



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  
**VNF1010**

PAGE  
**1**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**TARA LYLE**  
**304-558-2544**

VENDOR

RFQ COPY  
 TYPE NAME/ADDRESS HERE

*First Choice Medical Supply*  
*127 Interstate Drive*  
*Richland, MS 39218*

SHIP TO

DIVISION OF VETERANS AFFAIRS  
 VETERANS NURSING FACILITY

ONE FREEDOMS WAY  
 CLARKSBURG, WV  
 26301 **304-627-2415**

DATE PRINTED <b>01/11/2011</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
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BID OPENING DATE: **02/08/2011** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	1	EA		850-40		
<p><b>INCONTINENT PRODUCTS</b></p> <p><b>OPEN-END CONTRACT</b></p> <p><b>INQUIRIES:</b>            WRITTEN QUESTIONS WILL BE ACCEPTED UNTIL CLOSE OF BUSINESS ON 01/31/2011. QUESTIONS MAY BE SENT VIA USPS, FAX, COURIER OR E-MAIL. IN ORDER TO ASSURE NO VENDOR RECEIVES AN UNFAIR ADVANTAGE, NO SUBSTANTIVE QUESTIONS WILL BE ANSWERED ORALLY. IF POSSIBLE, E-MAIL QUESTIONS ARE PREFERRED. ADDRESS INQUIRIES TO:            TARA LYLE            DEPARTMENT OF ADMINISTRATION            PURCHASING DIVISION            2019 WASHINGTON STREET, EAST            CHARLESTON, WV 25305</p> <p>FAX: 304-558-4115            E-MAIL: TARA.L.LYLE@WV.GOV</p> <p>EXHIBIT 3</p> <p>LIFE OF CONTRACT: THIS CONTRACT BECOMES EFFECTIVE ON AWARD AND EXTENDS FOR A PERIOD OF ONE (1) YEAR OR UNTIL SUCH "REASONABLE TIME" THEREAFTER AS IS NECESSARY TO OBTAIN A NEW CONTRACT OR RENEW THE ORIGINAL CONTRACT. THE "REASONABLE TIME" PERIOD SHALL NOT EXCEED TWELVE (12) MONTHS. DURING THIS "REASONABLE TIME" THE VENDOR MAY TERMINATE THIS CONTRACT FOR ANY</p>						

**RECEIVED**

2011 FEB -8 A 10:09

PURCHASING DIVISION  
 STATE OF WV

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>April Kendall</i>	TELEPHONE <b>800-809-4556</b>	DATE <b>2/7/11</b>
TITLE <i>Contract Specialist</i>	ADDRESS CHANGES TO BE NOTED ABOVE	

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

*Government Sales*

*Fax 800-921-2334*

**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. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
4. 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.
5. Payment may only be made after the delivery and acceptance of goods or services.
6. Interest may be paid for late payment in accordance with the *West Virginia Code*.
7. Vendor preference will be granted upon written request in accordance with the *West Virginia Code*.
8. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
9. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
10. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern the purchasing process.
11. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
12. **BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
13. **HIPAA BUSINESS ASSOCIATE ADDENDUM:** The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at [www.state.wv.us/admin/purchase/vrc/hipaa.htm](http://www.state.wv.us/admin/purchase/vrc/hipaa.htm) and 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.
14. **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>.
15. **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, and the West Virginia Insurance Commission. 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.
16. **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 material, 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.

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**INSTRUCTIONS TO BIDDERS**

1. Use the quotation forms provided by the Purchasing Division. Complete all sections of the quotation form.
2. 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. Unit prices shall prevail in case of discrepancy. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
4. 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
5. Communication during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited (W.Va. C.S.R. §148-1-6.6).



State of West Virginia  
 Department of Administration  
 Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
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# Request for Quotation

RFQ NUMBER  
**VNF1010**

PAGE  
**2**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**TARA LYLE**  
**304-558-2544**

VENDOR

RFQ COPY  
 TYPE NAME/ADDRESS HERE

SHIP TO

DIVISION OF VETERANS AFFAIRS  
 VETERANS NURSING FACILITY  
 ONE FREEDOMS WAY  
 CLARKSBURG, WV  
 26301 304-627-2415

DATE PRINTED <b>01/11/2011</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
BID OPENING DATE: <b>02/08/2011</b>		BID OPENING TIME <b>01:30PM</b>		

