



West Virginia Purchasing Division

2019 Washington Street, East
Charleston, WV 25305
Telephone: 304-558-2306
General Fax: 304-558-6026
Bid Fax: 304-558-3970

The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header @ 1

List View

General Information | Contact | Default Values | Discount | Document Information

Procurement Folder: 206735

SO Doc Code: CRFQ

Procurement Type: Central Purchase Order

SO Dept: 0506

Vendor ID: 000000120514

SO Doc ID: WEH1700000007

Legal Name: DRAEGER INC

Published Date: 12/6/16

Alias/DBA:

Close Date: 1/3/17

Total Bid: \$430,112.97

Close Time: 13:30

Response Date: 01/03/2017

Status: Closed

Response Time: 12:40

Solicitation Description: Telemetry

Total of Header Attachments: 1

Total of All Attachments: 1



Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia
Solicitation Response

Proc Folder : 206735
Solicitation Description : Telemetry
Proc Type : Central Purchase Order

| Date issued | Solicitation Closes | Solicitation Response | Version |
|--------------------|----------------------------|-----------------------------------|----------------|
| | 2017-01-03 13:30:00 | SR 0506 ESR01031700000003014 | 1 |

VENDOR

000000120514
DRAEGER INC

Solicitation Number: CRFQ 0506 WEH1700000007

Total Bid : \$430,112.97 **Response Date:** 2017-01-03 **Response Time:** 12:40:49

Comments:

FOR INFORMATION CONTACT THE BUYER

April Battle
(304) 558-0067
april.e.battle@wv.gov

Signature on File

FEIN #

DATE

All offers subject to all terms and conditions contained in this solicitation

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|------------------|----------|------------|-----------------|-----------------------------|
| 1 | Bedside Monitors | 15.00000 | EA | \$13,764.300000 | \$206,464.50 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 42181719 | | | |

| | |
|-------------------------------|------------------------|
| Extended Description : | 3.1.1 Bedside monitors |
|-------------------------------|------------------------|

Comments: See attached RFP response option 2 and option 3

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|--|----------|------------|-----------------|-----------------------------|
| 2 | Medical surgical wearable patient monitors | 10.00000 | EA | \$16,186.570000 | \$161,865.70 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 42181719 | | | |

| | |
|-------------------------------|--|
| Extended Description : | 3.1.2 Medical surgical wearable patient monitors |
|-------------------------------|--|

Comments: See attached RFP response option 2 and option 3

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|---------------------|---------|------------|-----------------|-----------------------------|
| 3 | Information centers | 3.00000 | EA | \$14,767.300000 | \$44,301.90 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 42181719 | | | |

| | |
|-------------------------------|---------------------------|
| Extended Description : | 3.1.3 Information centers |
|-------------------------------|---------------------------|

Comments: See attached RFP response option 2 and option 3

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|--------------|---------|------------|------------|-----------------------------|
| 4 | Warranty | 1.00000 | EA | \$0.000000 | \$0.00 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 84101503 | | | |

| | |
|-------------------------------|----------------|
| Extended Description : | 3.1.4 Warranty |
|-------------------------------|----------------|

Comments: goes for 1 year after install - see attached RFP response

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|--------------|---------|------------|------------|-----------------------------|
| 5 | Manual/CDs | 1.00000 | EA | \$0.000000 | \$0.00 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 55101521 | | | |

| | |
|-------------------------------|------------------|
| Extended Description : | 3.1.5 Manual/CDs |
|-------------------------------|------------------|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|--------------|---------|------------|-----------------|-----------------------------|
| 6 | Installation | 1.00000 | EA | \$17,480.870000 | \$17,480.87 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 81111809 | | | |

| | |
|-------------------------------|--------------------|
| Extended Description : | 3.1.6 Installation |
|-------------------------------|--------------------|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|--------------------------|---------|------------|------------|-----------------------------|
| 7 | In-service medical staff | 1.00000 | EA | \$0.000000 | \$0.00 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 86000000 | | | |

| | |
|-------------------------------|--------------------------------|
| Extended Description : | 3.1.7 In-service medical staff |
|-------------------------------|--------------------------------|



**STATE OF WEST VIRGINIA
REQUEST FOR QUOTATION CRFQ 0506 WEH170000007
TELEMETRY SYSTEM**

Closing Date: January 3, 2017



*Submitted by:
Jeff Ritchie
Sales Executive – Monitoring & IT Solutions – East Region*

December 12, 2016

Ms. April Battle, Buyer 22
State of West Virginia
Department of Administration, Purchasing Division
2019 Washington Street East
Charleston, WV 25305-0130

RE: CRFQ #0506 WEH1700000007 - Telemetry System

Dear April:

Thank you for giving Draeger Medical, Inc. the opportunity to respond to your Request for Quotation. We offer an innovative portfolio of solutions to meet your patient monitoring, interfacing, networking and IT needs – both today and in the future.

Draeger Medical, Inc. provides your facility with a unique opportunity to improve your workflow, productivity and patient outcomes through several key areas:

- **Leverage your Network Infrastructure** – Build on your existing, non-proprietary hospital infrastructure components and an open architecture design. The Draeger system uses standard technology, both wired and wireless (all 802.11b/g). Eliminates the need for a separate expense network/antenna system.
- **Standardization** – Optimize your performance through consistent technology to allow movement of assets across care units, enable flexibility in staff utilization, reduce training time, protect prior investments and improve productivity.
- **Mobility** – Move patients and information without compromising the level of care or surveillance.
- **Scalability** – Maximize assets with monitors that accommodate all acuity levels and patient types and offer a pathway to the future.

Page 2 / 2

Thank you again for this opportunity. We look forward to a potential long-term and mutually successful relationship.

Sincerely,

Jeff Ritchie

Jeff Ritchie
Sales Executive, Monitoring\IT Solutions – East Region

Draeger Medical, Inc.
3135 Quarry Road
Telford, PA 18969 USA
Mobile +1 315-679-0268
jeff.ritchie@draeger.com
www.draeger.com

Dräger. Technology for Life®



State of West
Virginia

Solicitation No.
CRFQ 0506
WEH1700000007

Telemetry
System

State of West Virginia CRFQ Form

DMI Exceptions to Request for
Quotation, General Terms and
Conditions, and Certification
and Signature Page

Specifications and Dräger Monitoring
Project Template

Pricing Page
and Price Quotations

HIPAA Business Associate Addendum

Purchasing Affidavit

Product Literature



Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

State of West Virginia
 Request for Quotation
 26 — Medical

Proc Folder: 206735

Doc Description: Telemetry

Proc Type: Central Purchase Order

| Date Issued | Solicitation Closes | Solicitation No | Version |
|-------------|------------------------|-------------------------|---------|
| 2016-12-06 | 2017-01-03 13:30:00 | CRFQ 0506 WEH1700000007 | 1 |

BID RECEIVING LOCATION
 BID CLERK
 DEPARTMENT OF ADMINISTRATION
 PURCHASING DIVISION
 2019 WASHINGTON ST E
 CHARLESTON WV 25305
 US

VENDOR
 Vendor Name, Address and Telephone Number:
 Draeger Medical, Inc.
 3135 Quarry Road
 Telford, PA 18969
 1-800-437-2437
 (1-800-4DRAEGER)

FOR INFORMATION CONTACT THE BUYER
 April Battle
 (304) 558-0067
 april.e.battle@wv.gov

Draeger, Inc.
 Signature XBY:  FEIN # 23-1699096 DATE 1/3/17

All offers subject to all terms and conditions contained in this solicitation

Timothy S Rugel, Sr. Manager of Finance

The West Virginia Purchasing Division is soliciting bids on behalf of the West Virginia Department of Health and Human Resources (WVDHHR), Bureau for Behavioral Health and Health Facilities (BHFF), Welch Community Hospital to establish a contract for the one-time purchase of fifteen (15) bedside monitors, ten (10) medical surgical wearable patient monitors, and three (3) information centers, and to provide installation and in-service training for medical staff.

| | |
|--|---|
| PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV24801 US | PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV 24801 US |
|--|---|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|------------------|----------|------------|------------|-------------|
| 1 | Bedside Monitors | 15.00000 | EA | | |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 42181719 | | | |

Extended Description :

3.1.1 Bedside monitors

| | |
|--|---|
| PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV24801 US | PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV 24801 US |
|--|---|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 2 | Medical surgical wearable patient monitors | 10.00000 | EA | | |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 42181719 | | | |

Extended Description :

3.1.2 Medical surgical wearable patient monitors

| | |
|--|---|
| PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV24801 US | PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV 24801 US |
|--|---|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|---------------------|---------|------------|------------|-------------|
| 3 | Information centers | 3.00000 | EA | | |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 42181719 | | | |

Extended Description :
3.1.3 Information centers

| | |
|--|---|
| PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV24801 US | PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV 24801 US |
|--|---|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|--------------|---------|------------|------------|-------------|
| 4 | Warranty | 1.00000 | EA | | |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 84101503 | | | |

Extended Description :
3.1.4 Warranty

| | |
|--|---|
| PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV24801 US | PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV 24801 US |
|--|---|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|--------------|---------|------------|------------|-------------|
| 5 | Manual/CDs | 1.00000 | EA | | |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 55101521 | | | |

Extended Description :

3.1.5 Manual/CDs

| | |
|--|---|
| PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV24801 US | PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV 24801 US |
|--|---|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|--------------|---------|------------|------------|-------------|
| 6 | Installation | 1.00000 | EA | | |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 81111809 | | | |

Extended Description :

3.1.6 Installation

| | |
|--|---|
| PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV24801 US | PROCUREMENT OFFICER - 304-436-8708 HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL 454 MCDOWELL ST WELCH WV 24801 US |
|--|---|

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|--------------------------|---------|------------|------------|-------------|
| 7 | In-service medical staff | 1.00000 | EA | | |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 86000000 | | | |

Extended Description :

3.1.7 In-service medical staff

| Line | Event | Event Date |
|------|---------------|------------|
| 1 | Questions Due | 2016-12-20 |

| | | | |
|---------------------|--------------------------------|--|------------------------------|
| WEH170000007 | Document Phase Final | Document Description Telemetry | Page 5 of 5 |
|---------------------|--------------------------------|--|------------------------------|

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

DI Exceptions to the State of West Virginia Request for Quotation
Please contact DI to review and negotiate mutually agreeable terms.

Solicitation No. CRFQ 0506 WEH1700000007

26- Medical; Proc Folder: 206735; Doc Description: Telemetry

1. Section 25. Assignment. Add the following language to the end of the first sentence:

“...unless it is to a parent, affiliate or subsidiary as part of a merger or consolidation without the prior written consent of the other party.”

2. Section 26 Warranty. This section shall be replaced in its entirety with the following:

“Vendor warrants that the Products manufactured by Vendor and sold hereunder shall be free from defects in material or workmanship under normal use and service for the warranty period. Unless otherwise set forth in a separate warranty statement covering the Products to be provided by Vendor, the warranty period shall commence on the date that the Products are delivered to Customer and shall continue for twelve (12) consecutive months except for the following: (a) Vendor’s workplace infrastructure products (“WI Products”) consisting of the Ponta, Agila, Movita, Gemina and Pendula are warranted for a period of two (2) years from the delivery date, (b) Bearing and brake assemblies related to WI Products are warranted for a period of seven (7) years from the delivery date, (c) Used/refurbished Vendor Products are warranted for a period of ninety (90) days from the delivery date, (d) All sensors, accessories, complementary products and spare parts are warranted for ninety (90) days from the delivery date, (e) Factory repairs and service exchange replacements are warranted for ninety (90) days from the delivery date, (f) Expendable/disposable/consumable goods are warranted at time of delivery only, and (g) Information systems/software will operate in all material respects in conformity with Vendor’s published specifications, under normal use, for a period of ninety (90) days from the earlier of implementation sign-off or first productive use as set forth in the applicable license. Vendor makes no warranty for any third party or other products other than those Products expressly covered under the terms of this Agreement. Customer’s sole warranty for any third party products, if any, is the original manufacturer’s warranty, which DMI agrees to pass on to Customer, as applicable.

No warranty extended by Vendor shall apply to any Products: (a) which have been damaged by accident, misuse, abuse, negligence, improper application or alteration or by a force majeure occurrence or by Customer’s failure to maintain the recommended operating environment and line conditions; (b) which are defective due to unauthorized attempts to repair, relocate, maintain, service, add to or modify the Products by Customer or any third party or due to the attachment and/or use of non-Vendor supplied equipment without Vendor’s prior written approval; (c) which failed due to causes from within non-DMI supplied equipment; and/or (d) which have been damaged from the use of operating or cleaning supplies or consumable parts not approved by Vendor. Vendor’s obligation under this warranty is limited to the repair or replacement of or credit for, at Vendor’s option, defective parts. Vendor may effectuate such repair at Customer’s facility, and Customer shall furnish Vendor safe and sufficient access for such repair. Repair or replacement may be with parts or products that are new, used or refurbished. Repairs or replacements shall not interrupt, extend or prolong the term of the warranty. Customer shall, upon Vendor’s request, return the non-complying Product or part to Vendor pursuant to the terms of Vendor’s

Return Policy. Customer shall pay Vendor its normal charges for service and parts for any inspection, repair or replacement that is not, in Vendor's sole judgment, required by noncompliance with the warranty set forth in this Section 26.

This warranty is made on condition that immediate written notice of any noncompliance be given to Vendor and Vendor's inspection reveals that the Customer's claim is valid under the terms of this warranty.

VENDOR MAKES NO WARRANTY OTHER THAN THE ONE SET FORTH HEREIN OR THAT WHICH MAY BE PROVIDED IN A SEPARATE WARRANTY COVERING THE APPLICABLE PRODUCT. SUCH WARRANTY IS IN LIEU OF ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO ANY EXPRESS OR IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND SUCH CONSTITUTES THE ONLY WARRANTY MADE WITH RESPECT TO THE PRODUCTS AND ANY DEFECT, DEFICIENCY OR NONCONFORMITY IN ANY PRODUCT, SERVICE OR OTHER ITEM FURNISHED UNDER THIS AGREEMENT."

3. **Section 36 Indemnification.** Add the following at the end of (1) after the word Contract:

"on behalf of Vendor"

4. **Section 43. Preference for use of Domestic Aluminum, Glass, and Steel.** This section shall be removed in its entirety since it does not apply to the product quoted by the Vendor.

The following sections shall be added to the General Terms and Conditions section:

1. **Acceptance.**

"Unless otherwise agreed by Vendor in writing, all Products delivered by Vendor to Customer hereunder shall be deemed to have been accepted by Customer the earlier of (i) the date Customer signs an acceptance certificate provided by Vendor for any Products, (ii) the date Customer first uses the Products for patient use, or (iii) thirty (30) days after delivery of the Products to Customer."

2. **LIMITATION OF LIABILITY AND DISCLAIMER.**

Excluding third party claims for personal injury or death arising as a result of a proven defect in a Vendor Product, in no event shall Vendor's liability to Customer hereunder exceed the actual loss or damage sustained by Customer, up to the purchase price of the Products.

VENDOR SHALL NOT BE LIABLE FOR ANY LOSS OF USE, REVENUE OR ANTICIPATED PROFITS, LOSS OF STORED, TRANSMITTED OR RECORDED DATA, OR FOR ANY INCIDENTAL, UNFORESEEN, SPECIAL, PUNITIVE OR CONSEQUENTIAL DAMAGES ARISING OUT OF OR IN CONNECTION WITH THIS AGREEMENT OR THE SALE OR USE OF THE PRODUCTS. THE FOREGOING IS A SEPARATE, ESSENTIAL TERM OF THIS

**AGREEMENT AND SHALL BE EFFECTIVE UPON THE FAILURE OF ANY REMEDY,
EXCLUSIVE OR NOT.**

INSTRUCTIONS TO VENDORS SUBMITTING BIDS

1. REVIEW DOCUMENTS THOROUGHLY: The attached documents contain a solicitation for bids. Please read these instructions and all documents attached in their entirety. These instructions provide critical information about requirements that if overlooked could lead to disqualification of a Vendor's bid. All bids must be submitted in accordance with the provisions contained in these instructions and the Solicitation. Failure to do so may result in disqualification of Vendor's bid.

2. MANDATORY TERMS: The Solicitation may contain mandatory provisions identified by the use of the words "must," "will," and "shall." Failure to comply with a mandatory term in the Solicitation will result in bid disqualification.

3. PREBID MEETING: The item identified below shall apply to this Solicitation.

A pre-bid meeting will not be held prior to bid opening

A NON-MANDATORY PRE-BID meeting will be held at the following place and time:

A MANDATORY PRE-BID meeting will be held at the following place and time:

All Vendors submitting a bid must attend the mandatory pre-bid meeting. Failure to attend the mandatory pre-bid meeting shall result in disqualification of the Vendor's bid. No one person attending the pre-bid meeting may represent more than one Vendor.

An attendance sheet provided at the pre-bid meeting shall serve as the official document verifying attendance. The State will not accept any other form of proof or documentation to verify attendance. Any person attending the pre-bid meeting on behalf of a Vendor must list on the attendance sheet his or her name and the name of the Vendor he or she is representing.

Additionally, the person attending the pre-bid meeting should include the Vendor's E-Mail address, phone number, and Fax number on the attendance sheet. It is the Vendor's responsibility to locate the attendance sheet and provide the required information. Failure to complete the attendance sheet as required may result in disqualification of Vendor's bid.

All Vendors should arrive prior to the starting time for the pre-bid. Vendors who arrive after the starting time but prior to the end of the pre-bid will be permitted to sign in, but are charged with knowing all matters discussed at the pre-bid.

Questions submitted at least five business days prior to a scheduled pre-bid will be discussed at the pre-bid meeting if possible. Any discussions or answers to questions at the pre-bid meeting are preliminary in nature and are non-binding. Official and binding answers to questions will be published in a written addendum to the Solicitation prior to bid opening.

4. VENDOR QUESTION DEADLINE: Vendors may submit questions relating to this Solicitation to the Purchasing Division. Questions must be submitted in writing. All questions must be submitted on or before the date listed below and to the address listed below in order to be considered. A written response will be published in a Solicitation addendum if a response is possible and appropriate. Non-written discussions, conversations, or questions and answers regarding this Solicitation are preliminary in nature and are nonbinding.

Submitted e-mails should have solicitation number in the subject line.

Question Submission Deadline: December 20, 2016, at 3:00 PM EST

Submit Questions to: April Battle, Buyer 22
2019 Washington Street, East
Charleston, WV 25305
Fax: (304) 558-4115 (Vendors should not use this fax number for bid submission)
Email: april.e.battle@wv.gov

5. VERBAL COMMUNICATION: Any verbal communication between the Vendor and any State personnel is not binding, including verbal communication at the mandatory pre-bid conference. Only information issued in writing and added to the Solicitation by an official written addendum by the Purchasing Division is binding.

6. BID SUBMISSION: All bids must be submitted electronically through wvOASIS or signed and delivered by the Vendor to the Purchasing Division at the address listed below on or before the date and time of the bid opening. Any bid received by the Purchasing Division staff is considered to be in the possession of the Purchasing Division and will not be returned for any reason. The Purchasing Division will not accept bids, modification of bids, or addendum acknowledgment forms via e-mail. Acceptable delivery methods include electronic submission via wvOASIS, hand delivery, delivery by courier, or facsimile.

The bid delivery address is:
Department of Administration, Purchasing Division
2019 Washington Street East
Charleston, WV 25305-0130

A bid that is not submitted electronically through wvOASIS should contain the information listed below on the face of the envelope or the bid may be rejected by the Purchasing Division.:

SEALED BID: Telemetry
BUYER: April Battle, Buyer 22
SOLICITATION NO.: CRFQ 0506 WEH1700000007
BID OPENING DATE: January 3, 2017
BID OPENING TIME: 1:30 PM EST
FAX NUMBER: (304) 558-3970

The Purchasing Division may prohibit the submission of bids electronically through wvOASIS at its sole discretion. Such a prohibition will be contained and communicated in the wvOASIS system resulting in the Vendor's inability to submit bids through wvOASIS. Submission of a response to an Expression or Interest or Request for Proposal is not permitted in wvOASIS.

For Request For Proposal ("RFP") Responses Only: In the event that Vendor is responding to a request for proposal, the Vendor shall submit one original technical and one original cost proposal plus _____ convenience copies of each to the Purchasing Division at the address shown above. Additionally, the Vendor should identify the bid type as either a technical or cost proposal on the face of each bid envelope submitted in response to a request for proposal as follows:

BID TYPE: (This only applies to CRFP)

- Technical
 Cost

7. BID OPENING: Bids submitted in response to this Solicitation will be opened at the location identified below on the date and time listed below. Delivery of a bid after the bid opening date and time will result in bid disqualification. For purposes of this Solicitation, a bid is considered delivered when confirmation of delivery is provided by wvOASIS (in the case of electronic submission) or when the bid is time stamped by the official Purchasing Division time clock (in the case of hand delivery).

Bid Opening Date and Time: January 3, 2017, at 1:30 PM EST

**Bid Opening Location: Department of Administration, Purchasing Division
2019 Washington Street East
Charleston, WV 25305-0130**

8. ADDENDUM ACKNOWLEDGEMENT: Changes or revisions to this Solicitation will be made by an official written addendum issued by the Purchasing Division. Vendor should acknowledge receipt of all addenda issued with this Solicitation by completing an Addendum Acknowledgment Form, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

9. BID FORMATTING: Vendor should type or electronically enter the information onto its bid to prevent errors in the evaluation. Failure to type or electronically enter the information may result in bid disqualification.

10. ALTERNATES: Any model, brand, or specification listed in this Solicitation establishes the acceptable level of quality only and is not intended to reflect a preference for, or in any way favor, a particular brand or vendor. Vendors may bid alternates to a listed model or brand provided that the alternate is at least equal to the model or brand and complies with the required specifications. The equality of any alternate being bid shall be determined by the State at its sole discretion. Any Vendor bidding an alternate model or brand should clearly identify the alternate items in its bid and should include manufacturer's specifications, industry literature, and/or any other relevant documentation demonstrating the equality of the alternate items. Failure to provide information for alternate items may be grounds for rejection of a Vendor's bid.

11. EXCEPTIONS AND CLARIFICATIONS: The Solicitation contains the specifications that shall form the basis of a contractual agreement. Vendor shall clearly mark any exceptions, clarifications, or other proposed modifications in its bid. Exceptions to, clarifications of, or modifications of a requirement or term and condition of the Solicitation may result in bid disqualification.

12. COMMUNICATION LIMITATIONS: In accordance with West Virginia Code of State Rules §148-1-6.6, communication with the State of West Virginia or any of its employees regarding this Solicitation during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited without prior Purchasing Division approval. Purchasing Division approval for such communication is implied for all agency delegated and exempt purchases.

13. REGISTRATION: Prior to Contract award, the apparent successful Vendor must be properly registered with the West Virginia Purchasing Division and must have paid the \$125 fee, if applicable.

14. UNIT PRICE: Unit prices shall prevail in cases of a discrepancy in the Vendor's bid.

15. PREFERENCE: Vendor Preference may only be granted upon written request and only in accordance with the West Virginia Code § 5A-3-37 and the West Virginia Code of State Rules. A Vendor Preference Certificate form has been attached hereto to allow Vendor to apply for the preference. Vendor's failure to submit the Vendor Preference Certificate form with its bid will result in denial of Vendor Preference. Vendor Preference does not apply to construction projects.

16. SMALL, WOMEN-OWNED, OR MINORITY-OWNED BUSINESSES: For any solicitations publicly advertised for bid, in accordance with West Virginia Code §5A-3-37(a)(7) and W. Va. CSR § 148-22-9, any non-resident vendor certified as a small, women-owned, or minority-owned business under W. Va. CSR § 148-22-9 shall be provided the same preference made available to any resident vendor. Any non-resident small, women-owned, or minority-owned business must identify itself as such in writing, must submit that writing to the Purchasing Division with its bid, and must be properly certified under W. Va. CSR § 148-22-9 prior to contract award to receive the preferences made available to resident vendors. Preference for a non-resident small, women-owned, or minority owned business shall be applied in accordance with W. Va. CSR § 148-22-9.

17. WAIVER OF MINOR IRREGULARITIES: The Director reserves the right to waive minor irregularities in bids or specifications in accordance with West Virginia Code of State Rules § 148-1-4.6.

18. ELECTRONIC FILE ACCESS RESTRICTIONS: Vendor must ensure that its submission in wvOASIS can be accessed and viewed by the Purchasing Division staff immediately upon bid opening. The Purchasing Division will consider any file that cannot be immediately accessed and viewed at the time of the bid opening (such as, encrypted files, password protected files, or incompatible files) to be blank or incomplete as context requires, and are therefore unacceptable. A vendor will not be permitted to unencrypt files, remove password protections, or resubmit documents after bid opening to make a file viewable if those documents are required with the bid. A Vendor may be required to provide document passwords or remove access restrictions to allow the Purchasing Division to print or electronically save documents provided that those documents are viewable by the Purchasing Division prior to obtaining the password or removing the access restriction.

19. NON-RESPONSIBLE: The Purchasing Division Director reserves the right to reject the bid of any vendor as Non-Responsible in accordance with W. Va. Code of State Rules § 148-1-5.3, when the Director determines that the vendor submitting the bid does not have the capability to fully perform, or lacks the integrity and reliability to assure good-faith performance.”

20. ACCEPTANCE/REJECTION: The State may accept or reject any bid in whole, or in part in accordance with W. Va. Code of State Rules § 148-1-4.5. and § 148-1-6.4.b.”

21. YOUR SUBMISSION IS A PUBLIC DOCUMENT: Vendor's entire response to the Solicitation and the resulting Contract are public documents. As public documents, they will be disclosed to the public following the bid/proposal opening or award of the contract, as required by the competitive bidding laws of West Virginia Code §§ 5A-3-1 et seq., 5-22-1 et seq., and 5G-1-1 et seq. and the Freedom of Information Act West Virginia Code §§ 29B-1-1 et seq.

DO NOT SUBMIT MATERIAL YOU CONSIDER TO BE CONFIDENTIAL, A TRADE SECRET, OR OTHERWISE NOT SUBJECT TO PUBLIC DISCLOSURE.

Submission of any bid, proposal, or other document to the Purchasing Division constitutes your explicit consent to the subsequent public disclosure of the bid, proposal, or document. The Purchasing Division will disclose any document labeled "confidential," "proprietary," "trade secret," "private," or labeled with any other claim against public disclosure of the documents, to include any "trade secrets" as defined by West Virginia Code § 47-22-1 et seq. All submissions are subject to public disclosure without notice.

GENERAL TERMS AND CONDITIONS:

1. CONTRACTUAL AGREEMENT: Issuance of a Award Document signed by the Purchasing Division Director, or his designee, and approved as to form by the Attorney General's office constitutes acceptance of this Contract made by and between the State of West Virginia and the Vendor. Vendor's signature on its bid signifies Vendor's agreement to be bound by and accept the terms and conditions contained in this Contract.

2. DEFINITIONS: As used in this Solicitation/Contract, the following terms shall have the meanings attributed to them below. Additional definitions may be found in the specifications included with this Solicitation/Contract.

2.1. "Agency" or "Agencies" means the agency, board, commission, or other entity of the State of West Virginia that is identified on the first page of the Solicitation or any other public entity seeking to procure goods or services under this Contract.

2.2. "Bid" or "Proposal" means the vendors submitted response to this solicitation.

2.3. "Contract" means the binding agreement that is entered into between the State and the Vendor to provide the goods or services requested in the Solicitation.

2.4. "Director" means the Director of the West Virginia Department of Administration, Purchasing Division.

2.5. "Purchasing Division" means the West Virginia Department of Administration, Purchasing Division.

2.6. "Award Document" means the document signed by the Agency and the Purchasing Division, and approved as to form by the Attorney General, that identifies the Vendor as the contract holder.

2.7. "Solicitation" means the official notice of an opportunity to supply the State with goods or services that is published by the Purchasing Division.

2.8. "State" means the State of West Virginia and/or any of its agencies, commissions, boards, etc. as context requires.

2.9. "Vendor" or "Vendors" means any entity submitting a bid in response to the Solicitation, the entity that has been selected as the lowest responsible bidder, or the entity that has been awarded the Contract as context requires.

3. CONTRACT TERM; RENEWAL; EXTENSION: The term of this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below:

Term Contract

Initial Contract Term: This Contract becomes effective on _____ and extends for a period of _____ year(s).

Renewal Term: This Contract may be renewed upon the mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). Any request for renewal should be submitted to the Purchasing Division thirty (30) days prior to the expiration date of the initial contract term or appropriate renewal term. A Contract renewal shall be in accordance with the terms and conditions of the original contract. Renewal of this Contract is limited to _____ successive one (1) year periods or multiple renewal periods of less than one year, provided that the multiple renewal periods do not exceed _____ months in total. Automatic renewal of this Contract is prohibited. Notwithstanding the foregoing, Purchasing Division approval is not required on agency delegated or exempt purchases. Attorney General approval may be required for vendor terms and conditions.

Delivery Order Limitations: In the event that this contract permits delivery orders, a delivery order may only be issued during the time this Contract is in effect. Any delivery order issued within one year of the expiration of this Contract shall be effective for one year from the date the delivery order is issued. No delivery order may be extended beyond one year after this Contract has expired.

Fixed Period Contract: This Contract becomes effective upon Vendor's receipt of the notice to proceed and must be completed within ninety (90) calendar days.

Fixed Period Contract with Renewals: This Contract becomes effective upon Vendor's receipt of the notice to proceed and part of the Contract more fully described in the attached specifications must be completed within _____ days.

Upon completion, the vendor agrees that maintenance, monitoring, or warranty services will be provided for one year thereafter with an additional _____ successive one year renewal periods or multiple renewal periods of less than one year provided that the multiple renewal periods do not exceed _____ months in total. Automatic renewal of this Contract is prohibited.

One Time Purchase: The term of this Contract shall run from the issuance of the Award Document until all of the goods contracted for have been delivered, but in no event will this Contract extend for more than one fiscal year.

Other: See attached.

