

LIMITED SOURCES JUSTIFICATION

ORDERS >\$3,000

FAR PART 8.405-6(g)

2237 Transaction # or Vista Equipment Transaction #: 578-12-4-969-0365 & 578-12-3-969-0290

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: Heidelberg Engineering, Inc.

Manufacturer/Contractor POC & phone number: Regina Green, 760-536-7000

Mfgr/Contractor Address: 1808 Aston Ave. Ste 130
Carlsbad, CA 92008-7367

Dealer/Rep address/phone number: L1 Enterprises, Inc., Christian Toby Calvo, 443-927-7277

340 W Patrick St.
Frederick, MD 21701-4887

☒ 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 St. Suite 101

Milwaukee, WI 53214-1476

VISN:

12

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

Limited Sources Justification for the purchase of highly specialized ophthalmologic diagnostic imaging equipment for the Edward Hines VA Hospital and it's Community-Based Outpatient Clinic in Joliet, IL. This is a firm-fixed price, brand-name only procurement of Heidelberg Engineering spectral-domain OCT equipment.

(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-4176B. The Edward Hines VA Hospital has a requirement for the following equipment:

Part No.	Description	Qty
0226-HRAOCT	SPECTRALIS TRACKING SYSTEM-HRA+OCT(6 MODE)	2
0238-233	HEYEX NETWORK LICENSE-5 PK	2
0226-DICOM-VII	SPECTRALIS SOFTWARE	2
0238-152	WIDE FIELD OBJECTIVE-55 DEGREE	2

(b) ESTIMATED DOLLAR VALUE: \$305,744.68

(c) REQUIRED DELIVERY DATE: September 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)

- ☒ Specific characteristics of the material or service that limit the availability to a sole source (unique feature, function of the item, etc.). Describe in detail why only this suggested source can furnish the requirements to the exclusion of other sources.

The requested ophthalmologic diagnostic imaging equipment is the only spectral-domain OCT imaging system on mandatory 65 II A Federal Supply Schedule to incorporate all of the following, required features:

Active eye tracking – actively follows the patient's eye during the scan, minimizing motion artifacts and allowing targeted OCT scan placement.

AutoRescan – a baseline image is selected, and the follow-up scan is automatically placed in precisely the same location.

Heidelberg Noise Reduction – combines multiple scans taken at the same location and eliminates noise from the image.

Six imaging modes – infrared, red-free, BluePeak autofluorescence, fluorescein angiography, ICG angiography, and spectral-domain optical coherence tomography.

Nine simultaneous imaging options – ICGA + IR, RF + IR, FA+ IR, FA + ICGA, IR + OCT, RF + OCT, BluePeak + OCT, FA + OCT, and ICGA +OCT.

Four separate light sources at the following wavelengths – 870 nm SLD for SD-OCT, 488 nm OPS laser, 790 nm laser diode, 820 nm laser diode.

Scan speed – 40,000 A-scans per second.

Axial resolution – 7 micron (in tissue).

Transverse resolution – 14 micron (in tissue).

Pupil size requirement - ≥ 2.5 mm.

Movie image capture: single frame and high-speed modes.

Wide field imaging – up to 150 degrees

Field of view – 15 degrees – 55 degrees single fundus images.

Monochromatic stereo imaging

(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. Given the comorbidities of the veteran patient population, this equipment's multi-modality system with eye tracking functionality is desirable. The simultaneous capture of two modalities will allow for decreased patient wait times in the Eye Clinic and the small footprint of the equipment will mitigate space issues.

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

The End-User has reviewed and assessed available products via professional journals, professional contacts, and vendors at the American Academy of Ophthalmology. It has been determined that this system is the only one currently available with a multi-modality imaging system and eye tracking.

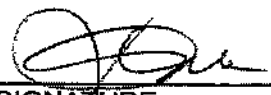
(7) ANY OTHER FACTS SUPPORTING THE JUSTIFICATION:

None.

(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

8-24-12
DATE

James Evans-John
NAME

Program Specialist
TITLE

Surgery Service
SERVICE LINE/SECTION

Hines VAMC
FACILITY

(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

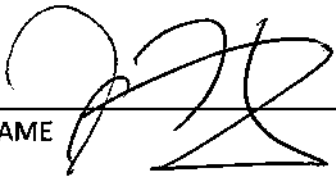
24 Aug 2012
DATE

Matthew G. Wright, CD
NAME AND TITLE

GLAR
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.


NAME
VISN 12 NCM

8/29/12
DATE