

**PROPOSAL REQUEST**  
**Medical Supplies**  
**For the**  
**Sumner County Emergency**  
**Medical Service**



**SUMNER COUNTY GOVERNMENT**  
**SUMNER COUNTY, TENNESSEE**

**Bid # 20180710-CO**

**July 2018-19**

## **Introduction**

Sumner County Government is hereby requesting a proposal for medical supplies for Sumner County Emergency Medical Service 255 Airport Rd Gallatin, Tennessee 37066.

## **General Information**

### **I. Proposal Package**

All sealed proposal packages must include all of the following, when applicable. Any sealed proposals shall be rejected as a non-conforming bid if any applicable item is missing.

- One (1) Original Bid with Signature in blue ink. Two (2) Copies of original bid on USB Thumb drives.
- Evidence of a valid State of Tennessee Business License and/or Sumner County Business License
- Evidence of compliance with the Sumner County Government's Insurance Requirements, if work is performed on Sumner County Property
- Signed and completed Statement of Non-Collusion (Attachment 1)
- Properly completed Internal Revenue Service Form W-9
- Evidence of a company's safety program and, if supported, a drug testing program (Attachment 2) Drug-Free Workplace Affidavit
- If bid is in excess of \$25,000, a certification of non-debarment must be completed (Attachment 3) Certification Regarding Debarment, Suspension, and Other Responsibility Matters
- Certification By Contractor (Attachment 4)

### **NEW VENDORS**

1. To comply with Internal Revenue Service requirements, all vendors who perform any type of service are required to have a current IRS Form W-9 on file with the Sumner County Finance Department. At the time of requisition, the individual requesting a purchase order or disbursement will be informed if it is a new vendor and if a form W-9 is required. If form W-9 is required for a new vendor, the elected official or department head shall forward a completed form W-9 to the finance department. It can be obtained from the finance department, Sumner County's web site, or the Internal Revenue Service's website at [www.irs.gov](http://www.irs.gov).
2. To comply with the Tennessee Lawful Employment Act, non-employees (individuals hired as independent contractors) must have on file any 2m: of the following documents.
  - Valid Tennessee driver license or photo ID issued by department of safety
  - Valid out-of-state driver license
  - U.S. birth certificate
  - Valid U.S. passport
  - U.S. certificate of birth abroad
  - Report of birth abroad of a U.S. citizen
  - Certificate of citizenship
  - Certificate of naturalization
  - U.S. citizen identification card
  - Valid alien registration documentation or proof of current immigration registration
3. In addition, for all vendors with annual purchases in excess of \$50,000 (if a business license is required), a business license must be on file in the finance department, or the requisitioner must submit a copy with the purchase order requisition form or the payment requisition form, as applicable.

## **II. Responses**

- Proposal must include point-by-point responses to the RFP.
- Proposal must include a list of any exceptions to the requirements.
- Proposal must include the legal name of the vendor and must be signed by a person or persons legally authorized to bind the vendor to a contract.
- If applicable, proposal must include a copy of the contract(s) the vendor will submit to be signed.
- Any and all proposal requirements must be met prior to submission.
- The bidder understands and accepts the non-appropriation of funds provision of the Sumner County Government.
- If noted in the section “proposal requirements” or later requested, the contractor will be required to provide a reference list of clients that have a current contract for services with their company.

## **III. Clarification and Interpretation of RFP**

The words “must” and “shall” in this Request for Proposal indicate mandatory requirements. Taking exception to any mandatory requirement shall be grounds for rejection of the proposal. There are other requirements that Sumner County Government considers important but not mandatory. It is important to respond in a concise manner to each section of this document and submit an itemized list of all exceptions.

In the event that any interested vendor finds any part of the listed specifications, terms, or conditions to be discrepant, incomplete, or otherwise questionable in any respect, it shall be the responsibility of the concerned party to notify Sumner County, via email at [purchasing@sumnerschools.org](mailto:purchasing@sumnerschools.org), of such matters immediately upon receipt of this Request for Proposal. All questions must be received a minimum of five days before proposal's “deadline”. All responses to inquiries will be posted on the Sumner County website (<http://www.sumnertn.org/>) under “Bids

## **IV. Proposal Guarantee**

Vendors must guarantee that all information included in their proposal will remain valid for a period of 90 days from the date of proposal opening to allow for evaluation of all proposals.

## **V. Related Costs**

Sumner County Government is not responsible for any costs incurred by any vendor pursuant to the Request for Proposal. The vendor shall be responsible for all costs incurred in connection with the preparation and submission of its proposal.

## **VI. Insurance Requirements and Liability**

Each bidder or respondent to the RFP who may have employees, contractors, or agents working on Sumner County properties shall provide copies of current certificates for general and professional liability insurance and for workers' compensation of a minimum of \$250,000. The owner or principal of each respondent must also be insured by workers' compensation if they perform any of the services on Sumner County properties. There will be no exceptions to the insurance requirement.

## VII. Payment Terms

Payment terms shall be specified in the bid response, including any discounts for early payment. All payments, unless agreed upon differently, will be after receipt of service or product and Sumner County's approval of conformance with specifications. The Sumner County Finance Department does not allow the practice of picking up checks in person.

## VIII. Deadline

Sealed proposals will be accepted until **July 10, 2018 @ 10:00 am** local time. Proposals received after that time will be deemed invalid and returned unopened to the vendor. Vendors mailing proposal packages must allow sufficient time to ensure receipt of their package by the time specified. There will be no exceptions. Proposals will be opened at an unspecified time after the deadline.