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>REASON UPON GIVING THE DIRECTOR OF PURCHASING 30 DAYS WRITTEN NOTICE.</p> <p>UNLESS SPECIFIC PROVISIONS ARE STIPULATED ELSEWHERE IN THIS CONTRACT DOCUMENT, THE TERMS, CONDITIONS AND PRICING SET HEREIN ARE FIRM FOR THE LIFE OF THE CONTRACT.</p> <p>RENEWAL: THIS CONTRACT MAY BE RENEWED UPON THE MUTUAL WRITTEN CONSENT OF THE SPENDING UNIT AND VENDOR, SUBMITTED TO THE DIRECTOR OF PURCHASING THIRTY (30) DAYS PRIOR TO THE EXPIRATION DATE. SUCH RENEWAL SHALL BE IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND SHALL BE LIMITED TO TWO (2) ONE (1) YEAR PERIODS.</p> <p>CANCELLATION: THE DIRECTOR OF PURCHASING RESERVES THE RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE COMMODITIES AND/OR SERVICES SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM TO THE SPECIFICATIONS OF THE BID AND CONTRACT HEREIN.</p> <p>OPEN MARKET CLAUSE: THE DIRECTOR OF PURCHASING MAY AUTHORIZE A SPENDING UNIT TO PURCHASE ON THE OPEN MARKET, WITHOUT THE FILING OF A REQUISITION OR COST ESTIMATE, ITEMS SPECIFIED ON THIS CONTRACT FOR IMMEDIATE DELIVERY IN EMERGENCIES DUE TO UNFORESEEN CAUSES (INCLUDING BUT NOT LIMITED TO DELAYS IN TRANSPORTATION OR AN UNANTICIPATED INCREASE IN THE VOLUME OF WORK.)</p> <p>QUANTITIES: QUANTITIES LISTED IN THE REQUISITION ARE APPROXIMATIONS ONLY, BASED ON ESTIMATES SUPPLIED BY THE STATE SPENDING UNIT. IT IS UNDERSTOOD AND AGREED THAT THE CONTRACT SHALL COVER THE QUANTITIES ACTUALLY ORDERED FOR DELIVERY DURING THE TERM OF THE CONTRACT,</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

SIGNATURE *April Kendall* TELEPHONE **800-89-4556** DATE **2/7/11**  
 TITLE *Contract Specialist* FEIN **481262424** ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

*Government Sales*



State of West Virginia  
 Department of Administration  
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**3**

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RFQ COPY

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SHIP TO

DIVISION OF VETERANS AFFAIRS  
 VETERANS NURSING FACILITY

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DATE PRINTED <b>01/11/2011</b>	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
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BID OPENING DATE: **02/08/2011** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>WHETHER MORE OR LESS THAN THE QUANTITIES SHOWN.</p> <p>ORDERING PROCEDURE: SPENDING UNIT(S) SHALL ISSUE A WRITTEN STATE CONTRACT ORDER (FORM NUMBER WV-39) TO THE VENDOR FOR COMMODITIES COVERED BY THIS CONTRACT. THE ORIGINAL COPY OF THE WV-39 SHALL BE MAILED TO THE VENDOR AS AUTHORIZATION FOR SHIPMENT, A SECOND COPY MAILED TO THE PURCHASING DIVISION, AND A THIRD COPY RETAINED BY THE SPENDING UNIT.</p> <p>BANKRUPTCY: IN THE EVENT THE VENDOR/CONTRACTOR FILES FOR BANKRUPTCY PROTECTION, THE STATE MAY DEEM THE CONTRACT NULL AND VOID, AND TERMINATE SUCH CONTRACT WITHOUT FURTHER ORDER.</p> <p>THE TERMS AND CONDITIONS CONTAINED IN THIS CONTRACT SHALL SUPERSEDE ANY AND ALL SUBSEQUENT TERMS AND CONDITIONS WHICH MAY APPEAR ON ANY ATTACHED PRINTED DOCUMENTS SUCH AS PRICE LISTS, ORDER FORMS, SALES AGREEMENTS OR MAINTENANCE AGREEMENTS, INCLUDING ANY ELECTRONIC MEDIUM SUCH AS CD-ROM.</p> <p>REV. 05/26/2009</p> <p>THE MODEL/BRAND/SPECIFICATIONS NAMED HEREIN ESTABLISH THE ACCEPTABLE LEVEL OF QUALITY ONLY AND ARE NOT INTENDED TO REFLECT A PREFERENCE OR FAVOR ANY PARTICULAR BRAND OR VENDOR. VENDORS WHO ARE BIDDING ALTERNATES SHOULD SO STATE AND INCLUDE PERTINENT LITERATURE AND SPECIFICATIONS. FAILURE TO PROVIDE INFORMATION FOR ANY ALTERNATES MAY BE GROUNDS FOR REJECTION OF THE BID. THE STATE RESERVES THE RIGHT TO WAIVE MINOR IRREGULARITIES IN BIDS OR SPECIFICATIONS IN ACCORDANCE WITH SECTION 148-1-4(F) OF THE WEST VIRGINIA LEGISLATIVE RULES AND REGULATIONS.</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Shirley Kendall</i>	TELEPHONE <i>800-809-4556</i>	DATE <i>2/7/11</i>
TITLE <i>Contract Specialist</i>	ADDRESS CHANGES TO BE NOTED ABOVE	

