Bid Invitation # 770

H. Councill Trenholm State Community College (TSCC) will receive sealed bids in its Business Office until 10:00 a.m. September 14, 2018, for the items described in the bid invitation. Bids will be publicly opened and evaluated for the best value proposal as soon thereafter as practical. All bids received by TSCC are subject to approval of purchase by the Alabama Community College Board of Trustees.

Submit bid proposal to:

Bid Number 770: Respiratory Therapy Equipment - Part 3

Trenholm State Community College
Business Office
1225 Air Base Blvd.
Post Office Box 10048
Montgomery, Al. 36108

Page Contents

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   Disclosure Statement

All signed and notarized certificates and completed and signed forms and statements must be returned with bid. Alabama Law (Act 2001-955) requires us to have on file a Disclosure Statement from vendors for bids and contracts in excess of $5,000 during a year.
GENERAL CONDITIONS AND INSTRUCTIONS TO BIDDERS

In accordance with Act No. 2001-637, when state funds are used to fund a contract, preference must be given to resident contractors. Resident contractors must be granted preference to nonresidents in awarding contracts in the same manner as the states of nonresident contractors.

1. All bids are to be in sealed envelopes with the above bid number and opening date on the outside of the envelope. All forms should be completed and included in the sealed envelope. **Mark your bid to the attention of the Business Office.**

2. Only written modifications to proposals will be accepted.

3. If bids on multiple items are sought, bidders may submit proposals on any one or all items listed. However, Trenholm State Community College, (TSCC), reserves the right to select and purchase individual items or as a group. This bid does not obligate TSCC to purchase any item listed or for which a bid was submitted.

4. All bid prices are to be quoted F.O.B. Trenholm State Community College (TSCC). It should be noted that TSCC does not have a loading dock and items too heavy or bulky to be handled by one person manually should be placed on a truck with a lift-gate. This cost must be included into the bid.

5. All items are to be new **(unless otherwise stated in the bid specifications)**, free from defects in material and workmanship. If items are defective or damaged or do not meet the specifications, they are to be replaced immediately by the vendor at no additional cost to Trenholm State Community College.

6. The college reserves the right to accept or reject any bid or part thereof and waive informalities that may be deemed in the best interest of the College.

7. **References in the specifications to name brands are for identification only and in no way are intended to eliminate or discourage the offering of substitute items which equal the specifications. Trenholm State Community College reserves the right to modify, correct or clarify specifications during the bid process.**

8. Quantities listed on the specifications sheet are believed to be correct. However, Trenholm State Community College reserves the right to alter or vary the quantities.

9. No payments on partial shipments will be made until all items have been received in good condition.

10. Any and all damages caused to Trenholm State Community College by the successful bidder will be repaired promptly at no cost to Trenholm State Community College.

11. If quotations are offered on substitute items, the bidder must include catalogues/brochures with complete descriptions and manufacturers’ specifications. All substitute items must be clearly identified.

12. Guarantees/Warranties are to be furnished by the vendor as provided by the manufacturer.

13. All warranties must be clearly identified.
14. Trenholm is a State sponsored educational non-profit organization and as such is tax exempt. Bid prices are not to include tax. Tax exemption certificates furnished upon request.

15. No bid may be withdrawn after the scheduled closing time for receipt of bids for a period of thirty (30) days.

16. This proposal is to be made without connection with any other person, company, or parties making a bid or proposal and is to be in all respects fair and in good faith, without collusion or fraud.

17. The contractor must comply with all federal, state, and city laws regarding license fees and agreements.

18. Bidder must submit a completed and signed Disclosure Statement and W-9 Form, included in packet, with Bid.

19. All State of Alabama business entities must submit their E-verify MOU and Certification Statement prior to award.
BID CERTIFICATE

I hereby affirm I have not been in any agreement or collusion among bidders or in restraint of freedom of competition, by agreement to bid at a fixed price or to refrain from bidding, or otherwise.

______________________________
Firm or Company Name

______________________________
Address

______________________________
City, State and Zip Code

______________________________
Telephone Number

______________________________
Signatures of Company Representative

BID CERTIFICATE MUST BE NOTARIZED

Sworn and subscribed before me this the ___ day of _______________________, 20__________.