## IX. Withdrawal or Modification of Proposal

A withdrawn proposal may be resubmitted up to the time designated for the receipt of proposals provided that it fully conforms to the same general terms and requirements.

## X. Package

The package containing the proposal must be sealed and clearly marked "**PROPOSAL FOR MEDICAL SUPPLIES FOR SUMNER COUNTY EMS**" and "**DO NOT OPEN**" on the outside of the package. Responses may be hand delivered or mailed to the following address.

Sumner County Board of Education  
1500 Airport Road  
Attn: Purchasing Supervisor  
Gallatin, TN 37066

## XI. Right to Seek a New Proposal

**Sumner County reserves the right to accept or reject any and all proposals for any reason.** Proposals will be awarded to the best overall respondent as determined by that which is in the best interests of Sumner County.

## XII. Procedures for Evaluating Proposals and Awarding Contract

In comparing the responses to this RFP and making awards, Sumner County may consider such factors as quality and thoroughness of a proposal, the record of experience, the references of the respondents, and the integrity, performance, and assurances in the proposal in addition to that of the proposal price.

- Proposals will be examined for compliance with all requirements set forth herein.
- Proposals that do not comply shall be rejected without further evaluation.
- Proposals will be subjected to a technical analysis and evaluation.
- Oral presentations and written questions for further clarifications may be required of some or all vendors.

## XIII. Discussions

Discussions may be conducted with the vendors which have submitted proposals determined to be reasonably likely of being considered for selection to assure a full understanding of and responsiveness to the RFP requirements. Every effort shall be afforded to assure fair and equal treatment with respect to the opportunity for discussion and/or revision of their respective proposals. Revisions may be permitted after the submission and prior to the award for the purpose of obtaining the best offers.

#### **XIV. Open Records**

After the bid is awarded, all proposals will be subject to the Tennessee Open Records Act, and the proposals will be available to the public upon written request.

Summary information on bids submitted will be posted on the [www.sumnerschools.org](http://www.sumnerschools.org) website under "Bids" link.

#### **XV. Assignment**

Neither the vendor nor Sumner County may assign this agreement without prior written consent of the other party.

#### **XVI. Liabilities**

The vendor shall indemnify Sumner County Government against liability for any suits, actions, or claims of any character arising from or relating to the performance under this contract by the vendor or its subcontractors.

Sumner County Government has no obligation for the payment of any judgment or the settlement of any claim made against the vendor or its subcontractors as a result of obligations under this contract.

#### **XVII. Tax Status**

Sumner County is tax exempt.

#### **XVIII. Invoicing**

Invoices are to be submitted to:

Sumner County EMS  
255 Airport Rd  
Gallatin, TN 37066  
Attn: D Hawkins

The vendor must provide an invoice(s) detailing the terms and amounts due and the dates due. All invoices shall indicate payment terms and any prepayment discounts.

#### **XIX. Contract Nullification**

Sumner County Government may, at any time, nullify the agreement if, in the judgment of Sumner County Government, the contractor(s) has failed to comply with the terms of the agreement. In the event of nullification, any payment due in arrears will be made to the contractor(s), but no further sums shall be owed to the contractor(s). The agreement between Sumner County and the contractor(s) is contingent upon an approved annual budget allotment, and is subject, with thirty (30) days notification, to restrictions or cancellation if budget adjustments are deemed necessary by Sumner County Government.

## XX. Applicable Law

Sumner County, Tennessee is an equal opportunity employer. Sumner County does not discriminate towards any individual or business on the basis of race, sex, color, age, religion, national origin, disability or veteran status.

The successful contractor(s) agrees that they shall comply with all local, state, and federal law statutes, rules, and regulations including, but not limited to, the Rehabilitation Act of 1973 and the Americans with Disabilities Act.

In the event that any claims should arise with regards to this contract for a violation of any such local, state, or federal law, statutes, rules, or regulations, the provider will indemnify and hold Sumner County harmless for any damages, including court costs or attorney fees, which might be incurred.

Any contract will be interpreted under the laws and statutes of the state of Tennessee.

Sumner County does not enter into contracts which provide for mediation or arbitration.

Any action arising from any contract made from these specifications shall be brought in the state courts in Sumner County, Tennessee or in the United States Federal District Court for the Middle District of Tennessee.

Additionally, it is a violation of state statutes to purchase materials, supplies, services, or any other item from a vendor that is a commissioner, official, employee, or board member that has any financial or beneficial interest in such transaction.

### Specific Information

Proposals requirement details:

This includes, but not limited to the following information. Any alternative recommendations may be so noted and priced separately from the basic request. **Please indicate ability to meet requested specific information (check “yes” or “no”)**

1. The successful bidder shall furnish current unaltered price list(s) and catalog(s) for any and all products They offer. **Yes**\_\_\_\_\_ **No** \_\_\_\_\_
2. Companies giving multiple discount rates will be considered non-conforming. **Yes**\_\_\_\_\_ **No** \_\_\_\_\_
3. Bidder must provide “Awarded bid pricing” to other County, City and Volunteer EMS and Fire services with approval from Sumner County EMS.  
**Yes**\_\_\_\_\_ **No** \_\_\_\_\_
4. Sumner County EMS will entertain and consider acceptable substitutions for products in the “Supply Bid Sheet” if the product meets or exceeds the specifications of the manufacturer and another manufacturer offers the same product at a lesser cost and/or the product is more efficient.  
**Yes**\_\_\_\_\_ **No** \_\_\_\_\_
5. Bidder must be able to accept and process orders using digital DEA-Form 222 for Class 2 and 4 Schedule Drugs.  
**Yes**\_\_\_\_\_ **No** \_\_\_\_\_
6. Supplies to be delivered during normal working hours (8:00 AM to 4:00 PM) Monday thru Friday F.O.B. to Sumner County EMS, 255 Airport Rd. Gallatin, TN 37066 Attn: S. Frary when ordered and within a reasonable length of time – not to exceed three (3) consecutive days after each such order excluding holidays and weekends. **Yes**\_\_\_\_\_ **No** \_\_\_\_\_

