



July 15, 2020

Council Meeting of July 21, 2020
Subject: Sole Source Purchase – Automated
CPR Device

The Honorable Mayor
and
Members of the City Council

Ladies and Gentlemen:

The Council is requested to consider authorizing a sole-source purchase from Stryker Medical of Chicago, Illinois for the purchase of one (1) Lucas automated CPR device package. If approved, the new automated CPR device and accompanying equipment will be placed on the Fire Command vehicle. The purchase of the CPR device allows us to enhance our responses to and provide treatment of cardiac arrest patients.

Stryker Medical has submitted a quote of \$20,684.75 for the automated CPR device package. Funds in the amount of \$20,685 are appropriated in the Fire Department’s Fiscal Year 2021 Capital Improvement Program for this purchase.

A resolution is attached for City Council’s consideration.

Respectfully submitted,

Mark C. Meyers
City Administrator

MCM/RG
Attachment

Administration/City Clerk (231) 798-4391	Assessing Division (231) 799-6806	Building Division (231) 799-6801	Finance/Treasurer (231) 799-6805	Fire Prevention (231) 799-6809	Fire Department (231) 798-2255
Parks/Recreation (231) 799-6802	Planning/Zoning (231) 799-6800	Police Department (231) 733-2691	Public Works (231) 799-6803	Streets Division (231) 798-2156	Water/Sewer (231) 799-6804

RESOLUTION

NOW, THEREFORE, BE IT RESOLVED, that the sole-source purchase of One (1) Automated CPR Device from Stryker Medical of Chicago, Illinois in the amount of \$20,684.75 is hereby authorized.

At a regular meeting of the City Council of the City of Norton Shores, held virtually, on the 21st day of July, 2020, the foregoing resolution was moved for adoption by Council Member .

The motion was supported by Council Member .

Ayes:

Nays:

Resolution declared .

Shelly Stibitz, City Clerk



Internal Memo

July 21, 2020

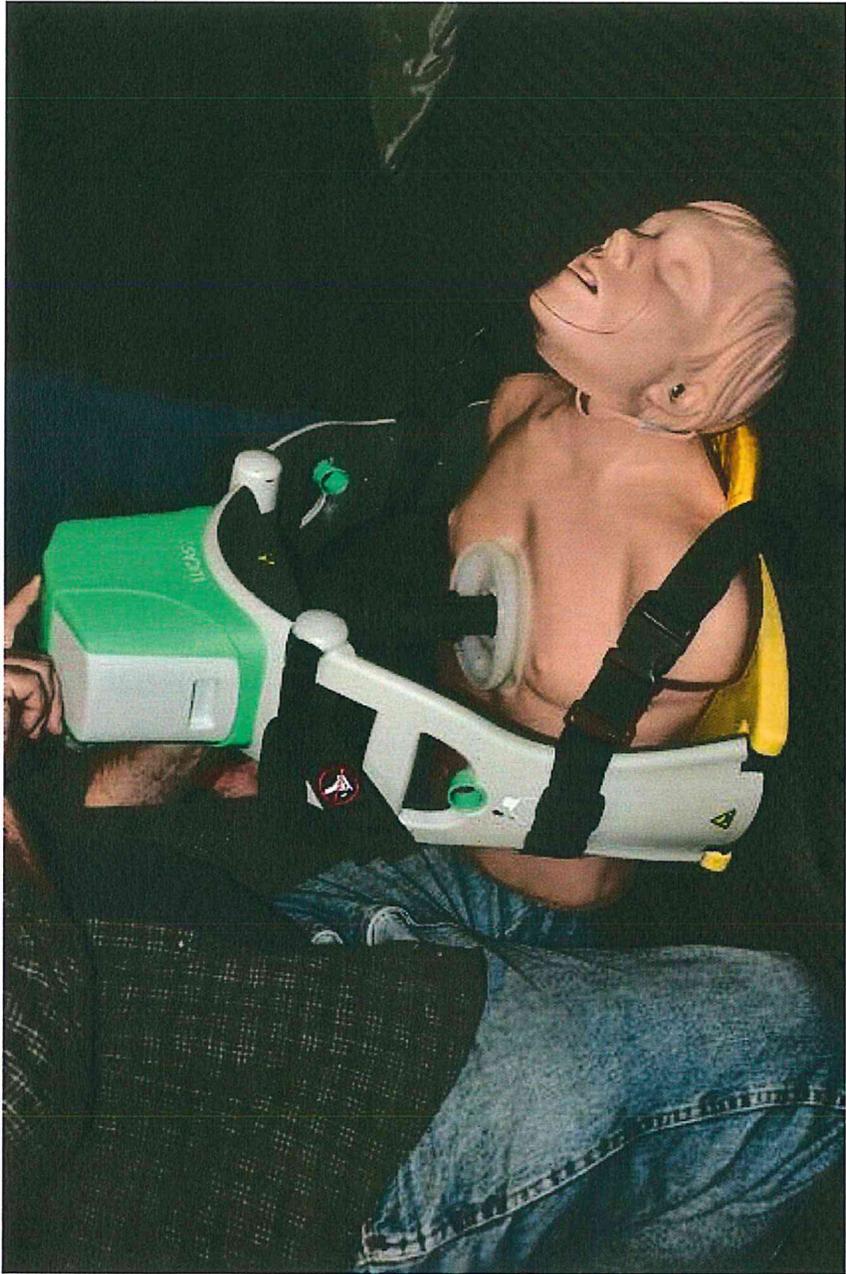
To: Mark Meyers, City Administrator
From: Robert Gagnon, Fire Chief
Subject: Sole Source Purchase Request-Automated CPR Device

