,118.00	\$ 106,453.70	\$ 89,315.60	\$ 231,811.90	NB
Section 5: EKG Cables	NB	\$ 52,111.60	Disqualified: Did not bid entire section.	\$ 51,614.45	\$ 45,787.25	NB	\$ 58,466.95
Section 6: Microflex Freeform SE Latex Free Powder Free Nitrile Exam Gloves	Disqualified: Did not bid entire section.	\$ 11,883.00	\$ 13,114.00	\$ 13,345.00	\$ 15,555.00	\$ 18,190.00	\$ 13,413.00
Section 7: Microflex Freeform EC Latex Free Powder Free Nitrile Exam Gloves	NB	\$ 285.00	\$ 467.50	\$ 395.50	\$ 446.00	\$ 539.50	\$ 424.50
Section 8: AMBU PERFIT Cervical Collars	NB	\$ 6,583.50	\$ 8,745.00	\$ 8,118.00	\$ 7,392.00	\$ 11,055.00	NB
Section 9: Head Immobilizers	NB	\$ 3,411.00	\$ 3,915.00	\$ 3,330.00	\$ 2,952.00	\$ 4,536.00	NB
Section 10: Miscellaneous Supplies	NB	\$ 5,257.89	\$ 3,497.92	\$ 5,228.33	\$ 4,369.71	NB	\$ 3,797.19

Description	American Pride Paper & Plastic Lakewood, NJ	BoundTree Medical LLC Dublin, OH	Midwest Medical Supply, IL	Henry Schein Inc. Irmo, SC	Life-Assist, Inc. Rancho Cordova, CA	NAO Global Health LLC Houston, TX	Nashville Medical & EMS Products, Inc. Springfield, TN
Section 11: Infection Control	NB	\$ 4,923.12	\$ 4,214.42	\$ 4,092.92	\$ 7,101.80	NB	NB
Section 12: Capitals	NB	\$ 39,854.05	Disqualified: Did not bid entire section.	Disqualified: Did not bid entire section.	\$ 43,430.90	NB	\$ 45,301.25
Section 13: Medication	NB	\$ 119,601.23	Disqualified: Did not bid entire section.	Disqualified: Did not bid entire section.	\$ 115,943.87	NB	NB
Section 14: Controlled Substance Medication	NB	\$ 15,969.21	NB	\$ 23,105.40	\$ 47,767.50	NB	NB

Physio-Control, Inc. - Disqualified: Altered Terms & Conditions

Fort Bend County Tabulation
Bid 18-003
Term Contract for Purchase of Medical Supplies

Term: Through 30 September 2018

Awarded 10/10/17: Low Bidder per Section

Section 1: Airways	Lawson Numbers	Bound Tree
40mm Berman (dual channel) Oral Airway	12056	\$ 0.53
60mm Berman (dual channel) Oral Airway	12057	\$ 0.53
80mm Berman (dual channel) Oral Airway	12058	\$ 0.56
90mm Berman (dual channel) Oral Airway	12059	\$ 0.58
100mm Berman (dual channel) Oral Airway	12060	\$ 0.62
110mm Berman (dual channel) Oral Airway	12407	\$ 0.62
Thomas E.T. Tube Holder Adult size	12061	\$ 2.69
Thomas E.T. Tube Holder Pediatric size	12062	\$ 2.67
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 2.5 Uncuffed	12063	\$ 1.38
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 3.0 Uncuffed	12064	\$ 1.38
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 3.5 Uncuffed	12065	\$ 1.45
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 4.0 Uncuffed	12066	\$ 1.38
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 4.5 Uncuffed	12067	\$ 1.38
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 5.0 Uncuffed	12068	\$ 1.38
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 5.5 Cuffed	12069	\$ 1.42
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 6.0 Cuffed	12070	\$ 1.54
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 6.5 Cuffed	12071	\$ 1.42
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 7.0 Cuffed	12072	\$ 1.54
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 7.5 Cuffed	12073	\$ 1.54
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 8.0 Cuffed	12074	\$ 1.54
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 8.5 Cuffed	12075	\$ 1.42
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 9.0 Cuffed	12076	\$ 1.42

