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|--|--|--|-------------------|------------------|---|--|--|---------------------------------------|------------------|--|
| AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT | | | BPA NO. | | 1. CONTRACT ID CODE | | PAGE 1 | | OF PAGES 5 | |
| 2. AMENDMENT/MODIFICATION NO. A00001 | | | 3. EFFECTIVE DATE | | 4. REQUISITION/PURCHASE REQ. NO. | | | 5. PROJECT NO.(If applicable) NONE | | |
| 6. ISSUED BY DEPARTMENT OF VETERANS AFFAIRS NETWORK 23 CONTRACTING OFFICE 474 45TH STREET SOUTH SUITE 202 (04-S) FARGO ND 58103 | | | CODE 04-S | | 7. ADMINISTERED BY (If other than Item 6) DEPARTMENT OF VETERANS AFFAIRS NETWORK 23 CONTRACTING OFFICE 474 45TH STREET SOUTH SUITE 202 (04-S) FARGO ND 58103 | | | CODE 04-S | | |
| 8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) To all Offerors/Bidders | | | | | (X) | | 9A. AMENDMENT OF SOLICITATION NO. VA263-16-Q-0033 | | | |
| | | | | | X | | 9B. DATED (SEE ITEM 11) 02-19-2016 | | | |
| | | | | | | | 10A. MODIFICATION OF CONTRACT/ORDER NO. | | | |
| | | | | | | | 10B. DATED (SEE ITEM 13) | | | |
| CODE | | | | | FACILITY CODE | | | | | |
| 11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS | | | | | | | | | | |
| <input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input checked="" type="checkbox"/> is extended, <input type="checkbox"/> is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning <u>1</u> copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified. 2/29/2016 5PM CST | | | | | | | | | | |
| 12. ACCOUNTING AND APPROPRIATION DATA (If required) | | | | | | | | | | |
| 13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14. | | | | | | | | | | |
| CHECK ONE A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A. | | | | | | | | | | |
| B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b). | | | | | | | | | | |
| C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF: | | | | | | | | | | |
| D. OTHER (Specify type of modification and authority) | | | | | | | | | | |
| E. IMPORTANT: Contractor <input checked="" type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return <u>1</u> copies to the issuing office. | | | | | | | | | | |
| 14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.) THE PURPOSE OF THIS AMENDMENT IS TO: 1. UPDATE THE COST/PRICE SCHEDULE - THE UPDATED SCHEDULE REMOVES THE REQUIREMENT FOR CLINS 0018 AND 1018 - THE COST/PRICE SCHEDULE FOUND IN THIS AMENDMENT HEREBY REPLACES THE COST/PRICE SCHEDULE FROM THE SOLICITATION. 2. THE RESPONSE PERIOD FOR THIS SOLICITATION IS EXTENDED AS DESCRIBED ABOVE. ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED. | | | | | | | | | | |
| Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect. | | | | | | | | | | |
| 15A. NAME AND TITLE OF SIGNER (Type or print) | | | | | 16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) JESSE R. RHEAULT NCO2315L2-5229 CONTRACTING OFFICER | | | | | |
| 15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign) | | | | 15C. DATE SIGNED | | 16B. UNITED STATES OF AMERICA BY (Signature of Contracting Officer) | | | 16C. DATE SIGNED | |

The below COST/PRICE SCHEDULE completely replaces Section B.3 from the original solicitation, VA263-16-Q-0033.

