



Board of Public Works and Safety

Agenda Item

Cover Sheet

MEETING DATE: September 10, 2024

- Consent Agenda Item
- New Item for Discussion
- Previously Discussed Item
- Miscellaneous

ITEM #: 1

INITIATED BY: Division Chief James Macky

- Information Attached
- Bring Paperwork from Previous Meeting
- Verbal
- No Paperwork at Time of Packets

**APPROVAL OF SPECIAL PURCHASE FOR STRYKER CARDIAC MONITORS FOR
NOBLESVILLE FIRE DEPARTMENT**

WHEREAS, in accordance with Ind. Code § 5-22-10, et. seq., the City of Noblesville (“City”) may make a purchase without soliciting bids or proposals under certain circumstances (“Special Purchase”);

WHEREAS, the City is seeking to purchase one (1) Stryker Cardiac Monitor and one (1) Lucas Compression Device for the Noblesville Fire Department as shown on the attached **Exhibit A**, incorporated herein;

WHEREAS, pursuant to Ind. Code § 5-22-10-8, a purchasing agent may make a Special Purchase when (1) the compatibility of equipment, accessories, or replacement parts is a substantial consideration in the purchase; and (2) only one (1) source meets the using agency's reasonable requirements;

WHEREAS, Stryker, the manufacturer of the Stryker Cardiac Monitor and Lucas Compression Device, is the sole provider of this brand of equipment and its specific capabilities, which capabilities are necessary to meet the Noblesville Fire Departments’ reasonable requirements to provide consistency with current equipment utilized throughout the Noblesville Fire Department.

WHEREAS, Stryker has been the provider of previous versions of cardiac monitors to the Noblesville Fire Department and has provided quality equipment and responsive customer service to the City.

WHEREAS, Stryker and the City have current preventative maintenance contracts that would service the new equipment.

WHEREAS, the Noblesville Fire Department currently has one (1) outdated and end of life cycle cardiac monitor and the need to transition to the new model of the cardiac monitor is imperative;

WHEREAS, the City now desires to purchase one (1) Stryker Cardiac Monitor and one (1) Lucas Compression Device in an amount totaling \$81,143.34 as shown by **Exhibit A**.

NOW, THEREFORE, be it resolved by the City of Noblesville Board of Public Works & Safety meeting in regular session as follows:

- Section 1. Based on representations from the Noblesville Fire Department, the Board understands that the Stryker Cardiac Monitor and Lucas Compression Device are the only devices capable of meeting the Noblesville Fire Department’s reasonable requirements.
- Section 2. The Board hereby approves the Special Purchase of one (1) Stryker Cardiac Monitor and one (1) Lucas Compression Device from Stryker, as further shown by **Exhibit A**, at a cost of \$81,143.34, attached hereto and incorporated herein.

Section 3. The Board hereby authorizes the Fire Chief to execute any and all documents necessary to effectuate the purchase.

Section 4. This Resolution shall be of full force and effect from and upon its adoption and in accordance with Indiana law.

SO RESOLVED, this ____ day of _____, 2024 by the City of Noblesville Board of Public Works & Safety.

JACK MARTIN, PRESIDENT

JOHN DITSLEAR, MEMBER

LAURIE DYER, MEMBER

ROBERT J. ELMER, MEMBER

RICK L. TAYLOR, MEMBER

ATTEST:

EVELYN L. LEES,
CLERK CITY OF NOBLESVILLE, INDIANA

Exhibit A



LP35 & CR2

Quote Number: 10973274

Remit to: Stryker Sales, LLC
21343 NETWORK PLACE
CHICAGO IL 60673-1213
USA

Version: 1

Prepared For: CITY OF NOBLESVILLE FIRE
Attn:

Rep: Mandy O'Grady
Email: amanda.ogrady@stryker.com
Phone Number:
Mobile: 317-709-0198

Quote Date: 08/20/2024

Expiration Date: 09/27/2024

Delivery Address		Sold To - Shipping		Bill To Account	
Name:	CITY OF NOBLESVILLE FIRE	Name:	CITY OF NOBLESVILLE FIRE	Name:	CITY OF NOBLESVILLE FIRE
Account #:	20127653	Account #:	20127653	Account #:	20127653
Address:	135 S 9TH ST	Address:	135 S 9TH ST	Address:	135 S 9TH ST
	NOBLESVILLE		NOBLESVILLE		NOBLESVILLE
	Indiana 46060-2620		Indiana 46060-2620		Indiana 46060-2620