Section 1: Airways (cont'd)	Lawson Numbers	Bound Tree
20F Nasopharyngeal airways	12408	\$ 1.21
24F Nasopharyngeal airways	12409	\$ 1.21
26F Nasopharyngeal airways	12410	\$ 1.21
28F Nasopharyngeal airways	12411	\$ 1.21
30F Nasopharyngeal Airways	12077	\$ 1.21
36F Nasopharyngeal Airways	12078	\$ 1.21
1200cc Replacement/Disposable Suction Canister, for S-Scort "Ten" suction unit	12079	\$ 2.50
8F whistle tip Suction Catheter	12080	\$ 0.15
10F whistle tip Suction Catheter	12081	\$ 0.15
18F whistle tip Suction Catheter	12082	\$ 0.15
Yankaur Suction Tip w/Control	12083	\$ 1.94
Yankauer with Control Vent and Tubing	12860	\$ 1.21
Yankaur "Big Yank" Suction Tip w/Control Vent, Sterile, 11/32"open tip, integral blister tube and canister connector pre-attached	12084	\$ 9.17
Suction Tubing Non Conductive Vinyl 72" X 1/4" ID	12085	\$ 0.74
Infant Medium Concentration Oxygen Mask	12086	\$ 0.92
O2 Mask Pediatric Partial Non-Rebreather w/safety vent	12087	\$ 0.97
O2 Mask Adult Non-Rebreather w/o safety vent	12088	\$ 0.96
O2 Nasal Cannula Adult, 7ft	12089	\$ 0.24
Bougie-to-go ET Tube Introducer, Adult 15F x 60cm with Coude Tip	12091	\$ 3.99
Bougie ET Tube Introducer, Pediatric 10F x 70cm with Coude Tip	12092	\$ 4.18
O2 Nebulizer , small volume, hand held w/ pediatric mask, 7ft kink resistant tubing	12862	\$ 0.65
O2 Nebulizer w/ Tubing and Mouthpiece	12094	\$ 0.64
AMBU Spur II Bag Valve Mask Adult (with mask)	12096	\$ 8.49
AMBU Spur Bag Valve Mask Infant/Child (with Infant and Child masks)	12097	\$ 11.97
Pocket BVM w/ olive green case, with O2 tubing	13075	\$ 39.93
Oxygen Nut & Stem (Plastic)	12098	\$ 0.64
Magill Forceps Adult sizes	12099	\$ 3.97
Magill Forceps Child sizes	12100	\$ 0.65
Gastric Sump Tube, 48", 18F, Sterile	12101	\$ 1.83
Gastric sump tubing, 48", 14F, Sterile	12864	\$ 1.83
Gastric sump tube, 36", 10F, Sterile	12865	\$ 1.83
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 2	12102	\$ 3.45
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 3	12103	\$ 3.45
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 4	12104	\$ 3.45
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 0	12105	\$ 3.45
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 1	12106	\$ 3.45
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 2	12107	\$ 3.45
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 3	12108	\$ 3.45
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 4	12109	\$ 3.45
Greenline/D Fiber Optic, 10/32" Halogen/Xenon Reflector Laryn Lamp for Medium Laryngoscope Handle	12110	\$ 12.01
Endotracheal tube holder 50/cs, Sports Medics Icon Stabilizer	12866	\$ 189.50
PEEP valve disposable adjustable 22mm inner diameter	12868	\$ 3.97
Headrest, Bagel, 9", pink foam	12869	\$ 2.13