7. Invoices are to be sent to: Sumner County EMS, Doris Hawkins-Tweed, 255 Airport Rd. Gallatin, TN 37066; a copy of the original order shall be sent with the packing slip(s) to Sumner County EMS, c/o S. Frary, 255 Airport Rd. Gallatin, TN 37066.
8. All shipments exceeding \$100.00 shall be FOB. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
9. For further information contact: Sumner County EMS, Sean Frary, 255 Airport Rd. Gallatin, TN 37066, Phone: 615-451-0429 ex t142 Email: [sfrary@sumnerems.org](mailto:sfrary@sumnerems.org).
10. Prices must remain firm for one (1) year from award date of contract. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
11. The County reserves the option to extend the contract term for two (2) additional one (1) year periods.  
**Yes** \_\_\_\_\_ **No** \_\_\_\_\_
12. The winning bidder may submit to the County, for its consideration, a contract price adjustment, not less than sixty (60) calendar days in writing prior to the beginning of each successive term.  
**Yes** \_\_\_\_\_ **No** \_\_\_\_\_
13. Listed in the Bid Section is an estimated quantity of supplies which may be ordered throughout the year. These are only estimates and the quantity of supplies to be ordered will be "as needed" and dependent upon usage by the Emergency Medical Services. Sumner EMS may order substantially more or substantially less of any item, or none of a given item, at the County's discretion.
14. Sumner County EMS has specified products that are currently in use and would like to maintain such product for interoperable usage. Whenever the specification names a certain brand, make, manufacturer, or other definite specification, they are to be used unless the bidder can demonstrate to the County's satisfaction that a like product is equal to or greater than the product requested, and for an equal or lesser price than the specified requested item as bid by other bidders. Samples for any exceptions or substitutions to specified products to demonstrate like-quality and type must be included with the bid, and shall be at no cost to the County. In the event that the bidder would like the samples returned after completion of the bid/selection process, they shall send any packing supplies needed and shall pay for return shipping.
15. The County reserves the option to order from the awarded company any listed supplies and/or other items within their catalog(s). **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
16. The bidder is required to list all exceptions, deviations, or variations to the specifications set forth and it shall be done in a clear, logical fashion on a sheet designated by the bidder as such. Brochures and standard catalog sheets shall accompany each proposal, but may not be considered as notice of exceptions, deviations, or variations to these specifications. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_
17. All merchandise shall have a minimum expiration date of twelve (12) months from the date of shipment, and the date must be displayed on the packages. Once received and accepted by Sumner County EMS

the bidder will then accept merchandise back for one hundred (100) percent no cost replacement, if those materials are within thirty (30) days of their expiration date. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

18. The bidder must be able to supply requested merchandise within an eight (8) hour time frame for normal request of merchandise when the requestor has made that request within normal working hours 8 am to 4 pm Monday through Friday. During emergency (natural or man-made) situations the bidder must be able to supply requested merchandise within a two (2) hour time frame, twenty-four (24) hours a day, seven (7) days a week. Bidder shall provide emergency contact numbers for these requests, and these numbers shall be updated immediately by the bidder if the contact numbers change. The contact numbers and emergency delivery service shall be tested by Sumner County EMS periodically with no prior notification to ensure compliance with the contract. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

19. Bidder must have redundant warehousing facilities in the event that the local warehouse is unable to fulfill orders for any reason. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

20. Successful Bidder is responsible for notifying Sumner County EMS of any shortage of product listed herein within 48 hours of becoming aware of same. **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

21. Bidder must be able to receive orders via an online ordering system that includes but is not limited to the following:

- a. only authorized personnel ordering that includes a tiered system where support staff may make an initial order but only those credentialed to do so may approve orders;
- b. an online catalog with photographs of the merchandise that is provided for by this contract;
- c. the system will also provide the times and dates of when merchandise was ordered, shipped and received by the purchaser and bidder.

**Yes** \_\_\_\_\_ **No** \_\_\_\_\_

22. The winning bidder shall furnish and supply an inventory management system (must be web-based) to assist in the management of supplies and assets at no cost to Sumner County EMS. The winning bidder shall provide all on-site technical support, inclusive of training, in-servicing, refresher courses and delivery training, to any and all personnel deemed necessary by Sumner County EMS to ensure that the Inventory Management System is completely operational within three (1) month of being awarded the bid. The winning bidder shall assist with entering all equipment and supply data into the system for operational use. All bidders must submit or provide a demonstration of the system being bid. This may be accomplished either via web-meeting presentation or in person.

The web-based solution must allow for the receiving and issuing of equipment and supplies. It must also be expandable in order to assist with supply and equipment management and tracking of multiple vehicles and stations within the Department. The vehicle inventory management program must accommodate the entire Sumner County EMS response fleet – currently ~25.

The system must be in a web environment that is hosted by the vendor. No onsite computer servers or IT support will be provided by the County. Data back-ups shall be provided by the vendor; in the event that the winning bidder should lose the contract in the future, Sumner County EMS reserves the right to retain any and all data placed into the system prior to and up to contract termination, as well as the software licenses.

