

State of West Virginia Department of Administration Charleston, WV 25305-0130 JAN 27 2009 Purchasing Division

Request for Quotation

ROBERTA WAGNER <u> 304 - 558 - 0067</u>

*709064353

HELENA LABORATORIES INC

PO BOX 752

1530 LINDBERGH DR

BEAUMONT TX 77704-0752

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV

24801

F-10-10-10-10-10-10-10-10-10-10-10-10-10-	er		<u> </u>			
DATE PRI		TERMS OF SALE	SHIP	VIA	F.O.B.	FREIGHTTERMS
01/21/ BID OPENING DATE	2009					
LINE	QUANTITY	L9/2009 _{UOP} ¢	AT		PENING TIME	-01;30PM
£.// 4 /2	GOAN III	N N	O ITEM NU	JMBER	UNIT PRICE	AMOUNT
		i l	, , ,			080
001		EA 2	193-12			TSUPPLY
	FULLY AUTO	- , ,	TOLOGY ANAL	YZERS		70.04
	R	EQUEST FOR	QUOTATION			
	COULTER L LABORATORY CONTRACT T	H 500 HEMA AT WELCH O PURCHASE LOGY ANALY	TOLOGY SYST COMMUNITY H	EMS OR EQ OSPITAL A ONSUMABLE	OLOGY ANALYZE UAL), FOR THE ND AN OPEN EN S FOR USE WIT ATTACHED	ID I
1	E-BID OF	WEH90093				
1			CONTRACT WI		A ONE IEAR	2009 JAN 30 AM 9: 29 W PURCHASING
I	XHIBIT 3			,		DIVISION
1	IFE OF CO	NTRACT:	THIS CONTRAC	CT BECOME:	S EFFECTIVE O	N
				4		
IGNATURE V	- 4	SEI	REVERSE SIDE FOR T	ERMS AND CONDI		ATE.
SKMMI	his Alex		241		31-50-03	1- Z7-09
Bid CI	1 V L	FEIN 74-1-	18734		· ·	IGES TO BE NOTED ABOVE
	EN RESPONDI			ADDRESS IN	SPACE ABOVE LAB	FLED 'VENDOR'

GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid
- 3. All quotations are governed by the West Virginia Code and the Legislative Rules of the Purchasing Division
- 4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee
- 5. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.
- 6. Payment may only be made after the delivery and acceptance of goods or services.
- 7. Interest may be paid for late payment in accordance with the West Virginia Code
- 8. Vendor preference will be granted upon written request in accordance with the West Virginia Code
- 9. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 11. The laws of the State of West Virginia and the Legislative Rules of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract
- 12. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties
- 13. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, this Contract may be deemed null and void, and terminated without further order.
- 14. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site (http://www.state.wv.us/admin/purchase/vrc/hipaa.htm) is hereby made part of the agreement. Provided that, the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health information (45 CFR §160.103) to the vendor.
- 15. WEST VIRGINIA ALCOHOL & DRUG-FREE WORKPLACE ACT: If this Contract constitutes a public improvement construction contract as set forth in Article 1D, Chapter 21 of the West Virginia Code ("The West Virginia Alcohol and Drug-Free Workplace Act"), then the following language shall hereby become part of this Contract: "The contractor and its subcontractors shall implement and maintain a written drug-free workplace policy in compliance with the West Virginia Alcohol and Drug-Free Workplace Act, as set forth in Article 1D, Chapter 21 of the West Virginia Code. The contractor and its subcontractors shall provide a sworn statement in writing, under the penalties of perjury, that they maintain a valid drug-free work place policy in compliance with the West Virginia and Drug-Free Workplace Act. It is understood and agreed that this Contract shall be cancelled by the awarding authority if the Contractor: 1) Fails to implement its drug-free workplace policy; 2) Fails to provide information regarding implementation of the contractor's drug-free workplace policy at the request of the public authority; or 3) Provides to the public authority false information regarding the contractor's drug-free workplace policy."

INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division.
- 2. SPECIFICATIONS: Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as EQUAL to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- 3. Complete all sections of the quotation form.
- 4. Unit prices shall prevail in case of discrepancy.
- 5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- **6. BID SUBMISSION:** All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130



State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER WEH90114 PAGE

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER <u> 304-558-0067</u>

*709064353 800-231-5663 HELENA LABORATORIES INC PO BOX 752 1530 LINDBERGH DR BEAUMONT TX 77704-0752

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

þ 454 MCDOWELL STREET WELCH, WV 24801

PAIET	RINTED	IER	MS OF SAL	E	SHIP	/IA	F.O.B	FREIGHT TERMS
01/2	1/2009							
BID OPENING D	AIE: O	2/19/2	2009	Basasana anan-	No. 100 Comments of the control of t	BID O	PENING TIME	.01:30PM
LINE	QUAN	ITITY	UOP	CAT NO	ITEM NUI	VBER	UNIT PRICE	AMOUNT
	(1) YEA AS IS N ORIGINA NOT EXC TIME" T REASON WRITTEN UNLESS	R OR UECESSAL CONTEED TWO CONTEED TWO CONTECT	NTIL RY TO RACT. ELVE DOR N IVING	ANI SUCH OBTA THE (12) IAY TE THE	"REASONAE IN A NEW "REASONA MONTHS RMINATE T DIRECTOR ONS ARE S	CONTRACTOR TO THE CONTRACTOR TO THE CONTRACTOR CONTRACTOR THE CONTRACTOR TO THE CONTRACTOR THE C	ERIOD OF ONE " THEREAFTER T OR RENEW THE E" PERIOD SHAI THIS "REASONAE TRACT FOR ANY HASING 30 DAYS	: .L :LE
	IN THIS PRICING CONTRAC	CONTR SET H	ACT D EREIN	OCUME ARE	NT, THE I FIRM FOR	ERMS, de	ONDITIONS AND E OF THE	
	WRITTEN SUBMITT DAYS PR BE IN A	CONSE ED TO IOR TO CCORDA L CONT	NT OF THE D THE NCE W RACT	THE IRECT EXPIR ITH T	SPENDING OR OF PUR ATION DAT HE TERMS	UNIT AND CHASING E. SUCI AND CONI	PON THE MUTUAL D VENDOR, THIRTY (30) H RENEWAL SHAL DITIONS OF THE TO TWO (2) ONE	L
	RIGHT TO NOTICE ' SUPPLIE	O CANCI FO THE D ARE	EL TH VEND OF AN	IS CO: OR IF INFE:	NTRACT IM THE COMM RIOR QUAL	MEDIATEI ODITIES ITY OR I	G RESERVES THE LY UPON WRITTE AND/OR SERVIC DO NOT CONFORM NTRACT HEREIN	N ES
	AUTHORI: MARKET, ESTIMATI IMMEDIA: CAUSES	ZE A SI WITHOU E, ITEN FE DELI (INCLUI ON OR /	PENDI UT TH MS SP IVERY DING 1	NG UN E FIL ECIFI IN EI BUT NO	IT TO PUR ING OF A ED ON THI MERGENCIE OT LIMITE	CHASE ON REQUISIT S CONTRA S DUE TO D TO DEI CREASE I	O UNFORESEEN LAYS IN TRANS- IN THE VOLUME	
SIGNATURE						ELEPHONE		TE .
		· · · · · · · · · · · · · · · · · · ·						
TITLE		FEIN	N			-	ADDRESS CHAN	GES TO BE NOTED ABOVE
1.6	UEN DEODO	NIDINIO T		11.10=0=			SDACE ADOVE LAD	



State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

REMPO114

PAGE

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER

*709064353 800-231-5663 HELENA LABORATORIES INC PO BOX 752 1530 LINDBERGH DR BEAUMONT TX 77704-0752

HEALTH AND HUMAN RESOURCES
WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV 24801 304