Section 2: IV/Syringes/Blood	Lawson Numbers	Bound Tree
Transparent Film Dressing, Tegaderm, 4" x 4 3/4", Frame Style, 50/bx	12124	\$ 64.00
Clearsafe I.V. Catheter, 14g X 1 1/4 inch	12870	\$ 1.26
Clearsafe I.V. Catheter, 16g X 1 1/4 inch	12871	\$ 1.26
Clearsafe I.V. Catheter, 18g X 1 1/4 inch	12872	\$ 1.26
Clearsafe I.V. Catheter, 20g X 1 1/4 inch	12873	\$ 1.26
Clearsafe I.V. Catheter, 22g X 1 inch	12874	\$ 1.26
Clearsafe I.V. Catheter, 24g X 3/4 inch	12875	\$ 1.26
18g x 1 1/2" Needle Only 100/bx	12130	\$ 4.40
23g x 1" Needle Only 100/bx	12133	\$ 6.15
1cc 25g x 5/8" Syringe & Needle 100/bx	12134	\$ 8.61
3cc Syringe, Luer lock	12135	\$ 5.25
5cc 22g x 1" Syringe & Needle 100/bx	12136	\$ 16.00
10cc Syringe Luer Lock 100/bx	12137	\$ 21.00
30cc Syringe Luer Lock 30/bx	12138	\$ 11.10
60cc Syringe Luer Lock 30/bx	12139	\$ 24.90
60cc Catheter Tip Syringe, 2oz	12140	\$ 12.15
Glucometer Test Strips for Abbott OptimumEZ glucose meter, capillary, 100 strip/bx	12144	\$ 41.82
Control solution, tri-level, 1 row 1 mid 1 high per box for OptimumEZ or Precision XTRA	12145	\$ 9.15
Assure prism multi test trips for assure prism multi meter 50/bx	12876	\$ 9.89
Assure prism control solution 1and 2	12877	\$ 9.84
Maxi Drip Set, 82" 10GTTW/Bravo 24, Pre-slit Port, Removable 7" Extension, 50/bx	12146	\$ 1.64
Mini Drop Basic Administration Set with One Injection Site, (60 Drops/mL) Control Clamp, injection site 28" above distal end, two-piece male luer lock. Priming Volume:	12147	\$ 1.54
9% Sodium Chloride Injection USP-1000ml	12148	\$ 2.46
9% Sodium Chloride Injection USP-500ml	12149	\$ 2.47
9% Sodium Chloride Injection USP-250ml	12150	\$ 2.39
9% Sodium Chloride Injection USP- 100ml	12878	\$ 1.67
Sterile Water for Irrigation, 500mL	12152	\$ 2.61
Safeline Injection Site: split septum access with two-piece male luer lock. Priming Volume: 0.25mL	12153	\$ 1.08
Smallbore Extension Set with bonded Ultrasite Injection site, Length: 7 in, Priming Volume: 0.6mL (approx)	12154	\$ 2.12
Needle, Tension Pneumothorax, 14ga X 3.25 inch needle and catheter, hard plastic case	12879	\$ 8.57
IV armboard, reusable, plywood core, 3inX9in	12880	\$ 1.83
IV armboard, reusable, plywood core, 3 in X 12 in	12881	\$ 2.48
IV armboard, reusable, plywood core, 3 in X 18 in	12882	\$ 2.56
Angiocath Peripheral Venous Catheter 14g X 5.25 in	12883	\$ 18.78
Surecan Safety Huber w/ Ultrasite needlefree infusion system, 20ga X 3/4	12884	\$ 5.12

Section 3: Bandage/Splints/Tape	Lawson Numbers	Nashville Medical & EMS Products
2" x 5yd Bandage, Self-Adherent, ,individually packaged	12155	\$ 0.69
4" x 5yd Bandage, Self-Adherent, ,individually packaged	12156	\$ 1.19
Combat Application Tourniquet (CAT), One-handed Tourniquet Utilizing Windlass System, Tactical Black	12157	\$ 22.89
Occlusive, non-adhering dressing, impregnated with white Petrolatum, 3"x 9" 50/bx	12158	\$ 20.49
4x4 Non Sterile, non-woven, 4ply, 200/pkg	12160	\$ 2.09
4x4 Sterile 12 ply - 2/pk	12885	\$ 0.05
4x4 Sterile 12 ply - 10/tray	12161	\$ 0.63
4 1/2" x 4.1yd 6 ply Sterile Gauze Roll	12163	\$ 0.65
36" x 51" Triangular Bandage	12164	\$ 0.23
8" x 10" Abdominal Pad, 20/tray	12165	\$ 2.88
1" x 3" Adhesive Strip Bandage	12166	\$ 1.14
Burn Sheet Sterile 60" x 96"	12167	\$ 1.19
Trauma Dressing Sterile 10" x 30"	12168	\$ 0.67
Rapid Heat Instant Heat Pack, Pull Apart Style, 6/bx	12169	\$ 7.99
Rapid Cold Instant Cold Pack, Pull Apart Style, 24/cs	12170	\$ 34.99
Ferno KED forehead/Chin Strap Replacement set of 2	12171	\$ 39.00
3M Transpore Tape 1" x 10yd 12/bx	12173	\$ 9.90
1" x 10yd Paper Tape, hypo-allergenic	12174	\$ 3.49
2" x 10yd Waterproof Tape Kendall #3267 6/bx	12175	\$ 19.90
Flex-All splint, orange, bendable foam and aluminum splint, 4" x 36" rolled	12176	\$ 2.49
One piece foil bunting with hood. Latex Free 17.5"x30" 18 micron/.70 gauge, Sterile	12177	\$ 1.29
Quikclot Combat Gauze LE Z-fold, 3 inch X 4 yard, NO HEAT	12886	\$ 32.89
HyFin chest seal without vent	12887	\$ 12.69
Israeli emergency compression bandage 4"	12888	\$ 5.19
Israeli emergency compression bandage 6"	12889	\$ 5.79