The Fire Department would like to request City Council authorization for the sole source purchase of an Automated CPR Device. The American Heart Association recommends the use of automated CPR devices to assist with the successful resuscitation of patients in cardiac arrest. Although it does not replace the need for first responders to know CPR, it significantly aids in the process, providing consistently accurate chest compressions.

The fire department has done significant research on the various devices on the market. The Lucas, made by Stryker, is one of those devices. For the past several months, Stryker allowed use to use a demo unit as part of our responses to cardiac arrest. It has proven to be effective, reliable, and simple to use. The feedback from the staff with hands-on knowledge is overwhelmingly positive.

The Lucas is part of Stryker's sole source product line. The project, which includes the Lucas automated CPR device, batteries, chargers, power supplies, carry case, and 5-year extended warranty/4-year preventative maintenance plan was included in the FY 21 capital improvement plan in the amount of \$20,685. The price quote for the items we will be purchasing from Stryker comes to \$20,684.75. I have attached a copy of the quote to this memo along with the sole source letter, and request that Council consider a resolution awarding a sole source purchase to Stryker for the purchase of the Lucas automated CPR device.







LUCAS

Quote Number: 10127716
Version: 1
Prepared For: NORTON SHORES FIRE DEPT
Attn:

Remit to: P.O. Box 93308
Chicago, IL 60673-3308
Rep: Maegan Beveridge
Email: maegan.beveridge@stryker.com
Phone Number:

Quote Date: 01/31/2020
Expiration Date: 04/30/2020

Delivery Address		End User - Shipping - Billing		Bill To Account	
Name:	NORTON SHORES FIRE DEPT	Name:	NORTON SHORES FIRE DEPT	Name:	NORTON SHORES FIRE DEPT
Account #:	1327802	Account #:	1327802	Account #:	1327802
Address:	1100 E PONTALUNA RD NORTON SHORES Michigan 49444	Address:	1100 E PONTALUNA RD NORTON SHORES Michigan 49444	Address:	1100 E PONTALUNA RD NORTON SHORES Michigan 49444

Equipment Products:

#	Product	Description	Qty	Sell Price	Total
1.0	99576-000063	LUCAS 3, v3.1 Chest Compression System, Includes Hard Shell Case, Slim Back Plate, (2) Patient Straps, (1) Stabilization Strap, (2) Suction Cups, (1) Rechargeable Battery and Instructions for use With Each Device	1	\$13,761.50	\$13,761.50
2.0	11576-000060	LUCAS Desk-Top Battery Charger	1	\$1,049.75	\$1,049.75
3.0	11576-000071	LUCAS External Power Supply	1	\$332.35	\$332.35
4.0	11576-000080	LUCAS 3 Battery - Dark Grey - Rechargeable LiPo	1	\$641.75	\$641.75
5.0	11576-000046	LUCAS Disposable Suction Cup (3 pack)	1	\$125.80	\$125.80
Equipment Total:					\$15,911.15

ProCare Products:

#	Product	Description	Years	Qty	Sell Price	Total
6.1	78000020	On Site Prevent for LUCAS 3, v3.1 Chest Compression System, Includes Hard Shell Case, Slim Back Plate, (2) Patient Straps, (1) Stabilization Strap, (2) Suction Cups, (1) Rechargeable Battery and Instructions for use With Each Device	4	1	\$4,773.60	\$4,773.60
ProCare Total:						\$4,773.60

Price Totals:

Grand Total: \$20,684.75

Prices: In effect for 60 days.



LUCAS

Quote Number: 10127716
Version: 1
Prepared For: NORTON SHORES FIRE DEPT
Attn:

Remit to: P.O. Box 93308
Chicago, IL 60673-3308
Rep: Maegan Beveridge
Email: maegan.beveridge@stryker.com
Phone Number:

Quote Date: 01/31/2020
Expiration Date: 04/30/2020

Terms: Net 30 Days

Ask your Stryker Sales Rep about our flexible financing options.

AUTHORIZED CUSTOMER SIGNATURE

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-Stryker.

In the event of any conflict between Stryker Medical's Standard Terms and Conditions and any other terms and conditions, as may be included in any purchase order or purchase contract, Stryker's terms and conditions shall govern.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.