The solution bid must include the following features:

- System configuration tools;
- Ability to manage security levels/access;
- Ability to manage multiple supply rooms;
- Supply room inventory management;
- Supply request management;
- Supplier management;
- Narcotic Tracking Module
- Create supplier purchase orders;
- Receive supplies against supplier purchase orders;
- Automatic email notifications/reporting;
- Bar code printing and software;
- Three (3) new handheld wireless scanners with wireless internet capabilities; the scanner interface must have the ability to Scan Issued Inventory, Scan Received Inventory, Scan Transfer of Inventory, and Integrate with the Supply Room;
- Electronic Inventory Reports must be user-configurable, must be able to export into multiple formats (minimally, PDF, CSV, Excel, and HTML), must be able to provide reports such as: Total Inventory, Inventory Variance, Usage, Expired Items, Track Expiration Dates, Financial Reports on Expired Medications, Vehicle Maintenance Reports, Mileage, Vehicle Fix Requests, Damage, Preventative Maintenance, Asset Information; and the ability to generate: Ad hoc Canned, Ad hoc Custom, Scheduled Emailed;
- Equipment/Supply Check-in/Check-out Manager with the ability to Issue equipment to an employee and then check the equipment back in at a later time; Notify when items are overdue for check-in;
- User Interface for the Inventory of Ambulances and Equipment (Touch Screen Ready Interface, Sealed and Unsealed Cabinet Verification, Expired Drug Notification, Vehicle Inventory Manager);
- Supply Request Manager;
- Expired Drug Notification;
- Vehicle Inventory Manager;
- Vehicle Maintenance Checklist shall include, but not be limited to, such information as Personnel, Mileage, Pre-shift Inspection Check-list, Fuel Level, Lost/Damaged Equipment Noted, Notification of Scheduled Preventative Maintenance Dates;
- Vehicle Inspection History;
- Electronic Inventory Requests;
- Manage Fixed Assets with information such as Purchase Date, Asset #, Serial #, Preventative Maintenance Requirements, Notification of PM Dates, and the ability to

- attach files to each Asset;
- Must provide User Documentation such as User Manual and Administrator Manual;
- All Hardware must interface with Software, bar code printers, wireless handheld scanners, desktop and laptop computers, etc;
- Security Requirements shall include, but not be limited to, Identity Authentication Requirement, Automatic Timed Log-off, and Security Privilege Management.

Yes \_\_\_\_\_ No \_\_\_\_\_

23. Company must be able to provide Vending Type Machine with RFID and Touch Key Pad Access for supply management. Must be able to Remotely Access Machine for tracking and reporting purposes.

Yes \_\_\_\_\_ No \_\_\_\_\_

24. Must have Sale Representative the covers Tennessee that can meet Bi-Monthly.

Yes \_\_\_\_\_ No \_\_\_\_\_

25. There is a MANDATORY Pre-Bid Meeting. This meeting must take place 1 week before the Bid deadline. This is to answer any questions the bidder may have and/or present any items the bidder may want to present at no cost to Sumner County EMS. Appointment Time and Date must be schedule through DC Sean Frary at [sfrary@sumnerems.org](mailto:sfrary@sumnerems.org). The meeting will be held at Sumner EMS Headquarters, 255 Airport Rd Gallatin TN, 37066.

Yes \_\_\_\_\_ No \_\_\_\_\_

26. Bidder must be able to provide samples of items or evaluate equipment requested at No Cost to Sumner County EMS.

Yes \_\_\_\_\_ No \_\_\_\_\_

**All items listed in the bid section will be awarded to only one vendor. The company must have the ability to provide all listed supplies. In the event that the bidder does not have the ability to provide a given item, or a comparable substitute, the bidder is to notate NB in the “cost per unit” and the “cost per estimated quantity to be ordered” sections next to the applicable item on the Bid Section. Any listed supplies showing (NB-no bid) will be non-conforming.**

***Bidder understands and accepts the non-appropriation of funds provision of the Sumner County Government.***

Item	Part Description	How is item sold: Each or as a case	price each:	Price by case:
10 GTT	Must have Needles Port w/Extension			
10CC SYRINGE WITH NEEDLE	Must be leur lock tip with 23g 1 1/2" safety needle			
10CC SYRINGE WITH OUT NEEDLE	Must have slip tip			
1cc Syringe	Must have leur lock tip			
20CC SYRINGE WITH OUT NEEDLE	Must have leur lock tip			
3X3 GAUZE SLEEVE	non sterile			
4X4 GAUZE	sterile			
5.11 Responder 84 ALS Backpack	ALS Back Pack style Trauma Bag or Equivalent			
60 GTT	Must have Needles Port w/Extension			
60CC SYRINGE WITH OUT NEEDLE	Must have leur lock tip			
80cc Syringe w/o needle	Must have leur lock tip			
9 VOLT BATTERIES	Duracell / Energizer Brand			
AA BATTERIES	Duracell / Energizer Brand			
AAA BATTERIES	Duracell / Energizer Brand			
ABDOMINAL PADS	5" x 9" pad sterol packaging			
ADENOSINE 12MG	Vial / Prefilled			
Adult Pulse Ox Probe	Nelcor Brand Must fit Philips MRX monitor			
ALBUTEROL				
ALCOHOL PREPS	2-ply large size			
AMIODARONE 150MG	Vial / Prefilled			
AMMONIA INHALANTS				
ASPIRIN	81mg chewable tablet			
ATROPINE 1MG 10ML	needleless type prefilled			
ATROVENT				
Bacterial Filter	For Ventilator universal fit			
BANDAGE SHEARS	7 1/4" bandage shears			
BANDAIDS	1"x3" hypo-allergenic			
Bedpan, Disposable				
BETADINE (PVP) SWABSTICK				
BIO BAG LARGE				
BIO BAG SMALL				
Blood Pressure Hose for Philips MRX ALS Monitor	Must fit Philips MRX ALS Monitor 3ft in length			
BLOOD TUBE HOLDER				
Body Bag	Heavy Duty with Handles			
BOOT COVER				
BOUGIE				
Bougie- Pedi				
BP CUFF ADULT	Manual			
BP CUFF CHILD	Manual			
BP Cuff Infant	Manual			
BP CUFF LARGE ADULT	Manual			
BP CUFF THIGH	Manual			
BRACKET BEIGE FOR WALL SAFE - BEMIS Brand	Must be Bemis Brand			
Broselow Pediatric Emergency Tape	Must be most current standard and Date			
BULB SYRINGE				
BURETROL				

