

Henry Schein, Inc. is a solutions company for health care professionals powered by a network of people and technology. Henry Schein has been in the medical supply business for 90 years and has over 40 years of experience in the EMS marketplace. Representing the EMS industry's leading manufacturers, Henry Schein EMS offers a full line of EMS specialty equipment and medical supplies. With several dedicated EMS sales professionals (most started their careers as field Medics), Henry Schein EMS has one of the largest and most experienced EMS teams in the industry.

As the reliance on your teams and the services they provide, by our society at large, continues to grow, Henry Schein EMS has never been prouder to support our everyday heroes and the agencies they represent. Serving EMS-Fire-Police and all aspects of public safety, we strive to provide the best-in-class experience for all our customers. Henry Schein is a global company, headquartered in Melville, New York. We help support the continuum of care worldwide, operating in 32 countries and territories and partnering with over 3,000 suppliers. Our footprint enables us to source a broad range of products and introduce innovative, cost-effective solutions. Our dedicated teams of industry experts understand your challenges and can help support the ever-changing demands on your agencies and personnel. Today and into the future, you can rely on us for:

- Med/Surge and PPE—a robust selection of the disposable products you rely on every day, including our portfolio of Henry Schein brand items offering quality products with exceptional savings. Equipment—offering equipment you count on each day while providing innovative solutions to help move you and your agencies forward into the future.
- Laboratory—as a leader for lab testing in our markets, we support the evolution of Community Paramedicine to best serve your community through our network of EMS and Laboratory Consultants.
- Pharmaceuticals—extensive Cold Chain capabilities and the ability to offer lowest unit of measure. We help reduce errors, increase efficiencies, and expedite the transaction of ordering controlled substances with our Electronic 222 (E222) ordering system.

To Whom it may concern,

RE: Deviations for Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24 - 008 (the "IFB")

Durham County North Carolina  
Durham County Purchasing Division of Finance  
201 East Main Street 7<sup>th</sup>, Floor Room 203  
Durham, North Carolina, 27701

October 19, 2023

 HENRY SCHEIN  
SOLUTIONS FOR HEALTH CARE PROFESSIONALS

COPY

Given our position in the market as a distributor, as opposed to the manufacturer of the product, there are certain assumptions, conditions, stipulations, and deviations we must include with our proposal to ensure the agreement adequately captures our position in the market.

Regarding the above, please see the following attachment, which is an integral part of our proposal and intended to be included as part of any resultant contract and offers an alternative means of compliance with the proposed terms.

Attached To IFB

Re: Assumptions, conditions, deviations, and stipulations Medical Supplies for Durham County Emergency Medical Services IFB No. 24 – 008 (“the IFB”)

Henry Schein Medical, a division of Henry Schein, Inc. submits the following assumptions, conditions, deviations, and stipulations as part of our response to IFB:

INSTRUCTIONS TO BIDDERS Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24-008, Section 16, Page 5.

Given Henry Schein does not intend to subcontract any portion of this Agreement, we assume the MWBE requirements are N/A. As requested, Henry Schein is providing our SBR Plan 2023 as an alternative means of compliance.

REQUIREMENTS Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24-008, Warehouse and Distribution Requirements, 5<sup>th</sup> Bullet, Page 10.

Henry Schein will use commercially reasonable efforts to provide products with the maximum possible shelf life remaining prior to the expiration of the product as provided to Henry Schein by the applicable manufacturer.

SAMPLE Purchase of Goods Contract 1. Terms, Subsection F, Page 25.  
All returns are subject to our Terms of Sale which incorporates our return policy. Returns can be easily requested online, through our customer service department or via your sales consultant. The website return process consists of identifying the product to be returned, selecting the reason for the return, and the quantity to be returned. Returned products must be returned within 30 days of purchase. After the 30 days, a restocking fee will be assessed. Once the product is received back into our warehouse, we process a credit to our customer’s account which then generates a credit memo.

SAMPLE Purchase of Goods Contract 3. Warranty of Goods and Materials, and 4. Indemnity, Page 26.

Henry Schein is a distributor for all products offered in this proposal and, as such, is not in the best position to warrant the products or indemnify for their use; however, Henry Schein can offer that any transferable product warranties and indemnities will be provided, at the time of sale, as provided to Henry Schein by the manufacturer.

Given the above, Henry Schein assumes the following alternative language is an acceptable means of compliance with the sections listed above and offers it in lieu of the language in the proposed sections:

“Seller” will pass through to the Purchaser (hereinafter collectively referred to as the “Indemnitees”), at the time of sale, any transferable product warranties, indemnities, and remedies provided to the Seller by the Manufacturer. TO THE EXTENT PERMITTED BY LAW, SELLER PROVIDES NO WARRANTIES OF

ANY KIND, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION ANY WARRANTY OF MERCHANTABILITY, FITNESS FOR PARTICULAR PURPOSE OR NON-INFRINGEMENT, AND THE INDEMNITIES SHALL LOOK TO THE MANUFACTURER OF THE PRODUCT FOR ANY WARRANTY THEREON."

**SAMPLE Purchase of Goods Contract 17. Required Provisions for Contracts/Agreements/Grants Utilizing Federal Funds, Page 29.**

Henry Schein agrees to use good faith efforts to comply with all applicable federal sections, provided, however, that notice will be provided to the Contractor that Federal Funds are intended to be used.

**NOTES**

HSI understands this bid will be awarded through June 30th, 2024, with option for annual renewals up to 5 years total. We assume option renewals will be upon mutual agreement. Pricing will remain firm throughout the agreement. If the price to HSI for any product increases, HSI shall have the right to adjust the purchase price.

Sincerely,

Henry Schein Medical, a division of Henry Schein, Inc.

By: 

Julie Strange  
EMMS BIDS Supervisor

## Business Continuity of Operations Plan

Henry Schein maintains clearly defined Continuity of Operations Plans ("COOP") for operating its facilities and supplying the participating agencies supply and information needs in times of emergencies.

During emergency (natural or man-made emergencies or pandemics) situations local to Durham County, Henry Schein, due to the size and location of its Indianapolis distribution center is capable of processing and delivering requested supplies on a next day basis, twenty-four (24) hours a day seven (7) days a week. In the event of an emergency, aside from standard next-day UPS package and LTL truck services, where necessary Henry Schein will utilize available same-day specialized direct delivery services and if requested arrange immediate dock pick-up transfers direct to Durham County designated personnel at its distribution center.

During wider area emergency situations, Henry Schein, due to the size and location of its 4 additional DCs is capable of shipping requested supplies on a next day basis, twenty-four (24) hours a day seven (7) days a week.

Henry Schein has supported every natural disaster relief program in recent history including Hurricane Katrina and the earthquake in Haiti. Henry Schein has participated directly in Washington task forces to devise disaster planning with Department of Homeland Security. Henry Schein maintains \$1.6 billion in medical supplies inventories with distribution center response located within no less than 24 hours' drive time to all points in the US.

All Henry Schein distribution centers maintain a formal Business Continuity of Operations Plans ("COOP") which addresses any local disruption that may occur. These comprehensive and extensive written plans are intended to address any localized emergency and will further support any formal disaster planning by EMS Agency operations. A full copy of the current Business Continuity Plan for Henry Schein DCs will be provided to the County of Durham for review and to supplement their local formal plans.

To assure 24/7 coverage and in the event of an emergency to access immediate support and delivery, Henry Schein will provide direct contact to its distribution center senior management and division management. In addition to managing a very large staff these managers have extensive experience in logistics, inventory management, order entry and staging. They are experienced in all facets of expediting emergency shipments.

The main DC facility for shipments is Henry Schein's facility in Indianapolis IN.

Business Continuity of Operations Plans continuously updated continuously based on personnel or other local changes. Plans are audited and reviewed quarterly by Henry Schein Safety, Security, and Risk Management.

Note, Henry Schein has never had any system wide work stoppages in the US. The company has invested heavily in extensive backup power, systems, and distribution facilities. Minor natural weather-related interruptions have occurred, but in all cases, those have been localized with ample availability and on-time shipment of product from other Henry Schein national DCs. For example, when power outage from Hurricane Sandy hit its Melville Long Island Headquarters facility there was no interruption in systems support despite utility outages. Full-service, shielded backup generators provided full power service and sufficient staff was housed on-site to support operations 24-7.

Name	Title
Steve Ray	Field Sales Consultant - Cell: 803-730-2094 Steve.Ray@henryschein.com
Customer Service	Customer Service Team Office: 800-845-3550 EMS@henryschein.com

In addition, the following EMS contact is available to arrange and provide 24-7 response from all Henry Schein facilities.

**Bid Opening Date:**  
October 19, 2023, at 2:00 P.M., Eastern Time

**Medical Supplies for Durham County  
Emergency Medical Services**

**INVITATION FOR BIDS  
(IFB No. 24-008)**



**DURHAM COUNTY  
NORTH CAROLINA**

**Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24-008**

**Table of Contents**

2..... BID SCHEDULE/TIMELINE

3..... LEGAL NOTICE

4..... INSTRUCTIONS TO BIDDERS

9..... EQUAL EMPLOYMENT OPPORTUNITY

10..... REQUIREMENTS

11..... BID FORM

11..... ADDENDUM ACKNOWLEDGEMENT

12..... NON-COLLUSION AFFIDAVIT

13..... MWBE FORMS

14..... AFFIDAVIT OF COMPLIANCE

21..... NO BID REPLY FORM

22..... VENDOR APPLICATION FORM/W9

23..... PURCHASE OF GOODS CONTRACT – S A M P L E

24.....



**Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24-008**

**BID SCHEDULE  
(Note: The below dates are subject to change)**

Advertisement Date	September 21, 2023
Last Date for Questions	October 4, 2023, at 3:00 P.M., Eastern Time
Bid Opening Date	October 19, 2023, at 2:00 P.M., Eastern Time

Publication Date: September 21, 2023

The County reserves the right to accept or reject, in whole or in part, such bids as appear in its judgment to be in the best interest of the County.

Proposals are encouraged and welcome from historically underutilized businesses (HUBs).

An electronic copy of this Invitation for Bids (IFB) can be obtained from Durham County's eBid System located under Bid Opportunities at <https://www.dconnc.gov/county-departments/departments-f-z/finance/bid-opportunities>. Bidders can download a copy of the solicitation and all addenda without registering in the system. However, in order to automatically receive email notifications of solicitations and addenda issued by the Purchasing Division, Proposers MUST register in the eBid system.

Pursuant to North Carolina General Statutes 143-129, the County of Durham will accept sealed bids for Medical Supplies for Durham County Emergency Medical Services in the Durham County Purchasing Division of Finance, 201 East Main Street, 7th Floor, Room 703, Durham, North Carolina 27701, until 2:00 P.M. Eastern Time, on October 19, 2023, at which time they will be publicly opened and read. Only sealed bids will be accepted. No bids will be accepted after the official time and date.

Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24 - 008

### LEGAL NOTICE



**INSTRUCTIONS TO BIDDERS**  
**Medical Supplies for Durham County Emergency Medical Services**  
**IFB No. 24-008**

1. Bids must be submitted on the enclosed Bid Form. In order for a bid to be considered it must be based on the terms, conditions and specifications contained herein. **One (1) original and two (2) copies of each bid shall be submitted to the Issuing Department.** Do not include sales tax in bid figures. The County pays sales tax and will add this to your bid figures separately when invoices are paid. All prices quoted are to include delivery to the delivery point, installation and set-up charges as necessary. Goods shall be set in place ready for the owner's use. All goods shall be new and of high quality. No remanufactured, refurbished or used goods will be accepted. Appropriate product information (e.g., brochures, catalog cuts, etc.) shall be included with the bid. The bidder shall sign the bid correctly and bids may be rejected if they show omissions, alterations of form, additions not called for, conditional bids or any irregularities of any kind.

2. Should a bidder find discrepancies in, or omissions from the documents, or should be in doubt as to their meaning, he/she should at once notify the County of Durham Purchasing Division, who will send written instructions or "Addendum" to all bidders. The County of Durham will not be responsible for any oral instructions. Acknowledgment of any Addendum received during the time of bidding shall be acknowledged on the Addendum Acknowledge Form. In closing of a contract, any Addendum issued shall become a part thereof.

3. Bids will be examined promptly after opening and an award will be made at the earliest possible date. The prices quoted must be held firm for ninety (90) days. Bids may be withdrawn by written notice of a request to withdraw the bid within seventy-two hours of the bid opening date, not including Saturdays, Sundays, or other days (such as holidays) on which the local government offices are closed. The award of the bid shall be made to the lowest, responsible, responsive bidder taking into consideration quality, performance, and time of delivery.

4. The materials/supplies/equipment furnished under any resulting contract shall be covered by the manufacturer's most favorable commercial warranty. Each bidder shall plainly set forth the warranty for the goods in the bid. Operations and maintenance manuals for each piece of equipment should also be provided as appropriate.

5. All purchases are subject to the availability of funds for this purpose.

6. The Contractor shall not represent itself to be an agent of Durham County.

7. The General Statutes of the State of North Carolina insofar as they apply to purchasing and competitive bidding, are made a part hereof.

8. It is agreed between the parties hereto that the place of this Contract, its status and forum, shall be Durham County, North Carolina.

9. For all the work being performed under this contract, the County of Durham has the right to inspect, examine, and make copies of any and all books, accounts, records and other writings relating to the performance of the work. Audits shall take place at times and locations mutually agreed upon by both parties, although the vendor/contractor must make the materials to be audited available within one (1) week of the request for them.
10. All bidders must complete and submit the Vendor Application/W-9 Form with their bid package. This information will be used to create or update the County's electronic bidder/vendor files if awarded contract.
11. The County reserves the right to increase or decrease the quantity specified under this contract.
12. All bids must be returned in a sealed envelope with reference made to the company submitting the bid on the exterior of the envelope to the Durham County Purchasing Division, Durham County, 201 East Main Street, 7th Floor, Durham, NC 27701. Also, please indicate the bid number on the envelope so that your bid can be handled appropriately when received in Purchasing.
13. All communications between the Purchasing Division and the prospective Bidders shall be in writing. E-mailed questions should be emailed to: [purchasinggroup@dccon.gov](mailto:purchasinggroup@dccon.gov). Any inquiries for information concerning the bid submission or procurement procedures shall be directed to Hilda W. Williams, Senior Procurement Specialist, Purchasing Division at (919) 560-0054. All questions concerning this IFB must reference the IFB number, section number and paragraph. All changes in specifications shall be in writing and furnished to all bidders. Verbal information obtained otherwise will not be considered in awarding of bid(s).
- The last date for receiving questions regarding this IFB is October 4, 2023, at 3:00 P.M., Eastern Time.**
14. Trade secrets or similar proprietary data which the Bidder does not wish to disclose other than to personnel involved in the evaluation or contract administration will be kept confidential to the extent permitted by NCAC T01:05B.1501 and G.S. 132-1.3 if identified as follows:  
Each page shall be identified in boldface at the top and bottom as "CONFIDENTIAL". Any section of the Bid, which is to remain confidential, shall also be so marked in boldface on the title page of that section. Cost information may not be deemed confidential.
15. Any reference to a particular product or brand name is intended to establish the quality level. Such language is not intended to restrict competition among bidders.
16. Proposers are required to make a good faith effort to include Minority and Women Business Enterprises (MWBES) as part of their Proposal to provide services to the County.

Durham County hereby establishes the following goals for the expenditure of funds with MWBE firms. Questions concerning MWBE should be directed to Rick Greene, Assistant Procurement Manager, at [rgreene@dccon.gov](mailto:rgreene@dccon.gov) or (919) 560-0059.

MWBE Availability % (Median Availability)	Goods	Services	Architect/Engineer	Construction	Overall MWBE Participation Goal =		
					Black American	Asian American	Hispanic American
10.4%	2.8	10.9	9.8	14.6	1.3	3.0	1.1
1.3%	.43	1.1	3.0	1.3	4.2	1.8	1.1
1.5%	.43	1.1	1.8	4.2	1.5	1.1	1.1
.70%	.5	1.0	.75	.65	1.0	.75	.5
10.3%	7.1	9.5	11.0	13.8	13.8	11.0	7.1
25.0%							

MWBE is a business that is at least 51% owned and controlled by minority group members or women. MWBE is bona fide only if the minority group or female ownership interests are real and continuing and not created solely to meet the MWBE requirement. In addition, the MWBE shall itself perform satisfactory work or service or provide supplies under the contract and not act as a conduit. The contractual relationship shall be bona fide owned and controlled as: (1) a sole proprietorship legitimately owned by an individual who is a minority group member or female; (2) a partnership or joint venture controlled by minorities and/or females; (3) a corporation or other entities controlled by minorities or females, and in which at least 51% of the voting interests and 51% of the beneficial ownership interests are legitimately held by minorities and/or females. These persons shall control the management and operations of the business on a day-to-day basis:

A person who is a citizen or lawful permanent resident of the United States and who is:

Black American"; a person having origins in any of the black racial groups of Africa;

"Asian American"; A person having origins in any of the original peoples of the Far East, Southeast Asia, Asia, India, Indian continent, or Pacific islands;

"Hispanic American"; a person of Spanish culture with origins in Mexico, Central or South America, or the Caribbean, regardless of race;

"Native American Indian tribe"; a federally recognized Indian tribe means an Indian tribe, or band, nation, rancheria, pueblo, colony, or other organized group or community, including any Alaska native village, which is recognized by the Secretary of the Interior on October 1, 1985 as having special rights and is recognized as eligible for service provided by the United States to Indians because of their status as Indians, a tribe that has a pending application for Federal recognition on October 1, 1985.

17. Bids shall be evaluated using the Total Bid. The Total Bid shall be the summation of the product of all the Items' Unit Bid Prices by their Estimated Quantities. In the event of a math error, the Extended Totals and the Total Bid will be corrected based on the Unit Price

Bidders shall complete Affidavit C to identify the minority business that it will use on the project. Affidavit C is required to be submitted with your bid. Even if your company has MWBE participation, Affidavit A is also required.

**DUE WITH BID**

**Affidavit C – Portion of Work to be Performed by Certified MWBE Businesses**

Affidavit B is required if your company has no opportunity to sub-contract and will complete all work with Bidder's own workforce. Even if utilizing your own workforce, Affidavit A is also required.

**DUE WITH BID**

**Affidavit B – Intent to Perform Contract with Own Workforce**

All Bidders are required to make good faith efforts and to demonstrate that they have made such efforts. Affidavit A is a tool for Bidders to use to show that they have made good faith efforts. Affidavit A is required to be submitted with your bid.

**DUE WITH BID**

**Affidavit A – List of the Good Faith Efforts**

- 1. One (1) original and Two (2) copies of the bid
- 2. Bid Proposal Form
- 3. Non-Collusion Affidavit (*Notarized*)
- 4. Vendor Application/W-9 Form
- 5. Compliance Affidavit (E-Verify) (*Notarized*)
- 6. MWBE Forms:

21. The following forms must be returned with your Bid:

20. E-VERIFY: As a condition of payment for services rendered under this agreement, CONTRACTOR shall comply with the requirements of Article 2 of Chapter 64 of the General Statutes. Further, if CONTRACTOR provides the services to the County utilizing a subcontractor, CONTRACTOR shall require the subcontractor to comply with the requirements of Article 2 of Chapter 64 of the General Statutes as well. CONTRACTOR shall verify, by affidavit, compliance of the terms of this section upon request by the COUNTY.

19. The County reserves the right to award the Bid by Sections.

18. Bids shall be evaluated using the Total Bid. The Total Bid shall be the summation of the product of all the Items' Unit Bid Prices by their Estimated Quantities. In the event of a math error, the Extended Totals and the Total Bid will be corrected based on the Unit Price furnished in the Bid. Bids with math errors will be compared using the corrected Total Bid (i.e., the math must be correct before a bid is considered for award).

furnished in the Bid. Bids with math errors will be compared using the corrected Total Bid (i.e., the math must be correct before a bid is considered for award).

**END OF INSTRUCTIONS TO BIDDERS**

**Affidavit D – Good Faith Efforts**  
**DUE 72 HOURS AFTER NOTIFICATION**  
 Affidavit D is to be submitted only by the apparent lowest, responsible, responsive bidder within 72 hours after notification.

The apparent lowest, responsible, responsive Bidder shall file within 30 days after the award of the contract a list of all identified subcontractors that the Contractor (Bidder) will use on the project.

**IMPORTANT MWBE INSTRUCTIONS:** It is mandatory for all Bidders to demonstrate their good faith efforts in seeking MWBE participation and provide supporting documentation upon request. The MWBE supporting documentation and information is still required even if using your own workforce. MWBE Prime Contractors will also be required to document good faith efforts.

The above information must be provided as required. Failure to submit these MWBE documents may be grounds for rejection of the bid.

**EQUAL EMPLOYMENT OPPORTUNITY**

During the performance of this contract, the contractor agrees as follows:

- e. The contractor will not discriminate against any employee or applicant for employment because of race, handicap, age, color, religion, sex, or national origin. The contractor will take affirmative action to ensure that applicants are employed and that employees are treated during employment without regard to race, handicap, age, color, religion, sex or national origin. Such action shall include but not be limited to the following: employment, upgrading, demotion or transfer, recruitment or advertising, layoff, termination rates of pay or other forms of compensation, and selection for training including apprenticeship. The contractor agrees to post in conspicuous places available to employees and applicants for employment notices setting forth the provisions of the nondiscrimination clause.
- b. The contractor will in all solicitations or advertisements for employees placed by or on behalf of the contractor state that all qualified applicants will receive consideration for employment without regard to race, handicap, age, color, religion, sex, or national origin.
- c. The contractor will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding a notice to be provided advising the labor union or workers' representative of the contractor's commitments under the Equal Employment Opportunity section of this contract and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
- d. In the event of the contractor's noncompliance with nondiscrimination clauses of this contract or with any such rules, regulations or orders, this contract may be canceled, terminated, or suspended in whole or in part and the contractor may be declared ineligible for further County contracts.
- e. The contractor will include the provisions of this section in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Board of County Commissioners of the County of Durham, North Carolina so that such provisions will be binding such subcontractor or vendor.



**REQUIREMENTS**  
**Medical Supplies for Durham County Emergency Medical Services**  
**IFB No. 24-008**

**NOTE: See Attachment 1 - Spreadsheets for Medical Supplies by Sections and specific products for the bid. EXCEL is required to access the spreadsheets.**

**Warehouse And Distribution requirements:**

- Vendor must have multiple distribution centers throughout the country available to ship products in event main distribution center is unavailable.
- Vendor must be able to ship items in multiple units of measurement. Box, case, each, etc.
- Vendor must be able to provide high quality alternative options to items that are out of stock or discontinued.
- Vendor must have FDA certified, in-house kitting facility to provide custom kitting solutions as needed.
- All products must be delivered with at least a 12-month expiration date from date of receipt. Only exceptions will be pre-approved by Durham County EMS representative.

**Electronic Access and Online Ordering Requirements:**

- Vendor must offer online, secure ordering.
- Vendor's website must be able to provide historical reporting data.
- Vendor's website must provide real time availability.
- Vendor is highly preferred to be integrated with Operative IQ for ordering.

**Sales Representative Requirements:**

- Vendor must provide a local or regional sales representative familiar with EMS products.
- Vendor sales representative must be able to provide on site meetings quarterly, at minimum.
- Vendor must be able to provide training on all products offered.

**General Requirements:**

- Vendor must be able to ship products palletized when appropriate.
- Vendor must be able to provide free shipping on all products and orders.
- Vendor must quote and supply all items within the section(s) bid.
- Alternate products are not acceptable for this bid unless the stated product has been discontinued. **No substitutions will be accepted.**
- The vendor must provide a Business Continuity Plan or Disaster Recovery Plan explaining how services and products will continue in the event of natural or man-made disaster.

Telephone No.: 800-845-3550  
Fax No.: 800-533-4793

Address  
135 Dunbar Rd  
Melville, NY  
11747

Name of Company  
Henry Schein, Inc.

Date  
10/17/2003

Authorized Signature  
Julia Strang  
Print Name  
Julia Strang  
Title  
Supervisor EMS

I certify that no one knows the contents of this bid outside the undersigned, and to the best of my knowledge all requirements have been complied with.

DELIVERY POINT:  
2330 Presidential Drive, Ste 114  
Durham, NC 27703

Section 1 - Airway Management	\$ 113,259.61
Section 2 - Monitor Supplies	\$ 131,438.93
Section 3 - CPAP and DVM	\$ 66,824.65
Section 4 - EZ IO	\$ No Bid
Section 5 - IV	\$ 139,227.72
Section 6 - IV Supplies	\$ 145,094.69
Section 7 - Trauma Supplies	\$ 52,356.00
<b>Total Bid Price</b>	<b>\$ 548,201.60</b>

See Attachment 1 - Excel Spread Sheet

In accordance with the attached Instructions to Bidders and Specifications, we submit the following bid to the County of Durham. DELIVERY TO BE F. O. B. DESTINATION.

Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24-008

### BID FORM



**ADDENDUM ACKNOWLEDGMENT**  
**Medical Supplies for Durham County Emergency Medical Services**  
**IFB No. 24-008**

Receipt of the following Addendum is acknowledged:

Addendum No. 1	Date: 10/10/23
Addendum No. 2	Date: 10/11/23
Addendum No. _____	Date: _____

Signature: Julia Strange  
Printed Name: Julia Strange  
Title: Supervisor EMS  
Name of Company: Henry Schein, Inc.  
Date: 10/17/23

COUNTY OF DURHAM  
NON-COLLUSION AFFIDAVIT

STATE OF NORTH CAROLINA  
COUNTY OF DURHAM

Julia Strange, being first duly sworn, deposes and says that:

1. He/She is the Supervisor EMS of Henry Schein, Inc., the bidder that has submitted the attached bid;

2. He/She is fully informed respecting the preparation and contents of the attached bid and of all pertinent circumstances respecting such bid;

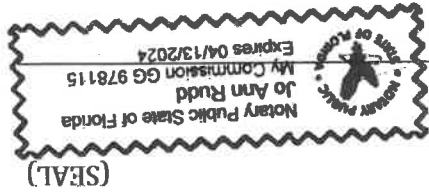
3. Such bid is genuine and is not a collusive or sham bid;

4. Neither the said bidder nor any of its officers, partners, owners, agents, representatives, employees, parties of interest, including this affiant, has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other bidder, firm or person to submit a collusive or sham bid in connection with the contract for which the attached bid has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other bidder, firm or person to fix the price or prices in the attached bid or of any other bidder, or to fix any overhead, profit or cost element of the bid price of any other bidder or to secure through collusion, conspiracy, connivance or unlawful agreement any advantage against the County of Durham or any person interested in the proposed contract; and

5. The price or prices quoted in the attached bid are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the bidder or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

Subscribed and sworn before me, this 17 day of Oct 2023

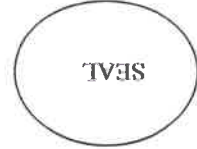
Julia Strange  
TITLE: Supervisor, EMS



Notary Public  
My Commission Expires

(Affidavits A-D and Appendix E)

**MWBE FORMS**



\_\_\_\_\_ Date: \_\_\_\_\_ Name of Authorized Officer: \_\_\_\_\_  
 \_\_\_\_\_ Signature: \_\_\_\_\_  
 \_\_\_\_\_ Title: \_\_\_\_\_  
 State of North Carolina, County of \_\_\_\_\_  
 Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
 Notary Public \_\_\_\_\_  
 My commission expires \_\_\_\_\_

The undersigned hereby certifies that he or she has read the terms of the minority business commitment and is authorized to bind the bidder to the commitment herein set forth.