DATE PRINTED	TERMS OF SALE	SHIP VIA	FO.B	FREIGHT TERMS
01/21/2009 BID OPENING DATE:				
BID OPENING DATE:	02/19/2009	BID OF	PENING TIME 01	;30PM
LINE QUAI	NTITY UOP CAT	ITEM NUMBER	UNIT PRICE	AMOUNT
l l				
		S LISTED IN THE REC		
		BASED ON ESTIMATES		
THE STA	TE SPENDING UN	T IT IS UNDERSTO	OOD AND AGREED	
		LL COVER THE QUANTI		
		OURING THE TERM OF THAN THE QUANTITIES		
VALUE 111EF	C MORE OR LESS	THAN THE QUANTITIES	SHOWN,	
ORDERTN	IG PROCEDITRE: SI	PENDING UNIT(S) SHA	AT.T. TOCITE A	
WRITTEN	I STATE CONTRACT	CORDER (FORM NUMBE	TD WTV-39) TO	
		TIES COVERED BY TH		
THE ORI	GINAL COPY OF	THE WV-39 SHALL BE	MAILED TO THE	
		ON FOR SHIPMENT, A		
MAILED	TO THE PURCHAS:	ING DIVISION, AND A	THIRD COPY	
	D BY THE SPEND			
BANKRUP	TCY: IN THE EV	PENT THE VENDOR/CON	TRACTOR FILES	
FOR BAN	KRUPTCY PROTECT	CION, THIS CONTRACT	' IS AUTOMATI-	1
	IULL AND VOID, A	AND IS TERMINATED W	ITHOUT FURTHER	
ØRDER .				
ם יו די יינים יינים יינים	MS AND CONDITETO	NS CONTAINED IN TH	TO COMBINATE	
SHALL S	TIDEBSEDE ANY AN	D ALL SUBSEQUENT T	ITO CONTRACT	
CONDITT	ONS WHICH MAY A	PPEAR ON ANY ATTAC	HEU DEINAEU	
DOCUMEN	TS SUCH AS PRIC	E LISTS, ORDER FOR	MS. SALES	
AGREEME	NTS OR MAINTENA	NCE AGREEMENTS, IN	CLUDING ANY	[
‡ LECTRO	NIC MEDIUM SUCH	AS CD-ROM.		
REV. 04	/11/2001			
	TG			
INQUIRI	1 1		TIGHT OF A	
		BE ACCEPTED THRO		
4.7.3 こし、	D ON UZ/USAZUUS	QUESTIONS MAY BE IN ORDER TO ASSU	SENT VIA USPS,	
		ANTAGE, NO SUBSTAN		
		Y. IF POSSIBLE, E		
	SEER	EVERSE SIDE FOR TERMS AND CONDI	TIONS	1
RIGNATURE		TELEPHONE	DATE	
ITLE	FEIN	<u> </u>	ADDRESS CHANGES	TO BE NOTED ABOVE
			ADDRESS CHANGES	TO BE NOTED ABOVE



*709064353

PO BOX 752

BEAUMONT TX

1530 LINDBERGH DR

HELENA LABORATORIES INC

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

77704-0752

800-231-5663

Request for Quotation

RFQ NUMBER WEH90114 4

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER <u> 304 - 558 - 0067</u>

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV

24801 304-436-8710

DATE PRINTED TERMS OF SALE SHIP VIA FOB FREIGHT TERMS 01/21/2009 BID OPENING DATE: 02/19/2009 BID OPENING TIME $01 \cdot 30PM$ CAT LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT ARE PREFERRED ADDRESS INQUIRIES TO: ROBERTA WAGNER DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION 2019 Washington street/ EAST CHARLESTON, WV 25311 FAX: 304-558-4115 E-MAIL: ROBERTA A WAGNER@WV GOV PLEASE NOTE: THE PRICE ADJUSTMENT IS ONLY APPLICABLE TO THE REAGENTS/CONSUMABLES. EXHIBIT 6 PRICE ADJUSTMENT PROVISION: THE STATE OF WEST VIRGINIA WILL CONSIDER BIDS THAT CONTAIN PROVISIONS FOR PRICE ADJUSTMENTS PRIOR TO THE ORIGINAL EXPIRATION OF THE CONTRACT, PROVIDED THAT SUCH PRICE ADJUSTMENT COVERS BOTH UPWARD AND DOWNWARD MOVEMENT OF THE COMMODITY PRICE, AND THAT ADJUSTMENT IS BASED ON THE "PASS THROUGH" INCREASE OR DECREASE OF RAW MATERIALS AND OR LABOR, WHICH MAKE UP ALL OR A SUBSTANTIAL PART OF A PRODUCT. ADJUSTMENTS ARE TO BE BASED UPON AN ACTUAL DOLLAR FIGURE, NOT A PERCENTAGE ALL PRICE ADJUSTMENT REQUESTS MUST BE SUBSTANTIATED IN A MANNER ACCEPTABLE TO THE DIRECTOR PURCHASING, E.G. GOVERNMENTAL BENCH MARKS, GENERAL MARKET INCREASE, PUBLISHED PRICE LISTS. SUCH REQUESTS FOR AND INCREASE \$HOULD BE RECEIVED IN WRITING BY THE DIRECTOR OF PURCHASING AT LEAST 30 DAYS IN ADVANCE OF THE EFFECTIVE DATE OF THE INCREASE. ANY TIME THE VENDOR REQUESTS A THE RICE ADJUSTMENT PURCHASING DIVISION MAY EITHER SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE DATE TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
WEH90114