BURN SHEET	60" x 96" sterile packaging			
BVM ADULT	prefer Ambu Brand Spur II / or equivalent			
BVM INFANT W/ NEONATE mask	prefer Ambu Brand Spur II / or equivalent			
BVM PEDIATRIC	Ambu Brand Spur II / or equivalent. Must have Neonate, Infant, and Toddler Masks			
C BATTERIES	Duracell / Energizer Brand			
CALCIUM CHLORIDE 1GM	needless type prefilled			
Capnography , Adult/Pediatric fits ET Tube.	must fit philips mrx monitor, Orange Connector			
CARDIZEM	Reconstitute style vial			
CARRY CASE FOR 48 IN PEDIATRIC BOARD				
CASE ONLY FOR XP-1				
C-COLLAR ADULT	prefer Ambu Brand Multi-select / or equivalent			
C-COLLAR PEDI	prefer Ambu Brand Multi-select / or equivalent			
CO2 DETECTOR ADULT	Nelcor Brand / or equivalent			
CO2 DETECTOR PEDIATRIC	Nelcor Brand / or equivalent			
COBAN	3" x 50ft			
COLD PACK	5.5" x 8" or similar size			
Convenience Bag	1000cc			
C-PAP	must have 3-set PEEP adjustment			
D BATTERIES	Duracell / Energizer Brand			
DELEE SUCTION				
DEXTROSE 50% 25GM 50ML	needless type prefilled			
Dextrose 5% 100ml bag	For IV use			
Dextrose 5% 250ml bag	For IV use			
Dextrose 5% 500ml bag	For IV use			
Dial-a-Flow				
DIPHENHYDRAMINE 50MG	Vial / Prefilled			
Disposable Blanket	Not wool based			
Disposable Pedi Pulse Ox Probe	Nelcor Brand must fit Philips MRX Monitor			
Disposable Pillow				
Disposable Spine board Straps Blue	Polypropylene, Plastic Side Release Buckle, 2 Piece w/Loop Ends, Blue, 5 feet			
DOPAMINE, 400 MG	800mg/500ml bag			
DUODOTE AUTO INJECTOR				
EKG PAPER	For Philips MRX Monitor			
ELECTRODES	Must be Ambu Brand SP Blue Dot 50 pack			
ELECTRODES PEDIATRIC HUGGABLE				
EMESIS BASIN				
EPI 1MG/ML 30ML VIAL				
EPINEPHRINE 1:1000 1ML	Vial			
EPINEPHRINE 1:10000	needless type prefilled			
ET TUBE HOLDER ADULT	Thomas Brand or equivalent			
ET TUBE HOLDER PEDI	Thomas Brand or equivalent			
EtCo2 Cannula - Pediatric	w/O2 attachment, must fit Philips Mrx Monitor, Orange Connector			

Etco2 Nasal Cannula	w/O2 attachment, must fit Philips Mrx Monitor, Orange Connector			
ETT 2.5 CUFFED	w/ stylett			
ETT 3.0 CUFFED	w/ stylett			
ETT 3.5 cuffed	w/ stylett			
ETT 4.0 CUFFED	w/ stylett			
ETT 4.5 CUFFED	w/ stylett			
ETT 5.0 CUFFED	w/ stylett			
ETT 5.5 CUFFED	w/ stylett			
ETT 6.0 Cuffed	w/ stylett			
ETT 6.5 Cuffed	w/ stylett			
ETT 7.0 Cuffed	w/ stylett			
ETT 7.5 Cuffed	w/ stylett			
ETT 8.0 Cuffed	w/ stylett			
ETT 8.5 Cuffed	w/ stylett			
exhaust filter for Vents	For Ventilator			
FENTANYL	vial / Prefilled			
FLOWMETER OXYGEN 0-15 LPM w/ DISS port	Ohmeda Connector Quick Connect			
FORCEPS MAGILL ADULT				
FORCEPS MAGILL CHILD				
FOX SPLINT LARGE	Cardboard splint w/foam lining 12"			
FOX SPLINT MEDIUM	Cardboard splint w/foam lining 18"			
FOX SPLINT SMALL	Cardboard splint w/foam lining 24"			
FRX AED REPLACEMENT BATTERY				
GLOVE BOX HOLDER				
Gloves - - LG	nitrile (Micro-flex life star EC or Digicare Apex Pro LC)			
Gloves - - MED	nitrile (Micro-flex life star EC or Digicare Apex Pro LC)			
Gloves - - SM	nitrile (Micro-flex life star EC or Digicare Apex Pro LC)			
Gloves - - XXL	nitrile (Micro-flex life star EC or Digicare Apex Pro LC)			
Gloves - - XL	nitrile (Micro-flex life star EC or Digicare Apex Pro LC)			
Glucometer Control Solution	must match glucometer brand			
Glucometers	must match glucometer brand			
Glucose Test Strips	Must match Glucometer			
GOWN IMPERVIOUS UNIVERSAL				
HEAD IMMOBILIZER	Disposable type (multi-grip style)			
HOT PACK	5.5" x 8" or similar size			
Hypodermic Needle 22g	IM Needle 1 1/2 safety needle			
Hypodermic Needles - 18ga	1" safety needle			
INFANT SIMPLE FACE MASK	at least 6 ft tubing - Hudson brand or equivalent			
INSTA-GLUCOSE				
IRRIGATION Fluid 500ML	Bottle 0.9% sodium chloride			
IV 3way Stopcock				
IV CATH 14GA	Protective Type Safety Cath			
IV CATH 16GA	Protective Type Safety Cath			
IV CATH 18GA	Protective Type Safety Cath			
IV CATH 20GA	Protective Type Safety Cath			
IV CATH 22GA	Protective Type Safety Cath			
IV CATH 24GA	Protective Type Safety Cath			