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*Government Sales*



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**VNF1010**

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**4**

ADDRESS CORRESPONDENCE TO ATTENTION OF:  
**TARA LYLE**  
**304-558-2544**

RFQ COPY  
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RFQ COPY

RFQ COPY

DIVISION OF VETERANS AFFAIRS  
 VETERANS NURSING FACILITY

ONE FREEDOMS WAY  
 CLARKSBURG, WV  
 26301 304-627-2415

DATE PRINTED: <b>01/11/2011</b>	TERMS OF SALE:	SHIP VIA:	F.O.B.:	FREIGHT TERMS:
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BID OPENING DATE: **02/08/2011** BID OPENING TIME: **01:30PM**

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
<p><b>EXHIBIT 4</b></p> <p>LOCAL GOVERNMENT BODIES: UNLESS THE VENDOR INDICATES IN THE BID HIS REFUSAL TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO COUNTY, SCHOOL, MUNICIPAL AND OTHER LOCAL GOVERNMENT BODIES, THE BID SHALL EXTEN TO POLITICAL SUBDIVISIONS OF THE STATE OF WEST VIRGINIA. IF THE VENDOR DOES NOT WISH TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO ALL POLITICAL SUBDIVISIONS OF THE STATE, THE VENDOR MUST CLEARLY INDICATE SUCH REFUSAL IN HIS BID. SUCH REFUSAL SHALL NOT PREJUDICE THE AWARD OF THIS CONTRACT IN ANY MANNER.</p> <p>REV. 3/88</p> <p>PURCHASING CARD ACCEPTANCE: THE STATE OF WEST VIRGINIA CURRENTLY UTILIZES A VISA PURCHASING CARD PROGRAM WHIC IS ISSUED THROUGH A BANK. THE SUCCESSFUL VENDOR MUST ACCEPT THE STATE OF WEST VIRGINIA VISA PURCHASING CARD FOR PAYMENT OF ALL ORDERS PLACED BY ANY STATE AGENCY AS A CONDITION OF AWARD.</p> <p style="text-align: center;"><b>NOTICE</b></p> <p>A SIGNED BID MUST BE SUBMITTED TO:</p> <p style="text-align: center;">DEPARTMENT OF ADMINISTRATION        PURCHASING DIVISION        BUILDING 15        2019 WASHINGTON STREET, EAST        CHARLESTON, WV 25305-0130</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE: *April Kendall* TELEPHONE: **800-809-4556** DATE: **2/7/11**

TITLE: *Contract Specialist* ADDRESS CHANGES TO BE NOTED ABOVE

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*Government Sales*



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**VNF1010**

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**5**

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**304-558-2544**

VENDOR

RFQ COPY  
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*First Choice Medical Supply*  
*127 Interstate Drive*  
*Richland, MS 39218*

SHIP TO

DIVISION OF VETERANS AFFAIRS  
 VETERANS NURSING FACILITY

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DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/11/2011				

BID OPENING DATE: **02/08/2011** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED:</p> <p>SEALED BID</p> <p>BUYER:-----TL/32-----</p> <p>RFQ. NO.:-----VNF1010-----</p> <p>BID OPENING DATE:-----02/08/2011-----</p> <p>BID OPENING TIME:-----1:30 PM-----</p> <p>PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID:  <i>800 921 2334</i></p> <p>CONTACT PERSON. (PLEASE PRINT CLEARLY)  <i>April Kendall</i></p> <p>***** THIS IS THE END OF RFQ VNF1010 ***** TOTAL: _____</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>April Kendall</i>	TELEPHONE <i>800-809-4556</i>	DATE <i>2/7/11</i>
TITLE <i>Contract Specialist</i>	FEIN <i>48 1262424</i>	ADDRESS CHANGES TO BE NOTED ABOVE

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*Government Sales*

*Fax 800-921-2334*

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

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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 material, 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.

### INSTRUCTIONS TO BIDDERS

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# First Choice Medical Supply, LLC

Item Number	Description	Item Size	Unit Price	Estimated Annual Order Quantities	Extended Price	Case Quantity
1	Underwear with leakage barriers	Small	0.3157	6000 ea	1,894.38	88
2	Underwear with leakage barriers	Medium	0.2537	6000 ea	1,522.27	80
3	Underwear with leakage barriers	Large	0.2537	5400 ea	1,370.04	72
4	Underwear with leakage barriers	X-Large	0.2537	4200 ea	1,065.59	56
5	Classis Plus Brief	Small	0.2650	3600 ea	953.95	96
6	Classis Plus Brief	Medium	0.2650	6000 ea	1,589.92	96
7	Classis Plus Brief	Large	0.2650	14,400 ea	5,087.75	72
8	Classis Plus Brief	X-Large	0.4240	14,400 ea	6,105.30	60
9	XL Bariatric Brief	XL + Bariatric	1.0287	4800 ea	4,936.20	40
10	Soothe & Cool Body Lotion	8 oz 7.5oz	0.4307	3000 ea	1,292.10	48
11	Soothe & Cool Skin Paste	2.5 oz	5.502	1200 ea	6,602.50	12
12	Soothe & Cool Moisture Barrier	7 oz 4.0z	4.50	2400 ea	10,800.00	12
13	Soothe & Cool Moisture Barrier	2 oz	1.30	1200 ea	1,560.00	Sold by each
14	Wash Cream 3 in 1 No Rinse	8.5 oz	3.20	3600 ea	11,520.00	16
15	Personal Cleansing Washcloths	64 count	0.22108	9600 ea	2,122.40	768
16	Disposable Underpads	50 count	0.158	10,000 ea	1,580.00	50
17	Calazime Protectant Paste	4 oz	3.44	600 ea	2,064.00	12
18	Remedy Nutrashield	4 oz 5.0z	13.887	600 ea	8,285.22	12
19	Remedy Antifungal Powder	3 oz 2.0z	5.13	600 ea	3,078.00	12