Section 4: EKG	Lawson Numbers	Bound Tree
Recording Paper for Physio Control Life Pak 12, 4" wide	12178	\$ 8.47
Electrodes, Medi-Trace Mini, ECG monitoring, pediatric, foam, teardrop shape, adhesive hydrogel	13215	\$ 16.80
Medicotest Blue Sensor Disposable Electrodes adult 25/pk	12891	\$ 6.84
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables (pediatrics)	12180	\$ 14.71
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables (adult)	12181	\$ 14.71
Smart Capnoline Plus non-intubated, oral nasal w/ O2 tubing, adult/intermediate	12892	\$ 8.71
Filter line H set infant/ neonate, incl airway adapter, filterline, microstream connection	13216	\$ 11.29
Filter line set adult/pediatric airway adapter	12893	\$ 8.49

Section 5: EKG Cables	Lawson Numbers	Life-Assist
LifePack12 Power Adapter Extension Cable	12184	\$ 118.00
LifePack12 12-Lead ECG trunk cable with 4-wire limb leads, 5'	12185	\$ 299.00
LifePack12 12-Lead ECG Patient Cable, 6-Wire Precordial Lead Attachment	12186	\$ 121.00
LifePack12 QUIK-COMBO Therapy Cable for use with LifePack12 defibrillator/monitor	12187	\$ 325.00
Masimo SET LNC-4 LNCS Patient Cable, 4-foot reusable connector cable	12188	\$ 140.00
Masimo SET LNCS DCIP Reusable Sensor, Multiuse sensor for patients 10-50kg	12189	\$ 162.00
Masimo SET LNCS DCI Adult Reusable Sensor, Multiuse sensor for patients >30kg	12190	\$ 151.00
NELLCOR SpO2 Sensor, DS100A, Adult reusable	12192	\$ 169.00
NELLCOR SpO2 Cable Extension, DEC-4, Reusable	12193	\$ 38.91
NELLCOR Oxisensor II Disposable Pediatric SpO2 Sensor	12194	\$ 7.25
NELLCOR Oxisensor II Disposable Infant SpO2 Sensor	12195	\$ 7.25
NIBP XLarge Adult Cuff for LifePack 15, reusable	12196	\$ 45.07
NIBP Large Adult Cuff for LifePack 15, reusable	12197	\$ 29.57
NIBP Adult Cuff for LifePack 15, reusable	12198	\$ 24.00
NIBP Pediatric Cuff for LifePack 15, reusable	12199	\$ 19.41
NIBP Infant Cuff for LifePack 15, reusable, 6x18cm	12200	\$ 19.00
Extension Cable for AC/DC Power Adapter	12202	\$ 249.00
Replacement Right Angle Power Cable for AC/DC Power Adapter	12203	\$ 249.00
Masimo SET RC Patient Cable Compatible Rainbow SpO2, SpCO, SpMET, adult sensor	12894	\$ 525.00
Masimo SET RC Patient Cable	12895	\$ 81.00
Lifepack 15 defibrillator/monitor to PC USB Port cable	12204	\$ 243.00
Lifepack 15 Quik-Combo Therapy Cable	12205	\$ 319.00
Lifepack 15 Masimo Set Red LNCS Patient Cable 4ft	12206	\$ 139.00
Lifepack 15 NIBP Tubing 9ft	12207	\$ 57.00
Lifepack 15 Adult SPO2 Sensor Disposable	13217	\$ 12.08
Lifepack 15 Pedi SPO2 Sensor Disposable	12208	\$ 11.88
Lifepack 15 Infant SPO2 Sensor Disposable	12209	\$ 13.50

