

**SOLE SOURCE INFORMATION FORM
TO ACCOMPANY LEGISLATION
(LIMIT YOUR RESPONSE TO THIS SHEET)**

1. Verification of sole source:
(why no other individual or business entity is capable of supplying the needed item)

(X) sole manufacturer/distributor

(X) sole company offering this unique service (manufacturer's warranty/product support)

() other:

2. Describe efforts to determine that the company was a sole source:

The Division of Fire Training Bureau currently uses the Laerdal SimMan computerized patient simulator for EMS training purposes. These simulators use lifelike manikins programmed to simulate a multitude of medical conditions, and are used to train emergency responders. The Training Bureau has standardized on the use of this Laerdal equipment, and Laerdal Medical Corporation is the sole source for the SimMan.

There is a need to purchase both additional patient simulators and repair/replacement parts. By purchasing the additional simulators and parts from Laerdal Medical, the Training Bureau can continue utilizing the hundreds of scenarios already written with Laerdal software, without the need to learn a new operating interface on another manufacturer's simulator, and thus provide product continuity. Training endeavors would be augmented by employing like equipment utilizing existing scenarios already employed with the current simulator.

3. Describe any effort to bid for alternate item (service or product) that is not provided by a sole source that would meet this need:

Laerdal Medical Corporation is the only company that can provide this product, and maintain and provide service on their software. If another computerized patient simulator system is purchased, other than Laerdal's SimMan system, then CFD would be required to completely change out the existing patient simulators in use, and/or pay for an expensive integration of another new product, while also being required to learn a new operating interface on another manufacturer's simulator equipment.

4. Indicate how the price or fee structure was determined:

See attached Quote #1-3MG8SB

Approved By: _____ Date: _____
Procurement Manager