Grand Total \$ 71,287.64

**Note: All items will be ordered by the case**  
 \* Extended Price = Each Price multiplied (X) Estimated Annual Order Quantities

Please See attached spreadsheet

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First Choice  
FOF



# RFQ VNF1010 - WEST VIRGINIA DIVISION OF VETERAN AFFAIRS

Line Item	Current Contract Pricing		FQP	Annual Qty.	Extended Total	SCA	Annual Qty.	Extended Total	FCMS	Annual Qty.	Extended Total
1	0.3754		\$0.3157	6000	\$1,894.38						
2	0.413		\$0.2537	6000	\$1,522.27						
3	0.4589		\$0.2587	5400	\$1,370.04						
4	0.5914		\$0.2537	4200	\$1,065.59						
5	0.2703		\$0.2650	3600	\$953.95						
6	0.2745		\$0.2650	6000	\$1,589.92						
7	0.2478		\$0.3533	14400	\$5,087.75						
8	0.4098		\$0.4240	14400	\$6,105.30						
9	1.2085		\$1.0284	4800	\$4,936.20						
10	0.43								0.4307	3000	1,292.10
11	5.74								5.502083	1200	6,602.50
12	3.82								4.50	2400.00	10,800.00
13	2.07								1.30	1200.00	1,560.00
14	3.17					3.2000	3600	11,520.00			
15	0.0458								0.021083	9600	202.4
16	0.1377		0.1356025	10000	1356.025						
17	4.1								3.44	600	2,064.00
18	13.33								13.8087	600	8,285.22
19	5.88								5.13	600	3,078.00
											2 oz
<b>TOTAL BID VALUE</b>											<b>\$71,287.64</b>
					\$25,883.42			11,520.00			33,884.22

RFQ No. VNF 1010

STATE OF WEST VIRGINIA  
Purchasing Division

**PURCHASING AFFIDAVIT**

**West Virginia Code §5A-3-10a states:** 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.

**DEFINITIONS:**

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

**EXCEPTION:** The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

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.

**WITNESS THE FOLLOWING SIGNATURE**

Vendor's Name: First Choice Medical Supply

Authorized Signature: April Kendall Date: 2/7/11

State of Mississippi

County of Rankin, to-wit:

Taken, subscribed, and sworn to before me this 7 day of February, 2011.

My Commission expires April 8, 2012

AFFIX SEAL HERE

NOTARY PUBLIC Margaret A. Abney



MA

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 preceding 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,
5. 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,
6. 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.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Under penalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate changes 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.

FIRST QUALITY PRODUCTS, INC.

**ADULT SMALL PREVAIL BRIEF**

*Product Reference Sheet*

<b>Product Code</b>		<b>PV-011</b>
<b>Size</b>		Adult Small
<b>Packaging Information</b>	Bag Style	Printed, Sealed Bag
	Case Style	Plain, Corrugated Box
	Packaging	6 Bags/16 Pieces
	Total Case Count	96
	Case Weight	14.574 Pounds
	Case Cube	2.15 Cubic Feet
	Case Size	22.82 x 11.695 x 13.89"
	Print Code	Time, Date, #'s
<b>Dimensions (inches)</b>	Overall Length	26
	Overall Width	17.5
	Width at Crotch	9.5
	Pad Length	19
	Pad Width at Waist Front	9
	Pad Width at Waist Back	9
	Pad Width at Crotch Widest	6.5
	Pad Width at Crotch Narrowest	5.5
<b>Average Product Weight (grams)</b>		65.6
<b>Absorbency-ISO Method 11948-1 (grams)</b>		*1365
<b>Acquisition Layer</b>		3.25" Blue Apertured
<b>Super Absorbent Polymer</b>		Yes
<b>Product Color</b>		Green Cloth-Like Breathable
<b>Elastics/Side</b>		4 White Strands
<b>Wetness Indicator</b>	Number of Lines	2
	Dry Color	Yellow/Amber
	Wet Color	Bright Blue
<b>Tape Fastening System</b>	Number of Tabs	4
	Color	Plain White Hook
	Frontal Tape Panels	No

*\*As reported by Shuster Laboratories, Inc.*

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# FIRST QUALITY PRODUCTS, INC.

