

THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



Contract Number

20-570

SAP Number

Arrowhead Regional Medical Center

Department Contract Representative	William L. Gilbert
Telephone Number	(909) 580-6150
Contractor	GE Healthcare
Contractor Representative	Andrea Tworek
Telephone Number	949-584-6698
Contract Term	
Original Contract Amount	\$70,065.00
Amendment Amount	
Total Contract Amount	\$70,065.00
Cost Center	8242

Briefly describe the general nature of the contract: Agreement with GE Healthcare for purchase of ultrasound equipment with accompanying accessories in the amount of \$70,065.

FOR COUNTY USE ONLY

Approved as to Legal Form



Charles Phan, County Counsel

Date 7/1/2020

Reviewed for Contract Compliance



Date

Reviewed/Approved by Department



William L. Gilbert, Director

Date 7/1/2020



GE Healthcare

June 19, 2020

Quote Number: **2005814770.2**

Customer ID: **1-23Q2XS**

Agreement Expiration Date: **6/18/2020**

County of San Bernardino on behalf of Arrowhead Regional Medical Center
400 N Pepper Ave
Colton, CA 92324-1801

This Agreement (as defined below) is by and between the Customer and the GE Healthcare business ("GE Healthcare"), each as identified below for the sale and purchase of the Products and/or Services identified in this Quotation, together with any applicable schedules referred to herein ("Quotation"). "Agreement" is this Quotation and either: (i) the Governing Agreement identified below; or (ii) if no Governing Agreement is identified, the GE Healthcare Terms and Conditions and Warranties that apply to the Products and/or Services identified in this Quotation. In the event of conflict, the Quotation supersedes.

GE Healthcare can withdraw this Quotation at any time before Customer: (i) signs and returns this Quotation or (ii) provides evidence of Quotation acceptance satisfactory to GE Healthcare ("Quotation Acceptance"). On Quotation Acceptance, this Agreement is the complete and final agreement of the parties relating to the Products and/or Services identified in this Quotation. There is no reliance on any terms other than those expressly stated or incorporated by reference in this Agreement and, except as permitted in this Agreement, no attempt to modify will be binding unless agreed to in writing by the parties. Modifications may result in additional fees and cannot be made without GE Healthcare's prior written consent.

Handwritten or electronic modifications on this Agreement (except an indication of the form of payment, Customer purchase order number and signatures on the signature blocks below) are void.

Governing Agreement:	Novation Vizient Supply LLC XR0431 - U/S
Terms of Delivery	FOB Destination
Billing Terms	80% delivery or Shipment / 20% Acceptance or Installation
Payment Terms	45 Net
Total Quote Net Selling Price	\$70,065.00
Sales and Use Tax Exemption	No Certificate on File

IMPORTANT CUSTOMER ACTIONS:

Please select your planned source of funds. Source of funds is assumed to be cash unless you choose another option. Once equipment has been shipped, source of funds changes cannot be allowed.

☐ Cash

☐ GE HFS Loan

☐ GE HFS Lease

☐ Other Financing Loan

☐ Other Financing Lease

Provide Finance Company Name _____

The parties have caused this Agreement to be executed by their authorized representative as of the last signature date below.

County of San Bernardino on behalf of Arrowhead
Regional Medical Center

Signature: _____

Print Name: **Curt Hagman**

Title: **Chairman, Board of Supervisors**

Date: **July 14, 2020**

GE Medical Systems, Ultrasound & Primary Care Diagnostics,
LLC, a GE Healthcare business

Signature: _____

Title: **Sales Specialist - WH Ultrasound**

Date: **June 29, 2020**

SIGNED AND CERTIFIED THAT A COPY OF
THIS DOCUMENT HAS BEEN DELIVERED
TO THE CHAIRMAN OF THE BOARD
LYNNA MONELL
Clerk of the Board of Supervisors
of the County of San Bernardino

By _____

Deputy



June 19, 2020
Quote Number: 2005814770.2
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To Accept This Quotation

Please sign and return this quotation together with your Purchase Order to:

