

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 #:** 583-15-1-054-0025

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: Siemens Healthcare Diagnostics  
Manufacturer/Contractor POC & phone number: 866-323-3468  
Mfr/Contractor Address: Norwood, MA 02062-4633  
Dealer/Rep address/phone number: Cathy Knutsen 714-655-3235 cathy.m.knutsen@siemens.com

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

(1) **AGENCY AND CONTRACTING ACTIVITY:** Department of Veterans Affairs  
1481 West 10th  
Indianapolis, IN

VISN: 11

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

Reagents and supplies for cost per reportable lab testing on Siemens Centaur machines at the Indianapolis VA Medical Center. The period of Performance for this task order against FSS Contract Number V797D-30175 is Three (3) Months beginning October 1, 2014, with a possible Six (6) month extension, if needed.

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

In order to continue the use of current lab equipment, the Siemens Centaur XP analyzers requires the supplies and reagents for the Cost per Reportable Result Agreement to be shipped regularly to insure the VA's ability to run crucial lab tests without interruption. The shipments need to be regular and timely considering forecasted use of the equipment and expiration dates of said supplies.

(b) **ESTIMATED DOLLAR VALUE:** \$180,000

(c) **REQUIRED DELIVERY DATE:** 10/01/2014



**(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.

☐ 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.)

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

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☒ 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.

Siemens Centaur XP machines are currently being used and are within their useful life. The Chemistry section of the laboratory currently performs immunoassay testing on Siemens Advia Centaur XP analyzers. Chemistry immunoassay analyzers perform comprehensive assay groups that include fertility, thyroid function, oncology, cardiovascular, anemia, therapeutic drug monitoring, infectious disease, adrenal function and metabolic. The only reagents that can be used with these machines are the Siemens reagents specified by the manufacturer. The reagents, calibrators, and test kits are designed specifically for each type of analyzer to perform the required testing. No other reagents are designed to be compatible to operate with the Siemens systems than those designed by the manufacturer. These are also the only approved reagents per FDA. The need for these and only these reagents constitutes a proprietary sole/limited source situation as to attempt to vary reagents for use with these machines would taint patient testing results and jeopardize patient care.

☐ 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.

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

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**(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.)*

Eric Stovall 09/15/2014  
SIGNATURE DATE  
Eric Stovall Budget Pathology & Lab 113  
NAME TITLE SERVICE LINE/SECTION  
STE-583  
FACILITY

**(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.

Kevin P. Adkins 09/19/2014  
CONTRACTING OFFICER'S SIGNATURE DATE  
Kevin P Adkins Contract Specialist Network 11 Contract Office  
NAME AND TITLE FACILITY

**HIGHER LEVEL APPROVAL: (REQUIRED \$3K and above)**

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

*(Instructions: IAW NCO 11 delegation authority, all procurements estimated to exceed \$500K must be approved by the NCM. Procurements between \$3K and \$500K are to be approved by the Supervisory Contract Specialist of the applicable Team (as the "Designee").*

Coni W. G. [Signature] 9/19/2014  
SIGNATURE DATE  
583-15-1-054-0025

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Name  
NCO 11 NCM/PCM/Designee