________________________________________
Notary Public

________________________________________
Date my commission expires
Nonresident Bidder Information

Act Number 2001-637 of the 2001 Alabama Legislature, which became effective on May 21, 2001, and is codified as Code of Alabama, Section 39-3-5, provides as follows:

Section 1: In the letting of public contracts in which any state, county or municipal funds are utilized, except those contracts funded in whole or in part with funds received from a federal agency, preferences shall be given to resident contractors, and a non-resident bidder domiciled in a state having laws granting preference to local contractors shall be awarded Alabama public contracts only on the same basis as the nonresident bidder's state awards contract to Alabama contractors bidding under similar circumstances; and resident contractors in Alabama, as defined in Section 39-2-12, be they corporate, individuals or partnerships, are to be granted preference over nonresidents in awarding of contracts in the same manner and to the same extent as provided by the laws of the state domicile of the nonresident.

Section 2: A summary of this law shall be made a part of the advertised specifications of all projects affected by this law.
ALABAMA LAW (SECTION 41-4-116, CODE OF ALABAMA 1975) PROVIDES THAT EVERY BID SUBMITTED AND CONTRACT EXECUTED SHALL CONTAIN A CERTIFICATION THAT THE VENDOR, CONTRACTOR, AND ALL OF ITS AFFILIATES THAT MAKE SALES FOR DELIVERY INTO ALABAMA OR LEASES FOR USE IN ALABAMA ARE REGISTERED, COLLECTING, AND REMITTING ALABAMA STATE AND LOCAL SALES, USE, AND / OR LEASE TAX ON ALL TAXABLE SALES AND LEASES INTO ALABAMA. **BY SUBMITTING THIS BID, THE BIDDER IS HEREBY CERTIFYING THAT THEY ARE IN FULL COMPLIANCE WITH ACT NO. 2006-557. THEY ARE NOT BARRED FROM BIDDING OR ENTERING INTO A CONTRACT PURSUANT TO 41-4-116, AND ACKNOWLEDGES THAT THE AWARDING AUTHORITY MAY DECLARE THE CONTRACT VOID IF THE CERTIFICATION IS FALSE.**

____________________________________________________________________
Firm or Company Name
____________________________________________________________________
Address
____________________________________________________________________
City, State and Zip Code
____________________________________________________________________
Telephone Number
____________________________________________________________________
Signatures of Company Representative

**CERTIFICATE MUST BE NOTARIZED**

Sworn and subscribed before me this the ____day of ____________________________, 20______.

________________________________________
Notary Public

________________________________________
Date my commission expires
For questions regarding the bid specifications, please contact Shalaunda Lee at (334) 420-4419 or slee@trenholmstate.edu.

Charges for postage/handling/delivery and set-up should be included in the bid price. *Items may be bid individually or in the aggregate. ALL ITEMS SHOULD BE BID AS NEW ITEMS.*

*See attached specifications.*

<table>
<thead>
<tr>
<th>POSSIBLE QUANTITIES</th>
<th>GENERAL DESCRIPTION OF EQUIPMENT</th>
<th>Unit Price</th>
<th>Total Bid Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gaumard HAL S1030 Adult Dynamic Airway &amp; Lung Compliance and Bedside Virtual HAL Monitor</td>
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</tr>
<tr>
<td>1</td>
<td>Puritan Bennett 980</td>
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<td></td>
</tr>
<tr>
<td>16</td>
<td>Storage Bins</td>
<td></td>
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</tr>
<tr>
<td>1</td>
<td>Eyesaline Wall Station</td>
<td></td>
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<tr>
<td>3</td>
<td>6 Drawer Rolling Storage Containers</td>
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<tr>
<td>2</td>
<td>Storage Rack</td>
<td></td>
<td></td>
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<tr>
<td>1</td>
<td>GLO GEL Handwashing Teaching Kit</td>
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<td></td>
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<td></td>
<td><strong>Total Bid</strong></td>
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</tr>
</tbody>
</table>
Gaumard HAL S1030 Adult Dynamic Airway and Lung Compliance and Bedside Virtual HAL Monitor