Name: Andrea Tworek

Email: andrea.tworek@ge.com

Phone: 949-584-6698

Fax: 1-866-341-1901

Payment Instructions

Please **remit** payment for invoices associated with this quotation to:

**GE Medical Systems, Ultrasound & Primary Care
Diagnostics, LLC**

P.O. Box 74008831

Chicago, IL 60674-8831

FEIN: 92-0192942

County of San Bernardino on behalf of Arrowhead Regional Medical Center

Addresses:

Bill To: ARROWHEAD REGIONAL MEDICAL CENTER ARROWHEAD REGIONAL MED CTR, ACCOUNTS PAYABLE, 400 N PEPPER AVE, COLTON, CA, 92324-1801
Ship To: ARROWHEAD REGIONAL MEDICAL CENTER ARROWHEAD REGIONAL MED CTR, 400 N PEPPER AVE, COLTON, CA, 92324-1801 SAN BERNARDINO

To Accept This Quotation

- Please sign the quote and any included attachments (where requested).
- If requested, please indicate your form of payment.
- If you include a purchase order, please make sure it references the following information:
 - The correct Quote number and Version number above
 - The correct Remit To information as indicated in "**Payment Instructions**" above
 - Your correct SHIP TO and BILL TO site name and address
 - The correct Total Price as indicated above

Upon submission of a purchase order in response to this quotation, GE Healthcare requests the following to evidence agreement to contract terms: Signature page on quote filled out with signature and P.O. number **** OR**** Verbiage on the purchase order must state one of the following:

(i) Per the terms of Quotation # ____; (ii) Per the terms of GPO # ____; (iii) Per the terms of MPA# ____; or (iv) Per the terms of SAA # ____.

Include applicable quote/agreement number with the reference on the purchase order. In addition, Source of Funds (choice of Cash/Third Party Loan or GE HEF Lease Loan or Third Party Lease through ____), must be indicated, which may be done on the Quote Signature Page (for signed quotes), or the Purchase Order (where quotes are not signed) or via a separate written source of funds statement (if provided by GE Healthcare).

Quotation

Line	Qty.	Catalog	
1	1.00	H40292LP	Voluson S10 BT18 USA

Net Price
\$45,000.00

Combining decades of experience in women's health imaging with forward-thinking technologies, the Voluson* S10 BT18 offers both clinical excellence and true investment value. The Voluson* Core Architecture provides exceptional image quality and advanced capabilities across a wide range of applications helping you make critical clinical decisions with confidence and staying at the forefront of women's health imaging. System highlights: Ergonomic design with a 23-inch high-resolution flat panel color monitor, innovative user interface with high resolution 10.1-inch LED touch panel with Voluson* xTouch, multiple video outputs (HDMI, VGA, S-Video, and Composite), Auto TGC, 4 active transducer ports, gel holder, drawer and a horizontal endocavity transducer holder. Standard Features: Multiple image quality enhancement technologies, including: HD-Flow, Coded Excitation (CE), Harmonic Imaging (HI), CrossXBeam CRI, Focus Frequency Composite (FFC), and Advanced Speckle Reduction Imaging (SRI II). 3D/4D Expert tools including: HDlive*, Automatic 3D, RealTime 4D, Tomographic Ultrasound Imaging (TUI), Inversion Mode, 4D Biopsy, Rot/Trans/Slice Cine and 3D print export. Efficiency and innovative automation technologies: SonoRenderlive, Sonography-based Nuchal Translucency (SonoNT*)/ Sonography-based Intracranial Translucency (SonoIT), SonoBiometry, Sonography-based Volume Computer-Aided Display heart (SonoVCAD*heart), and B-Flow. Advanced display technologies including: Beta-View, Wide Sector, Virtual Convex, Extended Field of View (XTD), and HD Zoom. DICOM**, Raw Data, Scan Assistant, PDF Export, Report Editor, sleep mode, probe favorites, Auto Optimization, and Volume Cine are additional tools to optimize workflow and productivity. Comprehensive measurements and annotation package including user programmable preset parameters supporting Obstetrics, Gynecology, Abdomen, Small Parts, Cardiology, Urology, Vascular, Pediatric, and Neurology. Advanced security features including whitelisting and HD encryption. Remote support and service provided through InSite*. Includes one-year warranty and two days of on-site applications training. Training must be completed within six (6) months after product delivery, otherwise GE Healthcare's obligation to provide the training will expire without refund. Extended service packages can be purchased separately. Customer workflow permitting and abiding by SDMS criteria, sonographer install CE's may be provided during install training. Included as part of this purchase are 3 memberships to Voluson* Club, which includes access to videos and tip sheets - registration is required. Purchasable options: Advanced Volume Contrast Imaging (VCI) with OmniView; Anatomical M-mode; VOCAL II; Spatio-Temporal Image Correlation (STIC); Sonography-based Automated Volume Count (SonoAVC*); Sonography-based Labor & Delivery (SonoL&D*); battery pack; DVR software; and 4D View software license.*Trademark of General Electric Company**Third party trademarks are the property of their respective owners