PAGE 5

ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 3.04-558-0067

ØH-a

*709064353 800-231-5663 HELENA LABORATORIES INC PO BOX 752

1530 LINDBERGH DR BEAUMONT TX 77704-0752

† 454 MCDOWELL STREET WELCH, WV

HEALTH AND HUMAN RESOURCES

WELCH COMMUNITY HOSPITAL

24801

DATE PRINT	ED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/21/2	009				
BID OPENING DATE:	02/19		BID	PENING TIME 01	:30PM
LINE	QUANTITY	UOP CAT	ITEM NUMBER	UNIT PRICE	AMOUNT
A	CCORDINGLY		MENT AND AMEND THE ADUSTMENT IN		
I F	IRM FOR LI	RRED THAT THE	HE PRICES ON THIS INTRACT, AS INDIC PAINED HEREIN, NO	ATED IN THE LIFE	
Д. Р.	IFE OF CON' ARAGRAPHS : REFERRED TI	TRACT, HE MU LISTED BELOV	JARANTEE A FIRM E JST INDICATE ONE J. FAILURE TO QU IND THE VENDOR TO JTRACT.	OF THE ALIFY THE	
A	LTERNATE TI	ERMS:		,	
	CONTRA	. DAYS AFTE	S CONTRACT WILL R THE EFFECTIVE LL REMAIN FIRM LINIMUM OF	DATE OF THE AFTER EACH PRICE	
a de la companya de	FOR THE	E LENGTH OF	T AGREE TO MAINT THE CONTRACT BUT AS FOLLOWS:	AIN A FIRM PRICE OFFERS AN	
70 g			9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
14. 14.	HE ACCEPTAE NTENDED TO	BLE LEVEL OF REFLECT A P BRAND OR VEN	CATIONS NAMED HE QUALITY ONLY AN REFERENCE OR FAV DOR. VENDORS WH ERSESIDE FOR TERMS AND CON	D ARE NOT OR ANY O ARE BIDDING	
SIGNATURE		V-S-FILV	TELEPHONE	DATE	
TITLE	·	FEIN		ADDRESS CHANGES	TO BE NOTED ABOVE
				<u> </u>	



*709064353

PO BOX 752 N 1530 LINDBER BEAUMONT TX

1530 LINDBERGH DR

HELENA LABORATORIES INC

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

77704-0752

800-231-5663

Request for Quotation

RFO NUMBER WEH90114 PAGE 6

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER

304-558-0067 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

> 454 MCDOWELL STREET WELCH, WV

> > 24801

DATE PRINTED TERMS OF SALE SHIP VIA	FOB FREIGHTTERMS
01/21/2009	
	PENING TIME 01:30PM
LINE QUANTITY UOP CAI ITEM NUMBER	UNIT PRICE AMOUNT
ALTERNATES SHOULD SO STATE AND INCLUDE P LITERATURE AND SPECIFICATIONS. FAILURE INFORMATION FOR ANY ALTERNATES MAY BE GR REJECTION OF THE BID. THE STATE RESERVE TO WAIVE MINOR IRREGULARITIES IN BIDS OR IN ACCORDANCE WITH SECTION 148-1-4(F) OF VIRGINIA LEGISLATIVE RULES AND REGULATIO	TO PROVIDE ROUNDS FOR ES THE RIGHT R SPECIFICATIONS F THE WEST
PURCHASING CARD ACCEPTANCE: THE STATE OF CURRENTLY UTILIZES A VISA PURCHASING CARTS ISSUED THROUGH A BANK. THE SUCCESSFUR MUST ACCEPT THE STATE OF WEST VIRGINIA VICARD FOR PAYMENT OF ALL ORDERS PLACED BY AGENCY AS A CONDITION OF AWARD.	RD PROGRAM WHICH UL VENDOR VISA PURCHASING
NOTICE A SIGNED BID MUST BE SUBMITTED TO:	
DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION BUILDING 15 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25305-0130	
PLEASE NOTE: A CONVENIENCE COPY WOULD BE	APPRECIATED .
THE BID SHOULD CONTAIN THIS INFORMATION OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERALED BID	DERED:
SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE	TIONS DATE
TITLE IFEIN	
WHEN RESPONDING TO BEO, INSERT NAME AND ADDRESS IN	ADDRESS CHANGES TO BE NOTED ABOVE