B.3 COST/PRICE SCHEDULE

BASE PERIOD: 4/1/2016 – 9/30/2016

| CLIN | Item # | Description/Part Number* | Qty | Unit | Price | Extended Amount |
|------|--------|---|-----|------|-------|-----------------|
| 0001 | 100038 | UltraTag Vial | 3 | EA | | |
| 0002 | 100043 | I-123 USP NaI 200 uCi Cap | 6 | EA | | |
| 0003 | 100146 | Heparin Sodium 1000 IU/ml 1ml Vial | 4 | EA | | |
| 0004 | 100740 | Sincalide Vial | 0 | EA | | |
| 0005 | 100917 | Aerotech I Aerosol Nebulizer | 10 | EA | | |
| 0006 | 101806 | Aerosol Kit | 0 | EA | | |
| 0007 | 101807 | Pyrophosphate Vial | 60 | EA | | |
| 0008 | 101884 | Aerosol Kit | 0 | EA | | |
| 0009 | 102279 | Ga-67 Gallium Citrate UD | 6 | EA | | |
| 0010 | 102314 | Sealed Source Inventory | 0 | EA | | |
| 0011 | 102326 | Hetastarch 6% 10 ml Vial | 4 | EA | | |
| 0012 | 102400 | In-111 Pentetreotide UD (Octreo) | 1 | EA | | |
| 0013 | 102410 | In-111 Autologous WBC Suspension | 2 | EA | | |
| 0014 | 102684 | Pyrophosphate Vial | 0 | EA | | |
| 0015 | 102765 | Sincalide Solution UD-(dose) | 0 | EA | | |
| 0016 | 102766 | Sincalide Solution UD-(per ug) | 20 | EA | | |
| 0017 | 102767 | Sincalide Vial | 0 | EA | | |
| 0018 | 102804 | SYNtrac Hdw Warranty/Maintenance | 0 | EA | - | - |
| 0019 | 102810 | SYNtrac Sfw Support/License | 6 | EA | | |
| 0020 | 102940 | Tc-99m Exametazime UD | 0 | EA | | |
| 0021 | 102943 | Tc-99m Filtered Sulfur Colloid UD | 10 | EA | | |
| 0022 | 102970 | Tc-99m Macro Aggregated Albumin UD | 10 | EA | | |
| 0023 | 102974 | Tc-99m Mebrofenin UD | 15 | EA | | |
| 0024 | 102977 | Tc-99m Medronate UD | 265 | EA | | |
| 0025 | 102980 | Tc-99m Mertiatide UD | 8 | EA | | |
| 0026 | 102982 | Tc-99m NaTcO4 UD uCi | 1 | EA | | |
| 0027 | 102983 | Tc-99m NaTcO4 MD | 64 | EA | | |
| 0028 | 102983 | Tc-99m NaTcO4 MD | 0 | EA | | |
| 0029 | 102984 | Tc-99m NaTcO4 UD mCi | 60 | EA | | |
| 0030 | 102990 | Tc-99m Pentetate UD | 10 | EA | | |
| 0031 | 102994 | Tc-99m Sestamibi UD | 600 | EA | | |
| 0032 | 103003 | Tc-99m Sulfur Colloid UD | 1 | EA | | |

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|--------------|--------|---|-----|----|--|---|
| 0033 | 103006 | Tc-99m Tetrofosmin UD | 0 | EA | | |
| 0034 | 103012 | Tc-99m Exametazime WBC's | 0 | EA | | |
| 0035 | 103080 | UltraTag Vial | 0 | EA | | |
| 0036 | 103344 | Tc-99m Cardiolite UD | 0 | EA | | |
| 0037 | 103344 | Tc-99m Cardiolite UD | 0 | EA | | |
| 0038 | 103855 | Tc-99m Filtered Sulfur Colloid (uCi) UD | 0 | EA | | |
| 0039 | 198001 | After Hours Callout | 0 | EA | | |
| 0040 | 198002 | After Hours Delivery Charge | 0 | EA | | |
| 0041 | 198009 | Stat | 10 | EA | | |
| 0042 | 199001 | Weekday Delivery 1 | 260 | EA | | |
| 0043 | 199002 | Weekday Delivery 2 | 260 | EA | | |
| 0044 | 199003 | Weekday Delivery 3 | 13 | EA | | |
| 0045 | 199004 | Weekday Delivery 4 | 3 | EA | | |
| 0046 | 199005 | Weekday Delivery 5 | 2 | EA | | |
| 0047 | 199006 | Weekend Delivery 1 | 1 | EA | | |
| 0048 | 199007 | Weekend Delivery 2 | 1 | EA | | |
| 0049 | 199008 | Weekend Delivery 3 | 1 | EA | | |
| 0050 | 103931 | Lymphoseek Study Dose | 0 | EA | | |
| 0051 | 102967 | Tc-99m Tilmanocept UD syringe | 0 | EA | | |
| 0052 | 101958 | Survey Meter Calibrations | 1 | EA | | |
| 0053 | 103098 | Wipe Test Smears | 0 | EA | | |
| 0054 | 103097 | Test Wipes with Backing | 0 | EA | | |
| 0055 | | Co-57 RFS 29x18 | 0 | EA | | |
| SUBTOTAL: \$ | | | | | | - |

OPTION YEAR 1: 10/1/2016 – 9/30/2017

| CLIN | Item # | Description/Part Number* | Qty | Unit | Price | Extended Amount |
|------|--------|------------------------------------|-----|------|-------|-----------------|
| 1001 | 100038 | UltraTag Vial | 5 | EA | | |
| 1002 | 100043 | I-123 USP NaI 200 uCi Cap | 12 | EA | | |
| 1003 | 100146 | Heparin Sodium 1000 IU/ml 1ml Vial | 8 | EA | | |
| 1004 | 100740 | Sinacalide Vial | 1 | EA | | |
| 1005 | 100917 | Aerotech I Aerosol Nebulizer | 20 | EA | | |
| 1006 | 101806 | Aerosol Kit | 1 | EA | | |
| 1007 | 101807 | Pyrophosphate Vial | 120 | EA | | |
| 1008 | 101884 | Aerosol Kit | 1 | EA | | |
| 1009 | 102279 | Ga-67 Gallium Citrate UD | 12 | EA | | |
| 1010 | 102314 | Sealed Source Inventory | 1 | EA | | |
| 1011 | 102326 | Hetastarch 6% 10 ml Vial | 8 | EA | | |
| 1012 | 102400 | In-111 Pentetateotide UD (Octreo) | 2 | EA | | |