J-Circuit Adult	universal J-circuit			
J-Circuit Pediatric	universal J-circuit			
KERLEX				
KETAMINE	vial / Prefilled			
Labetalol	vial / Prefilled			
Lactated Ringers 1000 ml Bag	For IV use			
LANCETS				
LARGE BASIN				
Large Possession BAG				
Laryngoscope Blade Grandview - Adult	LED Bulb			
LARYNGOSCOPE BLADE, MAC 0,	LED Bulb			
LARYNGOSCOPE BLADE, MAC 1	LED Bulb			
LARYNGOSCOPE BLADE, MAC 2	LED Bulb			
LARYNGOSCOPE BLADE, MAC 3	LED Bulb			
LARYNGOSCOPE BLADE, MAC 4	LED Bulb			
LARYNGOSCOPE BLADE, MILLER 0	LED Bulb			
LARYNGOSCOPE BLADE, MILLER 1	LED Bulb			
LARYNGOSCOPE BLADE, MILLER 2	LED Bulb			
LARYNGOSCOPE BLADE, MILLER 3	LED Bulb			
LARYNGOSCOPE BLADE, MILLER 4	LED Bulb			
LARYNGOSCOPE HANDLE STANDARD MEDIUM C ADULT	Non Fiberoptic type			
LARYNGOSCOPE HANDLE STANDARD SMALL AA PEDIATRIC	Non Fiberoptic type			
LIDOCAINE 2% 100MG 5ML	needless type prefilled			
LIDOCAINE DRIP	2grams/500ml bag			
MAGNESIUM SULFATE 5GM	vial or prefilled with needless port			
Main O2 Wrench				
Manual IO Needle 18g	Jamshidi Intraosseous or equivalent			
MASK FLUID RESISTANT WITH WRAP AROUND VISOR				
MECHANICAL TOURNIQUET	Combat Application Tourniquette (CAT) Orange in color			
MECONIUM ASPIRATOR				
MORPHINE	vial / prefilled			
MUCOSAL ATOMIZATION DEVICE (MAD)				
MULTI-TRAUMA DRESSING				
N95 SURGICAL MASK	sizes small/med med/large			
Nail Polish Remover Pads	large size			
NALOXONE 0.4MG	Vial / Prefilled			
NALOXONE 2MG 2ML	Vial / Prefilled			
NASAL CANNULA ADULT	at least 6ft tubing - Hudson brand or equivalent			
NASAL CANNULA PEDI	at least 6ft tubing - Hudson brand or equivalent			
NEBULIZER	at least 6ft tubing - Hudson brand or equivalent			
NITRO SPRAY	0.04mg metered dose			
NITRO TABS	0.04mg tablet dissolvable			
NON REBREATHER PEDIATRIC	at least 6ft tubing - Hudson brand or equivalent			
NON-REBREATHER ADULT	at least 6ft tubing - Hudson brand or equivalent			
NORMAL SALINE 10 ML SYRINGE	For IV use			
NPA 22 FRENCH	Robertazzi Style			

NPA 24 FRENCH	Robertazzi Style			
NPA 26 FRENCH	Robertazzi Style			
NPA 28 FRENCH	Robertazzi Style			
NPA 30 FRENCH	Robertazzi Style			
NPA 32 FRENCH	Robertazzi Style			
NPA 34 FRENCH	Robertazzi Style			
NS 100ML FOR CARDIZEM	A.D.D 100 ml bag			
O2 BARBED FITTING (xmas tree)				
O2 REGULATOR - PORTABLE w/ DISS port	O2 regulator			
O2 SUPPLY TUBING	at least 6ft tubing - Hudson brand or equivalent			
OB KIT				
OCCLUSIVE VASELINE GAUZE				
OP SITE				
OPA 100MM	Berman Style			
OPA 110MM	Berman Style			
OPA 40MM	Berman Style			
OPA 50MM	Berman Style			
OPA 60MM	Berman Style			
OPA 70MM	Berman Style			
OPA 80MM	Berman Style			
OPA 90MM	Berman Style			
OXYGEN QUICK CONNECT MALE	Ohmeda Connector Quick Connect			
OXYGEN SLEEVE ANTIBACTERIAL WITH OUTSIDE POCKET				
PEDI IMMOBILIZER				
PEDI SP02 SENSOR DISPOSABLE	Must fit Philips MRX ALS Monitor			
Pediatric CPAP	must have adjustable levels from 2.5 to 7.5mm			
Peep Valve, w/Adapter For BVM	Must fit Ambu Style BVM / or equivalent			
PENLIGHT	disposable			
PERSONAL PROTECTION KIT INFECTION CONTROL				
Philips Antimicrobial Infant BP Cuff				
Philips 10 Lead ECG Patient Trunk Cable Set				
Philips Adult Pressure Interconnect Cable 6ft				
Philips Adult/child Defib Pads	multi-pad design			
Philips Antimicrobial BP Cuff - Adult				
Philips Antimicrobial BP Cuff - Child				
Philips Antimicrobial BP Cuff - Large Adult				
Philips Antimicrobial BP Cuff - Small Adult				
Philips EKG Chest Leads				
Philips EKG Extremity Cable				
Philips Monitor Paper				
Philips Pedi Defib Pads	multi-pad design			
Philips Pulse Ox Cable (Nellcor Brand)	finger probe			
POLE SPLINT				
PORTABLE O2 WRENCH				
Portable Pulse OX	Prefer Nelcor Brand / or equivalent			
PORTABLE SUCTION UNIT	Laerdal Brand or equivalent			
PORTABLE SUCTION UNIT WALL CHARGER	Laerdal Brand or equivalent			
PREPARATION RAZORS				
PRESSURE INFUSOR	holds up to 1000ml bag			

