

**JUSTIFICATION FOR SINGLE SOURCE AWARDS IAW [FAR 13.106-1](#)**  
(OVER MICRO-PURCHASE THRESHOLD(\$3.5K) BUT NOT EXCEEDING THE SAT (\$150K))

IAW [FAR13.104](#), COs must promote competition to the maximum extent practicable to obtain supplies and services from the source whose offer is the most advantageous to the Government, considering the administrative cost of the purchase. When competition is not practicable, IAW [FAR13.106-1\(b\)](#), COs solicit from a single source for purchases not exceeding the simplified acquisition threshold. COs may solicit from one source if the CO determines that the circumstances of the contract action deem only one source reasonably available (e.g., urgency, exclusive licensing agreements, brand-name or industrial mobilization). IAW [FAR13.106-3\(b\)\(3\)](#), COs are required to include additional statements ***explaining the absence of competition*** (see [13.106-1](#) for brand name purchases) if only one source is solicited and the acquisition does not exceed the simplified acquisition threshold (does not apply to an acquisition of utility services available from only one source) or supporting the award decision if other than price-related factors were considered in selecting the supplier. This template when completed can be used to document single source awards IAW [FAR13.106-3\(b\)\(3\)](#). Note: Statements such as "only known source" or "only source which can meet the required delivery date" are inadequate to support a sole source purchase.

**1. ACQUISITION PLAN ACTION ID:**

761-17-1-014-0004

**1A. PROJECT/TASK  
No.**

**1B. ESTIMATED AMOUNT:**

**2. BRIEF DESCRIPTION OF SUPPLIES OR SERVICES REQUIRED AND THE INTENDED USE:**

1. DRAINABLE POUCH, HOLLISTER  
NDC: 10075-0086-39  
UNIT: 10 per box  
QTY: 15 BOXES
2. CATHETERIZATION SET, INTERMITTENT 12FR  
NDC: 99050-7284-22  
UNIT: 20 per box  
QTY: 72 BOXES
3. DRESSING, ALLEVYN LIFE 4X4IN  
NDC: 00223-0477-99  
UNIT: 10 per box  
QTY: 180 BOXES
4. DRESSING, ALLEVYN LIFE 6 1/16 X 6 1/16IN  
NDC: 99066-8010-69  
UNIT: 10 per box  
QTY: 48 BOXES
5. SET, INFUSION ANIMAS  
NDC: 99010-0006-00  
UNIT: 10 per box  
QTY: 54 BOXES

**3. UNIQUE CHARACTERISTICS THAT LIMIT AVAILABILITY TO ONLY ONE SOURCE, WITH THE REASON NO OTHER SUPPLIES OR SERVICES CAN BE USED:**

Within the VHA brand name drugs may be prescribed by physicians when in their clinical judgment the brand name drug will provide a better therapeutic outcome for patients. Brand name items are requested when there is a clinical requirement for the item. In this case, the brand specific items are requested on the list above. If the items listed in block 2 are not received in a timely manner it could prove to be directly threatening to the life and health of the patient. The Animas products listed in block 2 aid our diabetic patients in receiving small amounts of insulin delivered continuously (24/7) through the pumps and infusion sets for normal functions of the body. All products listed in block 2 are required by, by prescription, from a physician. The physician has stated the above mentioned name brand items

are the only brands that will meet the specific needs of the patients; however, we are still competing this amongst distributors.

**4. DESCRIPTION OF MARKET RESEARCH CONDUCTED AND RESULTS OR STATEMENT WHY IT WAS NOT CONDUCTED:**

After searching NAC & GSA, there is only one available contract for the item requested. A search of the Center for Veteran Enterprise Vendor Information Pages indicates there are 77 SDVOSB or VOSB vendors which are engaged in the manufacture of pharmaceuticals. A query at the SBA Dynamic Search portal returned 949 possible small business vendors. However, these vendors are not engaged in manufacture, but are distributors for large business wholesalers. Because the Government is not allowed to do business using Wholesale Trade or Retail Trade NAICS codes, searches must be conducted using the manufacture NAICS code of 325413 In Vitro Diagnostic Substance Manufacturing.

**5. Contracting Officer's Certification:** *Purchase is approved in accordance with FAR13.106-1(b). I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.*

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **NCO:** \_\_\_\_\_