4. NOTICE TO PROCEED: Vendor shall begin performance of this Contract immediately upon receiving notice to proceed unless otherwise instructed by the Agency. Unless otherwise specified, the fully executed Award Document will be considered notice to proceed.

5. QUANTITIES: The quantities required under this Contract shall be determined in accordance with the category that has been identified as applicable to this Contract below.

Open End Contract: Quantities listed in this Solicitation are approximations only, based on estimates supplied by the Agency. It is understood and agreed that the Contract shall cover the quantities actually ordered for delivery during the term of the Contract, whether more or less than the quantities shown.

Service: The scope of the service to be provided will be more clearly defined in the specifications included herewith.

Combined Service and Goods: The scope of the service and deliverable goods to be provided will be more clearly defined in the specifications included herewith.

One Time Purchase: This Contract is for the purchase of a set quantity of goods that are identified in the specifications included herewith. Once those items have been delivered, no additional goods may be procured under this Contract without an appropriate change order approved by the Vendor, Agency, Purchasing Division, and Attorney General's office.

6. EMERGENCY PURCHASES: The Purchasing Division Director may authorize the Agency to purchase goods or services in the open market that Vendor would otherwise provide under this Contract if those goods or services are for immediate or expedited delivery in an emergency. Emergencies shall include, but are not limited to, delays in transportation or an unanticipated increase in the volume of work. An emergency purchase in the open market, approved by the Purchasing Division Director, shall not constitute a breach of this Contract and shall not entitle the Vendor to any form of compensation or damages. This provision does not excuse the State from fulfilling its obligations under a One Time Purchase contract.

7. REQUIRED DOCUMENTS: All of the items checked below must be provided to the Purchasing Division by the Vendor as specified below.

BID BOND (Construction Only): Pursuant to the requirements contained in W. Va. Code § 5-22-1(c), All Vendors submitting a bid on a construction project shall furnish a valid bid bond in the amount of five percent (5%) of the total amount of the bid protecting the State of West Virginia. The bid bond must be submitted with the bid.

PERFORMANCE BOND: The apparent successful Vendor shall provide a performance bond in the amount of _____. The performance bond must be received by the Purchasing Division prior to Contract award. On construction contracts, the performance bond must be 100% of the Contract value.

LABOR/MATERIAL PAYMENT BOND: The apparent successful Vendor shall provide a labor/material payment bond in the amount of 100% of the Contract value. The labor/material payment bond must be delivered to the Purchasing Division prior to Contract award.

In lieu of the Bid Bond, Performance Bond, and Labor/Material Payment Bond, the Vendor may provide certified checks, cashier's checks, or irrevocable letters of credit. Any certified check, cashier's check, or irrevocable letter of credit provided in lieu of a bond must be of the same amount and delivered on the same schedule as the bond it replaces. A letter of credit submitted in lieu of a performance and labor/material payment bond will only be allowed for projects under \$100,000. Personal or business checks are not acceptable.

MAINTENANCE BOND: The apparent successful Vendor shall provide a two (2) year maintenance bond covering the roofing system. The maintenance bond must be issued and delivered to the Purchasing Division prior to Contract award.

INSURANCE: The apparent successful Vendor shall furnish proof of the following insurance prior to Contract award and shall list the state as a certificate holder:

Commercial General Liability Insurance: In the amount of \$1,000,000.00
_____ or more.

Builders Risk Insurance: In an amount equal to 100% of the amount of the Contract.

The apparent successful Vendor shall also furnish proof of any additional insurance requirements contained in the specifications prior to Contract award regardless of whether or not that insurance requirement is listed above.

LICENSE(S) / CERTIFICATIONS / PERMITS: In addition to anything required under the Section entitled Licensing, of the General Terms and Conditions, the apparent successful Vendor shall furnish proof of the following licenses, certifications, and/or permits prior to Contract award, in a form acceptable to the Purchasing Division.

The apparent successful Vendor shall also furnish proof of any additional licenses or certifications contained in the specifications prior to Contract award regardless of whether or not that requirement is listed above.

8. WORKERS' COMPENSATION INSURANCE: The apparent successful Vendor shall comply with laws relating to workers compensation, shall maintain workers' compensation insurance when required, and shall furnish proof of workers' compensation insurance upon request.

9. LITIGATION BOND: The Director reserves the right to require any Vendor that files a protest of an award to submit a litigation bond in the amount equal to one percent of the lowest bid submitted or \$5,000, whichever is greater. The entire amount of the bond shall be forfeited if the hearing officer determines that the protest was filed for frivolous or improper purpose, including but not limited to, the purpose of harassing, causing unnecessary delay, or needless expense for the Agency. All litigation bonds shall be made payable to the Purchasing Division. In lieu of a bond, the protester may submit a cashier's check or certified check payable to the Purchasing Division. Cashier's or certified checks will be deposited with and held by the State Treasurer's office. If it is determined that the protest has not been filed for frivolous or improper purpose, the bond or deposit shall be returned in its entirety.

10. LIQUIDATED DAMAGES: Vendor shall pay liquidated damages in the amount of

N/A

for N/A

This clause shall in no way be considered exclusive and shall not limit the State or Agency's right to pursue any other available remedy.

11. ACCEPTANCE: Vendor's signature on its bid, or on the certification and signature page, constitutes an offer to the State that cannot be unilaterally withdrawn, signifies that the product or service proposed by vendor meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise indicated, and signifies acceptance of the terms and conditions contained in the Solicitation unless otherwise indicated.

12. PRICING: The pricing set forth herein is firm for the life of the Contract, unless specified elsewhere within this Solicitation/Contract by the State. A Vendor's inclusion of price adjustment provisions in its bid, without an express authorization from the State in the Solicitation to do so, may result in bid disqualification.

13. PAYMENT: Payment in advance is prohibited under this Contract. Payment may only be made after the delivery and acceptance of goods or services. The Vendor shall submit invoices, in arrears.

14. PURCHASING CARD ACCEPTANCE: The State of West Virginia currently utilizes a Purchasing Card program, administered under contract by a banking institution, to process payment for goods and services. The Vendor must accept the State of West Virginia's Purchasing Card for payment of all orders under this Contract unless the box below is checked.

Vendor is not required to accept the State of West Virginia's Purchasing Card as payment for all goods and services.

15. TAXES: The Vendor shall pay any applicable sales, use, personal property or any other taxes arising out of this Contract and the transactions contemplated thereby. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.

16. ADDITIONAL FEES: Vendor is not permitted to charge additional fees or assess additional charges that were not either expressly provided for in the solicitation published by the State of West Virginia or included in the unit price or lump sum bid amount that Vendor is required by the solicitation to provide. Including such fees or charges as notes to the solicitation may result in rejection of vendor's bid. Requesting such fees or charges be paid after the contract has been awarded may result in cancellation of the contract.

17. FUNDING: This Contract shall continue for the term stated herein, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise made available, this Contract becomes void and of no effect beginning on July 1 of the fiscal year for which funding has not been appropriated or otherwise made available.

18. CANCELLATION: The Purchasing Division Director reserves the right to cancel this Contract immediately upon written notice to the vendor if the materials or workmanship supplied do not conform to the specifications contained in the Contract. The Purchasing Division Director may also cancel any purchase or Contract upon 30 days written notice to the Vendor in accordance with West Virginia Code of State Rules § 148-1-6.1.e.

19. TIME: Time is of the essence with regard to all matters of time and performance in this Contract.

20. APPLICABLE LAW: This Contract is governed by and interpreted under West Virginia law without giving effect to its choice of law principles. Any information provided in specification manuals, or any other source, verbal or written, which contradicts or violates the West Virginia Constitution, West Virginia Code or West Virginia Code of State Rules is void and of no effect.

21. COMPLIANCE: Vendor shall comply with all applicable federal, state, and local laws, regulations and ordinances. By submitting a bid, Vendor acknowledges that it has reviewed, understands, and will comply with all applicable laws, regulations, and ordinances.

22. ARBITRATION: Any references made to arbitration contained in this Contract, Vendor's bid, or in any American Institute of Architects documents pertaining to this Contract are hereby deleted, void, and of no effect.

23. MODIFICATIONS: This writing is the parties' final expression of intent. Notwithstanding anything contained in this Contract to the contrary no modification of this Contract shall be binding without mutual written consent of the Agency, and the Vendor, with approval of the Purchasing Division and the Attorney General's office (Attorney General approval is as to form only). Any change to existing contracts that adds work or changes contract cost, and were not included in the original contract, must be approved by the Purchasing Division and the Attorney General's Office (as to form) prior to the implementation of the change or commencement of work affected by the change.

24. WAIVER: The failure of either party to insist upon a strict performance of any of the terms or provision of this Contract, or to exercise any option, right, or remedy herein contained, shall not be construed as a waiver or a relinquishment for the future of such term, provision, option, right, or remedy, but the same shall continue in full force and effect. Any waiver must be expressly stated in writing and signed by the waiving party.

25. SUBSEQUENT FORMS: The terms and conditions contained in this Contract shall supersede any and all subsequent terms and conditions which may appear on any form documents submitted by Vendor to the Agency or Purchasing Division such as price lists, order forms, invoices, sales agreements, or maintenance agreements, and includes internet websites or other electronic documents. Acceptance or use of Vendor's forms does not constitute acceptance of the terms and conditions contained thereon.

26. ASSIGNMENT: Neither this Contract nor any monies due, or to become due hereunder, may be assigned by the Vendor without the express written consent of the Agency, the Purchasing Division, the Attorney General's office (as to form only), and any other government agency or office that may be required to approve such assignments. Notwithstanding the foregoing, Purchasing Division approval may or may not be required on certain agency delegated or exempt purchases.

27. WARRANTY: The Vendor expressly warrants that the goods and/or services covered by this Contract will: (a) conform to the specifications, drawings, samples, or other description furnished or specified by the Agency; (b) be merchantable and fit for the purpose intended; and (c) be free from defect in material and workmanship.

28. STATE EMPLOYEES: State employees are not permitted to utilize this Contract for personal use and the Vendor is prohibited from permitting or facilitating the same.

29. BANKRUPTCY: In the event the Vendor files for bankruptcy protection, the State of West Virginia may deem this Contract null and void, and terminate this Contract without notice.

30. PRIVACY, SECURITY, AND CONFIDENTIALITY: The Vendor agrees that it 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/default.html>.

31. YOUR SUBMISSION IS A PUBLIC DOCUMENT: Vendor's entire response to the Solicitation and the resulting Contract are public documents. As public documents, they will be disclosed to the public following the bid/proposal opening or award of the contract, as required by the competitive bidding laws of West Virginia Code §§ 5A-3-1 et seq., 5-22-1 et seq., and 5G-1-1 et seq. and the Freedom of Information Act West Virginia Code § 29B-1-1 et seq.

DO NOT SUBMIT MATERIAL YOU CONSIDER TO BE CONFIDENTIAL, A TRADE SECRET, OR OTHERWISE NOT SUBJECT TO PUBLIC DISCLOSURE.

Submission of any bid, proposal, or other document to the Purchasing Division constitutes your explicit consent to the subsequent public disclosure of the bid, proposal, or document. The Purchasing Division will disclose any document labeled "confidential," "proprietary," "trade secret," "private," or labeled with any other claim against public disclosure of the documents, to include any "trade secrets" as defined by West Virginia Code § 47-22-1 et seq. All submissions are subject to public disclosure without notice.

32. LICENSING: In accordance with West Virginia Code of State Rules § 148-1-6.1.e, Vendor 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 agency or political subdivision. Upon request, the Vendor must provide all necessary releases to obtain information to enable the Purchasing Division Director or the Agency to verify that the Vendor is licensed and in good standing with the above entities.

33. ANTITRUST: In submitting a bid to, signing a contract with, or accepting a Award Document from any agency of the State of West Virginia, the Vendor agrees to 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 Vendor.

34. VENDOR CERTIFICATIONS: By signing its bid or entering into this Contract, Vendor certifies (1) that its bid or offer was made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, person or entity submitting a bid or offer for the same material, supplies, equipment or services; (2) that its bid or offer is in all respects fair and without collusion or fraud; (3) that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; and (4) that it has reviewed this Solicitation in its entirety; understands the requirements, terms and conditions, and other information contained herein.

Vendor's signature on its bid or offer also affirms that neither it nor its representatives have any interest, nor shall acquire any interest, direct or indirect, which would compromise the performance of its services hereunder. Any such interests shall be promptly presented in detail to the Agency. The individual signing this bid or offer on behalf of Vendor certifies that he or she is authorized by the Vendor to execute this bid or offer or any documents related thereto on Vendor's behalf; that he or she is authorized to bind the Vendor in a contractual relationship; and that, to the best of his or her knowledge, the Vendor has properly registered with any State agency that may require registration.

35. VENDOR RELATIONSHIP: The relationship of the Vendor to the State shall be that of an independent contractor and no principal-agent relationship or employer-employee relationship is contemplated or created by this Contract. The Vendor as an independent contractor is solely liable for the acts and omissions of its employees and agents. Vendor shall be responsible for selecting, supervising, and compensating any and all individuals employed pursuant to the terms of this Solicitation and resulting contract. Neither the Vendor, nor any employees or subcontractors of the Vendor, shall be deemed to be employees of the State for any purpose whatsoever. Vendor shall be exclusively responsible for payment of employees and contractors for all wages and salaries, taxes, withholding payments, penalties, fees, fringe benefits, professional liability insurance premiums, contributions to insurance and pension, or other deferred compensation plans, including but not limited to, Workers' Compensation and Social Security obligations, licensing fees, etc. and the filing of all necessary documents, forms, and returns pertinent to all of the foregoing.

Vendor shall hold harmless the State, and shall provide the State and Agency with a defense against any and all claims including, but not limited to, the foregoing payments, withholdings, contributions, taxes, Social Security taxes, and employer income tax returns.

36. INDEMNIFICATION: The Vendor agrees to indemnify, defend, and hold harmless the State and the Agency, their officers, and employees from and against: (1) Any claims or losses for services rendered by any subcontractor, person, or firm performing or supplying services, materials, or supplies in connection with the performance of the Contract; (2) Any claims or losses resulting to any person or entity injured or damaged by the Vendor, its officers, employees, or subcontractors by the publication, translation, reproduction, delivery, performance, use, or disposition of any data used under the Contract in a manner not authorized by the Contract, or by Federal or State statutes or regulations; and (3) Any failure of the Vendor, its officers, employees, or subcontractors to observe State and Federal laws including, but not limited to, labor and wage and hour laws.

37. PURCHASING AFFIDAVIT: In accordance with West Virginia Code § 5A-3-10a, all Vendors are required to sign, notarize, and submit the Purchasing Affidavit stating that neither the Vendor nor a related party owe a debt to the State in excess of \$1,000. The affidavit must be submitted prior to award, but should be submitted with the Vendor's bid. A copy of the Purchasing Affidavit is included herewith.

38. ADDITIONAL AGENCY AND LOCAL GOVERNMENT USE: This Contract may be utilized by other agencies, spending units, and political subdivisions of the State of West Virginia; county, municipal, and other local government bodies; and school districts ("Other Government Entities"). Any extension of this Contract to the aforementioned Other Government Entities must be on the same prices, terms, and conditions as those offered and agreed to in this Contract, provided that such extension is in compliance with the applicable laws, rules, and ordinances of the Other Government Entity. If the Vendor does not wish to extend the prices, terms, and conditions of its bid and subsequent contract to the Other Government Entities, the Vendor must clearly indicate such refusal in its bid. A refusal to extend this Contract to the Other Government Entities shall not impact or influence the award of this Contract in any manner.

39. CONFLICT OF INTEREST: Vendor, its officers or members or employees, shall not presently have or acquire an interest, direct or indirect, which would conflict with or compromise the performance of its obligations hereunder. Vendor shall periodically inquire of its officers, members and employees to ensure that a conflict of interest does not arise. Any conflict of interest discovered shall be promptly presented in detail to the Agency.

40. REPORTS: Vendor shall provide the Agency and/or the Purchasing Division with the following reports identified by a checked box below:

Such reports as the Agency and/or the Purchasing Division may request. Requested reports may include, but are not limited to, quantities purchased, agencies utilizing the contract, total contract expenditures by agency, etc.

Quarterly reports detailing the total quantity of purchases in units and dollars, along with a listing of purchases by agency. Quarterly reports should be delivered to the Purchasing Division via email at purchasing.requisitions@wv.gov.

41. BACKGROUND CHECK: In accordance with W. Va. Code § 15-2D-3, the Director of the Division of Protective Services shall require any service provider whose employees are regularly employed on the grounds or in the buildings of the Capitol complex or who have access to sensitive or critical information to submit to a fingerprint-based state and federal background inquiry through the state repository. The service provider is responsible for any costs associated with the fingerprint-based state and federal background inquiry.

After the contract for such services has been approved, but before any such employees are permitted to be on the grounds or in the buildings of the Capitol complex or have access to sensitive or critical information, the service provider shall submit a list of all persons who will be physically present and working at the Capitol complex to the Director of the Division of Protective Services for purposes of verifying compliance with this provision. The State reserves the right to prohibit a service provider's employees from accessing sensitive or critical information or to be present at the Capitol complex based upon results addressed from a criminal background check.

Service providers should contact the West Virginia Division of Protective Services by phone at (304) 558-9911 for more information.

42. PREFERENCE FOR USE OF DOMESTIC STEEL PRODUCTS: Except when authorized by the Director of the Purchasing Division pursuant to W. Va. Code § 5A-3-56, no contractor may use or supply steel products for a State Contract Project other than those steel products made in the United States. A contractor who uses steel products in violation of this section may be subject to civil penalties pursuant to W. Va. Code § 5A-3-56. As used in this section:

- a. "State Contract Project" means any erection or construction of, or any addition to, alteration of or other improvement to any building or structure, including, but not limited to, roads or highways, or the installation of any heating or cooling or ventilating plants or other equipment, or the supply of and materials for such projects, pursuant to a contract with the State of West Virginia for which bids were solicited on or after June 6, 2001.
- b. "Steel Products" means products rolled, formed, shaped, drawn, extruded, forged, cast, fabricated or otherwise similarly processed, or processed by a combination of two or more or such operations, from steel made by the open heath, basic oxygen, electric furnace, Bessemer or other steel making process. The Purchasing Division Director may, in writing, authorize the use of foreign steel products if:
- c. The cost for each contract item used does not exceed one tenth of one percent (.1%) of the total contract cost or two thousand five hundred dollars (\$2,500.00), whichever is greater. For the purposes of this section, the cost is the value of the steel product as delivered to the project; or
- d. The Director of the Purchasing Division determines that specified steel materials are not produced in the United States in sufficient quantity or otherwise are not reasonably available to meet contract requirements.

43. PREFERENCE FOR USE OF DOMESTIC ALUMINUM, GLASS, AND STEEL: In Accordance with W. Va. Code § 5-19-1 et seq., and W. Va. CSR § 148-10-1 et seq., for every contract or subcontract, subject to the limitations contained herein, for the construction, reconstruction, alteration, repair, improvement or maintenance of public works or for the purchase of any item of machinery or equipment to be used at sites of public works, only domestic aluminum, glass or steel products shall be supplied unless the spending officer determines, in writing, after the receipt of offers or bids, (1) that the cost of domestic aluminum, glass or steel products is unreasonable or inconsistent with the public interest of the State of West Virginia, (2) that domestic aluminum, glass or steel products are not produced in sufficient quantities to meet the contract requirements, or (3) the available domestic aluminum, glass, or steel do not meet the contract specifications. This provision only applies to public works contracts awarded in an amount more than fifty thousand dollars (\$50,000) or public works contracts that require more than ten thousand pounds of steel products.

The cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than twenty percent (20%) of the bid or offered price for foreign made aluminum, glass, or steel products. If the domestic aluminum, glass or steel products to be supplied or produced in a "substantial labor surplus area", as defined by the United States Department of Labor, the cost of domestic aluminum, glass, or steel products may be unreasonable if the cost is more than thirty percent (30%) of the bid or offered price for foreign made aluminum, glass, or steel products. This preference shall be applied to an item of machinery or equipment, as indicated above, when the item is a single unit of equipment or machinery manufactured primarily of aluminum, glass or steel, is part of a public works contract and has the sole purpose or of being a permanent part of a single public works project. This provision does not apply to equipment or machinery purchased by a spending unit for use by that spending unit and not as part of a single public works project.

All bids and offers including domestic aluminum, glass or steel products that exceed bid or offer prices including foreign aluminum, glass or steel products after application of the preferences provided in this provision may be reduced to a price equal to or lower than the lowest bid or offer price for foreign aluminum, glass or steel products plus the applicable preference. If the reduced bid or offer prices are made in writing and supersede the prior bid or offer prices, all bids or offers, including the reduced bid or offer prices, will be reevaluated in accordance with this rule.

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

(Name, Title)

Jeff Ritchie

(Printed Name and Title)

3135 Quarry Road, Telford, PA 18969

(Address)

215 660 2413 / 215-721-5808

(Phone Number) / (Fax Number)

Jeff.Ritchie@draeger.com

(email address)

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

**

Draeger, Inc.

(Company)



(Authorized Signature) (Representative Name, Title)

Sr. Manager of Finance

Timothy S. Rugel, Sr. Manager of Finance

(Printed Name and Title of Authorized Representative)

1/3/17

(Date)

215-721-5400 / 215-721-5808

(Phone Number) (Fax Number)

**

EXCEPTIONS AND CLARIFICATIONS ARE NOTED IN THIS RFQ RESPONSE AND IN A SEPARATE DOCUMENT INCLUDED WITH VENDOR'S RESPONSES FOR THIS SOLICITATION.

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ 0506 WEH170000007

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Draeger, Inc.
Company


Authorized Signature

1/3/17
Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.

REQUEST FOR QUOTATION
CRFQ 0506 WEH1700000007
Telemetry System

SPECIFICATIONS

- 1. PURPOSE AND SCOPE:** The West Virginia Purchasing Division is soliciting bids on behalf of West Virginia Department of Health and Human Resources (WVDHHR), Bureau for Behavioral Health and Health Facilities (BHBF), Welch Community Hospital to establish a contract for the one time purchase of one time purchase of fifteen (15) bedside monitors, ten (10) medical surgical wearable patient monitors, and three (3) information centers. Vendor is to provide installation and in-service training for medical staff.

NOTE: This request is covered in part or in whole by federal funds. All bidders will be required to acknowledge and adhere to Attachment 1-Provisions Required for Federally Funded Procurements. Delivery Orders issued from contract awarded as a result of this solicitation may be funded in whole or in part with Federal Funds and thus this solicitation and its resulting awarded contract are subject to the requirements of Attachment 1: Provisions required for federally Funded Procurements.

- 2. DEFINITIONS:** The terms listed below shall have the meanings assigned to them below. Additional definitions can be found in section 2 of the General Terms and Conditions.
- 2.1 “Contract Item”** means one time purchase of fifteen (15) bedside monitors, ten (10) medical surgical wearable patient monitors, and three (3) information centers as more fully described by these specifications.
- 2.2 “Contract Services”** means to provide installation and in-service training of medical staff as more fully described in these specifications.
- 2.3 “Pricing Page”** means the pages, contained in wvOASIS or attached as Exhibit A, upon which Vendor should list its proposed price for the Contract Items.
- 2.4 “Solicitation”** means the official notice of an opportunity to supply the State with goods or services that is published by the Purchasing Division.

3. GENERAL REQUIREMENTS:

- 3.1 Mandatory Contract Item Requirements:** Contract Item must meet or exceed the mandatory requirements listed below.

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3.1.1 Bedside Monitors (Fifteen [15]in total-Seven [7] for Intensive Care Unit [ICU], Seven [7] for Emergency Department [ED], One [1] Post Anesthesia Care Unit[PACU]) must meet or exceed the mandatory requirements listed below. Bedside monitors proposed for this opportunity shall comply with the following specifications:

3.1.1.1 Measurement Features:

- 3.1.1.1.1** Must have electrocardiogram (ECG) monitoring. **MEETS**
- 3.1.1.1.2** Must have twelve (12)-lead ECG monitoring. **MEETS**
- 3.1.1.1.3** Must have multi-lead arrhythmia and ST segment analysis at the bedside on all available leads. **MEETS**
- 3.1.1.1.4** Must have QT/QTc (Q-wave T-wave/Q-wave T-wave interval correction) interval monitoring. **MEETS**
- 3.1.1.1.5** Must have capnography extensions to extend measurement capability by adding mainstream or side stream carbon dioxide (CO₂), a pressure and an additional pressure or temperature measurement plus optional cardiac output. **MEETS**
- 3.1.1.1.6** Must have pulse oximetry technologies for accurate performance even in cases with low perfusion. **MEETS**
- 3.1.1.1.7** Must have pulse pressure variation (PPV) that can be calculated from beat to beat arterial pressure valves. **MEETS**

3.1.1.2 Usability Features:

- 3.1.1.2.1** Must have menu hierarchy for access to all basic monitoring tasks. **MEETS**
- 3.1.1.2.2** Must have patient management with tabular and graphic trends. **MEETS**
- 3.1.1.2.3** Must have ventilation, hemodynamic and oxygenation calculations. **MEETS**
- 3.1.1.2.4** Must have a drug calculator. **MEETS**

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- 3.1.1.2.5 Must have settings profile functionality. **MEETS**
- 3.1.1.2.6 Must have automatic alarm limits. **MEETS**
- 3.1.1.2.7 Must have capability to silence alarms from bedside. **MEETS**
- 3.1.1.2.8 Must have multiple input devices: Touchscreen, mouse, and keyboard. **MEETS**
- 3.1.1.2.9 Must have a minimum of a ten (10) inch to a maximum nineteen (19) inch display with wide viewing angle, large numerics, and visible alarm limits with real time wave forms. **EXCEEDS C500 display has 17" display**
- 3.1.1.2.10 Must have graphical measurement windows showing which measurements are being used by which device. **MEETS**

3.1.1.3 Intended Use:

- 3.1.1.3.1 The monitors must be able to be used for monitoring, recording and alarming of multiple physiological parameters of adults and pediatrics in a hospital environment. **MEETS**

3.1.1.4 Modularity:

- 3.1.1.4.1 Shall have the ability to function as stand-alone or networked. **MEETS**

3.1.1.5 Upgradability:

- 3.1.1.5.1 Shall have the ability to be updated as practices and technologies advance. **MEETS**

3.1.1.6 Main Components:

- 3.1.1.6.1 The monitors must have color Liquid Crystal Display (LCD) displays with a wide viewing angle, providing high resolute waveform and data presentation. **MEETS**
- 3.1.1.6.2 The user interface must be designed for operation. **MEETS**
- 3.1.1.6.3 Must have keys with icons allowing monitoring task to be performed directly on the monitor screen. **MEETS**

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- 3.1.1.6.4 The monitors must display a minimum of six (6) measurement waves simultaneously. **MEETS - up to 10 waves simultaneously.**
- 3.1.1.6.5 The twelve (12)-lead ECG monitoring must display twelve (12) real-time ECG waves, with a rhythm strip and all ST values. **MEETS**
- 3.1.1.6.6 Must have multiple input devices such as mouse, track ball or barcode reader. **MEETS**
- 3.1.1.6.7 Must have mounting options for flexible space saving placement of the monitor. **MEETS**

3.1.1.7 Applications and Features:

- 3.1.1.7.1 The monitor must have multi-lead arrhythmia detection analysis on the patient's ECG waveform at the bedside. It must analyze for ventricular arrhythmias, calculate heart rate and generate alarms, including asystole, bradycardia, and ventricular fibrillation. **MEETS**
- 3.1.1.7.2 Shall have a minimum of twelve (12) leads of ST segment analysis that can be performed at bedside measuring ST elevation and depression generating alarms and events. Must have ability to trend ST changes, set high and low alarm limits, and set both ST and isoelectric measurement points. **MEETS**
- 3.1.1.7.3 Must have QT/QTc interval monitoring that provides the measured QT interval, the calculated heart-rate, corrected QTc value and a QTc value, which tracks variation in the QT interval in relation to a baseline value. **MEETS**
- 3.1.1.7.4 Must have twelve (12) -level ECG capability with twelve (12) real-time ECG waveforms that can be displayed simultaneously. **MEETS**
- 3.1.1.7.5 Must have pulse oximetry technology to perform accurately even in cases of low perfusion. **MEETS**
- 3.1.1.7.6 Must have choice of mainstream, side-stream and mainstream CO₂ monitoring for high quality measurements with intubated and non-intubated patients. **MEETS**
- 3.1.1.7.7 Must have drug calculator to help manage intravenous (IV) drug infusions by calculating drug dose, rate, amount, volume, concentration, and standardized rate. **MEETS**
- 3.1.1.7.8 Drug calculator must have ability to include a list of commonly used drugs. **MEETS**

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- 3.1.1.7.9 Events must be stored in a database for review and documented in a report or in a recording. **MEETS**
- 3.1.1.7.10 Screen layouts must be adjustable, allowing flexible display of measurement information. **MEETS**
- 3.1.1.7.11 Previous/next screen function must provide access to a minimum five (5) most recently modified screens. **MEETS**
- 3.1.1.7.12 Temperature, height and weight must have option of configuration metric or imperial units. **MEETS**
- 3.1.1.7.13 Pressure and gas measurements must have option to be displayed in both KPa (kilopascal) or displayed in mmHg (millimeter of Mercury). **MEETS**
- 3.1.1.7.14 The trends database must store a minimum of sixteen (16) measurement memories to a maximum of thirty-two (32). The measurement information must have the ability to be sampled at an interval of twelve (12) seconds, one (1) minute, or five (5) minutes, and stored for a minimum of forty-eight (48) hours. **MEETS**
- 3.1.1.7.15 Tabular trends (vital signs) must show dates for a minimum of sixteen (16) measurement memories in a tabular form. **MEETS**
- 3.1.1.7.16 The monitor must have capability to be portable for in-hospital transport. **MEETS**
- 3.1.1.7.17 Monitor must not exceed a maximum weight of ten and a half (10 ½) kilograms (kg). **MEETS**
- 3.1.1.7.18 The monitor must operate a minimum of four (4) hours on battery power. **Monitor up to 3 ½ hours on battery.**
- 3.1.1.7.19 The monitor must allow the transition from bedside monitoring to transport with no need to disconnect patient cables or adjust any settings. **MEETS**
- 3.1.1.7.20 Admit, discharge and transfer information must be shared between the networked monitor and information center. **MEETS**
- 3.1.1.7.21 Printers must have ability to print the following patient reports:
 - 3.1.1.7.21.1 Event review and episodes reports **MEETS**
 - 3.1.1.7.21.2 Twelve (12) -lead ECG reports **MEETS**