In accordance with GS 143-128.2(a) the undersigned will enter into a formal agreement with the firms listed in the Identification of Minority Business Participation schedule conditional upon execution of a contract with the Owner. Failure to abide by this statutory provision will constitute a breach of the contract.

- 1-Contacted minority businesses that reasonably could have expected to submit a quote and that were known to the contractor, or available on State or local government-maintained lists, at least 10 days before the bid date and notified them of the nature and scope of the work to be performed.
- 2-Made the construction plans, specifications and requirements available for review by prospective minority businesses or providing these documents to them at least 10 days before the bids are due.
- 3-Broken down or combined elements of work into economically feasible units to facilitate minority participation.
- 4-Worked with minority trade, community, or contractor organizations identified by the Office of Historically Underutilized Businesses and included in the bid documents that provide assistance in recruitment of minority business.
- 5-Attended pre-bid meetings scheduled by the public owner.
- 6-Provided assistance in getting required bonding or insurance or provided alternatives to bonding or insurance for subcontractors.
- 7-Negotiated in good faith with interested minority businesses and did not reject them as unqualified without sound reasons based on their capabilities. Any rejection of a minority business based on lack of qualification should have the reasons documented in writing.
- 8-Provided assistance to an otherwise qualified minority business in need of equipment, loan capital, lines of credit, or joint pay agreements to secure loans, supplies, or letters of credit, including waiving credit that is ordinarily required. Assisted minority businesses in obtaining the same unit pricing with the Bidder's suppliers in order to help minority businesses in establishing credit.
- 9-Negotiated joint venture and partnership arrangements with minority businesses in order to increase opportunities for minority business participation on a public construction or repair project when possible.
- 10-Provided quick pay agreements and policies to enable minority contractors and suppliers to meet cashflow demands.

I have made a good faith effort to comply under the following areas checked:  
 (A minimum of 5 areas must be checked in order to have achieved a "good faith effort")

\_\_\_\_\_ Affidavit of \_\_\_\_\_  
 (Name of Bidder)

COUNTY OF DURHAM

State of North Carolina AFFIDAVIT A - List of the Good Faith Effort

ATTACH TO BID

Affidavit A

NA

## Small Business Subcontracting Plan 2023

Contractor **Henry Schein, Inc.** agrees to the requirements set forth in **FAR 19.704, Subcontracting plan requirements, and FAR clause 52.219-9, Small Business Subcontracting Plan,**

**This must be done before submitting their contracting plans.**

Please note that DSCP has subcontracting goals of 22.5% for small business, 3% for HUBZone Small Business, 5% for Small Disadvantaged (including ANCs and Indian tribes), Business (SDB) (including ANCs and Indian tribes), and 5% for Women-Owned Small Business (WOSB), 3% Veteran-Owned Small Business (VOSB), 3% and Service Disabled Veteran-Owned Small Business (SDVOSB) for fiscal year 2020. If DOD Minimums are not met, justification(s) for all goals failing to meet minimum are required.

### Identification Data:

Company Name: Henry Schein, Inc.  
 Address: 135 Duryea Rd, Melville, NY 11747  
 Dunn & Bradstreet Number: 1-242-0880  
 Cage code: 0NUS8  
 Date Prepared: 17 December 2021  
 Solicitation Number: Company-wide Plan  
 Item/Service: Dental/Medical/Veterinary Products and Services

### 1. TYPE OF PLAN: (Check only one)

INDIVIDUAL PLAN: In this type of plan, all elements are developed specifically for this contract and apply for the full term of this contract. (See Reporting Requirements Section 10)

MASTER PLAN: In this type of plan, goals are separately developed for this contract in an individual plan; all other elements are standard. The master plan must be approved once every three years. Once incorporated into a contract with specific goals, it is valid for the life of the contract.

COMMERCIAL PLAN: This type of plan is used when the contractor sells large quantities of off-the-shelf commodities to many Government agencies. Plans and goals are negotiated with the initial agency on a company-wide basis rather than for individual contracts. The plan is effective only during year approved. The contractor must provide a copy of the initial agency approval, and must submit an annual SF 295 to with a breakout of subcontracting prorated for DOD. (See Reporting Requirements Section 10). Effective period dates of 1/1/2023 thru 12/31/2023.

**NOTE** This submitted plan covers all domestic sales, procurement and subcontracting actions for all divisions within Henry Schein, Inc.

### 2. GOALS:

State separate dollar and percentage goals for Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business in the following format. Express all dollar goals as a percentage of total planned subcontracting dollars. **If DOD Minimums are not met, a justification is required.** Henry Schein, Inc. is a fortune 500 company whose annual sales for fiscal 2022 was \$5,223,908,970. We believe that fiscal 2023 sales will mimic 2022 sales. Due to this, the anticipated goals are \$1,175,379,518 (22.5% of annual sales) for Small Business Concerns, \$156,717,269 (3% of annual sales) for HUBZone Small Business Concerns, \$261,195,449 (5% of annual sales) for Small Disadvantaged, \$261,195,449 (5% of annual sales) for Woman-Owned Small Business Concerns, \$156,717,269 (3% of annual sales) for Veteran-Owned Small Business Concerns, and \$156,717,269 (3% of annual sales) for Service Disabled Veteran-Owned Concerns.

A. Estimated dollar value of all planned subcontracting, i.e., to all types of business concerns under this contract is:

<b>Estimated Dollar Value of All Planned Subcontracting</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$5,223,908,970				
100 %	100%	100%	100%	100%

B. Estimated dollar value and percentage of total planned subcontracting to large business concerns.

(all business concerns classified as other than small)

<b>Subcontracting to Large Business Concerns</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$4,048,529,452				
77.5%	77.5%	77.5%	77.5%	77.5%

C. Estimated dollar value and percentage of total planned subcontracting to Small Business Concerns (including ANCs and Indian tribes) is: (Include Small Business, Small Disadvantaged, and Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business).

<b>Subcontracting to Small Business Concerns (including ANCs and Indian tribes)</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$1,175,379,518				
22.5%	22.5%	22.5%	22.5%	22.5%

D. Estimated dollar value and percentage of total planned subcontracting to HUBZone Small Business Concerns (including ANCs and Indian tribes) is:

<b>Subcontracting to HUBZone Small Business Concerns (including ANCs and Indian tribes)</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$156,717,269				
3%	3%	3%	3%	3%

E. Estimated dollar value and percentage of total planned subcontracting to small Disadvantaged (including ANCs and Indian tribes) business concerns is:

<b>Subcontracting to Small Disadvantaged (including ANCs and Indian tribes) Concerns</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$261,195,449				
5%	5%	5%	5%	5%

F. Estimated dollar value and percentage of total planned subcontracting to women-owned Small Business Concerns (including ANCs and Indian tribes) is:

<b>Subcontracting to Women-Owned Small Business Concerns (including ANCs and Indian tribes)</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$261,195,449				
5%	5%	5%	5%	5%

G. Estimated dollar value and percentage of total planned subcontracting to Veteran-Owned Small Business Concerns (including ANCs and Indian tribes) is:



Justification The Small Business Subcontracting Plan 2022 achievements exceeded goals for the overall small business category, and although, the subcategories were below the established SBA goals, our endeavor to expand our utilization of companies in these subcategories are having an impact as illustrated by the growth of expenditures made to these companies. While the majority of dollar spend is motivated by our customer product demand, our improvements in overhead SBE utilization exemplifies commitment to this program. We believe our greatest area for opportunity is through networking with new partners and working with our customers on shared efforts to increase spend with diverse suppliers.

Henry Schein is committed to working with a diverse supplier base that includes small businesses owned by veterans, service-disabled veterans, ethnic minorities, women, LGBT+, historically underutilized business zones (HUBZone), and small business enterprises, to provide our customers with the best selection of high-quality products and to foster innovation, additional perspectives, and develop stronger relationships with the communities we serve.

The values of Team Schein guide our efforts --- to our suppliers, we are dedicated to promoting an environment that enables growth in the spirit of partnership, and to society at large, we are dedicated to enabling further access to health care. Our supplier diversity program supports the U.S. Small Business Administration (SBA), and we recognize its importance in contributing to a positive economic impact, locally and nationally.

A foundational element of our supplier diversity program is fostering a diverse and inclusive workforce. Our dedication in this area is prominent throughout our D&I work, and we encourage our suppliers to adhere to standards in our Global Supplier Code of Conduct. We believe that a diverse and inclusive workforce nurtures an environment that understands and promotes supplier diversity.

We have integrated supplier diversity into our onboarding processes. During our supplier evaluation process, each supplier partner is requested to complete our Business Partner Certification. This enables us to review diversity classification(s) and certification(s) before onboarding a supplier. Additionally, as part of our RFP and bids processes, we continue to make enhancements to advance opportunities with diverse suppliers.

Having the right tools and reporting in place is essential to advancing our efforts. We have enhanced our capabilities in this area to support the integrity of our data and provide reporting to track and monitor diversity spending. Furthermore, we continue to educate our

<b>Subcontracting to Service Disabled Veteran-Owned Small Business Concerns (including ANCs and Indian tribes)</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$156,717,269				
3%	3%	3%	3%	3%

H. Estimated dollar value and percentage of total planned subcontracting to Service Disabled Veteran-Owned Small Business Concerns (including ANCs and Indian tribes) is:

<b>Subcontracting to Veteran-Owned Small Business Concerns (including ANCs and Indian tribes)</b>				
Base	1st Option	2nd Option	3rd Option	4th Option
\$156,717,269				
3%	3%	3%	3%	3%

**5. METHOD Identifying Sources**

The US Department of Defense Office of Small Business Programs has established Prime Contracting goals. Our current plan reflects the goals set by the US Department of Defense Office of Small Business Programs as of FY 2013. Having the right tools and reporting in place is essential to advancing our efforts. We have enhanced our capabilities in this area to support the integrity of our data and provide reporting to track and monitor diversity spending. Furthermore, we continue to educate our teams on the importance of supplier diversity and have enhanced the visibility of our diverse supplier partners. This provides an opportunity to help support and advance our partners in a meaningful way.

J1. Explain the methods used to develop the subcontracting goals for Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes).

**4. METHOD (PLEASE PROVIDE NARRATIVE)**

(Attach additional sheets if necessary.)

Business Category or Size										
Product	Service	NAICS	Large	Small Bus.	SDB	SDB	WOSB	HUBZONE	VOSB	SDVOSB

3.1. Provide a description of principle types of supplies, products and/or services to be subcontracted under this contract, and the types of businesses supplying them, is: (Check all that apply). **SEE ATTACHED LIST**

Henry Schein continues to make strides in our endeavor to require vendors to provide data, collect and maintain vendor data and thus allow us to recognize qualified SBA vendors that exist as current supply and service partners and in working to discover new partners who meet these criteria. We will continue to advise and educate our partners on the merit of proper certification and self-identification in regard to working towards attaining the objective of increased engagement by SBA entities in federal programs. This will now be enhanced due to our new supplier diversity metrics processes. At the same time, we are open to working with SBA certified companies that can help us to achieve our company goals both in terms of federal objectives and our commercial interests. In addition to our efforts to increase our subcontracting activities, we are also working to support small businesses in their efforts to sell to the federal government. Although these efforts do not add to our company goal achievement, we feel that it is important to support these companies in their direct efforts and inevitably increase the governments direct spending with SBA certified companies. The goals for 2023 have again been set at the approved DOD Office of Small Business Programs level. Henry Schein will continue to strive to reach these goals in the coming years.

**7. PROGRAM ADMINISTRATOR:**

Contract	Sales	Percentages
ECAT Dental -	\$13,709,816	0.15%
ECAT Lab	\$1,689,489	0.02%
36F79718D0314	\$19,654,967	0.22%
2022 HSI Domestic Sales	\$9,045,729,819	

As a company-wide plan, the proportionate share of indirect costs would be a percentage per contract as a ratio of contract sales versus Henry Schein, Inc. domestic sales. The current percentage is listed below by contract.

If indirect and overhead costs HAVE BEEN included, explain the method used to determine the proportionate share of such costs to be allocated as subcontracts to Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes).

6. Indirect and overhead costs  HAVE BEEN or  HAVE NOT BEEN included in the dollar and percentage subcontracting goals stated above. (Check one.) See below if indirect and overhead costs HAVE BEEN included

Existing company source lists
SBA generated referrals
Small Business Entity self referrals
State Certification Web sites
Web based company information sites

(c). Identify all source lists used in the determination process.

(b). Explain how the capabilities of Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business concerns were determined.  
 --- Henry Schein, Inc. first and foremost looks for and works with companies which can provide services and products meeting our company's standards and needs. It is only after a company has been determined to be capable of fulfilling the requirement that the company is queried as to its SBA status.

(a). Explain how the product and service areas to be subcontracted were established, how the existing company source list.  
 Description of the method used to identify potential sources for solicitation purposes (e.g. Inc.'s past history of subcontracting actions that were performed by companies with these qualifications.  
 --- Products and services to be subcontracted were established based upon Henry Schein, Inc.'s past history of subcontracting actions that were performed by companies with these qualifications.  
 --- Products and services to be subcontracted were established based upon Henry Schein, Inc.'s past history of subcontracting actions that were performed by companies with these qualifications.  
 --- Products and services to be subcontracted were established based upon Henry Schein, Inc.'s past history of subcontracting actions that were performed by companies with these qualifications.

FAR 52.219-9(d)(7) requires information about the company employee who will administer the subcontracting program. Please provide the name, title, address, phone number, position within the corporate structure and the duties of that employee.

Name: Tammy Legg  
Title: Sr Federal Strategic Account Manager  
Position: Sr Federal Strategic Account Manager  
Email Address: tammy.legg@henryschein.com  
Address: Henry Schein Inc, Corporate Accounts Group (E255), 135 Duryea Rd., Melville, NY 11747  
Telephone: 775 354 9197

Duties: The Program Administrator's general overall responsibility for the Contractor's subcontracting program, i.e., developing, preparing, and executing individual subcontracting plans and monitoring performance relative to this particular plan. **These duties may include, but are not limited to the following activities.**

A. Developing and promoting company/division policy statements that demonstrate the company's/division's support for awarding contracts and subcontracts to Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes).  
B. Developing and maintaining bidders' lists of Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes) from all possible sources.

C. Ensuring periodic rotation of potential subcontractors on bidders' lists.  
D. Assuring that Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes) are included on the bidders' list for every subcontract solicitation for products and services they are capable of providing.  
E. Ensuring that subcontract procurement "packages" are designed to permit the maximum possible participation of Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes).  
F. Reviewing subcontract solicitations to remove statements, clauses, etc., which might tend to restrict or prohibit small, HUBZone small, small Disadvantaged (including ANCs and Indian tribes) and women-owned small business participation.

G. Ensuring that the subcontract bid proposal review board documents its reasons for not selecting any low bids submitted by Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes).

H. Overseeing the establishment and maintenance of contract and subcontract award records.  
I. Attending or arranging for the attendance of company counselors at Business Opportunity Workshops, Minority Business Enterprise Seminars, Trade Fairs, etc.

J. Directly or indirectly counseling Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes) on subcontracting opportunities and how to prepare bids to the company.  
K. Providing notice to subcontractors concerning penalties for misrepresentations of business status as Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes) for the purpose of obtaining a subcontract that is to be included as part or all of a goal contained in the contractor's subcontracting plan.

L. Conducting or arranging training for purchasing personnel regarding the intent and impact of Public Law 95-907 on purchasing procedures.  
M. Developing and maintaining an incentive program for buyers, which supports the subcontracting program.

N. Monitoring the company's performance and making any adjustments necessary to achieve the subcontract plan goals.

O. Preparing and submitting timely reports.

P. Coordinating the company's activities during compliance reviews by Federal agencies.

### 8. EQUITABLE OPPORTUNITY

FAR 52.219-9(d)(8) requires a description of the efforts your company will make to ensure that Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes) will have an equitable opportunity to compete for subcontracts. These efforts may include, but are not limited to the following activities: (Check those that apply and include additional efforts in section C below.)

- A. Outreach efforts to obtain sources:
  - Contacting minority and small business trade associations
  - Contacting business development organizations
  - Requesting sources from the Small Business Administration's Procurement Marketing and Access Network CCR (PRO-Net)
  - Attending small, minority, and women-owned business procurement conferences and trade fairs
  - Internal efforts to guide and encourage purchasing personnel.
  - Presenting workshops, seminars and training programs
  - Establishing, maintaining and using Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business source lists, guides and other data for soliciting subcontracts
- B. Monitoring activities to evaluate compliance with the subcontracting plan

C. Additional efforts: (Please describe.)


### 9. CLAUSE INCLUSION AND FLOWDOWN

The offeror agrees that the FAR clause of this contract entitled "Utilization of Small Business Concerns" (52.219-8) will be included in all subcontracts that offer further subcontracting opportunities, and that the Offeror will require all subcontractors (except small business concerns) that receive subcontracts in excess of the applicable threshold specified in FAR 19.702(a) on the date of subcontract award, with further subcontracting possibilities to adopt a subcontracting plan that complies with the requirements of FAR clause 52.219-9 Small Business Subcontracting Plan.

NOTE: See exceptions listed in FAR 52.219-9(j).

Henry Schein, Inc. agrees that the clause will be included and that the plans will be reviewed against the minimum requirements for such plans. The acceptability of percentage goals Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes) must be determined on a case-by-case basis depending on the supplies and services involved and the availability of potential Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes). Once the plans are negotiated, approved, and implemented, the plans must be monitored through the submission of periodic reports, including Standard Form (SF) 294 and SF 295 reports.

In accordance with policy letters published by the Office of Federal Procurement Policy, such assurance must describe the offer's procedures for the review, approval and monitoring for compliance with such subcontracting plans.

### 10. REPORTING AND COOPERATION

FAR 52.219-9(d)(10) requires that your company (1) cooperate in any studies or surveys as may be required. X Yes No

(2) submit periodic reports which show compliance with the subcontracting plan:  Yes  No

(3) Submit the Individual Subcontracting Report (ISR) and/or the Summary Subcontracting Report (SSR), in accordance with the paragraph (i) of this clause using the Electronic Subcontracting Reporting System (eSRS) at <http://esrs.gov>. The reports shall provide information on subcontract awards to Small Business Concerns (including ANCs and Indian tribes), veteran-owned Small Business Concerns (including ANCs and Indian tribes), service-disabled veteran-owned Small Business Concerns (including ANCs and Indian tribes), HUBZone Small Business Concerns (including ANCs and Indian tribes), women-owned Small Business Concerns (including ANCs and Indian tribes), and Historically Black Colleges and University Institutions. Reporting shall be in accordance with this clause, or as provided in agency regulations. Ensure that its subcontractors with subcontracting plans agree to submit the ISR and/or the SSR using eSRS.

Yes  No

\*Provide its prime contract number, its DUNS number, and the e-mail address of the Government or Contractor official responsible for acknowledging or rejecting the reports, to all first-tier subcontractors with subcontracting plans so they can enter this information into the eSRS when submitting their reports;

Yes  No

\*Require that each subcontractor with a subcontracting plan provide the prime contract number, its own DUNS number, and the e-mail address of the Government or Contractor official responsible for acknowledging or rejecting the reports, to its subcontractors with subcontracting plans, submit Standard Form (SF) 294, "Subcontracting Reports for Individual Contracts," and SF 295.

Yes  No

\*Require that each subcontractor with a subcontracting plan provide the prime contract number, its own DUNS number, and the e-mail address of the Government or Contractor official responsible for acknowledging or rejecting the reports, to its subcontractors with subcontracting plans, its own DUNS number, and the e-mail address of the Government or Contractor official responsible for

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

Calendar Period	Report Due	Date	Send Report To
10/01-03/31	SF 294	04/30	Contracting Officer/DCMA Assistant Director/SBA Gov Contr. Rep (Individual Plan)
04/01-09/30	SF 294	10/30	Contracting Officer/DCMA Assistant Director/SBA Gov Contr. Rep (Individual Plan)
10/01-09/30	SF 295*	10/30	Contracting Officer/DCMA Assistant Director/SBA Gov Contr. Rep (Individual Plan & Commercial Plan)

**11. RECORDKEEPING**

FAR 52.219-9(d)(1) requires a list of the types of records your company will maintain to demonstrate the procedures adopted to comply with the requirements and goals in the subcontracting plan. These records include, but are not limited to, the following:

A. Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business concern source lists, guides, and other data identifying such vendors.

B. Organizations contacted for Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business sources.

C. Records on each subcontract solicitation resulting in an award of more than the simplified acquisition threshold, as defined in FAR 2.101 on the date of subcontract award, indicating -

C1. Whether Small Business Concerns (including ANCs and Indian tribes) were solicited, and if not, why not.

C2. Whether HUBZone Small Business Concerns (including ANCs and Indian tribes) were solicited, and if not, why not.

C3. Whether small Disadvantaged (including ANCs and Indian tribes), business concerns were solicited, and if not, why not.

C4. Whether women-owned Small Business Concerns (including ANCs and Indian tribes) were solicited, and if not, why not.

C5. Whether Veteran-Owned Small Business Concerns (including ANCs and Indian tribes) were solicited, and if not, why not.

C6. Whether Service Disabled Veteran-Owned Small Business Concerns (including ANCs and Indian tribes) were solicited, and if not, why not.

C7. Reasons for the failure of solicited Small Business, Small Disadvantaged (including ANCs and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business Concerns (including ANCs and Indian tribes) to receive the subcontract award.

(1) SF 294 This report is not required for commercial plans. The report is required for each contract containing an individual subcontracting plan. For Contractors the report shall be submitted to the Contracting Officer, or as specified elsewhere in this contract. In the case of a subcontract with a subcontracting plan, the report shall be submitted to the entity that awarded the subcontract.

(1) Henry Schein's Small Business Subcontracting Plan is a commercial plan and therefore does not require the submission of an SF 294 report. (see FAR 52.219-9(d)(15)(1)(i)). However, if this plan is changed then Henry Schein shall submit a SF 294 in accordance with paragraph (i)(1). The Contractor shall submit SFRS using the web-based eSRS at [www.esrs.gov](http://www.esrs.gov) < Cauton-http://www.esrs.gov > . Purchases from a corporation, company, or subdivision that is an affiliate of the Contractor or subcontractor are not included in these reports. Subcontract awards by affiliates shall be treated as subcontract awards by the Contractor. Subcontract award data reported by the Contractor and subcontractors shall be limited to awards made to their immediate subcontractors. Credit cannot be taken for awards made to lower tier subcontractors, unless the Contractor or subcontractor has been designated to receive a small business or small disadvantaged business credit from an ANC or Indian tribe. Only subcontracts involving performance in the U.S. or its outlying areas should be included in these reports.

(15) Henry Schein will pay its small business subcontractors on time and in accordance with the terms and conditions of the underlying subcontract, and notify the controlling officer when the prime contractor makes either a reduced or an untimely payment to a small business subcontractor (see 52.242-5).

(14) Henry Schein will not prohibit a subcontractor from discussing with the Contracting Officer any material matter pertaining to the payment to or utilization of a subcontractor.

(13) Henry Schein will provide the Contracting Officer with a written explanation if the Contractor fails to acquire articles, equipment, supplies, services or materials or obtain the performance of construction work as described in (d)(12) of this clause. This written explanation must be submitted to the Contracting Officer within 30 days of contract completion.

(ii) The Contractor used the small business concern's pricing or cost information or technical expertise in preparing the proposal, where there is written evidence of an intent or understanding that the small business concern will be awarded a subcontract for the related work when the modification is executed.

(i) The Contractor identifies the small business concern as a subcontractor in the proposal or associated small business subcontracting plan, to furnish certain supplies or perform a portion of the subcontract; or

(12) If an opportunity arises or a requirement presents itself where Henry Schein utilized small business concerns in the preparation of a proposal, Henry Schein will make a good faith effort to acquire articles, equipment, supplies, services, or materials, or obtain the performance of construction work from the small business concern that it used in preparing the proposal, for the preparation of the modification, in the same or greater scope, amount, and quality used in preparing and submitting the modification proposal. Responding to a request for a quote does not constitute use in preparing a proposal. The Contractor used a small business concern in preparing the proposal for a modification if—

## 12. Good Faith Efforts to Acquire Assistance from SBF's

FAR 52.219-9(d)(12) thru (15)

Henry Schein will maintain records of outreach efforts to contact business development organizations in accordance with FAR 52.219-9 (d) (11) (iv) (D).

- G. Other records to support your compliance with the subcontracting plan: (Please describe commercial plans).
- F. On a contract-by-contract basis, records to support subcontract award data including the name, address and business size of each subcontractor. (This item is not required for company or division-wide compliance.)
- E. Records to support internal activities to (1) guide and encourage purchasing personnel, e.g., workshops, seminars, training programs, incentive awards; and (2) monitor activities to evaluate and Service Disabled Veteran Small Business, procurement conference and trade fairs.
- D. Records to support other outreach efforts, e.g., contacts with minority and small business trade associations, attendance at Small Business, Small Disadvantaged (including ANCs and Indian tribes), and Indian tribes), Woman-Owned Small Business, HUBZone Small Business, Veteran-Owned Small Business and Service Disabled Veteran Small Business, procurement conference and trade fairs.

(i) The report shall be submitted semi-annually during contract performance for the periods ending March 31 and September 30. A report is also required for each contract within 30 days of contract completion. Reports are due 30 days after the close of each reporting period, unless otherwise directed by the Contracting Officer. Reports are required when due, regardless of whether there has been any subcontracting activity since the inception of the contract or the previous reporting period. When a Contracting Officer rejects a report, the Contractor shall submit a revised report within 30 days of receiving the notice of report rejection.

(iii)

(A) When a subcontracting plan contains separate goals for the basic contract and each option, as prescribed by FAR 19.704(c), the dollar goal inserted on this report shall be the sum of the base period through the current option; for example, for a report submitted after the second option is exercised, the dollar goal would be the sum of the goals for the basic contract, the first option, and the second option.

(B) If a subcontracting plan has been added to the contract pursuant to 19.702(a)(3) or 19.301-2(e), the Contractor's achievements must be reported in the report on a cumulative basis from the date of incorporation of the subcontracting plan into the contract.

(iii) When a subcontracting plan includes indirect costs in the goals, these costs must be included in this report.

(2) SSR

(i) Reports submitted under individual subcontracting plans:

(A) This report encompasses all subcontracting under prime contracts and subcontracts with an executive agency, regardless of the dollar value of the subcontracts. This report also includes indirect costs on a prorated basis when the indirect costs are excluded from the subcontracting goals.

(B) The report may be submitted on a corporate, company or subdivision (e.g., plant or division operating as a separate profit center) basis.

(C) If the Contractor and/or a subcontractor is performing work for more than one executive agency, a separate report shall be submitted to each executive agency covering only that agency's contracts, provided at least one of that agency's contracts is over \$700,000 (over \$.5 million for construction of a public facility) and contains a subcontracting plan. For DoD, a consolidated report shall be submitted for all contracts awarded by military departments/agencies and/or subcontracts awarded by DoD prime contractors.

(D) The report shall be submitted annually by October 30, for the twelve month period ending September 30. When a Contracting Officer rejects an SSR, the Contractor is required to submit a revised SSR within 30 days of receiving the notice of report rejection.

(E) Subcontract awards that are related to work for more than one executive agency shall be appropriately allocated.

(F) The authority to acknowledge or reject SSRs in the eSRS, including SSRs submitted by subcontractors with subcontracting plans, resides with the Government agency awarding the prime contracts unless stated otherwise in the contract.

(ii) Reports submitted under a commercial plan.

(A) The report shall include all subcontract awards under the commercial plan in effect during the Government's fiscal year and all indirect costs.

(B) The report shall be submitted annually, within 30 days after the end of the Government's fiscal year.


(C) If a Contractor has a commercial plan and is performing work for more than one executive agency, the Contractor shall specify the percentage of dollars attributable to each agency.