Section 6: Microflex Freeform SE Latex Free Powder Free Nitrile Exam Gloves	Lawson Numbers	Bound Tree
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,	12210	\$ 6.99
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,	12211	\$ 6.99
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,	12212	\$ 6.99
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,	12213	\$ 6.99
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,	12214	\$ 6.99

Section 7: Microflex Freeform EC Latex Free Powder Free Nitrile Exam Gloves	Lawson Numbers	Bound Tree
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	12215	\$ 5.70
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	12216	\$ 5.70
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	12217	\$ 5.70
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	12218	\$ 5.70
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	12219	\$ 5.70

Section 8: AMBU PERFIT Cervical Collars	Lawson Numbers	Bound Tree
Perfit ACE Adjustable Cervical Collar, 16 setting (Neckless to Tall)	12229	\$ 3.99
Perfit Mini ACE Adjustable Cervical Collar, 12 settings (Infant to Neckless)	12230	\$ 3.99

Section 9: Head Immobilizers	Lawson Numbers	Life-Assist
Laerdal Sta-Blok Head Immobilizer. Single use disposable device, radiolucent, Adjustable standard Velcro padded strap, latex free	12232	\$ 3.28

Section 10: Miscellaneous Supplies	Lawson Numbers	Midwest Medical Supply
Disposable OB Kit, Soft Packaging	12233	\$ 4.75
Alcohol Prep Pads, Medium Size TRIAD 200/bx	12234	\$ 1.27
Emesis Bags, single use, Clear, Graduate, 1000cc, latex free, rigid collar, automatic seal	12237	\$ 0.39
Sterile Lubricating Jelly, 5g, 72/bx	12239	\$ 5.50
Oxygen Cylinder Handwheel, Metal	12240	\$ 3.05
Large Oxygen Cylinder Wrench (aluminum)	12241	\$ 4.80
Encono Paramedic Shears Drk Blue 7 1/2"	12242	\$ 0.75
Disposable Penlight	12243	\$ 0.53
Single use push button activated, spring loaded, retractable Lancet, 100/bx	12244	\$ 7.40
Chloraprep 3mL Applicator, 2% Chlorhexidine Gluconate and 70% Isopropyl Alcohol	12245	\$ 34.75
Safety control seals, Pull Tite (numbered), 100/pkg	12247	\$ 20.50
Razor, Medline Fixed Head, 100/bx	12248	\$ 6.00
Disposable PolYester Patient Blanket, 50x84", Blue or Grey	12249	\$ 4.48
Oxygen "D" Cylinder Gasket, Brass w/Rubber Center	12250	\$ 0.46
Disposable Probe Cover for SureTemp Plus Thermometer, 25/bx	12251	\$ 0.86
Heavy Duty Ring Cutter	12252	\$ 11.65
Scalpel, Disposable, Sterile 11	12896	\$ 0.38
Blade Assembly, single-use, pivoting, purple, for 3M 9661 surgical clippers	12897	\$ 3.60
Ammonia Inhalent	12898	\$ 1.86
Post Valve Seal Protector, pull type for Aluminum C or D Oxygen Cylinder	12899	\$ 0.17
Isopropyl Alcohol 70 % 4 oz Bottle	12900	\$ 0.50
Isopropyl Alcohol 70% 16 oz Bottle	12901	\$ 1.36
Endure 300 Cida-Rinse Dispenser, 540ml	12902	\$ 8.90
Mylar Emergency Blanket, 52 X 84 inches	12903	\$ 0.45

Section 11: Infection Control	Lawson Numbers	Henry Schein
Bemis bio hazard box wall safe type	12253	\$ 3.97
Bemis bio hazard box wall safe bracket	13218	\$ 1.23
Bemis bio hazard box wall safe bracket key	13219	\$ 3.45
Safety Glasses, Nemesis V30, black frame, clear lens, neck cord included	12904	\$ 2.75
Fluid shield mask with clear visor, anti-fog, 2" wrap around, ear loops 25/bx	12256	\$ 6.44
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	12257	\$ 20.79
Particulate Respirator and Surgical Mask 1860/1860S	12258	\$ 0.80
Particulate Respirator, 8210	12259	\$ 1.20
1870 n95 mask	12905	\$ 1.02
Sharps Dart, sharps container with one time lockable seal, 6.5"	12906	\$ 32.89
Gel Hand Sanitizer w/ pump 540 mL	12907	\$ 5.37