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|------|--------|---|------|----|---|---|
| 1013 | 102410 | In-111 Autologous WBC Suspension | 3 | EA | | |
| 1014 | 102684 | Pyrophosphate Vial | 1 | EA | | |
| 1015 | 102765 | Sincalide Solution UD-(dose) | 1 | EA | | |
| 1016 | 102766 | Sincalide Solution UD-(per ug) | 40 | EA | | |
| 1017 | 102767 | Sincalide Vial | 1 | EA | | |
| 1018 | 102804 | SYNtrac Hdw Warranty/Maintenance | 0 | EA | - | - |
| 1019 | 102810 | SYNtrac Sfw Support/License | 12 | EA | | |
| 1020 | 102940 | Tc-99m Exametazime UD | 1 | EA | | |
| 1021 | 102943 | Tc-99m Filtered Sulfur Colloid UD | 20 | EA | | |
| 1022 | 102970 | Tc-99m Macro Aggregated Albumin UD | 20 | EA | | |
| 1023 | 102974 | Tc-99m Mebrofenin UD | 30 | EA | | |
| 1024 | 102977 | Tc-99m Medronate UD | 530 | EA | | |
| 1025 | 102980 | Tc-99m Mertiatide UD | 16 | EA | | |
| 1026 | 102982 | Tc-99m NaTcO4 UD uCi | 1 | EA | | |
| 1027 | 102983 | Tc-99m NaTcO4 MD | 127 | EA | | |
| 1028 | 102983 | Tc-99m NaTcO4 MD | 1 | EA | | |
| 1029 | 102984 | Tc-99m NaTcO4 UD mCi | 120 | EA | | |
| 1030 | 102990 | Tc-99m Pentetate UD | 20 | EA | | |
| 1031 | 102994 | Tc-99m Sestamibi UD | 1200 | EA | | |
| 1032 | 103003 | Tc-99m Sulfur Colloid UD | 2 | EA | | |
| 1033 | 103006 | Tc-99m Tetrofosmin UD | 1 | EA | | |
| 1034 | 103012 | Tc-99m Exametazime WBC's | 1 | EA | | |
| 1035 | 103080 | UltraTag Vial | 1 | EA | | |
| 1036 | 103344 | Tc-99m Cardiolite UD | 1 | EA | | |
| 1037 | 103344 | Tc-99m Cardiolite UD | 1 | EA | | |
| 1038 | 103855 | Tc-99m Filtered Sulfur Colloid (uCi) UD | 1 | EA | | |
| 1039 | 198001 | After Hours Callout | 1 | EA | | |
| 1040 | 198002 | After Hours Delivery Charge | 1 | EA | | |
| 1041 | 198009 | Stat | 20 | EA | | |
| 1042 | 199001 | Weekday Delivery 1 | 520 | EA | | |
| 1043 | 199002 | Weekday Delivery 2 | 520 | EA | | |
| 1044 | 199003 | Weekday Delivery 3 | 25 | EA | | |
| 1045 | 199004 | Weekday Delivery 4 | 5 | EA | | |
| 1046 | 199005 | Weekday Delivery 5 | 4 | EA | | |
| 1047 | 199006 | Weekend Delivery 1 | 1 | EA | | |
| 1048 | 199007 | Weekend Delivery 2 | 1 | EA | | |
| 1049 | 199008 | Weekend Delivery 3 | 1 | EA | | |
| 1050 | 103931 | Lymphoseek Study Dose | 1 | EA | | |
| 1051 | 102967 | Tc-99m Tilmanocept UD syringe | 1 | EA | | |
| 1052 | 101958 | Survey Meter Calibrations | 2 | EA | | |
| 1053 | 103098 | Wipe Test Smears | 1 | EA | | |
| 1054 | 103097 | Test Wipes with Backing | 1 | EA | | |

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|------|--|-----------------|---|----|----------|--|
| 1056 | | Co-57 RFS 29x18 | 1 | EA | | |
| | | | | | SUBTOTAL | |

* Any indication of trade names, or brand name specific item, is non-mandatory. If the Isotope satisfies the same clinical function, substitutions will be allowed. It is the vendors responsibility to demonstrate that the substitute isotope can satisfy the same clinical function.

TOTAL PRICE SUMMARY

| Period | Price |
|---------------|-------|
| Base Period | _____ |
| Option year 1 | _____ |
| Total | _____ |