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- 3.1.1.7.21.3 Alarm limits reports **MEETS**
 - 3.1.1.7.21.4 Vital sign reports **MEETS**
 - 3.1.1.7.21.5 Graphic trends **MEETS**
 - 3.1.1.7.21.6 Cardiac output reports **MEETS**
 - 3.1.1.7.21.7 Wedge procedure reports **MEETS**
 - 3.1.1.7.21.8 Calculation reports **MEETS**
 - 3.1.1.7.21.9 Drug calculation reports **MEETS**
 - 3.1.1.7.21.10 Real-time wave reports **MEETS**
 - 3.1.1.7.22 Report templates must have ability to be tailored to hospital's specific requirements. **MEETS**
 - 3.1.1.7.23 Monitor must have ability to print on locally or centrally-connected printers. **MEETS**
 - 3.1.1.7.24 Alarm limits must be permanently visible on main screen. **MEETS**
 - 3.1.1.7.25 Alarm limits must provide graphic depiction of alarm limits in relation to the currently monitored measurement values and alarm limits must be adjustable. **MEETS**
 - 3.1.1.7.26 When alarm limits are exceeded, must have multiple ways of alerting staff. **MEETS**
 - 3.1.1.7.27 Alarms must have ability to be paused for a period of one (1), two (2), three (3), five (5), ten (10) minutes, or indefinitely. **MEETS – except for 10 Minutes**
 - 3.1.1.7.28 Monitors must have ability to be part of a wired or wireless hospital network system. **MEETS**
- 3.1.1.8 Clinical Calculation Set.**
- 3.1.1.8.1 Must have clinical calculation sets that include hemodynamic, oxygenation and ventilation. **MEETS**

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3.1.1.9 Information Centers Three (3)

- 3.1.1.9.1** Must have a minimum nineteen inch (19”) to a maximum thirty-two inch (32”) non-touch display. **MEETS**
- 3.1.1.9.2** Must have information center universal serial bus (USB) recorder. **MEETS**
- 3.1.1.9.3** Must have an information center printer. **MEETS**
- 3.1.1.9.4** Main screen displays must have waveforms and parameters for a minimum of eight (8) patients. **MEETS**
- 3.1.1.9.5** Must have a minimum two (2) channel recorder to a maximum four (4) channel recorder. **MEETS – 2 Channel recorder is thermal paper and 4 channel is laser printer.**
- 3.1.1.9.6** Must have a clinical review application to provide a detailed retrospective analysis of patient’s condition. **MEETS**
- 3.1.1.9.7** Must include all necessary PC hardware and connections. **MEETS**
- 3.1.1.9.8** Must have upgradeability. **MEETS**

3.1.2 Medical Surgical Wearable Patient Monitors must meet or exceed the mandatory requirements listed below.

3.1.2.1 Monitors:

- 3.1.2.1.1** Must have continuous electrocardiogram (ECG) monitoring with pulse oximetry option. **MEETS All devices have SpO2 standard-licenses per unit to provide monitoring of SpO2.**
- 3.1.2.1.2** Must have color touch screen display. **MEETS- color screen with touch button access below screen.**
- 3.1.2.1.3** Must have automatic sleep mode to conserve battery while maintaining privacy. **MEETS**
- 3.1.2.1.4** Must have ability to view patient status with a single touch. **MEETS**
- 3.1.2.1.5** Must have a minimum (2) channel of real time waveform. **MEETS - scroll to see to ECG vectors & SpO2.**
- 3.1.2.1.6** Must have a minimum four (4) screen formats. **MEETS – scroll to see ECG vectors & SpO2.**

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- 3.1.2.1.7 Must have flexible monitoring parameters. **MEETS**
- 3.1.2.1.8 Must have wide variety of measurements including ECG and SP0₂. **MEETS**
- 3.1.2.1.9 Must have ability to use disposable or rechargeable batteries. **MEETS – rechargeable.**
- 3.1.2.1.10 Must have battery status display on device and information center. **MEETS**
- 3.1.2.2 Alarms:
 - 3.1.2.2.1 Must display alarms for ECG and SPO₂. **MEETS**
 - 3.1.2.2.2 Must have touch review of current alarm settings, alarm histories, vital trends or activate monitor from sleep mode. **MEETS - activate monitor from sleep mode – Does not meet one touch review of alarm settings, alarm histories, & vital trend.**
- 3.1.2.3 Hospital Acquired Infections:
 - 3.1.2.3.1 Must have connectors that reduce collection of soils and liquids. **MEETS**
 - 3.1.2.3.2 The device must be smooth to allow wiping and support cleaning by a variety of standard low to high-level disinfectants. **MEETS**
 - 3.1.2.3.3 Must have reusable lead sets. **MEETS - Devices also support single use (disposable) lead sets.**
- 3.1.3 Information Center Description must meet or exceed the mandatory requirements listed below.
 - 3.1.3.1 Must have main screen for displaying real-time waves and parameters for a minimum of ten (10) patients. **MEETS**
 - 3.1.3.2 Must have separate patient window for viewing detailed real-time or stored data for individual patient. **MEETS**
 - 3.1.3.3 Must have central review station for reviewing a minimum of seventy-two (72) hours of stored patient monitoring data and a minimum of one hundred (100), thirty (30) second alarm records and saved strips, with a minimum of four (4) waves per event. **MEETS –strips are 20 seconds long.**
 - 3.1.3.4 Must support the telemetry system. **MEETS**
 - 3.1.3.5 Must support telemetry patient monitor. **MEETS**

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- 3.1.3.6 Must support cable-less measurements. **MEETS – monolead ECG wire available in 3, 5, 6 lead sets.**
- 3.1.3.7 Must support wearable patient monitor. **MEETS**
- 3.1.3.8 Must have web server that permits viewing of stored and viewable patient data from browser equipped personal computers (PCs) by way of hospital's information center. **MEETS**
- 3.1.3.9 Must have name and patient identification information from hospital information center when clinical data server is present. **MEETS – EMR software solutions are available.**
- 3.1.3.10 Must have real-time and stored patient monitoring data which includes full disclosure wave forms and parameters, alarms, multi-lead arrhythmia, ST segments events and trends. **MEETS**
- 3.1.3.11 Must have configurable central reports for one (1) or more patients that can be generated on demand or on a scheduled internal basis. **MEETS - not for scheduled internal basis.**
- 3.1.3.12 Must support printing of a predefined set of reports. **MEETS**
- 3.1.3.13 Must have tabular and graphical trend review. **MEETS**
- 3.1.3.14 Must support device locator option which remotely identifies the location of the telemetry devices. **MEETS – find feature identifies location of device.**
- 3.1.3.15 Must support communication with wired and wireless patient monitor. **MEETS**
- 3.1.3.16 **Patient Monitoring Data:**
 - 3.1.3.16.1 Must have patient data (waves, parameters, and alarms) obtained from patient monitors – (hard wired, wireless, telemetry) connected to the clinical network. **MEETS**
- 3.1.3.17 **Patient Data Display:**
 - 3.1.3.17.1 Must have patient monitoring data viewed on main screen and in more detail on a separate patient window. **MEETS**
 - 3.1.3.17.2 The main screen must display real-time waveforms, numeric and alarms for a minimum of ten (10) patients. **MEETS**

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- 3.1.3.17.3 Must have display a minimum of thirty-two (32) waveforms in either single or dual column formats. **MEETS**
- 3.1.3.17.4 Must have patient window directly accessible from main screen with greater data detail. **MEETS**

3.1.3.18 Alarm Response:

- 3.1.3.18.1 Must have color coding – capability to visually identify a patient in alarm and its severity on the main screen. **MEETS**
- 3.1.3.18.2 Must have multi-level, audible alarm tones that indicate alarms and their severity. **MEETS**
- 3.1.3.18.3 Must have ability to review most recent alarm and print strip immediately. **MEETS**
- 3.1.3.18.4 Must have ability to modify alarms with password protection. **MEETS**
- 3.1.3.18.5 Must have ability to turn off alarm. **MEETS**

3.1.3.19 Cableless Measurements:

- 3.1.3.19.1 Measurement must be displayed on information center monitoring telemetry, recording and alarming arterial oxygen saturation, pulse rate, blood pressure (adult and pediatric). **MEETS**

3.1.3.20 Recording and Printing:

- 3.1.3.20.1 Must have a two (2) Channel USB recorder that can record a minimum of one (1) and/or a maximum of two (2) real-time or delayed waveforms. **MEETS**
- 3.1.3.20.2 Must have a minimum of fifty millimeter (50 mm) wall thermal array recorder that provides high resolution, high quality waveforms. **MEETS**
- 3.1.3.20.3 Must print grid and waveforms simultaneously to assure accurate registration. **MEETS**
- 3.1.3.20.4 Recorder must have capability to record a minimum of two waveforms and a minimum of three lines of annotations. **MEETS**

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3.1.3.21 User Configuration:

3.1.3.21.1 Monitoring controls, display formats, alarm response and patient data must have ability to be configured to user performances with configuration tools. **MEETS**

3.1.3.21.2 Must have unit-wide configurations that are in password protected applications that can be modified for individual patients. **MEETS**

3.1.3.22 On-Line Help:

3.1.3.22.1 Must have on-line help available for both clinical application and service functions. **MEETS - also toll free support.**

3.1.3.23 Arrhythmia Monitoring:

3.1.3.23.1 Must have multi-lead arrhythmia monitoring on user selected primary and secondary leads. **MEETS**

3.1.3.23.2 Must have arrhythmia detector of the following alarms:

3.1.3.23.2.1 Asystole **MEETS**

3.1.3.23.2.2 Ventricular fibrillation **MEETS**

3.1.3.23.2.3 Ventricular tachycardia **MEETS**

3.1.3.23.2.4 Ventricular bradycardia **MEETS**

3.1.3.23.2.5 Extreme bradycardia **MEETS**

3.1.3.23.2.6 Extreme tachycardia **MEETS**

3.1.3.23.2.7 Pacer not captive **MEETS**

3.1.3.23.2.8 Pacer not pacing **MEETS**

3.1.3.23.2.9 Premature ventricular contraction (PVC)-min **MEETS**

3.1.3.23.2.10 Low heart rate **MEETS**

3.1.3.23.2.11 High heart rate **MEETS**

3.1.3.23.2.12 Irregular heart rate **MEETS**

3.1.3.23.2.13 Non-sustained V-Tach **MEETS**

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3.1.3.23.2.14 Ventricular rhythm **MEETS**

3.1.3.23.2.15 Run PVCs **MEETS**

3.1.3.23.2.16 Pair PVCs **MEETS**

3.1.3.23.2.17 Multiform PVCs **MEETS**

3.1.3.23.2.18 R on T PVC **MEETS**

3.1.3.23.2.19 Pause **MEETS**

3.1.3.23.2.20 Missed beat **MEETS**

3.1.3.23.2.21 Ventricular bigeminy **MEETS**

3.1.3.23.2.22 Ventricular trigemini **MEETS**

3.1.3.24 Patient Data Review:

3.1.3.24.1 Must have a minimum of ninety-six (96) hours of full disclosure waves, alarms, events, ST segments and trends that can be reviewed by selecting patient of interest and launching desired review application. **MEETS – up to 120 hour option is available.**

3.1.3.24.2 Must have strip function that provides detailed waveforms from wave event and alarm review applications and can be sent for patient's length of stay. **MEETS**

3.1.3.25 Wave Review:

3.1.3.25.1 Must have continuous full disclosure a minimum of four (4) configurable waves per patient. **MEETS**

3.1.3.25.2 Must have one (1) – sixty (60) minute wave duration per screen. **MEETS – 10 minute window.**

3.1.3.25.3 Must have timeline, tabulation, trend and event navigators for fast searches and greater context. **MEETS**

3.1.3.25.4 Must have strip reports. **MEETS**

3.1.3.26 Alarm Review:

3.1.3.26.1 Must have a minimum of (30) seconds (30s) compressed waveforms of alarm or saved strip events. **MEETS 20 second strip events.**

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3.1.3.26.2 Must have a minimum of four (4) waveforms per event. **MEETS**

3.1.3.26.3 Must have simultaneous display of alarm events. **MEETS**

3.1.3.26.4 Must have search by alarm severity. **MEETS**

3.1.3.26.5 Must have interval measurement. **MEETS**

3.1.3.27 Event Review:

3.1.3.27.1 Must have strip delayed for verification of event criteria. **MEETS**

3.1.3.28 Trend Review:

3.1.3.28.1 Must have tabular display of physiological parameters. **MEETS**

3.1.3.28.2 Must have graphical presentation at a minimum of one (1) minute resolution using bivariate trend plots. **MEETS**

3.1.3.28.3 Must have exact parameters displayed for cursor time location. **MEETS**

3.1.3.28.4 Must have simultaneous display of trend plots. **MEETS**

3.1.3.29 Twelve (12) Lead Review:

3.1.3.29.1 Must have 2.5 to 10 second snippets. **MEETS**

3.1.3.29.2 Must have 3 x 4, 6 x 2 and 12 x 1 (row by column) display and reports. **MEETS**

3.1.3.30 Information Center:

3.1.3.30.1 Must include PC with the following standard components:

3.1.3.30.1.1 Must have DVD/CD ROM disk drive/USB Port. **MEETS**

3.1.3.30.1.2 Must have audio cord and speaker. **MEETS**

3.1.3.30.1.3 Must have keyboard. **MEETS**

3.1.3.30.1.4 Must have mouse. **MEETS**

3.1.3.30.1.5 Must have operating system software which is compatible with Windows XP or later (to insure compatibility with Agency's current operating system). **Central Station uses Linux platform.**

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3.1.3.30.1.6 Software must have capability for monitoring a minimum of ten (10) patients. **MEETS**

3.1.3.30.1.7 Must have uninterruptible power supply (UPS). **MEETS**

3.1.3.30.1.8 Must have external speakers. **MEETS**

3.1.3.31 Waveform Display:

3.1.3.31.1 Screen resolution must a minimum of 1280 x 1024. **MEETS**

3.1.3.31.2 Vertical refresh rate must be a minimum of 60 Hz. **MEETS**

3.1.3.31.3 Must have video-cable connector. **MEETS**

3.1.3.32 Display Formats:

3.1.3.32.1 Must have single column: 4 x 1, 6 x 1, 8 x 1. **MEETS**

3.1.3.32.2 Must have at least a 7.0 second wave trace at 24 mm/s. **MEETS**

3.1.3.32.3 Must have a minimum 14.0 second wave trace at 12.5 mm/s.
MEETS

3.1.3.32.4 Must have ability of dual column 2 x 2, 3 x 2, 4 x 2, 5 x 2, 6 x 2, 8 x 2. **MEETS**

3.1.3.32.5 Dual column must have a minimum 3.3 second wave trace at 25 mm/s. **MEETS**

3.1.3.32.6 Dual column must have a minimum 6.6 second wave trace at 12.5 mm/s. **MEETS**

3.1.4 Equipment must have a minimum one (1) year warranty. **MEETS**

3.1.5 Must include manual/CDs for trouble shooting equipment problems. **MEETS**

3.1.6 Must include all installation labor and supplies. **MEETS**

3.1.7 Must provide on-site staff education for all of the nursing staff (approximately 100) for instruction for equipment use and care. **MEETS - On site staff education is done in advance and also provided during the go live of the project.**

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4. CONTRACT AWARD:

4.1 Contract Award: The Contract is intended to provide Agencies with a purchase price for the Contract Items. The Contract shall be awarded to the Vendor that provides the Contract Items meeting the required specifications for the lowest overall total cost as shown on the Pricing Pages.

4.2 Pricing Page: Vendor should complete the Pricing Page by providing a Cost per Unit Price for the Commodity or Service Lines on the Request for Quotation, and then multiply the Cost per Unit Price by the Quantity provided in order to obtain a Total Cost. Add the column of Total Cost together to provide the Grand Total Cost. Vendor should complete the Pricing Page in full as failure to complete the Pricing Page in its entirety may result in Vendor's bid being disqualified.

Vendor should type or electronically enter the information into the Pricing Page to prevent errors in the evaluation.

Please see completed pricing options attached.

5. PERFORMANCE: Vendor and Agency shall agree upon a schedule for performance of Contract Services and Contract Services Deliverables, unless such a schedule is already included herein by Agency. In the event that this Contract is designated as an open-end contract, Vendor shall perform in accordance with the release orders that may be issued against this Contract.

6 PAYMENT: Payment: Agency shall pay Unit Price for the Commodity or Service Lines as listed on the Request for Quotation, as shown on the Pricing Pages, for all Contract Services performed and accepted under this Contract. Vendor shall accept payment in accordance with the payment procedures of the State of West Virginia.

7 DELIVERY AND RETURN:

7.1 Shipment and Delivery: Vendor shall ship the Contract Items immediately after being awarded this Contract and receiving a purchase order or notice to proceed. Vendor shall deliver the Contract Items within ninety (90) calendar days after receiving a purchase order or notice to proceed. Contract Items must be delivered to Agency at Welch Community Hospital, 454 McDowell Street, Welch, WV.

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7.2 Late Delivery: The Agency placing the order under this Contract must be notified in writing if the shipment of the Contract Items will be delayed for any reason. Any delay in delivery that could cause harm to an Agency will be grounds for cancellation of the Contract, and/or obtaining the Contract Items from a third party. Vendor shall not be liable for cover costs.

Any Agency seeking to obtain the Contract Items from a third party under this provision must first obtain approval of the Purchasing Division.

7.3 Delivery Payment/Risk of Loss: Vendor shall deliver the Contract Items F.O.B. destination to the Agency's location.

7.4 Return of Unacceptable Items: Per Vendor's Return Policy included in this RFQ, If the Agency deems the Contract Items to be unacceptable, the Contract Items shall be returned to Vendor at Vendor's expense and with no restocking charge. Vendor shall either make arrangements for the return within five (5) days of being notified that items are unacceptable, or permit the Agency to arrange for the return and reimburse Agency for delivery expenses. If the original packaging cannot be utilized for the return, Vendor will supply the Agency with appropriate return packaging upon request. All returns of unacceptable items shall be F.O.B. the Agency's location. Per Vendor's policy, ~~t~~he returned product shall either be replaced, or the Agency shall receive a full credit or refund for the purchase price, ~~at the Agency's discretion.~~

CHANGES, CANCELLATION AND RETURN AND REPAIR

Customer orders accepted by DMI under this Agreement are not subject to change or cancellation except upon written agreement of the parties; except that DMI may change the manufacture and/or design of its Products if, in the judgment of DMI, such change does not alter the general function of the Products.

Products delivered by DMI are not returnable by Customer except as follows (the following also applies to factory repairs): All Products to be returned or repaired must have prior authorization by DMI and a valid Return Material Authorization ("RMA") number must appear on the shipping label, packing slip, purchase order, and any other related paperwork. Products received without such authorization will be refused at DMI's receiving dock and returned immediately to Customer. When requesting authorization to return material, the following information must be provided:

1. Customer purchase order number and date.
2. DMI sales order number and shipping date (returns only).
3. Quantity, DMI Product number, and description of material to be returned.
4. Reason for return or repair.
5. Contact DMI at 1-800-4-Drager for RMA number

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The following are the only accepted reasons for return of material:

1. Warranty repairs (covers Products within their warranty period).
2. Customer order error.
3. DMI order or shipping error.
4. Products delivered damaged.

Products returned for warranty repairs are subject to the terms of the DMI warranty. Products to be returned that are not under warranty must have been purchased within thirty (30) days of request for return, returned within fourteen (14) days after request, and approved for return as stated previously. Products must be unused and in DMI shipping containers. Returned Products, with the exception of returns which are (a) under warranty, (b) returned due to DMI error or (c) delivered damaged, are subject to a twenty percent (20%) restocking charge.

The following Products are not eligible for return:

1. Sterile material, unless shipped in error by DMI.
2. Products that have been used.
3. Specially ordered or manufactured products.
4. Products that have been altered or abused by Customer.
5. Products that are known to be contaminated with communicable diseases.

Upon receipt of authorized returned Products, an inspection of the Products will be conducted by DMI and appropriate action taken. DMI's decision regarding disposition of returned Products is final. All Products to be returned (including any in need of factory repair) shall be shipped, freight and insurance prepaid, to the following address unless otherwise advised by DMI:

DrägerService®
3135 Quarry Road
Telford, PA 18969
(Include Return Material Authorization Number.)

7.4 It is the responsibility of Customer to disinfect, pack, insure, and ship equipment to DMI at Customer's sole expense.

7.5 Return Due to Agency Error: Items ordered in error by the Agency will be returned for credit within 30 days of receipt, F.O.B. Vendor's location. Vendor shall not charge a restocking fee if returned products are in a resalable condition. Items shall be deemed to be in a resalable condition if they are unused and in the original packaging. Any restocking fee for items not in a resalable condition shall be the lower of the Vendor's customary restocking fee or 5% of the total invoiced value of the returned items.

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- 8 TRAVEL:** Vendor shall be responsible for all mileage and travel costs, including travel time, associated with performance of this Contract. Any anticipated mileage or travel costs may be included in the flat fee or hourly rate listed on Vendor's bid, but such costs will not be paid by the Agency separately.
- 9 FACILITIES ACCESS:** Performance of Contract Services may require access cards and/or keys to gain entrance to Agency's facilities. In the event that access cards and/or keys are required:
- 9.1** Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
 - 9.2** Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
 - 9.3** Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
 - 9.4** Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
 - 9.5** Vendor shall inform all staff of Agency's security protocol and procedures.
- 10 VENDOR DEFAULT:**
- 10.1** The following shall be considered a vendor default under this Contract.
 - 10.1.1** Failure to perform Contract Services in accordance with the requirements contained herein.
 - 10.1.2** Failure to comply with other specifications and requirements contained herein.
 - 10.1.3** Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.
 - 10.1.4** Failure to remedy deficient performance upon request.
 - 10.2** The following remedies shall be available to Agency upon default.
 - 10.2.1** Immediate cancellation of the Contract.
 - 10.2.2** Immediate cancellation of one or more release orders issued under this Contract.

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10.2.3 Unless otherwise expressly excluded in this RFQ response or in the Exceptions provided by Vendor included in this RFQ, Any other remedies available in law or equity.

Please see Dräger Monitoring Project Template Sample attached.

11 MISCELLANEOUS:

11.1 Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Jeff Ritchie
Telephone Number: 315-679-0268
Fax Number: (215) 721-5808
Email Address: jeff.ritchie@draeger.com



Exported Template Tasks

| # | Name | Description | Job Role: Name | Duration | Start | Comp |
|----|--|--|-----------------|----------|-------|------|
| 1 | Project Initiation Phase 1 | Project Initiation and Preparation DMI Phase 1 | | 37 Days | 0 | 37 |
| 2 | Sales to Implementation Turnover Meeting | Review of roles, responsibilities and project expectations of customer contacts and Draeger project resources. | TIS | 1 Day | 0 | 1 |
| 3 | Project Assignment for PM | 2014 UPDATE: Assign task to project manager and set the project status to CURRENT. PM should receive the assignment email. | Project Manager | 1 Day | 0 | 1 |
| 4 | SALES ORDER REVIEW - Review Orders and Contract Terms and Conditions- Establish Milestones | Understand of scope, limitations and contract obligations. INITIATE SALES ORDER REVIEW PROCESS | Project Manager | 1 Day | 0 | 1 |
| 5 | Develop Preconfiguration (Optional) | Optional activity based on pre configuration process. | TIS | 1 Day | 0 | 1 |
| 6 | Initial Customer Contact | Boilerplate email template in document repository must be sent. | Project Manager | 0 Days | 20 | 20 |
| 7 | Schedule Charter Meeting | Scheduling the Charter must take place no greater than 20 days from initiating the project this will be a Milestone Task | Project Manager | 0 Days | 20 | 20 |
| 8 | Project Charter Meeting w/ Customer - On Site | Conduct charter meeting to understand the customer's expectations and to formally meet the Customer's project team. | TIS | 5 Days | 0 | 5 |
| 9 | Preliminary Walk Through Site Evaluation (Optional) | If feasible may be performed during the same visit as the Charter Meeting. This activity will determine network requirements, cabling requirements, equipment locations, Clinical requirements, etc. | TIS | 5 Days | 0 | 5 |
| 10 | Create Preliminary Project Plan | Develop project plan based on Scope of Work and any agreed upon timelines. High level milestones are identified. Team members review and agree with project plan. PM calls meeting(s) to make final revision | Project Manager | 30 Days | 2 | 32 |
| 11 | Verify / Modify Delivery Date | Verify delivery date to customer based on the pre configuration process and/or customer target dates for implementation | Project Manager | 5 Days | 32 | 37 |
| 12 | Prepare Project Documentation i.e. Issues, Risks, etc. | Prepare all templates and lists related to the project documentation from Document Repository. | Project Manager | 5 Days | 2 | 7 |
| 13 | BASELINE- Initiation Phase Complete | Create a baseline with the name: Initiation Phase Complete | Project Manager | 1 Day | 0 | 1 |
| 14 | Project Planning Phase 2 | Project Detailed Planning DMI Phase 2 | | 32 Days | 0 | 32 |
| 15 | Preliminary Walk Through Site Evaluation | Determine network requirements, cabling requirements, equipment locations, etc. | TIS | 5 Days | 1 | 6 |
| 16 | Start Development of Detailed Project Plan | Working with the customer, Draeger develops tasks to complete a detailed project plan. | Project Manager | 15 Days | 0 | 15 |
| 17 | Clinical Planning | Provide workflow recommendations for clinical assessment | CIS | 11 Days | 0 | 11 |
| 18 | Clinical Workflow Assessment | Document Clinical WFA | CIS | 5 Days | 0 | 5 |
| 19 | Clinical Gap Analysis Documentation | Document Clinical WFA current and future state | CIS | 5 Days | 0 | 5 |



Exported Template Tasks (cont'd)

| # | Name | Description | Job Role: Name | Duration | Start | Comp |
|----|---|--|-----------------|----------|-------|------|
| 20 | SCHEDULE ON-SITE - Report to Customer - WFA Results - On Site | Consolidate network requirements, clinical requirements, implementation requirements. | TIS | 5 Days | 6 | 11 |
| 21 | Clinical Super User Sandbox Orientation | Clinical Supers are oriented/trained to the sandox options for decisions. | CIS | 1 Day | 0 | 1 |
| 22 | Develop Prototype/Sandbox | Gather requirements and develop the on-site prototype / sandbox configuration with the customer. | CIS | 1 Day | 0 | 1 |
| 23 | Order Sandbox Equipment - Demo Process | Order the finalized sandbox equipment using the customers equipment or the Demo Request Process | Project Manager | 1 Day | 0 | 1 |
| 24 | Validate Prototype with SU | Validate prototype options on site with the Super Users | CIS | 4 Days | 0 | 4 |
| 25 | Technical Planning | | | 17 Days | 0 | 17 |
| 26 | Technology Site Assessment - Gap Analysis | Technology requirements based on Current to Future state of Draeger solution. | TIS | 17 Days | 0 | 17 |
| 27 | Create Network Design Document | | TIS | 10 Days | 0 | 10 |
| 28 | Infinity Network Configurations | Create network configuration settings for all Draeger Equipment. | TIS | 10 Days | 0 | 10 |
| 29 | Required network hardware | Specify network hardware to meet Draeger device network requirements | TIS | 10 Days | 0 | 10 |
| 30 | Develop Custom KVM/VideoExt Solution | | TIS | 10 Days | 0 | 10 |
| 31 | Develop network diagram | Design network diagram based on network hardware and Draeger device requirements | TIS | 10 Days | 0 | 10 |
| 32 | Define wiring requirements | Identify number of drops per location, new versus existing. Consider future expansion requirements (new construction) | TIS | 10 Days | 0 | 10 |
| 33 | Determine equipment location, mounting and power | Update floor plans to reflect above tasks | TIS | 10 Days | 0 | 10 |
| 34 | Wireless | | | 16 Days | 0 | 16 |
| 35 | Present Site Evaluation to Customer | Communicate results of evaluation to customer | Project Manager | 5 Days | 11 | 16 |
| 36 | Wireless Validation Survey | | TIS | 5 Days | 0 | 5 |
| 37 | Finalize Project Plan | Final Iteration of Project Plan (Signoff and Baseline Required) Any changes to live date after this point require another Baseline and signoff. | Project Manager | 5 Days | 0 | 5 |
| 38 | Confirm Install Support (resources) | | Project Manager | 5 Days | 10 | 15 |
| 39 | Create Communication Plan | Determine method of communication, i.e. email, phone, fequency, escalatation, etc. Ensure all appropriate parties are included in communication plan | Project Manager | 5 Days | 2 | 7 |
| 40 | Obtain Customer Signoff on SOW and Project Plan | Meet with customer to review scope of work and signoff on project plan | Project Manager | 10 Days | 22 | 32 |



Exported Template Tasks (cont'd)

| # | Name | Description | Job Role: Name | Duration | Start | Comp |
|----|---|--|-----------------|----------|-------|------|
| 41 | BASELINE - Project Planning Complete | Completion of the Planning Phase. Project Status must now be changed to CURRENT. This will release all the task assignments to the resources for acceptance. | | 0 Days | 0 | 0 |
| 42 | Project Realization Phase 3 | | | 50 Days | 0 | 50 |
| 43 | Customer Kickoff Meeting - On Site | Review sales order/project scope, roles responsibilities, timeline expectations, risks, communication plan, stakeholders, contract T&Cs, etc. | TIS | 2 Days | 0 | 2 |
| 44 | Confirm Delivery of Equipment at customer site | | Project Manager | 5 Days | 0 | 5 |
| 45 | Check Site Readiness prior to Equipment Installation | Verify actions are complete to bring site to readiness | TIS | 5 Days | 0 | 5 |
| 46 | Inventory | | TSR | 5 Days | 0 | 5 |
| 47 | Track Order Issues onsite | | TIS | 5 Days | 0 | 5 |
| 48 | CAS education mtg - gather defaults | | CIS | 5 Days | 0 | 5 |
| 49 | Customer Performs Asset Management Inventory | | | 5 Days | 0 | 5 |
| 50 | Programming/Configuration | Equipment is programmed according to Network Configuration Documentation | TSR | 5 Days | 5 | 10 |
| 51 | Training schedule confirmed | Training Dates/Times agreed to, expectations set, Mangement buy in provide attendee list | CIS | 5 Days | 5 | 10 |
| 52 | Training Room Environment | Confirm, secure location, equipment is setup and working. Environment should reflect Customers purchased equipment. Location should be lockable. | TSR | 5 Days | 10 | 15 |
| 53 | Install Network/Telemetry Equipment | Coordiante installation of Network/Tele componenets with responsible team members | TIS | 20 Days | 5 | 25 |
| 54 | Install Mounting | Coordinate installation of mounts, rails installed by Customer Team Member(s), actual mounts installed by Drager Team Member(s) | TIS | 10 Days | 5 | 15 |
| 55 | Install Patient Monitors | Mount configured Monitors at specified locations, configured with Clinical Defaults, perform cable management | CIS | 15 Days | 10 | 25 |
| 56 | Confirm all work completed | All Tasks in Build Phase are complete- notify PM | TIS | 5 Days | 25 | 30 |
| 57 | Test Phase | | | 15 Days | 10 | 25 |
| 58 | Test Network | Verify Network functionality per device network functions- i.e. remote view, ping tests, multicast traffic etc. | TIS | 15 Days | 10 | 25 |
| 59 | Test Custom Configurations (i.e. Explorer applications) | | TIS | 10 Days | 10 | 20 |
| 60 | Test Interfaces (ADT, LAB, scheduling etc) | | TIS | 10 Days | 10 | 20 |
| 61 | Test Patient Monitors | Test and calibrate monitors according to Monitor installation documents | TSR | 15 Days | 10 | 25 |
| 62 | Customer Training | | | 1 Day | 15 | 16 |



Exported Template Tasks (cont'd)

| # | Name | Description | Job Role: Name | Duration | Start | Comp |
|----|--|---|-----------------|----------|-------|------|
| 63 | Train Super Users (Optional) | Conduct extra SU training only with agreement for additional hours. SU Training occurs with the Sandbox/Prototype. | CIS | 1 Day | 15 | 16 |
| 64 | Document Number of SU and EU Trained | Send the number of Super Users and End Users being trained to the Project Manager for addition to Project Custom data (Order Details Group). USE THE ATTASK TASK UPDATE STATUS TO COMMUNICATE TO THE PM. | CIS | 1 Day | 15 | 16 |
| 65 | Clinical Go Live | | | 20 Days | 30 | 50 |
| 66 | Equipment Deployment | | TSR | 1 Day | 30 | 31 |
| 67 | Removal of Old Equipment | | | 1 Day | 30 | 31 |
| 68 | Start Clinical Use/Go Live | | Project Manager | 3 Days | 30 | 33 |
| 69 | Implementation to Support Turnover | Include Site Documentation, FSS completion | Project Manager | 10 Days | 40 | 50 |
| 70 | Live Onsite Support | | Project Manager | 3 Days | 30 | 33 |
| 71 | BASELINE- Realization Phase Complete | Realization Phase is completed. Customer go live is completed and resources are released. ISW is presented to the customer for sign off. | | 0 Days | 0 | 0 |
| 72 | Project Close Phase 4 | | | 70 Days | 33 | 103 |
| 73 | INVOICE REQUEST_ProjectName_Sales order Number | Invoice Request to account this must occur with 5 business days of Go-Live | Project Manager | 1 Day | 101 | 102 |
| 74 | Identify/Resolve Open Issues | | Project Manager | 10 Days | 33 | 43 |
| 75 | Lessons Learned | | Project Manager | 5 Days | 50 | 55 |
| 76 | Post-Live 90-Day Followup (TIS) | | TIS | 1 Day | 102 | 103 |
| 77 | Post-Live 90-Day Followup (CIS) | | CIS | 1 Day | 102 | 103 |
| 78 | Post-Live 90-Day Followup (PM) | | Project Manager | 1 Day | 102 | 103 |
| 79 | BASELINE - Project Close Phase Complete | Project documentation is completed. ISW is signed by the customer and the Project invoice has been requested. | | 0 Days | 0 | 0 |

Draeger, Inc.