Section 12: Capitals	Lawson Numbers	Bound Tree
Lifepack 12 basic carry case, to include Shoulder strip, right pouch, left pouch, and front cover	12260	\$ 279.00
Lifepack 12 back pouch for carry case	12261	\$ 70.65
Lifepack 12 top pouch for carry case	12262	\$ 45.27
Lifepack 12 replacement should strap	12263	\$ 28.80
Aneroid Sphygmomanometer, infant, Nylon cuff, minimum 10 year calibration Warranty, with zippered carry case	12264	\$ 5.97
Aneroid Sphygmomanometer, pedi, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	12265	\$ 5.97
Aneroid Sphygmomanometer, adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	12266	\$ 5.79
Aneroid Sphygmomanometer, large adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	12267	\$ 5.97
Aneroid Sphygmomanometer, thigh, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case	12268	\$ 6.19
Adult full arm splint Fracture-Pak	12269	\$ 24.61
Adult full leg splint Fracture-Pak	12270	\$ 44.58
Ankle/Elbow splint Fracture-Pak	12271	\$ 24.61
Pedi full arm splint Fracture-Pak	12272	\$ 23.48
Pedi full leg splint Fracture-Pak	12273	\$ 35.05
Greenline/D Laryngoscope handle, fiber optic, chrome plated, 2AA batteries, penlite handle	13220	\$ 35.00
Greenline/D Laryngoscope handle, fiber optic, chrome plated, C batteries	12274	\$ 34.54
Oxygen flow meter with Ohmeda QC Adapter 1-15LPM	12275	\$ 33.96
ADScope 603 Stethoscope, Navy Blue, Stainless Steel, 21", w/additional eartips and diaphragm	12276	\$ 27.37
Stat packG3 backup, Red, BBP resistant, 25 in H X 18 in W X 8.5 in D with Fort Bend County EMS embroidery	12908	\$ 229.00
Ohmeda Male and Ohmeda Female quick connect w/6" hose	13221	\$ 64.24
Thermometer, electronic, SureTemp Plus Model 690	13222	\$ 259.95
Probe and well kit, rectal 4', for SureTempPlus 690 thermometer	13223	\$ 79.89
Probe and well kit, oral, 4', for SureTempcPlus 690 thermometer	12282	\$ 75.44
Restraint strap seat belt buckle loop end, Black, 2 piece, 5'	12283	\$ 7.34
Restraint straps chest system, black, nylon, Metal push button, loop ends	12284	\$ 33.52
Locking Twice-as-Tough CUFF WRIST Restraint with lock on connecting strap, adjustable, machine washable	12285	\$ 23.41
Locking Twice-as-Tough Ankle Restraint with lock on cuff and connecting strap, adjustable, machine washable	12286	\$ 25.29
Oxygen cylinder with toggle, aluminum, D size	12287	\$ 55.64
Oxygen regulator/pressure reducer, brass, CGA 540 2800-R-2	12288	\$ 66.00
Oxygen regulator, 1 DISS 1BARB 0-25 LPM	12289	\$ 39.04
Megamover plus transport unit, 40x80 Nonwoven ply gret w/backboard pockets, 1500 lb capacity	12290	\$ 24.49
Break-apart stretcher, ferno EXL scoop, red, no restraints, no pins	12291	\$ 247.00

Section 12: Capitals (cont'd)	Lawson Numbers	Bound Tree
LP15 Standard Carry Case with Right & Left Pouches	12292	\$ 259.00
LP15 Rear Pouch for carry case	12293	\$ 67.58
LP15 Shoulder Strap	12294	\$ 29.87
LUCAS 2 Disposable Suction Cup, 3/pk	12295	\$ 118.48
LUCAS Patient Strap	12296	\$ 82.25
LUCAS Stabilization Strap	12297	\$ 82.14
LUCAS Standard Back Plate	12298	\$ 314.26
Replacement Ankle Hitch for QD3 & QD4 Traction	12299	\$ 15.24
Replacement Ischial Strap for Adult/Child QD3/QD4 Traction Splint	12909	\$ 8.41
Oxygen cylinder with toggle, aluminum, C size	12300	\$ 49.27
S-Scort "ten" replacement battery, SN 3000 and below	12301	\$ 38.50
Traction splint w/aluminum ratchet, Adult QD-4	12303	\$ 169.00
Traction splint w/aluminum ratchet, child QD-3	12304	\$ 169.00
Kendrick KODE 1 vest, green	12306	\$ 49.88
S-Scort "ten" port suction unit w/charging shelf and power cord	12307	\$ 1,207.00
S-Scort "ten" replacement battery, SN >3001 and above	12308	\$ 37.16
LA Rescue cervical collar bag, 24"L x 11"H x 5"W	12311	\$ 16.49
Trauma/Air management bag III, 26" x 18.5" x 12.5", blue, Ferno #5111	12312	\$ 259.00
Surgical Clipper Starter Kit, includes clipper body 9661 and charger 9662, no blade assembly	12910	\$ 106.00
Hawkepack ET Kit pullout, green with yellow stripe	12911	\$ 37.00
Ferno professional intubation mini bag, royal blue	12912	\$ 68.47
5.11 Rush 72 Back Pack, Black	12913	\$ 109.00
Assure Prism Multi-meter Glucometer	12915	\$ 6.27