*709064353

PO BOX 752

BEAUMONT TX

1530 LINDBERGH DR

HELENA LABORATORIES INC

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

77704-0752

800-231-5663

Request for Quotation

RFQ NUMBER WEH90114 PAGE

ROBERTA WAGNER <u> 304 - 558 - 0067</u>

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV

24801 304-436-8710

ADDRESS CORRESPONDENCE TO ATTENTION OF

DATE PRINTED	TERMS OF	SALE S	HIP VIA	FO:B	FREIGHT TERMS
01/21/2009 BID OPENING DATE:	<u> </u>				
	02/19/2009 ANTITY UOP	CAT			·30PM
LINE QU	ANTITY UOP	NO. ITEM	NUMBER	UNITPRICE	AMOUNT
BUYER:		RW/FILE	22		
RFO N	0 :	\wedge	14	. = = = = = = = = = = = = = = = = = = =	
BID OP	ENING PATE	:02/19/2	2009		
TITO OD	ENTAIC STATE	1.20 7			
BID OP.	ENTING TIME	:1:30 PM	/		
			ļ		
<u> </u>			ľ		
		FAX NUMBER IN EGARDING YOUR		S NECESSARY	
	IACI IOU KI	SGARDING TOOK	BID:		
- -	-	·			
dorma er					
CONTAC.	r Person (1	PLEASE PRINT C	CLEARLY):		
		·			
	į				
002	J́B	193-12]		
	1		<u> 1</u>		
OPEN EI	ND CONTRACT	TO PROVIDE R	EAGENTS/CO	NSUMABLES	
*****	TUTC TO T	HE END OF RFQ	. EITHOOTIA	4	
	1112 12 1	TE END OF REQ	WEH9UIL	4 ***** TOTAL:	
		SEE REVERSE SIDE FO	H. TERMS AND CONDI	TIONS	
RIGNATURE			TELEPHONE	DATE	
ITLE	FEIN			ADDRESS CHANGES	TO BE NOTED ABOVE
				ADDITES CHARGES	TO DE NOTED ABOVE

REQUEST FOR QUOTATION

Department of Health and Human Resources Welch Community Hospital RFQ #WEH90114

GENERAL INFORMATION

Purpose:

The Acquisition and Contract Administration Section of the Purchasing Division "State" for the Department of Health and Human Resources, Bureau for Behavioral Health Facilities, Welch Community Hospital, "Agency" is soliciting Quotations to purchase two (2) new fully automated hematology analyzers, Coulter LH 500 Hematology System or equal, for the Laboratory at Welch Community Hospital and to purchase reagents/consumables for the hematology analyzer systems.

Project:

The mission or purpose of this project is to purchase two (2) new hematology analyzers, Coulter LH 500 Hematology System or equal, for the laboratory at Welch Community Hospital as well as the purchase of necessary reagents/consumables to be used as needed with the hematology analyzers purchased.

OPERATING ENVIRONMENT

Location

Facility is located in McDowell County at Welch Community Hospital, 454 McDowell Street, Welch WV 24801

Background:

Welch Community Hospital is a 124 bed hospital, 59 of which are Long Term care beds. Acute care beds include: 8 Intensive care beds; 2 pediatric beds; 10 obstetrical beds and 45 medical/surgical beds. The hospital serves the counties of McDowell, Wyoming and Mingo with a total market population of about 83,000.