Product Features

- Articulating Adult HAL® full size body
- Available in 3 skin tones
- Use our scenarios, modify them or create your own
- Intubatable and programmable airway
- Programmable lung compliance
- Independently control right and left side airway resistances
- Use in conventional ventilation modes
- Capable of assisting the ventilator at variable respiratory rates
- Simulate life-threatening auto - PEEP and tension pneumothorax
- Exhales real and measurable CO2
- Assess CO2 output with end tidal detector or capnography
- Vary lung mechanics throughout your entire simulation exercise
- Receive real time feedback from real mechanical ventilator
- BVM, intubate or mechanically ventilate
- Program tongue edema, pharyngeal swelling and laryngospasm
- Practice intubation and management of anatomic and pathologic conditions
- Ten levels of static compliance, 15-50 ml/ cm H2O
- Independently controlled airway resistances
- Capable of assisting the ventilator at variable respiratory rates
- Capable of holding PEEP, 5-20 cm H2O
- CO2 exhalation
- Specify inspiratory time and rate, inspiratory/expiratory ratio
- Change lung resistance/compliance “on-the-fly” and see results on a real ventilator which are recorded on the laptop
- Pre-programmed airway and lung pathologies including:
  - Asthma
  - Chronic Bronchitis
  - CHF
  - Emphysema
  - Pneumothorax
- Set Inspiratory Effort Rate to trigger the ventilator
- Four anterior and four posterior lung sounds
- Use our pre-programmed pathologies or create your own
- Create scenarios using our proven, easy to use, HAL® software
- Connect our simulator to your REAL ventilator, which can be set by volume or pressure

Includes

- Laptop with 15 inch display
- Carrying case with rollers
- Instruction Manual

Other

- USB connections
- International power supply 100-240 VAC
Puritan Bennett 980

FEATURES

Intuitive and Highly Configurable Touch Screen

Graphs may be scaled and enlarged to full screen to improve visibility.

Using the pause button, you can pause the screen and review the last 60 seconds of patient data.

In situations where you may not be directly in front of the screen, or during teaching situations where there are several people in the room, the large-font screen can provide greater visibility to patient data.

Screen configurability

- Several configuration options enable you to see as little or as much information as you need.
- Patient data in the top banner may be configured to the patient need or to match your workflow document. Additional patient data can be accessed by scrolling right to left in the upper right corner. Patient data cells may be left blank to reduce the amount of visible patient data.

The touch screen also offers easy access to five graph and loop layout options.

Safety Features

Unique ventilation assurance feature

- In the event of certain system failures, the ventilator will continue to deliver ventilatory support as close to the preset settings as feasible. The ventilation assurance feature is unique to the ventilator and may help improve safety for ventilated patients in the event of certain system failures.

Stand-by mode

- Stand-by mode pauses ventilation and preserves settings when the patient is disconnected; auto-detects patient upon reconnection; and automatically resumes ventilation without the need to push additional buttons.

Status display

- There is an additional screen located on the breath delivery unit (BDU) that provides a redundant check of ventilator operation.

Hot swappable batteries

- The ventilator houses up to two batteries (up to four with a compressor installed).
- Batteries may be changed or swapped out without having to power down the ventilator and interrupt patient ventilation.
Expiratory filtration system

Ventilators are designed with custom exhalation filters to prevent infection and contamination. These custom filters have the following features, among others:

- Minimum of 99.97% filtration efficiency.
- Meets CDC requirement for N100 filtration equivalency.

Connectivity

Digital communication board

- The digital communication board provides multiple USB ports for connections to external drives and an HDMI output port that can be used to project the touch screen externally.

Connecting to EMR system

- The ventilator has several options for connecting to external data systems.

Patient Monitoring

Proximal flow sensor

- The proximal flow sensor measures flow, pressure, and tidal volume right at the patient wye in neonate applications.

Synchrony Tools

Advanced synchrony tools help clinicians set the ventilator to adapt to their patients' unique needs and help provide the appropriate level of support throughout the breath. Learn more about our unique synchrony tools.

