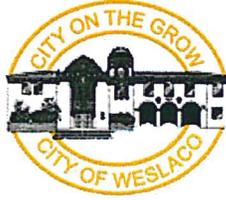


# City of Weslaco

*"The City on the Grow"*



David Suarez, Mayor  
John F. Cuellar, Mayor Pro-Tem, District 2  
David R. Fox, Commissioner, District 1  
Olga M. Noriega, Commissioner, District 3  
Gerardo "Jerry" Tafolla, Commissioner, District 4  
Lupe V. Rivera, Commissioner, District 5  
Fidel L. Peña, Commissioner, District 6

Leonardo Olivares, City Manager

## CITY OF WESLACO

### Invitation to Bid

The City of Weslaco hereby requests sealed bids for the following:

#### **Cardiac Monitors (RFB No.: 2013-14-09)**

Sealed bids addressed to Homer Rhodes, will be accepted at the Weslaco City Hall Purchasing Office, 255 S. Kansas Avenue, Weslaco, Texas 78596, until **3:00 p.m. on June 30, 2014** at which time they will be opened and read aloud. Please mark envelope, "Sealed Bid"

#### **Cardiac Monitors, RFB No. 2013-14-09**

Potential Bidders/Respondents are advised that the bidding documents can be downloaded from the City of Weslaco web page address: [www.weslacotx.gov](http://www.weslacotx.gov), and may also be secured at the Weslaco City Hall Purchasing Office, 255 S. Kansas Avenue, Weslaco, Texas 78596, or by calling 956.447.2240. Be advised that if your company is contemplating on bidding this project you must contact the Purchasing Office, so that any changes/additions via addendum form can be forwarded to your company. (Please include your company name, address, e-mail, telephone and fax, and contact person). **No electronic bids will be accepted.**

The City of Weslaco reserves the right to accept or reject any or all bids, to waive any informalities, and to accept the bid to be the best and most advantageous to the City and to hold bids for a period of forty-five (45) days without taking action, for the purpose of reviewing the bids and investigation of bidders' qualifications prior to bid award. Bids submitted past the aforementioned date and time will not be accepted.

City of Weslaco

Homer Rhodes,  
Purchasing Office  
hrhodes@weslacotx.gov



**VENDOR'S NOTICE OF INTENT TO SUBMIT A BID**

If you intend to submit a bid for **Cardiac Monitors RFB No.: 2013-14-09** with the City of Weslaco as outlined in the specifications, please indicate your intention by signing, dating, and returning this form to the address below prior to **June 30, 2014** so that you may receive any addendums to the specifications should the need arise.

**Homer Rhodes  
City of Weslaco  
Purchasing Office  
255 S. Kansas Avenue  
Weslaco, Texas 78596  
Phone: 956.447.2240  
Fax: 956.969.8452  
hrhodes@weslacotx.gov**

Name: _____ (print / contact person)	Signature: _____
Title: _____	Company/Agency: _____
Mailing Address: _____	City/State/Zip: _____
Phone: _____	Fax: _____
Email Address: _____	

Bid No.: 2013-14-09

**CITY OF WESLACO  
REQUEST FOR BIDS  
Cardiac Monitors  
INSTRUCTIONS TO BIDDERS**

**IT IS THE INTENT OF THESE SPECIFICATIONS TO DESCRIBE AND GOVERN THE PURCHASE PRICE OF CARDIAC MONITORS AND SUPPLIES REQUESTED. PROSPECTIVE BIDDERS ARE TO FILL THE FOLLOWING BLANK FORMS AND SUBMIT WITH THEIR BID.**

**MINIMUM SPECIFICATIONS:**

1. Bid shall be submitted properly marked / identified in a sealed envelope upon the blank form attached hereto. Each form must be completely filled out. Bid must be filed with the City of Weslaco before opening day and hour. No late bids will be accepted. Bid will be returned to respondent unopened if not properly identified. Failure to meet request for Bid requirements may be grounds for disqualification.
2. Bid MUST give full firm name and address of respondent, and be manually signed. Failure to do so will disqualify your Bid. Person signing Bid must show title or AUTHORITY TO BIND HIS/HER FIRM IN A CONTRACT. Firm name and authorized signature must appear on each page that calls for this information.
3. Bid CANNOT be altered or amended after opening time. Alterations made before opening time must be initialed by bidder guaranteeing authenticity. No Bid may be withdrawn after opening time without acceptable reason in writing and only after approval by the City of Weslaco.
4. Quantities, provide the cost of 1 unit, 2 units, 3 units, 4 units, 5 units or 6 units. **All prices shall be F.O.B. / Weslaco Fire Department, 120 East 5<sup>Th</sup> St Second Floor, Weslaco, Texas 78596.**
5. It is the responsibility of the Supplier to verify that the Cardiac Monitors meet specifications. Failure to do so or failure of the product itself will be cause to cancel all existing or pending order. The City of Weslaco reserves the right to request demonstrations and samples of the materials at the City's discretion to confirm the quality. Cardiac Monitors under these specifications shall be new and unused. Any deviation from these instructions will be subject to Bid cancellation.
6. All deliveries shall be made within five (5) working days of confirmed order. All deliveries shall be made to a central location as may be designated by the City of Weslaco. The City reserves the right to change or add delivery locations.
7. In order for the City to meet its needs, it is understood that during the period of the contract, should the successful bidder be unable to supply the product, the City reserves the right to obtain the product from available sources.