PROCEDURE MASK WITH EAR LOOPS				
PROTECTIVE EYE WEAR				
Quilicine 200MG	Vial / Prefilled			
Red Kit Seal	w/number			
REGULATOR MAIN	O2 regulator			
RING CUTTER				
Rocuronium	vial / prefilled			
Salem Sump 10 Fr				
Salem Sump Tube, 12 French				
SALINE LOCK	ext set w/needless port			
SANI-CLOTH Germicidal DISPOSABLE WIPES	Green Top			
Scalpel #10 blade				
SEAL Blue WITH NUMBER				
SEAL BLUE WITH OUT NUMBER				
SHARPS BOX KEY BEMIS				
SHARPS CONTAINER BEMIS				
SHARPS CONTAINER STACKABLE RED WITH CLEAR LID 1 QU				
Sharps Container, Rectangular, Locking Cap 4.7 Quart				
Sharps Shuttle				
SHEETS disposable	Fitted - Must be able to transfer 300lbs.			
Shoulder Harness Restraint System, Impervious Webbing, 7ft Chest Strap, yellow				
SLEEVE WHITE GAUNTLET				
Small Possession BAG				
SMART MCI BAG W/EMS FLOW CHARTS & BAR CODED DEAD TAPE				
SMART POSSESSION AND TRACKING SYSTEM BAG LARGE				
SMART POSSESSION AND TRACKING SYSTEM BAG SMALL				
SMART RAPID AID TRAUMA (RAT) PACK, RED, 1 CORDURA				
SMART TRIAGE PAC, WITH BAR CODED DEAD TAGS				
SODIUM BICARBONATE 4.2% INFANT	needless type prefilled			
SODIUM BICARBONATE 8.4% 50ML	needless type prefilled			
SODIUM CHLOIDE 1000ML	for IV use			
SODIUM CHLORIDE 0.9% 100ML bag	for IV use			
Sodium Chloride 0.9% 250ml bag	for IV use			
SODIUM CHLORIDE 0.9% 500ML	for IV use			
Soft Stretcher	Mega mover type			
SOLU-MEDROL, 125 MG	vial / prefilled			
SPINAL NEEDLE 18G 3.5 INCH				
Spine Board w/o pin				
SPLINT PADDED BOARD 3 IN X 15 IN				
SPLINT PADDED BOARD 3 IN X 36 IN				
STAT-O-SEAL CYLINDER GASKET BRASS WITH RUBBER CENTER				
STETHOSCOPE	double lumen			
Straps, Vinyl Antibacterial, Metal Push Button Buckle, 2 Piece w/Loop Ends, yellow, 7 feet				

	Hi-Flow Suction Canister, Rigid, Disp, Green Top, Aerostat Filter, 1200cc Bemis or equivalent			
SUCTION CANISTER 1600ml				
SUCTION CANISTER WIRE RING	for 1200cc canister			
SUCTION CATHETER 10 FRENCH				
SUCTION CATHETER 18 FRENCH				
SUCTION CATHETER 8 FRENCH				
SUCTION CATHETER 14 FRENCH				
SUCTION CATHETER 16 FRENCH				
SUCTION CATHETER 6 FRENCH				
Suction Catheter Large Bore Rigid	HI-D Big Stick / or equivalent			
SUCTION TUBING				
Supraglottic SIZE 0	KING AIRWAY LTS-D / or equivalent			
Supraglottic SIZE 1	KING AIRWAY LTS-D / or equivalent			
Supraglottic SIZE 2	KING AIRWAY LTS-D / or equivalent			
Supraglottic SIZE 2.5	KING AIRWAY LTS-D / or equivalent			
Supraglottic SIZE 3	KING AIRWAY LTS-D / or equivalent			
Supraglottic SIZE 4	KING AIRWAY LTS-D / or equivalent			
Supraglottic SIZE 5	KING AIRWAY LTS-D / or equivalent			
SURGILUBE				
SWAT Tourniquet	orange in color			
SYRINGE 3CC WITH NEEDLE	23g 1 1/2" needle			
TAPE 1 INCH clear hypoallergenic	transparent easy tear roll			
TAPE 1/2 IN	Cloth			
TAPE 2 INCH	transparent easy tear roll			
TAPE 3 INCH	Cloth			
TB SYRINGE	1cc w/28g 1/2" safety needle			
Tension Pneumothorax Needle	10g needle 3 1/2 inch			
THIAMINE 100MG/ML	vial / prefilled			
TOURNIQUET	disposable			
TRACTION SPLINT ADULT	Hare type			
TRACTION SPLINT PEDIATRIC	Hare type			
TRIAGE SYSTEM RESUPPLY TAG KIT; INCLUDES TRIAGE TAPE	START type Triage Kit			
TRIANGULAR BANDAGE				
TYVEK ZIP COVERALLS LARGE				
TYVEK ZIP COVERALLS MED				
TYVEK ZIP COVERALLS X-LARGE				
TYVEK ZIP COVERALLS XX-LARGE				
URINAL MALE				
VACUTAINER LUER-LOCK SHEATH				
VACUTAINER NEEDLE				
VECURONIUM 10MG 10ML W/O DILUENT	vial / prefilled			
VERSED	vial / Prefilled			
VEST ANSI YELLOW	5.11 brand / or equivalent Must be DOT standard 5-point breakaway with Sumner EMS screen printed on back.			