(D) The authority to acknowledge or reject SSRs for commercial plans resides with the Contracting Officer who approved the commercial plan.



**12. SIGNATURES REQUIRED**

This subcontracting plan was submitted by:

Signature:  Typed Name: Tammy Legg

Title: Sr Federal Strategic Account Manager

Date:

Effective Date: 1 January 2023  
to 31 December 2023

**Small Business (SB)** – Located in U.S., organized for profit, including affiliates is independently owned & operated, not dominant in field of operations in which it is bidding on Government contracts. AND meets Small Business Administration (SBA) size standards included in solicitation. Size standard is based upon the North American Industrial Classification Standard (NAICS) assigned to the specific procurement dependent upon product/service purchased.

**Alaska Native Corporation (ANC)** - Any Regional Corporation, Village Corporation, Urban Corporation, or Group Corporation organized under the laws of the State of Alaska in accordance with the Alaska Native Claims Settlement Act, as amended (43 U.S.C. 1601, *et seq.*) and which is considered a minority and economically disadvantaged concern under the criteria at 43 U.S.C. 1626(e)(1). This definition also includes ANC direct and indirect subsidiary corporations, joint ventures, and partnerships that meet the requirements of 43 U.S.C. 1626 (g)(2).

**Woman-Owned Small Business (WOSB)** – Small Business, at least 51% owned by ≥ 1 women. AND management & daily business operations controlled by ≥ 1 women.

**Small Disadvantaged (including ANCs and Indian tribes), Business (SDB)** – Small Business, unconditionally owned & controlled by ≥ 1 socially & economically Disadvantaged (including ANCs and Indian tribes), individuals who are of good character & citizens of the U.S.; AND SBA-certified.

**Small Disadvantaged (including ANCs and Indian tribes), Business 8(a) Certified 8(a)** – Small Business, SBA-certified as a SDB, AND SBA-certified into the 8(a) Business Development Program for a period of 9 years.

**Historically Underserved Business Zone (HUBZone)** – Small Business, owned & controlled ≥ 51% by U.S. citizens, SBA-certified as a HUBZone concern (principal office located in a designated HUBZone & ≥ 35% of employees live in a HUBZone).

**Veteran-Owned Small Business (VOSB)** – Small Business, veteran-owned as defined in 38 USC 101(2), ≥ 51% owned by ≥ 1 veterans, & management/daily operations controlled by ≥ 1 veterans.

**Service-Disabled Veteran Owned Small Business (SD-VOSB)** – Small Business, veteran-owned, ≥ 51% owned by ≥ 1 service-disabled veterans, AND management & daily business operations controlled by ≥ 1 service-disabled veterans OR in the case of veteran with permanent & severe disability, the spouse or permanent caregiver of such veteran, AND with 0% - 100% service-connected disability as defined in 38 USC 101(16) & documented on DD 214 or equivalent.

**Historically Black Colleges & Universities (HBCU)/Minority Institutions (MI)** – HBCU is an accredited institution established before 1964 whose principal mission is education of black Americans. MIs are institutions meeting requirements of Higher Education Act of 1965 and Hispanic-serving institutions defined at 20 USC 1059. The Secretary of Education must designate HBCUs/MIs. SEE LIST AT:

DULIN, WILLIAM, F.  
Digitally signed by  
DULIN, WILLIAM, F.; 1229178292  
Date: 2023.01.18 15:54:05 -0500

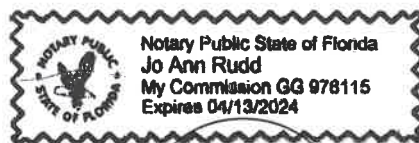
Signature: 1229178292

Typed Name: William Dulin

Title: Contracting Officer

This subcontracting plan was accepted by:

<http://www.cd.gov/about/offices/isx/ocr/edite-minorityinst.html>



State of North Carolina, County of Volusia  
Subscribed and sworn to before me this 17 day of Oct 2023  
Notary Public  
My commission expires Jo Ann Rudd

Name of Authorized Officer: Julia Strang  
Signature: Julie Atney  
Title: Super Visor EMS

Date: 10/17/2023

The undersigned hereby certifies that he or she has read this certification and is authorized to bind the Bidder to the commitments herein contained.

In making this certification, the Bidder states that the Bidder does not customarily subcontract elements of this type project, and normally performs and has the capability to perform and will perform all elements of the work on this project with his/her own current work forces; and agrees to provide any additional information or documentation requested by the owner in support of the above statement.

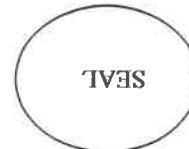
I hereby certify that it is our intent to perform 100% of the work required for the Medical Supplies contract. (Name of Project)

Affidavit of Henry Schein, Inc. (Name of Bidder)  
COUNTY OF DURHAM

State of North Carolina AFFIDAVIT B - Intent to Perform Contract with Own Workforce

ATTACH TO BID - IF YOU ARE NOT UTILIZING SUBCONTRACTORS

Affidavit B



My commission expires \_\_\_\_\_  
 Notary Public \_\_\_\_\_  
 State of North Carolina, County of \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
 Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
 Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Name of Authorized Officer: \_\_\_\_\_ Date: \_\_\_\_\_

The undersigned hereby certifies that he or she has read the terms of this commitment and is authorized to bind the bidder to the commitment herein set forth.  
 Pursuant to GS 143-128.2(d), the undersigned will enter into a formal agreement with Minority Firms for work listed in this schedule conditional upon execution of a contract with the Owner. Failure to fulfill this commitment may constitute a breach of the contract.  
 \*Minority categories: Black, African American (B), Hispanic (H), Asian American (A), American Indian (I), Female (F)

Firm Name (Street Address/Zip/Telephone)	*Minority Category	Work Description	Dollar Value	Percentage of Goal

I will expend a minimum of \_\_\_\_\_% of the total dollar amount of the contract with minority businesses enterprises. Work will be subcontracted to the following firms listed below. Attach additional sheets if needed.

Project ID No. \_\_\_\_\_ (Project Name) \_\_\_\_\_  
 Amount of Bid \$ \_\_\_\_\_

Affidavit of \_\_\_\_\_ (Name of Bidder) I do hereby certify that on the \_\_\_\_\_

Categories	Construction	Architect/Engineer	Services	Goods	MWBE Availability % (Median Availability)
Black American	14.6	9.8	10.9	2.8	10.4%
Asian American	1.3	3.0	1.1	.43	1.3%
Hispanic American	4.2	1.8	1.1	.43	1.5%
American Indian	.65	.75	1.0	.5	.70%
White Female	13.8	11.0	9.5	7.1	10.3%
<b>Overall MWBE Participation Goal =</b>					<b>25.0%</b>

Durham County Goals for MWBE Participation in the Procurement of Goods, Services and Construction

**COUNTY OF DURHAM**

State of North Carolina AFFIDAVIT C - Portion of the Work to be Performed by Minority Firms

**ATTACH TO BID - IF YOU HAVE MWBE PARTICIPATION**

**Affidavit C**

*Handwritten initials: D/A*

12/4

**Appendix E**

**APPENDIX E**

**MWBE DOCUMENTATION FOR CONTRACT PAYMENTS**

Prime Contractor/Architect: \_\_\_\_\_

Address & Phone: \_\_\_\_\_

Project Name: \_\_\_\_\_

Pay Application #: \_\_\_\_\_ Period: \_\_\_\_\_

The following is a list of payments to be made to minority business contractors on this project for the above-mentioned period.

Firm Name	*Minority Category	Total Contract Amount	Amount Paid this Period	Total Payment Amount to date	Percentage of Work Completed	Scheduled Start Date	Scheduled End Date

\*Minority categories: Black, African American (B), Hispanic (H), Asian American (A), American Indian (I), Female (F)

Date: \_\_\_\_\_ Approved/Certified By: \_\_\_\_\_ Name

\_\_\_\_\_ Title

\_\_\_\_\_ Signature

**\*THIS DOCUMENT MUST BE SUBMITTED WITH EACH PAY REQUEST & FINAL PAYMENT\***

**AFFIDAVIT OF COMPLIANCE**

**AFFIDAVIT OF COMPLIANCE**  
with N.C. E-Verify Statutes

**STATE OF NORTH CAROLINA**  
**COUNTY OF DURHAM**

1, Julia Strange (hereinafter the "Affiant"), being duly authorized by and on behalf of Henry Schein, Inc. (hereinafter "Contractor") after first being duly sworn hereby swears or affirms as follows:

- Contractor understands that E-Verify is the federal E-Verify program operated by the United States Department of Homeland Security and other federal agencies, or any successor or equivalent program used to verify the work authorization of newly hired employees pursuant to federal law in accordance with Article 2 of Chapter 64 of the North Carolina General Statutes; and
- Contractor understands that an "Employer", as defined in NCGS§64-25(4), is required by law to use E-Verify to verify the work authorization of its employees through E-Verify in accordance with NCGS§64-26(a). The term "Employer" does not include State agencies, counties, municipalities, or other governmental bodies.
- Contractor is a person, business entity, or other organization that transacts business in this State and that employs 25 or more employees in the state of North Carolina. (mark Yes or No)
  - YES
  - NO

4. Contractor will ensure compliance with E-Verify to the extent applicable and will ensure compliance by any subcontractors subsequently hired by Contractor to perform work under Contractor's contract with Durham County.

This 19 day of Oct, 2023

Julia Strange  
Signature of Affiant

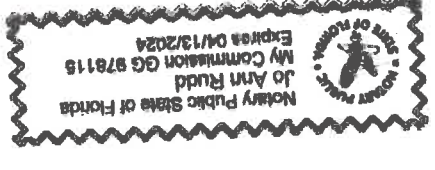
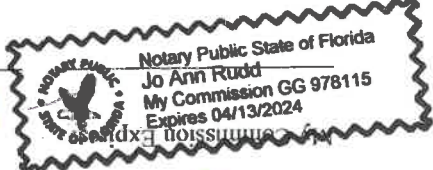
Print or Type Name: Julia Strange

State of Florida

County of Volusia

Signed and sworn to (or affirmed) before me, this the 19 day of Oct, 2023

Jo Ann Rudd  
Notary Public



(Affix Official/Notarial Seal)

**NO BID REPLY FORM**

IFB NO. 24-008  
BID TITLE: Medical Supplies for DCo Emergency Medical Services

Durham County  
Purchasing Division  
201 East Main Street, 7<sup>th</sup> Floor, Room 703  
Durham, NC 27701

TO:

"To assist us in obtaining good competition on our Invitation for bids, we ask that each firm that has received an invitation, but does not wish to bid, state their reason(s) below and return to this office. This information will not preclude receipt of future invitations unless you request removal from the Bidder's List by so indicating below, or do not return this form or bona fide bid.  
Unfortunately, we must offer a "No Bid" at this time because:

1. We do not wish to participate in the bid process.  
2. We do not wish to bid under the terms and conditions of the Invitation for bid document. Our objections are:

3. We do not feel we can be competitive.  
4. We cannot submit a bid because of the marketing or franchising policies of the manufacturing company.  
5. We do not wish to sell to Durham County. Our objections are:

6. We do not sell the items/services on which bids are requested.  
7. Other:

\_\_\_\_\_  
FIRM NAME  
\_\_\_\_\_  
SIGNATURE  
\_\_\_\_\_  
DATE  
\_\_\_\_\_  
TELEPHONE

\_\_\_\_\_  
We wish to remain on the Bidder's List.  
\_\_\_\_\_  
We wish to be deleted from the Bidder's List.

**VENDOR APPLICATION FORM W/W9 FORM**





**VENDOR APPLICATION**  
 IT IS CRITICAL TO THE COUNTY THAT YOU COMPLETE ALL DATA - PLEASE PRINT OR TYPE  
 (A W-9 FORM IS REQUIRED AND MUST BE SUBMITTED WITH THIS FORM)

1. Vendor Name: Henry Schein, Inc. Do you require a 1099? Yes  No

2. Mailing address for payments: Box 371952, Pittsburgh PA 15250-7952  
 3. Mailing address for purchase orders, proposals and bids: 135 Duryea Rd, Melville NY 11747

4. Contact Person: Julia Strange Phone #: 631-247-2891  
 Email: EMSA.DSO@henrychein.com Fax #: 800-533-4793  
 5. In what City and State is your firm licensed? Melville NY  
 If licensed in NC, indicate County (for tax purposes) Wake

6. Is your firm a large business? Yes  No   
 Individual Partnership  Corporation  Governmental Agency  Other   
 7. Is your firm a small business? Yes  No

8. Is your firm 51 percent or more owned and operated by a woman? Yes  No   
 9. Is your firm 51 percent or more owned and operated by a minority? Yes  No   
 10. If yes, with what governmental agencies are you certified?  
 11. Identify appropriate minority group: Black American  Native American  Hispanic  Asian/Pacific  Asian Indian

12. Is your firm incorporated? Yes  No   
 13. Is your firm a not-for-profit concern? Yes  No   
 14. Is your firm a handicapped business concern? Yes  No   
 15. Give a brief description of goods or services your firm provides: Distributor of medical supplies, pharmaceuticals, equipment, furniture

Signature: Julia Strange Title: Supervisor, EMS  
 Print name: Julia Strange Date: 10/16/2023

If you have any questions concerning this form, email Durham County Purchasing Division at [purchasinggroup@dcconcgov](mailto:purchasinggroup@dcconcgov)

**DCO DEPARTMENT TO COMPLETE** (Prior to Vendor Distribution)  
 If the below info. is not completed, return this form to the email address of the DCO departmental contact that sent this form to you.  
 Email to: \_\_\_\_\_ (Department Contact Email)  
 or  
 Fax to: \_\_\_\_\_ (Department Contact Fax No.)

**PURCHASING TO COMPLETE** (when received from the department)  
 Listed as Debarred or Suspended Vendors? <https://www.sam.gov> Yes  No   
 Verified by: \_\_\_\_\_  
<https://www.pandc.nc.gov/actions.asp> Yes  No   
 Date: \_\_\_\_\_

# Request for Taxpayer Identification Number and Certification

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

Go to [www.irs.gov/Form99](http://www.irs.gov/Form99) for instructions and the latest information.

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

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

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC  
 C Corporation  
 S Corporation  
 Partnership  
 Trust/estate  
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) **5**  
 Exemption from FATCA reporting code (if any) **D**

(Applies to accounts maintained outside the U.S.)  
 Requester's name and address (optional)  
**135 DURYEA ROAD**  
**MELVILLE, NY 11747**  
 7 List account number(s) here (optional)

Print or type. See Specific Instructions on page 3.

## 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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Number To Give the Requester for guidelines on whose number to enter.

1	1	-	3	1	3	6	5	9	5
---	---	---	---	---	---	---	---	---	---

Employer identification number

OR

--	--	--	--	--	--	--	--	--	--

Social security number

## Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 for Part II, later.

Signature of U.S. person **Christopher Perrano**

Date **1/1/23**

## General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/Form99](http://www.irs.gov/Form99).

### 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)

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.

If you are a U.S. person (including a resident alien), to provide your correct TIN.

- Form 1099-A (acquisition or abandonment of secured property)
- Form 1099-C (canceled debt)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-K (merchant card and third party network transactions)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)

**PURCHASE OF GOODS CONTRACT - SAMPLE**

- G. Seller warrants that it is the sole owner of the described goods and that it has the unrestricted right to convey a clear title to the Purchaser free and clear of all encumbrances.
- F. This order to Seller is not transferable or assignable without the written permission of Purchaser. Seller is an independent contractor and is not an agent or employee of Purchaser.
- E. The parts, material, and workmanship of all items are subject to inspection, testing and counting by Purchaser. Purchaser may reject for full credit or require prompt correction or replacement at Seller's expense, including the expense of unpacking, examining, repacking, storing and transporting of any item defective in material or workmanship or otherwise not in conformity with Bid No. \_\_\_\_\_ (if applicable) or specifications provided by Purchaser. Goods will be delivered to the Purchaser in new condition and undamaged (unless otherwise specified by Purchaser).
- D. A Funds Reservation number may be assigned to encumber the funds associated with this contract and must appear on all crates, packages, packing slips, invoices, and correspondence shipped or mailed to Purchaser. All items will be accompanied by assembly instructions and operating and repair manuals, as applicable. Purchaser's count will be accepted as conclusive on all shipments not accompanied by a packing slip.
- C. Shipments received prior to delivery date without previous approval by Purchaser may be returned or stored at Seller's expense.
- B. The effective date of this Contract shall be the date first set forth above in the preamble to this Contract, irrespective of the date of execution by the parties. The first date written above is \_\_\_\_\_. All renewal or non-renewal periods or deadlines stated in this Contract, if any, shall be calculated based on the "effective date" indicated above.
- A. The Seller, in consideration of the sum of \$\_\_\_\_\_, hereby sells to Purchaser the goods and services at the times, in the manner, at the prices, and at the place(s), pursuant to the provisions and specifications as set forth herein. No charges of any kind not appearing in this contract will be accepted or paid by Purchaser. It is Purchaser's discretion to accept items shipped in excess of the quantity ordered and any over shipment may be returned at Seller's expense.

**I. TERMS.**

THIS CONTRACT, made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_\_, for the purchase of \_\_\_\_\_, by and between the **COUNTY OF DURHAM**, North Carolina, a political subdivision of the State of North Carolina, hereinafter referred to as "PURCHASER", and \_\_\_\_\_, hereinafter referred to as "SELLER".

**SAMPLE**  
**STATE OF NORTH CAROLINA**  
**COUNTY OF DURHAM**  
**PURCHASE OF GOODS CONTRACT**

2. **CHANGE:** Purchaser reserves the right to change, modify and/or cancel this order upon issuance of a change order. If the Purchaser is not notified to the contrary in writing within 10 days after the issuance of the change order, the changed and/or modification and/or cancellation is considered accepted by the Seller.
3. **WARRANTY OF GOODS AND MATERIALS:** Seller expressly warrants that all goods, provided or used by the Seller will conform to the drawings, specifications, samples or other descriptions furnished by the Purchaser or by the Seller; meet requirements detailed in the scope of work; be of good materials and workmanship and free from defect. This express warranty shall not be waived by reason of acceptance of the goods or payment made by the Purchaser. Seller also warrants that all items sold or furnished under this order have been produced, sold, delivered and furnished in compliance with all applicable laws and regulations.
- THE SELLER WARRANTS THE MERCHANTABILITY QUALITY OF THE GOODS SOLD HEREBY AND THAT SUCH GOODS ARE FIT FOR THE PURPOSES FOR WHICH THEY WERE PURCHASED. SUCH WARRANTIES ARE IN ADDITION TO ALL EXPRESS WARRANTIES AND WILL RUN TO THE BENEFIT OF THE PURCHASER. THE SELLER'S PERIOD OF WARRANTY WITH RESPECT TO EACH ITEM WILL BE AT LEAST AS LONG AS THAT OF THE MANUFACTURER OF SUCH ITEM, AND SELLER WILL HONOR SAME.
4. **INDEMNITY.** To the fullest extent permitted by law, PURCHASER hereby reserves the right to recover legal expenses including attorney fees, litigation expenses and court costs as well as actual damages or losses suffered by PURCHASER, if SELLER is found to be a proximate cause of damages or losses suffered by PURCHASER, resulting from SELLER'S performance during the execution of this Contract.
5. **INSURANCE.** Seller shall procure and maintain for the duration of the contract the following insurance coverage from an insurance company(s) possessing a rating of A-VII or higher from the A.M. Best Company and licensed to do business in North Carolina. All of the policies required of the Seller shall contain a waiver of subrogation provision to waive all rights of recovery under subrogation or otherwise against the Purchaser. In the event Seller's Insurance Policy or Certificate of Insurance conflicts with the aforesaid language concerning "waiver of subrogation" this contract shall govern. Seller shall advise the Purchaser of any cancellation, non-renewal, or material change in any policy within ten (10) days of notification of such action and provide updated certificates of insurance evidencing renewals within fifteen (15) days of expiration. Seller's insurance shall be primary and any insurance or self-funded liability programs maintained by the Purchaser shall not contribute with respect to the Seller's insurance. Purchaser shall not be listed as an additional insured on any Insurance Policy or Certificate of Insurance of the Seller. In the event Seller's Insurance Policy or Certificate of Insurance conflicts with the aforesaid language concerning "additional insured" this contract shall govern.
- 5.1 **Commercial General Liability:** Insurance Services Office (ISO) Form CG 00 01 on an "occurrence" basis, including products and completed operations, property damage, bodily injury, and personal & advertising injury with limits no less than \$1,000,000 per occurrence and \$2,000,000 aggregate.
- 5.2 **Commercial Automobile Liability:** ISO Form CA 00 01 covering any auto with limit not less than \$1,000,000 per accident for bodily injury and property damage.

**5.3 Worker's Compensation and Employers Liability:** as required by The State of North Carolina, with statutory limits, and Employers Liability Insurance with a limit of no less than \$1,000,000 per occurrence.

By requiring insurance herein, the Purchaser does not represent that coverage and limits will necessarily be adequate to protect Seller, and such coverage and limits shall not be deemed as a limitation on Seller's liability under the indemnities granted to the Purchaser in this Contract. Seller shall provide the Purchaser a valid certificate of insurance, in advance of the performance of any work, exhibiting coverage required. Seller shall require and verify that all subcontractors maintain insurance meeting all the requirements stated herein.

The failure of the Purchaser at any time to enforce the insurance provisions, to demand such certificates of insurance, or to identify a deficiency shall not constitute a waiver of those provisions, nor reduce the obligations of the Seller to maintain such insurance or to meet its obligations under the indemnification provisions. Notwithstanding the foregoing, nothing contained in this section shall be deemed to constitute a waiver of the governmental immunity of the Purchaser, which immunity is hereby reserved to the Purchaser.

**6. TERMINATION.** The Purchaser may, by written notice, terminate this contract in whole or in part, for failure of Seller to perform, including failure to deliver as and when specified. If so terminated, Seller shall be liable for all damages, including, without limitation, 1) the excess cost of re-purchasing similar goods or services, 2) shipping charges for any items the Purchaser may at its option return to Seller, including items already delivered but for which Seller no longer has any use because of default, 3) amounts paid by Purchaser for any items it has received but returns to Seller, and 4) any other damages permitted by applicable law. Purchaser shall have the right to pursue any remedies provided by applicable laws.

**7. EXISTENCE.** Seller warrants that it is a corporation or otherwise legal entity duly organized, validly existing, and in good standing under the laws of the State of \_\_\_\_\_ and is duly qualified to do business in the State of North Carolina and has full power and authority to enter into and fulfill all the terms and conditions of this Agreement.

**8. COMPLIANCE WITH LAWS.** Seller shall abide by all statutes, rules, regulations, laws, and executive orders Federal, State and Local as they relate to, but are not limited to, (i) the services in general, (ii) payment of employees, subcontractors and agents, (iii) the Occupational Safety and Health Administration, (iv) the Fair Labor Standards Act, and (v) the Wage and Hour Division. In the event Seller is determined by the final order of a court or appropriate agency to be in violation of any Federal, State or Local statute, rule, regulation, law or executive order or this provision, this Contract may be canceled, terminated or suspended in whole or in part by COUNTY and Seller may be declared ineligible for further COUNTY contracts.

**9. E-VERIFY.** As a condition of payment for services and/or goods received under this agreement, Seller shall comply with the requirements of Article 2 of Chapter 64 of the North Carolina General Statutes. Further, if Seller provides the services and/or goods to the County utilizing a subcontractor, Seller shall require the subcontractor to comply with the requirements of Article 2 of Chapter 64 of the North Carolina General Statutes as well. Seller shall verify, by affidavit, compliance of the terms of this section upon request by the Purchaser.

**10. EMPLOYMENT ADVERTISING REQUIREMENTS.** Seller shall post local job openings, in connection with this contract, with the City of Durham's Office of Economic and Workforce Development, the North Carolina Department of Commerce-Division of

Employment Services (formerly ESC, Employment Security Commission) and with the Durham County Department of Social Services throughout term of this Agreement; provided that the foregoing requirement does not limit Seller's ability to advertise and/or otherwise post job openings with other organizations or media outlets.

**11. SECURITY BACKGROUND CHECKS.** The Seller is responsible for requesting and paying for criminal history checks on all individuals providing services under this contract who will be obtaining County identification badges and allowed unescorted access to County facilities. Background checks can be provided by any vendor, or from a North Carolina State agency, providing that the criminal history check is done nationwide. The Sheriff's Office will conduct background investigations for those employees of the Seller who will be working at the Courthouse or Detention Center. A criminal history will not automatically disqualify a Seller employee from employment on a County contract unless explicitly mandated by law.

The Seller will send the results of the background checks, prior to commencing work at Durham County Government, to their County point of contact who will provide them to the Durham County Security Manager. The Security Manager will individually assess and determine the degree to which the nature of a person's criminal conduct has a direct and/or specific negative bearing on a person's fitness or ability to perform contract services in Durham County buildings. The Security Manager will consult the Legal Office, as needed, on any negative determinations. The Security Manager will notify the Seller's County point of contact of the results of the review. A Seller can appeal a negative determination by the Security Manager to the County Manager or his designee for final disposition. Appeals need to be submitted in writing to the contract point of contact within 30 days of notice of a decision to remove or deny an individual from working the County contract due to adverse information in the background check.

This information shall be updated annually by the Seller, 90 days prior to the renewal or extension of the contract and submitted to their County point of contact who will provide them to the Durham County Security Manager. Personnel without a currently approved background check will have their access to those buildings disabled.

Additional background screening may be necessary at specific county buildings. The Seller shall provide names of all individuals in the Contractor communications log and to the County Representative. This information will be reviewed annually.

For those Seller's employees who will be working at the Courthouse or Detention Center, the Sheriff's Office will make the security determination. The Seller will provide the results of their background check to the Major for Support Services who will conduct an additional investigation and then individually assess and determine the degree to which the nature of a person's criminal conduct has a direct and/or specific negative bearing on a person's fitness or ability to perform contract services in the Courthouse or Detention Facility. A Seller can appeal a negative determination to the Chief Deputy for final disposition. Appeals need to be submitted in writing to the Chief Deputy within 30 days of notice of a decision to remove or deny an individual from working the contract due to adverse information in the background check. While an appeal is pending, the employee will not be allowed access to the Courthouse or Detention Facility.

This information will be updated by the Seller and submitted to the Sheriff's Office annually, 90 days prior to the renewal or extension of the contract. Personnel without a currently approved background check will have their access to those buildings restricted.