Equipment Products:

#	Product	Description	U/M	Qty	Sell Price	Total
1.0	70335-000042	LP35,EN-US,MAS-SP/CO,MED-CO2,SUN-NIBP,12L,WIFI/CELL/LN/CPRIN,STD,BT	PCE	1	\$48,830.00	\$48,830.00
2.0	11335-000001	BATTERY, LI-ION, WITH IFU, LP35	PCE	1	\$700.00	\$700.00
3.0	11140-000102	CHARGER, BATTERY, LP35	PCE	1	\$2,100.00	\$2,100.00
4.0	11996-000519	LNCS-II rainbow DCI 8? SpCO, Adult Reusable Sensor	PCE	1	\$601.30	\$601.30
5.0	11996-000520	LNCS-II rainbow DCIP 8? SpCO, Pediatric Reusable Sensor	PCE	1	\$661.50	\$661.50
6.0	11111-000041	ASSY, CABLE, ECG, 15 LEAD, 3 WIRE PRECOR	PCE	1	\$84.00	\$84.00
7.0	11335-000008	KIT, STORAGE BAGS, LP35	PCE	1	\$420.00	\$420.00
8.0	11330-000026	ASSY, DOCKING STATION, LP35	PCE	1	\$2,240.00	\$2,240.00
9.0	11335-000005	KIT, PRINTER, LP35	PCE	1	\$2,100.00	\$2,100.00
10.0	11996-000091	Electrode EDGE QUIK-COMBO Adult	PCE	1	\$33.60	\$33.60
11.0	11996-000093	Electrode EDGE QUIK-COMBO pediatric RTS	PCE	1	\$40.60	\$40.60
12.0	11260-000073	KIT, SHOULDER STRAP, LP35	PCE	1	\$52.50	\$52.50
13.0	11150-000020	KIT, MODEM, NA, LP35	PCE	1	\$1,050.00	\$1,050.00
Equipment Total:						\$58,913.50



LP35 & CR2

Quote Number: 10973274

Remit to: Stryker Sales, LLC
21343 NETWORK PLACE
CHICAGO IL 60673-1213
USA

Version: 1
Prepared For: CITY OF NOBLESVILLE FIRE
Attn:

Rep: Mandy O'Grady
Email: amanda.ogrady@stryker.com
Phone Number:
Mobile: 317-709-0198

Quote Date: 08/20/2024
Expiration Date: 09/27/2024
Contract Start: 08/19/2024
Contract End: 08/18/2025

Trade In Credit:

Product	Description	Qty	Credit Ea.	Total Credit
TR-LP1K-LPCR2	TRADE-IN-STRYKER LIFEPAK 1000 TOWARDS PURCHASE OF LIFEPAK CR2	1	-\$400.00	-\$400.00

ProCare Products:

#	Product	Description	Qty	Sell Price	Total
14.1	LIFEPAK35-FLD-PRO	Lifepak35 for LP35,EN-US,MAS-SP/CO,MED-CO2,SUN-NIBP,12L,WIFI/CELL/LN/CPRIN,STD,BT 08/20/2024 - 08/19/2027 <small>Parts, Labor, Travel Maintenance Inspection Batteries Service</small>	1	\$4,449.75	\$4,449.75

ProCare Total: \$4,449.75

Price Totals:

Estimated Sales Tax (0.000%):	\$0.00
Freight/Shipping:	\$750.00
Grand Total:	\$63,713.25

Prices: In effect for 30 days

Terms: Net 30 Days



LP35 & CR2

Quote Number: 10973274

Remit to: Stryker Sales, LLC
21343 NETWORK PLACE
CHICAGO IL 60673-1213
USA

Version: 1

Prepared For: CITY OF NOBLESVILLE FIRE
Attn:

Rep: Mandy O'Grady
Email: amanda.ogrady@stryker.com
Phone Number:
Mobile: 317-709-0198

Quote Date: 08/20/2024

Expiration Date: 09/27/2024

Contract Start: 08/19/2024

Contract End: 08/18/2025

Terms and Conditions:

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. A copy of Stryker Medical's terms and conditions can be found at https://techweb.stryker.com/Terms_Conditions/index.html.