8. Bids shall be analyzed on a total dollar value and what is most advantageous to the City and not on item per item basis. Bids that do not include every item will not be considered.
9. It shall be the legal obligation of the bidder during the term of the contract, to notify the Purchasing Office of any price decrease in the market and accordingly, reduced prices will be in effect with appropriate documentation as described above.
10. The bidder agrees to indemnify and hold harmless the City of Weslaco from all suits and actions of every nature and description brought against, for or on account of the use of patented appliances, products or processes. Awarded bidder/vendor shall pay all royalties and charges which are legal and equitable. Evidence of such payment or satisfaction shall be submitted upon request from Purchasing Office, as a necessary requirement in connection with the final estimate for payment in which such patented appliance, products or processes are used.
11. Bidder shall carefully examine the Bid forms, requirements/specifications, and instructions to bidders. Should the bidder find discrepancies in, or omissions from Bid forms, specifications or other documents, or should he/she be in doubt as to their meaning, he/she should at once notify the Purchasing Office, Weslaco City Hall, 956-447-2240 and obtain clarification by addendum prior to submitting any Bids.
12. **Addenda and Interpretations:**  
No Interpretations of the meaning of the specifications or other pre-bid documents will be made orally to any bidder. Every request for such interpretation should be in writing addressed to the City of Weslaco, Purchasing Department, 255 S. Kansas Avenue, Weslaco, Texas 78596, and to be given consideration must be received at least ten (10) days prior to the date fixed for the opening of bids. Any and all such interpretations and any supplemental instruction will be in the form of written addenda for specifications which, if issued, will be mailed/faxed or e-mailed (at the respective address furnished for such purposes), not later than three (3) days prior to the date fixed for the opening of bids. Failure of any bidder to receive any such addenda or interpretation shall not relieve such bidder from any obligation under his bid as submitted. All addenda so issued shall become part of the contract documents.
13. The City of Weslaco reserves the right to refuse and reject any or all Bids and to waive any or all informalities or technicalities and to accept the Bid to be the best and most advantageous to the City and to hold the Bids for a period of forty-five (45) days without taking action. Bids submitted past the aforementioned date and time will not be accepted. **NO ELECTRONIC BIDS WILL BE ACCEPTED.**

# Cardiac Monitor/Defibrillator Specifications

Operating Modes/User Interface	
<p>Controls: All critical emergency therapy controls shall be grouped together in a logical orientation. Each control is dedicated to a single function to provide for fast, unambiguous access. These controls include Power ON; CPR controls (CPR Metronome), ENERGY SELECT, CHARGE, ANALYZE, SYNC and SHOCK; and pacing controls PACER, RATE, CURRENT and PAUSE.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Critical controls are color coded to enable clear visibility and to help the user distinguish each control for rapid access.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>All critical measurement controls are dedicated to single function hard keys to provide for fast, unambiguous access. These controls include LEAD, SIZE, NIBP and 12-LEAD.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Additional operational controls are dedicated to single function hard keys to provide for fast unambiguous access. These controls include TRANSMIT, PRINT, EVENTS, DISPLAY MODE, CODE SUMMARY and HOME SCREEN.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Manual Mode; the device shall provide manual defibrillation, synchronized cardioversion, and noninvasive pacing and ECG and vital sign monitoring.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Archive mode; the device shall automatically store patient data and will allow the operator to access stored patient records.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Setup Mode; the device shall allow the operator to configure the Setup Options of the device.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Service Mode; the device shall allow the operator to execute device diagnostic tests and calibrations without the need for physically opening the case.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

Demo Mode; the device shall provide simulated waveforms and trend graphs for demonstration purposes. The device shall immediately revert to normal clinical operation if a therapy cable is connected.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Defibrillator</b> The device uses a biphasic truncated exponential waveform.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Variable duration based on patient impedance.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Escalating energy levels up to 360J to maximize clinical options and treat the widest range of patients. The full range of energy levels are accessible at any time (except internal defibrillation), as limited by pre-determined patient impedance ranges.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Voltage compensation to address varying patient impedance.	Yes <input type="checkbox"/> No <input type="checkbox"/>
External Defibrillation (AED) The device is capable of being set up to power on in the AED mode.	Yes <input type="checkbox"/> No <input type="checkbox"/>
The device allows the operator to configure the output energy delivery sequence to be used during Advisory mode as 200/200/360 or 200/300/360 joules.	Yes <input type="checkbox"/> No <input type="checkbox"/>
While in manual mode, the device allows the operator to select the following energy settings; 2, 3, 4, 5, 6, 7, 8, 9, 10, 15, 20, 30, 50, 70, 100, 125, 150, 175, 200, 225, 250, 275, 300, 325 and 360 joules or a user configurable sequence of 150-360 (1st shock), 150 - 360 (2nd shock), 150 - 360 joules (3rd shock).	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>12-Lead ECG /Algorithm</b>	
The analysis program includes interpretative statements on adult and pediatric patients to describe the 12-lead ECG including statements such as "Meets ST Elevation MI Criteria".	Yes <input type="checkbox"/> No <input type="checkbox"/>
The device includes trending of ST measurement after an initial 12-Lead analysis and automatically generates a 12-Lead ECG to alert the operator if any change in ST elevation or depression is detected.	Yes <input type="checkbox"/> No <input type="checkbox"/>
The STJ Levels are automatically printed anytime that a 12-lead is printed.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Patient Monitoring</b>	
The device incorporates SpO <sub>2</sub> and SpCO monitoring using Masimo® Rainbow® technology and compatible sensors.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Noninvasive Blood Pressure (NIBP) The device is capable of displaying blood pressure values in mmHg.	Yes <input type="checkbox"/> No <input type="checkbox"/>