Section 13: Medication	Lawson Numbers	Life-Assist
Adenosine 6mg/2mL (3mg/mL) 2mL Single dose	12314	\$ 7.75
Adenosine 12mg/4mL (3mg/mL) 4mL Single dose	12315	\$ 25.20
Acetaminophen 15mL Infant Drops (80mg per 0.8mL)	12316	\$ 6.68
Pain Reliever Non-Asprin 325mg 2/pk 125pk/bx	12916	\$ 0.05
Amiodarone, 150mg, 3mL Vial	12317	\$ 1.93
Aspirin 81mg Tablets 36/bottle	12318	\$ 0.87
Atropine Sulfate 18g x 1 1/2", 0.1mg/mL, 10mL Prefilled Syringe with protected needle	12319	\$ 9.84
Atrovent Solution 0.5mg, 2.5mL	12320	\$ 5.94
Ipratropium Bromide/ Albuterol, 0.5mg/ 3.0mg, 30/bx	12917	\$ 5.94
Calcium Chloride, 1Gm, 10mL	12918	\$ 9.95
Diphenhydramine 50mg/mL, 1mL Vial	12322	\$ 1.15
Dextrose USP 50%, 18g protected needle, 25grams (0.5g/mL)	12323	\$ 8.97
Dextrose 25% 10mL Ansyr Syringe	12919	\$ 8.74
Dopamine HCL in 5% Dextrose, 500mL IV Bag-800mg	12325	\$ 25.00
Epinephrine 1:1000, 1mg/mL, 1mL Single dose	12326	\$ 16.50
Epinephrine 1:10,000, 18g, 1/2" (0.1mg/mL) 10mL Prefill Syringe with protected needle	12328	\$ 5.25
Racemic Epi 2.25% 0.5mL Unit Dose	12920	\$ 1.10
Amidate (Etomidate Injection), 20mg (2mg/mL), 10mL Single Dose Ampule	12329	\$ 6.60
Glucagon 1mg Lilly Kit Red Box 2050A	12331	\$ 304.25
Glucose 37.5g Unit dose tube	12332	\$ 3.93
Heparin Sodium 5000u, 1mL Carpuject	12333	\$ 3.40
MonoJect PreFill IV Flush syringe, filler with 10mL 100U/mL (1,000 USP Units)	12921	\$ 0.57
Heparin Flush, 12mL		
Ibuprofen Oral Suspension 100mg, 5 mL	12334	\$ 4.41
Lasix 40mg, 10mg/mL in 4mL Prefill Needleless Syringe	12336	\$ 9.14
Labetalol Hydrochloride Injection, USP 100 mg/20 mL, 5mg per mL	12922	\$ 4.72
Lidocaine 2% with male luer lock prefilled syringe, 100mg/5mL	12337	\$ 4.45
Lidocaine 2g in 500mL D5W	12338	\$ 8.00
Magnesium Sulfate 50%, 1g/2mL Vial	12340	\$ 2.09
Metoprolol 5mg, 5mL Vial	12341	\$ 2.11
Naloxone 2mg/2mL - 2mL Pre-filled Syringe	12344	\$ 35.00
Nitroglycerin Ointment, 2%, 30g Tube	12345	\$ 34.20
Nitrolingual Spray, 4.1g, 400mcg per Spray, 90 sprays per can	12346	\$ 147.91
Nitrostat, 0.4mg Sublingual Tabs, 25 per bottle	12347	\$ 36.46
Oxytocin Pitocin 10units 1mL	12923	\$ 2.00
Promethazine 25 mg, 1mL vial	12924	\$ 3.80
Clopidogrel Bisulfate 75mg tablets	12925	\$ 6.75
Albuterol Sulfate, USP Inhalation Solution, 0.083%, 2.5mg/3mL (0.83mg/mL), 25/bx	12349	\$ 4.39
Rocuronium 10mg/mL, 10mL Vial	12350	\$ 6.90
Sodium BiCarbonate 8.4% 10mL pedi Lifeshield	12926	\$ 11.61
Sodium Bicarb 8.4%, 50mEq, 50mL Prefilled luer lock syringe	12351	\$ 9.55
0.9% Sodium Chloride, 5mL in 12mL luer lock syringe	12352	\$ 0.62
0.9% Sodium Chloride, 10mL in 12mL luer lock syringe	12927	\$ 0.57