12. **DISPUTE RESOLUTION PROCEDURE.** To prevent disputes and litigation, it is agreed by the parties that any claim or dispute between the Purchaser and the Seller, arising from this Agreement or the services and/or goods being provided by the Seller, shall be sent to the Durham County Manager who shall appoint a qualified mediator to address the issue. Such request shall be submitted to the County Manager in writing within ten (10) days of the claim or dispute. Upon receipt of a timely written claim, the Manager, or his designee, shall notify the Mediator who will conduct a mediation and notify the Seller in writing of the decision within forty five (45) calendar days from the date of the submission of the claim or dispute, unless the Mediator requires additional time to gather information or allow the parties to provide additional information. The Mediator's orders, decisions and decrees shall be non-binding. Mediation, pursuant to this provision, shall be a pre-condition to initiating litigation concerning the dispute. During the pendency of any dispute and after a determination thereof, the parties to the dispute shall act in good faith to mitigate any potential damages including utilization of schedule changes and alternate means of providing the services and/or goods. The costs of the mediation shall be divided equally between the parties to the dispute. The mediation session shall be private and shall be held in Durham County, North Carolina. Mediation under this provision shall not be the cause for a delay of services and/or goods being provided which is the focus of the dispute.
- If the disputed issue cannot be resolved in mediation or either party disagrees with the results of the mediation, the parties may seek resolution in the General Court of Justice in the County of Durham and the State of North Carolina. If a party fails to comply in strict accordance with the requirements of this provision, the non-complying party specifically waives all of its rights provided hereunder, including its rights and remedies under State law.
13. **NOTICES.** All notices which may be required by this contract or any rule of law shall be effective when received by certified mail sent to the following addresses:
- COUNTY OF DURHAM**  
**PURCHASING DIVISION**  
**201 EAST MAIN STREET**  
**DURHAM, NORTH CAROLINA, 27701**
- \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- SELLER**
14. **CORPORATE AUTHORITY.** By execution hereof, the person signing for Seller below certifies that he/she has read this contract and that he/she is duly authorized to execute this contract on behalf of the Seller.
15. **HEADINGS:** The subject headings of the paragraphs are included for purposes of convenience only and shall not affect the construction or interpretation of any of its provisions. This agreement shall be deemed to have been drafted by both parties and no purposes of interpretation shall be made to the contrary.
16. **GOVERNING LAW.** This contract shall be governed by and in accordance with the laws of the State of North Carolina. All actions relating in any way to this contract shall be brought in the General Court of Justice in the County of Durham and the State of North Carolina.
17. **REQUIRED PROVISIONS FOR CONTRACTS/AGREEMENTS/GRANTS UTILIZING FEDERAL FUNDS.** Pursuant to the Federal Uniform Guidance Appendix II to 2 CFR Part 200, if Federal Funds are involved in this Contract/Agreement/Grant Agreement, by executing this Contract/Agreement/Grant Agreement, the Contractor/Vendor/Grantee, certifies that it agrees to and is in compliance with the provisions specified in Exhibit B – Federal Uniform Guidance Contract Provisions Certification.



**18. MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISE (MWBE) PROGRAM.** It is the policy of the County to provide minorities and women-owned businesses equal opportunity to participate in all aspects of the County's contracting programs, including but not limited to, the procurement of construction, goods and services consistent with law. The County has established an ordinance and implements an MWBE Program based on the ordinance, that promotes, increases, and works towards eradicating the underutilization of minorities and women-owned businesses in the County's contracting programs.

**19. ENTIRE CONTRACT.** This contract shall constitute the entire understanding between Purchaser and Seller and shall supersede all prior understandings and agreements relating to the subject matter hereof and may be amended only by written mutual agreement of the parties.

**IN TESTIMONY WHEREOF,** the parties have expressed their agreement to these terms by causing this Purchase of Goods Contract to be executed by their duly authorized officer or agent.

**Purchaser: COUNTY OF DURHAM**

**Seller:**

\_\_\_\_\_  
 Print Name and Title: \_\_\_\_\_  
 Date of Signature: \_\_\_\_\_

\_\_\_\_\_  
 Print Name and Title: \_\_\_\_\_  
 Date of Signature: \_\_\_\_\_

This instrument has been pre-audited in the manner required by the Local Government Budget and Fiscal Control Act.

Crystally Wright, Interim Durham County Chief Financial Officer



**PURCHASING DIVISION**

**TO: All Proposers**

**DATE: October 10, 2023**

**Request for Proposals  
Medical Supplies for Durham County Emergency Medical Services  
RFP No. 24-008**

**ADDENDUM NO. 1**

This ADDENDUM No. 1 forms part of Durham County's Request for Proposal (RFP No. 24-008 – Medical Supplies for Durham County Emergency Medical Services). All other requirements of the original Scope of Services remain in effect in their respective order. Receipt of this Addendum must be acknowledged on the Addendum Acknowledgment Form included in the RFP document.

1. The due date for receiving proposals is October 19, 2023, at 2:00 P. M., Eastern Time.

2. The last day for receiving questions regarding this project was October 4, 2023, at 3:00 P.M., Eastern Time.

3. Attached are questions received along with the answers provided by the Project Manager.

Should you have any questions regarding this Addendum, please contact me.

Sincerely,

*Hilda W. Williams*

Hilda W. Williams  
Senior Procurement Specialist  
919-560-0054

Durham County Administration Building II • 201 E. Main Street, 7<sup>th</sup> Floor • Durham, NC 27701  
(919) 560-0051 • Fax (919) 560-0057 • [www.dconnc.gov](http://www.dconnc.gov)  
Equal Employment/Affirmative Action Employer

**Request for Proposals  
Medical Supplies for Durham County Emergency Medical Services  
RFP No. 24-008**

**Addendum No. 1  
Questions and Answers**

1. **Question:** Is this an ALL or Nothing bid? We carry some of these items but not all of them, so I'm just wondering.

**Answer:** The vendor must bid on all items within a section to be considered. The bid will be awarded by section. Each vendor does not need to submit bids on all sections but must fill all items within the section they are bidding on.

2. **Question:** Are substitutions allowed? In "General Requirements" it states "Alternate products are not acceptable for this bid unless the stated product has been discontinued. No substitutions will be accepted.", but the Excel has a column to identify "Part Number if different than current". Some items in each section are vendor exclusive items and restrict who can bid on those items.

**Answer:** Substitutions are only accepted if the current product is no longer available. The column for part number is there for alternate items if unavailable.

3. **Questions:** What is the term for this bid?

**Answer:** This bid will be awarded through June 30<sup>th</sup>, 2024, with option for annual renewals up to 5 years total.

4. **Question:** Can you please provide the term of this IFR, is pricing for one year? Are there renewals? What are the conditions of the renewals if there are any?

**Answer:** This contract will go through June 30<sup>th</sup>, 2024, with annual renewals up to 5 years.

5. **Question:** Some of the items listed state the mfg. as Curalex- this is a private label for one of the distributors- will you accept bids for the manufacturer and not Curalex?

**Answer:** EMS will accept bids, but evaluations will be required prior to making a decision if the pricing is determined to be beneficial. EMS will not change any product from current product without hands on evaluation. Vendor is responsible for sending samples to EMS at no cost to EMS.

6. **Question:** As a distributor of medical supplies, we do not subcontract with MWBE organizations or do any subcontracting due to the legal requirements, chain of custody, and certifications that are required for distributing medical supplies, can we be exempt from the MWBE requirements?

**Answer:** With the understanding that you do not do any subcontracting due to the legal requirements, chain of custody, and certifications that are required for distributing medical supplies, even though we do not exempt bidders from the MWBE requirements we would at least need your company's MWBE-Diversity Plan/Program or MWBE Plan of Action or

statements regarding supporting minority participation on projects and for future projects with Durham County.

**7. Question:** All sections appear to have a distributors item # listed as the Current Item#. Bid is requesting NO SUB. In order to know the manufacturer, you are requesting for each line we would need to manufacturer name/item# not a distributor item# to insure we are no substituting.

**Answer:** The only part numbers Durham County EMS has on file are the part numbers provided in the sections.

**8. Question:** Section 3- First 2 lines have the same manufacturer item # with 2 different descriptions. We will need the correct item numbers for both lines.

**Answer:** Line 1 for Large Adult is 10-57319. Line 2 for SM/MD is 10-57318.

**9. Question:** Medial Supply Bid Spec Worksheet: Item 177268 "description" reads 100/Box and the "UOM" as BX however most other items do not identify the quantity in each UOM. This could cause price and extended price calculation misrepresentations. What quantities are in each Unit of Measure for each item?

**Answer:** Please refer to the part number on each item provided on the bid worksheets

**10. Question:** Medial Supply Bid Spec Worksheet: Column E "Part Number if different than current" seems to be for if an item is DC'd and an alternative is being proposed otherwise there is no use for this. What method is being used to ensure bidders are bidding the specified item from the bid?

**Answer:** If an alternate is supplied for the bid, EMS will verify with manufacturer of discontinuation. If the item is not discontinued, the bid on alternate item will not be considered.

**11. Question:** Page 10 under Electronics and Online ordering requirements Vendors web site must be able to provide real time availability. Is proof of this required to be submitted with the bid proposal?

**Answer:** EMS will verify with vendors prior to bid awards.

**12. Question:** What is the term length of the Award and what would the "Effective" date be for the award contract?

**Answer:** Contract will last through June 30<sup>th</sup>, 2024, with annual renewals up to 5 years ending June 30<sup>th</sup>, 2029.

**13. Question:** Will there be any renewal options and if so, what are the renewal terms?

**Answer:** Yes, annual renewals up to a total of 5 years total.

**14. Question:** Upon review, if there are bid terms and conditions Vendor may not be able to agree to, will DCO allow Vendor to include clarifications or exceptions as part of its bid submission?

**Answer:** The vendor may include clarifications or exceptions as part of the bid submissions. EMS will evaluate them on a case-by-case basis with high priority given to vendors who meet and agree to terms and conditions as stated in the bid.

**15. Question:** Specifically, if there are insurance requirements that Vendor may not be able to agree to will DCo consider exceptions to insurance terms and conditions?

**Answer:** This is granted on a case-by-case basis by the County Risk Management Department. No guarantee can be made.

**16. Question:** Will the resulting contract from this solicitation be federally funded in whole or in part?

**Answer:** No.

**17. Question:** Does DCo consider electronic signatures to be valid "original" signatures (i.e.: DocuSign)?

**Answer:** Yes

**18. Question:** Can DCo please provide vendors with the most recent bid tabulation for awarded pricing and Unit of Measure for the items in the current bid?

**Answer:** There has been no previous bid. Unit of Measures are located in the spreadsheets for each bid section.

**19. Question:** Will DCo provide MFG # for each item?

**Answer:** Part numbers DCo has are listed in each bid section.

**20. Question:** Are partial bids permitted?

**Answer:** For a vendor to be considered they must bid on all items within a section. Bid will be awarded by section.

**21. Question:** What is the contract term for this bid or is this a one-time purchase?

**Answer:** This bid will be for a contract ending on June 30<sup>th</sup>, 2024, with up to 5 annual renewals for ongoing medical supply purchases.

**22. Question:** Are renewals available?

**Answer:** Yes, up to 5 years.

**23. Question:** If there are renewal terms available, are they at the sole discretion of DCo or by mutual consent of DCo and Vendor?

**Answer:** Mutual consent of DCo and Vendor for renewals. DCo can make the sole discretion decision to re-bid prior to completing a 5-year renewal period.

**END OF ADDENDUM NO. 1**

**Answer:** Yes, annual price increases are permitted with approved justification and approval from the County.

**24. Question:** Are price increases permitted? If so, at what frequency?



**PURCHASING DIVISION**

**All Proposers**

**TO:**

**October 11, 2023**

**DATE:**

**Request for Proposals  
Medical Supplies for Durham County Emergency Medical Services  
IFB No. 24-008**

**ADDENDUM NO. 2**

This ADDENDUM No. 2 forms part of Durham County's Request for Proposal (IFB No. 24-008 - Medical Supplies for Durham County Emergency Medical Services). All other requirements of the original Scope of Services remain in effect in their respective order. Receipt of this Addendum must be acknowledged on the Addendum Acknowledgment Form included in the RFP document.

1. The due date for receiving proposals is October 19, 2023, at 2:00 P. M., Eastern Time.

2. The project number for Addendum No. 1 should have been "IFB No. 24-008".

3. The revised copy of Attachment 1 becomes a part of this Addendum. Please complete and return the Excel Sheet titled "Addendum 2-Attachment 1-Medical Supply Bid Spec Worksheet-Modified" with your Proposal response.

4. Below is the correct response to Question 8 (Addendum No. 1):

**Question:** Section 3-First 2 lines have the same manufacturer item # with 2 different descriptions. We will need the correct item numbers for both lines.

**Answer:** Line 1 for Large Adult is 10-57318. Line 2 for SM/MD is 10-57319.

Should you have any questions regarding this Addendum, please contact me.

Sincerely,

*Hilda W. Williams*

Hilda W. Williams  
Senior Procurement Specialist  
919-560-0054

Durham County Administration Building II • 201 E. Main Street, 7<sup>th</sup> Floor • Durham, NC 27701  
(919) 560-0051 • Fax (919) 560-0057 • [www.dconnc.gov](http://www.dconnc.gov)  
Equal Employment/Affirmative Action Employer

ambuUSA.com  
 Tel: 800 262 8462  
 Fax: 800 262 8673  
 Columbia, MD 21046  
 Suite 200  
 6721 Columbia Gateway Drive  
 Ambu Inc.

**Ambu**  
 FORWARD



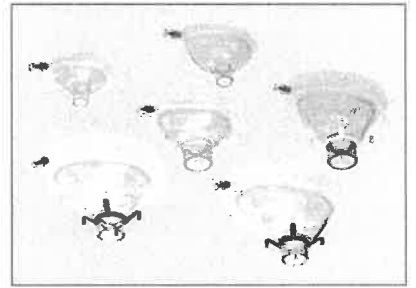
US: Rx Only

LBL - 008781 - V01 - 1/1/2022 - Ambu USA. Technical data may be modified without further notice.

Questions? Contact your Ambu representative at  
 800-262-8462 or visit [ambuUSA.com](http://ambuUSA.com)

Item No.	Description
252051	Ambu DuraClear Disposable Face Mask, Neonate
252052	Ambu DuraClear Disposable Face Mask, Infant
252053	Ambu DuraClear Disposable Face Mask, Toddler
252054	Ambu DuraClear Disposable Face Mask, Small Adult/Child
252055	Ambu DuraClear Disposable Face Mask, Medium Adult
252056	Ambu DuraClear Disposable Face Mask, Large Adult
252951	Ambu DuraClear Disposable Face Mask with Valve, Neonate
252952	Ambu DuraClear Disposable Face Mask with Valve, Infant
252953	Ambu DuraClear Disposable Face Mask with Valve, Toddler
252954	Ambu DuraClear Disposable Face Mask with Valve, Small Adult/Child
252955	Ambu DuraClear Disposable Face Mask with Valve, Medium Adult
252956	Ambu DuraClear Disposable Face Mask with Valve, Large Adult

**Section 1**

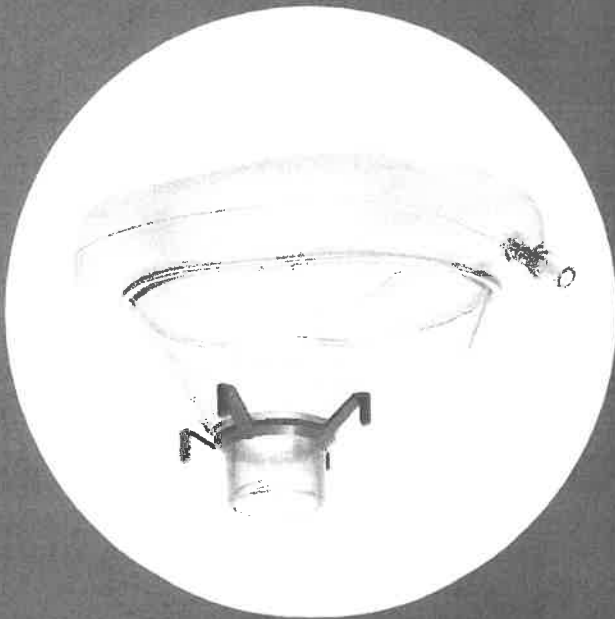


Disposable face masks with hook ring and check valve

The Ambu DuraClear disposable face mask has a unique thumb rest for comfort and control and it is now available with inflatable cuff.

**DATASHEET**

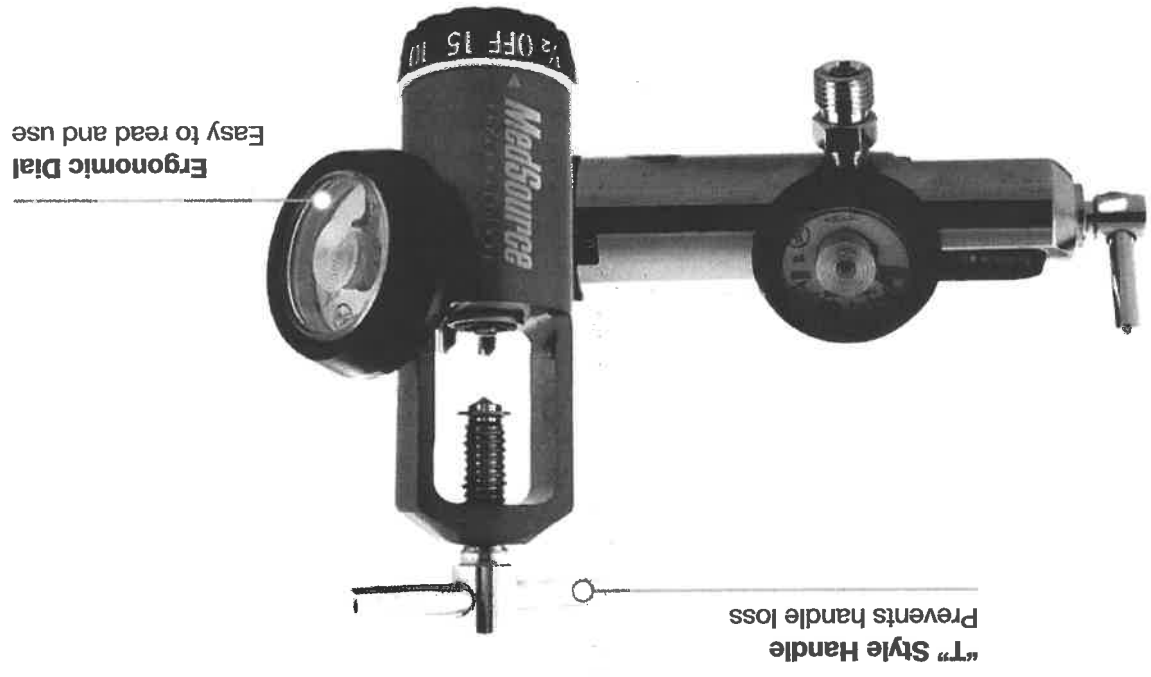
**Ambu DuraClear™ Disposable Face Masks**



**KEY BENEFITS**

- Unique thumb rest for comfort and control
- Completely disposable
- Six sizes
- Color-coded hook rings
- Available with or without valve on cuff





**SPECIFICATION**

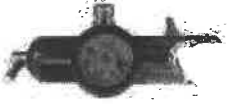
- MS-010R25: Made of All Brass Material
- MS-010R15: Made of Impact-Resistant TPE Plastic and Aluminum
- "T" Style Handle
- Ignition Tested According to CGA/ASTM Standards

Item #	Description	UOM
MS-010R25 #18	All Brass Oxygen Regulator, 0-25 LPM	20 EA/CS
MS-010R15	Aluminum Oxygen Regulator, 0-15 LPM	20 EA/CS

*Section 1*

Section 1 #19

0-25 LPM CGA870 (BARB + 2 DISS Power Take-Offs) Regulator  
Part Number: AREG8725-B2D



This 0-25 LPM adjustable click style regulator uses a CGA870 connection with a BARB outlet and has 2 DISS power take-offs and operates at 50 PSI. At only 5.25" inches in body length this regulator is extremely compact and weighs only 1.00 lbs. To ensure safety, reliability, and durability, this regulator is manufactured from brass and aluminum. This regulator can be set to 0, 0.5, 1, 2, 3, 4, 5, 6, 8, 10, 15, or 25 LPM. All flow rate indicators are labeled in fractions for easy reading. The regulator includes an impact resistant gauge with gauge cover and is anodized in dark green.

Home ( ) » Products » Other Accessories » Nomoline-O LH Adult Nasal/Oral CO2 Cannula with O2, 2m (products/other-accessories/nomoline-0-lh-adult-nasal-oral-co2-cannula-with-o2-2m)

Nomoline-O LH Adult Nasal/Oral CO2 Cannula with O2, 2m



Part ID	LAB #	Description	Language*	Order Number	Revision Date	Safety**	PDF
4459	LAB-9882C	Directions for Use, Nomoline-O	Multiple Languages	39496	02/08/2023	N/A	(globalassets/techdocs/pdf/lab-9882c-eflu.pdf)
4459	LABMK_SS19-Rev04	Directions for Use, Nomoline-O	Korean	SS19-2475	03/04/2022	N/A	(globalassets/techdocs/pdf/labmk_ss19-2475_l_nomoline-0_rev04.pdf)
4459	LAB-9882B	Directions for Use, Nomoline-O	English	39496	04/30/2020	N/A	(globalassets/techdocs/pdf/lab-9882b-eflu.pdf)
4459	LABMK_SS19-2475_L_Nomoline-O	Directions for Use, Nomoline-O	Korean	SS19-2475	04/21/2020	N/A	(globalassets/techdocs/pdf/labmk_ss19-2475_l_nomoline-0_rev00.pdf)

Please Note:  
 Manuals are subject to change; the most current version is always available on this site.  
 \* If "Multiple Languages" is indicated in this column, the document may be presented in the following languages: English, French, German, Italian, Spanish, Swedish, Dutch, Danish, Portuguese (Brazil), Chinese (Simplified), Japanese, Finnish, Norwegian, Czech, Hungarian, Polish, Romanian, Slovak, Turkish, Greek, Russian, Arabic, and Farsi.  
 \*\* If "Yes" is indicated in this column, the revision was made for safety reasons.

ORDER PAPER MANUAL

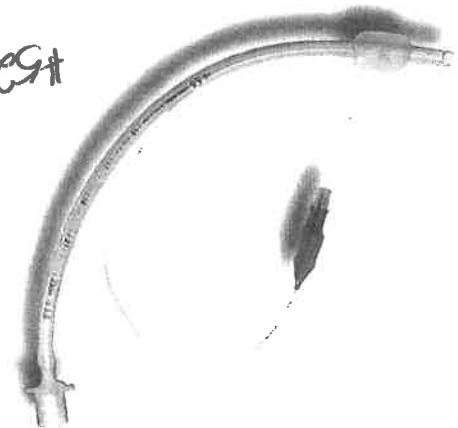
To search again, return to the Technical Documents Home ( ) page.

Get Adobe Reader [\(https://get.adobe.com/reader/\)](https://get.adobe.com/reader/) or best results, use Adobe Reader to view Masimo manuals. Download [\(https://get.adobe.com/reader/\)](https://get.adobe.com/reader/) the latest version, at no charge.

Privacy [Cookie Preferences](https://www.masimo.com/privacy) [\(https://www.masimo.com/privacy\)](https://www.masimo.com/privacy)

ORDERING INFORMATION

PRODUCT CODE	SIZE (I.D.)	UNITS PER CASE
100/100/030	3.0 mm	10
100/100/035	3.5 mm	10
100/100/040	4.0 mm	10
100/100/045	4.5 mm	10
100/100/050	5.0 mm	10
100/100/055	5.5 mm	10
100/100/060	6.0 mm	10
100/100/065	6.5 mm	10
100/100/070	7.0 mm	10
100/100/075	7.5 mm	10
100/100/080	8.0 mm	10
100/100/085	8.5 mm	10
100/100/090	9.0 mm	10
100/100/010	10.0 mm	10
<b>Uncuffed AIRCARE® Endotracheal Tubes</b>		
100/101/030	3.0 mm	10
100/101/035	3.5 mm	10
100/101/040	4.0 mm	10
100/101/045	4.5 mm	10
100/101/050	5.0 mm	10
100/101/055	5.5 mm	10
100/101/060	6.0 mm	10
100/101/065	6.5 mm	10
100/101/070	7.0 mm	10
100/101/075	7.5 mm	10
100/101/080	8.0 mm	10
100/101/085	8.5 mm	10
100/101/090	9.0 mm	10
100/101/010	10.0 mm	10
<b>Cuffed with Preloaded Stylet AIRCARE® Endotracheal Tubes</b>		
100/102/030	3.0 mm	10
100/102/035	3.5 mm	10
100/102/040	4.0 mm	10
100/102/045	4.5 mm	10
100/102/050	5.0 mm	10
100/102/055	5.5 mm	10
100/102/060	6.0 mm	10
100/102/065	6.5 mm	10
100/102/070	7.0 mm	10
100/102/075	7.5 mm	10
100/102/080	8.0 mm	10
100/102/085	8.5 mm	10
100/102/090	9.0 mm	10
100/102/010	10.0 mm	10
<b>Uncuffed with Preloaded Stylet AIRCARE® Endotracheal Tubes</b>		
100/103/030	3.0 mm	10
100/103/035	3.5 mm	10
100/103/040	4.0 mm	10
100/103/045	4.5 mm	10
100/103/050	5.0 mm	10



**AIRCARE® Endotracheal Tubes**

Ideal for short-term intubations, AIRCARE® tubes come in a wide selection of sizes, each with a standard 15 mm ISO connector.

- Made of transparent PVC that softens at body temperature
- Radiopaque blue line for X-ray visualization
- Oral or nasal intubation
- Available in either cuffed or uncuffed

- Magill Curve
- Murphy Eye
- Available with preloaded stylets
- Latex Free
- Sterile
- Single Use

*Section 1*  
*42-25*  
*53-54*

Manufactured by Well Lead Medical Co. Ltd., China  
Distributed by:  
**Smiths Medical ASD, Inc.**  
160 Weymouth Street, Rockland, MA 02370 USA  
T: 1-214-618-0218 TF USA: 1-800-258-5361  
www.smiths-medical.com

Smiths Medical, part of the global technology business Smiths Group  
Products described may not be licensed or available for sale outside of the United States.  
CAUTION: Federal law (U.S.A.) restricts these devices to sale by or on the order of a physician. Please read the instructions for use supplied with the product for detailed instructions, warnings, and cautions on the safe use of this device.

Smiths Medical design mark and AIRCARE are trademarks of the Smiths Medical family of companies. The symbol indicates the trademark is registered in the U.S. Patent and Trademark Office and certain other countries. © 2008 Smiths Medical family of companies. All rights reserved. E1400 Rev. 03.2010

smiths medical

Customer and Clinical Services  
U.S. 1-800-258-5361  
Canada 1-800-387-4346  
www.smiths-medical.com

THE DETAILS GIVEN IN THIS LEAFLET ARE CORRECT AT THE TIME OF GOING TO PRESS. THE COMPANY RESERVES THE RIGHT TO IMPROVE THE EQUIPMENT SHOWN.

