

# **TOWN OF DAVIE TOWN COUNCIL AGENDA REPORT**

**TO:** Mayor and Councilmembers

**FROM/PHONE:** Donald DiPetrillo, Fire Chief  
(954) 797-1213

**SUBJECT:** Resolution

**TITLE OF AGENDA ITEM:**

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, ACCEPTING THE BID TO PURCHASE TWO "M" SERIES ZOLL CARDIAC MONITOR/DEFIBRILLATOR/PACERS/NIBP, PULSE OX FROM ZOLL MEDICAL CORPORATION AS A PREFERRED PROVIDER.

**REPORT IN BRIEF:**

The purchase of these two items will upgrade cardiac monitors with newer M Series 12 Lead equipment as part of the department's five year plan to upgrade existing medical equipment. Purchasing of these items will provide Davie residents with the newest defibrillation's technology available (biphasic defibrillation).

While Zoll Medical Corporation is not the sole manufacturer of this new technology, the department's EMS system has developed utilizing Zoll components, and selections of another manufacturer would necessitate changing the entire system for uniformity (i.e. service contract, batteries, cables, paper etc.)

**PREVIOUS ACTIONS:** Town Council previously approved resolution R-2001-032 to purchase the same M Series Cardiac Monitor/Defibrillator from Zoll Medical Corporation.

**CONCURRENCES:** N/A

**FISCAL IMPACT:**

Has request been budgeted? yes

If yes, expected cost: \$35,804.00

Account Name: Capital Outlay Cardiac Equipment 030-3001-522-6802

If no, amount needed: \$

What account will funds be appropriated from:

Additional Comments:

**RECOMMENDATION(S):** Motion to approve resolution

**Attachment(s):**

- Resolution
- Department Memo
- Procurement Authorization
- Zoll Quote

RESOLUTION NO. \_\_\_\_\_

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, ACCEPTING THE BID TO PURCHASE TWO "M" SERIES ZOLL CARDIAC MONITOR/DEFIBRILLATOR/PACERS/NIBP, PULSE OX FROM ZOLL MEDICAL CORPORATION AS A PREFERRED PROVIDER.

WHEREAS, the Town is in need of two additional "M" Series Zoll Cardiac Monitor/Defibrillator/Pacers/NIBP, Pulse Ox to replace existing Zoll 1600 EKG Monitors; and

WHEREAS, the Town previously approved R-2001-032 to purchase said equipment from Zoll Medical Corporation; and

WHEREAS, the department is striving to standardized equipment; and

WHEREAS, Zoll Medical Corporation is the preferred provider; and

WHEREAS, after review, the Town Council wishes to accept the bid from Zoll Medical Corporation.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council hereby accepts the bid from Zoll Medical Corporation as a preferred provider, to purchase two Cardiac Monitor/Defibrillator/Pacers/NIBP, Pulse Ox in the amount of \$35,804.

SECTION 2. The Town Council hereby authorizes the expenditure from the Capital Outlay Cardiac Equipment Account.

SECTION 3. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED \_\_\_\_\_ DAY OF \_\_\_\_\_, 2001

\_\_\_\_\_  
MAYOR/COUNCILMEMBER

Attest:

\_\_\_\_\_  
TOWN CLERK

APPROVED THIS \_\_\_\_ DAY OF \_\_\_\_\_, 2001

# MEMORANDUM

## Town of Davie Fire Rescue Department

**TO:** Mayor and Town Council

**FROM:** Thomas J. Willi, Town Administrator

**VIA:** Donald DiPetrillo, Fire Chief

**BY:** Jose Rivero, EMS Operations Coordinator

**SUBJECT:** Zoll Cardiac Monitoring Equipment Purchase

**DATE:** May 22, 2001

When the Town of Davie instituted EMS operations in 1996, the department thoroughly researched and formally bid to purchase cardiac monitors and develop a system based on the Zoll medical equipment platform. Currently, all of our Cardiac/Defibrillator/Pacer monitors are Zoll. During the last five years of our experience with the Zoll Medical Corporation, we have found the product and service to be very reliable and beneficial to the department's operations.

