

## PAST PERFORMANCE QUESTIONNAIRE

1.0 Please complete this questionnaire in regards to providing Radiopharmaceuticals. Handwritten responses are sufficient. If you need more space than that provided, please attach additional pages. Responses will be treated as source selection sensitive information. Return the completed questionnaire NOT LATER THAN 21 June 2017 to:

**NAME:** Tammie Chaney  
**Office:** P&C Office  
**Address:** 715 S. Pear Orchard Road, Plaza 1, Room 415  
Ridgeland, MS 39157  
**Telephone:** 601-206-6963  
**Email:** tammie.chaney@va.gov

2.0 Please complete the following identifying information and past performance assessment:

- (a) Was the Contractor a prime contractor or subcontractor? (please circle one- subcontractor or prime)  
(b) Name of Contractor: \_\_\_\_\_  
(c) Contract number: \_\_\_\_\_  
(d) Dates/Period of Performance: \_\_\_\_\_  
(e) Negotiated price or cost at award: \_\_\_\_\_  
(f) Current estimated contract dollar amount: \_\_\_\_\_  
(g) Describe scope of contract and contract type: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3.0 Explanation of codes:

CODE PERFORMANCE LEVEL

**E EXCEPTIONAL** - Performance meets contractual requirements and **exceeds many** requirements to the Government's benefit. The contractual performance of the element being assessed was accomplished with few minor problems for which corrective actions taken by the contractor were highly effective. **(Note: If rated "Exceptional", please provide a brief statement of why they exceed many requirements)**

**V VERY GOOD** - Performance meets contractual requirements and **exceeds some** requirements to the Government's benefit. The contractual performance of the element being assessed was accomplished with some minor problems for which corrective actions taken by the contractor were effective. **(Note: IF rated "Very Good", please provide a brief statement of why they exceed some requirements)**

**S** SATISFACTORY - Performance **meets** contractual requirements. The contractual performance of the element being assessed may or may not contain some minor problems for which corrective actions taken by the contractor appear to be or were satisfactory.

**M** MARGINAL - Performance **does not meet some** contractual requirements. The contractual performance of the element being assessed reflects a serious problem for which the contractor has not yet identified corrective actions or the contractor's proposed actions appear only marginally effective or were not fully implemented. **(Note: If rated “Marginal”, please provide a brief statement of why they do not meet some requirements)**

**U** UNSATISFACTORY - Performance **does not meet most** contractual requirements and recovery is not likely in a timely manner. The contractual performance of the element being assessed contains serious problem(s) for which the contractor's corrective actions appear or were ineffective. **(Note: If rated “Unsatisfactory”, please provide a brief statement of why they do not meet some requirements)**

**N** NOT APPLICABLE – Unable to provide a score. Performance in this area not applicable to effort assessed.

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4.0 Circle the appropriate letter for each item on the questionnaire and provide supporting narrative.

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#### ASSESSMENT ELEMENTS

(1) Please rate the contractor's delivery. Was delivery in accordance with performance requirements and at the agreed price?

E                      V                      S                      M                      U                      N

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(2) Please rate the contractor's quality. Were there any instances where patient treatment was delayed, repeated or rescheduled due to quality of the product(s) supplied? If yes, please provide the number of occurrences and a short description of the product issue.

E                      V                      S                      M                      U                      N

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(3) Please rate the contractor's response to issues. Did the Contractor remedy issues in an effective and timely manner?

E                      V                      S                      M                      U                      N

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(4) Please rate the contractor's ability to supply the required products. At anytime were products obtained from an alternate source due to contractor availability or quality issues.

E                      V                      S                      M                      U                      N

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(5) What is your overall rating of the contractor's performance?

E                      V                      S                      M                      U                      N

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(6) Identify the contractor's overall strengths and weaknesses.

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(7) Given the choice, would you award to this contractor again? Please expand on your answer below.

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(If more comment space needed, write on and attach additional pages.)

5.0 Please provide the name, title, address, and phone number of the person completing this questionnaire.

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Phone

FAX

6.0 Thank you for your assistance in this source selection. If you have any questions, please call me or email me (information provided at top of first page).