

JUSTIFICATION FOR SINGLE SOURCE AWARDS IAW FAR 13.106-1

1. PURCHASE REQUEST OR REQUISITION NUMBER: 760-17-4-050-1247	1A. PROJECT/TASK NUMBER	1B. ESTIMATED AMOUNT: \$
2. BRIEF DESCRIPTION OF SUPPLIES OR SERVICES REQUIRED AND THE INTENDED USE: T0053 THYROID 90MG TAB NDC 00456-0460-01 T0749 THYROID 60-65MG (1 GRAIN) TAB 00456-0459-01		
3. UNIQUE CHARACTERISTICS THAT LIMIT AVAILABILITY TO ONLY ONE SOURCE, WITH THE REASON NO OTHER SUPPLIES OR SERVICES CAN BE USED: The product is being requested to fill prescriptions where the provider specifically requested this brand for the veteran. Prescriptions are entered as DAW or Dispense as Written meaning the pharmacy is not allowed to substitute any other brand for the prescription but can only fill the prescription with the brand that was ordered by the doctor.		
4. REASON THAT SUGGESTED SOURCE IS THE ONLY SOURCE, WHICH CAN PROVIDE THE SUPPLIES OR SERVICES: At this time, the physician has stated the above mentioned name brand drug is the only brands that will meet the specific needs of the patients.		