## UNDERPADS Product Reference Sheet

<b>Product Code</b>		<b>UP-150</b>
<b>Size</b>		<b>23 x 36"</b>
<b>Packaging Information</b>	Bag Style	FQP Printed, Sealed Bag
	Case Style	Printed, Corrugated Box
	Packaging	10 Bags/15 Pieces
	Total Case Count	150
	Case Weight	18.972 Pounds
	Case Cube	2.19 Cubic Feet
	Case Size	17.57 x 14.695 x 14.64"
	Print Code	Time, Date, #'s
<b>Flat Dimensions (inches)</b>	Underpad Length	36
	Underpad Width	23
	Pad Length	33
	Pad Width	20
<b>Average Product Weight (grams)</b>		52
<b>Absorbency-ISO Method 11948-1 (grams)</b>		*1095
<b>Super Absorbent Polymer</b>		No
<b>Backsheet</b>		Green Poly

\* As reported by Shuster Laboratories, Inc.

# FIRST QUALITY PRODUCTS, INC.

## Bariatric Adult Institutional Brief

### Product Reference Sheet

<b>Product Code</b>		<b>PV-094</b>
<b>Size</b>		Bariatric
<b>Packaging Information</b>	Bag Style	Printed, Sealed Bag
	Case Style	Plain, Corrugated Box
	Packaging	4 Bags/10 Pieces
	Total Case Count	40
	Case Weight	12.135 Pounds
	Case Cube	1.58 Cubic Feet
	Case Size	19.82 x 9.632 x 14.265"
	Print Code	Time, Date, #'s
<b>Dimensions (inches)</b>	Overall Length	40
	Overall Width	27.5
	Width at Crotch	11.5
	Pad Length	25.5
	Pad Width at Waist Front	9
	Pad Width at Waist Back	9
	Pad Width at Crotch Widest	7
	Pad Width at Crotch Narrowest	6.25
<b>Average Product Weight (grams)</b>		130.0
<b>Absorbency-ISO Method 11948-1 (grams)</b>		*2,238
<b>Acquisition Layer</b>		3.25" Blue Apertured
<b>Super Absorbent Polymer</b>		Yes
<b>Product Color</b>		White Cloth-like Breathable
<b>Elastics/Side</b>		4 White Strands
<b>Wetness Indicator</b>	Number of Lines	3
	Dry Color	Yellow/Amber
	Wet Color	Bright Blue
<b>Tape Fastening System</b>	Number of Tabs	2
	Color	Blue Hook
	Frontal Tape Panels	No

\* As reported by Shuster Laboratories, Inc.

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FIRST QUALITY PRODUCTS, INC.

**MEDIUM ADULT NU-FIT BRIEF**

*Product Reference Sheet*

<b>Product Code</b>		<b>NU-012/1</b>
<b>Size</b>		<b>Medium</b>
<b>Packaging Information</b>	Bag Style	Nu-Fit Printed, Sealed Bag
	Case Style	Nu-Fit Printed, Corrugated Box
	Packaging	6 Bags/16 Pieces
	Total Case Count	96
	Case Weight	25.626 Pounds
	Case Cube	2.68 Cubic Feet
	Case Size	24.32 x 13.57 x 14.015"
	Print Code	Time, Date, #'s
<b>Dimensions (inches)</b>	Overall Length	33
	Overall Width	25
	Width at Crotch	11.5
	Pad Length	25.5
	Pad Width at Waist Front	9
	Pad Width at Waist Back	9
	Pad Width at Crotch Widest	7
	Pad Width at Crotch Narrowest	6.25
<b>Average Product Weight (grams)</b>		85.7
<b>Absorbency-ISO Method 11948-1 (grams)</b>		*1691
<b>Acquisition Layer</b>		White Apertured Film
<b>Super Absorbent Polymer</b>		Yes
<b>Product Color</b>		White Cloth-like/Breathable
<b>Elastics/Side</b>		4 White Strands
<b>Wetness Indicator</b>	Number of Lines	2
	Dry Color	Yellow/Amber
	Wet Color	Bright Blue
<b>Tape Fastening System</b>	Number of Tabs	4
	Color	Plain White Hook

*\* As reported by Shuster Laboratories, Inc.*

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# FIRST QUALITY PRODUCTS, INC.