Line	Qty.	Catalog	
2	1.00	H40462LA	C1-5-RS Convex Array Probe

Net Price
\$8,100.00

Wideband Convex Array Probe. Applications vary depending on the ultrasound system and may include Abdominal, OB/GYN, Urology, and Vascular. Datasheets for specific ultrasound systems contain additional details including specific applications, biopsy availability, and additional probe technical specifications.

Line	Qty.	Catalog	
3	1.00	H48691LP	RAB6-RS Ultra-light 4-8.5 MHz Real Time 4D Convex Transducer

Net Price
\$8,100.00

RAB6-RS PROBE
4D abdominal probe, ultra-light, 192 elements



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Line	Qty.	Catalog	
4	1.00	H48701EJ	RIC5-9A-RS Real Time 4D Microconvex Probe

Net Price
\$7,200.00

Wideband Real Time 4D Microconvex Array Intercavity Probe. Applications vary depending on the ultrasound system and may include OB/GYN and Urology. Datasheets for specific ultrasound systems contain additional details including specific applications, biopsy availability, and additional probe technical specifications.

Line	Qty.	Catalog	
5	1.00	H43192LH	Voluson BT18 Battery Pack, Late Point Configuration Center Only

Net Price
\$900.00

Voluson* BT18 Battery Pack, Late Point Configuration Center Only*Trademark of General Electric Company

Line	Qty.	Catalog	
6	1.00	H44972LB	BW Printer Kit

Net Price
\$765.00

Voluson* S10 Expert & S10 BT18 Black and white printer kit. Includes: B&W Printer (SONY, UP-D898), one roll Sony High Resolution High Gloss Paper (UPP-110HG) & BW Printer install kit
*Trademark of General Electric Company

Total Quote Net Selling Price **\$ 70,065.00**



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GPO Agreement Reference Information

Customer:	County of San Bernardino on behalf of Arrowhead Regional
Medical Center	
Contract Number:	Novation Vizient Supply LLC XR0431 - U/S
Billing Terms:	80% delivery or Shipment / 20% Acceptance or Installation
Payment Terms:	45 Net
Shipping Terms	FOB DESTINATION

Offer subject to the Terms and Conditions of the applicable Group Purchasing Agreements currently in effect between GE Healthcare and Novation Vizient Supply LLC XR0431 - U/S

This product offering is made per the terms and conditions of Vizient /GE Healthcare GPO Agreements as follows:

Imaging:

XR0391-MR, XR0311-Card./Vasc., XR0321-CT, XR0342-Mammo, XR0351-PET-CT, XR0362-Nuc Med, XR0380-R&F/RAD & CE0351 and ICAR-EP/HEMO

Ultrasound:

XR0431-Ultrasound

Vizient: Please login to the Vizient Marketplace Website. If you require assistance or are experiencing issues, please contact Vizient for support:
Email: Connect@VizientInc.com and Phone: 866-600-0618.