VIONEX				
XP ONE				
YAUNKER TIP SUCTION	ridig tip / tonsil tooth type			
YAUNKER TIP SUCTION	HI-D Big Stick Pharyngeal Suction Tip			
Yellow Narc Seal	w/number			
zip lock bag 3in x 4in				
Zofran 4MG DISSOLVING PILL				

**ATTACHMENT 1**

**STATEMENT OF NON-COLLUSION**

The undersigned affirms that they are dully authorized to execute this contract, that this company, corporation, firm, partnership or individual has not prepared this proposal in collusion with any other respondent, and that the contents of this proposal as to prices, terms or conditions of said proposal have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this proposal.

Company \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Respondent (Signature) \_\_\_\_\_

Respondent (Print Name and Title) \_\_\_\_\_

Authorized Company Official (Print Name) \_\_\_\_\_

## ATTACHMENT 2

### DRUG-FREE WORKPLACE

The Sumner County Government is committed to maintaining a safe and productive work environment for its employees and to providing high quality service to its citizens. The goal of this policy is for Sumner County employees and contractors to remain, or become and remain, drug-free. Abuse and dependency on alcohol and/or drugs can seriously affect the health of employees, contractors and citizens, jeopardize personal safety, impact the safety of others and impair job performance.

Drug-Free Workplace Act of 1988 – Sumner County Government is governed by the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D).

Omnibus Transportation Employee Testing Act of 1991 – Sumner County Government is governed by the Omnibus Transportation Employee Testing Act of 1991 (Pub. L. 102-143, Title V).

Right to an Alcohol and Drug-Free Workplace - Employees have the right to work in an alcohol and drug-free environment and to work with persons free from the effects of alcohol and/or drugs.

Required Alcohol and Drug Tests - Alcohol and drug testing for safety sensitive employees shall be in accordance with the provisions contained in the Sumner County Alcohol and Drug Policy adopted by departments which have safety sensitive positions.

Contracts – Any contractors providing goods or services to Sumner County Government must comply with all State and Federal drug free workplace laws, rules and regulations and so certify this compliance by completion of the DRUG-FREE WORKPLACE AFFIDAVIT (attached page 2).

**DRUG-FREE WORKPLACE AFFIDAVIT (page 2)**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The undersigned, principal officer of \_\_\_\_\_, an employer of five (5) or more employees contracting with Sumner County Government to provide goods or services, hereby states under oath as follows:

1. The undersigned is a principal officer of \_\_\_\_\_ (hereinafter referred to as the "Company") and is duly authorized to execute this Affidavit on behalf of the Company.
2. The Company submits this Affidavit because it shall be receiving pay pursuant to a contract with the state or any local government to provide goods or services.
3. The Company is in compliance with all State and Federal Laws, Rules and Regulations requiring a drug-free workplace program.

Further affiant saith not.

Principal Officer: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Before me personally appeared \_\_\_\_\_, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence) and who acknowledged that such person executed the foregoing affidavit for the purposes therein contained.

Witness my hand and seal at office this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

**ATTACHMENT 3**

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

The prospective participant certifies, to the best of its knowledge and belief, that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in transactions under federal non-procurement programs by any federal department or agency;
2. Have not, within the three year period preceding the proposal, had one or more public transactions (federal, state, or local) terminated for cause or default; and
3. Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) and have not, within the three year period preceding the bid, been convicted or had a civil judgment rendered against it
  - A. For the commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public transaction (federal, state, or local) or a procurement contract under such a public transaction;
  - B. For the violation of federal or state antitrust statutes, including those proscribing price fixing between competitors, the allocation of customers between competitors, or bid rigging; or
  - C. For the commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

I understand that a false statement on this certification may be grounds for the rejection of this proposal or the termination of the award. In addition, under 18 U.S.C. § 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to five years, or both.

\_\_\_\_\_  
Name of Participant Agency

\_\_\_\_\_  
Name and Title of Authorized Representative

\_\_\_\_\_  
Signature of Authorized Representative                      Date

\_\_\_\_\_ I am unable to certify to the above statement. Attached is my explanation.

**ATTACHMENT 4**

**CERTIFICATION BY CONTRACTOR**

I, the undersigned, certify that on behalf of Contractor, I am authorized to attest and obligate the above certification and to legally bind Contractor to these terms, conditions and obligations.

\_\_\_\_\_ Title

\_\_\_\_\_ Name

\_\_\_\_\_ Date

\_\_\_\_\_ Witness