## LARGE ADULT NU-FIT BRIEF

*Product Reference Sheet*

<b>Product Code</b>		<b>NU-013/1</b>
<b>Size</b>		<b>Large</b>
<b>Packaging Information</b>	Bag Style	Nu-Fit Printed, Sealed Bag
	Case Style	Nu-Fit Printed, Corrugated Box
	Packaging	4 Bags/18 Pieces
	Total Case Count	72
	Case Weight	20.944 Pounds
	Case Cube	2.21 Cubic Feet
	Case Size	20.070 x 13.57 x 14.015"
	Print Code	Time, Date, #'s
<b>Dimensions (inches)</b>	Overall Length	37.5
	Overall Width	30
	Width at Crotch	11.5
	Pad Length	25
	Pad Width at Waist Front	9
	Pad Width at Waist Back	9
	Pad Width at Crotch Widest	7
	Pad Width at Crotch Narrowest	6.25
<b>Average Product Weight (grams)</b>		100.2
<b>Absorbency-ISO Method 11948-1 (grams)</b>		*1915
<b>Acquisition Layer</b>		White Apertured Film
<b>Super Absorbent Polymer</b>		Yes
<b>Product Color</b>		Blue Cloth-like/Breathable
<b>Elastics/Side</b>		4 White Strands
<b>Wetness Indicator</b>	Number of Lines	2
	Dry Color	Yellow/Amber
	Wet Color	Bright Blue
<b>Tape Fastening System</b>	Number of Tabs	4
	Color	Plain White Hook

\* As reported by Shuster Laboratories, Inc.

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FIRST QUALITY PRODUCTS, INC.

**EXTRA LARGE ADULT NU-FIT BRIEF**

*Product Reference Sheet*

<b>Product Code</b>		<b>NU-014/1</b>
<b>Size</b>		<b>Extra Large</b>
<b>Packaging Information</b>	Bag Style	Nu-Fit Printed, Sealed Bag
	Case Style	Nu-Fit Printed, Corrugated Box
	Packaging	4 Bags/15 Pieces
	Total Case Count	60
	Case Weight	15.079 Pounds
	Case Cube	2.02 Cubic Feet
	Case Size	19.945 x 11.945 x 14.640"
	Print Code	Time, Date, #'s
<b>Dimensions (inches)</b>	Overall Length	40
	Overall Width	32
	Width at Crotch	11.5
	Pad Length	25.5
	Pad Width at Waist Front	9
	Pad Width at Waist Back	9
	Pad Width at Crotch Widest	7
	Pad Width at Crotch Narrowest	6.25
<b>Average Product Weight (grams)</b>		101.4
<b>Absorbency-ISO Method 11948-1 (grams)</b>		*2013
<b>Acquisition Layer</b>		White Apertured Film
<b>Super Absorbent Polymer</b>		Yes
<b>Product Color</b>		Beige Cloth-like/Breathable
<b>Elastics/Side</b>		4 White Strands
<b>Wetness Indicator</b>	Number of Lines	2
	Dry Color	Yellow/Amber
	Wet Color	Bright Blue
<b>Tape Fastening System</b>	Number of Tabs	4
	Color	Plain White Hook

*\* As reported by Shuster Laboratories, Inc.*

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FIRST QUALITY PRODUCTS, INC.

PREVAIL SMALL ADULT PROTECTIVE UNDERWEAR

*Product Reference Sheet*

<b>Product Code</b>		<b>PV-511</b>
<b>Size</b>		<b>Small</b>
<b>Packaging Information</b>	Bag Style	Prevail Printed, Sealed Bag
	Case Style	Plain, Corrugated Box
	Packaging	4 Bags/22 Pieces
	Total Case Count	88
	Case Weight	14.765 Pounds
	Case Cube	1.78 Cubic Feet
	Case Size	22.070 x 12.320 x 11.328 ”
	Print Code	Time, Date, #'s
<b>Flat Dimensions (inches)</b>	Overall Stretched Width	22.5
	Crotch Width	7
	Overall Stretched Length	25
	Pad Length	17.5
	Pad Width	4
<b>Elastic Strands (per side)</b>	Waist – Front	4 White Strands
	Waist – Back	4 Purple Strands
	Abdominal	6 White Strands
	Thigh	3 White Strands
	Crotch	3 White Strands
<b>Average Product Weight (grams)</b>		47.7
<b>Absorbency-ISO Method 11948-1 (grams)</b>		*977
<b>Acquisition Layer</b>		Blue Apertured Film
<b>Super Absorbent Polymer</b>		Yes
<b>Leg Cuffs</b>		No
<b>Cloth-Like Backsheet</b>		Yes
<b>Latex Free</b>		Yes
<b>Product Color</b>		White

*\*As reported by Shuster Laboratories, Inc.*

FIRST QUALITY PRODUCTS, INC.

PER-FIT MEDIUM ADULT PROTECTIVE UNDERWEAR

*Product Reference Sheet*

<b>Product Code</b>		<b>PF-512</b>
<b>Size</b>		<b>Medium</b>
<b>Packaging Information</b>	Bag Style	Per-Fit Printed, Sealed Bag
	Case Style	Plain, Corrugated Box
	Packaging	4 Bags/20 Pieces
	Total Case Count	80
	Case Weight	12.073 Pounds
	Case Cube	1.44 Cubic Feet
	Case Size	16.320 x 12.195 x 12.515"
	Print Code	Time, Date, #'s
<b>Flat Dimensions (inches)</b>	Overall Stretched Width	31
	Crotch Width	8.5
	Overall Stretched Length	33
	Pad Length	18
	Pad Width	4.5
<b>Elastic Strands (per side)</b>	Waist – Front	4 White Strands
	Waist – Back	4 Green Strands
	Abdominal	10 White Strands
	Thigh	3 White Strands
	Crotch	3 White Strands
<b>Average Product Weight (grams)</b>		51g
<b>Absorbency-ISO Method 11948-1 (grams)</b>		978*
<b>Acquisition Layer</b>		White Apertured Film
<b>Super Absorbent Polymer</b>		Yes
<b>Leg Cuffs</b>		No
<b>Cloth-Like Backsheet</b>		Yes
<b>Latex Free</b>		Yes
<b>Product Color</b>		White