MS-24003  
MS-24004  
MS-24005  
MS-24008  
MS-24101  
MS-20007

Nasal Cannula, Non-Flared Tip, 7'  
Nasal Cannula, Flared Tip, 7'  
Nasal Cannula, Non-Flared Tip, 14'  
Nasal Cannula, Non-Flared Tip w/ Universal Connector, 7'  
Nasal Cannula, Pediatric, 7'  
Star Lumen O2 Tubing Only, 7'

50 EA/CS  
50 EA/CS  
50 EA/CS  
50 EA/CS  
50 EA/CS  
50 EA/CS

Item #	Description	UOM
--------	-------------	-----

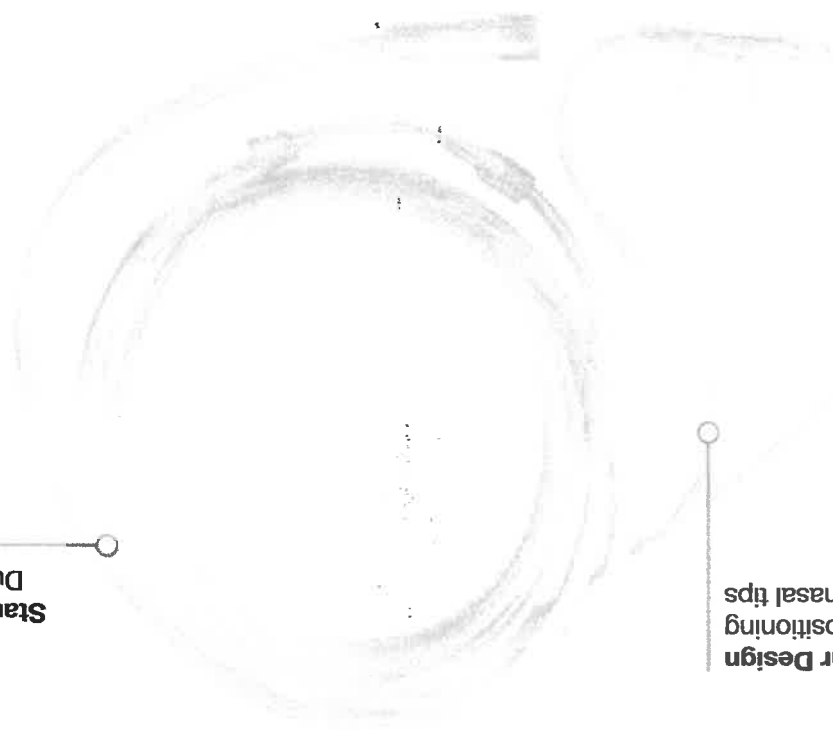
www.medsourcelabs.com



Section 1

- Various Sizes
- For Patients Requiring Medium or Low Concentrations of Oxygen
- Oxygen Concentration Delivery: 24-44%
- Recommended Flow Rate: 1-6 LPM

**SPECIFICATION**



Over-the-Ear Design  
Maintains proper positioning  
of nasal tips

Star Lumen Supply Tubing  
Durable and kink-resistant



**Nasal Cannula**

MS-SC06	Suction Catheter, 6 Fr	50 EA/CS
MS-SC08	Suction Catheter, 8 Fr	50 EA/CS
MS-SC10	Suction Catheter, 10 Fr	50 EA/CS
MS-SC12	Suction Catheter, 12 Fr	50 EA/CS
MS-SC14	Suction Catheter, 14 Fr	50 EA/CS
MS-SC16	Suction Catheter, 16 Fr	50 EA/CS
MS-SC18	Suction Catheter, 18 Fr	50 EA/CS

#44-48

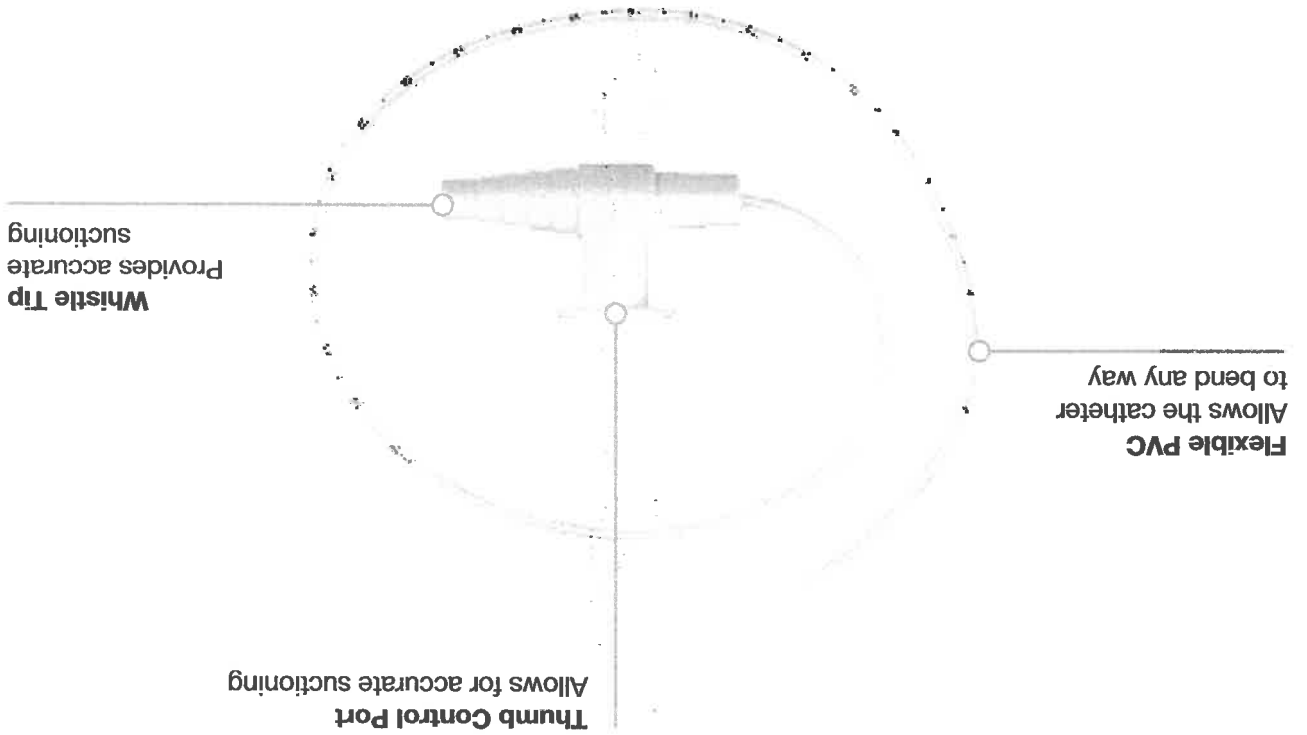
Item #	Description	UOM
<i>Section 1</i>		

www.medsourcelabs.com

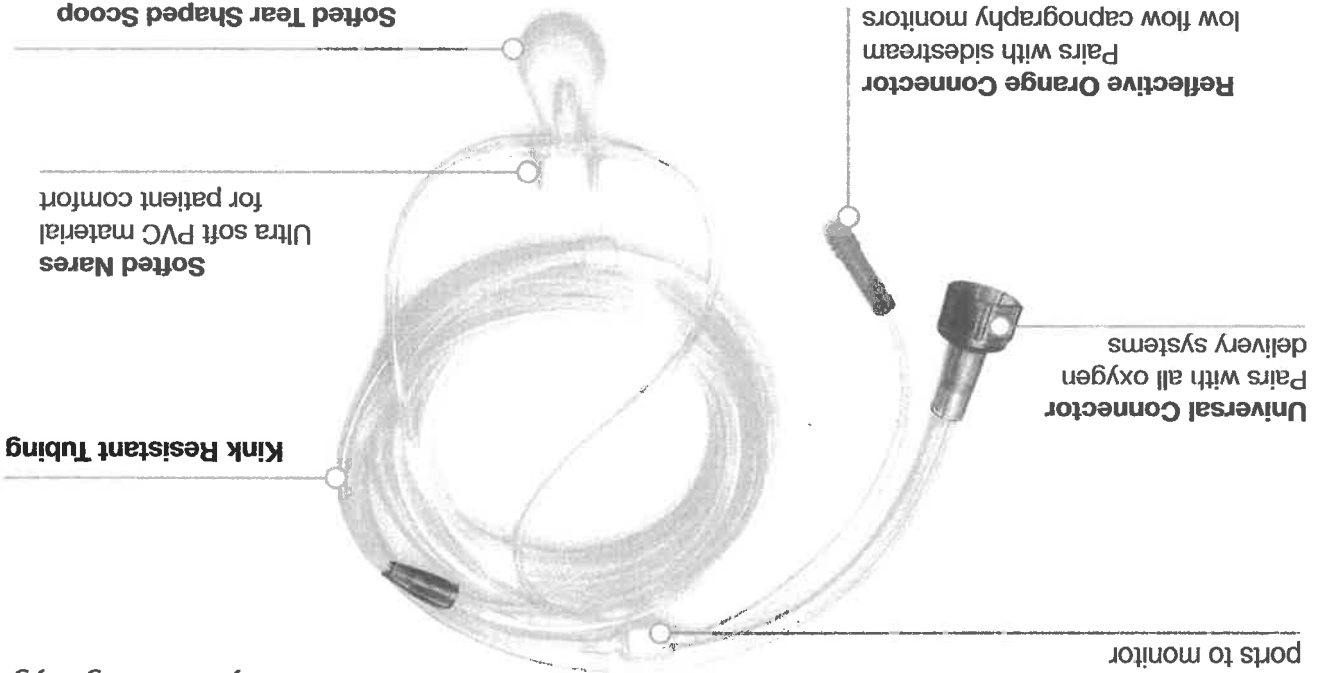
**MEDSOURCELABS**

- Various Sizes
- Medical Grade Flexible PVC
- Sterilized with Ethylene Oxide
- Offered in French Sizing

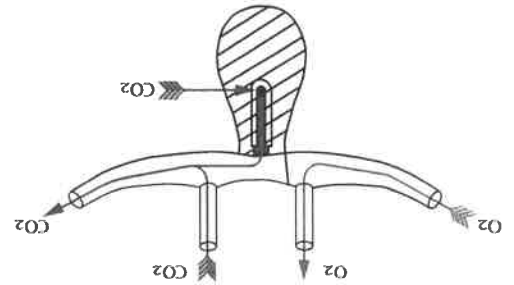
**SPECIFICATION**



MedSource ETCO<sub>2</sub> Sampling Cannulas allow for a breath-by-breath sampling of ETCO<sub>2</sub> while simultaneously delivering oxygen.



Sampling of ETCO<sub>2</sub> in exhaled respiratory gases allows for healthcare workers to assess adequacy of patient perfusion, ventilation and oxygenation in patients receiving critical care. These cannulas pair with Capnograph Sidestream Monitoring Systems and come in a variety of configurations to meet hospital, acute care and prehospital ETCO<sub>2</sub> monitoring needs.

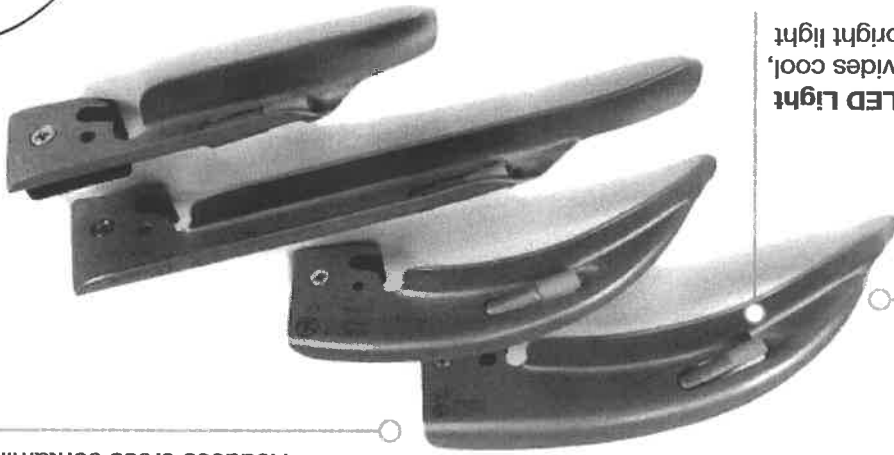


- SPECIFICATION**
- Dip molded PVC nasal cannula and oral scoop
  - Reflective orange connector
  - Not made with natural latex rubber
  - PVC material not made with DEHP
  - 7' of kink resistant tubing
  - Pair with any sidestream monitor (low flow 50ml/min)

Item #	Description	UOM
MS-35601A	Adult Nasal/Oral Dual CO <sub>2</sub> Sampling Cannula W/ O <sub>2</sub> Delivery, Orange Luer W/Reflective Conn., Sampling Scoop, Filter, 7ft.	25 EA/BX, 200 EA/C
MS-35601P	Pediatric Nasal/Oral Dual CO <sub>2</sub> Sampling Cannula W/ O <sub>2</sub> Delivery, Orange Luer W/Reflective Conn., Sampling Scoop, Filter, 7ft.	25 EA/BX, 200 EA/C
MS-35700	Intubated Sampling Line W/T-Connector, Orange Luer W/Reflective Conn., Sampling Scoop, Filter, 7ft.	25 EA/BX, 100 EA/C

*Section 1*

# Laryngoscopes Standard Disposable

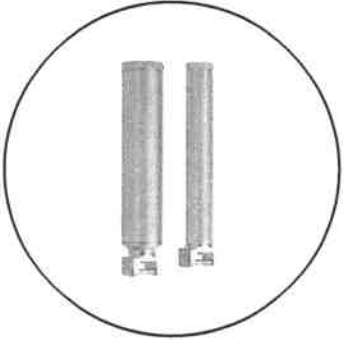


**Disposable Stainless-Steel Blade**  
Reduces cross contamination

**Matte Finish**  
Low glare

**LED Light**  
Provides cool,  
bright light

**Reusable Handles**  
Chrome plated brass finish for  
easier cleaning and sterilization



- Available in Mac and Miller blades
- Stainless-steel blade
- LED light source
- Disposable blades
- Reusable handles
- Non-sterile

## SPECIFICATION



Section 1 # 63-67

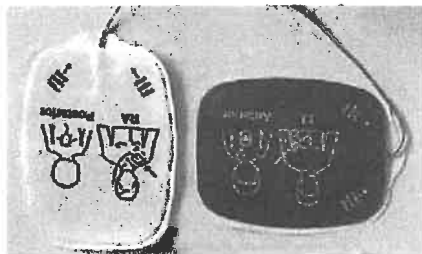
www.medsourcelabs.com

Item #	Description	UOM
--------	-------------	-----

MS-46000	Handle Standard, Adult	EA
MS-46001	Handle Standard, Pediatric	EA
MS-464200	Standard Disposable Miller Blade, Size 00, LED BRIGHT	EA
MS-46420	Standard Disposable Miller Blade, Size 0, LED BRIGHT	EA
MS-46421	Standard Disposable Miller Blade, Size 1, LED BRIGHT	EA
MS-46422	Standard Disposable Miller Blade, Size 2, LED BRIGHT	EA
MS-46423	Standard Disposable Miller Blade, Size 3, LED BRIGHT	EA
MS-46424	Standard Disposable Miller Blade, Size 4, LED BRIGHT	EA
MS-464100	Standard Disposable Mac Blade, Size 00, LED BRIGHT	EA
MS-46410	Standard Disposable Mac Blade, Size 0, LED BRIGHT	EA
MS-46411	Standard Disposable Mac Blade, Size 1, LED BRIGHT	EA
MS-46412	Standard Disposable Mac Blade, Size 2, LED BRIGHT	EA
MS-46413	Standard Disposable Mac Blade, Size 3, LED BRIGHT	EA
MS-46414	Standard Disposable Mac Blade, Size 4, LED BRIGHT	EA



Section 2

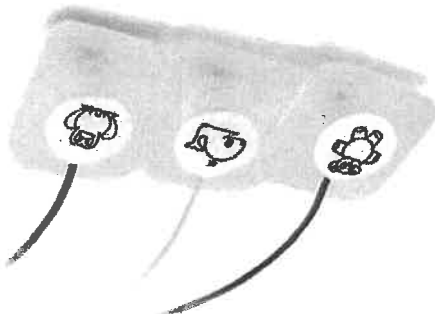


**Henry Schein**  
**Defibrillation Electrode**  
 Color-coded pads with illustrations help staff understand the manufacturer's suggested placement on a patient. 36-month shelf life. Adult/pediatric multifunctional electrodes. • Feet-pouch • 60" lead wire • 3-year shelf life • Not made with natural rubber latex

Defibrillator Pads ..... ea

Specify:  
 Adult, for Zoll  
 Adult, for Physio  
 Pediatric, for Zoll  
 Pediatric, for Physio  
 Pediatric, for Philips

(112-7167) Adult, for Zoll  
 (112-7163) Adult, for Physio  
 (112-7164) Pediatric, for Zoll  
 (112-7165) Pediatric, for Physio  
 (112-7168) Pediatric, for Philips



**Huggable® Pediatric/Infant Electrode**  
**Conmed Corporation**  
 Electrodes feature perforated, clear surface for comfort. Small size for easy placement on child and infant patients. Special gel-pocket stabilizes electrode. Low chloride for sensitive skin. Packaged 3 per sealed pouch, 10 pouches per carton.

#1620-003  
 (520-9749) ..... 30/box

**Ambu USA**  
**ECG Electrodes**  
**Ambu® Blue Sensor R**  
 Each electrode features highly conductive wet gel and superior adhesion. High-quality silver/silver-chloride sensor produces an accurate and reliable signal. Unique offset connector allows for less artifact and better signal quality. Three adult electrodes per individual pouch. Not made with natural rubber latex.

#R-00-S/3 (781-3250) ..... 3/pkg  
 #R-00-S/10 (363-7922) ..... 10/pkg  
 #R-00-S/25 (111-3107) ..... 25/pkg



**Ambu® Whitesensor WS Electrodes**

Each electrode features a highly conductive solid gel with strong adhesion to ensure a good signal quality during short-term ECG monitoring applications. Flexible foam backing material ensures ease of use and comfort during application.

#WS-00-S/4 (700-0467) ..... 4/pkg  
 #WS-00-S/10 (700-0495) ..... 10/pkg



**PowerHeart™ Accessories**  
**Zoll Medical**  
 Electrode Pad Sets, Adult (1 Pair) (106-8395) ..... ea  
 Pediatric (1 Pair) (718-7665) ..... ea  
 Hard-Sided Waterproof Case (120-0462) ..... ea

**3M Red Dot® Monitoring Electrodes**

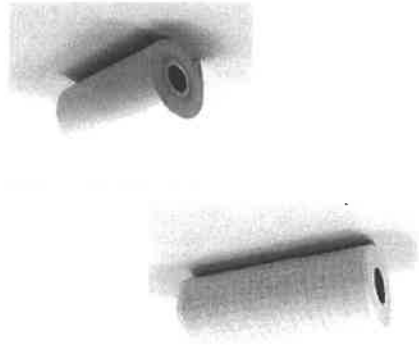
**3M Medical Products**  
 These multipurpose monitoring electrodes with foam backing and sticky gel are suited for all applications.

#2560, Foam, Diaphoretic, 1.6" x 1.38" (4 cm x 3.5 cm) (777-9475) ..... 50/bag  
 #2570, Foam, Diaphoretic, with Braider, 1.6" x 1.38" (4 cm x 3.5 cm) (840-3203) ..... 50/bag  
 #2670-5, Repositionable Monitoring Electrode (777-0388) ..... 5/pkg; 200 pkg/case



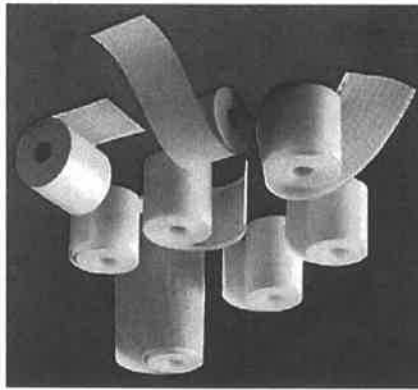
Leonhard Lang ECG/EKG Electrodes  
 Leonhard Lang offers quality ECG/EKG electrodes comparable with many popular brands used in EMS at an affordable price.

702-2346	1500/Box	Leonhard Lang USA	SKINTACT FSRG1/10	Diaphoretic, Foam, Solid Gel Electrodes, 10/Strip, 5 strips/pouch.	Compare to 3M 2560 and 2570, Medi-Trace 450
702-0259	500/Box	Leonhard Lang USA	SKINTACT FS-VM01-10	Wet Gel, Snap/Tab, Diaphoretic, Offset Electrode, 10/pouch, 50 pouches/Box	Compare to Ambu Blue Sensor
700-6201	1500/Box	Leonhard Lang USA	SKINTACT F-301	Pediatric, Diaphoretic, Foam, Solid Gel Electrodes, 30/pouch, 50 pouches/Box	Compare to 3M 2248 and 2258, Commed 1520-25
702-2482	1200/Box	Leonhard Lang USA	SKINTACT FS-40	Diaphoretic, Foam, Wet Gel Electrodes, 30/pouch, 40 Pouches/Box	Compare to Commed 1520 and 1870
702-2481	1200/Box	Leonhard Lang USA	SKINTACT FS-50	Diaphoretic, Foam, Wet Gel Electrodes, 30/pouch, 40 pouches/Box	Compare to Commed 1590 and 1800, Medi-Trace 530
700-6198	1200/Box	Leonhard Lang USA	SKINTACT FS-TB	Diaphoretic, Foam, Wet Gel Electrodes, 30/pouch, 40 pouches/Box	Compare to Commed 1590-030, 3M2256



Leonhard Lang Chart Paper  
 Premium-quality ECG/EKG chart paper. Compatible with many popular devices used in EMS at an affordable price.  
 #12394, LifePak-Compatible to LP11/12/15 (100 mm), Red Grid  
 #700-6155) 5/pkg  
 #17437, Zoll X-Series-Compatible to 8000-000901 (80 mm x 95 ft), Blank Grid  
 #700-6160) 5/pkg  
 #18593, Zoll X-Series-Compatible to 8000-000910-01 (80 mm x 95 ft), Red Grid  
 #700-6159) 5/pkg  
 #20904, Philips Tempus Pro-Compatible (110 mm), Red Grid (702-1638)  
 ea

*Section 2*



Recording Chart Paper

Cardinal  
 #30015682, Laerdal Heartstart® 10/box (990-3461)  
 #30718970, PhysioControl LifePack® 10/12 (990-5403)  
 #31091427, PhysioControl LifePack® 11/12 (990-6868)  
 3/pkg  
 #30725389, Marquette 1200/1500 (120-8218)  
 #50000031, Zoll™ M-Series® 20/case (499-0764)

Value-Priced Disposable Sensors

Maxtec, Inc  
 High-quality and affordable, these single-use replacement sensors are made for Nellcor standard oximeters. Variety of choices to fit all size patients: adult, child, infant, and neonatal.  
 #R119P02-010, Adult, Replaces Nellcor D-25, 18" (499-1761)  
 #R119P02-020, Child, Replaces Nellcor D-20, 18" (499-1762)  
 #2211-5, Infant, Replaces Nellcor I-20, 36" (499-1763)  
 #2211-6, Neonatal, Replaces Nellcor N-25, 36" (499-1764)





**Cramer Products**  
**Cool Towel and Team Bucket**  
 Simply rinse with cool water, place on the neck or head, and enjoy a refreshing, cool feel. The patented material absorbs sweat and water 5 times faster than a cotton towel.  
 Cool Towel, 27" x 17" ..... ea  
**Towel and Bucket Complete Set**  
 (134-3536) ..... ea  
 Contains: 1-3 1/2-gal Team Bucket & 12-17" x 13" Cool Towels.



**First Aid Burn Cream with Aloe**  
**Water-Jel Technologies**  
 0.9-g Unit Dose Packets  
 (326-0880) ..... 25/box



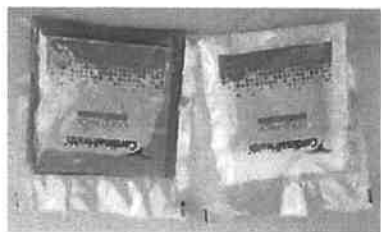
**Alcohol Prep Pads**  
**Henry Schein**  
 Medium, 1 1/2" x 2 3/4"  
 Soft, absorbent, nonwoven pads impregnated with 70% isopropyl alcohol USP. Primarily used as a topical antiseptic; disinfects prior to administering injections.  
 Soft, absorbent, nonwoven pads impregnated with 70% isopropyl alcohol USP. Primarily used as a topical antiseptic; disinfects prior to administering injections.  
 Large, 45 mm x 45 mm ..... 200/box  
 Large (570-2220) ..... 200/box



**Instant Winter and Instant Summer Cold and Hot Compresses**  
**Henry Schein**  
 Instant Winter™ cold compresses maintain temperatures from 32°F–37°F (0°C–2.7°C) for a full 30 minutes. Instant Summer™ hot packs achieve temperatures of 151°F (65.6°C). Both are instantly activated and have a long shelf life.  
 Dimension: 6" x 8"  
 #1126145, Instant Winter™ Cold ..... 24/case  
 #4990813H, Instant Summer™ Hot ..... 24/case  
 (499-0813) ..... 24/case  
 Air freight service is not available for Instant Winter™.



**Instant Cold Compresses**  
**Henry Schein**  
 Single Use  
 Single squeeze allows for easy activation of packs  
 Provides immediate relief to injured area  
 Ideal for minor sprains, swelling, aches, sore joints, burns, nosebleeds, and headaches  
 Flexible material conforms to body contours  
 Single use  
 Non-sterile  
 No refrigeration needed  
 5" x 5" ..... 50/case  
 5" x 7" ..... 48/case  
 #1126145, Instant Winter™ Cold ..... 24/case



**Kwik-Kold™ Instant Cold Packs**  
**Cardinal Health**  
 Provides consistent cold therapy for convenient and effective pain relief  
 Can be applied directly to the skin—no cover required  
 Single use  
 Require no special preparation or refrigeration  
 Easy to activate: just squeeze and shake  
 #103B, Kit, 4" x 5" ..... 50/case  
 #11440-900, 6" x 9" ..... 16/case  
 (988-0146) ..... 24/case  
 #20204, Small, 5 1/2" x 7" ..... 24/case  
 (288-1230) ..... 24/case  
 #20104, Medium, 6" x 8 3/4" ..... 24/case  
 (288-1620) ..... 32/case  
 #11445-020B, 6" x 6" ..... 16/case  
 (988-0146)



**Irrisep™ Antimicrobial Wound Lavage**  
**Irimax Corporation**  
 A ready-to-use irrigation device ideal for disaster and emergency response where wound care is needed. Mechanically cleanses and removes wound debris with low-pressure irrigation through manual compression of the bottle. Designed for quick access and use in an easy-to-open packaging configuration. Contains chlorhexidine gluconate (CHG), an antimicrobial preservative in the solution that offers broad spectrum activity against various microorganisms like MRSA and *Pseudomonas*. 0.05% CHG in 99.95% sterile water for irrigation, USP.  
 #ISEPT-150RP-USA ..... 12/case  
 (702-2884)

Our I.V Administration Sets are the first in the industry to introduce a color coded packaging system, to ensure you can always find the drip rate you are looking for.



**SPECIFICATION:**

- Individually packaged
- Sterile

- Not made with natural rubber latex
- Not made with DEHP

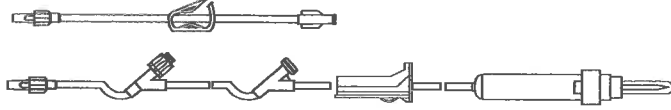
- Non-pyrogenic
- Medical Grade PVC

*Sections 5*  
 MS-83110 - 10 Drop  
 MS-83115 - 15 Drop  
 MS-83160 - 60 Drop  
 ← #7



83", Non Vented Drip Chamber, Split Septum Y-Site, Needleless PRN, Rotary Male Luer Lock

50/CASE



83", Non Vented Drip Chamber, Roller Clamp, Split Septum Y-Site, Needleless PRN, Rotary Male Luer Lock  
 With pre-attached 6" extension set

50/CASE

MS-831106 - 10 Drop  
 MS-831156 - 15 Drop  
 MS-831606 - 60 Drop



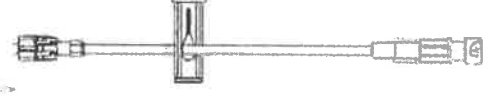
78", Non Vented Drip Chamber, Roller Clamp, Y-Site, Needleless PRN, Rotary Male Luer Lock

50/CASE

MS-83406 - 15 Drop

These sets allow direct injection or piggy-backing without the use of needles. Available systems include: ULTRASITE® capless or economical SAFELINE® split-septum valves. ULTRASITE valves are activated directly by standard-syringe Luer or male Luer IV tubing, can be swabbed, and do not require capping. SAFELINE valves are accessed using either a SAFELINE blunt syringe-tip cannula, antistick cannula, or if necessary, a standard needle. Injection site valves (INTs) lock directly to catheters for flushing and injecting without using needles. Plastic straws and antistick connectors are available for withdrawing drugs from ampules and rubber-stopper bottles without using needles. Universal EMS Set (#352237) has both SAFELINE split-septum and ULTRASITE Luer-activated Y-sites in a single, convenient set.

