

LIMITED SOURCES JUSTIFICATION

ORDERS >\$3,000

FAR PART 8.405-6(g)

2237 Transaction # or Vista Equipment Transaction #: 578-12-3-201-0094

This acquisition is conducted under the authority of the Multiple Award Schedule Program. The material or service listed in par.3 below is sole source, therefore, consideration of the number of contractors required by FAR Subpart 8.4-Federal Supply Schedules, is precluded for the reasons indicated below.

Restricted to the following source: Provide original manufacturer's name for material or contractor's name for service. (if a sole source manufacturer distributes via dealers, ALSO provide dealer information.)

Manufacturer/Contractor: Draeger Medical, Inc.

Manufacturer/Contractor POC & phone number: Tom Caltabiano, (215) 660-2221

Mfgr/Contractor Address: 3135 Quarry Road
Telford, PA 18969

Dealer/Rep address/phone number: N/A

☒ The requested material or service represents the minimum requirements of the Government.

(1) AGENCY AND CONTRACTING ACTIVITY:

Network Contracting Office 12

Great Lakes Acquisition Center

115 South 84th Street, Suite 101

Milwaukee, WI 53214-1476

VISN:

12

(2) NATURE AND/OR DESCRIPTION OF ACTION BEING APPROVED:

Limited Source Justification for the purchase of anesthesia machines for the Edward Hines VA Hospital in Hines, IL. This is a firm-fixed price, brand-name only procurement of Draeger Medical, Inc. medical equipment based upon equipment standardization.

(3) (a) A DESCRIPTION OF THE SUPPLIES OR SERVICES REQUIRED TO MEET THE AGENCY'S NEED:

Per VA Acquisition Regulation 808.002 - Priorities for use of Government supply sources, the requested automated medication dispensing equipment falls under mandatory Federal Supply Schedule (FSS) 65 II Medical Equipment and Supplies, contract V797P-4081B. The Edward Hines VA Hospital has a requirement for the following equipment:

Part No.	Description	Qty
OPC5280	APOLLO ANESTHESIA MACHINE - FLOOR UNIT	3
8605491	2-POSITION AUTOEXCLUSION VAP MOUNT, APOLLO	3
8603705	HIGH PRESSURE REGULATOR, O2, APOLLO	3
8603714	N2O CYLINDER YOKE, APOLLO	3
8603514	AIR CYLINDER YOKE, APOLLO	3
1860925	D VAPOR SHORT POWER CORD	3
OPC5075	ADVANCED VENTILATION	3
OPC5488	AUTOFLOW, SW OPTION, APOLLO	3
OPC5076	ADVANCED MONITORING, APOLLO	3
MK03140	SUCTION REGULATOR	3
8605361	HALOGEN LAMP, 12v, APOLLO	3
OPC0046	HALOGEN LAMP HOLDER	3
OPC5593	LARGE WRITING SURFACE, APOLLO	3
M34080	BOOM ARM	3
OPC0056	1-POSITION VAPORIZER PARK SUPPORT, APOLLO	3
OPC0053	HOSE HOOK FOR PIPED GAS, APOLLO	3
8605677	TOP PLATE WITH GCX RAIL	3

MM15741	0-DEGREE SUPPORT FOOT FOR TOP MOUNT	3
OPC0095	ISOFLURANE VAP, DRAEGER-FILL	3
OPC5417	PLUG-IN ADAPTER AUTO EXCLUSION	3
M36110	ISO DRAEGERFILL ADAPTER	3
1900062	PISTON PREFERRED PROMO-AUTOFLOW AUTOFLOW PROMO - REVERSES CHARGE FOR #OPC5488	1
A45SM-4B	CAST-R-GARD, SMALL, SET OF 4 LIGHT BLUE	3
UL6-15	OUTLET STRIP 15 FOOT CORD	3
HOSE-O2	HOSE ASSEMBLY, OXYGEN, 12 FOOT	3
HOSE-N2O	HOSE ASSEMBLY, N2O, 12 FOOT	3
HOSE-AIR	HOSE ASSEMBLY, AIR, 12 FOOT	3
HOSE-EVAC	HOSE ASSEMBLY, EVACUATION, 14 FOOT	3
HOSE-VAC	HOSE ASSEMBLY, VACUUM, 14 FOOT	3

(b) ESTIMATED DOLLAR VALUE: \$ 191,612.49

(c) REQUIRED DELIVERY DATE: August 2012

(4) IDENTIFICATION OF THE JUSTIFICATION RATIONALE (SEE FAR 8.405-6), AND IF APPLICABLE, A DEMONSTRATION OF THE PROPOSED CONTRACTOR'S UNIQUE QUALIFICATIONS TO PROVIDE THE REQUIRED SUPPLY OR SERVICE. (CHECK ALL THAT APPLY AND COMPLETE)



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.

Standardization of equipment exactly as now used, or is similar in use, is a matter of patient safety and cost effectiveness. If multiple different manufacturers of endoscopy equipment are in use, clinical staff must be proficient in the use of all different systems. Problems can and do occur when different systems are in use within the same medical center. In order for the system to function, all parts of the system are designed to work together and it is imperative that purchased equipment will fit properly

into the current medication management system and workflow of clinical staff. Standardization of this equipment ultimately reduces cost of the acquisition and maintenance.

The Edward Hines VA Medical Center uses Draeger Medical anesthesia machines. This procurement of additional Draeger Medical equipment that is the same as the existing fleet of anesthesia machines equipment meets standardization and patient safety initiatives.

(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.

The requested equipment is on mandatory supply schedule 65 II A. Per FAR 8.404 – Use of Federal Supply Schedules, pricing has already been determined to be fair and reasonable.

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

A search of the NAC and GSA online product catalogs indicates there is only one source for the requested equipment, the manufacturer Draeger Medical.

(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION:


None.

The purchase of the 900T-S Auto Vector OR Pad is supported by VA patient safety initiatives.

(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:

None.

(9) REQUIREMENTS CERTIFICATION: I certify that the requirement outlined in this justification is a bonfide need of the Department of Veterans Affairs and that the supporting data under my cognizance, which are 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.)

 SIGNATURE	<u>8-3-12</u> DATE
<u>James Evans-John</u> NAME	<u>Program Specialist</u> TITLE
<u>HWS</u> FACILITY	<u>Surgery</u> SERVICE LINE/SECTION

(10) APPROVALS IN ACCORDANCE WITH FAR 8.405-6(h):

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


CONTRACTING OFFICER'S SIGNATURE

1 Aug 2012
DATE

Matthew G. Wright
NAME AND TITLE

GLAC
FACILITY

HIGHER LEVEL APPROVAL (For orders over \$500,000): ☐ REQUIRED ☒ NOT REQUIRED

b. NCM/or Designee : I certify the justification meets requirements for restricting consideration of Federal Supply Schedule contractors to fewer than the number of required by FAR Subpart 8.4.

Christi Hauge
NAME

8/3/2012
DATE

VISN 12 NCM