*\*As reported by Shuster Laboratories, Inc.*

**PER-FIT LARGE ADULT PROTECTIVE UNDERWEAR**

*Product Reference Sheet*

<b>Product Code</b>		<b>PF-513</b>
<b>Size</b>		<b>Large</b>
<b>Packaging Information</b>	Bag Style	Per-Fit Printed, Sealed Bag
	Case Style	Plain, Corrugated Box
	Packaging	4 Bags/18 Pieces
	Total Case Count	72
	Case Weight	12.073 Pounds
	Case Cube	1.44 Cubic Feet
	Case Size	16.320 x 12.195 x 12.515"
	Print Code	Time, Date, #'s
<b>Flat Dimensions (inches)</b>	Overall Stretched Width	31
	Crotch Width	8.5
	Overall Stretched Length	33
	Pad Length	18
	Pad Width	4.5
<b>Elastic Strands (per side)</b>	Waist – Front	4 White Strands
	Waist – Back	4 Blue Strands
	Abdominal	10 White Strands
	Thigh	3 White Strands
	Crotch	3 White Strands
<b>Average Product Weight (grams)</b>		53g
<b>Absorbency-ISO Method 11948-1 (grams)</b>		997*
<b>Acquisition Layer</b>		White Apertured Film
<b>Super Absorbent Polymer</b>		Yes
<b>Leg Cuffs</b>		No
<b>Cloth-Like Backsheet</b>		Yes
<b>Latex Free</b>		Yes
<b>Product Color</b>		White

*\*As reported by Shuster Laboratories, Inc.*

# FIRST QUALITY PRODUCTS, INC

## PER-FIT EXTRA LARGE ADULT PROTECTIVE UNDERWEAR

*Product Reference Sheet*

<b>Product Code</b>		<b>PF-514</b>
<b>Size</b>		<b>Extra Large</b>
<b>Packaging Information</b>	Bag Style	Per-Fit Printed, Sealed Bag
	Case Style	Plain, Corrugated Box
	Packaging	4 Bags/14 Pieces
	Total Case Count	56
	Case Weight	10.991 Pounds
	Case Cube	1.564 Cubic Feet
	Case Size	18.6875 x 10.8125 x 13.3750"
	Print Code	Time, Date, #'s
<b>Flat Dimensions (inches)</b>	Overall Stretched Width	35
	Crotch Width	8.5
	Overall Stretched Length	39
	Pad Length	24.5
	Pad Width @ Crotch	4.25
	Pad Width @ Waist	6
<b>Elastic Strands (per side)</b>	Waist – Front	4 White Strands
	Waist – Back	4 Black Strands
	Abdominal	10 White Strands
	Thigh	3 White Strands
	Crotch	3 White Strands
<b>Average Product Weight (grams)</b>		71g
<b>Absorbency-ISO Method 11948-1 (grams)</b>		1030
<b>Acquisition Layer</b>		White Apertured Film
<b>Super Absorbent Polymer</b>		Yes
<b>Leg Cuffs</b>		No
<b>Cloth-Like Backsheet</b>		Yes
<b>Latex Free</b>		Yes
<b>Product Color</b>		White

Clinton County Industrial Park  
P. O. Box 301, 121North Road  
McElhattan, PA 17748  
(570)769-6900  
(570)769-4805 Fax

November 3, 2008

Dear MSDS Requestor:

In response to your request for a Material Safety Data Sheet (MSDS) and hazard labeling requirements for wet wipes, please be advised that wet wipes are specifically exempt from the Occupational Safety and Health Administration Hazard Communication Standard; 29 CFR 1910.1200.b.6. (v).

Wet wipes are classified as "*articles*". An article is defined as "*a manufactured item other than a fluid or particle: (i) which is formed to a specific shape or design during manufacture; (ii) which has end use function(s) dependent in whole or in part upon its shape or design during end use; and (iii) which under normal conditions of use does not release more than very small quantities, e.g., minute or trace amounts of a hazardous chemical, and does not pose a physical hazard or health risk to employees.*". Since wet wipes meet this definition, no MSDS or hazard labeling is required.

Sincerely,

Keith Dimon  
Quality Assurance Manager  
NDI

# TENA® Wash Cream



TENA® Wash Cream is a 3-in-1 product that gently cleans, moisturizes and protects even the most delicate and fragile skin. Designed for perineal care and ideal for frequent cleansing, TENA® Wash Cream is the perfect replacement for soap, water and many perineal skin conditioning products. Since there is no need to rinse or dry the skin after use, the time needed to perform perineal care can be reduced by up to 80%\*.

