

**LIMITED SOURCES JUSTIFICATION**

**ORDER >\$150,000 - FAR PART 8.405-6**

**Acquisition Plan Action ID:** New Requirement VA26118AP3207 / 612-18-2-146-0001

- 1. Contracting Activity:** Department of Veterans Affairs, VISN 21, Northern California Medical Center
- 2. Description of Action:** This acquisition is conducted under the authority of the Multiple-Award Schedule Program ([41 U.S.C. 251](#) and [40 U.S.C. 501](#)).

Platinum Elite Body Plethysmograph Model DX w/ Breeze-suite Cardiopulmonary Diagnostics Software

- 3. Order against:** ☒ FSS Contract Number: V797P-4220B

Name of Proposed Contractor: Medical Graphics Corporation

Street Address: 350 Oak Grove Parkway

City, State, Zip: St. Paul, MN 55127

Phone: 651-484-4874

**4. Description of Supplies or Services:**

This is a medical device system for recording & measuring variation in the volume and capacity of the lungs, especially as caused by changes in blood pressure. The estimated value of the proposed action is \$361,827.50.

**(4) IDENTIFY THE AUTHORITY AND SUPPORTING RATIONALE (see [8.405-6\(a\)\(1\)\(i\)\(A\), \(B\), and \(C\)](#) or [8.405-6\(b\)](#)), AND IF APPLICABLE, A DEMONSTRATION OF THE PROPOSED CONTRACTOR'S UNIQUE QUALIFICATIONS TO PROVIDE THE REQUIRED SUPPLY OR SERVICE.**

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

☐ Only one source is capable of providing the supplies or services required at the level of quality required because the supplies or services are unique or highly specialized;

☐ In the interest of economy and efficiency, 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.



Items peculiar to one manufacturer:



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.)



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



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. *This specific system is expected to function off of an enterprise consolidated server and database that will provide the interface to the electronic health record. The server and architecture is already set up and in use at multiple VA sites in VISN21 and the new systems will function through the existing systems. No other vendor can function with user licenses to access this software and server infrastructure other than this vendor. This vendor has a fully bi-directional HL7 interface that is tested and can be expanded upon for this install. This provides greater access for clinical review and interpretation of results and provides more efficient reporting to the patient record for increased speed of care.*

**(5) DESCRIBE WHY YOU BELIEVE THE ORDER REPRESENTS THE BEST VALUE CONSISTENT WITH FAR 8.404(d) TO AID THE CONTRACTING OFFICER IN MAKING THIS BEST VALUE DETERMINATION:**

Any other equipment, license and software would not be compatible with the existing equipment.

**(6) DESCRIBE THE MARKET RESEARCH CONDUCTED AMONG SCHEDULE HOLDERS AND THE RESULTS OR A STATEMENT OF THE REASON MARKET RESEARCH WAS NOT CONDUCTED:**

*While conducting market research, 12 manufactures were located that sell Plethysmographs. However, the brand of equipment made by MGC is the only one that will meet the VA's needs because this specific system is expected to function off an enterprise consolidated server and database that will provide the interface to the electronic health record. The server and architecture is already set up and in use at multiple VA sites in VISN21 and the new systems will function through the existing systems. Site visits were arranged to different manufacturers and user polls were sent across the country to see what other VA's use and what capabilities the systems have. Only this contractor's system provides the enterprise server infrastructure, and full Vista/CPRS interfacing with the existing VA medical record that meets the clinical requirement for study reads, retrieval and archiving. ECRI was also referenced for third party equipment reviews of technical and user input.*

**(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION: NA**

**(8) A STATEMENT OF THE ACTIONS, IF ANY, THE AGENCY MAY TAKE TO REMOVE OR OVERCOME ANY BARRIERS THAT LED TO THE RESTRICTED CONSIDERATION BEFORE ANY SUBSEQUENT ACQUISITION FOR THE SUPPLIES OR SERVICES IS MADE: NA**

**(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

VHAPM Part 808.405-6 Limiting Sources

Attachment 2: Request for Limited Sources Justification Format >\$150K

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.)*

_____		2/21/18	_____
SIGNATURE		DATE	
Tocher R. Kellom	Chief Biomedical Eng.	E&FMS/Biomed	_____
NAME	TITLE	SERVICE LINE/SECTION	
VA Sacramento Medical Center			
FACILITY			

**(10) APPROVALS IN ACCORDANCE WITH THE VHAPM Part 806.3 OFOC SOP:** *This part is filled out by Contracting Staff as part of the Justification*

**a. CONTRACTING OFFICER'S CERTIFICATION (required):** I certify that the foregoing justification is accurate and complete to the best of my knowledge and belief.

_____	2/22/2018
CONTRACTING OFFICER/DESIGNEE'S SIGNATURE	DATE
Paul M Griffin, Contracting Officer	_____
NAME AND TITLE	FACILITY

**b. One Level Above the Contracting Officer (Required over\$150K but not exceeding \$700K):** I certify the justification meets requirements for other than full and open competition.

---

SIGNATURE

---

DATE

---

NAME

NCO/PCO XX Duty Title