

Attachment 1: Request for Limited Sources Memo Format

LIMITED SOURCES JUSTIFICATION

**ORDER >\$3,000
FAR PART 8.405-6**

2237 Transaction # or Vista Equipment Transaction #: 640-14-1-163-0004

This acquisition is conducted under the authority of the Multiple Award Schedule Program. The material or service listed in par. 3 below is sole source, therefore, consideration of the number of contractors required by FAR Subpart 8.4 – Federal Supply Schedules, is precluded for the reasons indicated below.

Restricted to the following source: Provide original manufacturer's name for material or contractor's name for service. (If a sole source manufacturer distributes via dealers, ALSO provide dealer information.)

Manufacturer/Contractor: GE Medical Systems

Manufacturer/Contractor POC & phone number: [REDACTED]

Mfr/Contractor Address: GE Medical Systems/9900 W. INNOVATION DRIVE-WAUWATOSA, WI 53226

Dealer/Rep address/phone number: [REDACTED]

☒ **The requested material or service represents the minimum requirements of the Government.**

(1) AGENCY AND CONTRACTING ACTIVITY:

Department of Veterans Affairs
VAPAHCS
LOGISTICS MANAGEMENT SERVICE (90)
3801 Miranda Ave
Palo Alto, CA 94304
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VISN:

(2) NATURE AND/OR DESCRIPTION OF ACTION BEING APPROVED:

Physiological Monitoring System for the VAPAHCS

(3) (a) A DESCRIPTION OF THE SUPPLIES OR SERVICES REQUIRED TO MEET THE AGENCY'S NEED:

The proposed contract action is for a physiological monitoring system to replace the existing system in the Emergency Department (ED). The new system will include twelve (12) bedside monitors for Emergency Room (ER) beds, six (6) bedside monitors for Observation Unit (OU) beds, central stations for the ER and OU, and two (2) transport monitors. The system must be compatible with the hospital's existing proprietary GE Unity Network and the GE MUSE Electrocardiogram (ECG) analysis/reporting system in order to enable transmission of 12-lead ECGs directly from the ED monitors to the MUSE system.

(b) ESTIMATED DOLLAR VALUE: \$475,354.00.

(c) REQUIRED DELIVERY DATE: 01/01/2014 (Desired Delivery Date)

(4) IDENTIFICATION OF THE JUSTIFICATION RATIONALE (SEE FAR 8.405-6), AND IF APPLICABLE, A DEMONSTRATION OF THE PROPOSED CONTRACTOR'S UNIQUE QUALIFICATIONS TO PROVIDE THE REQUIRED SUPPLY OR SERVICE. (CHECK ALL THAT APPLY AND COMPLETE)

☒ **Specific characteristics of the material or service that limit the availability to a sole source (unique features, function of the item, etc.). Describe in detail why only this suggested source can furnish the requirements to the exclusion of other sources.**

GE has the unique ability to interconnect via GE's proprietary networking structure to other GE monitoring systems, which are present in all other units and wards of the hospital with centralized monitoring. This allows clinicians to view patient's parameters from other areas in anticipation of transfer, or in order to provide consultation to ER staff. It also allows a seamless transfer of patients to another monitored ward. In addition, GE's monitoring system has the unique capability to connect to the hospital's ECG management system so that ECG reports can be captured and transmitted directly to Cardiologists for analysis and pushed directly to the patient's electronic record.

☒ **A patent, copyright or proprietary data limits competition. The proprietary data is: (If FAR 8.405-6(a)(2)iii before posting. Do not include specific proprietary data. Only mention the type of equipment, procedure, etc. to show that proprietary supplies or services are being procured.)**

GE uses a proprietary network communication structure that limits the capabilities to GE systems.

☐ These are "direct replacements" parts/components for existing equipment.