**State of West Virginia
Request for Quotation
CRFQ 0506 WEH1700000007**

**PRICING
OPTION ONE:
Infinity Acute Care System w/ C500 Display**

Draeger, Inc.
3135 Quarry Road
Telford, PA 18969
USA
Toll Free: 1-800-437-2437
Phone: 1-215-721-5400
Fax: 1-215-721-5808
www.draeger.com

OPTION ONE

Exhibit A

| Description/Equipment/One Time Purchase | UNSPSC | Quantity | Cost Per Unit | Total Cost |
|---|----------|----------|---------------|--------------|
| 3.1.1 Bedside monitors (Proposal # 136071426) | 42181719 | 15 | \$13,764.30 | \$206,464.53 |
| 3.1.2 Medical surgical wearable patient monitors (Proposal # 136071142) | 42181719 | 10 | \$16,186.57 | \$ 32,373.15 |
| 3.1.3 Information center (Proposal # 136071148) | 42181719 | 2 | \$14,767.30 | \$ 29,534.59 |
| 3.1.4 Warranty Standard 1 year - Included | 42181719 | 1 | \$ 0.00 | \$ 0.00 |
| 3.1.5 Manual/CDs - Included | 55101521 | 1 | \$ 0.00 | \$ 0.00 |
| 3.1.6 Installation (Proposal # 136071154) | 81111809 | 1 | \$17,480.87 | \$ 17,480.87 |
| 3.1.7 In-service medical staff - Included | 86000000 | 1 | \$ 0.00 | \$ 0.00 |

TOTAL PROPOSAL

\$285,853.14

Evaluation and Award Criteria: Contract will be awarded to the Vendor meeting the required specifications for the lowest overall Total Cost.

Draeger, Inc.
Vendor Name (Printed)

3135 Quarry Road, Telford, PA 18969
Purchase Order Address

3135 Quarry Road, Telford, PA 18969
Vendor Remit-To Address:

Timothy S. Rugel, Sr. Mgr. of Financial Operations
Vendor Authorized Representative (Printed)
Date


Signature

(215) 721-5400 (215) 721-5808
Telephone Fax

Tim.Rugel@draeger.com
E-mail



Quotation

Customer no.
91045730

Quotation no. 136071426
Date of offer 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated

12/28/2016
[15]IACS R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071426
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road; Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



Quotation

Customer no.
91045730

Quotation no. 136071426 Date of offer 12/28/2016

Please reference on inquiries

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Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|---|-------------------|----------------------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>AMERINET MONITORING TIER 4 PRICING IS VALID WITH A SIGNED LETTER OF COMMITMENT OR PURCHASE ORDER VALUE OF \$500,000 OR GREATER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>IMPLEMENTATION FEES ARE NOTED ON QUOTATION #136071154 FOR \$17,480.87.</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPONSIBILITY OF THE CUSTOMER.</p> <p>The Infinity M540 on this quotation are configured for wireless operation. However this option will require a wireless site survey of the desired coverage area in order to enable the wireless capability. The wireless site survey, unless listed on this quotation, is not included and will be quoted separately when</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071426 Date of offer 12/28/2016

Please reference on inquiries

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Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|---|-------------------|----------------------------------|
| | | | implemented. | | |
| | | | THIS QUOTE REFLECTS TRADE IN OF 15 Sc SERIES MONITORS VALUED AT \$500 EACH. CREDIT TO BE ISSUED UPON RECEIPT OF UNIT AT DMI. | | |
| 0010 | 10 EA | MS25510 | IACS Monitoring with C500 | | |
| | | | **Specif.national properties** Target country USA | | |
| | | | ** Medical Cockpit ** Monitoring with C500 | | |
| | | | ** Care Unit ** Critical Care Unit/xICU (CC) | | |
| | 10 EA | OP90127 | **Infinity Acute Care System** Monitoring with C500 | 11,538.24 | 115,382.40 |
| | | | ** SpO2 Technology ** Nellcor OxiMax MCable SpO2 Pod Mount | | |
| | | | ** System Cables ** System cable 3.5m System cable 3.5m | | |
| | 10 EA | OP90168 | *Expanded Monitoring Promotion SW opt 12-Lead ECG Monitoring | 0.01 | 0.10 |
| | 10 EA | OP90169 | SW option Arrhythmia II | 0.01 | 0.10 |
| | 10 EA | OP90170 | SW option Multi IBP | 0.01 | 0.10 |



Quotation

Customer no.
91045730

Quotation no. 136071426 | Date of offer 12/28/2016

Please reference on inquiries

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Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|--|-------------------|-------------------------------|
| | 10 EA | MS20516 | **Additional Software Options* SW option Physiological Calcs ** User Manuals ** * Single set of user manual/s * supplied per order. * IFUs on a DVD ordered. ADDITIONAL MANUAL NOT ORDERED Value IACS Monitoring with C500 | 764.69 | 7,646.90 |
| | | | | | 123,029.60 |
| 0020 | 5 EA | MS25510 | IACS Monitoring with C500 **Specif.national properties** Target country USA ** Medical Cockpit ** Monitoring with C500 ** Care Unit ** Critical Care Unit/xICU (CC) | | |
| | 5 EA | OP90127 | **Infinity Acute Care System** Monitoring with C500 ** SpO2 Technology ** Nellcor OxiMax MCable SpO2 Pod Mount ** System Cables ** System cable 3.5m System cable 3.5m | 11,538.24 | 57,691.20 |
| | 5 EA | OP90168 | *Expanded Monitoring Promotion SW opt 12-Lead ECG Monitoring | 0.01 | 0.05 |
| | 5 EA | OP90169 | SW option Arrhythmia II | 0.01 | 0.05 |
| | 5 EA | OP90170 | SW option Multi IBP | 0.01 | 0.05 |
| | | | ** User Manuals ** * Single set of user manual/s | | |



Quotation

Customer no.
91045730

Quotation no. 136071426 Date of offer 12/28/2016

Please reference on inquiries

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Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Discount % | Total price USD |
|--|--------|----------|--|-------------------|------------|--------------------|
| | | | * supplied per order. * IFUs on a DVD ordered. ADDITIONAL MANUAL NOT ORDERED | | | |
| | | | Value IACS Monitoring with C500 | | | 57,691.35 |
| 0030 | 15 EA | MP03404 | ECG 5-Lead single-p AHA, 1.5m ECG cable, 5-Lead, single-pin connector, reusable, AHA (IEC2), 1/1.5 m | 182.16 | | 2,732.40 |
| 0040 | 15 EA | MP00748 | Nellcor Cable 1.2m, 14pin | 114.90 | | 1,723.50 |
| 0050 | 15 EA | 7262764 | SPO2 Nellcor sensor DS100A Adt | 248.57 | | 3,728.55 |
| 0060 | 15 EA | MP00913 | NBP Cuff S, 17-25/29cm | 21.97 | | 329.55 |
| 0070 | 15 EA | MP00916 | NBP Cuff M+, 23-33/43cm | 21.97 | | 329.55 |
| 0080 | 15 EA | MP00919 | NBP Cuff L+, 31-40/55cm | 24.24 | | 363.60 |
| 0090 | 15 EA | MP00953 | NBP extension hose, adult 3,7m | 75.75 | | 1,136.25 |
| 0100 | 8 EA | 1979569 | Clinical Applicat. Supp.Monitor.8h segm | 2,200.00 | 100.00 | 0.18 |
| 0103 | 1 EA | MQ00921 | 3rd Party Hardware | 22,000.00 | | 22,000.00 |
| 0105 | 15 EA | 1979996 | Trade in toward IACS SC Series Monitors | -500.00 | | -7,500.00 |
| 0130 | 1 EA | 1979294 | Freight charges mt-m | 900.00 | | 900.00 |
| ----- | | | | | | |
| Net value excl. Sales Tax | | | | | | 206,464.53 |
| ----- | | | | | | |
| Final amount | | | | | | 206,464.53 |
| ===== | | | | | | |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be</p> | | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071426 | Date of offer 12/28/2016

Please reference on inquiries

Page 6 / 7

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|---|-------------------|-------------------------------|
| | | | found at: http://www.draeger.com/termsandconditions . | | |
| | | | Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program. | | |
| | | | PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications. | | |
| | | | Delivery time | | |
| | | | Pos. 0010: 34- Week/s after rec. of order * 10 EA | | |
| | | | Pos. 0020: 34- Week/s after rec. of order * 5 EA | | |
| | | | Pos. 0030: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0040: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0050: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0060: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0070: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0080: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0090: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0100: 34- Week/s after rec. of order * 8 EA | | |
| | | | Pos. 0103: 34- Week/s after rec. of order * 1 EA | | |
| | | | Pos. 0105: 34- Week/s after rec. of order * 15 EA | | |
| | | | Pos. 0130: 34- Week/s after rec. of order * 1 EA | | |
| | | | * After receipt of order, ready for dispatch ex works, subject to prior sale. | | |
| | | | Please let us know if you prefer partial delivery. | | |
| | | | Payment terms: 30 days after invoice date | | |



Quotation

Customer no.
91045730

Quotation no. 136071426
Date of offer 12/28/2016

Please reference on inquiries

Page 7 / 7

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|-------------------------------|-------------------|-------------------------------|
| | | | Offer valid until: 06/30/2017 | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
[10]M300 Tele R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071142
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road; Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on Inquiries

Page 2 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|--|-------------------|--------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>3.1.2 MEDICAL WEARABLE PATIENT MONITORS - 10 EACH M300 TELEMTRY.</p> <p>AMERINET MONITORING TIER 4 PRICING IS VALID WITH SIGNED LETTER OF COMMITMENT AND PURCHASE ORDER VALUE OF \$500,000 OR GREATER.</p> <p>IMPLEMENTATION FEES ARE NOTED ON QUOTATION #136071154 FOR \$17,480.87.</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPOSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Page 3 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|---|-------------------|--------------------|
| | | | from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form. | | |
| 0010 | 2 EA | MS18501 | Infinity M300 **Specif.national properties** Target country USA | | |
| | 2 EA | MS25755 | ** Device ** Infinity M300 | 1,888.70 | 3,777.40 |
| | 2 EA | MS29558 | ** Pulse Oximetry ** Draeger / Nellcor Sensors | | |
| | 2 EA | MS29558 | ** M300 Bedside Charger ** M300 Bedside Charger | 273.86 | 547.72 |
| | 2 EA | MS29560 | ** Bedside Charger Plug ** Plug, NA | 9.00 | 18.00 |
| | | | Value Infinity M300 | | 4,343.12 |
| 0020 | 1 EA | MS27901 | M300 Promotion **Specif.national properties** Target country USA | | |
| | 1 EA | OP90117 | * Buy 7 get 8 M300 Promotion * Buy 7 get 8 M300 Promotion | 15,137.93 | 15,137.93 |
| | | | ** Device ** MultiView | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Page 4 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|---|--------|----------|--|-------------------|--------------------|
| | | | ** Pulse Oximetry ** Draeger / Nellcor Sensors | | |
| | 8 EA | OP90400 | ** M300 Bedside Charger ** M300 Bedside Charger | 0.07 | 0.56 |
| | 8 EA | OP90412 | ** Bedside Charger Plug ** Plug, NA | 0.13 | 1.04 |
| | 1 EA | MS25699 | *Infinity M300 CentralCharger* Infinity M300 Central Charger | 4,507.13 | 4,507.13 |
| | 1 EA | 4321720 | ** Power Cable ** Power Cord, North America | 11.97 | 11.97 |
| | | | Value M300 Promotion | | 19,658.63 |
| 0030 | 10 EA | MP03424 | EKG 5-adrig TruST AHA, Telem. ECG cable, 5-Lead TruST Tele., single-pin connector, reusable, AHA (IEC2), 70 cm | 129.43 | 1,294.30 |
| 0040 | 5 EA | MS18683 | SPO2 INTERMEDIATE CABLE, 1.2M SpO2 intermediate cable Dräger/Nellcor®, for Multimed Plus/Plus OR, 1.2 m | 132.95 | 664.75 |
| 0050 | 5 EA | MS13235 | SPO2 SENSOR DRÄGER, REUSABLE | 147.47 | 737.35 |
| 0070 | 1 EA | MQ00922 | 3rd Party Labor Budgetary site assessment | 5,555.00 | 5,555.00 |
| 0080 | 1 EA | 1979294 | Freight charges mt-m | 120.00 | 120.00 |
| | | | Net value excl. Sales Tax | | 32,373.15 |
| | | | Final amount | | 32,373.15 |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Page 5 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|--|-------------------|--------------------|
| | | | <p>Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 37- Week/s after rec. of order * 2 EA Pos. 0020: 37- Week/s after rec. of order * 1 EA Pos. 0030: 38- Week/s after rec. of order * 10 EA Pos. 0040: 38- Week/s after rec. of order * 5 EA Pos. 0050: 38- Week/s after rec. of order * 5 EA Pos. 0070: 38- Week/s after rec. of order * 1 EA Pos. 0080: 38- Week/s after rec. of order * 1 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> <p>Payment terms: 30 days after invoice date</p> <p>Offer valid until: 06/30/2017</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071148 | **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated

12/28/2016
[2]ICS WIDE PROMO R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071148
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road, Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



Quotation

Customer no.
91045730

Quotation no. 136071148 Date of offer 12/28/2016

Please reference on inquiries

Page 2 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|---|-------------------|----------------------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>3.1.3 INFORMATION CENTER = 2 CENTRAL STATIONS PROMO</p> <p>IMPLEMENTATION FEES ARE NOTED ON QUOTATION #136071154 FOR \$17,480.87</p> <p>AMERINET MONITORING TIER 4 PRICING IS VALID WITH A SIGNED LETTER OF COMMITMENT AND A PURCHASE ORDER VALUE OF \$500,000 OR GREATER.</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPONSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071148
Date of offer 12/28/2016

Please reference on inquiries

Page 3 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|--|-------------------|-------------------------------|
| | | | from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form. | | |
| 0010 | 2 EA | MS26800 | Infinity Central Station Wide **Specif.national properties** Target country USA ** Care Unit ** Telemetry/Stepdown (CC) Existing Customer Upgrade MVWS, ICS Gen 1 / 2 CPU | | |
| | 2 EA | OP90440 | ** Promotion ** ICS Upgrade | 9,696.00 | 19,392.00 |
| | 2 EA | MS18460 | ** Accessory Kit ** ICS Accessories EN | 300.27 | 600.54 |
| | 2 EA | MS23562 | ** UPS ** ICS UPS 120 V | 1,060.50 | 2,121.00 |
| | 4 EA | MS26806 | ** Flat Panel Displays ** 22" Widescreen Display | 523.58 | 2,094.32 |
| | 2 EA | 7497683 | ** Network Recorder Kit ** R50N Network Recorder Kit | 2,603.31 | 5,206.62 |
| | | | Value Infinity Central Station Wide | | 29,414.48 |
| 0020 | 1 EA | 1979294 | Freight charges mt-m | 120.00 | 120.00 |
| 0030 | 5 EA | 1979569 | Clinical Applicat. Supp.Monitor.8h segm | 2,200.00 | 100.00 0.11 |



Quotation

Customer no.
91045730

Quotation no. 136071148 Date of offer 12/28/2016

Please reference on inquiries

Page 4 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|---|--------|----------|-------------|-------------------|----------------------------------|
| Net value excl. Sales Tax | | | | | 29,534.59 |
| Final amount | | | | | 29,534.59 |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 38- Week/s after rec. of order * 2 EA Pos. 0020: 38- Week/s after rec. of order * 1 EA Pos. 0030: 38- Week/s after rec. of order * 5 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> <p>Payment terms: 30 days after invoice date</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071148
Date of offer 12/28/2016

Please reference on inquiries

Page 5 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|-------------------------------|-------------------|-------------------------------|
| | | | Offer valid until: 06/30/2017 | | |



Quotation

Customer no.
91045730

Quotation no. 136071154 | **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
PROJECT MANAGEMENT R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071154
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road; Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



Quotation

Customer no.
91045730

Quotation no. 136071154 Date of offer 12/28/2016

Please reference on inquiries

Page 2 / 4

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|---|-------------------|--------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>PROJECT MANAGEMENT FEES FOR PRODUCTS ON THE FOLLOWING QUOTATIONS: 136071142 136071148 136071152 136071153</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPOSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form.</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071154 Date of offer 12/28/2016

Please reference on inquiries

Page 3 / 4

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|---|--------|----------|-------------------------|-------------------|--------------------|
| 0010 | 1 EA | MQ00134 | Implementation Services | 17,480.87 | 17,480.87 |
| ----- | | | | | |
| Net value excl. Sales Tax | | | | | 17,480.87 |
| ----- | | | | | |
| Final amount | | | | | 17,480.87 |
| ===== | | | | | |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 38- Week/s after rec. of order * 1 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071154 Date of offer 12/28/2016

Please reference on inquiries

Page 4 / 4

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|---|-------------------|--------------------|
| | | | <p>Payment terms: 30 days after invoice date</p> <p>Offer valid until: 06/30/2017</p> | | |

Draeger, Inc.



**State of West Virginia
Request for Quotation
CRFQ 0506 WEH1700000007**

**PRICING
OPTION TWO:
10 ea. Infinity Acute Care system w C500 Display
5 ea. M540 Monitors**

Draeger, Inc.
3135 Quarry Road
Telford, PA 18969
USA
Toll Free: 1-800-437-2437
Phone: 1-215-721-5400
Fax: 1-215-721-5808
www.draeger.com

OPTION TWO

Exhibit A

| Description/Equipment/One Time Purchase | UNSPSC | Quantity | Cost Per Unit | Total Cost |
|---|----------|----------|---------------|--------------|
| 3.1.1 Bedside monitors (Proposal # 136086062) | 42181719 | 10 5 | \$10,902.20 | \$163,533.08 |
| 3.1.2 Medical surgical wearable patient monitors (Proposal # 136071142) | 42181719 | 10 | \$16,186.57 | \$ 32,373.15 |
| 3.1.3 Information center (Proposal # 136071148) | 42181719 | 2 | \$14,767.30 | \$ 29,534.59 |
| 3.1.4 Warranty Standard 1 year - Included | 42181719 | 1 | \$ 0.00 | \$ 0.00 |
| 3.1.5 Manual/CDs - Included | 55101521 | 1 | \$ 0.00 | \$ 0.00 |
| 3.1.6 Installation (Proposal # 136071154) | 81111809 | 1 | \$17,480.87 | \$ 17,480.87 |
| 3.1.7 In-service medical staff - Included | 86000000 | 1 | \$ 0.00 | \$ 0.00 |

TOTAL PROPOSAL

\$242,921.69


Evaluation and Award Criteria: Contract will be awarded to the Vendor meeting the required specifications for the lowest overall Total Cost.

Draeger, Inc.
Vendor Name (Printed)

3135 Quarry Road, Telford, PA 18969
Purchase Order Address

3135 Quarry Road, Telford, PA 18969
Vendor Remit-To Address:

Timothy S. Rugel, Sr. Mgr. of Financial Operations
Vendor Authorized Representative (Printed)
Date


Signature

(215) 721-5400 **(215) 721-5808**
Telephone Fax

Tim.Rugel@draeger.com
E-mail



Quotation

Customer no.
91045730

Quotation no. 136086062 **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
[10]IACS+[6]M540 R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136086062
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road, Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



Quotation

Customer no.
91045730

Quotation no. 136086062
Date of offer 12/28/2016

Please reference on inquiries

Page 2 / 6

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|--|-------------------|-------------------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>AMERINET MONITORING TIER 4 PRICING IS VALID WITH A SIGNED LETTER OF COMMITMENT AND PURCHASE ORDER VALUE OF \$500,000 OR GREATER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPOSIBILITY OF THE CUSTOMER.</p> | | |



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|------|--------|----------|--|-------------------|------------|--------------------|
| 0010 | 10 EA | MS25510 | IACS Monitoring with C500 **Specif.national properties** Target country USA ** Medical Cockpit ** Monitoring with C500 ** Care Unit ** Critical Care Unit/xICU (CC) | | | |
| | 10 EA | OP90127 | **Infinity Acute Care System** Monitoring with C500 ** SpO2 Technology ** Nellcor OxiMax MCable SpO2 Pod Mount ** System Cables ** System cable angled 3.5m System cable angled 3.5m | 11,538.24 | | 115,382.40 |
| | 10 EA | OP90168 | *Expanded Monitoring Promotion SW opt 12-Lead ECG Monitoring | 0.01 | | 0.10 |
| | 10 EA | OP90169 | SW option Arrhythmia II | 0.01 | | 0.10 |
| | 10 EA | OP90170 | SW option Multi IBP | 0.01 | | 0.10 |
| | 10 EA | MS20516 | **Additional Software Options* SW option Physiological Calcs ** User Manuals ** * Single set of user manual/s * supplied per order. * IFUs on a DVD ordered. ADDITIONAL MANUAL NOT ORDERED | 764.69 | | 7,646.90 |
| | | | Value IACS Monitoring with C500 | | | 123,029.60 |
| 0015 | 5 EA | MS26372 | Infinity M540 | | | |



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| | | | **Specif.national properties** Target country USA | | | |
| | | | ** Care Unit ** Critical Care Unit/xICU (CC) | | | |
| | | | ** Monitor ** | | | |
| | 5EA | MS20401 | Infinity M540 | 4,345.83 | | 21,729.15 |
| | | | ** SpO2 Technology ** Nellcor OxiMax MCable SpO2 Pod SpO2 Pod Mount | | | |
| | | | ** Docking ** | | | |
| | 5EA | MS20407 | Infinity M500 Docking Station | 1,001.92 | | 5,009.60 |
| | | | ** Power Options ** | | | |
| | 5EA | 2606270 | Desktop power supply unit,120W | 102.26 | | 511.30 |
| | 5EA | MS29702 | IACS Y-adaptor for PS120 | 194.12 | | 970.60 |
| | | | ** User Manuals ** * Single set of user manual/s * supplied per order. * IFUs on a DVD ordered. ADDITIONAL MANUAL NOT ORDERED | | | |
| | | | *Expanded Monitoring Promotion | | | |
| | 5EA | OP90168 | SW opt 12-Lead ECG Monitoring | 0.01 | | 0.05 |
| | 5EA | OP90169 | SW option Arrhythmia II | 0.01 | | 0.05 |
| | 5EA | OP90170 | SW option Multi IBP | 0.01 | | 0.05 |
| | | | ** Wireless Option ** | | | |
| | 5EA | MS16266 | With wireless option | 0.01 | | 0.05 |
| | | | Value Infinity M540 | | | 28,220.85 |
| 0020 | 15EA | MP00748 | Nellcor Cable 1.2m, 14pin | 114.90 | | 1,723.50 |
| 0030 | 15EA | MP00913 | NBP Cuff S, 17-25/29cm | 21.97 | | 329.55 |



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|----------------------------------|--------|----------|---|-------------------|------------|--------------------|
| 0040 | 15 EA | MP00916 | NBP Cuff M+, 23-33/43cm | 21.97 | | 329.55 |
| 0050 | 15 EA | MP00919 | NBP Cuff L+, 31-40/55cm | 24.24 | | 363.60 |
| 0060 | 15 EA | MP00953 | NBP extension hose, adult 3,7m | 75.75 | | 1,136.25 |
| 0070 | 8 EA | 1979569 | Clinical Applicat. Supp.Monitor.8h segm | 2,200.00 | 100.00 | 0.18 |
| 0080 | 1 EA | MQ00921 | 3rd Party Hardware 10 ea Dual Wall MCounts and 5 Single M540 wallmounts | 15,000.00 | | 15,000.00 |
| 0090 | 15 EA | 1979996 | Trade in M300 SC Series Monitors | -500.00 | | -7,500.00 |
| 0110 | 1 EA | 1979294 | Freight charges mt-m | 900.00 | | 900.00 |
| Net value excl. Sales Tax | | | | | | 163,533.08 |
| Final amount | | | | | | 163,533.08 |

The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: <http://www.draeger.com/termsandconditions>.

Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.

PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire



Quotation

Customer no.
91045730

Quotation no. 136086062
Date of offer 12/28/2016

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Page 6 / 6

Payer
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| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|--|-------------------|-------------------------------|
| | | | agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications. | | |
| | | | Delivery time | | |
| | | | Pos. 0010: 27 Week/s after rec. of order * | 10 EA | |
| | | | Pos. 0015: 27 Week/s after rec. of order * | 5 EA | |
| | | | Pos. 0020: 27 Week/s after rec. of order * | 15 EA | |
| | | | Pos. 0030: 27 Week/s after rec. of order * | 15 EA | |
| | | | Pos. 0040: 27 Week/s after rec. of order * | 15 EA | |
| | | | Pos. 0050: 27 Week/s after rec. of order * | 15 EA | |
| | | | Pos. 0060: 27 Week/s after rec. of order * | 15 EA | |
| | | | Pos. 0070: 27 Week/s after rec. of order * | 8 EA | |
| | | | Pos. 0080: 27 Week/s after rec. of order * | 1 EA | |
| | | | Pos. 0090: 27 Week/s after rec. of order * | 15 EA | |
| | | | Pos. 0110: 27 Week/s after rec. of order * | 1 EA | |
| | | | * After receipt of order, ready for dispatch ex works, subject to prior sale. | | |
| | | | Please let us know if you prefer partial delivery. | | |
| | | | Payment terms: 30 days after invoice date | | |
| | | | Offer valid until: 06/30/2017 | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 | **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
[10]M300 Tele R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071142
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quany Road; Telford, PA 18969
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Quotation

Customer no.
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Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Payer
91045730

Page 2 / 5

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|--|-------------------|--------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>3.1.2 MEDICAL WEARABLE PATIENT MONITORS - 10 EACH M300 TELEMETRY.</p> <p>AMERINET MONITORING TIER 4 PRICING IS VALID WITH SIGNED LETTER OF COMMITMENT AND PURCHASE ORDER VALUE OF \$500,000 OR GREATER.</p> <p>IMPLEMENTATION FEES ARE NOTED ON QUOTATION #136071154 FOR \$17,480.87.</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPONSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Page 3 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|---|-------------------|--------------------|
| | | | from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form. | | |
| 0010 | 2 EA | MS18501 | Infinity M300 **Specif.national properties** Target country USA | | |
| | 2 EA | MS25755 | ** Device ** Infinity M300 | 1,888.70 | 3,777.40 |
| | 2 EA | MS29558 | ** Pulse Oximetry ** Draeger / Nellcor Sensors | | |
| | 2 EA | MS29558 | ** M300 Bedside Charger ** M300 Bedside Charger | 273.86 | 547.72 |
| | 2 EA | MS29560 | ** Bedside Charger Plug ** Plug, NA | 9.00 | 18.00 |
| | | | Value Infinity M300 | | 4,343.12 |
| 0020 | 1 EA | MS27901 | M300 Promotion **Specif.national properties** Target country USA | | |
| | 1 EA | OP90117 | * Buy 7 get 8 M300 Promotion * Buy 7 get 8 M300 Promotion | 15,137.93 | 15,137.93 |
| | | | ** Device ** MultiView | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on Inquiries

Page 4 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|---|--------|----------|--|-------------------|--------------------|
| | | | ** Pulse Oximetry ** Draeger / Nellcor Sensors | | |
| | 8 EA | OP90400 | ** M300 Bedside Charger ** M300 Bedside Charger | 0.07 | 0.56 |
| | 8 EA | OP90412 | ** Bedside Charger Plug ** Plug, NA | 0.13 | 1.04 |
| | 1 EA | MS25699 | *Infinity M300 CentralCharger* Infinity M300 Central Charger | 4,507.13 | 4,507.13 |
| | 1 EA | 4321720 | ** Power Cable ** Power Cord, North America | 11.97 | 11.97 |
| | | | Value M300 Promotion | | 19,658.63 |
| 0030 | 10 EA | MP03424 | EKG 5-adrig TruST AHA, Telem. ECG cable, 5-Lead TruST Tele., single-pin connector, reusable, AHA (IEC2), 70 cm | 129.43 | 1,294.30 |
| 0040 | 5 EA | MS18683 | SPO2 INTERMEDIATE CABLE, 1.2M SpO2 intermediate cable Dräger/Nellcor®, for Multimed Plus/Plus OR, 1.2 m | 132.95 | 664.75 |
| 0050 | 5 EA | MS13235 | SPO2 SENSOR DRÄGER, REUSABLE | 147.47 | 737.35 |
| 0070 | 1 EA | MQ00922 | 3rd Party Labor Budgetary site assessment | 5,555.00 | 5,555.00 |
| 0080 | 1 EA | 1979294 | Freight charges mt-m | 120.00 | 120.00 |
| | | | Net value excl. Sales Tax | | 32,373.15 |
| | | | Final amount | | 32,373.15 |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Page 5 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|--|-------------------|--------------------|
| | | | <p>Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 37- Week/s after rec. of order * 2 EA Pos. 0020: 37- Week/s after rec. of order * 1 EA Pos. 0030: 38- Week/s after rec. of order * 10 EA Pos. 0040: 38- Week/s after rec. of order * 5 EA Pos. 0050: 38- Week/s after rec. of order * 5 EA Pos. 0070: 38- Week/s after rec. of order * 1 EA Pos. 0080: 38- Week/s after rec. of order * 1 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> <p>Payment terms: 30 days after invoice date</p> <p>Offer valid until: 06/30/2017</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071148 **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated

12/28/2016
[2]ICS WIDE PROMO R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071148
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quary Road, Telford, PA 18969
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FIS Lockbox Processing
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Carlstadt, NJ 07072
Phone: 201 460-2823

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Account Name: Draeger Inc.
Account Number: 00-494-936
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Payer
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| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>3.1.3 INFORMATION CENTER = 2 CENTRAL STATIONS PROMO</p> <p>IMPLEMENTATION FEES ARE NOTED ON QUOTATION #136071154 FOR \$17,480.87</p> <p>AMERINET MONITORING TIER 4 PRICING IS VALID WITH A SIGNED LETTER OF COMMITMENT AND A PURCHASE ORDER VALUE OF \$500,000 OR GREATER.</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPONSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired</p> | | |



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Payer
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| | | | from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form. | | |
| 0010 | 2 EA | MS26800 | Infinity Central Station Wide | | |
| | | | **Specif.national properties** Target country USA | | |
| | | | ** Care Unit ** Telemetry/Stepdown (CC) Existing Customer Upgrade MVWS, ICS Gen 1 / 2 CPU | | |
| | 2 EA | OP90440 | ** Promotion ** ICS Upgrade | 9,696.00 | 19,392.00 |
| | 2 EA | MS18460 | ** Accessory Kit ** ICS Accessories EN | 300.27 | 600.54 |
| | 2 EA | MS23562 | ** UPS ** ICS UPS 120 V | 1,060.50 | 2,121.00 |
| | 4 EA | MS26806 | ** Flat Panel Displays ** 22" Widescreen Display | 523.58 | 2,094.32 |
| | 2 EA | 7497683 | ** Network Recorder Kit ** R50N Network Recorder Kit | 2,603.31 | 5,206.62 |
| | | | Value Infinity Central Station Wide | | 29,414.48 |
| 0020 | 1 EA | 1979294 | Freight charges mt-m | 120.00 | 120.00 |
| 0030 | 5 EA | 1979569 | Clinical Applicat. Supp.Monitor.8h segm | 2,200.00 | 100.00 0.11 |



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Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|--|--------|----------|-------------|-------------------|----------------------------------|
| Net value excl. Sales Tax | | | | | 29,534.59 |
| Final amount | | | | | 29,534.59 |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 38- Week/s after rec. of order * 2 EA Pos. 0020: 38- Week/s after rec. of order * 1 EA Pos. 0030: 38- Week/s after rec. of order * 5 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> <p>Payment terms: 30 days after invoice date</p> | | | | | |



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91045730

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Page 5 / 5

Payer
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| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
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| | | | Offer valid until: 06/30/2017 | | |



Quotation

Customer no.
91045730

Quotation no. 136071154 **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
PROJECT MANAGEMENT R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071154
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

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| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|---|-------------------|--------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>PROJECT MANAGEMENT FEES FOR PRODUCTS ON THE FOLLOWING QUOTATIONS: 136071142 136071148 136071152 136071153</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPONSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form.</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071154 Date of offer 12/28/2016

Please reference on inquiries

Payer
91045730

Page 3 / 4

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|---|--------|----------|-------------------------|-------------------|--------------------|
| 0010 | 1 EA | MQ00134 | Implementation Services | 17,480.87 | 17,480.87 |
| ----- Net value excl. Sales Tax | | | | | 17,480.87 |
| ----- Final amount | | | | | 17,480.87 |
| ===== | | | | | |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 38- Week/s after rec. of order * 1 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071154
Date of offer 12/28/2016

Please reference on inquiries

Page 4 / 4

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|---|-------------------|--------------------|
| | | | <p>Payment terms: 30 days after invoice date</p> <p>Offer valid until: 06/30/2017</p> | | |

Draeger, Inc.



**State of West Virginia
Request for Quotation
CRFQ 0506 WEH1700000007**

**PRICING
OPTION THREE:
15 ea. Delta Monitors**

Draeger, Inc.
3135 Quarry Road
Telford, PA 18969
USA
Toll Free: 1-800-437-2437
Phone: 1-215-721-5400
Fax: 1-215-721-5808
www.draeger.com

OPTION THREE

Exhibit A

| Description/Equipment/One Time Purchase | UNSPSC | Quantity | Cost Per Unit | Total Cost |
|---|----------|----------|---------------|--------------|
| 3.1.1 Bedside monitors (Proposal # 136086067) | 42181719 | 15 | \$9,499.53 | \$142,492.91 |
| 3.1.2 Medical surgical wearable patient monitors (Proposal # 136071142) | 42181719 | 10 | \$16,186.57 | \$ 32,373.15 |
| 3.1.3 Information center (Proposal # 136071148) | 42181719 | 2 | \$14,767.30 | \$ 29,534.59 |
| 3.1.4 Warranty Standard 1 year - Included | 42181719 | 1 | \$ 0.00 | \$ 0.00 |
| 3.1.5 Manual/CDs - Included | 55101521 | 1 | \$ 0.00 | \$ 0.00 |
| 3.1.6 Installation (Proposal # 136071154) | 81111809 | 1 | \$17,480.87 | \$ 17,480.87 |
| 3.1.7 In-service medical staff - Included | 86000000 | 1 | \$ 0.00 | \$ 0.00 |

TOTAL PROPOSAL

\$221,881.52

Evaluation and Award Criteria: Contract will be awarded to the Vendor meeting the required specifications for the lowest overall Total Cost.

Dräger, Inc.
Vendor Name (Printed)

3135 Quarry Road, Telford, PA 18969
Purchase Order Address

3135 Quarry Road, Telford, PA 18969
Vendor Remit-To Address:

Timothy S. Rugel, Sr. Mgr. of Financial Operations
Vendor Authorized Representative (Printed)
Date


Signature

(215) 721-5400 (215) 721-5808
Telephone Fax

Tim.Rugel@draeger.com
E-mail



Quotation

Customer no.
91045730

Quotation no. 136071142 **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
[10]M300 Tele R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071142
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road, Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Page 2 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|--|-------------------|--------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>3.1.2 MEDICAL WEARABLE PATIENT MONITORS - 10 EACH M300 TELEMETRY.</p> <p>AMERINET MONITORING TIER 4 PRICING IS VALID WITH SIGNED LETTER OF COMMITMENT AND PURCHASE ORDER VALUE OF \$500,000 OR GREATER.</p> <p>IMPLEMENTATION FEES ARE NOTED ON QUOTATION #136071154 FOR \$17,480.87.</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPONSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired</p> | | |



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91045730

Quotation no. 136071142 Date of offer 12/28/2016

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Page 3 / 5

Payer
91045730

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|------|--------|----------|---|-------------------|--------------------|
| | | | from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form. | | |
| 0010 | 2 EA | MS18501 | Infinity M300 | | |
| | | | **Specif.national properties** Target country USA | | |
| | 2 EA | MS25755 | Infinity M300 | 1,888.70 | 3,777.40 |
| | | | ** Device ** ** Pulse Oximetry ** Draeger / Nellcor Sensors | | |
| | 2 EA | MS29558 | M300 Bedside Charger | 273.86 | 547.72 |
| | | | ** M300 Bedside Charger ** | | |
| | 2 EA | MS29560 | Plug, NA | 9.00 | 18.00 |
| | | | ** Bedside Charger Plug ** | | |
| | | | Value Infinity M300 | | 4,343.12 |
| 0020 | 1 EA | MS27901 | M300 Promotion | | |
| | | | **Specif.national properties** Target country USA | | |
| | 1 EA | OP90117 | Buy 7 get 8 M300 Promotion | 15,137.93 | 15,137.93 |
| | | | * Buy 7 get 8 M300 Promotion * ** Device ** MultiView | | |



Quotation

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Page 4 / 5

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|---|--------|----------|--|-------------------|--------------------|
| | | | ** Pulse Oximetry ** Draeger / Nellcor Sensors | | |
| | 8 EA | OP90400 | ** M300 Bedside Charger ** M300 Bedside Charger | 0.07 | 0.56 |
| | 8 EA | OP90412 | ** Bedside Charger Plug ** Plug, NA | 0.13 | 1.04 |
| | 1 EA | MS25699 | *Infinity M300 CentralCharger* Infinity M300 Central Charger | 4,507.13 | 4,507.13 |
| | 1 EA | 4321720 | ** Power Cable ** Power Cord, North America | 11.97 | 11.97 |
| | | | Value M300 Promotion | | 19,658.63 |
| 0030 | 10 EA | MP03424 | EKG 5-adrig TruST AHA, Telem. ECG cable, 5-Lead TruST Tele., single-pin connector, reusable, AHA (IEC2), 70 cm | 129.43 | 1,294.30 |
| 0040 | 5 EA | MS18683 | SPO2 INTERMEDIATE CABLE, 1.2M SpO2 intermediate cable Dräger/Nellcor®, for Multimed Plus/Plus OR, 1.2 m | 132.95 | 664.75 |
| 0050 | 5 EA | MS13235 | SPO2 SENSOR DRÄGER, REUSABLE | 147.47 | 737.35 |
| 0070 | 1 EA | MQ00922 | 3rd Party Labor Budgetary site assessment | 5,555.00 | 5,555.00 |
| 0080 | 1 EA | 1979294 | Freight charges mt-m | 120.00 | 120.00 |
| | | | Net value excl. Sales Tax | | 32,373.15 |
| | | | Final amount | | 32,373.15 |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071142 Date of offer 12/28/2016

Please reference on inquiries

Page 5 / 5

Payer
91045730

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|------|--------|----------|--|-------------------|--------------------|
| | | | <p>Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 37- Week/s after rec. of order * 2 EA Pos. 0020: 37- Week/s after rec. of order * 1 EA Pos. 0030: 38- Week/s after rec. of order * 10 EA Pos. 0040: 38- Week/s after rec. of order * 5 EA Pos. 0050: 38- Week/s after rec. of order * 5 EA Pos. 0070: 38- Week/s after rec. of order * 1 EA Pos. 0080: 38- Week/s after rec. of order * 1 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> <p>Payment terms: 30 days after invoice date</p> <p>Offer valid until: 06/30/2017</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136086067
Date of offer 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
[15]Delta R2

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136086067
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road, Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



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Page 2 / 5

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Page 3 / 5

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|------|--------|----------|---|-------------------|----------------------------------|
| | | | from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form. | | |
| 0010 | 15EA | MS18597 | Delta Monitor Patient Monitoring Infinity Delta **Specif.national properties** Target country USA | | |
| | 15EA | OP90020 | ** Monitor ** Delta Base Unit | 6,233.62 | 93,504.30 |
| | | | **Instructions for Use (IFU)** * Single set of IFU/s * supplied per order. * IFUs on a DVD ordered. ADDITIONAL IFUS NOT ORDERED | | |
| | | | ** SpO2 Included ** Draeger OxiSure | | |
| | | | ** Care Unit ** Critical Care Unit/xICU (CC) | | |
| | 15EA | 7265130 | ** Mounting ** IDS with power supply unit | 772.34 | 11,585.10 |
| | 15EA | 5597914 | ** Software Options ** SW option 6 Waveform Channels | 668.12 | 10,021.80 |
| | 15EA | 5597203 | Second Pod Comm. Port | 454.32 | 6,814.80 |
| | | | Value Delta Monitor | | 121,926.00 |
| 0020 | 15EA | MP03414 | ECG 5-Lead dual-pin AHA, 1.5m | 182.16 | 2,732.40 |



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|--|--------|----------|--|-------------------|------------|--------------------|
| | | | ECG cable, 5-Lead, dual-pin connector, reusable, AHA (IEC2), 1/1.5 m | | | |
| 0030 | 15 EA | 3368433 | SPO2 NELLCOR INTERM CABLE, 1M | 137.56 | | 2,063.40 |
| 0040 | 15 EA | MS13235 | SPO2 SENSOR DRÄGER, REUSABLE | 147.47 | | 2,212.05 |
| 0050 | 15 EA | MP00913 | NBP Cuff S, 17-25/29cm | 21.97 | | 329.55 |
| 0060 | 15 EA | MP00916 | NBP Cuff M+, 23-33/43cm | 21.97 | | 329.55 |
| 0070 | 15 EA | MP00919 | NBP Cuff L+, 31-40/55cm | 24.24 | | 363.60 |
| 0080 | 15 EA | MP00953 | NBP extension hose, adult 3,7m | 75.75 | | 1,136.25 |
| 0090 | 1 EA | MQ00921 | 3rd Party Hardware (15) Single monitor wall mounts w-wall channel | 10,500.00 | | 10,500.00 |
| 0100 | 5 EA | 1979569 | Clinical Applicat. Supp.Monitor.8h segm | 2,200.00 | 100.00 | 0.11 |
| 0120 | 1 EA | 1979294 | Freight charges mt-m | 900.00 | | 900.00 |
| Net value excl. Sales Tax | | | | | | 142,492.91 |
| Final amount | | | | | | 142,492.91 |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> | | | | | | |



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91045730

Quotation no. 136086067
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Page 5 / 5

Payer
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Quotation

Customer no.
91045730

Quotation no. 136071148 **Date of offer** 12/28/2016

Please reference on Inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
[2]ICS WIDE PROMO R4

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
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Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

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Our Tax ID: 23-1699096
3135 Quarry Road; Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
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Draeger, Inc.
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Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
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Deutsche Bank Trust Company Americas
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Customer no.
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Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
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Page 3 / 5

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|------|--------|----------|---|-------------------|----------------------------------|
| | | | from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form. | | |
| 0010 | 2 EA | MS26800 | Infinity Central Station Wide | | |
| | | | **Specif.national properties** Target country USA | | |
| | | | ** Care Unit ** Telemetry/Stepdown (CC) Existing Customer Upgrade MVWS, ICS Gen 1 / 2 CPU | | |
| | 2 EA | OP90440 | ** Promotion ** ICS Upgrade | 9,696.00 | 19,392.00 |
| | 2 EA | MS18460 | ** Accessory Kit ** ICS Accessories EN | 300.27 | 600.54 |
| | 2 EA | MS23562 | ** UPS ** ICS UPS 120 V | 1,060.50 | 2,121.00 |
| | 4 EA | MS26806 | ** Flat Panel Displays ** 22" Widescreen Display | 523.58 | 2,094.32 |
| | 2 EA | 7497683 | ** Network Recorder Kit ** R50N Network Recorder Kit | 2,603.31 | 5,206.62 |
| | | | Value Infinity Central Station Wide | | 29,414.48 |
| 0020 | 1 EA | 1979294 | Freight charges mt-m | 120.00 | 120.00 |
| 0030 | 5 EA | 1979569 | Clinical Applicat. Supp.Monitor.8h segm | 2,200.00 | 100.00 0.11 |



Quotation

Customer no.
91045730

Quotation no. 136071148 | Date of offer 12/28/2016

Please reference on inquiries

Page 4 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|---|--------|----------|-------------|-------------------|-------------------------------|
| ----- | | | | | |
| Net value excl. Sales Tax | | | | | 29,534.59 |
| ----- | | | | | |
| Final amount | | | | | 29,534.59 |
| ===== | | | | | |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> <p>Delivery time Pos. 0010: 38- Week/s after rec. of order * 2 EA Pos. 0020: 38- Week/s after rec. of order * 1 EA Pos. 0030: 38- Week/s after rec. of order * 5 EA * After receipt of order, ready for dispatch ex works, subject to prior sale.</p> <p>Please let us know if you prefer partial delivery.</p> <p>Payment terms: 30 days after invoice date</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071148
Date of offer 12/28/2016

Please reference on inquiries

Page 5 / 5

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price Discount % USD |
|------|--------|----------|-------------------------------|-------------------|-------------------------------|
| | | | Offer valid until: 06/30/2017 | | |



Quotation

Customer no.
91045730

Quotation no. 136071154 **Date of offer** 12/28/2016

Please reference on inquiries

Customer
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Payer 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your request dated
12/28/2016
PROJECT MANAGEMENT R5

Ship to 91045730
WELCH COMMUNITY HOSP
454 MCDOWELL ST
WELCH WV 24801-2029

Your contact person

JEFF RITCHIE
Tel.: 315-679-0268
Fax : 215-721-5811

Dear Customer,

Thank you for your inquiry. Please find enclosed our corresponding offer.
If you have any further questions, please do not hesitate to contact us.

Quotation no.: 136071154
Responsible: JEFF RITCHIE

Telephone: 315-679-0268
Fax: 215-721-5811
E-mail: jeff.ritchie@draeger.com

Best regards

Draeger Inc.

Draeger Inc.
Our Tax ID: 23-1699096
3135 Quarry Road, Telford, PA 18969
An Equal Opportunity Employer M / F / V / H
Telephone 800-437-2437
<http://www.draeger.com>

Remit to:
LOCKBOX (Standard USPS)
Draeger, Inc.
PO Box 13369
Newark, New Jersey
07101-3362

Remit to:
LOCKBOX (Overnight)
FIS Lockbox Processing
Lockbox #13369
400A Commerce Blvd
Carlstadt, NJ 07072
Phone: 201 460-2823

Remit US Wire Transfers to:
Account Name: Draeger Inc.
Account Number: 00-494-936
Transit Routing: 021001033
SWIFT: BKTRUS33
Deutsche Bank Trust Company Americas
Church Street Station, New York, NY



Quotation

Customer no.
91045730

Quotation no. 136071154 Date of offer 12/28/2016

Please reference on inquiries

Page 2 / 4

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|--|-------------------|--------------------|
| | | | <p>National account: INTALERE MONITOR T4</p> <p>Shipping Charges per above National Account Confirmation no. to customer: Date confirmation to customer: Order-No. from customer: Date order from customer:</p> <p>PROJECT MANAGEMENT FEES FOR PRODUCTS ON THE FOLLOWING QUOTATIONS: 136071142 136071148 136071152 136071153 136086067</p> <p>CUSTOMER WILL PROVIDE ALL NETWORKING COMPONENTS FOR WIRED AND WIRELESS NETWORKING TO INCLUDE CABLE PULLING AND TERMINATION. THE COSTS FOR ANY REQUIRED NETWORK ALTERATIONS ARE NOT INCLUDED IN THIS QUOTATION AND ARE THE RESPONSIBILITY OF THE CUSTOMER.</p> <p>CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING, TERMINATION AND CERTIFICATION OF NETWORK CABLE.</p> <p>UNLESS OTHERWISE NOTED, THE CUSTOMER IS RESPONSIBLE FOR SUPPLYING, INSTALLING AND CONFIGURATION OF ANY NETWORK SWITCHES THAT WILL BE REQUIRED.</p> <p>THE CUSTOMER IS RESPONSIBLE FOR INSTALLATION OF ANY WALL CHANNELS.</p> <p>The wireless site survey pricing is budgetary only and subject to change based on building construction, actual coverage area and other information acquired from the site survey profile. Official pricing will require an AutoCAD drawing (electronic), hardcopy drawing of coverage areas (marked up) and a completed site survey profile form.</p> | | |



Quotation

Customer no.
91045730

Quotation no. 136071154 Date of offer 12/28/2016

Please reference on inquiries

Payer
91045730

Page 3 / 4

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|--|--------|----------|-------------------------|-------------------|--------------------|
| 0010 | 1 EA | MQ00134 | Implementation Services | 17,480.00 | 17,480.00 |
| ----- Net value excl. Sales Tax | | | | | 17,480.00 |
| ----- Final amount | | | | | 17,480.00 |
| ===== | | | | | ===== |
| <p>The sale of the products identified herein is expressly subject to the Draeger, Inc. - Terms and Conditions of Sale which are attached hereto and which may also be found at: http://www.draeger.com/termsandconditions.</p> <p>Customer is hereby informed that section 1128B(b) of the Social Security Act may apply, which requires that discounts and other reductions in price or the existence of discount programs be properly disclosed and reflected in the costs claimed or charges made by a provider under Medicare or a Federal or State Health Program.</p> <p>PLEASE CHECK THIS ORDER CAREFULLY FOR ACCURACY IN PRICING, PART # AND DESCRIPTION. Contact Customer Service immediately if there are any discrepancies. This acknowledgement and note constitutes the entire agreement with respect to the contemplated transaction and supersedes all previous negotiations, proposals, writings, advertisements, or publications.</p> | | | | | |



Quotation

Customer no.
91045730

Quotation no. 136071154
Date of offer 12/28/2016

Please reference on inquiries

Page 4 / 4

Payer
91045730

| Line | Quant. | Part no. | Description | Unit price USD | Total price USD |
|------|--------|----------|---|-------------------|--------------------|
| | | | Delivery time Pos. 0010: 38- Week/s after rec. of order * 1 EA * After receipt of order, ready for dispatch ex works, subject to prior sale. Please let us know if you prefer partial delivery. Payment terms: 30 days after invoice date Offer valid until: 06/30/2017 | | |

WV STATE GOVERNMENT

HIPAA BUSINESS ASSOCIATE ADDENDUM

This Health Insurance Portability and Accountability Act of 1996 (hereafter, HIPAA) Business Associate Addendum ("Addendum") is made a part of the Agreement ("Agreement") by and between the State of West Virginia ("Agency"), and Business Associate ("Associate"), and is effective as of the date of execution of the Addendum.

The Associate performs certain services on behalf of or for the Agency pursuant to the underlying Agreement that requires the exchange of information including protected health information protected by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA"). The Agency is a "Covered Entity" as that term is defined in HIPAA, and the parties to the underlying Agreement are entering into this Addendum to establish the responsibilities of both parties regarding HIPAA-covered information and to bring the underlying Agreement into compliance with HIPAA.

Whereas it is desirable, in order to further the continued efficient operations of Agency to disclose to its Associate certain information which may contain confidential individually identifiable health information (hereafter, Protected Health Information or PHI); and

Whereas, it is the desire of both parties that the confidentiality of the PHI disclosed hereunder be maintained and treated in accordance with all applicable laws relating to confidentiality, including the Privacy and Security Rules, the HITECH Act and its associated regulations, and the parties do agree to at all times treat the PHI and interpret this Addendum consistent with that desire.

NOW THEREFORE: the parties agree that in consideration of the mutual promises herein, in the Agreement, and of the exchange of PHI hereunder that:

1. **Definitions.** Terms used, but not otherwise defined, in this Addendum shall have the same meaning as those terms in the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.
 - a. **Agency Procurement Officer** shall mean the appropriate Agency individual listed at: <http://www.state.wv.us/admin/purchase/vrc/agencyli.html>.
 - b. **Agent** shall mean those person(s) who are agent(s) of the Business Associate, in accordance with the Federal common law of agency, as referenced in 45 CFR § 160.402(c).
 - c. **Breach** shall mean the acquisition, access, use or disclosure of protected health information which compromises the security or privacy of such information, except as excluded in the definition of Breach in 45 CFR § 164.402.
 - d. **Business Associate** shall have the meaning given to such term in 45 CFR § 160.103.
 - e. **HITECH Act** shall mean the Health Information Technology for Economic and Clinical Health Act. Public Law No. 111-05. 111th Congress (2009).

- f. **Privacy Rule** means the Standards for Privacy of Individually Identifiable Health Information found at 45 CFR Parts 160 and 164.
- g. **Protected Health Information or PHI** shall have the meaning given to such term in 45 CFR § 160.103, limited to the information created or received by Associate from or on behalf of Agency.
- h. **Security Incident** means any known successful or unsuccessful attempt by an authorized or unauthorized individual to inappropriately use, disclose, modify, access, or destroy any information or interference with system operations in an information system.
- i. **Security Rule** means the Security Standards for the Protection of Electronic Protected Health Information found at 45 CFR Parts 160 and 164.
- j. **Subcontractor** means a person to whom a business associate delegates a function, activity, or service, other than in the capacity of a member of the workforce of such business associate.

2. Permitted Uses and Disclosures.

- a. **PHI Described.** This means PHI created, received, maintained or transmitted on behalf of the Agency by the Associate. This PHI is governed by this Addendum and is limited to the minimum necessary, to complete the tasks or to provide the services associated with the terms of the original Agreement, and is described in Appendix A.
- b. **Purposes.** Except as otherwise limited in this Addendum, Associate may use or disclose the PHI on behalf of, or to provide services to, Agency for the purposes necessary to complete the tasks, or provide the services, associated with, and required by the terms of the original Agreement, or as required by law, if such use or disclosure of the PHI would not violate the Privacy or Security Rules or applicable state law if done by Agency or Associate, or violate the minimum necessary and related Privacy and Security policies and procedures of the Agency. The Associate is directly liable under HIPAA for impermissible uses and disclosures of the PHI it handles on behalf of Agency.
- c. **Further Uses and Disclosures.** Except as otherwise limited in this Addendum, the Associate may disclose PHI to third parties for the purpose of its own proper management and administration, or as required by law, provided that (i) the disclosure is required by law, or (ii) the Associate has obtained from the third party reasonable assurances that the PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party by the Associate; and, (iii) an agreement to notify the Associate and Agency of any instances of which it (the third party) is aware in which the confidentiality of the information has been breached. To the extent practical, the information should be in a limited data set or the minimum necessary information pursuant to 45 CFR § 164.502, or take other measures as necessary to satisfy the Agency's obligations under 45 CFR § 164.502.

3. Obligations of Associate.

- a. **Stated Purposes Only.** The PHI may not be used by the Associate for any purpose other than as stated in this Addendum or as required or permitted by law.
- b. **Limited Disclosure.** The PHI is confidential and will not be disclosed by the Associate other than as stated in this Addendum or as required or permitted by law. Associate is prohibited from directly or indirectly receiving any remuneration in exchange for an individual's PHI unless Agency gives written approval and the individual provides a valid authorization. Associate will refrain from marketing activities that would violate HIPAA, including specifically Section 13406 of the HITECH Act. Associate will report to Agency any use or disclosure of the PHI, including any Security Incident not provided for by this Agreement of which it becomes aware.
- c. **Safeguards.** The Associate will use appropriate safeguards, and comply with Subpart C of 45 CFR Part 164 with respect to electronic protected health information, to prevent use or disclosure of the PHI, except as provided for in this Addendum. This shall include, but not be limited to:
 - i. Limitation of the groups of its workforce and agents, to whom the PHI is disclosed to those reasonably required to accomplish the purposes stated in this Addendum, and the use and disclosure of the minimum PHI necessary or a Limited Data Set;
 - ii. Appropriate notification and training of its workforce and agents in order to protect the PHI from unauthorized use and disclosure;
 - iii. Maintenance of a comprehensive, reasonable and appropriate written PHI privacy and security program that includes administrative, technical and physical safeguards appropriate to the size, nature, scope and complexity of the Associate's operations, in compliance with the Security Rule;
 - iv. In accordance with 45 CFR §§ 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of the business associate agree to the same restrictions, conditions, and requirements that apply to the business associate with respect to such information.
- d. **Compliance With Law.** The Associate will not use or disclose the PHI in a manner in violation of existing law and specifically not in violation of laws relating to confidentiality of PHI, including but not limited to, the Privacy and Security Rules.
- e. **Mitigation.** Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Associate of a use or disclosure of the PHI by Associate in violation of the requirements of this Addendum, and report its mitigation activity back to the Agency.