**B. Braun  
Infusion Sets and Connectors  
Needle-Free Injection-Site**

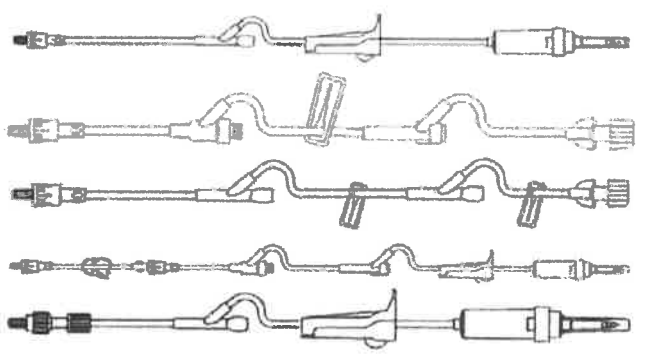


- Needle-Free IV Sets  
#NF1150, 15-Drop IV Set, with 2 SAFELINE® Needle-Free Valve Y-Sites, 82" Long (507-8263).....ea
- #NF1190, 60-Drop IV Set, with 2 SAFELINE® Needle-Free Valve Y-Sites, 96" Long (102-5471).....50/case
- #US1160, 15-Drop IV Administration Set, with Needle & Needle-Free Injection Sites (507-0791).....ea
- #352237, 60-Drop Universal EMS Set, with SAFELINE® & ULTRASITE® Y-Sites (499-6125).....ea
- #473444, Extension Set, with ULTRASITE® (338-2276).....100/case
- Needle-Free Cannulas, Connector Valves & Ampule Straws  
#NF9210, SAFELINE® Blunt Syringe-Tip Cannula (119-0876).....ea
- #NF9200, SAFELINE® Blunt Syringe-Tip Cannula, with Clip-Lock (119-3910).....ea
- #NF9100, SAFELINE® Injection Site Valve (INT) (126-2991).....100/Box
- #NF1320, SAFELINE® Injection Site Valve (INT), with 7" Tubing (507-3490).....ea
- #415110, ULTRASITE® Injection Site Valve (INT) (126-2996).....100/Case
- #415020, Filter Straw for Ampule Draws, 4" Long (438-0048).....100/case
- #415021, Filter Straw for Ampule Draws, 1.7" Long (507-6773).....ea

**Needle-Free Cannulas, Connector Valves & Ampule Straws**



- Sections #8*
- #607201, 60 Drop per Minute Set with 1 Y-Site, 83" (499-0502).....ea
  - #607201, 10 Drop per Minute Set with 1 Y-Site, 83" (499-0502).....ea
  - #108301, 10 Drop per Minute Set with 1 Y-Site, 72" (499-0712).....ea
  - #003201, Extension Set with 2 Y-Sites, 32" (499-0628).....ea
  - #108305, 10 Drop IV Set with Extension, Non-vented (499-0503).....ea
  - #606, Extension Set 6", 2 Y-Sites (499-0711).....ea
  - #AE3108, Extension Set 8", Sure-Lok® Needle-Free Connector (499-6066).....100/case



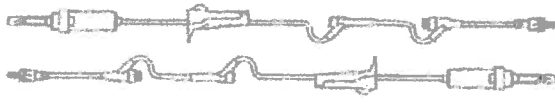
**AMSafe-3™ IV Administration Set**



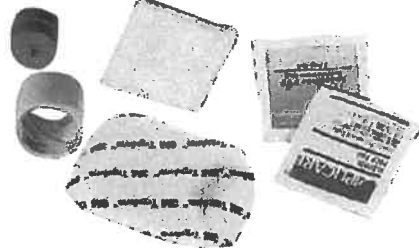
Designed with EMS responders in mind. Device has 3 volumes (10, 15, and 60 drops/mL) available. Comes with a preperced Y injection site, an AMSafe needleless Y-site, and a rotating Luer lock. #D38301 (499-6478).....ea

**Needle-Safe Universal IV Sets**

High-quality, value-priced, needle-safe intravenous administration sets. These sets have both AMSafe and split-septum Y-sites. Luer or blunt-tip connection in a single set. Available with 10 or 60 drip chambers, complete with rotary Luer lock, and easy opening packaging. Sterile and nonpyrogenic. Length: 83". #108306, 2 injection Y-sites, 10 Drop (499-0504).....ea
- #608306, 2 injection Y-sites, 60 Drop (499-0713).....ea
- #AY0200, PRN Connector Clave (499-0399).....ea

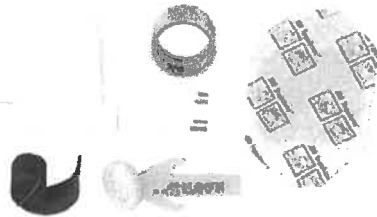


**IV Starter Kits**



- 1 Tegaderm™ dressing
  - 1 alcohol prep pad
  - 1 tourniquet (not made with natural rubber latex)
  - 1 transparent window dressing
  - 1 PVP prep pad
  - 2-2" x 2" gauze sponges
  - 1 roll of medical tape
- #820  
50/box (891-3037)

**3M ChloroPrep IV Start Kit with**



- 1 change date label
  - 1-2% x 2% Tegaderm™ transparent dressing
  - 1 ChloroPrep, 1 mL
  - 1-3/4" x 18" roll medical tape
  - 2-2" x 2", 4-ply gauze sponges
  - 1 tourniquet
- (570-0617) ea

**IV Start Kit with Tegaderm**

- 1 Tegaderm dressing, 2% x 2%
  - 2 prep pads (1 medium alcohol and 1 medium PVP iodophor)
  - 1-3/4" x 18" roll of Transpore tape
  - 1-3/4" x 18" white roll of Tourniquet
- #2602  
ea (103-6304)

Section 5  
#9



- Not made with natural rubber latex
  - Unique "grip" surface to better hold the patient's arm when drawing blood
  - Measures 1" W x 18" L
  - Blue
  - #MS-17301 (133-6390)
- 250/pk

**Tourniquets**

- Used for constricting or compression
  - Feels like latex
  - Hypoallergenic
  - Superior strength
  - Not made with natural rubber latex
  - #NLT4425W, 1" x 18", White (681-3972)
  - #NLT4100, 1" x 18", Blue (933-0168)
- 1000/case  
100/box



**IV Start Kit**

- Motion Medical
- #1295, IV Start Kit with Venigard (753-0543) ea
- #1253, IV Start Kit, Not Made with Natural Rubber Latex (753-1739) ea



- ChloroPrep® antiseptic, .67-mL Sepp applicator
  - Tegaderm™ 1624 dressing, 2.375" x 2.75"
  - 2" x 2", 4-ply nonwoven gauze sponge
  - IV change label
  - 1 Transpore™ tape, 3/4" x 24"
- Kit contains:  
Medical Action Industries  
and Tegaderm™ 1624  
IV Kit with .67-mL CHG Sepp
- (143-2842) pk

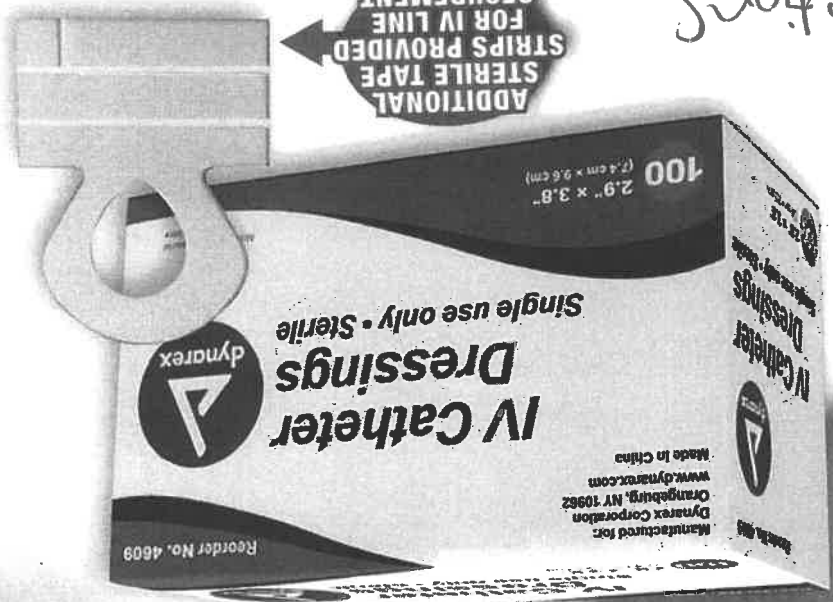
# IV Catheter Dressing

WE CARE LIKE FAMILY™



## Secures and Stabilizes IV Catheters on Patients

- Offers ability to write on foam border
- Sterile, single use only
- Comfortable, and has a low profile
- Waterproof so patients may shower



**ADDITIONAL STERILE TAPE STRIPS PROVIDED FOR IV LINE SECUREMENT**

*Sections*

Reorder No.	Description	Quantity
4609	IV Catheter Dressing	5/100/Cs

*#13*



See website for our IV Start Kits (Reorder Nos. 4692, 4696 & 4704)

**dynearex**™ is your one-stop medical supply company since 1967

For more information contact your local Dynearex® distributor sales representative. Or call **888-396-2739** to find your nearest distributor.

10 Glenshaw Street • Orangetown, NY 10962 • www.dynearex.com  
© 2016 Dynearex Corporation



Find us on:

**Cardinal Health  
Containers**  
Adjustable openings accommodate a wide range of sharps waste. Built-in stepped needle unwinder ports. Snap-on lids close between uses and lock for final disposal. Nestable to save valuable storage space.

#89005A, 1-qt Container  
#15225A, Red 2.2-qt Phlebotomy, Rotor Disposal Opening, 7 1/2"H x 6 1/2"W x 4 3/4"D (666-0675)..... ea  
#89505A, 5-qt Container, Round, Red, 6 3/4"H x 8 3/4"D (666-3233)..... ea  
#8970, 2-gal Container with Adjustable Rotor Lid, Red 10"H x 10 1/2"W x 7 1/4"D (666-2575)..... ea  
#89671, 2-gal Container with Horizontal Drop, 12 1/2"H x 10 1/2"W x 7 1/4"D (666-3407)..... ea

**BD  
Extra Large Sharps Collectors**  
With large access openings, including temporary and final closure, these collectors feature dual-opening hinge and sliding tops with VAT (visual-audible-tactile) perimeter locks, temporary closure, handles and clear tops to view fill level. They are sturdy, stackable when full, and designed for easy handling and disposal. Red

#305615, 9-gal Container with Clear Hinged Top (No Gasket) (420-6988)..... ea



#8990SA, 2-gal Red Container with Clear Hinged Lid, 10"H x 7 1/4"D x 10 1/2"W (890-0080)..... ea  
#89651, 2-gal Container, Horizontal Drop, Red with Clear Lid, 12 1/2"H x 7 1/4"D x 10 1/2"W (987-0245)..... ea  
#8527R, Red, 3 gal (890-9506)..... ea  
#8980, 8-gal Container with Hinged Lid, 17 1/2"H x 15 1/2"W x 11"D (666-3598)..... ea



#305616, 9-gal Container with Clear Sliding Top (No Gasket) (987-0453)..... ea  
#305602, 9-gal Container with Sliding Top and Gasket, DOT Compliant (696-0009)..... ea  
#305610, 17-gal Container with Clear Hinged Top (987-0315)..... ea  
#305665, 17-gal Container with Clear Hinged Top and Gasket (111-8305)..... 5/case  
#305609, 19-gal Container with Clear Sliding Top (No Gasket) (987-0219)..... ea  
#305666, 19-gal Container with Clear Sliding Top and Gasket (102-9698)..... 5/case

**In-Room Sharps Container with Always-Open Lid**  
Covidien  
#851201, 5 qt, Clear (666-9671)..... ea  
#851301, 5 qt, Transparent Red (608-5323)..... ea



**Sharps Shaft<sup>™</sup>  
Dynarex**  
Compact, puncture-resistant container designed for the safe, single-handed disposal of used syringes and sharps. Conveniently sized, making it ideal for EMS, fire, and nursing personnel. Fits easily into bags, purses, and backpacks. Fully portable container features both a temporary closure and a final locking mechanism. #4630 (700-4494)..... ea



#EB09.001, Sharps/Yellow 3.4" x 5" x 1". Fits into any carry bag or pocket. Measures and emergency personnel. Compact design A necessity for the safety of first responders  
Leonhard Lang USA  
**Container  
Biohazard  
Compact  
Elite Bags**



#8303SA, Red, 1 qt easy transport. Convenient for Covidien Sharps Containers (666-2496)..... ea  
#1522SA, Red 2.2-qt Phlebotomy, Rotor Disposal Opening, 7 1/2"H x 6 1/2"W x 4 3/4"D (666-0675)..... ea  
#1525SA, Red, 8-qt Phlebotomy (126-7400)..... ea

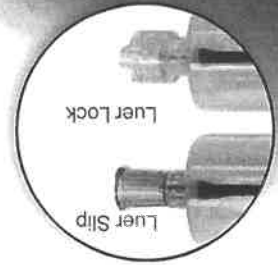






Find us on:

**dynarex** is your one-stop medical products brand since 1967. For more information contact your local Dynarex® distributor sales representative. Or call 888-396-2739 to find your nearest distributor. 10 Glenshaw Street • Orangeburg, NY 10962 • www.dynarex.com © 2022 Dynarex Corporation 202210



- Safety Insulin Syringes
- Safety Syringes with Needle
- Dialysis Safety Syringes with Needle
- Non-Safety Syringes with Needle
- Non-Safety Insulin Syringes
- Syringes Without Needle
- Hypodermic Needles
- Pen Needles
- Blood Collection Tube Holders
- Non-Safety Tuberculin Syringes
- Allergy Syringe Tray



## A Complete Line of Syringes and IV Administration Sets



See side of box for full instructions for use and safety information

WE CARE LIKE FAMILY



# Dynarex COMPLETE LINE OF SYRINGES

• Insulin Syringes • Safety Syringes with Needle • Diagnostics Safety Syringes with Needle • Syringes Without Needle • Non-Safety Insulin Syringes • Hypodermic Needles • Non-Safety Syringes with Needle • Blood Collection Tube Holders • Pen Needles • IV Administration Sets • IV Extension Sets

## Blood Collection Tube Holders

Reorder No.	Description	Quantity
6934	Without Needle, Non-Share	4750/Cs
6933	Without Needle, Non-Share	200/Box
6935	Luer Slip with Needle, Share	200/Box

## Non-Safety Insulin Syringes

Reorder No.	Description	Quantity
6940	Non-Safety Insulin Syringe With Needle, 0.5cc, 27G x 1/2", Individually Packaged	5100/Cs
6941	Non-Safety Insulin Syringe With Needle, 0.5cc, 28G x 1/2", Individually Packaged	5100/Cs
6942	Non-Safety Insulin Syringe With Needle, 0.5cc, 29G x 1/2", Individually Packaged	5100/Cs
6943	Non-Safety Insulin Syringe With Needle, 0.5cc, 29G x 1/2", Individually Packaged	5100/Cs
6944	Non-Safety Insulin Syringe With Needle, 0.5cc, 31G x 5/16", Individually Packaged	5100/Cs
6945	Non-Safety Insulin Syringe With Needle, 0.5cc, 28G x 1/2", Individually Packaged	5100/Cs
6947	Non-Safety Insulin Syringe With Needle, 0.5cc, 29G x 1/2", Individually Packaged	5100/Cs
6948	Non-Safety Insulin Syringe With Needle, 0.5cc, 30G x 1/2", Individually Packaged	5100/Cs
6949	Non-Safety Insulin Syringe With Needle, 0.5cc, 31G x 5/16", Individually Packaged	5100/Cs
6950	Non-Safety Insulin Syringe With Needle, 0.5cc, 27G x 1/2", Individually Packaged	5100/Cs
6951	Non-Safety Insulin Syringe With Needle, 0.5cc, 27G x 1/2", Individually Packaged	5100/Cs
6952	Non-Safety Insulin Syringe With Needle, 0.5cc, 28G x 1/2", Individually Packaged	5100/Cs
6953	Non-Safety Insulin Syringe With Needle, 0.5cc, 29G x 1/2", Individually Packaged	5100/Cs
6954	Non-Safety Insulin Syringe With Needle, 0.5cc, 31G x 5/16", Individually Packaged	5100/Cs
6955	Non-Safety Insulin Syringe With Needle, 0.5cc, 31G x 5/16", Individually Packaged	5100/Cs
6956	Non-Safety Insulin Syringe With Needle, 0.5cc, 27G x 1/2", Individually Packaged	5100/Cs
6957	Non-Safety Insulin Syringe With Needle, 0.5cc, 28G x 1/2", Individually Packaged	5100/Cs
6958	Non-Safety Insulin Syringe With Needle, 0.5cc, 30G x 1/2", Individually Packaged	5100/Cs
6959	Non-Safety Insulin Syringe With Needle, 0.5cc, 31G x 5/16", Individually Packaged	5100/Cs

## Pen Needles

Reorder No.	Description	Quantity
7024	Pen Needles, 30G x 5mm	100/12Cs
7025	Pen Needles, 31G x 5mm	100/12Cs
7026	Pen Needles, 30G x 8mm	100/12Cs
7027	Pen Needles, 31G x 8mm	100/12Cs
7028	Pen Needles, 32G x 4mm	100/12Cs

## IV Administration Sets (sold by inner box)

Reorder No.	Description	Quantity
7030	10 Drop/ml, 83", 1 in. site, 1 Luer lock site	50/Box
7031	15 Drop/ml, 83", 1 in. site, 1 Luer lock site	50/Box
7032	15 Drop/ml, 78", 1 in. site	50/Box
7033	15 Drop/ml, 106", 2 Injection sites	50/Box
7034	15 Drop/ml, 73", 1 Injection site	50/Box
7035	15 Drop/ml, 84", 2 Luer lock needle-free sites	50/Box
7036	15 Drop/ml, 85", no Injection sites	50/Box
7037	15 Drop/ml, 37", 2 Injection sites	50/Box
7038	10 Drop/ml, 37", w/ Hanger and Luer Lock Chamber	50/Box
7039	10 Drop/ml, 83", 1 Injection Site	50/Box
7040	10 Drop/ml, 83", w/ 5" Extension, 1 Injection Site, 2 Needleless Ports	50/Box
7041	10 Drop/ml, 89", 2 Injection Sites, Check Valve	50/Box
7042	10 Drop/ml, 112", 2 Needleless Ports, Check Valve	50/Box
7043	15 Drop/ml, 106", 2 Needleless Ports	50/Box
7044	20 Drop/ml, 92", 1 Injection Site	50/Box
7045	20 Drop/ml, w/ Regulator, 83", 1 Needleless Port w/ 1/2" Micron Filter	50/Box
7046	20 Drop/ml, w/ Regulator, 83", 1 Needleless Port w/ 1/2" Micron Filter	50/Box
7047	20 Drop/ml, 83", 1 Needleless Port w/ 1/2" Micron Filter	50/Box
7049	20 Drop/ml, 92", 1 Injection site	50/Box
7051	60 Drop/ml, 83", 1 Injection site	50/Box
7052	60 Drop/ml, 78", 2 Injection sites	50/Box
7053	60 Drop/ml, 87", no Injection sites	50/Box

## Pen Needles

Reorder No.	Description	Quantity
8916	With Needle, 10cc, 21G x 1 1/2"	100/6Cs
8919	With Needle, 5cc, 21G x 1 1/2"	100/6Cs
8921	With Needle, 3cc, 20G x 1 1/2"	100/6Cs
8923	With Needle, 3cc, 21G x 1 1/2"	100/6Cs
8924	With Needle, 3cc, 21G x 1"	100/6Cs
8925	With Needle, 3cc, 22G x 1"	100/6Cs
8926	With Needle, 3cc, 22G x 1"	100/6Cs
8927	With Needle, 3cc, 23G x 1"	100/6Cs
8928	With Needle, 3cc, 25G x 5/8"	100/6Cs
8929	With Needle, 1cc, 25G x 5/8"	100/6Cs
8930	With Needle, 1cc, 27G x 1/2"	100/6Cs
8931	With Needle, 1cc, 25G x 1"	100/6Cs
8932	With Needle, 1cc, 25G x 1 1/2"	100/6Cs

## Securesafe™ Syringes With Safety Needle

Reorder No.	Description	Quantity
8901	Securesafe™ Insulin Syringe With Needle, 0.5cc, 29G x 1/2"	100/5Cs
8904	Securesafe™ Insulin Syringe With Needle, 1cc, 29G x 1/2"	100/5Cs

## Securesafe™ Safety Insulin Syringes

Reorder No.	Description	Quantity
7112	Sensilance® - Pressure Activated, 21G, 2.2 mm	100/10Cs
7114	Sensilance® - Pressure Activated, 26G, 1.8 mm	100/10Cs
7115	Sensilance® - Pressure Activated, 28G, 1.8 mm	100/10Cs
7122	Sensilance® - Button Activated, 21G, 2.4 mm	100/10Cs
7124	Sensilance® - Button Activated, 26G, 1.8 mm	100/10Cs
7125	Sensilance® - Button Activated, 28G, 1.8 mm	100/10Cs
7134	Activated, 28G, 1.8 mm	100/10Cs

## Safety Lancets

Reorder No.	Description	Quantity
7061	6", Needle-Free Luer Lock Connector	100/Box
7062	7", Needle-Free Luer Lock Connector	100/Box
7064	18", with Regulator	100/Box
7065	36"	100/Box

## IV Extension Sets (sold by inner box)

Reorder No.	Description	Quantity
8970	Hypodermic Needles, 23G x 1"	10/100Cs
8971	Hypodermic Needles, 23G x 1 1/2"	10/100Cs
8972	Hypodermic Needles, 25G x 5/8"	10/100Cs
8973	Hypodermic Needles, 25G x 1 1/2"	10/100Cs
8974	Hypodermic Needles, 26G x 1/2"	10/100Cs
8976	Hypodermic Needles, 27G x 1/2"	10/100Cs

## Securesafe™ Tuberculin Syringes (Luer Slip) & Allergy Syringe Tray

Reorder No.	Description	Quantity
8967	Hypodermic Needles, 21G x 1 1/2"	10/100Cs
8968	Hypodermic Needles, 22G x 1"	10/100Cs
8969	Hypodermic Needles, 22G x 1 1/2"	10/100Cs
8970	Hypodermic Needles, 23G x 1"	10/100Cs
8971	Hypodermic Needles, 23G x 1 1/2"	10/100Cs
8972	Hypodermic Needles, 25G x 5/8"	10/100Cs
8973	Hypodermic Needles, 25G x 1 1/2"	10/100Cs
8974	Hypodermic Needles, 26G x 1/2"	10/100Cs
8976	Hypodermic Needles, 27G x 1/2"	10/100Cs

## Hypodermic Needles

Reorder No.	Description	Quantity
6960	Hypodermic Needles, 18G x 1"	10/100Cs
6961	Hypodermic Needles, 18G x 1 1/2"	10/100Cs
6962	Hypodermic Needles, 19G x 1"	10/100Cs
6963	Hypodermic Needles, 19G x 1 1/2"	10/100Cs
6964	Hypodermic Needles, 20G x 1"	10/100Cs
6965	Hypodermic Needles, 20G x 1 1/2"	10/100Cs
6966	Hypodermic Needles, 21G x 1"	10/100Cs
6967	Hypodermic Needles, 21G x 1 1/2"	10/100Cs
6968	Hypodermic Needles, 22G x 1"	10/100Cs
6969	Hypodermic Needles, 22G x 1 1/2"	10/100Cs
6970	Hypodermic Needles, 23G x 1"	10/100Cs
6971	Hypodermic Needles, 23G x 1 1/2"	10/100Cs
6972	Hypodermic Needles, 25G x 5/8"	10/100Cs
6973	Hypodermic Needles, 25G x 1 1/2"	10/100Cs
6974	Hypodermic Needles, 26G x 1/2"	10/100Cs
6975	Hypodermic Needles, 27G x 1/2"	10/100Cs
6976	Hypodermic Needles, 27G x 1 1/2"	10/100Cs
6980	Hypodermic Needles, 28G x 1/2"	10/100Cs
6981	Hypodermic Needles, 28G x 1"	10/100Cs
6982	Hypodermic Needles, 28G x 1 1/2"	10/100Cs
6983	Hypodermic Needles, 29G x 1/2"	10/100Cs
6984	Hypodermic Needles, 29G x 1"	10/100Cs
6985	Hypodermic Needles, 29G x 1 1/2"	10/100Cs
6986	Hypodermic Needles, 30G x 1/2"	10/100Cs
6987	Hypodermic Needles, 30G x 1"	10/100Cs
6988	Hypodermic Needles, 30G x 1 1/2"	10/100Cs
6989	Hypodermic Needles, 31G x 1/2"	10/100Cs
6990	Hypodermic Needles, 31G x 1"	10/100Cs
6991	Hypodermic Needles, 31G x 1 1/2"	10/100Cs
6992	Hypodermic Needles, 32G x 1/2"	10/100Cs
6993	Hypodermic Needles, 32G x 1"	10/100Cs
6994	Hypodermic Needles, 32G x 1 1/2"	10/100Cs

## Syringes Without Needle

Reorder No.	Description	Quantity
6987	Syringes Without Needle, Luer Slip, Int.Loc	10/100Cs
6988	Syringes Without Needle, Luer Lock, Int.Loc	10/100Cs
6989	Syringes Without Needle, Luer Lock, 30ml.Loc	10/50Cs
6990	Syringes Without Needle, Luer Lock, 10ml.Loc	10/100Cs
6991	Syringes Without Needle, Luer Lock, 20ml.Loc	10/50Cs
6992	Syringes Without Needle, Luer Lock, 30ml.Loc	10/50Cs
6993	Syringes Without Needle, Luer Lock, 60ml.Loc	10/25Cs

## Securesafe™ Tuberculin Syringes (Luer Slip) & Allergy Syringe Tray

Reorder No.	Description	Quantity
8977	Hypodermic Needles, 21G x 1 1/2"	10/100Cs
8978	Hypodermic Needles, 22G x 1"	10/100Cs
8979	Hypodermic Needles, 22G x 1 1/2"	10/100Cs
8980	Hypodermic Needles, 23G x 1"	10/100Cs
8981	Hypodermic Needles, 23G x 1 1/2"	10/100Cs
8982	Hypodermic Needles, 25G x 5/8"	10/100Cs
8983	Hypodermic Needles, 25G x 1 1/2"	10/100Cs
8984	Hypodermic Needles, 26G x 1/2"	10/100Cs
8985	Hypodermic Needles, 26G x 1 1/2"	10/100Cs
8986	Hypodermic Needles, 27G x 1/2"	10/100Cs
8987	Hypodermic Needles, 27G x 1 1/2"	10/100Cs

## Securesafe™ Tuberculin Syringes (Luer Slip) & Allergy Syringe Tray

Reorder No.	Description	Quantity
8988	Hypodermic Needles, 27G x 1"	10/100Cs
8989	Hypodermic Needles, 27G x 1 1/2"	10/100Cs
8990	Hypodermic Needles, 28G x 1/2"	10/100Cs
8991	Hypodermic Needles, 28G x 1"	10/100Cs
8992	Hypodermic Needles, 28G x 1 1/2"	10/100Cs
8993	Hypodermic Needles, 29G x 1/2"	10/100Cs
8994	Hypodermic Needles, 29G x 1"	10/100Cs
8995	Hypodermic Needles, 29G x 1 1/2"	10/100Cs
8996	Hypodermic Needles, 30G x 1/2"	10/100Cs
8997	Hypodermic Needles, 30G x 1"	10/100Cs
8998	Hypodermic Needles, 30G x 1 1/2"	10/100Cs
8999	Hypodermic Needles, 31G x 1/2"	10/100Cs
9000	Hypodermic Needles, 31G x 1"	10/100Cs
9001	Hypodermic Needles, 31G x 1 1/2"	10/100Cs
9002	Hypodermic Needles, 32G x 1/2"	10/100Cs
9003	Hypodermic Needles, 32G x 1"	10/100Cs
9004	Hypodermic Needles, 32G x 1 1/2"	10/100Cs