The following numbers represent the typical utilization encountered by the outpatient service area of Welch Community Hospital for the 2007 fiscal year:

Emergency Room Patients – 10,441 Observation Visits – 542 Clinic Patients – 25,524 Surgeries – 343 Deliveries – 78 Laboratory Tests – 771,015 Radiology – 15,063 CAT Scans – 2,529 Ultrasound – 1,869 Mammography – 633

Respiratory Tests – 21,402

Electrocardiograms – 4,231

Admissions – 974

Long Term Card ADC (48 Patients per day) – 94%

Overall ADC (60 Patients per day) – 66%

Total Patient Days (17,514 Long Term Care and 4,496 Acute Care Days) - 22010

Outpatient Services Provided Are:

Primary Care and Family Practice in a Certified Rural Health Setting

Pediatric Clinic

Newborn Care

Internal Medicine

Surgery

Emergency Room Services

Radiology Services Including:

Diagnostic

CAT Scan

Ultrasound

Mammography

EKG, Cardiac Doppler Studies, Stress Testing and Respiratory Therapy Services

Laboratory Services

PROCUREMENT SPECIFICATIONS

General Requirements

The purpose of this project is to purchase two (2) new fully automated hematology analyzers, Coulter LH 500 Hematology System or equal, and reagent/consumables for Welch Community Hospital.

Scope of Work:

The vendor shall provide hematology analyzer equipment and reagent/consumables as needed for the Laboratory at Welch Community Hospital. Hematology analyzer equipment will include computer, monitor, keyboard, and laser printer.

- 1 The vendor will ensure that a local engineer/technician is available to provide service within 12 hours or less of receiving a service call during normal business hours 8:00 am to 5:00 pm, 24 hours or less during all other hours of operation, including weekends and holidays. Also, Technical support must be available via telephone 24 hours a day/7 days a week to troubleshoot problems and/or answer staff questions.
- 2. Reagents and consumables will be shipped as requested within six (6) days of the vendor receiving the order.
- 3. All reagents and test kits must have a minimum shelf life of ninety (90) days or more beyond date of receipt. Also, the vendor will ensure that each of the reagents delivered to the hospital have the maximum shelf life available for that specific product.
- 4. The number of tests kits listed on the cost sheet is for bidding purposes only. The vendor will be required to provide actual quantities needed, be it more or less.
- 5. Reagents will not have to be mixed before using and be immediately ready to put on the analyzer. Reagents must not need to be frozen or reconstituted-they must be ready to use out of the refrigerator.
- 6. All products and equipment are to be quoted FOB Destination, unless otherwise stated in vendor's quotation.
- 7. Warranty must include 1 year on parts, labor and travel during Standard Business Hours.
- 8. References shall be provided upon request.

Equipment Specifications:

The instrument must meet or exceed the following requirements:

A. SAMPLE HANDLING

- 1. System must have automated sample handling, including mixing and cap-piercing capability for at least 25 samples.
- 2. System must be able to automatically mix, sample and analyze calibration and control materials.

B. FAIL-SAFE Sample Management

1. Must have FAIL-SAFE sample management system:

- a. Positive tube identification (tube bar-code read at time of aspiration).
- b. Positive cassette/position identification (cassette and position bar-code read at time of aspiration).

C. Sample Volume

System shall perform the following:

- 1. Require 185ul (micro liter) whole blood for analysis in the automated (cap-piercing) mode.
- 2. Require 125ul sample in the manual or pre-dilute mode of a 1:3 dilution (minimum 50ul whole blood).
- 3. Require 50ul whole blood with 4 drops reagent A and 2ml (milliliter) reagent B for retic mode.
- 4. Automatic probe wipe and wash in manual mode.
- 5. Dual sample aspiration verifiers.
- 6. Specimen integrity check during and after aspiration.

D. Positive Barcode ID

- 1. System must have bar code capabilities.
- 2. System must have 2 identification fields, each of which can be alphanumeric or alpha or numeric up to 16 characters.
- 3. System must have a bar coded cassette number and position for additional audit trail allowing operator to easily identify the tube if further review is necessary.

E. Counting, Differential and Flagging Technology

- 1. Must extend analysis time for cytopenic samples (RBC {Red Blood Cells}, Plt {Platelets} and WBC {White Blood Cells}).
- 2. Must directly measure MCV (Mean Corpuscular Volume).
- 3. Must have visual displays of RBC volume distribution curves over the range $24-360~\mathrm{fl}$ (femto-liter) using 256 channels which are 1.31 fl in size to provide maximum resolution
- 4. Must have visual displays of Platelet volume distribution curves from 2 20 fl using 64 channels which are 0.28 fl in size to provide maximum resolution.
- 5. Must use sweep flow to maximize sensing in the RBC/Plt apertures.
- 6. Must provide a differential analysis in a single channel using the three technologies of volume, conductivity, and scatter in order to maximize resolution, specificity, and efficiency.
- 7. Must be able to provide a differential on WBC equal or greater than 100 cells/ul.
- 8. Must directly measure each leukocyte population (vs. calculated parameters) in order to provide more accurate results.