ENDING APPROVED

Purchase Order Form



Account Manager Mandy O'Grady
 Cell Phone 317-709-0198

Purchase Order Date 8/20/2024
 Expected Delivery Date _____
 Stryker Quote Number 10973274

BILL TO		CUSTOMER #20127653
Company Name	City of Noblesville Fire	
Contact or Department	James Macky	
Street Address	135 S 9th St.	
Add'l Address Line		
City, ST ZIP	Noblesville, IN. 46060	
Phone	317-770-1419	

SHIP TO		CUSTOMER #20127653
Company Name	City of Noblesville Fire	
Contact or Department	James Macky	
Street Address	135 S 9th St.	
Add'l Address Line		
City, ST ZIP	Noblesville, IN. 46060	
Phone	317-770-1419	

Authorized Customer Initials _____

Authorized Customer Initials _____

DESCRIPTION	QTY	TOTAL
Reference Quote: 10973274	1	\$63,713.25
TOTAL*		\$63,713.25

Accounts Payable Contact Information

Name: Cara Culp
 Email: nfdbilling@noblesville.in.us
 Phone: 317-776-6336

Authorized Customer Signature

Printed Name: _____
 Title: _____
 Signature: _____
 Date: _____

Attachment: Stryker Quote Number 10973274

Stryker Terms and Conditions
www.strykeremergencycare.com/terms

* Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services on the Stryker Quote



Quick Quote 7/17/2024 4:17 PM

Quote Number: 10956149

Remit to: Stryker Sales, LLC
21343 NETWORK PLACE
CHICAGO IL 60673-1213
USA

Version: 1

Prepared For: CITY OF NOBLESVILLE FIRE
Attn:

Rep: Mandy O'Grady
Email: amanda.ogrady@stryker.com
Phone Number:
Mobile: 317-709-0198

Quote Date: 07/18/2024

Expiration Date: **09/27/2024**

Delivery Address		Sold To - Shipping		Bill To Account	
Name:	CITY OF NOBLESVILLE FIRE	Name:	CITY OF NOBLESVILLE FIRE	Name:	CITY OF NOBLESVILLE FIRE
Account #:	20127653	Account #:	20127653	Account #:	20127653
Address:	135 S 9TH ST NOBLESVILLE Indiana 46060-2620	Address:	135 S 9TH ST NOBLESVILLE Indiana 46060-2620	Address:	135 S 9TH ST NOBLESVILLE Indiana 46060-2620

Equipment Products:

#	Product	Description	U/M	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	PCE	1	\$17,214.90	\$17,214.90
Equipment Total:						\$17,214.90

Price Totals:

Estimated Sales Tax (0.000%):	\$0.00
Freight/Shipping:	\$215.19
Grand Total:	\$17,430.09

Prices: In effect for 30 days

Terms: Net 30 Days



Quick Quote 7/17/2024 4:17 PM

Quote Number: 10956149

Remit to: Stryker Sales, LLC
21343 NETWORK PLACE
CHICAGO IL 60673-1213
USA

Version: 1

Prepared For: CITY OF NOBLESVILLE FIRE
Attn:

Rep: Mandy O'Grady
Email: amanda.ogrady@stryker.com
Phone Number:
Mobile: 317-709-0198

Quote Date: 07/18/2024

Expiration Date: 10/16/2024

Terms and Conditions:

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. A copy of Stryker Medical's terms and conditions can be found at https://techweb.stryker.com/Terms_Conditions/index.html.

Purchase Order Form



Account Manager Mandy O'Grady
 Cell Phone 317-709-0198

Purchase Order Date 8/20/2024
 Expected Delivery Date _____
 Stryker Quote Number 10956149

BILL TO		CUSTOMER #20127653
Company Name	City of Noblesville Fire	
Contact or Department	James Macky	
Street Address	135 S 9th St.	
Add'l Address Line		
City, ST ZIP	Noblesville, IN. 46060	
Phone	317-770-1419	

SHIP TO		CUSTOMER #20127653
Company Name	City of Noblesville Fire	
Contact or Department	James Macky	
Street Address	135 S 9th St.	
Add'l Address Line		
City, ST ZIP	Noblesville, IN. 46060	
Phone	317-770-1419	

Authorized Customer Initials _____

Authorized Customer Initials _____

DESCRIPTION	QTY	TOTAL
Reference Quote:10956149	1	\$17,430.09
TOTAL*		\$17,430.09

Accounts Payable Contact Information

Name: Cara Culp
 Email: nfdbilling@noblesville.in.us
 Phone: 317-776-6336

Authorized Customer Signature

Printed Name: _____
 Title: _____
 Signature: _____
 Date: _____

Attachment: **Stryker Quote Number 10956149**

Stryker Terms and Conditions
www.strykeremergencycare.com/terms

* Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services on the Stryker Quote