PAV+™ Software

Helps patients to breathe more naturally† through some of the most innovative breath delivery technology. Our simple, safe, and smart design helps provide more natural ventilation that may help improve patient comfort.1 PHYSICAL CHARACTERISTICS Weight 113 lb (51.26 kg) including BDU, standard base, GUI and primary battery. BDU only: 69 lb (31.3 kg). Ventilator dimensions 12.5” width x 11.5” depth x 58” height (32 cm width x 30 cm depth x 148 cm height) (including GUI screen). Graphical user interface dimensions 15” (38.1 cm) screen, rotates 170° and tilts up to 45° from vertical. A-weighted sound pressure level, ventilator at a distance of one (1) meter, does not exceed 48 dBA at 5 L/min. Displayed units: Displayed weight units Kilograms (kg) or pounds (lb) — user selectable. Displayed length units Centimeters (cm) or inches (in) — user selectable. Pressure units Hectopascal (hPa) or centimeters of water (cmH2O) — user selectable.† Compared to conventional mechanical ventilation (VC, VC+, PC, PS).
# Handwashing and Storage Supplies

<table>
<thead>
<tr>
<th>Item: Storage Bins</th>
<th>Amount: 16</th>
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<tbody>
<tr>
<td>Item: Eyesaline Wall Station</td>
<td>Amount: 1</td>
</tr>
<tr>
<td>Item: 6-Drawer Rolling Storage Containers</td>
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<td>Item: GLO GEL Handwashing Teaching Kit</td>
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</tr>
</tbody>
</table>
State of Alabama
Disclosure Statement
(Required by Act 2001-955)

ENTITY COMPLETING FORM

ADDRESS

CITY, STATE, ZIP TELEPHONE NUMBER

STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS RESPONSIBLE FOR GRANT AWARD

ADDRESS

CITY, STATE, ZIP TELEPHONE NUMBER

This form is provided with:
_- Contract _ Proposal _ Request for Proposal _ Invitation to Bid _ Grant Proposal

If there are any changes to the information herein prior to the September 30 following completion of this disclosure statement, the entity completing the form agrees to update the information herein by completing a new form and notifying H. Councill Trenholm State Community College.

Have you or any of your partners, divisions, or any related business units previously performed work or provided goods to any State Agency/Department in the current or last fiscal year?
_ Yes  _ No

If yes, identify below the State Agency/Department that received the goods or services, the type(s) of goods or services previously provided, and the amount received for the provision of such goods or services.

<table>
<thead>
<tr>
<th>STATE AGENCY/DEPARTMENT</th>
<th>DATE GRANT AWARDED</th>
<th>AMOUNT OF GRANT</th>
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Have you or any of your partners, divisions, or any related business units previously applied and received any grants from any State Agency/Department in the current or last fiscal year?
_ Yes  _ No

If yes, identify the State Agency/Department that awarded the grant, the date such grant was awarded, and the amount of the grant.

<table>
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<th>STATE AGENCY/DEPARTMENT</th>
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OVER
1. List below the name(s) and address(es) of all public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

<table>
<thead>
<tr>
<th>NAME OF PUBLIC OFFICIAL/EMPLOYEE</th>
<th>ADDRESS</th>
<th>STATE DEPARTMENT/AGENCY</th>
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2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

<table>
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<tr>
<th>NAME OF FAMILY MEMBER</th>
<th>ADDRESS</th>
<th>NAME OF PUBLIC OFFICIAL/ PUBLIC EMPLOYEE</th>
<th>STATE DEPARTMENT/ AGENCY WHERE EMPLOYED</th>
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If you identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the public officials, public employees, and/or their family members as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Describe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the public official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

List below the name(s) and address(es) of all paid consultants and/or lobbyists utilized to obtain the contract, proposal, request for proposal, invitation to bid, or grant proposal:

<table>
<thead>
<tr>
<th>NAME OF PAID CONSULTANT/LOBBYIST</th>
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By signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and correct to the best of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed $10,000.00, is applied for knowingly providing incorrect or misleading information.

Signature

Date

Notary’s Signature

Date

Date Notary Expires

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of $5,000.