- 9. Must analyze leucocytes in their near-native state so as not to physically or biochemically alter their morphology. (No cytochemical stains, therefore a much cleaner system and more reliable results).
- 10. Must include customer definable definitive flags and instrument generated suspect flags.

F. Modes of Operation

- 1 Must be capable of automatic, cap-piercing whole blood mode running by profile type:
 - a. CBC
 - b. CBC/Differential

G. Parameters:

- 1. System must perform and display a hematology profile consisting of at least the following 26 parameters:
 - a. White Blood Cell Count per ul.
 - b. Lymphocyte % (by percentage).
 - c. Monocyte %.
 - d. Neutrophil %.
 - e. Eosinophil %.
 - f. Basophil %.
 - g. Lymphocyte # (by whole number).
 - h Monocyte #.
 - i Neutrophil #.
 - j Eosinophil#.
 - k. Basophil #...
 - 1. Red Blood Cell Count per ul.
 - m. Hemoglobin g/dl (gram per deci-liter).
 - n Hematocrit %
 - o Mean Corpuscular Volume per fl (femto-liter).
 - p. Mean Corpuscular Hemoglobin pg (pico-gram).
 - q. Mean Corpuscular Hemoglobin Concentration g/dl.
 - r. Red Cell Distribution Width %...
 - s. Platelet Count per ul.
 - t. Mean Platelet Volume fl.
 - u. Plateletcrit %.
 - v. Platelet Distribution Width %.

- w. Reticulocyte #...
- x. Reticulocyte %.
- y. Mean Reticulocyte Volume.
- z. Immature Reticulocyte Fraction.

H. Data Management

System must provide an Information Management System offering flexibility for easy interfacing, addition of peripheral devices and future software via disk

I. Information Management

Information Management System must be able to provide:

- 1. 3 different levels of user access for security of data and system configuration.
- 2. At least 20,000 numeric patient results, including graphic results and list mode data.
- 3. An unlimited number of user-definable control files.
- 4. An unlimited number of patient control files.
- 5. Setup of files for each shift worked.
- 6. Record reagent information lot numbers.
- 7. Entry of control data from diskette.
- 8. AutoStop in the event of unacceptable control data.
- 9. A database of location and physician.
- 10. User defined decision rules to optimize and standardize laboratory processes 24hrs a day.
- 11. Transmission of patient results, control results, numeric and graphic to as host computer.

J. Short Term Storage

Must provide short term storage for:

- 1. Startup log.
- 2. Calibration.
- 3. Reproducibility.
- 4. Carryover.
- 5. Maintenance.
- 6. System Events

K. Quality Control (QC)

- 1. System must combine the following OC techniques:
 - a. Storage and analysis of commercial control data.
 - b. Daily instrument checks.
 - c. Patient results by operator.
 - d Storage of patient results with XB analysis with AutoStop function after two successive batches exceed limits.
 - e. Archive any or all control data to floppy disk.
 - f. Interlaboratory Quality Assurance Program (IQAP).
- 2. IQAP assessment.
- 3. Automated calibration with values from diskette.

L. MAINTENANCE

System must have zero routine daily maintenance which includes utilization of the following features:

- 1. Self-cleaning blood sampling valve.
- 2. Proprietary pull-apart pinch tubing.
- 3. Cleaning agent, which eliminates the need for routine bleaching.
- 4. Burn circuit, which purges apertures of sample residues after each cycle with specified voltage.
- 5. Automatic anti-clog device for VCS (Volume, Conductivity, Scatter) Cell Analysis Chamber.
- 6. Must have "STAT" capability with positive bar code identification.
- 7. Cap piercing needle should be single needle assembly, which both pierces and vents while minimizing trauma to the rubber cap.
- 8. Must provide sensing alerts for low reagents.
- 9. Manufacturer must provide commercial control materials for routine quality control of CBC and extended differential parameters.

M. Throughput

System must have a throughput of up to 75 samples per hour in the CBC Primary mode when processing samples with the following criteria:

WBC > 7.0×10^{3} cells/ul. RBC > 5.0×10^{6} cells/ul. Plt > 300×10^{3} cells/ul.

Term of Contract

This contract shall be for the period of one year with the option of two (2) one (1) year renewals.

Cost Evaluation

It is preferred that each responder use the cost proposal sheet provided.