\*Analysis of non-rinse cleaners.  
The Journal of Wound, Ostomy and Continence Nursing, 1995.



## What it is

TENA® Wash Cream is a mild emulsion designed to cleanse, moisturize and protect the skin. Documented in epicutaneous tests under dermatological control, this skin-gentle cream has a 20-year history of safe and frequent usage with incontinent individuals in numerous countries around the world.

## What it does

TENA® Wash Cream cleanses without soap and water. It can be left on the skin without rinsing because it is surfactant-free and has moisturizing and skin protecting properties. Unlike many perineal cleansers and conditioners, this cream will not run off the skin onto linen or interfere with the absorption of urine into incontinence products.

## How to use it

Simply apply a quarter-sized amount of TENA® Wash Cream onto a moist washcloth and provide care to the perineal area, as per your facility's protocol. No need to rinse with water or towel dry.

## Who should use it

Used everyday by over 70,000 individuals worldwide, TENA® Wash Cream is designed for frequent cleansing of perineal skin when changing incontinence products. While recommended for perineal skin care, it is safe to use on the entire body.




Better Care. Lower Total Cost.

# TENA® Wash Cream

Part of the TENA® Holistic Approach to Incontinence Management.  
Better Care. Lower Total Cost.


## Ordering Information

Order #	Description	Quantity
64311	2 fl. oz. / 60 ml	40 tubes / case
64331	8.5 fl. oz. / 250 ml	16 tubes / case
64340	16.9 fl. oz. / 500 ml	10 bottles / case
64351	33.8 fl. oz. / 1000 ml	6 bottles / case



### TENA® Product Assortment

## Absorption Guide



	Mild		Light		Medium		Moderate		Heavy		Maximum	
	○○○○		○○○○		○○○○		○○○○		○○○○		○○○○	
<b>TENA for MEN™</b>					One Size							
<b>TENA® Serenity®</b>	Pantiliner	Slender™ Plus	Extra	Extra Plus, Ultra	Ultra Plus	Ultimate						
<b>TENA® Pads</b>					Day Light	Day Regular	Day Plus	Night / Super				
<b>TENA® Protective Underwear</b>					Discreet™ Regular (M, L)	Plus (M, L, XL)	Extra (S, M, L, XL)					
<b>TENA Flex™</b>							Plus (12, 16, 20) (M, L, XL)	Super (8, 12, 16, 20) (S, M, L, XL)	Maxi (12, 16) (M, L)			
<b>TENA® Briefs</b>							Classic Plus (M, L, XL)	Ultra (M, L)	Super (M, L)			
<b>TENA® Specialty Briefs</b>							Youth	Small, Bariatric (XL)				

<b>TENA®</b> Better Care Support Products	Knit and Mesh Pants 	Skin-Caring Products 	Underpads 
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SCA Personal Care - Canada | 1.800.510.8023  
SCA Personal Care - US | 1.800.992.9939



www.tena.ca  
www.tena-usa.com | info.usa@tena.com



For line item # 17

**Drug Facts**

**Active Ingredient**

**Purpose**

Menthol 0.45% ..... External Analgesic  
Zinc Oxide 20% ..... Skin Protectant/Anorectal (Hemorrhoidal)

**Uses**

A multi-purpose moisture barrier that aids in protecting irritated skin conditions in the perineum, buttocks, lower abdomen and inner thighs due to moisture, occlusion, chafing or continued contact with urine or feces.

**Additional Uses**

Helps relieve local discomfort, burning and itching in the perianal area related to anorectal disorders and hemorrhoids Temporarily relieves pain and itching due to • minor burns • minor cuts • scrapes • insect bites • sunburn • minor skin irritations. Dries oozing and weeping of poison: • ivy • oak • sumac.

**Warnings**

For external use only.

When using this product • avoid contact with eyes.

Stop use and ask doctor if • condition worsens • symptoms last more than 7 days or clear up and occur again within a few days. Do not exceed recommended daily dosage unless directed by a doctor. In case of bleeding, consult a doctor promptly.

Do not put product into rectum by using fingers or any mechanical device or applicator. Certain persons can develop allergic reactions to this product. If the symptom being treated does not subside or if redness, irritation, swelling pain or other symptoms develop or increase, discontinue use and consult a doctor.

Keep out of reach of children. If swallowed, get medical help or contact a Poison Control Center right away.

**Directions**

When practical, gently cleanse and dry area.

- Adults: Apply externally to affected area up to 6 times daily or after each incontinent episode or diaper change.
- Children under 12 years: Consult a doctor.

Other information • Store at 15-30° C (59-86° F)

**Inactive ingredients:** Beeswax, Calamine, Disodium EDTA, Glycerin, Lanolin, Methylparaben, Mineral Oil, Petrolatum, Propylparaben, Purified Water, Sodium Borate, Sorbitan Sesquioleate.