<p>Capnography (EtCO<sub>2</sub> monitoring)  The device incorporates capnography, using Oridion Microstream® technology. Capnography monitoring activates automatically upon connecting FilterLine® or Smart CapnoLine®.</p>	
<p>Trending  The device offers on-screen trending with choice of HR, PR (SpO<sub>2</sub>), PR (NIBP), SpO<sub>2</sub> (%), SpCO (%), SpMet (%), CO<sub>2</sub>(EtCO<sub>2</sub>/FiCO<sub>2</sub>), RR (CO<sub>2</sub>), NIBP, or ST.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>The device includes trending of ST measurement after an initial 12-lead analysis. A 12-lead ECG will automatically print to alert the operator following a series of consistent ST elevations or depressions</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Metronome  22.6.1. Enable provides the metronome during CPR and may be Off or On.  The C:V ratio for an Adult with No Airway can be set to 30:2, 16:1, 15:2, 12:1, 10:1 or 100:0.  The C:V ratio for an Adult with an Airway can be set to: 30:2, 16:1, 15:2, 12:1, 10:1 or 100:0.  The C:V ratio for a Youth with No Airway can be set to: 30:2, 16:1, 15:2, 12:1, 10:1 or 100:0  The C:V ratio for a Youth with Airway can be set to: 30:2, 16:1, 15:2, 12:1, 10:1, or 100:0.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Printer  The device includes a 100mm (3.9 in) thermal recorder that is easily accessible from the front of the device. Paper shall be of standard roll format to facilitate replacement and minimize waste</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Power  Battery Options; the device operates using 2 Lithium-ion, rechargeable batteries. The device operates with one or two batteries; it operates from only one battery at a time, monitors the state of each battery and automatically switches to the second battery when a low battery is detected for the first battery, without interruption of functional operation.</p>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<p><b>Maintenance/Service</b></p>	
<p>Each time the monitor/defibrillator is powered on, it performs internal self-tests to check that internal electrical components and circuitry work properly.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>The ability to have the device serviced and</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>

repaired on-site.	
<b>Communications</b>	
The device is capable of transferring data records Via a direct connection to a PC.	Yes <input type="checkbox"/> No <input type="checkbox"/>
The device is capable of transferring data records By an internal Bluetooth to other Bluetooth device.	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Battery</b>	
Lithium-ion Rechargeable Batteries	Yes <input type="checkbox"/> No <input type="checkbox"/>
Battery Chargers	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Warranty</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Cardiac Monitors - Bid Form**  
**COST FACTOR**  
**SHEET**  
**BID No.: 2013-14-09**

THIS INFORMATION IN THE OPINION OF THE CITY OF WESLACO PUBLIC FIRE DEPARTMENT IS NEEDED TO DETERMINE "REASONABLENESS OF COST" AND IS PART OF THE RANKING CRITERIA.

<u>ITEM No.:</u>	<u>DESCRRPTION</u>	<u>QTY</u>	<u>UNIT PRICE</u>	<u>TOTAL PRICE</u>
		1	\$	\$
		2	\$	\$
		3	\$	\$
		4	\$	\$
		5	\$	\$
		6	\$	\$

The \_\_\_\_\_ (Bidder), having read the instructions and specification, proposes to furnish Cardiac monitors for the full and firm price indicated on this Bid Form / Cost Factor Sheet, in full compliance with the specifications. Bidder agrees that this bid shall be good and may not be withdrawn for a period of forty-five (45) calendar days after the sceduled closing time for receiving bids. The undersigned affirms that they are duly authorized to execute this bid price agreement, that this company, corporation, firm, partnership or individual has not prepared this bid in collusion with any other bidder, and that the contents of this bid as to prices, terms or conditions of said bid have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this bid.

Respectfully submitted this \_\_\_\_\_ day of \_\_\_\_\_, 2014

SIGNATURE: \_\_\_\_\_

**(Failure to sign will disqualify Bid)**

TYPE / PRINT NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

Email: \_\_\_\_\_