- f. **Support of Individual Rights.**
- i. **Access to PHI.** Associate shall make the PHI maintained by Associate or its agents or subcontractors in Designated Record Sets available to Agency for inspection and copying, and in electronic format, if requested, within ten (10) days of a request by Agency to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR § 164.524 and consistent with Section 13405 of the HITECH Act.
 - ii. **Amendment of PHI.** Within ten (10) days of receipt of a request from Agency for an amendment of the PHI or a record about an individual contained in a Designated Record Set, Associate or its agents or subcontractors shall make such PHI available to Agency for amendment and incorporate any such amendment to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR § 164.526.
 - iii. **Accounting Rights.** Within ten (10) days of notice of a request for an accounting of disclosures of the PHI, Associate and its agents or subcontractors shall make available to Agency the documentation required to provide an accounting of disclosures to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR §164.528 and consistent with Section 13405 of the HITECH Act. Associate agrees to document disclosures of the PHI and information related to such disclosures as would be required for Agency to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR § 164.528. This should include a process that allows for an accounting to be collected and maintained by Associate and its agents or subcontractors for at least six (6) years from the date of disclosure, or longer if required by state law. At a minimum, such documentation shall include:
 - the date of disclosure;
 - the name of the entity or person who received the PHI, and if known, the address of the entity or person;
 - a brief description of the PHI disclosed; and
 - a brief statement of purposes of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure.
 - iv. **Request for Restriction.** Under the direction of the Agency, abide by any individual's request to restrict the disclosure of PHI, consistent with the requirements of Section 13405 of the HITECH Act and 45 CFR § 164.522, when the Agency determines to do so (except as required by law) and if the disclosure is to a health plan for payment or health care operations and it pertains to a health care item or service for which the health care provider was paid in full "out-of-pocket."
 - v. **Immediate Discontinuance of Use or Disclosure.** The Associate will immediately discontinue use or disclosure of Agency PHI pertaining to any individual when so requested by Agency. This includes, but is not limited to, cases in which an individual has withdrawn or modified an authorization to use or disclose PHI.

- g. Retention of PHI.** Notwithstanding section 4.a. of this Addendum, Associate and its subcontractors or agents shall retain all PHI pursuant to state and federal law and shall continue to maintain the PHI required under Section 3.f. of this Addendum for a period of six (6) years after termination of the Agreement, or longer if required under state law.
- h. Agent's, Subcontractor's Compliance.** The Associate shall notify the Agency of all subcontracts and agreements relating to the Agreement, where the subcontractor or agent receives PHI as described in section 2.a. of this Addendum. Such notification shall occur within 30 (thirty) calendar days of the execution of the subcontract and shall be delivered to the Agency Procurement Officer. The Associate will ensure that any of its subcontractors, to whom it provides any of the PHI it receives hereunder, or to whom it provides any PHI which the Associate creates or receives on behalf of the Agency, agree to the restrictions and conditions which apply to the Associate hereunder. The Agency may request copies of downstream subcontracts and agreements to determine whether all restrictions, terms and conditions have been flowed down. Failure to ensure that downstream contracts, subcontracts and agreements contain the required restrictions, terms and conditions may result in termination of the Agreement.
- j. Federal and Agency Access.** The Associate shall make its internal practices, books, and records relating to the use and disclosure of PHI, as well as the PHI, received from, or created or received by the Associate on behalf of the Agency available to the U.S. Secretary of Health and Human Services consistent with 45 CFR § 164.504. The Associate shall also make these records available to Agency, or Agency's contractor, for periodic audit of Associate's compliance with the Privacy and Security Rules. Upon Agency's request, the Associate shall provide proof of compliance with HIPAA and HITECH data privacy/protection guidelines, certification of a secure network and other assurance relative to compliance with the Privacy and Security Rules. This section shall also apply to Associate's subcontractors, if any.
- k. Security.** The Associate shall take all steps necessary to ensure the continuous security of all PHI and data systems containing PHI. In addition, compliance with 74 FR 19006 Guidance Specifying the Technologies and Methodologies That Render PHI Unusable, Unreadable, or Indecipherable to Unauthorized Individuals for Purposes of the Breach Notification Requirements under Section 13402 of Title XIII is required, to the extent practicable. If Associate chooses not to adopt such methodologies as defined in 74 FR 19006 to secure the PHI governed by this Addendum, it must submit such written rationale, including its Security Risk Analysis, to the Agency Procurement Officer for review prior to the execution of the Addendum. This review may take up to ten (10) days.
- l. Notification of Breach.** During the term of this Addendum, the Associate shall notify the Agency and, unless otherwise directed by the Agency in writing, the WV Office of Technology immediately by e-mail or web form upon the discovery of any Breach of unsecured PHI; or within 24 hours by e-mail or web form of any suspected Security Incident, intrusion or unauthorized use or disclosure of PHI in violation of this Agreement and this Addendum, or potential loss of confidential data affecting this Agreement. Notification shall be provided to the Agency Procurement Officer at www.state.wv.us/admin/purchase/vrc/agencyli.htm and,

unless otherwise directed by the Agency in writing, the Office of Technology at incident@wv.gov or <https://apps.wv.gov/ot/Default.aspx>.

The Associate shall immediately investigate such Security Incident, Breach, or unauthorized use or disclosure of PHI or confidential data. Within 72 hours of the discovery, the Associate shall notify the Agency Procurement Officer, and, unless otherwise directed by the Agency in writing, the Office of Technology of: (a) Date of discovery; (b) What data elements were involved and the extent of the data involved in the Breach; (c) A description of the unauthorized persons known or reasonably believed to have improperly used or disclosed PHI or confidential data; (d) A description of where the PHI or confidential data is believed to have been improperly transmitted, sent, or utilized; (e) A description of the probable causes of the improper use or disclosure; and (f) Whether any federal or state laws requiring individual notifications of Breaches are triggered.

Agency will coordinate with Associate to determine additional specific actions that will be required of the Associate for mitigation of the Breach, which may include notification to the individual or other authorities.

All associated costs shall be borne by the Associate. This may include, but not be limited to costs associated with notifying affected individuals.

If the Associate enters into a subcontract relating to the Agreement where the subcontractor or agent receives PHI as described in section 2.a. of this Addendum, all such subcontracts or downstream agreements shall contain the same incident notification requirements as contained herein, with reporting directly to the Agency Procurement Officer. Failure to include such requirement in any subcontract or agreement may result in the Agency's termination of the Agreement.

- m. **Assistance in Litigation or Administrative Proceedings.** The Associate shall make itself and any subcontractors, workforce or agents assisting Associate in the performance of its obligations under this Agreement, available to the Agency at no cost to the Agency to testify as witnesses, or otherwise, in the event of litigation or administrative proceedings being commenced against the Agency, its officers or employees based upon claimed violations of HIPAA, the HIPAA regulations or other laws relating to security and privacy, which involves inaction or actions by the Associate, except where Associate or its subcontractor, workforce or agent is a named as an adverse party.

4. Addendum Administration.

- a. **Term.** This Addendum shall terminate on termination of the underlying Agreement or on the date the Agency terminates for cause as authorized in paragraph (c) of this Section, whichever is sooner.
- b. **Duties at Termination.** Upon any termination of the underlying Agreement, the Associate shall return or destroy, at the Agency's option, all PHI received from, or created or received by the Associate on behalf of the Agency that the Associate still maintains in any form and retain no copies of such PHI or, if such return or destruction is not feasible, the Associate shall extend the protections of this Addendum to the PHI and limit further uses and disclosures to the purposes that make the return or destruction of the PHI infeasible. This shall also apply to all agents and subcontractors of Associate. The duty of the Associate and its agents

and subcontractors to assist the Agency with any HIPAA required accounting of disclosures survives the termination of the underlying Agreement.

- c. **Termination for Cause.** Associate authorizes termination of this Agreement by Agency, if Agency determines Associate has violated a material term of the Agreement. Agency may, at its sole discretion, allow Associate a reasonable period of time to cure the material breach before termination.
- d. **Judicial or Administrative Proceedings.** The Agency may terminate this Agreement if the Associate is found guilty of a criminal violation of HIPAA. The Agency may terminate this Agreement if a finding or stipulation that the Associate has violated any standard or requirement of HIPAA/HITECH, or other security or privacy laws is made in any administrative or civil proceeding in which the Associate is a party or has been joined. Associate shall be subject to prosecution by the Department of Justice for violations of HIPAA/HITECH and shall be responsible for any and all costs associated with prosecution.
- e. **Survival.** The respective rights and obligations of Associate under this Addendum shall survive the termination of the underlying Agreement.

5. General Provisions/Ownership of PHI.


- a. **Retention of Ownership.** Ownership of the PHI resides with the Agency and is to be returned on demand or destroyed at the Agency's option, at any time, and subject to the restrictions found within section 4.b. above.
- b. **Secondary PHI.** Any data or PHI generated from the PHI disclosed hereunder which would permit identification of an individual must be held confidential and is also the property of Agency.
- c. **Electronic Transmission.** Except as permitted by law or this Addendum, the PHI or any data generated from the PHI which would permit identification of an individual must not be transmitted to another party by electronic or other means for additional uses or disclosures not authorized by this Addendum or to another contractor, or allied agency, or affiliate without prior written approval of Agency.
- d. **No Sales.** Reports or data containing the PHI may not be sold without Agency's or the affected individual's written consent.
- e. **No Third-Party Beneficiaries.** Nothing express or implied in this Addendum is intended to confer, nor shall anything herein confer, upon any person other than Agency, Associate and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.
- f. **Interpretation.** The provisions of this Addendum shall prevail over any provisions in the Agreement that may conflict or appear inconsistent with any provisions in this Addendum. The interpretation of this Addendum shall be made under the laws of the state of West Virginia.
- g. **Amendment.** The parties agree that to the extent necessary to comply with applicable law they will agree to further amend this Addendum.
- h. **Additional Terms and Conditions.** Additional discretionary terms may be included in the release order or change order process.

AGREED:

Name of Agency: Welch Community Hospital

Name of Associate: Dräger, Inc.

Signature: _____

Signature: 


Title: C.E.O.

Title: Sr. Manager of Finance

Date: _____

Date: 11/3/17

Form - WVBA-012004
Amended 06.26.2013

APPROVED AS TO FORM THIS 26th
DAY OF Jan 20 13

Patrick Morrissey
Attorney General
BY _____

Appendix A

(To be completed by the Agency's Procurement Officer prior to the execution of the Addendum, and shall be made a part of the Addendum. PHI not identified prior to execution of the Addendum may only be added by amending Appendix A and the Addendum, via Change Order.)

Name of Associate: **Draeger, Inc.**

Name of Agency: **WVDHHR/BHHFF/Welch Community Hospital**

Describe the PHI (do not include any actual PHI). If not applicable, please indicate the same.

Any and all personally identifiable information including but not limited to patient name, address, date of birth, Social Security Number, telephone number, and insurance information.

Any and all protected health information including but not limited to patient diagnosis, lab test, radiological exams, physical health exams, and/or treatment procedures.

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, 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: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. 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.

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.

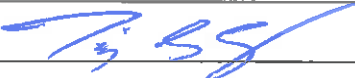
"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"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.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Draeger, Inc.

Authorized Signature:  Date: 11/3/17

State of Commonwealth of Pennsylvania

County of _____, to-wit:

Taken, subscribed, and sworn to before me this ____ day of _____, 20__.

My Commission expires _____, 20__.

AFFIX SEAL HERE

NOTARY PUBLIC _____



DRAEMED-01 ACOLLINS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/30/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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| | | |
|---|---|--------------------------------------|
| PRODUCER Johnson, Kendall & Johnson, Inc. 109 Pheasant Run Newtown, PA 18940 | CONTACT NAME: E. Ann Collins | |
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| E-MAIL ADDRESS: acollins@kj.com | | |
| INSURER(S) AFFORDING COVERAGE | | NAIC # |
| INSURER A : HDI Global Insurance Company | | 41343 |
| INSURER B : Zurich American Insurance Co. | | 16535 |
| INSURER C : Hartford Accident & Indemnity Company | | 22357 |
| INSURER D : | | |
| INSURER E : | | |
| INSURER F : | | |

INSURED
**Draeger Medical Systems, Inc. & Draeger, Inc.
and Draeger Medical, Inc.
3135 Quarry Road
Telford, PA 18969**

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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| INSR LTR | TYPE OF INSURANCE | ADDL SUBR INSD WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|----------|--|--------------------|---------------|-------------------------|-------------------------|--|--------------|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Products/Comp Ops GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | GLD11523-06 | 01/01/2016 | 01/01/2017 | EACH OCCURRENCE | \$ 5,000,000 |
| | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 1,000,000 |
| | | | | | | MED EXP (Any one person) | \$ 10,000 |
| | | | | | | PERSONAL & ADV INJURY | \$ 5,000,000 |
| B | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | BAP3792906-08 | 01/01/2016 | 01/01/2017 | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,000,000 |
| | | | | | | BODILY INJURY (Per person) | \$ |
| | | | | | | BODILY INJURY (Per accident) | \$ |
| | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | | | EACH OCCURRENCE | \$ |
| | | | | | | AGGREGATE | \$ |
| | | | | | | | \$ |
| | | | | | | | \$ |
| C | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input checked="" type="checkbox"/> Y/N <input checked="" type="checkbox"/> N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | 39WBBY2944 | 07/01/2016 | 07/01/2017 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER | |
| | | | | | | E.L. EACH ACCIDENT | \$ 1,000,000 |
| | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ 1,000,000 |
| | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 This certificate is intended as an Evidence of the Insurance Portfolio currently in place for Draeger Medical Systems, Inc. and Draeger Medical, Inc. For a certificate specific to your facility, project, contract or entity please contact Draeger's office. The updated document will be prepared and forwarded based upon Draeger's instructions.

CERTIFICATE HOLDER

~~~~ Evidence of Insurance ~~~~  
 ~~~~ Evidence of Insurance ~~~~

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Infinity® Acute Care System monitoring solution

In acute care environments, patient care has become increasingly complex. There is a growing need among clinicians for systems that are both easy to use and are aligned with hospital workflow. Dräger created the Infinity Acute Care System monitoring solution to meet the needs of all care areas – both at the bedside and while on transport.



MONITORING THAT SUPPORTS THE WAY YOU WORK

The Infinity Acute Care System monitoring solution is a breakthrough in mobility, patient surveillance, and data access. This fully networked solution allows a single monitor to follow the patient during the entire care pathway to minimize undetected events. Real-time surveillance is continuous – both at the bedside and on transport within the hospital. At the same time, this innovative solution brings data to the point of need and opens the flow of patient information throughout the hospital and beyond to support time-critical decision making.

SUPPORT FOR ALL PATIENT TYPES AND ACUITY LEVELS

The Infinity Acute Care System monitoring solution teams the handheld Infinity M540 patient monitor with a powerful Dräger Medical Cockpit® at the point of care.

The Infinity M540 monitor: Optimized for patient transport, this compact monitor fits in the palm of your hand. It works as the vital signs engine that acquires patient data at the bedside and on transport, without having to disconnect the patient.

Dräger Medical Cockpit®: This bedside workstation provides a clear, widescreen view of your patient's real-time vital signs together with comprehensive patient data – such as images, historical data and other networked clinical information.

The Infinity Acute Care System monitoring solution is designed to streamline workflow in all care areas – including the Intensive Care Unit, Operating Room, Emergency Department and Neonatal Intensive Care Units. Thanks to a variety of MPod® and MCable® plug-in accessories, the system can instantly scale to support the patient's changing acuity level.

INFINITY M540 PATIENT MONITOR

Handheld

Lightweight, durable and reliable
(1.2 kg / 2.6 lbs, including battery)

Water-resistant

Splash-resistant and submersible for protection against fluids*

*Tested by submerging unit in 30 cm (11.8") of water for 10 minutes

Wireless transport

Undocks at the bedside with the press of a button for transport, then automatically sends data wirelessly to the Infinity Network

Portable

Accompanies the patient throughout the hospital



INFINITY M500 DOCKING STATION

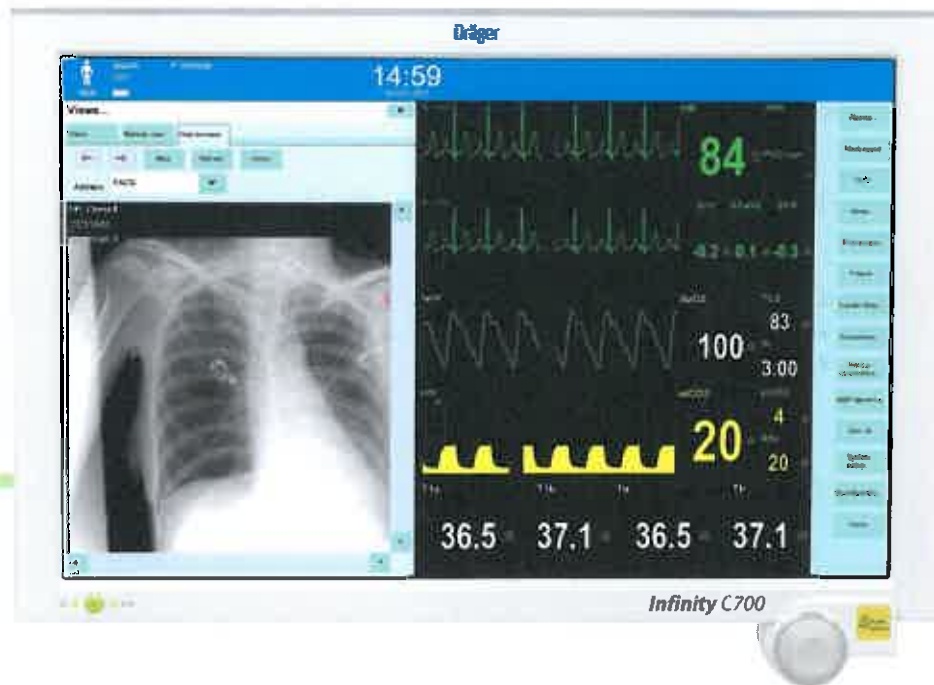
System connectivity

Provides system networking and communication between the M540 and Medical Cockpit via the P2500 Power Supply

Rechargeable

Powers the M540 when docked, recharging the internal battery for transport





D-46464-2012

INFINITY MEDICAL COCKPIT

360° alarm light

Enables caregivers to see alarms from anywhere in the room

Integrated information

Provides easy access to vital signs data, clinical applications, the hospital network, and the intranet at the point of care

Widescreen display

Large 20" (C700) or 17" (C500) touch-screen display makes information easy to see from any angle

Infection-resistant

Fanless, easy-to-clean design reduces risk of cross-contamination

DATA AT THE POINT OF NEED

View patient history, lab results, or diagnostic images at the point of care. The system automatically notifies you when lab data is ready. And when patient demographic information is available from the hospital network, it automatically populates on the display at the push of a button*. The Medical Cockpit stores trend data and sends real-time waveform data to the Infinity CentralStation for viewing and storage in full disclosure format.

*Requires Infinity Gateway

SUPPORT FOR CHANGING PATIENT ACUITY LEVELS

Your patient's condition can change in a heartbeat. The Infinity M540 and Medical Cockpit let you adapt monitoring to your patient's changing acuity. For example, you can add MPod® and MCable® accessories to support additional parameters as needed. Expand system capabilities with integrated IT applications via a Web interface or Citrix. And view Web-based images at the point of care side-by-side with real-time hemodynamic information.

QUICK AND SAFE PATIENT TRANSPORT

Intelligent data management technology saves time before and after each transport. Undock the M540 monitor and it automatically switches to wireless mode – no need to change monitors or cables. Patient safety is supported on transport with full parameter monitoring, alarms, and event and trend storage. While on transport, the M540 broadcasts patient data wirelessly to the Infinity Network – where it can be accessed at Infinity CentralStation and by remote viewing devices. When the monitor is docked in a new location, the data from the previous Medical Cockpit follows the patient to the new location, providing up to 96 hours of continuous trend data and backfilling all data collected during transport.



THE NEXT STEP IN DEVICE INTEGRATION

When coupled with a Dräger ventilator, the Infinity Acute Care System monitoring solution integrates respiratory information from the ventilator with hemodynamic data from the Infinity M540. The result is advanced application support of lung recruitment and comprehensive, configurable trends of respiratory and physiological responses to therapies.

Infinity and Medical Cockpit are registered trademarks of Dräger.

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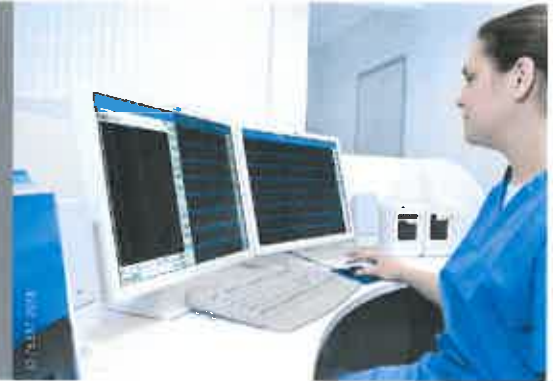
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Manufacturer:

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23542 Lübeck, Germany
The quality management system at Dräger Medical GmbH is certified according to ISO 13485, ISO 9001 and Annex II.3 of Directive 93/42/EEC (Medical devices).

Infinity® CentralStation

Having fast access to vital patient data from anywhere in the hospital can enhance patient care management and clinical workflow – enabling rapid assessment, decision support and clinical reporting.



FEATURES

- Displays real-time waveforms, parameters, and alarm status of Infinity bedside and patient-worn monitors
 - Simultaneously monitors up to 64 bedside monitors (32 on Main Screen and 32 in Surveillance Mode)
 - Surveillance mode allows for alarm notifications on the ICS and single-click access to remote view of alarming bedside monitors
 - Single or dual 22-inch (561 mm) widescreen displays with optional touch interface, keyboard, and mouse
 - Accessible data includes alarm events, stored waveforms, trends, ST points, and laboratory values
 - Clinical tools to support advanced analysis: ST segment analysis, Full and Event Disclosure with ECG calipers, 12-lead rest ECG analysis, and trend display
 - Up to 120 hours of graphical and tabular trends; 72 hours standard
 - Up to 120 hours of Full Disclosure/Event Disclosure including hemodynamic, respiratory, and EEG; 2 hours standard
 - Up to 16 waveforms and 1,000 arrhythmia or alarm events stored per patient
 - HL7 interface for patient admission and laboratory values (requires Infinity Gateway)
 - Alarm adjustment at patient monitor or central station
 - Sophisticated server includes quiet fan operation, integrated and external speakers (required), and RAID option for operating system and database
 - Ability to view up to 600 patients across the Infinity Network
 - Intranet access to view information conveniently where you need it (requires Infinity Symphony)
 - Choice of Dräger or IEC-compliant audio alarm patterns
 - Electronic "white board" for entering notes using standard text entry
-

D-71806-2012



Infinity® CentralStation
Powerful system puts information at your fingertips, from critical care through step-down environments

TECHNICAL DATA**CENTRAL PROCESSING UNIT (CPU)**

| | |
|-------------------------------------|--|
| Processor | Intel® Processor |
| Storage | 2 GB RAM, DVD-RW/CD-RW 2 x 500 GB hard drives (standard) up to 2 additional hard drives (optional for RAID setup) |
| Disk array | SAS RAID 1 (optional for operating system and/or database in locked drive bay) |
| Software updates | DVD |
| Connections | 1 IEEE 1284 parallel port, 2 asynchronous RS-232 ports, 5 USB 2.0 ports (2 front, 3 rear), 2 GB LAN connections |
| Network connectivity | Infinity Network |
| Video output | Dual DisplayPort (DMS59) 512 MB graphic card, 1680 x 1050 @ 60Hz, fanless |
| Audio output | External and internal (backup) speakers standard |
| Alarm grades | Low, Medium, High; audible and visual indications |
| Patients per CPU | 32 patients using two displays 16 patients using one display Up to 32 additional patients in Surveillance (background) mode |
| Physical Specifications | |
| Size | (H x W x D) 426.7 x 218.4 x 508.0 mm (16.8 x 8.6 x 20 in) |
| Weight | 12.7 kg (28 lbs) |
| Electrical Specifications | |
| Power consumption | 115V/230V 4.0A/2.0A |
| BTU output | Up to 460W |
| Environmental Specifications | |
| Cooling | Passive heatsink moved across 1-120 mm fan. SCA drive array and power supply cooled by dedicated 92 mm fans. |
| Temperature range | Operating: 0 °C to 45 °C (32 °F to 113 °F) Non-operating: -20 °C to 50 °C (-4 °F to 122 °F) |
| Altitude | Operating: 3500 m (11,000 ft) Non-operating: 10600 m (35,000 ft) |
| Acoustic noise | <46 dBA |
| User Controls | |
| Input | Device controls, USB-compatible keyboard, and USB-compatible optical mouse are provided in country specific kit. Optional Dräger-supplied touch screens available |

Standards/Compliances

FCC Class B CISPR II UL 60950-1 and IEC60601-1-2 EMC for medical equipment. UL/CSA/CE Certification as required per Original Equipment Manufacturers (OEM). Infinity CentralStation is CE marked in accordance with the requirements of the 93/42/EEC Medical Device Directive.

DISPLAYS

| | |
|-----------------------------|--|
| Type | 22" wide (511 mm) TFT active matrix LCD, hard-coated |
| Digital input | 15 pin D-Sub, DVI-D |
| Active display area (H x W) | 385 x 513 mm (15.2 x 20.2 in) |
| Touch screen (optional) | Resistive Touch technology, USB controller |
| Native resolution | 1680 x 1050 |
| Viewing angle | 178° to 178° |

Physical Specifications

| | |
|------------------|---|
| Size (H x W x D) | 385 x 513 x 180 mm (15.2 x 20.2 x 7.1 in) |
| Weight | 5.7 kg (12.6 lbs) |
| VESA mount | 100 x 100 mm (3.9 x 3.9 in) |

Electrical Specifications

| | |
|-------------------|---|
| Power consumption | <50W |
| Power input | 100 – 250 Vac, 1.4A – 0.7A, 60/50 Hz, universal |
| Power output | DC 12V |

Environmental Specifications

| | |
|-------------------|---|
| Temperature range | Operating: 10 °C to 40 °C (50 °F to 104 °F) Non-operating: -20 °C to 60 °C (-4 °F to 140 °F) |
|-------------------|---|

Standards

| | |
|------------|--|
| Compliance | FCC (Class B), CE (Class B), UL (CUL) (UL60950-1 / CSA C22.2), RoHS, CCC, GOST-R |
|------------|--|

UNINTERRUPTIBLE POWER SUPPLY (620VA, 120V, 220V)

| | |
|-------------|-------------------------|
| Connections | Infinity CentralStation |
|-------------|-------------------------|

Physical Specifications

| | |
|------------------|--|
| Size (H x W x D) | 168 x 119 x 368 mm (6.6 x 4.7 x 14.5 in) |
| Weight | 12.3 kg (27 lbs) |

Electrical Specifications

| | |
|----------------------|---|
| Waveform type | Stepped approximation to a sine wave |
| Input voltage | 115, 220, 230, 240 VAC ±20 % (nominal, user selectable) |
| Input frequency (Hz) | 50 to 60 Hz ±3 % (auto sensing) |
| Surge energy rating | 320 joules |
| Battery recharge | 5.50 hours |
| Back-up time | 15.7/5.5 minutes (half/full loaded) |
| Internal batteries | Maintenance free lead-acid battery with suspended electrolyte - leakproof |
| Indicators | LED for replace battery, overload, on battery |

Environmental

| | |
|-------------------|---|
| Temperature range | Operating: 0 °C to 40 °C (32 °F to 104 °F) Non-operating: -15 °C to 45 °C (5 °F to 113 °F) |
| Altitude | Operating and non-operating: 3000 m (10,000 ft) |

Standards

| | |
|------------|---------------------|
| Compliance | CE, GOST, VCCI, VDE |
|------------|---------------------|

CONTINUING TECHNICAL DATA**UNINTERRUPTIBLE POWER SUPPLY (750VA JAPAN)**

| | |
|----------------------------------|---|
| Connections | Infinity CentralStation |
| Physical Specifications | |
| Size (H x W x D) | 157 x 137 x 358 mm (6.2 x 5.4 x 14.1 in) |
| Weight | 13.2 kg (29 lbs) |
| Electrical Specifications | |
| Waveform type | Sine wave |
| Input voltage | 100 V |
| Input frequency (Hz) | 50 to 60 Hz ±3 % (auto sensing) |
| Surge energy rating | 340 joules |
| Battery recharge | 3 hours |
| Back-up time | 16.4/4.8 minutes (half/full loaded) |
| Internal batteries | Maintenance free lead-acid battery with suspended electrolyte - leakproof |
| Indicators | LED for replace battery, overload, on battery |
| Environmental | |
| Temperature range | Operating: 0 °C to 40 °C (32 °F to 104 °F) Non-operating: -15° C to 45 °C (5 °F to 113 °F) |
| Altitude | Operating and non-operating: 3000 m (10,000 ft) |
| Standards | |
| Compliance | C-tick, CE, EN50091 |

Infinity and TruST are trademarks of Dräger.

Intel is a registered trademark of Intel Corporation in the U.S. and/or other countries.

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The quality management system at
Dräger Medical, Inc. is certified
according to ISO 13485 and ISO 9001.

Infinity® M300 Patient-Worn Monitor

Managing the care of ambulatory patients is challenging because you need to balance mobility with patient safety. The innovative Infinity M300 patient-worn monitor provides continuous surveillance of telemetry patients using the hospital's existing Wi-Fi® network. The unit's color screen and audible alarms let you assess and respond to your patient's status on the spot.