The EMS Medical Director and staff are striving to: 1) improve continuity and consistency in patient care, 2) standardize equipment and replacement parts, 3) eliminate multiple maintenance contracts, 4) simplifying employee training, and 5) provide multifaceted devices to integrate new technology. Therefore, it is advantageous from the perspective of employee efficiency and cost effectiveness to continue to purchase associated equipment from vendors to which we have significantly invested prior resources. This plan of action will ultimately lead to improved patient care and cost savings to the Town.

Staff recommends the purchase of two "M" series Cardiac Monitor/Defibrillator/Pacers from Zoll Medical Corporation of Boston, Massachusetts.

# TOWN OF DAVIE PROCUREMENT AUTHORIZATION

<u>ACCOUNT NUMBER.</u>	<u>BUDGET ITEM &amp; DESCRIPTION</u>	<u>APPROXIMATE COST</u>
030-3001-522-6802	M-Series Manual/Advisory Defibrillator	\$35,804.00

METHOD OF PROCUREMENT (check the one that applies)

- Open Competitive Bidding
- Piggyback on Contract Number
- Sole Source
- Request For Proposals
- Other (preferred provider)

**SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED**

Signed \_\_\_\_\_  
Department Head

Have Funds been Reserved \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

Signed \_\_\_\_\_  
Town Administrator

	<u>BIDS SUBMITTED</u>	
<u>VENDOR</u>		<u>COST</u>
ZOLL Medical Corporation		\$35,804.00

Signed \_\_\_\_\_  
Procurement Manager

<u>TOWN ADMINISTRATOR'S RECOMMENDATION</u>	
<u>Vendor</u>	<u>Cost</u>

Signed \_\_\_\_\_  
Town Administrator

**ZOLL MEDICAL CORP.  
QUOTATION**

**TO: DAVIE FIRE**  
6905 ORANGE DRIVE  
DAVIE, FL 33314

Attn: **JOE RIVERO**

DATE: **APRIL 6, 2001**  
revised 04-07-01  
TERMS Net 30 Days

Fax: 954-797-1234

FOB: Burlington, MA

ITEM	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
1	41821511100123010 M SERIES MED-PRO PLUS BIPHASIC	Manual/Advisory Defibrillator with Rectilinear Biphasic Waveform, AC Power, Multiple Application Printer with Summary Report, Code Markers, SPO2 with reusable sensor and 4' cable, Noninvasive Pacing, NIBP with Adult-Plus cuff and hose and 12-Lead with 1-Step Cable Includes: High contrast display, 3 lead patient cable with integral lead wires, universal cable, 2 rechargeable lead acid batteries, ac mains power cord, 1 package of recorder paper, integral diagnostic frequency response, 2 PCMCIA card slots and one operators manual. Standard 1 Year EMS Warranty	2	\$23,685.00	\$20,132.00	\$40,264.00 *
2	8204-0103-01	Smart Battery in lieu of standard at time of purchase	4	\$50.00	\$50.00	\$200.00
3	8000-0657	Xtreme Pack II Carry Case, molded rubber case with rear and side pockets for use with hands-free defibrillation and NIBP	2	\$695.00	\$170.00	\$340.00 *
4	NPN	<b>**TRADE IN ALLOWANCE</b> Fujitsu System 12 **Trade-in Value valid if all units purchased are in good operational and cosmetic condition, and include all standard accessories such as paddles, cables, etc.  <b>*REFLECTS DISCOUNTED PRICING</b>	2	(\$2,500.00)	(\$2,500.00)	(\$5,000.00) **
<b>TOTAL</b>						<b>\$35,804.00</b>

WE PROPOSE TO FURNISH THE ITEMS LISTED ABOVE, SUBJECT TO CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF, AND THE WRITTEN ACCEPTANCE OF THIS QUOTATION.

1. DELIVERY WILL BE MADE 90-120 DAYS AFTER RECEIPT OF ACCEPTED PURCHASE ORDER.
2. PRICES WILL BE F.O.B. BURLINGTON, MA.
3. WARRANTY PERIOD (See above and reverse side).
4. PRICES QUOTED ARE FIRM FOR 60 DAYS

**BARBARA KENNEY/TS**  
**TERRITORY MANAGER**  
**800-242-9150X576**