☒ **The material/service must be compatible in all aspects (form, fit and function) with existing systems presently installed/performing. Describe the equipment/function you have now and how the new item/service must coordinate, connect, or interface with the existing system.**

GE uses a proprietary network communication structure that limits this capability to GE systems. The VAPAHCS has lacked the beneficial capability of exporting 12-lead ECG exams directly from the ER monitors into the GE MUSE ECG analysis and storage system, which is possible only with GE monitoring systems. This allows ECGs of possible heart attack patients in the ER to be rapidly transmitted to Cardiologists for reading and diagnosis, and allows the ECG to be captured in the patient medical record. Rapid acquisition and analysis of ECGs is a key part of the American Heart Association's guidelines for standard of care for patients presenting with possible heart attacks. Without the GE system, a separate ECG machine will have to be brought in and set up, patient lead wires will have to be disconnected from the physio monitor and replaced with the ECG machine's wires, the ECG acquired and sent, and then the lead wires replaced again. The capability to avoid this time-consuming alternative process is very important in situations where minutes count.

☐ **The new work is a logical follow-on to an original Federal Supply Schedule order provided that the original order was placed in accordance with the applicable Federal Supply Schedule ordering procedures. The original order must not have been previously issued under sole source or limited source procedures.**

☐ **An urgent and compelling need exists, and following the ordering procedures would result in unacceptable delays.**

(5) DESCRIBE WHY YOU BELIEVE THE ORDER REPRESENTS THE BEST VALUE CONSISTENT WITH FAR 8.4 TO AID THE CONTRACTING OFFICER IN MAKING THIS BEST VALUE DETERMINATION:

The fixed prices for supplies and services listed under FSS Contract V797P-2239D have been determined to be fair and reasonable by GSA. Therefore, ordering activities are not required to make a separate determination of fair and reasonable pricing. The prices listed under FSS Contract V797P-2239D represent the best value (as defined in FAR 2.101) and results in the lowest overall cost alternative (considering pricing, special features, administrative costs, etc.) to meet the Government's needs.

(6) DESCRIBE THE MARKET RESEARCH CONDUCTED AMONG SCHEDULE HOLDERS AND THE RESULTS OR A STATEMENT OF THE REASON MARKET RESEARCH WAS NOT CONDUCTED:

See P02 Market Research Report.

(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION: N/A

(8) A STATEMENT OF THE ACTIONS, IF ANY, THE AGENCY MAY TAKE TO REMOVE OR OVERCOME ANY BARRIERS THAT LED TO THE RESTRICTED CONSIDERATION BEFORE ANY SUBSEQUENT ACQUISITION FOR THE SUPPLIES OR SERVICES IS MADE:

The VAPAHCS uses a formal best value process that allows for full competition when they look to replace entire monitoring systems that can stand on their own (typically almost the entire hospital's monitoring infrastructure). This is based on pre-determined technical factors and price. Previously, GE was awarded a contract for the entire monitoring system at the VAPAHCS. That is why the current inventory is GE equipment. Therefore, the ED physiological monitoring system replacement will need to interface with the current GE monitoring system installed throughout the VAPAHCS.

(9) REQUIREMENTS CERTIFICATION: I certify that the requirement outlined in this justification is a Bona Fide Need of the Department of Veterans Affairs and that the supporting data under my cognizance, which are included in the justification, are accurate and complete to the best of my knowledge. I understand that processing of this limited sources justification restricts consideration of Federal Supply Schedule contractors to fewer than the number required by FAR Subpart 8.4. *(This signature is the requestor's supervisor, fund control point official, chief of service or someone with responsibility and accountability.)*

SIGNATURE

NAME
VAPAHCS
FACILITY


TITLE

DATE

SERVICE LINE/SECTION

(10) APPROVALS IN ACCORDANCE WITH FAR 8.405-6(d):

a. CONTRACTING OFFICER'S CERTIFICATION (required): I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.



CONTRACTING OFFICER'S SIGNATURE


DATE


NAME AND TITLE


FACILITY

c. NCM/PCM/DESIGNEE: I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.


SIGNATURE


DATE


NAME


NCM/PCM