CONTINUOUS MOBILE MONITORING, HOSPITAL-WIDE*

Only Dräger offers a Wi-Fi-based, durable, lightweight patient-worn monitor that provides continuous surveillance to support patient safety. What's more, the Infinity M300 delivers exceptional value by integrating with the hospital's existing wireless network. This industry-leading solution includes:

- Built-in color screen with waveforms and vital sign values, providing local surveillance to augment monitoring at the Infinity CentralStation
- Visible and audible alarms that immediately alert you to changes in the patient's condition
- Integrated Arrhythmia Classification Expert (ACE®) and pacemaker detection algorithms
- Built-in SpO₂, eliminating the need for an additional pulse oximetry device or module
- Wi-Fi CERTIFIED™ technology for reliable data transfer on standard wireless networks
- Support for WPA2 encryption using 802.11 b/g
- Continuous monitoring at the Infinity M300, even when patient is outside of the network coverage area

- Integrated rechargeable battery eliminating the cost and effort of changing disposable batteries
- Convenient bedside charging with no need to disconnect ECG leads and no interruption in monitoring
- Central charging of up to 10 M300s simultaneously

*At the patient site or via the Infinity CentralStation where wireless network coverage exists

IMPROVED PATIENT SAFETY AND SECURITY

Unlike traditional telemetry devices, Infinity M300 provides patient-vicinity monitoring in addition to surveillance at the Infinity CentralStation. This local monitoring at the Infinity M300 – which includes visible waveforms and parameters as well as audible alarms – continues even if the patient moves outside of the network coverage area. This gives you immediate access to real-time data on which to base clinical decisions.

Infinity M300 also supports patient safety by enabling hospitals to place patients in the department where they will receive the best care, as opposed to being limited to a telemetry floor. Infinity M300 enables patients to increase mobility more quickly, while still being continuously monitored.

Data is transmitted safely and securely in any Wi-Fi coverage area using WPA2 AES 128bit, 802.11i.

Dräger's patient-worn monitors undergo rigorous drop testing to ensure durability in real-world clinical use. The Infinity M300 will continue to monitor patients even after it has been submerged in up to one meter of water for 30 minutes.

EFFICIENCY AND SUSTAINABILITY

Infinity M300 is a cost-effective alternative to traditional telemetry systems. Rather than requiring a separate proprietary network for patient data, the Infinity M300

uses the hospital's existing Wi-Fi network – which can reduce the cost and complexity of patient monitoring. Your IT staff will only have to purchase, implement, and maintain one network rather than two. And because Infinity M300 uses a standard Wi-Fi network, there is no need for expensive, proprietary network troubleshooting and repair tools.

In addition, Infinity M300 offers sustainability by supporting 'green' initiatives. The unit's rechargeable battery eliminates the need to continually replace and dispose of batteries, which results in fewer batteries in landfills. There are fewer access points

to deploy and replace, which again means less scrap in our landfills.

Only Infinity M300 ensures patient safety via continuous monitoring using the hospital's existing Wi-Fi network, visible and audible alarms, and integrated SpO₂ – all in one compact, durable patient-worn monitor.



Because the Infinity M300 is Wi-Fi CERTIFIED by the Wi-Fi Alliance®, it provides peace of mind by offering proven interoperability, standards-based security and easy installation.

Infinity and ACE are registered trademarks of Dräger.

Wi-Fi and Wi-Fi Alliance are registered trademarks and Wi-Fi CERTIFIED is a trademark of the Wi-Fi Alliance.

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Infinity® M540 monitor

Now you can streamline workflow and support patient safety with a single monitor that accompanies the patient from admission to discharge. The ergonomic Infinity M540 provides continuous monitoring at the bedside and on transport throughout the hospital* – either as a standalone monitor** or as part of the Infinity Acute Care System.



FEATURES

- Continuously captures and displays hemodynamic monitoring data at the bedside and on transport in the hospital and in a land ambulance***
- Transmits vital signs data both wired (when docked) and wirelessly (on transport)
- Automatically backfills vital signs data collected on transport into the Dräger Medical Cockpit® upon docking
- Easy configuration for profile and transport volume settings
- Offers a number of options to customize and optimize the acquisition and display of patient data and associated alarms

INFINITY M540 PATIENT MONITOR

With a highly visible touch screen, The M540 displays real-time monitoring information and moves seamlessly from bedside to transport. During transport, the monitor stores trends and events for viewing at the Dräger Medical Cockpit (if used as part of IACS) or the Infinity CentralStation (if used as standalone) when returned to the docking station. You can add or remove patient cables or modules – giving you the flexibility to address changing patient acuity levels.

Optimized for intra-hospital transport, the ergonomic M540 is lightweight, sturdy and water resistant – making transport less disruptive to the patient and improving clinician efficiency. Simply undock the M540 and go – without having to disconnect or reconnect the patient. The monitor provides seamless

information whether docked or on transport and broadcasts patient data wirelessly while on transport. This functionality requires the wireless option and Medical Cockpit or Infinity CentralStation. Once redocked, the M540 automatically backfills trends, events and patient demographics into the Medical Cockpit – supporting a more complete patient record and reducing the risk of missed events.

INFINITY M500 DOCKING STATION

Infinity M500 charges the M540's built-in battery and makes monitoring data accessible to the Medical Cockpit at the bedside. When used in a standalone configuration, the M500 charges the M540, connects the M540 to the Infinity Network, and stores default profile settings that can be adopted on another M540 upon docking.



D-16742-2010

Infinity® M540 monitor and Infinity® M500 docking station
Designed for quick, one-handed docking/undocking



D-16741-2010

D-16742-2010

The 180° auto-flip screen provides proper visual orientation and the freedom to dock the monitor on the left or right

* The M540 monitor is intended for use in any hospital care environment with the exception of hyperbaric chambers and environments containing MRI equipment.

** Software version VG2.1 or above for M540 and firmware version 4.0 or above for M500 are required for use as a standalone monitor.

*** Not approved for land ambulance use in the US or Canada.

TECHNICAL DATA**MONITORING CAPABILITIES****Adult, pediatric, and neonatal applications¹****ECG****Acquires up to 12 leads²**

| | |
|------------------|--|
| Available leads: | 3-lead wire set: I, II, III (user-selectable) 5-lead wire set: I, II, III, aVR, aVL, aVF, V 6-lead wire set: I, II, III, aVR, aVL, aVF, V, V+ 10-lead wire set: I, II, III, aVR, aVL, aVF, V1-V6 TruST® derived 12-lead on: I, II, III, aVR, aVL, aVF, dV1, V2, dV3, dV4, V5, dV6 |
|------------------|--|

| | |
|-------------------|----------------------------------|
| Measurement range | 15 to 300 beats per minute (bpm) |
|-------------------|----------------------------------|

| | |
|----------|--------------------------------------|
| Accuracy | ±2 bpm or ±1% (whichever is greater) |
|----------|--------------------------------------|

| | |
|------------|-------|
| Resolution | 1 bpm |
|------------|-------|

| | |
|------------------|---|
| Frequency ranges | Monitoring filter: 0.5 to 40 Hz OR Mode/ESU filter: 0.5 to 16 Hz (pacer detection disabled) Diagnostic ECG bandwidth: 0.05 to 150 Hz OFF filter: 0.05 to 40 Hz (M540 display limited to 40 Hz) |
|------------------|---|

QRS detection range

| | |
|-----------|--|
| Amplitude | 0.5 to 5 mV p-p RTI (peak to peak with respect to input) |
|-----------|--|

| | |
|----------|---|
| Duration | Adult: 70 to 120 ms Pediatric/Neonatal: 40 to 120 ms |
|----------|---|

| | |
|--------|--|
| Alarms | User selectable upper and lower limits |
|--------|--|

Pacer detection (adult/pediatric)

| | |
|----------------|---------------------|
| Sensing leads: | Leads: I, II or III |
|----------------|---------------------|

| | |
|-----------------------------|---------------|
| Amplitude (a _p) | ±2 to ±700 mV |
|-----------------------------|---------------|

| | |
|-------------------------|---------------|
| Width (d _p) | 0.2 to 2.0 ms |
|-------------------------|---------------|

| | |
|-----------------------|-----------------------------|
| Rise/Fall times (min) | 0.1 d _p , ≤100µs |
|-----------------------|-----------------------------|

| | |
|-----------------|--------------------------------------|
| Overshoot (min) | 0.025 to 0.25 a _p , <2 mV |
|-----------------|--------------------------------------|

| | |
|------------------------|-------------|
| Recharge time constant | 4 to 100 ms |
|------------------------|-------------|

ST (adult/pediatric)

| | |
|---------------|---|
| Sensing leads | Any ECG lead available based on lead set used |
|---------------|---|

| | |
|-------------------|--|
| ST complex length | 828 ms (-260 ms to 568 ms from fiducial point) |
|-------------------|--|

| | |
|-------------|---------------|
| Sample rate | 250 samples/s |
|-------------|---------------|

| | |
|-------------------------------|---|
| Isoelectric measurement point | Adjustment range: -260 ms to 40 ms Default: QRS onset -28 ms |
|-------------------------------|---|

| | |
|----------------------|--|
| ST measurement point | Adjustment range: -28 ms to 568 ms Default: QRS offset +80 ms |
|----------------------|--|

| | |
|-----------------|-----------------------------------|
| Update interval | 15 s ±1 s, 1 normal beat required |
|-----------------|-----------------------------------|

| | |
|-----------------|--|
| Measuring range | -15.0 mm to 15.0 mm (-1.50 to 1.50 mV) |
|-----------------|--|

| | |
|--------------------|-----------------------|
| Measuring accuracy | + or -1.0 mm (0.1 mV) |
|--------------------|-----------------------|

| | |
|------------|-----------------------|
| Resolution | + or -1.0 mm (0.1 mV) |
|------------|-----------------------|

| | |
|--------|--|
| Alarms | User selectable upper and lower limits |
|--------|--|

| | |
|----------------|--------------------------------------|
| Event duration | Off, 15, 30, 45, 60 s (default 60 s) |
|----------------|--------------------------------------|

Arrhythmia

| | |
|------------------|---|
| Basic arrhythmia | Asystole, Ventricular Fibrillation, Ventricular Tachycardia, Artifact |
|------------------|---|

Note: Bradycardia is available as a low heart rate alarm for neonates.

| | |
|-----------------|---|
| Full arrhythmia | Basic plus Ventricular Run, Accelerated Idioventricular Rhythm, Supra-Ventricular Tachycardia, Couplet, Bigeminy, Tachycardia, Bradycardia, Pause, PVC/min. |
|-----------------|---|

¹ Arrhythmia and ST Analysis are for adult and pediatric patients only.² All 12-leads can be viewed via two screens with 6-leads each; 12-lead monitoring is an option

PVC/min

| | |
|-------------------|--|
| Measurement range | 0 to 300 bpm |
| Resolution | 1 bpm |
| Accuracy | ±5 bpm or ±10% of the rate, whichever is greater |
| Response time | <4 seconds |

Diagnostic ECG³

| Diagnostic program | Glasgow Interpretive ECG |
|---------------------|---|
| Interpretation base | Age, gender, race, medication, clinical classification |
| Report formats | 13 different report formats available |
| Report languages | English, French, German, Italian, Portuguese, Spanish, Swedish |
| Export | Infinity CentralStation can be configured to automatically export 12-lead reports |
| Reports provided by | Infinity CentralStation with Rest ECG Option enabled |

Note: Printed Rest-ECG reports on the Infinity CentralStation meet diagnostic bandwidth requirements

Respiration rate

| | |
|--------------------------------|---|
| Sensing leads | I, II (user-selectable) |
| Measuring method | Impedance pneumography |
| Auxiliary current | <10 µA for any active electrode |
| Bandwidth | (-3 dB) 0.25 to 3.5 Hz |
| Detection threshold | 0.2 Ω – 4.0 Ω in manual mode (user adjustment) 0.3 Ω – 1.5 Ω in auto mode (automatic adjustment) |
| Measuring range | 0 to 155 breaths per minute |
| Resolution | 1 breath per minute |
| Measuring accuracy | ±1 breath per minute, or ±2% of the rate value, whichever is greater |
| Apnea detection interval times | Off, 10, 15, 20, 25, and 30 s |
| Alarms | User-selectable upper and lower respiration rate |

Pulse Oximetry (SpO₂)

| | |
|----------------------|--|
| Displayed parameters | Saturation (fraction of oxyhemoglobin to functional hemoglobin) and pulse (rate and curve), perfusion index (Masimo SET® only); SpHb™, SpOC™, SpMet®, SpCO®, PVI® (with Masimo rainbow SET®) |
| Measuring method | Absorption spectrophotometry |
| Measuring range | SpO ₂ : 1 to 100% Pulse rate: 26 to 239 bpm |

SpO₂ Algorithm (Infinity® MCable®-Masimo rainbow SET®)**Masimo rainbow SET® (Signal Extraction Technology®)**

Masimo provides the industry gold-standard for motion tolerant pulse oximetry* and is known for accuracy during low perfusion. See additional product datasheet for complete and more detailed specifications.

*As documented in Masimo's peer reviewed studies located on www.masimo.com.

SpO₂ Algorithm (Infinity® MCable®-Nellcor™ OxiMax™)**Nellcor OxiMax**

See product datasheet for complete and more detailed specifications.

Non-Invasive Blood Pressure (NIBP)

| | |
|----------------------|---|
| Parameter display | Systolic, Diastolic, Mean |
| Measuring method | Oscillometric via step deflation |
| Modes of operation | Manual (single measurement), Interval, Continuous, or Venous Stasis |
| Interval times | Off, 1, 2, 2.5, 3, 5, 10, 15, 20, 25, 30, 45, 60, 120, and 240 min |
| Static cuff accuracy | ±3 mmHg (±0.4 kPa) |
| Resolution | 1 mmHg (0.1 kPa) |

³ Diagnostic ECG requires the presence of an Infinity Medical Cockpit running IACS software connected to the M540 and also the presence of an Infinity CentralStation for analysis and reports.

CONTINUING TECHNICAL DATA**Measuring range (default)**

| | |
|------------|---------------|
| Heart rate | 30 to 240 bpm |
|------------|---------------|

Adult

| | |
|----------|--------------------------------|
| Systolic | 30 to 250 mmHg (4 to 33.3 kPa) |
|----------|--------------------------------|

| | |
|------|--------------------------------|
| Mean | 30 to 230 mmHg (4 to 30.6 kPa) |
|------|--------------------------------|

| | |
|-----------|--------------------------------|
| Diastolic | 10 to 210 mmHg (1.3 to 28 kPa) |
|-----------|--------------------------------|

Pediatric

| | |
|----------|--------------------------------|
| Systolic | 30 to 170 mmHg (4 to 22.6 kPa) |
|----------|--------------------------------|

| | |
|------|------------------------------|
| Mean | 30 to 150 mmHg (4 to 20 kPa) |
|------|------------------------------|

| | |
|-----------|----------------------------------|
| Diastolic | 10 to 130 mmHg (1.3 to 17.3 kPa) |
|-----------|----------------------------------|

Neonatal

| | |
|----------|--------------------------------|
| Systolic | 30 to 130 mmHg (4 to 17.3 kPa) |
|----------|--------------------------------|

| | |
|------|--------------------------------|
| Mean | 30 to 110 mmHg (4 to 14.7 kPa) |
|------|--------------------------------|

| | |
|-----------|----------------------------------|
| Diastolic | 10 to 100 mmHg (1.3 to 13.3 kPa) |
|-----------|----------------------------------|

Cuff Pressure

| | |
|----------------------------|--|
| Default inflation pressure | Adult: 160 ±5 mmHg (21.3 ±0.66 kPa) Pediatric: 130 ±5 mmHg (17.3 ±0.66 kPa) Neonatal: 110 ±5 mmHg (14.7 ±0.66 kPa) |
|----------------------------|--|

| | |
|---|--|
| Inflation pressure after a valid measurement (Accurate within ±5 mmHg or ±0.66 kPa) | Adult: Previous NBP Systolic +25 mmHg (3.3 kPa) Pediatric: Previous NBP Systolic +25 mmHg (3.3 kPa) Neonatal: Previous NBP Systolic +25 mmHg (3.3 kPa) |
|---|--|

| | |
|----------------------------|--|
| Maximum inflation pressure | Adult: 265 ±5 mmHg (35.3 ±0.66 kPa) Pediatric: 180 ±5 mmHg (24 ±0.66 kPa) Neonatal: 140 ±5 mmHg (18.6 ±0.66 kPa) |
|----------------------------|--|

| | |
|----------------------------|--|
| Minimum inflation pressure | Adult: 110 ±5 mmHg (14.7 ±0.66 kPa) Pediatric: 90 ±5 mmHg (12 ±0.66 kPa) Neonatal: 80 ±5 mmHg (10.6 ±0.66 kPa) |
|----------------------------|--|

| | |
|-----------|--|
| Connector | Quick-release connector with single airway |
|-----------|--|

Invasive Blood Pressure

| | |
|------------------|-----------------------------------|
| Measuring method | Resistive strain gauge transducer |
|------------------|-----------------------------------|

| | |
|------------|------------------|
| Resolution | 1 mmHg (0.1 kPa) |
|------------|------------------|

| | |
|-----------------|------------------------------------|
| Measuring range | -50 to 400 mmHg (-6.6 to 53.3 kPa) |
|-----------------|------------------------------------|

| | |
|---------------|------------------------------------|
| Dynamic range | -250 to 600 mmHg (-33.3 to 80 kPa) |
|---------------|------------------------------------|

| | |
|------------------|---|
| Frequency ranges | User selectable DC to 8 Hz, DC to 16 Hz |
|------------------|---|

| | |
|----------|---|
| Accuracy | ±1 mmHg or ±3% (whichever is greater) exclusive of transducer |
|----------|---|

| | |
|---------------------|-----|
| IBP Update interval | 4 s |
|---------------------|-----|

| | |
|---|---|
| Response time (at 90% of pressure change) | 14 beats +2 s (ART, LV, GP1, GP2, GP3, GP4) 8 beats +2 s (PA, RV) 16 s (CVP, RA, LA, ICP) |
|---|---|

| | |
|---------------------------|---|
| Transducer specifications | Transducers with a resistance of 200 to 3,000 Ω and an equivalent pressure sensitivity of 5µV/V/mmHg ±10% |
|---------------------------|---|

Carbon dioxide

| | |
|----------------------|---|
| Displayed parameters | End-tidal CO ₂ (etCO ₂), inspired CO ₂ (inCO ₂), respiration rate (RRc) |
|----------------------|---|

Measurement range

| | |
|-----------------|---|
| CO ₂ | 0 – 100 mmHg (0 to 13.3 kPa or 0 to 13.2 Vol.-% at sea level) CO ₂ , partial pressure |
|-----------------|---|

| | |
|-----|--------------|
| RRc | 0 to 150 bpm |
|-----|--------------|

For further details, please see datasheet for Infinity® MCable®-Mainstream CO₂

| Temperature | |
|--|--|
| Parameter display | Temperatures: Ta, Tb, ΔT, T1a, T1b, ΔT1 |
| Measurement range | Ta, Tb, T1a, T1b: 0°C to 50°C (32°F to 122°F) ΔT, ΔT1: 0°C to 39°C (0°F to 102.2°F) |
| Resolution | 0.1°C (0.1°F) |
| Absolute temperature Accuracy ⁴ | ±0.1°C (±0.2°F) |
| Delta temperature Accuracy ⁵ | ±0.2°C (±0.4°F) |
| Probe accuracy | ±0.1°C (±0.2°F) |
| Average update time | <2.5 s |
| Response time | 23 to 44°C (73.4 to 111.2°F), ±0.2°C (±0.4°F) within 150 s |
| Response time with 2°C temperature change | Reusable GP probes with cover within 60 s Disposable GP probes within 30 s Reusable / disposable skin probes within 15 s |

DISPLAY PRODUCT SPECIFICATIONS

| | |
|--------------|---|
| Display type | Color Liquid Crystal Display (LCD), Advanced Touch Screen |
| Size | 158 mm (6.2 in) diagonal |
| Viewing area | 149 mm × 54 mm (5.9 in × 2.1 in) |
| Resolution | 640 × 240 (1/2 VGA) |
| Brightness | 80 cd/m ² minimum during battery operation; 120 cd/m ² minimum when powered via M500 |

User Interface

| | |
|-----------|---|
| Controls | Touch screen plus 3 fixed push-button keys, 8 control keys |
| Alarms | Audible ⁶ and visible alarm indication Alarm levels: High, Medium, Low 45 dB (A); full volume is > 70 dB (A) |
| Alarm bar | High (Life Threatening): Flashes red Medium (Serious): Flashes yellow Low: Does not light or flash |

Information Management Capabilities

| | |
|-----------------------|---|
| Trend storage | Up to 72 hours of parameter information |
| Trend data resolution | Up to 30 s |

PHYSICAL SPECIFICATIONS

| Infinity® M540 Monitor | |
|-------------------------------|---|
| Dimensions (H × W × D) | 89 × 259 × 43 mm (3.5 × 10.2 × 1.7 in) |
| Weight | Less than 920 grams (2.0 lbs) |
| Cooling | Conduction when docked, convection when undocked |
| Connections | ECG, CO ₂ , Hemo, Temperature/Auxiliary, SpO ₂ , NIBP-input |

Infinity® M500 Docking station

| | |
|------------------------|---|
| Dimensions (H × W × D) | 195 × 101 × 107 mm (7.7 × 4.0 × 4.2 in) |
| Weight | 1,200 grams (2.6 lbs) |
| Cooling | Convection |
| Connections | System Cable, Nurse Call (only as part of IACS) |
| Mount interface | VESA 75 |

ELECTRICAL SPECIFICATIONS

| Monitor | |
|-------------------------|---|
| Power source | Internal lithium ion battery or external power from docking station |
| Battery pack | Li-ion: 3.75 VDC, 4,400 mAh |
| Protection class | Internally powered (per IEC 60801-1) |
| Mode of operation | Continuous (with power coupling via docking station) |
| Patient leakage current | <10 μA (at both 110 V/60 Hz and 220 V/50 Hz) |

⁴ Accuracy exclusive of probe

⁶ Audible indication only when not docked

CONTINUING TECHNICAL DATA**Infinity® M540 Battery Specifications**

| | |
|---|---|
| Battery operating time | Normal operation: approximately 3 hours Power save mode: approximately 4 hours |
| Note: Battery operating time varies with device configuration. The battery time specified above is under the following load conditions: Wireless enabled; invasive blood pressure (IBP) via the MPod Quad Hemo (4 invasive pressures); continuous 6 lead ECG; SpO ₂ with Nellcor MCable or Masimo SET MCable; two continuous temperature probes; NIBP with 15 minute interval mode enabled. | |
| Battery Recharging Time | 100% capacity: approximately 6.5 hours for completely discharged battery 70% capacity: approximately 4 hours for completely discharged battery |

Communications

| | |
|---|---|
| Network | 802.3 100 BaseT Ethernet when connected to docking station. Optically isolated connection between monitor and docking station 10 Mbps |
| Note: M540 hardware includes 802.11b/g Wireless Ethernet radio | |

Infinity® M500 docking station

| | |
|--------------------------|--|
| DC input | +24 VDC nominal, 1.5 A (+18 to +30 VDC) |
| Protection class | For use with specified Class I power supply |
| Mode of operation | Continuous |
| Power output | Provides power to Infinity® M540 via direct contact charging |

Environmental Requirements

Infinity® M540 monitor and Infinity® M500 docking station

Atmospheric pressure

| | |
|--|--|
| Operating | 485 to 795 mmHg (64.7 to 106.0 kPa) |
| Storage | 375 to 795 mmHg (50.0 to 106.0 kPa) |
| Protection against ingress of water** | IPX4 (per IEC 60529, splash-proof) for Infinity® M540 IPX1 (per IEC 60529) for Infinity® M500 |

Temperature

| | |
|------------------|---------------------------|
| Operating | 0 to 40°C* (32 to 104°F) |
| Storage | -20 to 60°C (-4 to 140°F) |

Humidity (non-condensing)

| | |
|------------------|-----------|
| Operating | 20 to 95% |
| Storage | 20 to 95% |

Standards

EN1789: Clause 6.
The M540 monitor and M500 docking station comply with Medical Devices Directive (MDD) 93/42/EEC and bear the CE mark.
IEC 60601-1:2005 + A1:2012: and applicable particular and collateral standards with applicable regional and national deviations
IEC 60601-1-2:2007: Electromagnetic compatibility
IEC 60601-1-8:2006 + A1:2012: Alarm Systems
IEC 60601-2-27:2011: Electrocardiographic Monitoring Equipment
IEC 60601-2-30:2009 + A1: 2013: Automatic non-invasive blood pressure monitoring equipment
IEC 60601-2-34:2011: Invasive blood pressure monitoring equipment
ISO 80601-2-55:2011: Respiratory and gas monitoring
ISO 80601-2-56:2009: Temperature
ISO 80601-2-61:2011: Pulse oximeter equipment
IEC 60601-2-49: Multifunction patient monitoring equipment
IEC 60068-2-27: Shock and vibration
IEC 60068-2-32: Free fall

* At ambient temperatures above 35°C (95°F) the battery may not be charging even while docked in the Infinity M500 Docking Station
** The M540 is protected against the ingress of water when submersed to 30 cm (11.8 inches) of water, for 10 minutes.



D-18098-2009

Infinity® MCable®-
Mainstream CO₂



D-8656-2011

Infinity® MCable®-
Masimo rainbow® SET



D-18097-1006

Infinity® MCable®-
Dual Hemo



D-18095-2009

Infinity® MPod®-
Quad Hemo

INFINITY PS50 POWER SUPPLY

Specifications

| | |
|------------------------|--|
| Input voltage | 85 to 264 VAC |
| Input frequency | 47 to 63 Hz |
| Maximum output power | 50 W |
| Dimensions (H × W × D) | 146 × 76 × 43 mm (5.75 × 2.99 × 1.69 in) |
| Weight | 465 g (1.03 lb) |

Humidity (non-condensing)

| | |
|-----------|----------|
| Operating | 5 to 95% |
| Storage | 5 to 95% |

Temperature

| | |
|-----------|----------------------------|
| Operating | 0 to 70°C (32 to 158°F) |
| Storage | -40 to 85°C (-40 to 185°F) |

Atmospheric pressure

| | |
|-----------|-----------------------------------|
| Operating | 485 to 795 mmHg (64.7 to 106 kPa) |
| Storage | 375 to 795 mmHg (50 to 106 kPa) |

INFINITY PS120

Specifications

| | |
|------------------------|---|
| Dimensions (W × D × H) | 174 × 82 × 40 mm (6.85 × 3.2 × 1.6 in) |
| Weight | 24 ounces, 684 grams excluding the cord |
| Input voltage | 100 VAC to 240 VAC (+/-10%) |
| Input frequency | 47 to 63 Hz |
| Output voltage | 24.5 V |
| Altitude | 0 to 3000 m (10,000 feet) |

Temperature

| | |
|-----------|---------------------------|
| Operating | 0 to 40°C (32 to 104°F) |
| Storage | -20 to 85°C (-4 to 185°F) |

Humidity

| | |
|-------------------|-------------------------|
| Relative humidity | 5 to 95% non-condensing |
|-------------------|-------------------------|

Atmospheric pressure

| | |
|----------------------|------------------------------------|
| Atmospheric pressure | 70 to 106 kPa (10.15 to 15.37 psi) |
|----------------------|------------------------------------|

ORDERING INFORMATION

Infinity® M540 patient monitor with companion Infinity® M500 docking station as part of:

| | |
|--|---------|
| IACS Monitoring with C500 | MS25510 |
| Upgrade from Infinity® M540 standalone monitor with C500 | |
| IACS Monitoring with C700 | MS25520 |
| Upgrade from Infinity® M540 standalone monitor with C700 | |
| Infinity® M540 and Infinity® M500 docking station (Software version VG2.1 for M540 is required for using M540 as a standalone monitor) | MS26372 |

Language Support: English, German, French, Spanish, Italian, Dutch, Swedish, Portuguese (Brazilian), Danish, Norwegian, Japanese (Katakana), Russian, Turkish, Polish, Greek, Hungarian, Chinese (Simplified), Czech, Finnish, UK English

Note: language availability may vary. Please see your Dräger representative for more information.

Infinity® M540 options

| | |
|--|----------|
| Wireless option (802.11b/g) | MS 16266 |
| SpO ₂ Masimo rainbow SET® or Nellcor OxiMax Factory-enabled | |
| Additional locked option capability: 12-lead monitoring, Multiple IBPs (greater than two); full arrhythmia | |

Optional pods, modules and hardware accessories

Note: Refer to individual module or pod data sheet for details concerning connection cables and adapters, transducers and mounting accessories

| | |
|---|---------|
| SpO ₂ Pod Holder (Fits Masimo SET Pod, and Nellcor OxiMax Pod) | MS26266 |
| SpO ₂ Pod Holder for Masimo Rainbow SET® MCable | MS26576 |
| Infinity® M500 Transport Dock + Clamp | MS28144 |

CONTINUING ORDERING INFORMATION**Infinity® MPod®-Quad Hemo**

The Infinity® MPod®-Quad Hemo provides up to four continuous, invasive blood pressures, temperature and thermodilution cardiac output measurements. A Dräger Medical Cockpit is required for the display of cardiac output parameters.

Infinity® MCable®-Dual Hemo

The Infinity® MCable®-Dual Hemo provides a consolidated place for management of up to two invasive blood pressures.

Infinity® MCable®-Masimo SET®

The Infinity® MCable®-Masimo SET® provides accurate and reliable pulse oximetry in virtually all clinical conditions. It performs even in low perfusion and reads through motion as well as helps to reduce false alarms. The Masimo SET supports adult, pediatric and neonatal patients.

Infinity® MCable®-Masimo rainbow SET®

The Infinity® MCable®-Masimo rainbow SET® enables Masimo's gold-standard* SET SpO₂ algorithm. The Masimo rainbow SET® MCable connects the Infinity® M540 multi-parameter patient monitor to Masimo rainbow SET® SpO₂ sensors and provides continuous, noninvasive monitoring of functional oxygen saturation of arterial hemoglobin (SpO₂), pulse and perfusion index. Additional options are available to measure blood constituents and fluid responsiveness (SpHb™, SpOC™, SpCO®, SpMet®, PVI®)

*As documented in Masimo's peer-reviewed studies found at www.masimo.com.