## Non-Safety Tuberculin Syringes (Luer Slip) & Allergy Syringe Tray

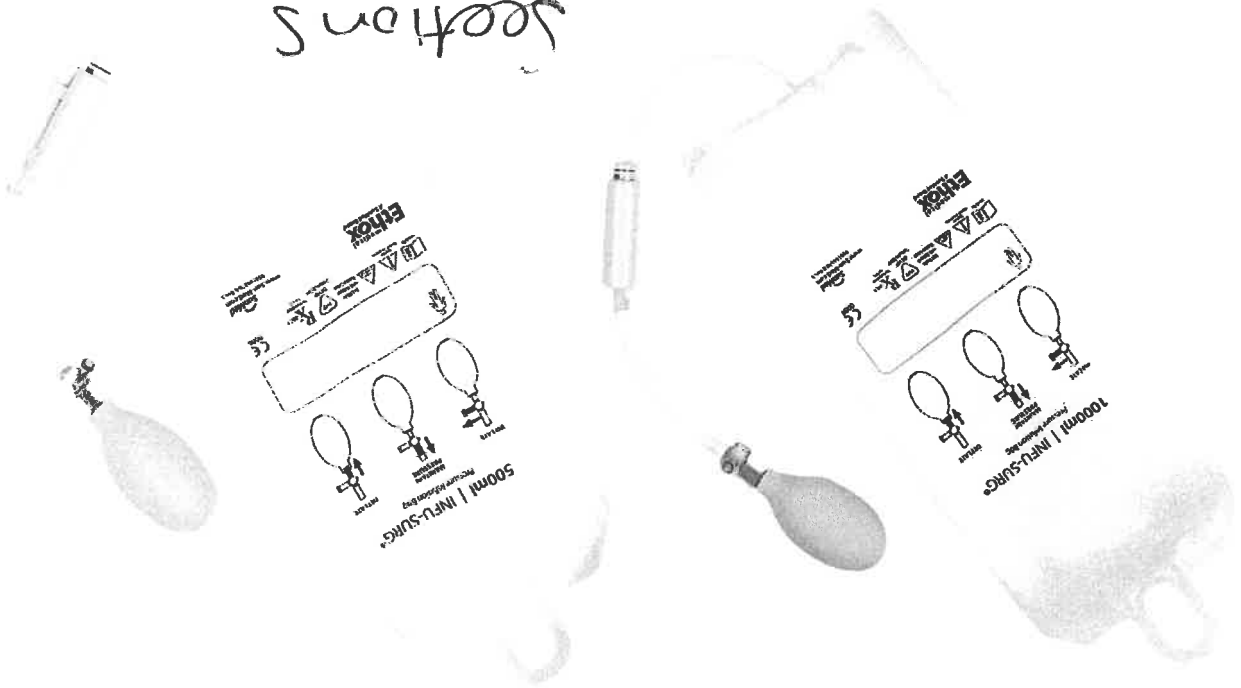
Reorder No.	Description	Quantity
8939	Tuberculin Non-Safety Syringe (Luer Slip) - 1cc	100/10Cs
8938	Tuberculin Non-Safety Syringe (Luer Slip) - 1cc	100/10Cs
8937	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8936	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8935	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8934	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8933	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8932	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8931	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8930	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8929	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8928	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8927	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8926	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8925	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8924	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8923	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8922	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8921	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8920	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8919	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8918	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8917	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8916	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8915	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8914	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8913	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8912	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8911	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8910	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8909	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8908	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8907	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8906	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8905	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8904	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8903	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8902	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs
8901	Securesafe™ Tuberculin Syringe - 1cc	100/10Cs



# INFU-SURG® PRESSURE INFUSION BAG

LATEX FREE | SINGLE PATIENT USE | DISPOSABLE | DEHP FREE | MR CONDITIONAL | CE MARK

The Infu-Surg® Pressure Infusion Bag is a safe, high-quality, reliable device for intravenous and intra-arterial infusion treatment, including A-line pressure monitoring. The Infu-Surg is a cost-effective, trusted product that medical professionals have relied on for decades. The dedicated fluid bag hook enables efficient loading and unloading of the system without having to remove the infusion bag from the IV pole.



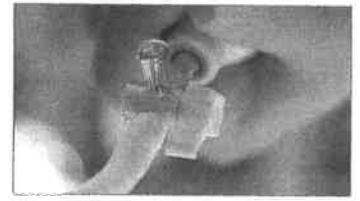
*Solutions*

- Pressure relief valve prevents over inflation (375 mm Hg pressure relief)
- Large, oval shaped bulb allows for quick and easy inflation of bladder
- Single-handed inflation and deflation design makes it easy to use and requires minimal training
- Dedicated fluid bag hook enables efficient loading and unloading of the system without having to remove the infusion bag from the IV pole
- Suitable for use with external inflation sources
- Color-coded gauge makes for accurate pressure monitoring (0-300 mm Hg)
- Three-way stopcock ensures precise control of pressure
- Incredibly reliable – 100% tested

ITEM	DESCRIPTION	VOLUME	PK
4005H	Infu-Surg with Hook	500 mL	25
4010H	Infu-Surg with Hook	1000 mL	25
4030	Infu-Surg	3000 mL	25



360° view of the color-coded gauge facilitates accurate pressure monitoring while the safety pressure relief valve prevents over-inflation



Three-way stopcock ensures precise control of pressure while the large oval bulb allows for quick bladder inflation, all with ONE hand



Solution bag hook enables easy bag changing without having to remove the Infu-Surg from the IV pole; keeps fluid bag in proper position while in use



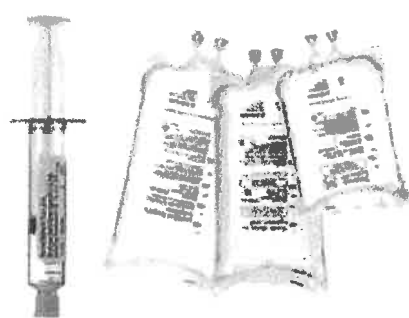
**Stackable Sharps Containers**  
 Medical Action Industries  
 #8702, 1 qt, Small, Red  
 #8703, 4 qt (1 gal), Medium, Red  
 #8704, 8 qt (2 gal), Large, Red  
 #153-6190  
 #8706, 1 gal, Medium, Red  
 #926-9972  
 #8707T, 8 qt (2 gal), Translucent  
 #300-6107  
 #8710, 3 gal, Red  
 #788-7482  
 #8705, 8 gal, X-large, Red  
 #153-2981  
 #8716, 16 gal, Red  
 #153-6437

**Health Care Logistics**  
 Peel-off, stick-on biohazard labels.  
 Dimensions: 3" x 3 1/2"  
 #2460  
 #499-3194.....1000/pkg



**Sharp-Trap Bio-Disposable Container**  
 Harbor Safety Products  
 Can handle syringes and needles, suture needles, blades, scissors, and more. Made of durable, yet value-priced plastic, so it can be autoclaved or simply discarded.  
 #ST100, Single Size  
 #499-0581.....ea

**Plastic Safety Seals**  
 Health Care Logistics  
 9" red seals for drug-box control.  
 #7820, Numbered  
 #499-0759.....100/box  
 #7821, Not Numbered  
 #499-0760.....100/box

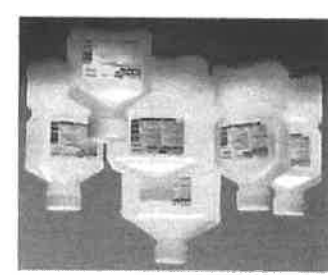


**Fluid Bags & Irrigation Bottles**  
 B. Braun  
 Non-PVC, DEHP-free IV solution bags. Safer for patients. Unlike standard bags made from polyvinyl chloride (PVC) IV solution bags, these bags contain no DEHP (di-2-ethylhexylphthalate) and comply with the FDA's safety assessment, eliminating the threat of DEHP leaching. In addition, they are made from a unique clear material, which makes viewing the condition and level of the bag's IV solution much easier.  
 #513576, 10 mL  
 #507-8362.....100/box  
 Dextrose 5% in Water  
 #L5102, 250 mL  
 #507-5102.....ea  
 #L5101, 500 mL  
 #100-7318  
 #L5100, Plastic, 1000 mL  
 #100-9268  
 Sodium Chloride Solution 0.9%  
 #L8002, 250 mL  
 #507-8002.....ea  
 #L8001, 500 mL  
 #100-4737  
 #L8000, 1000 mL  
 #100-2808  
 Dextrose 5% in Lactated Ringer  
 #L7511, 500 mL  
 #507-1330.....ea  
 #L7510, 1000 mL  
 #507-7510.....ea

**IV Flush Syringes, Fluid Bags & Irrigation Bottles**  
 B. Braun  
 Except DEHP-free Plastic Bags  
 Non-PVC, DEHP-free IV solution bags. Safer for patients. Unlike standard bags made from polyvinyl chloride (PVC) IV solution bags, these bags contain no DEHP (di-2-ethylhexylphthalate) and comply with the FDA's safety assessment, eliminating the threat of DEHP leaching. In addition, they are made from a unique clear material, which makes viewing the condition and level of the bag's IV solution much easier.  
 #L7501, 500 mL  
 #507-7502.....ea  
 #L7502, 250 mL  
 #507-7502.....ea  
 #L7501, 500 mL  
 #507-6910.....24/case  
 #L7500, Lactated Ringer, 1000 mL  
 #100-2435.....ea

**Lactated Ringers for Injection IV Solutions**  
 B. Braun  
 Except DEHP-free Plastic Bags  
 #L7502, 250 mL  
 #507-7502.....ea  
 #L7501, 500 mL  
 #507-6910.....24/case  
 #L7500, Lactated Ringer, 1000 mL  
 #100-2435.....ea

**IV Solutions**  
 B. Braun  
 Plastic Irrigation Containers (PIC™)  
 Sodium Chloride 0.9% for Irrigation  
 #R5201-01, 500 mL  
 #507-5201.....ea  
 #R5200-01, 1000 mL  
 #507-5300.....ea  
 #R5205-01, 2000-mL Bottle  
 #507-0069.....ea



**Sterile Water for Irrigation and 0.9% Sodium Chloride and IV Solutions**  
 B. Braun  
 Plastic Irrigation Containers (PIC™)  
 Sodium Chloride 0.9% for Irrigation  
 #R5201-01, 500 mL  
 #507-5201.....ea  
 #R5200-01, 1000 mL  
 #507-5300.....ea  
 #R5205-01, 2000-mL Bottle  
 #507-0069.....ea

# ZIP Bag



**Strap**  
Helps keep the bag open  
or sealed tight



**Hook**  
Hang on overhead rails,  
IV poles, bed frames,  
or belt loops

**Scale**  
Amount of infectious  
waste is clearly visible

## SPECIFICATION

- Many Uses: Emesis, Urine, Infectious Waste, Contaminated Bandages, Scene Garbage, or as a Security Bag
- Hook is Optional

Item #	Description	UOM
MS-17367 #2	ZIP Bag	12/PK, 480/CS

Section 6

Section 6



Products / Disposable Blankets & Covers / Survival Wrap / Survival Wrap 52 x 84, Silver

# Survival Wrap 52 x 84, Silver

721  
250/CS



## Product Features

Heat reflective mylar foil wrap  
Used to trap in heat and maintain body temperature  
Compact packaging allows for convenient storage

## Attributes

**Brand Name** Dukal  
**Size** 52" x 84"  
**Color** Silver  
**Sterile** No  
**Weight** 29.4758 lbs

## Packaging

**Packaging** 250/CS  
**Case Packaging** 250/CS  
**Total Case Quantity** 250  
**Item Packaging Barcode** 665973007212  
**Case Packaging Barcode** (01)20665973016034

2 Fleetwood Ct.  
Ronkonkoma, NY 11779

**Phone:** 1 (631) 656-3800  
**Toll Free:** 1 (800) 243-0741  
**Fax:** 1 (631) 656-3810



Section 6  
#8/9

# Emergency Disposable Obstetrical Kit

## Contents:

1 Pair	Non-Latex Exam Sterile Gloves
1 Each	Disposable Scalpel, Sterile
1 Each	OB Underpad, 17"x24"
2 Pack	Gauze Sponge 4"x4", Sterile (2/pack)
2 Each	Umbilical Clamp, Sterile
1 Each	Placenta Bag 8"x15" with twist ties
1 Each	OB Pad, Sterile
1 Each	Receiving Blanket, 40"x48"
3 Each	Disposable Non-Woven Towel 13"x18"
1 Each	Bulb Syringe, Sterile
1 Each	Plastic Apron
1 Each	BZK Towellette
1 Each	OB Towellette
1 Each	Trash Bag (Do not dispose of outer bag, it is the trash bag)
1 Each	Apgar Scoring Chart (On Reverse)

\*\* All items included are one-time use. Please dispose of all kit contents properly.

Item # 01120B

Exp: 06-25-2025

**DMS**  
Dick Medical Supply



MS-95202

Advanced Patient Mover

10/Case

Item #

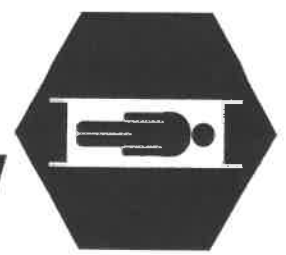
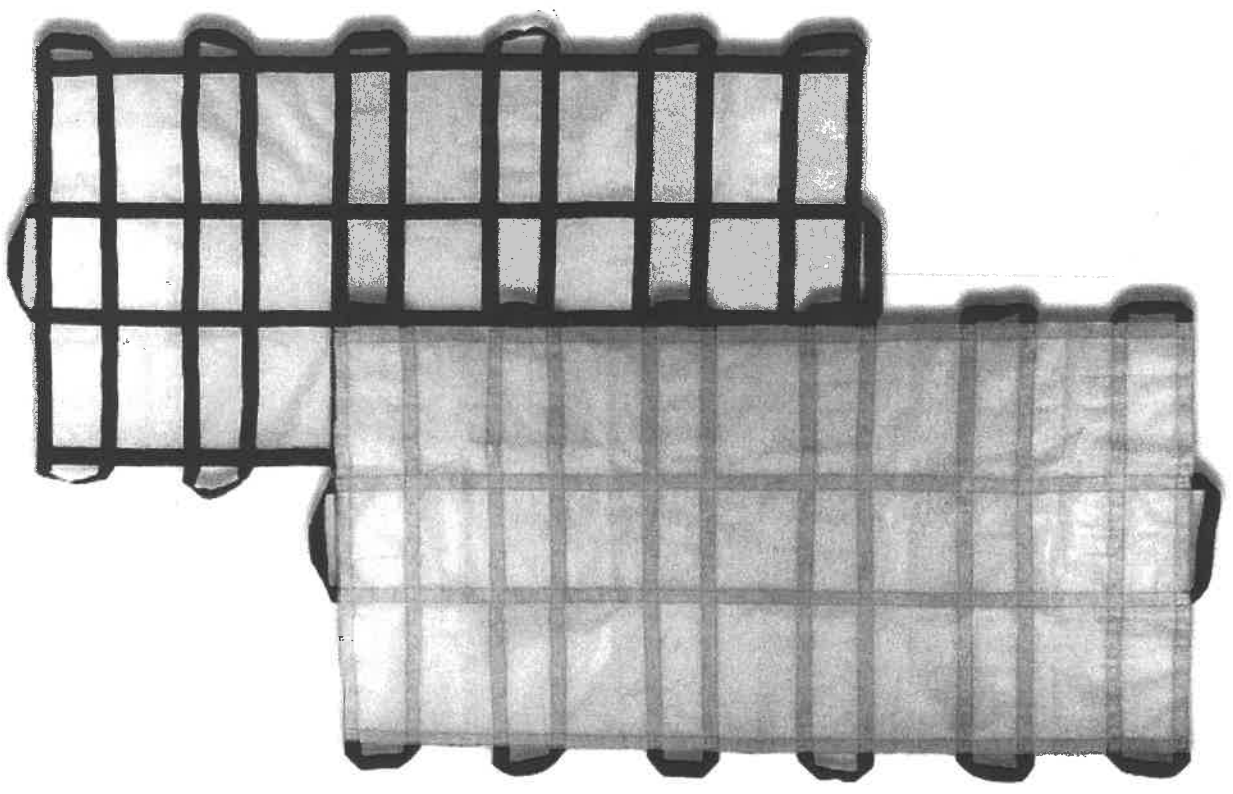
Description

UOM

www.gomedsource.com

Section 6 #10

Designed to assist in the transport and rescue of patients from areas that are difficult to access with traditional stretchers. This compact mover is constructed from heavy-duty, non-woven materials and is able to carry up to 1500 lbs. The fabric is impervious to fluids and the 14 Handles allow for extra handlers when carrying larger patients.

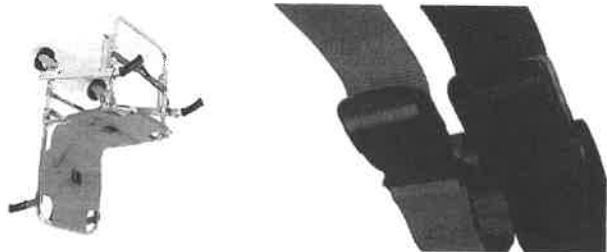


**MedSource**  
Transport &  
Immobilization

Patient Mover

# STAIR CHAIR REPLACEMENT STRAPS

Stair Chair replacement straps are 2" Polypropylene webbing with Plastic Side Release buckles. Set of 2 straps wraps around patient and chair to secure. Call for further information.



CHAIR NOT INCLUDED

Item #47162BKGRSET Economy Poly, Plastic SR Bkl, 6.5 ft., 2 pc., Black & Green, Set

Item #47051 Economy Poly, Plastic SR Bkl, 6.5 ft., 2 pc., Black X 2, Set

Economy Poly, Plastic SR Bkl, 5 ft., 1 pc., each

**Strap Carrying Case**  
Made with lined Heavy Duty Vinyl that is reinforced with 1" Nylon webbing. Velcro® closure. Belt loops on the back for easy carrying. Holds up to two straps.  
Item #6004BK Strap Carrying Case, each

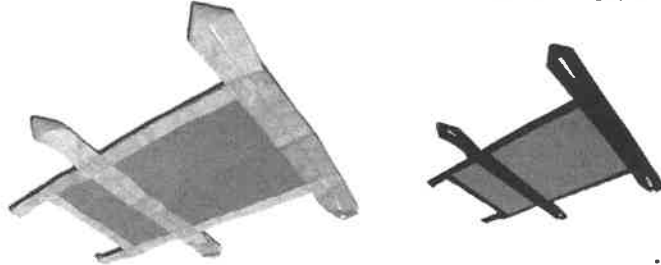


Also available in many different colors.

BLACK	ORANGE
BLUE	RED
GREEN	YELLOW
MAROON	OLIVE DRAB
NEON GREEN	WHITE

# SOFT STRETCHERS

The Scoop Up™ Stretcher is designed to transport patients from confined areas. The patient is carried in an upright sitting position with 6 handholds. It measures 20" X 34" with 2" continuous and reinforced yellow or black nylon strapping. The Scoop Up™ can be easily stored. Made with Orange Vinyl makes it easy to clean.



Item #30070YL Scoop Up™ Soft Stretcher, Yellow/Orange, each

Item #30070BK Scoop Up™ Soft Stretcher, Black/Orange, each

\*Comes with a handy carrying case.

DMS Soft Stretchers are made with orange vinyl that is reinforced with black nylon strapping and vinyl handles.

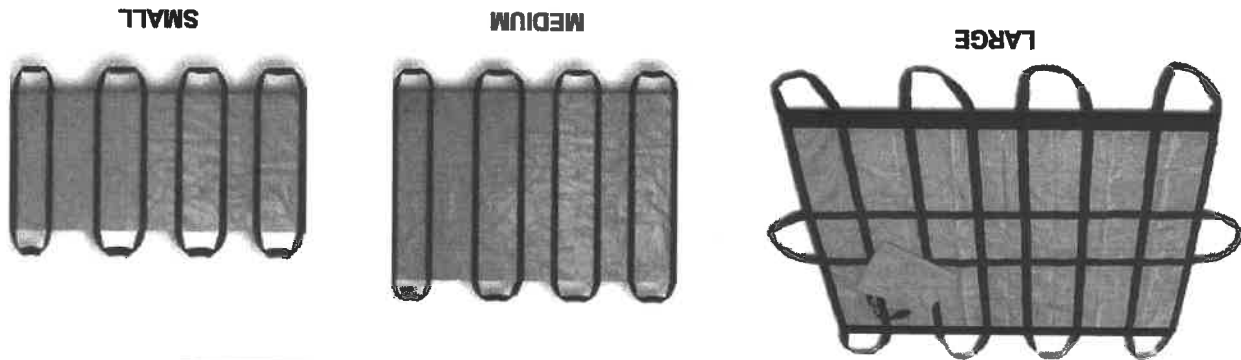
- Rugged, yet comfortable vinyl handles added for easy gripping.
- Three sizes to choose from.

30" X 70" - SMALL Soft Stretcher - weight load - 1,000 pounds  
40" X 71" - MEDIUM Soft Stretcher - weight load - 1,250 pounds  
60" X 80" - LARGE Soft Stretcher - weight load - 1,500 pounds

Item # 30020R SMALL Soft Stretcher, each  
Item # 30040R MEDIUM Soft Stretcher, each  
Item # 30060R LARGE Soft Stretcher, each  
Item #30001OR Soft Stretcher Carrying Case, each



Carrying Case Included and Sold Separately



**Medkids® Baby Board**



**Systems**  
**Ferno Washington**

#676, Baby Board  
Designed for neonates and infants 2 to 14 lb, this self-contained board addresses the challenges of infants requiring cervical immobilization. It can be carried or placed on an incubator or cot. Features a pneumatic positioning device to easily provide optional thoracic elevation and stabilization. A 3-point strap design offers a wide degree of versatility. Crescent shape head-blocks secure infants in flat or upright positions.  
Dimensions: 23"L x 11"W

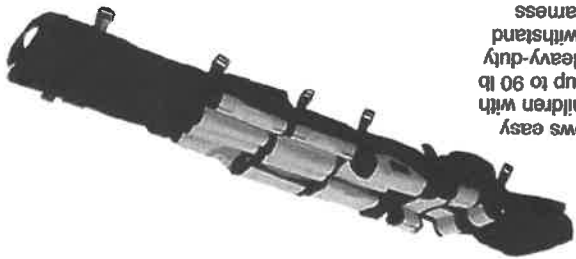
(499-2054)..... ea  
#677, Pediatric Sleeve  
For pediatric patients 12 to 60 lb, fits over 16" or 18" backboards and provides pediatric patient immobilization and optimal positioning with a unique pneumatic positioning device. Rolls up for storage.  
Dimensions: 40"L x 20"W

(499-2057)..... ea  
#678  
storage.  
vinyl, quick-release buckles, and convenient features include: lightweight and durable securely to most Ferno cots. Standard a 5-point harness, it attaches quickly and securely holds a child up to 40 lb. Using Designed for superior safety, this unit Ferno Washington Inc  
**Pediatric Restraint System**  
Model 678 Pedi-Mate

(672-7279)..... ea  
#678  
storage.  
vinyl, quick-release buckles, and convenient features include: lightweight and durable securely to most Ferno cots. Standard a 5-point harness, it attaches quickly and securely holds a child up to 40 lb. Using Designed for superior safety, this unit Ferno Washington Inc  
**Pediatric Restraint System**  
Model 678 Pedi-Mate

(672-7279)..... ea

**Pediatric Immobilization Board**



**MedSource**

This MRI-compatible board allows easy immobilization of infants and children with spinal injuries. Accommodates up to 90 lb (41 kg) and 54" (137 cm) tall. Heavy-duty nylon cover is durable and will withstand field harsh treatment. Special harness system is integral to the device and allows easy manipulation of the patient for the proper airway management and radiological procedures.

#MS-PIB-3

(700-1311)

..... ea

**Emergency Child Restraint**

**EMS Solutions, LLC**

This revolutionary restraint is designed to safely secure children during EMS transport in any emergency vehicle. Since it is not acceptable for a child to be transported unrestrained on a cot, whether it is a newborn or a teenager, the Emergency Child Restraint provides the perfect solution in all situations.

#1001-EMG\_CR, Ambulance Child Restraint System (702-0271)..... ea  
Replacement Harness..... ea

Spec: #1001-EMG\_CRSMALL, Small (702-0270) #1001-EMG\_CRMEDIUM, Medium (702-0269) #1001-EMG\_CRLARGE, Large (702-0268)



Section 6

#1001-EMG\_CR/STRAPESET, Biosafe Strap (702-0272)..... ea  
#1001-EMG\_CR/BAG, Carry Bag (702-0273)..... ea

**Pedi-Pac® Pediatric Immobilization System**

**Ferno Washington Inc**

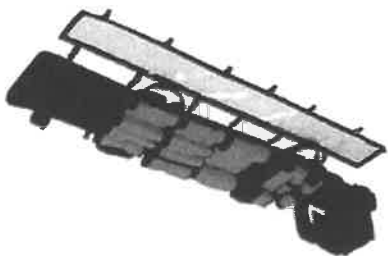
The Pedi-Pac system serves as both a spinal immobilization system and a restraint during transport. It is constructed of durable nylon over a premium-grade 1/2" plywood board. Adjustable head support provides high visibility and access to patient's ears. Color-coded strapping offers easy application and monitoring of vital cardiac and respiratory functions as well as intravenous infusion sites. Comes complete with carrying case for easy storage, and disassembles for thorough cleaning.  
#78  
(499-0853)..... ea



**LSP Pediatric Immobilization Board**

**Allied Healthcare**

A versatile system that allows immobilizing a child with spinal injuries or one only in need of restraint. Will accommodate children 10-85 lb, and 25"-54" long. Padded full-head harness adjusts to accommodate varying head size. Durable Cordura® covering reduces maintenance and provides for easy cleaning. Board is radiolucent and made of 1/2" marine-varnished plywood.  
#L484C  
(331-5336)..... ea



# Home Blood Pressure and Sphygmomanometers

Section 6



Two-Party or Self-Taking Home Blood Pressure Arm Monitor

- Easy to use for one person or with the assistance of another
- Aneroid gauge with large dial, easy-squeeze inflation bulb and detached professional stethoscope (01-5521) or attached professional stethoscope (01-5501)
- Soft cotton D-ring cuff allows for easy application
- Adult size cuff fits arm circumference: 10" - 14"
- Latex-free
- 1-year limited warranty

01-5521 Two-Party Each  
01-5501 Self-Taking Each



Provident Series Aneroid Sphygmomanometer

- Adult cuff size: 11-3/4" - 16-1/2"
- Latex
- 10-year gauge calibration and 1-year inflation system warranties
- Blue gauge
- Standard air release valve / inflation bulb

02-1101 Adult  
02-1102 Large Adult  
02-1103 Child



Heritage Series Aneroid Sphygmomanometer

- Blue gauge
- Standard air release valve / inflation bulb
- 20-year gauge calibration and 2-year inflation system warranties
- Latex or Latex-Free
- Adult cuff size: 11-3/4" - 16-1/2"

02-1071 Latex  
02-1081 Latex-Free  
02-1082 Adult  
02-1083 Large Adult  
02-1084 Child  
02-1085 Infant  
02-1085 Thigh



Sterling Series ProKit™ Aneroid Sphygmomanometer and Sprague Rappaport-Type Stethoscope

- Deluxe adjustable gauge
- Luminescent faceplate
- 30" Sprague Rappaport-Type stethoscope

02-12601 Black  
02-12602 Navy Blue  
02-12603 Royal Blue  
02-12604 Burgundy  
02-12606 Hunter Green  
02-12608 Magenta  
02-12611 Purple  
02-12613 Teal

Attaché Case Color



ProKit™ Combo Aneroid Sphygmomanometer and Aluminum Dual-Head Stethoscope

- Standard gauge, air release valve and inflation bulb
- 30" Dual head stethoscope

02-12701 Black  
02-12702 Navy Blue  
02-12703 Royal Blue  
02-12704 Burgundy  
02-12706 Hunter Green  
02-12708 Magenta  
02-12711 Purple  
02-12713 Teal

02-127 Series Color

VERIDIAN HEALTHCARE (phone) 866-736-3330 (fax) 866-480-1717 (email) orders@veridianhealthcare.com (mail) 1175 Lakeside Drive, Gurnee, IL 60031

Place Your Order Today! Call 866-736-3330

Customer Service is ready to assist you 8am-5pm CST

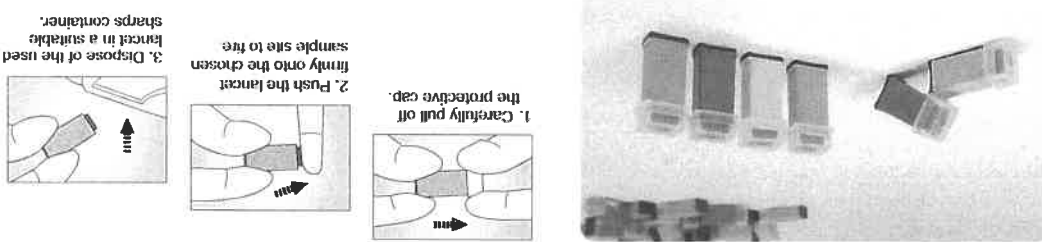
RELY ON US FOR QUALITY, SELECTION, PERFORMANCE, AND VALUE!