Section 13: Medication (cont'd)	Lawson Numbers	Life-Assist
Solumedrol 125mg, 2mL Acto-vial	12353	\$ 9.90
Succinylcholine 200mg, 10mL vial	12354	\$ 27.33
Tetracaine Hydrochloride Ophthalmic Solution, 1/2%, 1mL Single Dose Units	12355	\$ 12.75
Ketorolac 60mg 2mL vial	12928	\$ 2.40
Thiamine 100mg/mL in 2mL Single dose vial	12356	\$ 10.22
Carpject Injector	12358	\$ 0.05
Ondansetron 4mg dissolve tabs 30ud/bx	12929	\$ 33.49
Ondansetron 4mg 2ml VIAL 25/BX	12359	\$ 13.00
Mucosal Automation Device, Nasal/Oral, Latex free, 3mL Syringe	12360	\$ 6.39
Mucosal Atomization Device Without Syringe	12930	\$ 5.61
Terbutaline, 1mg, 1mL Vial	12931	\$ 8.00
Captopril 12.5mg tabs 100/bt	13224	\$ 149.00

Section 14: Controlled Substance Medication	Lawson Numbers	Bound Tree
Morphine Sulfate Injection, USP 1mg/mL, 10mL single dose	12343	\$ 4.26
Morphine Sulfate Injection, USP 10mg/mL, 1mL single dose	12932	\$ 4.94
Midazolam 2mg, 2mL single dose	12342	\$ 1.02
Midazolam 10mg, 2mL single dose	12933	\$ 1.41
C3 Ketamine 5mg/ml 10ml 10/bx / controlled	12335	\$ 46.00
Fentanyl Citrate Injection USP, 250mcg (0.05mg per mL) in 5mL	12330	\$ 1.87
Diazepam Injection 10mg (5mg/mL) 2mL Single Dose	12324	\$ 29.40

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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

OFFICE USE ONLY CERTIFICATION OF FILING

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

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

Certificate Number:
2018-362310

Date Filed:
06/01/2018

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

Fort Bend County

Date Acknowledged:
08/28/2018

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 services, goods, or other property to be provided under the contract.

B18-003
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 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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:
2018-373567

Date Filed:
06/27/2018

Date Acknowledged:
08/28/2018

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

Bound Tree Medical, LLC
Dublin, OH 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 services, goods, or other property to be provided under the contract.

B18-003
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 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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

OFFICE USE ONLY CERTIFICATION OF FILING

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

Life-Assist, Inc.
Rancho Cordova, CA United States

Certificate Number:
2018-362594

Date Filed:
06/01/2018

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

Fort Bend County

Date Acknowledged:
08/28/2018

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 services, goods, or other property to be provided under the contract.

B18-003
Term Contract for Medical Supplies

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Davis, Ramona	Rancho Cordova, CA United States	X	
	Bergaus, Linda	Rancho Cordova, CA United States	X	
	Prior, Cherie	Rancho Cordova, CA United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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

OFFICE USE ONLY CERTIFICATION OF FILING

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

NASHVILLE MEDICAL & EMS PRODUCTS, INC
SPRINGFIELD, TN United States

Certificate Number:
2018-384658

Date Filed:
07/25/2018

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 TEXAS

Date Acknowledged:
08/28/2018

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 services, goods, or other property to be provided under the contract.

BID #18-003
SULLY OF MEDICAL SUPPLIES

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	SADARANGANI, NARI	SPRINGFIELD, TN United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)