Infinity® MCable®-Nellcor OxiMax

The Infinity® MCable®-Nellcor OxiMax enables Nellcor's OxiMax SpO₂ algorithm. The Nellcor OxiMax MCable connects the Infinity® M540 multi-parameter patient monitor to Nellcor OxiMax SpO₂ sensors and provides continuous, noninvasive monitoring of functional oxygen saturation of arterial hemoglobin (SpO₂) and pulse.

Infinity® MCable®-Mainstream CO₂

The Infinity® MCable®-Mainstream CO₂ provides measurements of CO₂ in mainstream.

Infinity® MCable®-Analog/Sync

The Infinity® MCable®-Analog/Sync provides Analog Output of ECG and arterial pressure (ART) and/or QRS Synchronization signals from ECG to an external device.

Infinity® MCable®-Nurse Call (not supported for Standalone)

The Infinity® MCable®-Nurse Call allows connection of either the M540 or the IACS to a hospital alarm output system. Active life-threatening or serious alarms at the bedside are then sent out to the hospital's alarm output system.

Accessories

For further information and for accessories information, please refer to the Dräger IACS Accessories Instructions For Use for detailed information on compatibility.

To order pods, cables, MCables and MPods, please see individual product datasheets.

Infinity, MCable, Medical Cockpit, MPod and TruST are trademarks of Dräger.

Masimo, Masimo rainbow SET and Signal Extraction Technology, SpHb, SpOC, SpCO, SpMet, and PVI are trademarks of Masimo Corporation.
Nellcor and OxiMax are trademarks of Covidien LP.

This product may not be approved for market release in all countries.

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As of August 2015:

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to Drägerwerk AG & Co. KGaA.

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Infinity[®] Delta and Delta XL Patient Monitors

With the Delta series, you can monitor the vital signs of adult, pediatric and neonatal patients with various acuity levels. Patented Pick and Go[®] technology enables the same monitor to stay with the patient at the bedside and on transport – providing continuous monitoring and data collection.



FEATURES

- Doubles as a transport monitor, eliminating the need for separate transport monitors
- Works as a standalone device or connects to Infinity[®] Network via Infinity Docking Station, DirectNet or wireless adapter for seamless wired-to-wireless networking
- Scales using Infinity pods and software options

Monitoring Capabilities

Neonatal, pediatric and adult applications

TECHNICAL DATA

SUPPORTED PARAMETERS

ECG

Displays up to 12 leads

Available leads

I, II, III, aVR, aVF, aVL, V, V+, V1 – V6 [V, aVR aVF, aVL only with 5- and 6-lead sets, V+ only with 6-lead set, V1 to V6 only with 12-lead pod (12-lead not intended for neonates)], TruST[®] 12-lead with reduced lead-set (6-wire): I, II, III, aVL, aVR, aVF, dV1, V2, dV3, dV4, V5 and dV6 (indicated for adults and pediatrics).¹

Measuring range
(heart rate)

15 to 300 bpm

Accuracy

± 2 bpm or ± 1% (whichever is greater)

Frequency ranges

Filter off: 0.05 to 40 Hz display; 0.05 to 125 Hz printer
Monitoring filter: 0.5 to 40 Hz; ESU filter: 0.5 to 16 Hz



MT-865U-2006

Infinity Delta



MT-864U-2006

Infinity Delta XL

¹ Optimum performance of TruST leads is based on a minimum 0.3mV amplitude and QRS duration <180 milliseconds on patients with a body surface area (BSA) of 1.5 – 2.5 m². TruST 12-lead reduced lead-set ECG algorithm provides 12-lead monitoring using a standard 6-wire lead-set and standard lead placement for limb leads, V2 and V5. ARIES software option enhances TruST 12-lead monitoring with the addition of 12-lead ST Analysis.

CONTINUING TECHNICAL DATA**QRS Detection Range**

| | |
|--------------------------------------|--|
| Amplitude | 0.5 to 5 mV |
| Duration | Adult and pediatric: 70 to 120 msec Neonatal: 40 to 120 msec |
| Alarms | User-selectable upper and lower limits |
| Pacer detection (adult/pediatric) | Leads: I, II or III Amplitude: ± 2 to ± 700 mV Width (d-): 0.2 to 2.0 msec |
| Accessories | 3-, 5- or 6-lead electrode set or 12-lead pod |

ST (not intended for neonates)

| | |
|---------------------------------------|---|
| Available leads | With 3-lead ST option: Choice of any 3 available leads With ARIES option: Up to 12 leads |
| ST complex length | 892 msec (-300 to +600 msec from fiducial point) |
| Sample rate | 225 samples/sec |
| Frequency response | 0.05 – 40 Hz |
| Isoelectric measurement point | |
| Measuring range | Start of ECG complex to fiducial point |
| Default | QRS onset – 28 msec |
| ST measurement point | |
| Adjustment range | Fiducial point to end of ECG complex |
| Point default | QRS offset +80 msec |
| Update interval | 15 sec, 1 normal beat required |
| Resolution | ± 0.1 mm |
| Trends | Graphical, tabular and graphical mini-trends |
| INOP alarm | Yes |
| Upper and lower ST alarms | ± 15 mm, ± 0.1 mm increments |
| Duration of ST event to trigger alarm | None, 15, 30, 45, 60 seconds |

Arrhythmia Detection

| | |
|-----------------------|--|
| Adult and Pediatric | Yes |
| Neonatal | No. Only bradycardia is available as a low heart rate alarm in neonatal mode |
| ARR mode | User Selectable; OFF, Basic or Advanced |
| Basic ARR (standard) | Asystole, ventricular fibrillation, ventricular tachycardia and artifact (ARR label displayed to register arrhythmia occurrence) |
| Advanced ARR (option) | Ventricular run, accelerated idioventricular rhythm, supra-ventricular tachycardia, couplet, bigeminy, tachycardia, bradycardia, pause and also supports PVC/min parameter output. |

Respiration

| | |
|----------------------------|--|
| Sensing leads | I, II (user-selectable) |
| Measuring method | Impedance pneumography |
| Auxiliary current | $\leq 10\mu\text{A}$ for any active electrode |
| Detection threshold | 0.15 Ω to 4.0 Ω in manual mode (user adjustment) 0.2 Ω to 1.5 Ω in auto mode (automatic adjustment) |
| Measuring range | 0 to 155 breaths per min |
| Accuracy | ± 1 breath/min or 2% of rate (whichever is greater) |
| Apnea detection | For neonatal and pediatric patients |
| Alarms | User-selectable upper and lower respiration rate |

Pulse Oximetry (SpO₂)

| | |
|----------------------------|---|
| SpO ₂ algorithm | Masimo® SET® (Signal Extraction Technology) Masimo provides the industry "gold standard" for motion tolerant pulse oximetry technology as documented in Masimo's peer reviewed studies (www.masimo.com). See the Infinity Masimo SET SmartPod datasheet for more detailed specifications. |
|----------------------------|---|

| | |
|---|---|
| SpO₂ algorithm | Nellcor™ OxiMax™² See The Infinity Nellcor OxiMax SmartPod datasheet for more detailed specifications. |
| SpO₂ algorithm | Dräger's OxiSure™ SpO₂ |
| Dräger's OxiSure SpO₂ | |
| Connection | MultiMed® pods (SpO₂ port)⁴ |
| Displayed parameters | Saturation (fraction of oxyhemoglobin to functional hemoglobin) and pulse (rate and waveform) |
| Measuring method | Transmission spectrophotometry |
| Measuring range | SpO₂: 1 to 100% Pulse: 30 to 250 bpm |
| Accuracy | SpO₂: 0 to 69% not specified SpO₂: 70 to 100%: ± 2% (± 3% for neonates; Masimo LNOP-Ear: ± 3.5%; Nellcor DS100A: ± 3%) Pulse: ± 3 bpm or ± 3% (whichever is greater) |
| Alarms | User-selectable upper and lower limits for SpO₂ and pulse rate Life-threatening desaturation alarm in neonatal mode only |
| Accessories | Dräger approved Masimo or Nellcor sensors Dräger reusable SpO₂ sensors (not intended for neonates) |
| Temperature | |
| Displayed parameters | Absolute and delta temperatures |
| Measuring range | Absolute: -5° C to 50° C Delta: 0° C to 55° C |
| Resolution | 0.1° C |
| Accuracy | Absolute: ± 0.1° C Delta: ± 0.2° C |
| Alarms | User-selectable upper and lower limits for absolute and delta values |
| Accessories | Dräger approved core and skin probes |
| Noninvasive Blood Pressure (NBP) | |
| Displayed parameters | Systolic, Mean and Diastolic pressures |
| Measuring method | Oscillometric utilizing step deflation |
| Modes of operation | Manual (single measurement); Continuous (5 minutes) and Interval |
| Interval times | 1, 2, 2.5, 3, 5, 10, 15, 20, 25, 30, 45, 60, 120 and 240 minutes |
| Heart rate measuring range | 30 to 240 bpm |
| Pressure measuring range | |
| Adult | Systolic: 30 to 250 mmHg Mean: 20 to 230 mmHg Diastolic: 10 to 210 mmHg |
| Pediatric | Systolic: 30 to 170 mmHg Mean: 20 to 150 mmHg Diastolic: 10 to 130 mmHg |
| Neonatal | Systolic: 30 to 130 mmHg Mean: 20 to 110 mmHg Diastolic: 10 to 100 mmHg |
| Cuff pressure | |
| Default inflation pressure | |
| Adult | 160 mmHg ± 10 mmHg |
| Pediatric | 120 mmHg ± 10 mmHg |
| Neonatal | 110 mmHg ± 10 mmHg |
| Inflation pressure after a valid measurement | |
| Adult | (Last Systolic +25 mmHg) ± 10 mmHg |
| Pediatric | (Last Systolic +25 mmHg) ± 10 mmHg |
| Neonatal | (Last Systolic +30 mmHg) ± 5 mmHg |

CONTINUING TECHNICAL DATA

| | |
|-----------------------------------|---|
| Maximum inflation pressure | |
| Adult | 265 mmHg ± 5 mmHg |
| Pediatric | 180 mmHg ± 10 mmHg |
| Neonatal | 142 mmHg ± 10 mmHg |
| Minimum inflation pressure | |
| Adult | 110 mmHg ± 10 mmHg |
| Pediatric | 90 mmHg ± 10 mmHg |
| Neonatal | 70 mmHg ± 10 mmHg |
| Connector | Quick-release connector with single airway |

| | |
|-----------------------------------|---|
| Invasive Blood Pressure | |
| Displays up to 8 pressures | |
| Measuring method | Resistive strain gauge transducer |
| Display resolution | 1 mmHg |
| Measuring range | -50 to 400 mmHg (after zeroing) |
| Frequency ranges | DC to 8 Hz, DC to 16 Hz, or DC to 32 Hz (user-selectable) |
| Zero balance range | ± 200 mmHg |
| Transducer specifications | Dräger approved transducers with a resistance of 200 to 3000Ω and an equivalent pressure sensitivity of 5μV/V/mmHg ± 10% |
| Accuracy | ± 1 mmHg or ± 3%, exclusive of transducer (whichever is greater) |
| IBP alarms | User-selectable upper and lower limits for systolic, mean and diastolic pressures |
| Accessories | Dräger approved pressure transducers |

| | |
|--|---|
| Cardiac Output | |
| Parameter display | Cardiac output, blood temperature, injectate temperature |
| Measuring method | Thermodilution |
| Connection | QuadHemo or HemoMed™ pods |
| Measuring range | |
| Cardiac output | 0.5 to 20 L/min |
| Blood temperature | 25° C to 43° C (77° F to 109° F) |
| Injectate temperature | -5° C to +30° C (23° F to 86° F) |
| Accuracy | |
| Cardiac output | ± 5% (with 0° C injectate) |
| Injectate temperature | ± 0.25° C |
| Degree of protection against electric shock | Type CF |
| Defibrillation protection | Defibrillation-Proof Applied Part per IEC 60601-1 |

DISPLAY SPECIFICATIONS

| | |
|------------------------|--|
| Type | Thin Film Transistor-Liquid Crystal Display Active Matrix (TFT-LCD) |
| Size (Delta) | 264 mm (10.4 in.) diagonal |
| Channels | 6 standard, 6, 8 optional |
| Viewing area | 211 x 158 mm (8.3 x 6.2 in.) |
| Resolution | 640 x 480 pixels |
| Size (Delta XL) | 310 mm (12.2 in.) diagonal |
| Channels | 6 standard, 8 optional |
| Viewing area | 246 x 184.5 mm (9.7 x 7.3 in.) |
| Resolution | 800 x 600 pixels |
| Rotary knob | Easy-to-use menu structure and fixed keys |

| | |
|--------------------------|--|
| Alarms | |
| Priorities | 3; High (Life Threatening), Medium (Serious), Low (Advisory) |
| Audio alarm tones | User selectable: Infinity, IEC 1² or IEC 2² |

Connections

Multimed cables, Masimo SET SmartPod[®], Nellcor OxiMax SmartPod², HemoMed pod, pod communication ports (Delta: 1 standard, 2nd optional; Delta XL: 2 standard), NBP Input, etCO₂ module, Infinity Docking Station, analog output, QRS sync output, RS 232, remote keypad, and Scio[®] Four modules.

Analog Output

| | |
|---------|------------------------------|
| Signals | ECG, arterial blood pressure |
| Delay | ≤25 msec |

Infinity Network

| | |
|---|---|
| Networking method | Wired via DirectNet or Docking Station Wireless via WLAN PC card |
| Wireless encryption | None, WEP, WPA2 [®] |
| Provides access to the Infinity Central Station, R50N bedside network recorder, laser printer, nurse call system and remote view. | |

Physical Specifications

| Cooling | Convection |
|--|--|
| Size (Delta) H x W x D | 253 x 365 x 190 mm (10.0 x 14.4 x 7.5 in.) |
| Weight (Delta) with external battery | 5.8 kg (12.7 lbs.) 6.4 kg (14.0 lbs.) |
| Size (Delta XL) H x W x D | 272 x 384 x 190 mm (10.7 x 15.1 x 7.5 in.) |
| Weight (Delta XL) with external battery | 6.2 kg (13.6 lbs.) 6.8 kg (14.9 lbs.) |

Information Management Capabilities

| | |
|-----------------|--|
| Data storage | 24 hours of trended parameter information |
| Data resolution | 30-second sampling |
| Trend tables | 1-, 5-, 15-, 30- or 60-minute display formats |
| Trend graphs | 1-, 2-, 4-, 8-, 12- or 24-hour display formats |

Electrical Specifications

| | |
|-------------------------|---|
| Input voltage | 11 to 15 V DC |
| Power consumption | ≤70 watts (fully loaded) |
| Patient leakage current | ≤10 μA |
| Protection class | Internally powered (per IEC 60801-1) and for use with specified Class 1 power supplies. |
| Power requirements | 100 to 240 V AC, 3 A |
| Frequency | 50 to 60 Hz |
| Chassis leakage current | <300 μA @ 120 V AC <600 μA @ 220 V AC |

BATTERY SPECIFICATIONS

| | |
|--|---|
| Internal battery | Battery type: lithium-ion Battery capacity: 180 minutes |
| Charging time | 6.5 hours at 25° C |
| External auxiliary battery | Battery type: sealed lead-acid Battery capacity: 50 minutes Charging time: 3.5 hours at 25° C |
| Size (external auxiliary battery) H x W x D | 62 x 182 x 24 mm (2.4 x 7.2 x .9 in.) |
| Weight | 0.635 kg (1.4 lbs.) |

Battery capacity varies with parameter configuration. The battery capacity specified above is under the following load conditions: MultiMed with SpO₂ sensor¹, 2 temperature probes, HemoMed pod with 4 IBP transducers and a catheter, NBP taking measurements every 15 minutes, LCD Transport Brightness at 50%, and no continuous tone being generated.

Battery capacity may diminish after extended use.

CONTINUING TECHNICAL DATA

Environmental Requirements

Temperature range

| | |
|-----------|-----------------------------------|
| Operating | 10° C to 40° C (50° F to 104° F) |
| Storage | -20° C to 40° C (-4° F to 104° F) |

Relative humidity

| | |
|-----------|-----------------------------|
| Operating | 20% to 90%, non-condensing |
| Storage | 10% to 95% (with packaging) |

Atmospheric pressure

| | |
|-----------|---------------------------------|
| Operating | 525 to 795 mmHg (70 to 106 kPa) |
| Storage | 375 to 795 mmHg (50 to 106 kPa) |

Standards

IEC 60601-1(2nd edition) and applicable particular and collateral standards,
IEC 60601-1-2:2007, Electromagnetic compatibility CISPR 11, Class B
The Delta and Delta XL monitors comply with Medical Devices Directive
(MDD) 93/42 EEC and bear the CE mark.

ORDERING INFORMATION

| | |
|---------------|---------|
| Delta Monitor | MS18597 |
|---------------|---------|

| | |
|------------------|---------|
| Delta XL Monitor | MS18596 |
|------------------|---------|

Note: Infinity Docking Station/monitor power supply, MultiMed, and all patient connection and intermediate cables must be ordered separately.

Power Cables

| | |
|-------------------------------------|---------|
| Europe, CEE 7, 2.5 m | 4321712 |
| North America, 5-15R, 2.25 m | 4321720 |
| Switzerland, SEV 1 01 1, 2.25 m | 4321613 |
| Great Britain, BS 1363, 3 m | 1851713 |
| Australia, New Zealand, AS3112, 3 m | 1851705 |
| China, AS 3112, 3 m | 1859714 |
| Denmark, 3 m | 1851721 |
| Brazil, NBR14136, 3m | 1875523 |

Docking Stations

| | |
|--------------------------------|---------|
| Infinity Docking Station (IDS) | 5206110 |
|--------------------------------|---------|

Provides mechanical mounting as well as interfaces for monitor's electrical, network, video, recorder, and RS 232 data export and serial communications.

| | |
|--|---------|
| Infinity Docking Station with Integrated MIB | 7489375 |
|--|---------|

Provides mechanical mounting as well as interfaces for monitor's electrical, network, video, recorder, RS 232 data export and serial communications, and device connectivity via MIB.

| | |
|---|---------|
| Infinity Docking Station + Monitor Power Supply | 7265130 |
|---|---------|

| | |
|---------------------------|---------|
| Interface Docking Station | 5732388 |
|---------------------------|---------|

Provides mechanical mounting as well as interfaces for monitor's electrical, video, recorder, and RS 232 data export and serial communications

| | |
|--------------------------|---------|
| Mounting Docking Station | 4715319 |
|--------------------------|---------|

Provides mechanical mounting only

| | |
|---------------------------|---------|
| Monitor Handle Hook Mount | MS15202 |
|---------------------------|---------|

MultiMed Pods and Cables

Multi-parameter Cables to Monitor

ECG (3, 5 or 6 lead-wires), impedance respiration, SpO₂* and one temperature (two temperatures with Y-cable)



MT-1818-2008

Infinity Docking Station

MT-128-2007

MultiMed Pod

MT-2185-2005

HemoMed Pod

MT-6918-2009

Recorder**CONTINUING ORDERING INFORMATION**

| | |
|----------------------|---------|
| MultiMed Plus, 2.5 m | MS20093 |
|----------------------|---------|

| | |
|-------------------------|---------|
| MultiMed Plus OR, 2.5 m | MS20094 |
|-------------------------|---------|

Includes integrated ESU filter for operating room environment.

| | |
|-------------------|---------|
| MultiMed 5, 2.5 m | 3368391 |
|-------------------|---------|

| | |
|-------------------|---------|
| MultiMed 6, 2.5 m | 5191221 |
|-------------------|---------|

| | |
|---------------|---------|
| NeoMed, 2.5 m | 5590539 |
|---------------|---------|

ECG (3 lead-wires), impedance respiration, two temperatures, SpO₂* and FiO₂.

| | |
|------------------------------------|---------|
| MultiMed or NeoMed Pole/Rail Mount | MP00721 |
|------------------------------------|---------|

| | |
|------------------------------|---------|
| MultiMed 12 Pod ⁵ | 5589663 |
|------------------------------|---------|

For diagnostic 12-lead ECG and SpO₂*⁴

*SpO₂ measurements are not available from the MultiMed pods and cables if you are using an alternate source of SpO₂

SpO₂ Pods

| | |
|---|---------|
| Masimo SET SpO ₂ SmartPod ⁵ | MS16901 |
|---|---------|

| | |
|---|---------|
| Nellcor Oximax SpO ₂ SmartPod ^{2,5} | MS23997 |
|---|---------|

Software Options

Available with Delta only

| | |
|---------------------------|---------|
| 6 Waveform Channel Option | 5597914 |
|---------------------------|---------|

| | |
|--------------------------|---------|
| 2nd Pod Comm Port option | 5597203 |
|--------------------------|---------|

Delta and Delta XL

| | |
|-------------------------------|---------|
| 6 - 8 Waveform Channel Option | 5597922 |
|-------------------------------|---------|

| | |
|--|---------|
| Physiological Calculations Option⁵ | 5201996 |
|--|---------|

| | |
|--|---------|
| Arrhythmia II Option (ACE ⁵) | 4322967 |
|--|---------|

| | |
|-------------------------------|---------|
| Wireless Option ^{**} | 7498087 |
|-------------------------------|---------|

| | |
|--|---------|
| 3-lead ST Analysis Option (not required with 12-lead option) | 5201988 |
|--|---------|

| | |
|----------------------------------|---------|
| ARIES 12-lead ST Analysis Option | 5587328 |
|----------------------------------|---------|

| | |
|--|---------|
| ARIES/Physiological Calcs/Arrhythmia Package | 5443910 |
|--|---------|

| | |
|--|---------|
| OR Mode Option (stored in the monitor) | MS17653 |
|--|---------|

| | |
|--|---------|
| OR Mode IDS Option (stored in the IDS) | MS17034 |
|--|---------|

**Wireless LAN PC Card (MS25009⁵), and access point installation is required for wireless monitoring.

Optional Modules and Hardware Accessories

Invasive Blood Pressure Adapters

| | |
|-------------------------|---------|
| 2 IBP Y-adapter, 10-pin | 5731281 |
|-------------------------|---------|

| | |
|------------------------|---------|
| 2 IBP Y-adapter, 7-pin | 5592147 |
|------------------------|---------|

Hemodynamic Pods

| | |
|--------------------------|---------|
| HemoMed Pod ⁵ | 5588822 |
|--------------------------|---------|

Provides management of up to 4 invasive blood pressures and cardiac output.

| | |
|---------------------------|---------|
| QuadHemo Pod ⁵ | 4315961 |
|---------------------------|---------|

Provides management of up to 4 invasive blood pressures, cardiac output and two temperatures.

PiCCO[®] SmartPod Kit

| | |
|---------------------------------|---------|
| PiCCO SmartPod Kit ⁶ | MS16734 |
|---------------------------------|---------|

PiCCO technology uses quantitative parameters that are determined both intermittently through PULSION's transpulmonary thermodilution technique and continuously through arterial pulse contour analysis.

Provides management of up to 4 invasive blood pressures.

PULSIOCATH arterial thermodilution catheters can be procured from Pulsion directly.

etCO₂, Transcutaneous O₂/CO₂ Gas Monitoring

| | |
|---|---------|
| etCO ₂ Module (Mainstream/Sidestream) ⁶ | 4319310 |
|---|---------|

| | |
|--|---------|
| etCO ₂ Pod (Mainstream/Sidestream) ⁶ | 5740738 |
|--|---------|

CONTINUING ORDERING INFORMATION

| | |
|--|---------|
| etCO ₂ Microstream [®] Pod [†] | 7870947 |
| etCO ₂ + Respiratory Mechanics Pod [†] | 5740704 |
| tcpO ₂ /CO ₂ Pod [†] | 5592535 |
| Scio Four Modules [‡] | 6871810 |
| Scio Four Oxi Plus, Scio Four Plus, Scio Four Oxi and Scio Four Modules | |
| Neurological Monitoring | |
| EEG Pod [†] | 5736744 |
| Trident [®] (NMT) SmartPod ^{§,‡} | MS15007 |
| BISx [®] SmartPod [†] | MS14796 |
| Printing/Recording Options | |
| R50 Recorder [‡] | 5952630 |
| R50N Network Recorder [‡] | 5740068 |
| Infinity Network Laser Printer (115 V) | 6556513 |
| Infinity Network Laser Printer (220 V) | 6556539 |
| Other Accessories | |
| Remote Keypad | 5203042 |
| External Battery (sealed lead acid) | 5592097 |
| External Battery Charging Station (charges four batteries simultaneously) | 5597377 |

[†] Requires VF8 software.

[‡] Requires VF8.1 software.

[§] Only available with Dräger's OxiSure algorithm.

[‡] Refer to individual module or pod datasheet for additional information.

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Masimo and SET are registered trademarks of Masimo Corporation

MicroStream is a registered trademark of Oridion

BISx, Nellcor and OxiMax are trademarks of Covidien AG or an affiliate.

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The quality management system at
Dräger Medical Systems, Inc. is certified according to ISO 13485, ISO 9001 and Annex II.3 of Directive 93/42/EEC (Medical devices).

“THE SYSTEM”

OFFERED BY BODY CAMS BY RETIRED COPS



“**THE SYSTEM**” is a collection of high quality components assembled together in a compatible, very efficient and cost effective arrangement. This allows Police Departments of small to medium size to provide the advantages of Police Body Worn Camera Systems to their staff, without prohibitive operating costs.

Starting with the most important component, “**THE CHIEF**” HD video camera, named for its leadership in quality and advanced features.

The Case: A flat black matted finish, simple and professional in appearance, designed with durability in mind; waterproof to 3 meters, dust proof and impact resistant to 9 feet. All operational buttons are the same color as the case to not draw undue attention during situations of protective concealment.

Remote Mini Camera Lens: To reduce the weight and bulky placement of the camera on the officer’s shirt, a remote lens (about the size of a large postage stamp and weight of several pennies), can be pre-placed at a location of your choice to capture all of the action in detail. The main camera can then be properly secured on the Sam Browne utility belt utilizing the retention holster, or any other location deemed appropriate.

Camera Retention: Our one of a kind, Patented “Bridge” and belt mounted recorder holster, ensures retention and control of your body worn camera. The retention is accomplished even during the most challenging situations of physical altercations, or fence climbing foot pursuits. The holster allows the camera to rotate a full 360 degrees. It also provides the option of holster placement at the best suitable location on the officer’s belt. This camera mounting is secure, comfortable, efficient and all around "Officer Friendly".

Operation: Activating the video is a simple one touch operation. On the front of the case is a large button that operates power to the video. The size of this button makes it easy to find when wearing cold weather gloves or turning it on by touch, which does not necessitate having to look down to find the button. The large button also has a built-in 3 second delay "push and hold" to prevent accidental POWER OFF during incidents of physical self-defense or encounters with objects during foot pursuits.

Batteries: The “Chief” camera has two HOT SWAPABLE batteries capable of recording approximately 6 hours each. These batteries provide more than ample power for even the most active police officers working 12 hours shifts. The camera’s STANDARD memory is rated at 64 GBs (the most in our industry), or enough memory to record video in HD 720 resolution for about 16 hours. This enhanced memory is critical in situations where downloading is not available for several days. The “CHIEF” also has the ability to take still pictures (20 MP) or AUDIO ONLY when needed.

Low Lux Conditions: IR lighting is available with three options. IR can be optionally turned on, only by demand, or activated automatically when sensing low light situations. The IR feature can also be completely disabled if so desired.

Camera Docking: At the end of watch, the officer simply deposits the body camera into the docking station, which then automatically downloads video data, erases camera memory and charges both batteries to ensure camera is readily available for the next shift.

Video Evidence: Included with "The System" is a specially designed computer that quickly and efficiently captures video records and forwards them to a secure server, where they are saved after being assigned a unique file number, by use of RAID managed array enclosures. All files are backed up automatically, as insurance, in case of an unforeseen extended power outage or equipment malfunction. The file can subsequently be retrieved and copied only by "authorized" department personnel.

Files can be searched for by "Time and Date", "Officer ID Number" or "Device Number".

All files are protected by password access.

Storage: Storage is the major concern of most Police administrators when considering implementation of Police Body Cam Systems.

We address the areas of most concern: File Security, Data Storage and the Resultant Costs.

Storage Capacity Considerations: All files in our system are kept under the direct control and supervision of the involved department and its Chief. There is absolutely NO outsourcing of video evidence. "The System" is "Stand-Alone" and comes complete with copying capabilities and retention. Redaction of video files or images is available, if required.

When considering your storage options, consider that any outsourcing of storage will result in a reduction of your control of vital video evidence. Outside entities may have different security protocols or concerns than those of your department. We feel that it is not a matter of "If" a department's evidence will be compromised by an outside entity, but "When".

Most agencies require storage at the rate of One Terabyte per year for each patrol officer, a little less for field supervisors and considerably less for detectives. An agency with 20 Patrol Officers would therefore require 20 Terabytes of storage per year, and in most cases would be provided with 36 Terabytes to ensure ample storage and back up. Costs for succeeding years can be calculated at about fifty dollars (or less) per officer, per year (20 man department about \$ 1,000 per year) total. All components are designed for use by in-house department personnel, who only need to possess minimal computer skills. We will help with personnel training and remote I.T. support until you are comfortable with self-operation.

Pricing: Our prices are all inclusive, with absolutely no hidden fees or monthly charges. There is only a one-time purchase price with no residual costs, whatsoever.

You will not only find that our prices are very competitive, but usually fall far below the cost of similar systems, which is well within the budgetary constraints of most small to medium sized departments.

Optional Equipment: Our standard camera system is offered with robust components and features, which we believe provide an extremely high level of performance. In the vast majority of cases, no optional upgrades should be necessary. However, optional features are available at a slightly increased cost, such as GPS. These upgraded options

and the resultant pricing will be fully discussed by our consultants and your representatives, at the time of purchase.