- Features & Benefits:**
- Needle is shielded before and after use.
  - Applicable to glucose and other in vitro tests.
  - Designed and manufactured to provide strength, protection, and value.
  - Convenient pre-loaded, pressure-activated design.
  - Comfortable ultra-sharp beveled needle.
  - Various sizes available for accurate sampling.

Item Number	Color	Size	Specification	Package
(900-7993)	Green	18g x 1.8mm	High Flow	100/Bx
(900-7981)	Gray	18g x 2.3mm	High Flow	100/Bx
(900-7983)	Yellow	21g x 1.0mm	Medium Flow	100/Bx
(900-7992)	Light Blue	21g x 1.8mm	Medium Flow	100/Bx
(900-7980)	Orange	21g x 2.2mm	Medium Flow	100/Bx
(900-7982)	Rose	21g x 2.8mm	High Flow	100/Bx
(570-0674)	White	23g x 1.8mm	Medium Flow	100/Bx
(570-0675)	Yellow	26g x 1.8mm	Low Flow	100/Bx
(900-7991)	Purple	28g x 1.8mm	Low Flow	100/Bx
(570-0676)	Turquoise	30g x 1.8mm	Low Flow	100/Bx

#19



Henry Schein Safety Lancets can be used by all trained healthcare professionals to draw capillary blood samples. These lancets are considered to be an integral component in preventing sharps-related injuries at all medical facilities.

## Pressure-Activated Safety Lancets

From A Name You Can Trust.

BRAND PRODUCTS

HENRY SCHEIN®



Section 6

**Durham County EMS Medical Supply Bid Section 1 - Airway Management**

Bid Item #	Product Description	Current Item #	UOM	Annual Usage Estimate	Part Number if different than current		
1	Nonrebreathing Oxygen Mask with Safety Vent, 7ft Tubing, Adult	020603	CS	26		4994842	\$
2	Rusch® Fixed Nasopharyngeal Airway, 14Fr	023314	BX	5		8262411	\$
3	Rusch® Fixed Nasopharyngeal Airway, 85mm x 16fr	023316	BX	5		8269254	\$
4	Rusch® Fixed Nasopharyngeal Airway, 105mm x 18fr	023318	BX	5		8269207	\$
5	Rusch® Fixed Nasopharyngeal Airway, 115mm x 20fr	023320	BX	6		8263618	\$
6	Rusch® Fixed Nasopharyngeal Airway, 125mm x 22fr	023322	BX	11		8268060	\$
7	Rusch® Fixed Nasopharyngeal Airway, 125mm x 22fr	023322	BX	5		8268060	\$
8	Rusch® Fixed Nasopharyngeal Airway, 130mm x 24fr	023324	BX	15		8263988	\$
9	Rusch® Fixed Nasopharyngeal Airway, 140mm x 26fr	023326	BX	24		8262295	\$
10	Rusch® Fixed Nasopharyngeal Airway, 140mm x 26fr	023326	BX	8		8262295	\$
11	Rusch® Fixed Nasopharyngeal Airway, 155mm x 28fr	023328	BX	19		8263864	\$
12	Rusch® Fixed Nasopharyngeal Airway, 155mm x 28fr	023328	BX	8		8263864	\$
13	Rusch® Fixed Nasopharyngeal Airway, 165mm x 30fr	023330	BX	8		8265338	\$
14	Rusch® Fixed Nasopharyngeal Airway, 170mm x 32fr	023332	BX	8		8269381	\$
15	Amsure® Ear/Ulcer Bulb Syringe, 2oz, Sterile	044-AS00502SEA	CS	1		7020505	\$
16	Rusch® Cushion Face Masks Without Valve, Neonate, Size 0	11911	BX	2		720 Ambu 000252051 sold EA \$	\$
17	Polycarbonate Cylinder Wrench	13-WR-1	PK	10		4990566 sold ea \$ .98	\$
18	Curaplex® Click Style All Brass Oxygen Regulator, CGA870, 0 to 25 LPM, 1 Barb Outlet, 2 DISS Outlets	14288	EA	15		1164408 Medsource MS-010R25	\$
19	Oxygen Regulator, CGA 870 Standard, 0 to 25lpm, with Hose Barb and 2 DISS	14363	EA	15		415203 Meret AREG8725-B2D-B	\$
20	Smart Capnoline® Plus, Oral-Nasal, 6.5ft O2 Tubing Female Connector, Adult/Intermediate, 100/box	177268	BX	68		20157 Masimo 4459 sold EA \$8	\$
21	Curaplex® Select Endotracheal Tube with Stylet, Cuffed, 9mm Size	2113-10290	BX	2		new Smiths 100/102/090	\$
22	Cuffed Endotracheal Tube with Stylette, 24fr, 6.0mm	2113-36024	BX	6		3730014 Smiths 100/102/060	\$
23	Cuffed Endotracheal Tube with Stylette, 28fr, 7.0mm	2113-37028	BX	6		3730012 Smiths 100/102/070	\$
24	Cuffed Endotracheal Tube with Stylette, 30fr, 7.5mm	2113-37530	BX	6		7005920 Smiths 100/102/075	\$
25	Cuffed Endotracheal Tube with Stylette, 34fr, 8.5mm	2113-38534	BX	10		7005921 Smiths 100/102/085	\$

26	i-gel® Supraglottic Airway, Size 1, Neonatal	2114-08201	CS	6	7006302	\$
27	i-gel® Supraglottic Airway, Size 2, Small Pediatric	2114-08202	CS	4	7006304	\$
28	i-gel® Supraglottic Airway, Size 1.5, Infant	2114-08215	CS	9	7006303	\$
29	i-gel® Supraglottic Airway, Size 2.5, Large Pediatric	2114-08225	CS	6	7006305	\$
30	i-gel® O2 Resus Pack, Size 3, Small Adult	2114-87301	CS	29	7006293	\$
31	i-gel® O2 Resus Pack, Size 4, Medium Adult	2114-87302	CS	42	7006294	\$
32	i-gel® O2 Resus Pack, Size 5, Large Adult	2114-87303	CS	12	7006292	\$
33	King Vision Video Laryngoscope Blade, Channeled, Disp, 18mm, w/White LED, Digital CMOS Camera 10ea/cs	2144-KV033	CS	8	9850011	\$
34	Curaplex® DART, No Syringe	2170-20300	CS	22	4209994	\$
35	Suction Catheter, SSCOR Ducanto Catheter®	2211-00002	CS	8	7005330	\$
36	Vacuum Tube, for use with LCSU 4 800ml	2211-10688	EA	41	4998741	\$
37	AC/DC Adapter Charger with AC Plug Kit	2223-86111	EA	10	4998746	\$
38	Salem Sump™ Dual Lumen Stomach Tube, 12fr x 48in L	2231-92912	CS	4	8900566	\$
39	Oxygen Nasal Cannula, Curved, Non-Flare, Infant	2353-13079	CS	10	4998042 Medsource MS-24212	\$
40	Double Swivel Elbow Oxygen Connector, 15M-22M/15F	2422-97000	CS	2	New	\$
41	Exel Syringe, 1ML, TB, Luer Lock, Box of 100	26050	CS	3	3377080	\$
42	Curaplex® Nasal Cannula, Pediatric	30056	CS	6	4995376 Medsource MS-24101	\$
43	Curaplex® Nasal Cannula, Clear, Adult	301-107EA	CS	20	4998458 Medsource MS-24003	\$
44	Curaplex® Suction Catheter, 8fr	36091	CS	2	4995810 Medsource MS-SC08	\$
45	Curaplex® Suction Catheter, 10fr	36092	CS	2	4995084 Medsource MS-SC10	\$
46	Curaplex® Suction Catheter, 12fr	36093	CS	2	4995327 Medsource MS-SC12	\$
47	Curaplex® Suction Catheter, 14fr	36094	CS	2	4995085 Medsource MS-SC14	\$
48	Curaplex® Suction Catheter, 18fr	36096	CS	1	4995930 Medsource MS-SC18	\$
49	Elongated Aerosol Mask without Tubing, Pediatric	411085	CS	5	1415745	\$
50	Smart Bag® MO with Cuffed Mask, Oxygen Reservoir and Tubing, Child	674-01BM3211MOEA	CS	4	4996649	\$
51	Click Style Oxygen Dial Flowmeter, 0 to 15LPM, 1/8 NPT Female Inlet Connector	715-7MFA1001	EA	15	7001401	\$
52	Cuffed Endotracheal Tube, 34fr Size	792-1-7333-85EA	BX	6	7020165 Smiths 100/100/085	\$
53	Cuffed Endotracheal Tube with Stylette, 26fr, 6.5mm	792-1-7343-65EA	BX	6	7006330 Smiths 100/102/065	\$
54	Cuffed Endotracheal Tube with Stylette, 36fr, 9.0mm	792-1-7343-90EA	BX	8	new Smiths 100/102/090	\$
55	Endotracheal Tube Introducer, Adult, 15fr x 70cm, Coude Tip	9-01212-70	PK	21	9327431	\$
56	Elongated Aerosol Mask without Tubing, Adult	A03751-1	CS	20	4999207	\$

57	Rusch® Cushion Face Masks Without Valve, Infant, Size 1	A49917	BX	3	985 Armbu 000252052 sold EA	\$
58	Argyle™ Suction Tubing with Molded Connector, 1/4in x 6ft	B490201	CS	8	4664482	\$
59	Oxygen Regulator, 0 to 25lpm, Barb and 2 DISS Power Take-offs	CRAAREG8725B2D	EA	20	1415203	\$
60	Nonrebreathing Oxygen Mask with Safety Vent, 7ft Tubing, Pediatric	D6141	CS	3	4996154	\$
61	Suction Canister, Disposable, 800cc	DY4672	CS	33	7004470	\$
62	FilterLine® H Set CO2 Sampling Line, Disposable, Adult/Pediatric	M1921A	BX	58	7022871 Medsource MS-35770	\$
63	Curaplex® Miller Laryngoscope Blade- Size 0	2145-13501	BX	1	48 Medsource MS-46420 sold EA	\$
64	Curaplex® Miller Laryngoscope Blade- Size 1	2145-13502	BX	1	9 Medsource MS-46421 sold EA	\$
65	Curaplex® Miller Laryngoscope Blade- Size 2	2145-13503	BX	1	50 Medsource MS-46422 sold EA	\$
66	Curaplex® Miller Laryngoscope Blade- Size 3	2145-13504	BX	1	51 Medsource MS-46423 sold EA	\$
67	Curaplex® Miller Laryngoscope Blade- Size 4	2145-13505	BX	1	52 Medsource MS-46424 sold EA	\$



**Durham County EMS Medical Supply Bid Section 2 - Monitor Supplies**

<b>Bid Item #</b>	<b>Product Description</b>	<b>Current Item #</b>	<b>UOM</b>	<b>Annual Usage Estimate</b>	<b>Part Number if different than current</b>	<b>Un</b>
1	Zoll Medical Multi-Function Defibrillator Pad, Leads In, Pediatric (Infant) < 10kg (22 lbs)	16380	CS	18	1127164 Henry Schein	1
2	Ambu® Bluesensor SP, 50 Pouch	230500	CS	110	9356155	2
3	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Size 9 Child, 15 to 21cm	2615-21309	EA	30	1103152	1
4	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Size 10 Small Adult, 20 to 26cm	2615-21310	EA	25	1109093	2
5	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Size 11 Adult, 25 to 34cm	2615-21311	EA	25	1103189	2
6	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Adult Long, Size 11L	2615-21311L	EA	30	4997053	2
7	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Size 12 Large Adult, 32 to 43cm	2615-21312	EA	45	1103208	2
8	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Size 13 Thigh, 40 to 55cm	2615-21313	EA	8	1104958	3
9	Rainbow® Reusable DCI Spot-Check Sensor, 3ft Cable	2712-26963	EA	10	7001273	6
10	Stat-Padz® HVP Multi-function CPR Electrodes, Adult	2742-40289	PR	496	1119986	8
11	Rainbow RC-4 Compatible Cable, 4ft L	2743-02406	EA	10	1186479	1
12	Curaplex® ECG Chart Paper, Grid, X Series, 80mm	2745-90080	CS	15	59, Leonhard Lang 18593, sold 5/pk	2
13	Kendall™ Medi-Trace® 133 Series Foam Electrodes, Pediatric, 1-1/4in Diameter Size	54133	CS	5	4990611	
14	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Size 7 Infant, 9 to 13cm	662160	EA	15	1103003	1
15	FlexiPort® Reusable Blood Pressure Cuff with 2 Tube Locking Connector, Size 8 Small Child, 12 to 16cm	662161	EA	15	1103142	1
16	Rainbow® R20 Pediatric Adhesive Sensors for Patients 10-50kg, Box of 10	MA2222	BX	23	7003297	7

**Durham County EMS Medical Supply Bid Section 3 - BVM & CPAP**

Bid Item #	Product Description	Current Item #	UOM	Annual Usage Estimate	Part Number if different than current	Unit
1	Flow-Safe CPAP Lg Adult	10-57318	BX	75	7003324	
2	Flow-Safe CPAP SM/MID	10-57319	BX	75	7003325	
3	Small Adult CPR-2 Bag with LifeSaver Manometer	10-58502	BX	160	7003402	

**Durham County EMS Medical Supply Bid Section 4 - EZ IO**

Bid Item #	Product Description	Current Item #	UOM	Annual Usage Estimate	Part Number if different than current	Unit Price
1.	EZ IO 25MM	9001-VC-005	BX	120		NO BID
2	EZ IO 45MM	9079-VC-005	BX	60		NO BID
3	EZ IO Drill	9058	BX	15		NO BID
4	EZ IO Stabilizer	9066-VC-005	BX	80		NO BID

**Durham County EMS Medical Supply Bid Section 5 - IV Supplies**

<b>Bid Item #</b>	<b>Product Description</b>	<b>Current Item #</b>	<b>UOM</b>	<b>Annual Usage Estimate</b>	<b>Part Number if different than current</b>	<b>Unit</b>
1	Curaplex® Alcohol Prep Pad, Sterile, 2 Ply, Medium	1330-85300	CS	10	5702219 Henry Schein	
2	Insyte™ Autoguard™ BC Shielded Non-winged IV Catheters w/ Blood Control Technology, 22ga x 1in L, Blue	1612-52322	CS	20	9870284	
3	Insyte™ Autoguard™ BC Shielded Non-winged IV Catheters w/ Blood Control Technology, 20ga x 1in L, Pink	1612-53320	CS	45	9870289	
4	Insyte™ Autoguard™ BC Shielded Non-winged IV Catheters w/ Blood Control Technology, 18ga x 1.16in L, Green	1612-54418	CS	30	9870296	
5	Insyte™ Autoguard™ BC Shielded Non-winged IV Catheters w/ Blood Control Technology, 16ga x 1.16in L, Gray	1612-55416	CS	8	1401602	
6	SafetyGlide™ Shielding Hypodermic Needle, 18ga x 1-1/2in	1641-91830	CS	11	8479130	
7	Curaplex® I.V. Admin Set, 15 Drop, 89in, Roll Clamp, PP Y-site, Sure-Lok Needle-free Y-Site, Attached Extension Set	1712-15830	CS	200	002562 MedSource MS-8311	
8	Curaplex® IV Extension Set, 8in, Removable Sure-Lok, Needle-Free Connect, Pinch Clamp, Rotating Male Luer-Lock	1714-31081	CS	270	5 Amsino AE3108, sold 100/c	
9	Curaplex® Tourniquet, Blue	1841-14000	CS	36	edSource MS-17301 sold 250	
10	Zin H	1860-08702	CS	5	1532993	
11	Primary Gravity IV Set with 2 ULTRASITE® Injection Site, 15 Drop, 86in L, 16ml Priming Volume	352222	CS	92	5078140	
12	Veni-Gard® TM IV Stabilization Dressing, Adult	354431	CS	6	3552411	
13	Curaplex® IV Guard IV Dressing, Breathable Foam Dressing	36002MS	CS	21	7006261, Dynarex 4609	
14	IV Flush Syringe, Normal Saline, 10 ml, Prefilled 12 cc Syringe, Sterile 100ea/bx 4bx/cs	600-10	EA	95	7000698, sold 100/bx \$33.3	0
15	Curaplex® Sharps Solo, Compact Size	64250	CS	10	7004494, Dynarex 4630	3
16	Chlorascrub Swab, 1mL, 70% Isopropyl Alcohol Pad	B10800	CS	15	6020035	1
17	Catheter-Tip Syringe with Cap, 50 to 60cc	13314	BX	3	1372504, sold 150/cs \$86.04	1
18	Omnifix® Luer Lock Tip Syringe without Needle, 10mL	1633-10010	CS	1	59, Dynarex 6990, sold 100/b	1
19	General Purpose Syringe w/ Cap, Luer Lock Tip, 3mL	1633-20003	CS	18	73, Henry Schein, sold 100/b	3
20	3-Way Stopcock, 0.26mL, Spin-lock Connector	1811-03456	CS	6	1190412	
21	IV Flush Syringe Normal Saline, 10mL Prefilled Syringe	1920-01010	CS	80	1454403	6
22	Curaplex® Infu-Stat™ Pressure Infuser, 1000mL	350310	CS	8	815 Ethox 4010H, sold 5/bx \$	1
23	Container	357500	CS	93	1002435	4

24	IV Solution, Lactated Ringers 500ML Bag	602323	CS	2	5076910	
25	IV Solution, Lactated Ringers 500ML Bag	602323	CS	1	5076910 Repeat of above	
26	Lactated Ringers, 1000ml Bag	602324X	CS	475	35, B Braun L7500, sold each	
27	General Purpose Syringe w/ Cap, Luer Lock Tip, 5 to 6mL	620230	CS	2	3371950	
28	SafetyGlide™ Shielding Hypodermic Needle, 25ga x 1in	62305916	CS	4	9878685	
29	SafetyGlide™ Shielding Hypodermic Needle, 21ga x 1-1/2in	62305917	CS	7	9879249	

**Durham County EMS Medical Supply Bid Section 6 - Misc. Supplies**

Bid Item #	Product Description	Current Item #	UOM	Annual Usage Estimat	Part Number if different than current	Unit Pr
1	PDI Super Sani-Cloth Alcohol Disposable Wipes, Large, 6in x 6in	1061-17517	CS	45	1383942	70.2
2	Curaplex® Multi-Purpose Collection Bag with Hook	1071-17367	CS	8	1375774 MedSource MS-17367	611.2
3	Curaplex® Mylar Emergency Blanket, 52in x 82in, Silver	12945	CS	4	9338389, Dukal 721, sold each \$.45	90
4	2-piece Economy Poly Strap with Plastic Side Release and Plastic Swivel Speed Clip Ends, 5ft L x 2in W, Orange	1394-OR	EA	280	7005220	4.04
5	SuperSet™ Double Swivel Catheter Mount, 22mm ID, Flip Top Cap	2422-20000	CS	4	7020235	127.8
6	G3 Breather Pack, Red	2522-00818	EA	6	7002058	253.1
7	G3 Vial Strand Holder, 4-Pack	2530-25018	EA	10	7021084	22.8
8	Curaplex® Obstetrical Kit, Sealed Standard	4440010	CS	3	902 Dick Medical 01120B, sold each	169.0
9	Disposable Obstetrical Kit	F1652BAG	EA	35	7022902, Dick Medical 01120B	4.83
10	Curaplex® Patient Transporter, 1800lb Capacity, 14 Handles	3246-12345	EA	1	7001184 MedSource MS-95202	11.11
11	TITAN II™, Black	3246-44110	CS	115	4653, DMS 306600R, sold each \$185	925.5
12	ACR Baby, w/ Straps, XS/Baby	3250-02010	EA	10	mergency Child Restraint System 100	704.7
13	Ferno KangooFix Restraint System, Neonatal	3250-74906	EA	10	7022554	683.7
14	Prosplyg™ 760 Pocket Aneroid Sphygmomanometer, Size 12 Large Adult, 34 to 50cm, Black, Case	170761	EA	15	7020307 Veridian 02-1082	5.44
15	Prosplyg™ 760 Pocket Aneroid Sphygmomanometer, Size 11 Adult, 23 to 40cm, Navy Blue, Case	170765	EA	20	7020308 Veridian 02-1081	5.24
16	Disposable Probe Covers, For ThermoScan PRO 6000 Ear Thermometer *Non-Returnable*	2733-14605	CS	8	5660557	345
17	microdot® Xtra HI/Lo Control Solutions	2762-12002	EA	50	7001131	12.98
18	microdot® Xtra Test Strip, 50 Count Bottle	2763-20050	EA	387	7001130	20.75
19	Curaplex® Safety Lancet, 21 Gauge, Green	2764-70721	CS	3	07980 Henry Schein sold 100/bx \$4.	220.3



Durham County EMS Medical Supply Bid Section 7 - Trauma Supplies

Bid Item #	Product Description	Bid Item #	Current Item #	UOM	Annual Usage Estimate	Part Number if different than current
1	Premium Cloth Adhesive Surgical Tape, 10yd L x 1in W	1	080110	CS	3	4990655 Dynaerx 3562
2	Stretch Gauze Bandage Roll, 3in W x 4.1yd L	2	082326	CS	14	2670032
3	Combine Pad, 5in L x 9in W	3	083501P	CS	1	5701470, Henry Schein
4	Sheer Strip Adhesive Bandage, Plastic, 1in x 3in	4	083602	CS	8	6142 Henry Schein, sold 100/bx \$
5	Combine Abdominal Pad, 8in x 10in	5	085810	CS	3	5701471 Henry Schein
6	Dermacea™ Gauze Sponge, 2in x 2in	6	087770	CS	9	1243015, Dukal 8500
7	Curaplex® Cloth Tape, 2 in x 10 yds	7	1110-14008	CS	7	7005974 Dynarex 3563
8	Curaplex® Cloth Tape, 3 in x 10 yds	8	1110-14009	CS	5	4990699, Dynarex 3564
9	Curaplex® Cohesive Elastic Bandage, 2in, Blue	9	1121-36571	CS	6	687, Dukal 8025DB, sold 36/bx \$1
10	Curaplex® Cohesive Elastic Bandage, 3in, Blue	10	1121-36572	CS	3	7069, Dukal 8035DB, sold 24/bx \$
11	QuikClot Combat Hemostatic Gauze, Black, 3in x 4yd	11	1214-35034	EA	200	7000709
12	SOF Extremity Tourniquet, Black	12	1220-40009	EA	170	4997818, CAT 30-0001
13	SOF® Extremity Tourniquet, Rescue Orange	13	1220-40010	EA	50	4997780, CAT 30-0023
14	Curaplex® Cold Pack, Medium, 6.69in x 6.69in	14	1431-66000	CS	18	70027, Dyanrex 4512, sold each \$
15	Curaplex® Hot Pack, Large, 6.69in x 7.5in	15	1432-67000	CS	10	1123952, Dynarex 4516
16	Gauze Sponge, 8-ply, 4in x 4in	16	276-8502PK	CS	7	1408892
17	Curaplex® Paramedic Shears, 7.25in, Black	17	2811-05524	CS	1	04481, Dynarex 4180, sold each \$
18	ActiSplint, Moldable, Rolled, Red, 4.25in x 36in	18	3014-19528	CS	4	7006163
19	Curaplex® Instant Head Immobilizer, Adult	19	3141-91010	CS	4	9 MedSource MS-91010, sold eac
20	Curaplex® Extrication Collar, Adult, 8 Settings	20	3151-03161	CS	66	9851122 Ambu 000281000
21	Curaplex® Extrication Collar, Mini, 6 Settings	21	3151-03163	CS	4	9856604 Ambu 000281106
22	AirLife® Sterile Water Solution For Irrigation, 500ml *Non-Returnable*	22	355001	CS	12	5075001
23	Sterile Water Solution For Irrigation, 500ml *Non-Returnable*	23	607113	CS	5	1454728, Nurse Assist 5290
24	SAM Pelvic Sling™ II, Orange/Blue, Small	24	665565	EA	10	4998845
25	SAM Pelvic Sling™ II, Orange/Blue, Large	25	665567	EA	10	4998846



26	Durapore™ Silk-like Surgical Tape, 10yd L x 1in W	26	7018-962	CS	6	7772892
27	Israeli Emergency Bandage, Green, 4in	27	J2704	CS	3	4999914
28	ARS® Needle Decompression Kit, 14 Gauge	28	NARZZ-0056	EA	100	4997721
29	MICRO-TOUCH® Nitrile Exam Gloves, Royal Blue, Small	29	1015-29070	CS	40	550495 Microflex Ultrasense US-2
30	MICRO-TOUCH® Nitrile Exam Gloves, Royal Blue, Medium	30	1015-29080	CS	115	558308 Microflex Ultrasense US-2
31	MICRO-TOUCH® Nitrile Exam Gloves, Royal Blue, Large	31	1015-29090	CS	65	553972 Microflex Ultrasense US-2
32	MICRO-TOUCH® Nitrile Exam Gloves, Royal Blue, X-Large	32	1015-29100	CS	10	553009 Microflex Ultrasense US-2
33	ProDefense™ Face Mask Level 2, 3-Ply, Earloops, Blue	33	1031-87529	CS	13	7799, Henry Schein, sold 50/bx \$9
34	UltraSense® Exam Gloves, Blue, Medium	34	US220M	CS	3	558303 Microflex Ultrasense US-2