Award will be based on the overall lowest grand total.

Payment

The vendor shall submit invoices, in arrears, to the facility at the address on the face of the purchase order labeled "Invoice To" pursuant to the terms of the contract.

Payment for equipment will be made in arrears, upon completion of delivery, installation and inservice training and receipt of invoice

Payment for reagent and consumables will be made in arrears upon delivery of reagents/consumables. State law forbids payment of invoices prior to receipt of goods or services.

Cost Sheet WEH90114

	Equipment Description	Quantity	Equipme Each	nt Total Equipment Cost
1	Coulter LH 500 or equal	2	\$	\$
2	Equipment Delivery and Inservice Training	1	\$	\$
3	Year 2 Maintenance Agreement Upon Renewal	1	\$	\$
4	Year 3 Maintenance Agreement Upon Renewal	1	\$	\$
	Total		(A)	\$

*The estimated annual usage per unit is based on the following estimated number of test (CBC /Diff's 26,828, Control Runs 7,300 per year and 2 Calibration procedures per year per per instrument) to be performed using the Coulter LH 500 or equal:

Item No.	Reagent/Consumable Description	Vendor Item Number	*Estimated Annual Usage Per Unit		Estimated Annual Cost
1	LH 700 Series Diluent, 20 L or equal		114	\$	\$
2	Lyse S III dif, 5 L or equal		12	\$	\$
3	LH 700 Series Pak, EA or equal		16	\$	\$
4	LH Cleaner, 10 L or equal		14	\$	\$
5	Latron Control, 5x16mL or equal		18	\$	\$
6	Latron Primer, 5x16mL or equal		18	\$	\$
7	5C Tri-Pak, 12x3.3mL or equal	"	48	\$	\$
8	S-CAL, 2x4.2mL or equal		4	\$	\$
9*				\$	\$
10*				\$	\$
11*				\$	\$
12*				\$	\$
13*				\$	\$
14*				\$	\$
15*				\$	\$
	Total Reagent/Consumables	•		(B)	\$

*	Add any additional reagents/consumables that would be in addition to the items listed above wi	ith
	estimated annual usage based on the above estimated numbers to allow items	
	to be included in the evaluation process	

(A)+(B)

Award will be made on the overall grand total of all items requested

Grand Total

Vendor will invoice hospital for reagents/consumables and payment will be made in arrears.

Vendor will invoice hospital for equipment, delivery, and inservice, payment will be made in arrears.

Vendor will invoice hospital upon renewal for maintenance agreement quarterly and payment will be made in arrears.

Vendor Signature	Vendor Name	Date

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

VENDOR OWING A DEBT TO THE STATE:

West Virginia Code §5A-3-10a provides that: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate

PUBLIC IMPROVEMENT CONTRACTS & DRUG-FREE WORKPLACE ACT:

If this is a solicitation for a public improvement construction contract, the vendor, by its signature below, affirms that it has a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the **West Virginia Code** The vendor **must** make said affirmation with its bid submission. Further, public improvement construction contract may not be awarded to a vendor who does not have a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the **West Virginia Code** and who has not submitted that plan to the appropriate contracting authority in timely fashion. For a vendor who is a subcontractor, compliance with Section 5, Article 1D, Chapter 21 of the **West Virginia Code** may take place before their work on the public improvement is begun.

ANTITRUST:

In submitting a bid to any agency for the state of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the state of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the state of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the state of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership or person or entity submitting a bid for the same materials, supplies, equipment or services and is in all respects fair and without collusion or fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

LICENSING:

Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agencies or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities

CONFIDENTIALITY:

The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf.

Under penalty of law for false swearing (*West Virginia Code* §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

Vendor's Name:	
Authorized Signature:	Date:

State of West Virginia

VENDOR PREFERENCE CERTIFICATE

Certification and application* is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the **West Virginia Code**. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

1.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preced-
	ing the date of this certification; or, Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or, Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
3	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
4.	Application is made for 5% resident vendor preference for the reason checked: Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
requiren	inderstands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the nents for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency sted from any unpaid balance on the contract or purchase order.
authorize the requ	nission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and les the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid ired business taxes, provided that such information does not contain the amounts of taxes paid nor any other information by the Tax Commissioner to be confidential
and acc	nenalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true curate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate is during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.
Bidder:	Signed:
Date:	Title:

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive