



# CITY OF HOLLYWOOD, FLORIDA

## PROCUREMENT SERVICES DIVISION

### Piggybacking Request Form

(Use for purchase(s) over \$15,000, when piggybacking off other contracts)

Date 08/30/2016

Department/Office Fire

Division/Area Admin

Contact Person Lisa Blouin

Title Business and Compliance  
Manager

Phone 9549674248

Email lblouin@hollywoodfl.org

2016 SEP -8 AM 8: 26  
CITY OF HOLLYWOOD  
PROCUREMENT SERVICES  
DIVISION

1. Requested Vendor Physio Control

Vendor Number 30172

Address 11811 Willows Road NE, P.O. Box 97006 Redmond, WA 98073-9706 USA

Contact Person Cay Rule

Title Sales Consultant, SE Florida

Phone 321.663.9255

Email Cay.Rule@physio-control.com

2. Contract title requesting to piggyback? GSA V797D-30038

Awarding Agency GSA

Contract Expiration Date 12/5/2017

Copy of Contract and Awarding Agency documentation is attached.

Yes  No

3. Product/Service being requested (be specific). Lucas 2 Chest Compression System

4. Detailed description of the products/services function and purpose. Justification Summary

Mechanical C.P.R. Devices will allow us to provide the best care possible along with providing the best possible outcome to patients suffering from acute Myocardial infarction or cardiac arrest. Mechanical C.P.R. devices

*Procurement Service Division use only*

Requisition # R 242580  
(As Applicable)

Purchase Order # P 220887  
(As Applicable)

Blanket Purchase Order # BPO \_\_\_\_\_  
(As Applicable)

have been around for several years and advancements in their technology continue to improve effectiveness and are saving more lives compared to manual C.P.R. The transfer from manual to mechanical C.P.R. was much smoother and shorter by several seconds thereby decreasing the delay in resuming compressions. Strong radial pulses were noted almost immediately upon starting the device which can be rare to find. These units are effective at maintaining sufficient coronary perfusion pressure during cardiac arrest which improves the likelihood of return of spontaneous circulation (ROSC). This equipment can greatly enhance the provision of pre-hospital emergency medical treatment for our patients and the safety of our personnel, not just today, but for decades to come. In addition, due to Hollywood's geographic location, funding this project will provide enhanced pre-hospital ems capabilities for millions of people who travel through our City each year. In addition, the City has a high population of seniors living on our barrier island which is connected to the mainland through two bridges. When the bridges are up, there is a significant delay in transporting patients to the hospital on the mainland. The same is true due to the FCC Railroad that runs through our City. These delays require additional minutes of manual CPR. Without this equipment, nearly 16,000 patients annually will be transported with less than optimal pre-hospital ems services being available. This will result in a low percentage, currently 13.5% of Asystole rythm patients who have a positive return of spontaneous circulation.

5. Please explain what process the Department/Office took to verify and/or identify this contract. Reviewed the Disaster Preparedness Awards listed in the GSA Contract System

6. Were alternative contracts evaluated to determine that the City is obtaining the most advantageous contract pricing for the required product/service?

Yes  No

Please explain Original Contract quoted by vendor was higher so the Department was able to purchase 1 additional unit with the lower GSA price which was honored by the vendor.

7. Total cost of the requested product/service. 59,997.66

8. Total estimated annual (fiscal year) cost of requested product/service 59,997.66

Account Number(s) 11.2100.55318.522.006453  
11.2100.55318.522.016453

9. Is this product/service covered by a warranty?  Yes  No

If yes, please attach a copy of the warranty details.

10. Would this purchase(s) result in the potential of future purchases for related products/services being restricted to a particular vendor or create a specific vendor as sole source provider for related items?

Yes  No

If yes, please describe the related products/services and estimated cost(s.) replacement of component parts would be limited to the vendor who is the sole source of the parts

11. Would this purchase(s) result in any future maintenance costs which are not included in the initial purchase?

Yes  No

If yes, please attach a draft maintenance plan which includes cost estimates and funding source(s.)  
\_\_\_\_\_

*Procurement Service Division use only*

Requisition # R 242580  
(As Applicable)

Purchase Order # P 220887  
(As Applicable)

Blanket Purchase Oder # BPO \_\_\_\_\_  
(As Applicable)



12. Is this a grant related purchase?  Yes  No

If yes, please provide details (timeline, expiration dates, milestones, special procurement requirements, etc.) Grant ID M4245 was awarded from the Florida Department of health and authorized via R-2016-054. Grant began 5/27/2016 and ends 7/1/2017 with reports due 11/2016, 03/17 and 07/17

Will this require matching funds?  Yes  No

What is the grant source? Special Program Funds

What is the grant (dollar) amount? \$60,000

13. Please complete an advanced search of the vendor recommended for award on the Federal Government's Systems for Award Management at [www.sam.gov](http://www.sam.gov).

Date of Advanced Search 8/9/2016

Company Name(s) Searched  
Physio

Search Results  
N/A

Physio-Control

V797D-30038

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REQUESTING DEPARTMENT RECOMMENDATION**

**Note: By signing and returning this form, you are verifying and acknowledging that you have reviewed all portions (scope, terms, conditions, pricing, etc.) of the requested contract and recommend its approval based on the contract complying with the City of Hollywood's scope and pricing requirements and to the best of you knowledge the contract does not violate any applicable policy, statute, governing rule or regulation.**

*Eric M. Busenbender*  
Contact Person's Signature

8/30/2016  
Date

*[Signature]*  
Supervisor's Signature

9.7.16  
Date

*Eric Busenbender*  
Director's Signature

9/7/16  
Date

APPROVAL (Procurement Service Division Use Only)			
Verified By:	<u>JS</u>	Date	<u>9/20/16</u>
Approved By:	<u>[Signature]</u>	Date	<u>9/20/2016</u>

*Procurement Service Division use only*

Requisition # R 242580  
(As Applicable)

Purchase Order # P 220887  
(As Applicable)

Blanket Purchase Order # BPO \_\_\_\_\_  
(As Applicable)



**Physio-Control, Inc**  
 11811 Willows Road NE  
 P.O. Box 97006  
 Redmond, WA 98073-9706 U.S.A.  
 www.physio-control.com  
 tel 800.442.1142  
 fax 800.732.0956

To EMS Division Chief Chris Del Campo  
 Hollywood Fire Rescue  
 3400 56th Ave  
 HOLLYWOOD, FL 33021  
 9549674248  
[cdelcampo@hollywoodfl.org](mailto:cdelcampo@hollywoodfl.org)

Quote Number 00049112  
 Revision # 1  
 Created Date 8/10/2016  
 Sales Consultant Catherine Rule  
 FOB Destination  
 Terms All quotes subject to credit approval and the following terms and conditions  
 NET Terms NET 30

Contract FSS Contract V797D-30038  
 Promotion (RPLCSSVC) – LUCAS Svc Discount

Expiration Date 10/21/2016

Product	Product Description	Quantity	List Price	Unit Discount	Unit Sales Price	Total Price
99576-000024	LUCAS 2.2 Chest Compression System INCLUDES BASE UNIT WITH BACK PLATE, CARRYING BAG, TWO (2) PATIENT STRAPS, STABILIZATION STRAP, 3 SUCTION CUPS, 1 RECHARGEABLE BATTERY, AND INSTRUCTIONS FOR USE WITH EACH DEVICE.	4.00	15,220.00	-3,565.73	11,654.27	46,617.08
11576-000060	LUCAS 2 Stand-alone Battery Charger	4.00	1,128.40	-185.06	943.34	3,773.37
11576-000039	LUCAS 2 Battery - Rechargeable Lithium Polymer (LiPo)	8.00	712.40	-116.12	596.28	4,770.23
11576-000053	Back Plate Grip Tape (3 pack)	2.00	111.30	-17.81	93.49	186.98
LUCAS-OSCOMP-1	LUCAS Service - 1 YEAR. On-site Comprehensive Coverage.	4.00	1,550.00	-387.50	1,162.50	4,650.00
50999-000117	Zone1: (1 to 25Mi) or (1 to 40Km)	1.00	0.00	0.00	0.00	0.00

Subtotal USD 59,997.66  
 Estimated Tax USD 0.00  
 Estimated Shipping & Handling USD 0.00

Grand Total USD 59,997.66

**Pricing Summary Totals**  
 List Price Total USD 77,515.40  
 Total Contract Discounts Amount USD -14,262.92  
 Total Discount USD -3,254.82  
 Trade In Discounts USD 0.00  
 Tax + S&H USD 0.00



GRAND TOTAL FOR THIS QUOTE

USD 59,997.66

PHYSIO-CONTROL, INC. REQUIRES WRITTEN VERIFICATION OF THIS ORDER. A PURCHASE ORDER IS REQUIRED ON ALL ORDERS \$5,000 OR GREATER BEFORE APPLICABLE FREIGHT AND TAXES. THE UNDERSIGNED IS AUTHORIZED TO ACCEPT THIS ORDER IN ACCORDANCE WITH THE TERMS AND PRICES DENOTED HEREIN.

CUSTOMER APPROVAL (AUTHORIZED SIGNATURE)

NAME

TITLE

DATE

Reference Number BV/78568

**General Terms for all Products, Services and Subscriptions.**

Physio-Control, Inc. ("Physio") accepts Buyer's order expressly conditioned on Buyer's assent to the terms set forth in this document. Buyer's order and acceptance of any portion of the goods, services or subscriptions shall confirm Buyer's acceptance of these terms. Unless specified otherwise herein, these terms constitute the complete agreement between the parties. Amendments to this document shall be in writing and no prior or subsequent acceptance by Seller of any purchase order, acknowledgment, or other document from Buyer specifying different and/or additional terms shall be effective unless signed by both parties.

**Pricing.** Prices do not include freight insurance, freight forwarding fees, taxes, duties, import or export permit fees, or any other similar charge of any kind applicable to the goods and services. Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services unless Physio receives a copy of a valid exemption certificate prior to delivery. Discounts may not be combined with other special terms, discounts, and/or promotions.

**Payment.** Payment for goods and services shall be subject to approval of credit by Physio. Unless otherwise specified by Physio in writing, the entire payment of an invoice is due thirty (30) days after the invoice date for deliveries in the USA, and sight draft or acceptable (confirmed) irrevocable letter of credit is required for sales outside the USA.

**Minimum Order Quantity.** Physio reserves the right to charge a service fee for any order less than \$200.00.

**Patent Indemnity.** Physio shall indemnify Buyer and hold it harmless from and against all demands, claims, damages, losses, and expenses, arising out of or resulting, from any action by a third party against Buyer that is based on any claim that the services infringe a United States patent, copyright, or trademark, or violate a trade secret or any other proprietary right of any person or entity. Physio's indemnification obligations hereunder will be subject to (i) receiving prompt written notice of the existence of any claim; (ii) being able to, at its option, control the defense and settlement of such claim (provided that, without obtaining the prior written consent of Buyer, Physio will enter into no settlement involving the admission of wrongdoing); and (iii) receiving full cooperation of Buyer in the defense of any claim.

**Limitation of Interest.** Through the purchase of Physio products, services, or subscriptions, Buyer does not acquire any interest in any tooling, drawings, design information, computer programming, patents or copyrighted or confidential information related to said products or services, and Buyer expressly agrees not to reverse engineer or decompile such products or related software and information.

**Delays.** Physio will not be liable for any loss or damage of any kind due to its failure to perform or delays in its performance resulting from an event beyond its reasonable control, including but not limited to, acts of God, labor disputes, the requirements of any governmental authority, war, civil unrest, terrorist acts, delays in manufacture, obtaining any required license or permit, and Physio's inability to obtain goods from its usual sources.

**Limited Warranty.** Physio warrants its products and services in accordance with the terms of the limited warranties located at <http://www.physio-control.com/Documents/>. The remedies provided under such warranties shall be Buyer's sole and exclusive remedies. Physio makes no other warranties, express or implied, including, without limitation, **NO WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND IN NO EVENT SHALL PHYSIO BE LIABLE FOR INCIDENTAL, CONSEQUENTIAL, SPECIAL OR OTHER DAMAGES.**

**Compliance with Confidentiality Laws.** Both parties acknowledge their respective obligations to maintain the security and confidentiality of individually identifiable health information and agree to comply with applicable federal and state health information confidentiality laws.

**Compliance with Law.** The parties agree to comply with any and all laws, rules, regulations, licensing requirements or standards that are now or hereafter promulgated by any local, state, and federal governmental authority/agency or accrediting/administrative body that governs or applies to their respective duties and obligations hereunder.

**Regulatory Requirement for Access to Information.** In the event 42 USC § 1395x(v)(1)(I) is applicable, Physio shall make available to the Secretary of the United States Department of Health and Human Services, the Comptroller General of the United States General Accounting Office, or any of their duly authorized representatives, a copy of these terms, such books, documents and records as are necessary to certify the nature and extent of the costs of the products and services provided by Physio.

**No Debarment.** Physio represents and warrants that it and its directors, officers, and employees (i) are not excluded, debarred, or otherwise ineligible to participate in the Federal health care programs as defined in 42 USC § 1320a-7b(f); (ii) have not been convicted of a criminal offense related to the provision of healthcare items or services; and (iii) are not under investigation which may result in Physio being excluded from participation in such programs.

**Choice of Law.** The rights and obligations of Physio and Buyer related to the purchase and sale of products and services described in this document shall be governed by the laws of the state where Buyer is located. All costs and expenses incurred by the prevailing party related to enforcement of its rights under this document, including reasonable attorney's fees, shall be reimbursed by the other party.

**Additional Terms for Purchase and Sale of Products.**

In addition to the General Terms above, the following terms apply to all purchases of products from Physio:

**Delivery.** Unless otherwise specified by Physio in writing, delivery shall be FOB Physio point of shipment and title and risk of loss shall pass to Buyer at that point. Partial deliveries may be made and partial invoices shall be permitted and shall become due in accordance with the payment terms. In the absence of shipping instructions from Buyer, Physio will obtain transportation on Buyer's behalf and for Buyer's account. Delivery dates are approximate. Freight is pre-paid and added to Buyer's invoice. Products are subject to availability.

**Inspections and Returns.** Within 30 days of receipt of a shipment, Buyer shall notify Physio of any claim for product damage or nonconformity. Physio, at its sole option and discretion, may repair or replace a product to bring it into conformity. Return of any product shall be governed by the Returned Product Policy located at <http://www.physio-control.com/Documents/>. Payment of Physio's invoice is not contingent on immediate correction of nonconformities.

**No Resale.** Buyer agrees that products purchased hereunder will not be resold to third parties and will not be reshipped to any persons or places prohibited by the laws of the United States of America.

Quote Number: 00049112

**Additional Terms for Purchase and Sale of Service Plans.**

In addition to the General Terms above, the following terms apply to all Physio Service Plans.

**Service Plans.** Physio shall provide services according to the applicable Service Plan purchased and for the devices specified at <http://www.physio-control.com/ServicePrograms.aspx> for the length of the subscription purchased and for the devices specified as covered by the Service Plan ("Covered Equipment").

**Pricing.** If the number or configuration of Covered Equipment changes during the Service Plan subscription, pricing shall be pro-rated accordingly. For Preventative Maintenance, Inspection Only, Comprehensive, and Repair & Inspect Service Plans, Buyer is responsible to pay for preventative maintenance and inspections that have been performed since the last anniversary of the subscription start date and such services shall not be pro-rated.

**Device Inspection Before Acceptance.** All devices that are not covered under Physio's Limited Warranty or a current Service Plan must be inspected and repaired (if necessary) to meet specifications at then-current list prices prior to being covered under a Service Plan.

**Unavailability of Covered Equipment.** If Covered Equipment is not made available at a scheduled service visit, Buyer is responsible to reschedule with the Physio Service Technician, or ship-in the Equipment to a Physio service depot. Physio reserves the right to charge Buyer a surcharge for a return visit. Surcharges will be based on then-current Physio list price of desired services, less 10% for labor and 15% for parts, plus applicable travel costs. The return visit surcharge will be in addition to the subscription price of the Service Plan. To avoid the surcharge, Buyer may ship devices to a Physio service depot. Buyer shall be responsible for round-trip freight for ship-in service.

**Unscheduled or Uncovered Services.** If Buyer requests services to be performed on Covered Equipment which are not covered by a Service Plan, or are outside of designated Services frequency or hours, Physio-Control will charge Buyer for such services at 10% off Physio-Control's standard rates (including overtime, if appropriate) and applicable travel charges. Repair parts required for such repairs will be made available at 15% off the then-current list price.

**Loaners.** If Covered Equipment must be removed from service to complete repairs, Physio will provide Buyer with a loaner device, if one is available. Buyer assumes complete responsibility for the loaner and shall return the loaner to Physio in the same condition as received, normal wear and tear exempted, upon the earlier of the return of the removed Covered Equipment or Physio's request.

**Cancellation.** Buyer may cancel a Service Plan upon sixty (60) days' written notice to Physio. In the event of such cancellation, Buyer shall be responsible for the portion of the designated price which corresponds to the portion of the Service Plan subscription prior to the effective date of termination and the list-price cost of any preventative maintenance, inspections, or repairs rendered after the last anniversary date of the subscription start date.

**No Solicitation.** During the Service Plan subscription and for one (1) year following its expiration Buyer agrees to not to actively and intentionally solicit anyone who is employed by Physio to provide services such as those described in the Service Plan.

**Lisa Blouin**

---

**From:** Yolanda Maldonado-Juriga  
**Sent:** Tuesday, July 19, 2016 11:20 AM  
**To:** Lisa Blouin  
**Cc:** Eric Busenbarrick; Christopher Pratt  
**Subject:** Set up of grant expenditure account.

Good Morning **Lisa**,

FYI - The expenditure accounts that were established are as follows:

11.2100.55318.522.006453 Equipment (Grant) - \$45,000  
11.2100.55318.522.016453 Equipment (Match) - \$15,000

The information **has** been sent to budget for their setup.

Yolanda Maldonado-Juriga, MBA

Senior Accountant  
Financial Services Department

City of Hollywood  
2600 Hollywood Boulevard, Rm 119  
Hollywood, FL 33022-9045

(W) 954-921-3228  
(F) 954-921-3064  
[yjuriga@hollywoodfl.org](mailto:yjuriga@hollywoodfl.org)



# HOLLYWOOD FIRE RESCUE & BEACH SAFETY

## INTER-OFFICE MEMORANDUM

**DATE:** August 15, 2016

**FILE:** FR16-43

**TO:** Dr. Wazir Ishmael  
City Manager

**FROM:** Eric Busenbarrick  
Fire Chief

**SUBJECT:** Emergency Medical Services Matching Grant  
Revised Quantity of Chest Compression Systems

---

**ISSUE:**

Acceptance of a portion of the EMS Grant Award

**EXPLANATION:**

The Fire Rescue and Beach Safety Department applied for the Florida Emergency Medical Services Matching Grant in March of 2016, Resolution No. R-2016-054. We applied for seven (7) chest compression systems for each of our Advanced Life Support Rescues. The grant included a match portion of \$25,850.00 of the total grant request of \$103,400.00. The Department was successful in obtaining a partial grant award.

The Florida Department of Health has notified us that they have awarded us \$45,000.00 with the City's match portion being \$15,000.00. FR16-029 approved acceptance of the partial grant award to purchase three (3) of the seven (7) chest compression systems. During the procurement process the Department found it could receive a better price if it piggybacked on the FSS/GSA Contract #V797-30038 versus the NASPO Contract #SW300 V2 (vendor quoted). This reduced price, honored by the vendor, allows us to purchase four (4) units with grant funds.

**RECOMMENDATION:**

I recommend the purchase of (4) chest compression systems versus three (3) chest compression to be placed on four (4) of our ALS rescues. This will provide enhanced pre-hospital emergency medical services throughout the City of Hollywood.

C: Assistant City Manager, Public Safety

Approve     Disapprove

By: \_\_\_\_\_  
City Manager

**Exhibit 1  
Budget Transfer**

**General Fund (01)**

**Transfer From:**

Description	Account Number	Amount
Contingency	01.1295.00000.519.005901	25,850.00
<b>TOTAL</b>		<b>25,850.00</b>

**Transfer To:**

Description	Account Number	Amount
Transfer to Special Programs Fund	01.1291.00000.581.009175	25,850.00
<b>TOTAL</b>		<b>25,850.00</b>

NOTE: This transfer will move the required matching funds from the General Fund (01) Contingency account to an account used to transfer funding to the Special Programs Fund (11) for the purchase of the seven (7) emergency chest compression systems.

**Budget Amendment**

**Special Programs Fund (11)**

**Revenues:**

Description	Account Number	Amount
Grant proceeds - 2016 EMS Grant	To Be Established	103,400.00
Transfer from General Fund	11.2100.00000.381.00320	25,850.00
<b>TOTAL</b>		<b>129,250.00</b>

**Expenses:**

Description	Account Number	Amount
Equipment - 2016 EMS Grant	To Be Established	129,250.00
<b>TOTAL</b>		<b>129,250.00</b>

NOTE: This recognizes the proceeds of a grant award from the Florida Department of Health 2016 EMS Matching Grant Program, if awarded, in the approximate amount of \$103,400 to be used in the purchase of seven (7) emergency chest compression systems as well as funding transferred from the General Fund, in an amount not to exceed \$25,850, as the required City's cash match.


# HOLLYWOOD FIRE RESCUE & BEACH SAFETY

## INTER-OFFICE MEMORANDUM

DATE June 27, 2016

FILE: FR16-029

TO: Dr. Wazir Ishmael  
City Manager

FROM:   
Eric Busenbarrick  
Fire Chief

SUBJECT: Emergency Medical Services Matching Grant

---

### ISSUE:

Acceptance of a portion of the EMS Grant Award

### EXPLANATION:

The Fire Rescue and Beach Safety Department applied for the Florida Emergency Medical Services Matching Grant in March of 2016, Resolution No. R-2016-054. We applied for seven (7) chest compression systems for each of our Advanced Life Support Rescues. The grant included a match portion of \$25,850.00 of the total grant request of \$103,400.00. The Department was successful in obtaining a partial grant award.

The Florida Department of Health has notified us that they have awarded us \$45,000.00 with the City's match portion being \$15,000.00. This allows us to purchase three (3) of the seven (7) chest compression systems. Our portion will be paid from an account to be established by the Department of Financial Services. Per section 7 of R-2016-054, the City Manager must authorize acceptance of the grant award.

### RECOMMENDATION:

I recommend acceptance of the partial grant award. The Department will place the chest compression units on three (3) of our ALS rescues. This will provide enhanced pre-hospital emergency medical services.

c: Assistant City Manager, Public Safety

Approve     Disapprove

By: \_\_\_\_\_  
City Manager



**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Rick Scott**  
Governor

**Celeste Philip, MD, MPH**  
Surgeon General and Secretary

**Vision:** To be the Healthiest State in the Nation

May 27, 2016

Eric Busenbarrick  
Hollywood Department of Fire Rescue and Beach Safety  
2741 Stirling Road  
Hollywood, Florida 33312

Dear Mr. Busenbarrick:

The Department of Health is pleased to award an Emergency Medical Services (EMS) Matching Grant, ID Code M4245, in the amount of \$45,000.00, to Hollywood Department of Fire Rescue and Beach Safety. This grant program is funded through the Florida Department of Health, EMS Trust Fund. There are no federal funds involved. The purpose of this grant is to improve and expand EMS by assisting your organization in the purchase of three mechanical chest compression systems.

The grant begins the date of this letter and ends June 30, 2017. Your required local cash match is \$15,000.00, for a total budget of \$60,000.00. It is a requirement that you report grant activities and purchases to the state pursuant Section 401.113(2)(b), Florida Statutes, and in compliance with the Florida Catalog of State Financial Assistance, number 64.003. The reports are due the third week of November 2016, March 2017, and July 2017.

Your signed grant application affirms you have read, understand and will comply with the conditions and requirements in the "Florida EMS Matching Grant Program Application Packet, December 2008". You may obtain a copy of the grant application packet from your identified contact person.

Thank you for your participation in the state EMS grant program. If you need assistance, please contact the Bureau of Emergency Medical Oversight, Emergency Medical Services Section, Health Services and Facilities Consultant, Mr. Alan Van Lewen, at (850) 245-4440, extension 2734.

Sincerely,

A handwritten signature in black ink, appearing to read "Wayne A. North".

Wayne A. North, Director  
Division of Emergency Preparedness and Community Support

CIT OF HOLLYWOOD  
FIRE RESCUE  
WAN/av  
2016 JUN 10 PM 12:06

cc: Joel Medina, Division Chief-EMS

**Florida Department of Health**  
**Division of Emergency Preparedness and Community Support**  
Bureau of Emergency Medical Oversight  
4052 Bald Cypress Way, Bin A-22 • Tallahassee, FL 32399-1722  
PHONE: 850/245-4440 • FAX: 850/245-4378  
**FloridaHealth.gov**



**Accredited Health Department**  
Public Health Accreditation Board

M4245 Hollywood Dept. of Fire Rescue & Beach Safety

<b>Vehicles, equipment, and other</b> operating capital outlay means equipment, fixtures, and other tangible personal property of a non consumable and non expendable nature, and the normal expected life of which is 1 year or more.	<b>Costs:</b> List the price of the item and the source(s) used to identify the price.	<b>Justification:</b> State why each of the items and quantities listed is a necessary component of this project.
Three chest compression systems, accessories and related, and service agreement	\$60,000.00	
<b>TOTAL:</b>	<b>\$60,000.00</b>	

<b>State Amount</b> (Check applicable program)		
<input checked="" type="checkbox"/> Matching: 75 Percent	<u>\$45,000.00</u>	
<input type="checkbox"/> Rural: 90 Percent		
<b>Local Match Amount</b> (Check applicable program)		
<input checked="" type="checkbox"/> Matching: 25 Percent	<u>\$15,000.00</u>	
<input type="checkbox"/> Rural: 10 Percent		
<b>Grand Total</b>	<u>\$60,000.00</u>	

RESOLUTION NO. R-2016-054

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF HOLLYWOOD, FLORIDA, AUTHORIZING THE APPROPRIATE CITY OFFICIALS TO APPLY FOR AND IF AWARDED, ACCEPT THE FLORIDA DEPARTMENT OF HEALTH 2016 EMS MATCHING GRANT PROGRAM IN THE APPROXIMATE AMOUNT OF \$103,400.00 TO PURCHASE EMERGENCY MEDICAL SERVICES (EMS) EQUIPMENT/TRAINING; AMENDING THE FY 2016 OPERATING BUDGET OF THE SPECIAL PROGRAMS FUND (11) ADOPTED AND APPROVED BY RESOLUTION R-2015-294, UPON AWARD OF THE GRANT, IN THE MANNER DETAILED IN EXHIBIT 1; REVISING AND RECOGNIZING CERTAIN OPERATING REVENUES AUTHORIZING CERTAIN BUDGETARY ADJUSTMENTS, APPROPRIATIONS AND TRANSFERS OF FUNDS, INCLUDING MATCHING FUNDS IN THE APPROXIMATE AMOUNT OF \$25,850.00, AS REQUIRED BY THE GRANT PROGRAM; AUTHORIZING THE DEPARTMENT OF FINANCIAL SERVICES TO ESTABLISH THE ACCOUNTS TO PROPERLY MONITOR AND TRACK THE REVENUES AND APPROPRIATIONS, AS NEEDED, AND FURTHER, AUTHORIZING THE APPROPRIATE CITY OFFICIALS TO EXECUTE ANY AND ALL APPLICABLE GRANT DOCUMENTS AND AGREEMENT(S).

WHEREAS, the Florida Department of Health, has grant funding available through the 2016 EMS Matching Grant Program for the purpose of enhancing pre-hospital emergency medical services; and

WHEREAS, the Fire Rescue and Beach Safety Department desires to apply for the 2016 Florida Department of Health EMS Matching Grant in the approximate amount of \$103,400.00 to purchase equipment to enhance pre-hospital emergency medical services; and

WHEREAS, the Department would like to purchase seven (7) chest compression systems for each of our Advanced Life Support Rescues; and

WHEREAS, these systems offer significant benefits over manual Cardio-Pulmonary Resuscitation (CPR) techniques and have been shown to significantly improve the quality and increase the consistency of compressions; and



WHEREAS, the Florida Department of Health 2016 EMS Matching Grant requires a twenty percent (25%) cash match from the local government receiving the grant; and

WHEREAS, the Department of Financial Services is hereby authorized to create certain accounts to recognize revenue and appropriate program funding; and

WHEREAS, the required match for the 2016 Florida Department of Health EMS Matching Grant is estimated not to exceed \$25,850.00 which will be paid from an account to be established by the Department of Financial Services; and

WHEREAS, if awarded, this funding will enhance pre-hospital emergency medical services;

NOW THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF HOLLYWOOD, FLORIDA:

Section 1: That it hereby authorizes the appropriate City Officials to apply for the Florida Department of Health 2016 EMS Matching Grant in the approximate amount of \$103,400.00 to purchase seven (7) chest compression systems.

Section 2: That the City Manager is hereby authorized to accept said grant, if awarded; provided, however, the City Manager shall have the discretion to refuse the grant in those circumstances where he determines it is in the best interests of the City to do so in which case he shall advise the City Commission of his intention to refuse the grant.

Section 3: That, subject to the award of the grant proceeds, it hereby adopts and approves the Amendments, Adjustments and/or Transfers to the FY 2016 Operating Budget of the Special Programs Fund (11) as detailed in Exhibit 1, attached hereto and by this reference incorporated herein.

Section 4: That upon receipt of the grant proceeds, if awarded, it hereby recognizes and appropriates said grant proceeds for the purposes described in the City of Hollywood's submission for the 2016 EMS Matching Grant program and recognizes the receipt of said grant funds in a line item account to be established in the Special Programs Fund (11).

Section 5: That upon receipt of the grant proceeds, if awarded, it hereby authorizes the use and transfer of matching funds in the approximate amount not to exceed of \$25,850.00 from the City's General Fund (01) Contingency line item account to a line item in the Special Programs Fund (11) as detailed in Exhibit 1.


Section 6: That it hereby authorizes the Department of Financial Services to create certain accounts to recognize revenue and appropriate program funding and perform the transfer of funding as may be required.

RESOLUTION AUTHORIZING THE APPROPRIATE CITY OFFICIALS TO APPLY FOR AND IF AWARDED, ACCEPT THE FLORIDA DEPARTMENT OF HEALTH 2016 EMS MATCHING GRANT PROGRAM IN THE APPROXIMATE AMOUNT OF \$103,400.00

Section 7: That upon the 2016 Florida Department of Health EMS Matching Grant being awarded to the City, and the City Manager accepting said award, the appropriate City Officials are hereby authorized to execute a grant agreement along with any other applicable documents in a form acceptable to the City Manager and approved as to form and legality by the City Attorney.

Section 8: That this resolution shall be in full force and effect immediately upon its passage and adoption.

PASSED AND ADOPTED this 2 day of March, 2016.

  
\_\_\_\_\_  
PETER BOBER, MAYOR

ATTEST:

  
\_\_\_\_\_  
PATRICIA A. CERNY, MMC, CITY CLERK

APPROVED AS TO FORM AND LEGALITY  
for the use and reliance of the  
City of Hollywood, Florida, only.

  
\_\_\_\_\_  
JEFFREY P. SHEFFEL, CITY ATTORNEY

*LWC*



Your Partner  
in Life Support



[About us](#) | [Cardiac Arrest](#) | [LUCAS CPR](#) | [For users](#) | [News & Media](#) | [Contact](#) | [English](#)

LUCAS™ CPR

LUCAS™ clinical overview

- [Compression efficacy](#)
- [Patient outcomes](#)
- [Safety and side effects](#)

LUCAS publication references

Technical info and instructions for use

Accessories

Product literature

Films

LUCAS™ Web training center

## Compression efficacy

### Based on science

LUCAS compressions are based on the international guidelines for CPR; the optimal frequency and depth, an equal compression and decompression time, a full recoil of the chest between each compression with a minimum interruptions.

On this page you will get an overview of the hemodynamic efficacy. Click on the submenus on the left menu bar to learn more about LUCAS clinical efficacy and safety.

### Square shaped duty cycle for higher efficacy

The picture below shows the pressure curves created by manual CPR on a real patient and its decrease in quality over time, as well as the pressure curves of LUCAS in the same patient, which creates a more consistent pressure. The square shaped pressure curve reflects the LUCAS duty cycle.

The LUCAS duty cycle allows for time to push blood to the brain (compression) and then time to refill and perfuse the heart (decompression back to zero). This perfect cycle has shown to increase the flow to vital organs.

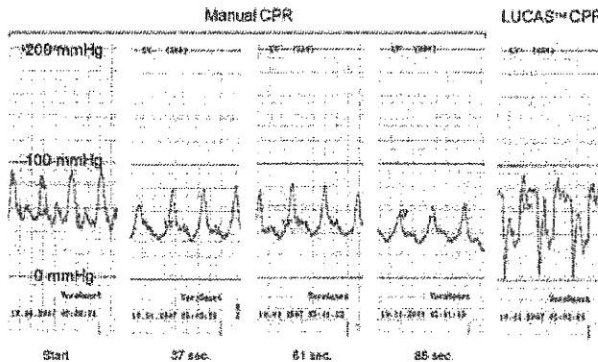


### Latest news

Large, randomized trial: LUCAS Chest Compression System is effective and reliable in pre-hospital cardiac arrest  
[More](#)

Automatic CPR devices saves life of woman who was clinically dead for 42 minutes  
[More](#)

### Train on LUCAS™



Courtesy Prof. H Bonnemeier, Klei, Germany

### More flow to the brain

Both human (measured by Doppler and cerebral oximetry) and animal studies have shown increase in blood flow to the brain with LUCAS compared to manual CPR.

In two of the studies the brain flow increased by 60% with LUCAS, from ~40% of the normal flow with manual CPR to reach ~65% of normal flow with LUCAS compressions. When the brain flow reaches over 50% of the normal flow it could result in return of consciousness during CPR, which has been reported during LUCAS CPR.

Human measurements of cerebral oximetry by Wagner et al ICU Director 2013 (4);1: 22-32.  
Human doppler data on Intracerebral artery flow by Carmona et al 2011; 82S1: 30, AP090.  
Animal data on cortical cerebral flow by Rubertsson et al, Resuscitation 65 (2005): 357-363.

### More flow to the heart

A coronary perfusion pressure above 15 mmHg has been shown as the threshold of survival. Every interruption in compressions leads to a drastic fall in coronary

artery pressure which takes time to rebuild.

Human data has shown normal coronary artery flow (TIMI III) and/or good coronary perfusion pressures with LUCAS during prolonged resuscitation events\*.

Several animal studies on LUCAS have shown significantly increased or normalized coronary perfusion pressures and/or coronary artery flow with LUCAS compared to manual CPR\*\*.

\*Examples of human data :Wagner et al. Circulation. 2010;122:A91, and Larsen et al. Resuscitation 81 (2010) 493–497

\*\*Examples of animal data: Wagner et al. BMC Cardiovascular Disorders 2011, 11:73; Liao et al. BMC Cardiovascular Disorders 2010;10:53; Steen et al. Resuscitation. 2002; 55: 289-299.

#### **Increased ETCO2**

ETCO2 is commonly used as an indicator of circulation and tissue oxygenation during cardiopulmonary resuscitation. LUCAS has shown to significantly increase ETCO2 levels compared to manual CPR in a controlled pre-hospital study.

Axelsson et al, Resuscitation. 2009; 80(10): 1099-103.

#### **Less detrimental interruptions**

Both real clinical use\* and manikin studies\*\* have shown that LUCAS can be applied quickly and increase flow time compared to manual CPR during the resuscitation event.

In a pre-hospital real use study\*\* the hands-on ratio with manual CPR was on average 78% with manual CPR and 91% with LUCAS - as measured over the entire resuscitation episodes of approx. 33-40 minutes. The hands-on time of manual CPR decreased from 81% on the scene to 73% during transport, whereas LUCAS stayed at the same high hands-on ratio (90-92%) both on scene and during transport.

\*Examples on human study: Maule Y, Urgence Pratique. 2011;106:47-48.

\*\* Examples on manikin studies: Munch et al Intensiv und Notfallmedizin 2010; 4: 295, Wyss et al, Cardiovascular Medicine 2010; 13(3): 92-96.

\*\*\*Pre-hospital study on LUCAS 1(V1): Clasveengen et al Resuscitation. 2008; 76(2): 185-90

#### **Defibrillation during LUCAS compressions**

There is scientific evidence that defibrillation during compressions can improve the outcome of cardiac arrest treatment but for safety reasons defibrillation during manual CPR is not recommended. However, with LUCAS it is possible to defibrillate during ongoing compressions. LUCAS allows for application of the defibrillation electrodes outside the suction cup. Defibrillation during ongoing LUCAS CPR has been used routinely in clinical settings since the launch in 2003.

An experimental study has concluded that defibrillation can be delivered during ongoing LUCAS compressions without compromising efficacy, thus obviating the need for potentially detrimental compression pauses.\*

\* Walcott et al, Circulation. 2007; 118: II 386 Abstract 1811

Lifesaving starts here.™

Physio-Control Inc. / Jolife AB, Ideon Science Park, SE-223 70 Lund, Sweden. Tel: +46 (0) 46 286 50 00. Fax: +46 (0) 46 286 50 10. [info@lucas-cpr.com](mailto:info@lucas-cpr.com)  
Powered by Publiciteta&Co

VA » OAL » NAC » CCST Home » Search Menu » SIN, Socioeconomic Status, Description Search » Item Details

## National Acquisition Center (CCST)

### Item Details: V797D-30038, Physio-Control, Inc.

<b>CONTRACT POINT OF CONTACT:</b> NAME: Dave McGinnis PHONE: 301-514-9112 FAX: 301-663-9598 EMAIL: dave.mcginis@physio-control.com  <b>CORPORATE ADDRESS:</b> ADDRESS: 11811 Willows Road, N.E.  CITY: Redmond STATE: WA ZIPCODE: 98052-2003 DUNS: 009251992 TIN:  <b>SOCIOECONOMIC INFORMATION: (IF ALL FIELDS BELOW ARE BLANK THEN SIZE IS OTHER THAN SMALL)</b> SMALL: - SDB: - VETERAN OWNED: - WOMAN OWNED: - DISABLED VETERAN: - HUB ZONE: - 8A: -	<b>CONTRACT DATES:</b> AWARDED: 12/06/2012 EFFECTIVE: 12/06/2012 EXPIRATION: 12/05/2017  <b>NAC CONTRACTING OFFICER (CO):</b> NAME: NicholasMcGregor PHONE: (708)786-4953 EMAIL: Nicholas.McGregor@va.gov  <b>ORDERING CONTACT:</b> ADDRESS: P.O. Box 97023 CITY: Redmond STATE: WA ZIPCODE: 98073-9723 PHONE: 800-442-1142 FAX: 800-426-8049 EMAIL:  <b>EMERGENCY CONTACT:</b> NAME: Dave McGinnis, Gov. Acct. Mgr. PHONE: 301-514-9112	<b>PAYMENT/DELIVERY INFORMATION:</b> CREDIT CARD ACCEPTED: Yes CREDIT CARD DISCOUNT: None MINIMUM ORDER: 100.00 DELIVERY TERMS: See GSA E-Library for Physio Control Terms and Conditions Pricelist for Standard Delivery Time. EXPEDITED DELIVERY: See GSA E-Library for Physio Control Terms and Conditions Pricelist for Expedited Delivery Time.  <b>DISCOUNT INFORMATION:</b> PROMPT PAYMENT: None QUANTITY DISCOUNT: None  <b>WARRANTY INFORMATION:</b> DETAILS: Depends on SIN
--	---	---

### Contracted SIN's and Descriptions

SIN	DESCRIPTION
A-59	Defibrillators





GSA  
Federal  
Acquisition  
Service

Home eBuy - quotes GSA Advantage - online shopping Help

Search:  all the words

## Contractor Information

(Vendors) How to change your company information

Contract #:	V797D-30038	Socio-Economic :	Other than small business
Contractor:	PHYSIO-CONTROL, INC.	EPLS :	Contractor not found on the Excluded Parties List System
Address:	11811 WILLOWS ROAD, N.E. REDMOND, WA 98052-2003	Govt. Point of Contact:	NICHOLAS MCGREGOR
Phone:	301-514-9112	Phone:	(708)786-4953
E-Mail:	Dave.McGinnis@Physio-Control.com	E-Mail:	nicholas.mcgregor@va.gov
Web Address:	http://www.physio-control.com		
DUNS:	009251992		

Source	Title	Contract Number	Contractor T&Cs /Pricelist	Contract End Date	Category	View Catalog
65 II A	MEDICAL EQUIPMENT AND SUPPLIES	V797D-30038		Dec 5, 2017	A-59	

**PHYSIO  
CONTROL**

MARCH 2015

# U.S. FEDERAL GOVERNMENT

## 65 II A EXTERNAL DEFIBRILLATORS

PRICE LIST

Supplement #1  
Effective: March 1, 2015

Department of Veterans Affairs  
Marketing Division For Medical Equipment  
Authorized Federal Supply Schedule Price List (GSA) Catalog (Ref FAR 38.000)  
Medical Equipment & Supplies FSC Group 65, Part II, Section A  
Contract V797D-30038; December 6, 2012 through December 5, 2017

Physio-Control, Inc.

**Medical Equipment and Supplies:**

---

FSS Group 65, Part II,  
Section D Medical Equipment and Supplies  
FSC Classes 6515  
Including 651522 & 651597

**Contract Number:**

---

V797D-30038  
Includes Industrial Funding Fee

**Contract Period:**

---

December 6, 2012 through  
December 5, 2017

**Business Size:**

---

Large Business

**Contractor's Name:**

---

**Physio-Control, Inc.**  
Attention: National Accounts  
11811 Willows Road Northeast  
PO Box 97006  
Redmond, WA 98073-9706 USA  
Tel: (800) 442-1142 or  
(425) 867-4000  
Fax: (800) 426-8049  
(425) 867-4948  
www.physio-control.com

**Domestic Bids/Parts and International Parts:**

---

Attn: Customer Service Center  
Tel: (800) 442-1142 or  
(425) 867-4000  
Fax: (800) 732-0956 or  
(425) 867-4146

**International Equipment and Large Bids:**

---

**Dave McGinnis**

Cell: (301) 514-9112  
Fax: (301) 663-9598  
Email: dave.mcginis@physio-control.com

**Steve Carlson**

Cell: (813) 453-3660  
Email: steve.s.carlson@physio-control.com

**Contract Administration Source:**

---

Same as Contractor's Name  
Attn: Samantha Schultz  
Tel: (425) 867-4458  
Fax: (800) 426-8049

**Information for Ordering Activities**

---

1. **Maximum Order Limitation:** A-59 \$100,000
2. **Minimum Order:** \$100
3. **Geographic Coverage:** All 50 states, Washington D.C. and Puerto Rico.
4. **Point of Production:** Redmond, King County, Washington, USA.
5. **Discount from List Prices:** The prices shown herein are net (discount deducted).
6. **Quantity Discounts:** None.
7. **Prompt Payment Terms:** Net 30 days.
- 8a. **Government Commercial Credit Card:** Yes.
- 8b. **Discount for Credit Card Payment:** No.
9. **Foreign:** (see page 4)
10. **Time of Delivery:**  
Within 45 days ARO.  
Emergency Delivery Provision:  
Within 72 hours ARO, subject to stock on hand. Government pays freight charges above surface rates.
11. **FOB Point (via surface transportation):**  
Destination 48 Contiguous States, District of Columbia, Port of Exportation to Alaska, Hawaii and Puerto Rico.
12. **Ordering Address:**  
Physio-Control, Inc.  
11811 Willows Rd NE  
Redmond, WA 98052
13. **Payment Address:**  
Physio-Control, Inc. E.I.N. 91-0697691  
12100 Collections Center Drive  
Chicago, IL 60693  
  
**Note:** Electronic Funds Transfer (EFT) preferred when available:  
Bank of America, ABA# 121000358, Acct.# 12330-08721. Acct. Type: SAVINGS, LOCKBOX #12100  
Contact our Customer Finance Department, (800) 442-1142 or (425) 867-4000.

**14. Warranty Provisions – Warranty Statement supercedes warranty provided with each instrument:**

Subject to the limitations and exclusions set forth below, the following Physio-Control products which are purchased from authorized Physio-Control representatives or authorized dealers and are used in accordance with their instructions, will be fit for the purposes for which they are intended as defined in the parties' contract and will be free from defects in material and workmanship appearing under normal service and use as defined below as follows:

**Eight Years:**

- New LIFEPAK CR® Plus automated external defibrillator and internal battery system.

**Five Years:**

- New LIFEPAK® 15 monitor/defibrillator series, used in clinic and hospital settings exclusively (with no use in mobile applications)
- New LIFEPAK 12 defibrillator/monitor series, used in clinic and hospital settings exclusively (with no use in mobile applications)
- New LIFEPAK 20 defibrillator/monitor family of products, used in clinics and hospital settings exclusively (with no use in mobile applications)
- New LIFEPAK 1000 defibrillators
- New LIFEPAK 500 and LIFEPAK 500 DPS automated external defibrillators
- New LIFEPAK EXPRESS® automated external defibrillator and internal battery system.

**Two Years:**

- New Trainer 1000 trainer

**One Year:**

- New LIFEPAK 15 monitor/defibrillator series, which include use in out-of-hospital and mobile applications
- New LIFEPAK 12 defibrillator/monitor series, which include use in out-of-hospital and mobile applications
- Factory refurbished LIFEPAK 12 defibrillator/monitor series
- New LUCAS® Chest Compression System
- New LIFEPAK 500T trainer
- New LIFEPAK CR-T trainer
- Internal Battery System for LIFEPAK 20 defibrillator/monitor family of products
- Battery charging systems and power adapters
- All batteries and battery paks, excluding CHARGE-PAK™ Charging Unit
- Masimo® SET® Rainbow® patient cables and reusable sensors.

**90 Days:**

- CHARGE-PAK Charging Unit (external system) for LIFEPAK CR Plus defibrillator
- Installed customer repair parts
- All other product accessories

**30 Days:**

- Internal paddles and internal paddle handles

Limited warranty time limits begin on the date of delivery to the Government.

Physio-Control, Inc., (hereafter referred to as Physio) warrants neither error-free nor interruption-free performance. The sole and exclusive remedy under this Limited Warranty is repair or replacement of defective material or workmanship at the option of Physio. To qualify for the repair or replacement, the product must not have been repaired or altered outside of an authorized Physio factory in any way which, in the judgment of Physio, affects its stability and reliability. The product must have been used in accordance with applicable operating instructions and in the intended environment or setting.

This warranty does not apply to product that has been subjected to misuse, abuse or accident. Physio, in its sole discretion, will determine whether warranty service on the product will be performed in the field or through ship-in repair. For field repair, this warranty service will be provided by Physio at the Government's facility or an authorized Physio facility during normal business hours. For ship-in repair, all products and/or assemblies requiring warranty service should be returned to a location designated by Physio, freight prepaid, and must be accompanied by a written, detailed explanation of the claimed failure.

THIS LIMITED WARRANTY SHALL BE THE EXCLUSIVE REMEDY AVAILABLE TO THE GOVERNMENT. PHYSIO IS NOT LIABLE TO THE GOVERNMENT FOR CONSEQUENTIAL DAMAGES (INCLUDING LOSS OF BUSINESS OR PROFITS) IN A BREACH OF WARRANTY ACTION.

Products are warranted in conformance with applicable laws. If any part or term of this Limited Warranty is held to be illegal, unenforceable or in conflict with applicable law by any court of competent jurisdiction, the validity of the remaining portions of the Limited Warranty shall not be affected, and all rights and obligations shall be construed and enforced as if this Limited Warranty did not contain the particular part or term held to be invalid. Some geographies, including certain US states, do not allow the exclusion or limitation of incidental or consequential damages, so the above limitation or exclusion may not apply to you. This Limited Warranty gives the user specific legal rights. The user may also have other rights which vary from state to state or country to country.

**15. Export Packing Charges: Not Applicable**

**16. Terms and Conditions of Credit Card Acceptance:**

Note: Electronic Funds Transfer (EFT) preferred when available.  
Contact our Customer Finance Representative, (800) 442-1142  
for instructions.

**17. Terms and Conditions of Rental, Maintenance, and Repair:**

Not Applicable

**18. Terms and Conditions of Installation:** Not Applicable - ready to  
use upon receipt

**19. Terms and Conditions of Repair Parts:** Not Applicable

**20. List of Service and Distribution Points:** Same as ordering  
address

**21. List of Participating Dealers:** Not Applicable

**22. Preventive Maintenance** Service Manuals and Operating  
Instructions including performance inspection procedures are  
provided. Maintenance contracts available through our service  
department. (800) 442-1142 or (425) 867-4000.

**23. Environmental Attributes:** All new content; battery recycle  
available

**24. Physio-Control DUNS:** 009251992 CEC: 00-26109k

**25. Central Contractor Registration (CCR):** 009-251992

**NOTES:**

**Two operating instruction manuals provided with each  
instrument. One service manual provided with each order.**

**Service Points:**

Same as contractor's Redmond address. Service representatives  
are dispatched by calling (800) 442-1142.

**Physio-Control Tax Identification Number (E.I.N.):** 91-0697691

**Physio-Control Standard Industrial Classification (SIG):** 3841,  
NAICS 2007, #334510

**Physio-Control CAGE Code:** 28494 (Redmond HQ & MFG)

**Physio-Control Offers Optional Voltage for Overseas Use:**

Minor variations in part number reflect alternative voltages/cycles.  
Specify voltage, frequency, and power cord configuration required,  
such as 200v/50Hz. Delivery will be on quotation basis. There are  
no special charges.

**Agencies should provide a street address for stateside port of  
embarkation orders or APO/FPO address.**

**Eligibility to use FSS contracts governed by General Services  
Administration - regulation AD4800 2E, revised January 3, 2000.**

**Contractors for federal government must have authorization in  
writing from their US government contracting officer.**



Product #	Description	Country
11150-000015	Internal Modem (pc card modem) for LP12	Canada
11577-000004	Station Battery Charger	Canada
11577-000011	Mobile Battery Charger	Canada
11130-000061	Standard Hard Paddles (1 pair)	Germany
11113-000004	QUIK-COMBO Therapy cable	Germany
11110-000029	3-lead ECG cable for use with LP12 or LP20	Mexico
11110-000040	QUIK-COMBO therapy cable for use with LIFEPAK 12 or 20	Mexico
11998-000022	Test load for use w/QC therapy cable	Mexico
11130-000001	Standard hard paddles for LIFEPAK 12	Mexico
11110-000102	4-wire lead attachment	Mexico
11110-000103	6-wire precordial lead attachment	Mexico
11110-000110	12-Lead ECG patient cable - main 8'	Mexico
11110-000111	12-Lead ECG patient cable - main 5'	Mexico
11110-000052	FAST-PATCH Adapter cable for use with LIFEPAK 12 or 20	Mexico
11113-000002	QUIK-COMBO Test plug	Mexico
11171-000007	Masimo SET SpO2 Sensor - Adult Reusable	Mexico
11171-000010	Masimo SET SpO2 Sensor - Pediatric Reusable	Mexico
21330-001176	Li-ion, 5,7 Amp Hour Capacity	Japan
11141-000106	LIFEPAK 12 Li-ion Battery	Japan
11141-000149	LIFEPAK NiCd Battery with fuel gauge 1.6 amp hrs	Japan
11996-000060	DS100A Finger Sensor (Nellcor)	Mexico
11111-000018	CABLE, 4 WIRE LIMB LEAD- 5FT AHA, 12 LEAD ECG	Germany
11111-000020	CABLE, 4 WIRE LIMB LEAD- 8FT AHA, 12 LEAD ECG	Germany
11111-000022	CABLE, 6 WIRE PRECORDIAL- AHA, 12 LEAD ECG	Germany
11171-000017	Masimo SET LNCS Adult Reusable Sensor	Mexico
11171-000018	Masimo SET LNCS Pediatric Reusable Sensor	Mexico
11996-000323	Masimo SET RED LNCS Patient Cable 4'	Mexico
21300-008054	4-Wire Cable Comb (10-Pack)	Germany
21300-008055	6-Wire Cable Comb (10-Pack)	Germany
21330-001365	Test Load	Mexico
11110-000066	5-Lead ECG Cable for use with LP20/20e	Mexico
11141-000112	LIFEPAK 20e Lithium Ion Battery Pack	Japan
11111-000016	3-Wire ECG Cable (Lead II)	Mexico
99996-000117	LP1000 Trainer	Germany
11576-000064	LUCAS PCI BACK PLATE	Sweden
11996-000278	LUCAS Connector – Chemetron Air	Czech Republic
11996-000279	LUCAS Connector – Ohmeda Air	Czech Republic
11996-000280	LUCAS Connector – Puritan Bennet Air	Czech Republic
11996-000281	LUCAS Connector – Diss Air	Czech Republic
11996-000282	LUCAS Connector – Schrader Air	Czech Republic
11996-000283	LUCAS Connector – Oxequip Air	Czech Republic
21996-000061	LUCAS Extension Hose (11.5 ft)	Czech Republic
99576-000024	LUCAS 2 Chest Compression System	Sweden
21300-005026	IrDA Adapter with USB Port (LIFENET DTX required)	Singapore

# Contents

---

LIFEPAK® 15 monitor/defibrillator	6
LIFEPAK 20/20e monitor/defibrillator	10
LIFEPAK CR® Plus AED	12
LIFEPAK 1000 defibrillator	13
LUCAS® Chest Compression System	14

# LIFEPAK 15 Monitor/Defibrillator

---

## LIFEPAK® 15 Monitor/Defibrillator

### Device Includes:

Manual & AED External Defibrillation  
ADAPTIV™ Biphasic Technology  
8.4" Color LCD Display  
CPR Metronome  
Noninvasive Pacing (demand and non-demand)  
QUIK-COMBO® Therapy Cable  
100mm Printer  
100mm Printer Paper (2 rolls)  
QUIK-COMBO Adult Electrodes (2 packs)  
Operating Instructions  
Inservice DVD Test Load  
(Batteries and carry case not included)



## Options and Ship Kit Items

Depending upon the specific options on your selected configuration, various cables, and other accessories are included with that feature. Choose either the short or long cable option for your device. Please see below for details:

### 12-Lead ECG Monitoring (Glasgow Interpretative Algorithm)

6-wire precordial lead attachment and cable comb  
LIFE-PATCH® ECG electrodes (2 packs of 3) LIFE-PATCH® ECG electrodes (1 pack of 4)  
Short: 5 ft Trunk cable with 4-wire limb leads and cable comb  
Long: 8 ft Trunk cable with 4-wire limb leads and cable comb

### Bluetooth® (BT)

#### Premium Trending Software for Vital Signs

ST segment trending

#### Noninvasive Blood Pressure (NIBP)

2 ft (stretches to 9 ft) coiled hose  
Reusable adult blood pressure cuff

#### 2 Invasive Pressure Channels (IP)

Premium trending software

#### Capnography (EtCO2)

Capnography training CD

#### Pulse Oximetry (Masimo® SpO2)

Short: 4 ft Masimo SET® RC patient cable (patient sensor not included)  
Long: 12 ft Masimo SET RC patient cable (patient sensor not included)

#### Nellcor™ and Masimo SpO2

Short: 4 ft Masimo Red MNC cable  
Long: 10 ft Masimo Red MNC cable

#### CO and/or Methemoglobin Monitoring (SpCO and/or SpMet)

Short: 4 ft Masimo SET RC patient cable (patient sensor not included)  
Long: 12 ft Masimo SET RC patient cable (patient sensor not included)

#### Temperature (Temp)

Short: 5 ft Adapter cable  
Long: 10 ft Adapter cable



# LIFEPAK 15 Monitor/Defibrillator

## Common Prehospital Configurations

99577-001368	LIFEPAK 15 Trending, 12-Lead ECG, Bluetooth	\$18,166.83
99577-001959	LIFEPAK 15 Trending, Masimo SpO2, NIBP, EtCO2, 2 Invasive Pressure Channels, Bluetooth	\$20,257.29
99577-001952	LIFEPAK 15 Trending, Masimo SpO2, SpCO, NIBP, EtCO2, Bluetooth	\$21,061.31
99577-001955	LIFEPAK 15 Trending, Masimo SpO2, NIBP, 12-Lead ECG, EtCO2, Bluetooth	\$24,116.58
99577-001957	LIFEPAK 15 Trending, Masimo SpO2, SpCO, NIBP, 12-Lead ECG, EtCO2, Bluetooth	\$26,769.85
99577-001588	LIFEPAK 15 Trending, Masimo SpO2, SpCO, SpMet, NIBP, 12-Lead ECG, EtCO2, Bluetooth	\$29,423.12

## Common Hospital Configurations

99577-001939	LIFEPAK 15 Bluetooth	\$10,930.65
99577-001945	LIFEPAK 15 Masimo SpO2, NIBP, Bluetooth	\$14,629.15
99577-001944	LIFEPAK 15 Masimo SpO2, EtCO2, Bluetooth	\$16,397.99
99577-001950	LIFEPAK 15 Masimo SpO2, NIBP, EtCO2, Bluetooth	\$18,408.04
99577-001953	LIFEPAK 15 Masimo SpO2, NIBP, 12-Lead ECG, Bluetooth	\$21,865.33
99577-001943	LIFEPAK 15 Masimo SpO2, EtCO2, 12-Lead ECG, Bluetooth	\$22,830.15

## Common Transport Configurations

99577-001947	LIFEPAK 15 Trending, Masimo SpO2, NIBP, 2 Invasive Pressure Channels, Bluetooth	\$16,880.40
99577-001960	LIFEPAK 15 Trending, Masimo SpO2, NIBP, 12-Lead ECG, EtCO2, 2 Invasive Pressure Channels, Bluetooth	\$25,644.22
99577-001962	LIFEPAK 15 Trending, Masimo SpO2, SpCO, NIBP, 12-Lead ECG, EtCO2, 2 Invasive Pressure Channels, Bluetooth	\$28,297.49
99577-001372	LIFEPAK 15 Trending, Masimo SpO2, SpCO, SpMet, NIBP, 12-Lead ECG, EtCO2, 2 Invasive Pressure Channels, Bluetooth	\$30,950.75

## Nellcor Configurations (Nellcor and Masimo SpO2)

99577-001941	LIFEPAK 15 Nellcor & Masimo SpO2, Bluetooth	\$12,779.90
99577-001946	LIFEPAK 15 Trending, Nellcor & Masimo, SpO2, NIBP, Bluetooth	\$15,111.56
99577-001948	LIFEPAK 15 Trending, Nellcor & Masimo, SpO2, NIBP, 2 Invasive Pressure Channels, Bluetooth	\$17,362.81
99577-001951	LIFEPAK 15 Trending, Nellcor & Masimo, SpO2, NIBP, Bluetooth	\$18,890.45
99577-001964	LIFEPAK 15 Trending, Nellcor & Masimo, SpO2, NIBP, 12-Lead ECG, EtCO2, Bluetooth	\$24,598.99
99577-001963	LIFEPAK 15 Trending, Nellcor & Masimo, SpO2, NIBP, 12-Lead ECG, EtCO2, 2 Invasive Pressure Channels, Bluetooth	\$26,126.63

## Temperature Configurations

99577-001956	LIFEPAK 15 Trending, SpO2, NIBP, 12-Lead ECG, EtCO2, Bluetooth, Temp	\$25,121.61
99577-001958	LIFEPAK 15 Trending, SpO2, SpCO, 12-Lead ECG, EtCO2, Bluetooth, Temp	\$27,774.87
99577-001373	LIFEPAK 15 Trending, SpO2, SpCO, SpMet, NIBP, 12-Lead ECG, EtCO2, Bluetooth, Temp	\$30,428.14

## Non-Bluetooth Configurations

99577-001930	LIFEPAK 15 Standard	\$10,930.65
99577-001931	LIFEPAK 15 Trending, Masimo SpO2, SpCO, NIBP	\$17,282.41
99577-001932	LIFEPAK 15 Trending, Masimo SpO2, NIBP, EtCO2	\$18,408.04
99577-001933	LIFEPAK 15 Trending, Masimo SpO2, NIBP, 12-Lead	\$21,865.33
99577-001934	LIFEPAK 15 Trending, Masimo SpO2, NIBP, 12-Lead, EtCO2	\$24,116.58
99577-001935	LIFEPAK 15 Trending, Masimo SpO2, SpCO, NIBP, 12-Lead, EtCO2	\$26,046.23
99577-001936	LIFEPAK 15 Trending, Masimo SpO2, SpCO, SpMet, NIBP, 12-Lead, EtCO2	\$29,423.12
99577-001938	LIFEPAK 15 Trending, SpO2, SpCO, NIBP, 12-Lead ECG, EtCO2, Temperature	\$27,774.87
99577-001937	LIFEPAK 15 Trending, Masimo SpO2, SpCO, SpMet, NIBP, 12-Lead, EtCO2, 2 Invasive Pressure Channels	\$30,950.75

# LIFEPAK 15 Monitor/Defibrillator

## Bundles

LIFEPAK 15 Bluetooth®		
81700-000001	LIFEPAK 15 Bundle: LIFEPAK 15 w/ ACPA (Trending, Masimo SpO2, SpCO, SpMet, NIBP, 12-Lead ECG, EtCO2, 2 IP Channels, Bluetooth)	\$32,411.66
81700-000002	LIFEPAK 15 Bundle: LIFEPAK 15 w/ ACPA (Trending, SpO2, SpCO, NIBP, 12-Lead ECG, EtCO2, Bluetooth, Temp)	\$29,235.78
81700-000004	LIFEPAK 15 Bundle: LIFEPAK 15 w/ ACPA (Trending, Masimo SpO2, SpCO, NIBP, 12-Lead ECG, EtCO2, Bluetooth)	\$28,230.75
81700-000005	LIFEPAK 15 Bundle: LIFEPAK 15 w/ ACPA (Trending, Masimo SpO2, EtCO2, Bluetooth)	\$17,858.89
Non-Bluetooth		
81700-000003	LIFEPAK 15 Bundle: LIFEPAK 15 w/ ACPA (Trending, Masimo SpO2, NIBP, EtCO2 )	\$19,868.94
81700-000006	LIFEPAK 15 Bundle: LIFEPAK 15 w/ ACPA (Trending, Masimo SpO2, SpCO, SpMet, NIBP, 12-Lead ECG, EtCO2, 2 IP Channels)	\$32,411.66
81700-000007	LIFEPAK 15 Bundle: LIFEPAK 15 w/ ACPA (Standard)	\$12,391.56

## NIBP

21300-007300	LIFEPAK 15 NIBP Tubing - Coiled, 2-9 feet	\$36.93
21300-007299	LIFEPAK 15 NIBP Tubing - 9 foot	\$39.40
21300-007298	LIFEPAK 15 NIBP Tubing - 12 foot	\$39.40
11160-000001	LIFEPAK 15 NIBP Cuff-Reusable, Infant	\$14.32
11160-000003	LIFEPAK 15 NIBP Cuff-Reusable, Child	\$16.58
11160-000005	LIFEPAK 15 NIBP Cuff-Reusable, Adult	\$20.35
11160-000007	LIFEPAK 15 NIBP Cuff-Reusable, Lg Adult	\$22.61
11160-000009	LIFEPAK 15 NIBP Cuff-Reusable, adult X large	\$33.92

## ECG Cables

11111-000018	LIFEPAK 15 CABLE, 4 WIRE LIMB LEAD- 5FT AHA, 12 LEAD ECG	\$209.05
11111-000020	LIFEPAK 15 CABLE, 4 WIRE LIMB LEAD- 8FT AHA, 12 LEAD ECG	\$211.66
11111-000022	LIFEPAK 15 CABLE, 6 WIRE PRECORDIAL- AHA, 12 LEAD ECG	\$83.62
21300-008054	LIFEPAK 15 4-wire Cable Comb (10/pack)	\$12.06
21300-008055	LIFEPAK 15 6-wire Cable Comb (10/pack)	\$12.06
11110-000066	LIFEPAK 15 5-Lead ECG Cable for use with LP20/20e	\$156.33
11110-000029	LIFEPAK 15 3-lead ECG cable for use with LP12 or LP20	\$83.01

## Therapy Delivery

11113-000004	LIFEPAK 15 QUIK-COMBO Therapy Cable for use with LP12 or LP20	\$237.44
11110-000052	LIFEPAK 15 QUIK-COMBO to FAST-PATCH Adapter Cable	\$176.88
11130-000061	LIFEPAK 15 Standard Hard Paddles (1 pair)	\$454.27
11131-000001	LIFEPAK 15 Internal Paddle Handles w/ discharge control for LP12	\$466.58
11131-000010	LIFEPAK 15 Internal Paddle Handles - 1" size	\$127.39
11131-000011	LIFEPAK 15 Internal Paddle Handles - 1.5" size	\$127.39
11131-000012	LIFEPAK 15 Internal Paddle Handles - 2" size	\$127.39
11131-000013	LIFEPAK 15 Internal Paddle Handles - 2.5" size	\$127.39
11131-000014	LIFEPAK 15 Internal Paddle Handles - 3.5" size	\$127.39

## Masimo SET® Sensors

11996-000323	LIFEPAK 15 Masimo SET RED LNCS Patient Cable 4'	\$118.19
11171-000017	LIFEPAK 15 Masimo SET LNCS Adult Reusable Sensor	\$217.09
11171-000018	LIFEPAK 15 Masimo SET LNCS Pediatric Reusable Sensor	\$217.09
11171-000007	LIFEPAK 15 Masimo SET SpO2 Sensor - Adult Reusable	\$256.28

## Masimo SET Rainbow Direct Connect Sensors (for SpCO and SpMET configurations only)

11996-000336	LIFEPAK 15 Masimo SET Rainbow DCI-dc3, Adult Reusable Direct Connect Sensor - 12'	\$716.08
11996-000338	LIFEPAK 15 Masimo SET Rainbow DCI-dc3, Pediatric Reusable Direct Connect Sensor - 12'	\$716.08



# LIFEPAK 15 Monitor/Defibrillator

---

## Nellcor® Sensors

11996-000060	LIFEPAK 15 DS100A Finger Sensor (Nellcor)	\$175.13
--------------	---	----------

## Power

21330-001176	LIFEPAK 15 Li-ion, 5,7 Amp Hour Capacity	\$293.97
11577-000011	LIFEPAK 15 Mobile Battery Charger	\$1,346.73
11577-000004	LIFEPAK 15 Station Battery Charger	\$1,160.80

## Reusable NIBP Cuff

11160-000001	LIFEPAK 15 NIBP Cuff-Reusable, Infant	\$14.32
11160-000003	LIFEPAK 15 NIBP Cuff-Reusable, Child	\$16.58
11160-000005	LIFEPAK 15 NIBP Cuff-Reusable, Adult	\$20.35
11160-000007	LIFEPAK 15 NIBP Cuff-Reusable, Lg Adult	\$22.61
11160-000009	LIFEPAK 15 NIBP Cuff-Reusable, adult X large	\$33.92

## ECG Cables

11111-000018	LIFEPAK 15 Cable, 4 Wire Limb Lead- 5' AHA, 12 Lead ECG	\$209.05
11111-000020	LIFEPAK 15 Cable, 4 Wire Limb Lead- 8' AHA, 12 Lead ECG	\$211.66
11111-000022	LIFEPAK 15 Cable, 6 Wire Precordial- AHA, 12 Lead ECG	\$83.62
21300-008054	LIFEPAK 15 4-wire Cable Comb (10/pack)	\$12.06
21300-008055	LIFEPAK 15 6-wire Cable Comb (10/pack)	\$12.06
11110-000066	LIFEPAK 15 5-Lead ECG Cable for use with LP20/20e	\$156.33
11110-000029	LIFEPAK 15 3-lead ECG Cable for use with LP12 or LP20	\$83.01

## Therapy Delivery

11110-000040	LIFEPAK 15 QUIK-COMBO Therapy Cable for use with LP12 or LP20	\$231.47
11110-000052	LIFEPAK 15 QUIK-COMBO to FAST-PATCH Adapter Cable for use with LP12 or LP20	\$176.88
11130-000001	LIFEPAK 15 Standard Hard Paddles for LP12	\$414.54
11133-000007	LIFEPAK 15 Pediatric Paddle ASSY, Multi Lanuage	\$49.57
11131-000001	LIFEPAK 15 Internal Paddle Handles w/ discharge control for LP12	\$466.58
11131-000010	LIFEPAK 15 Internal Paddles - 1" size	\$127.39
11131-000011	LIFEPAK 15 Internal Paddles - 1.5" size	\$127.39
11131-000012	LIFEPAK 15 Internal Paddles - 2" size	\$127.39
11131-000013	LIFEPAK 15 Internal Paddles - 2.5" size	\$127.39
11131-000014	LIFEPAK 15 Internal Paddles - 3.5" size	\$127.39

## Masimo SET® Sensors

11171-000017	LIFEPAK 15 LNCS Reusable Sensor (Adult) Masimo SET LNCS Adult Reusable Sensor	\$217.09
--------------	---	----------

## Nellcor™ Sensors

11996-000060	LIFEPAK 15 DURASENSOR Reusable Clip DS100A Finger Sensor (Nellcor)	\$175.13
--------------	--	----------

## Power

11141-000106	LIFEPAK 12 Li-ion Battery	\$258.04
11141-000149	LIFEPAK 12 NiCd Battery with fuel gauge 1.6 amp hrs	\$166.45
11141-000028	LIFEPAK SLA battery	\$152.54

## Communication

11150-000015	LIFEPAK 15 Internal Modem (pc card modem) for LP15	\$178.11
--------------	--	----------

# LIFEPAK 20e Monitor/Defibrillator

## LIFEPAK 20e Monitor/Defibrillator

### Device Includes:

- cprMAX™ Technology
- Active Color Matrix LCD Screen
- Manual and AED Functionality (with BLS/ACLS Front Door) Built-in AC Power (with AC power cord)
- Lithium-ion Internal Battery
- ADAPTIV™ Biphasic (escalating energy up to 360J) Synchronized Cardioversion
- 3- and 5-wire ECG Monitoring Capability with Lead Select (with 3-wire ECG cable) CODE SUMMARY™ (critical event record with data port)
- EDGE System Electrodes with QUIK-COMBO® Connector and REDI-PAK™ Preconnect System
- QUIK-COMBO Therapy Cable
- QUIK-COMBO Test Plug
- LIFE-PATCH® ECG Electrodes (3/pack)
- Operating Instructions and Service Manual (CD-ROM) Printer (with 3 rolls of 50mm x 22m ECG Printer Paper)



## Configurations

70507-000061	LIFEPAK 20e	\$6,532.66
70507-000080	LIFEPAK 20e with Pacing	\$7,135.68
70507-000091	LIFEPAK 20e with Pacing & SpO2 (Masimo and Legacy Nellcor)	\$8,241.21
70507-000081	LIFEPAK 20e with Pacing & SpO2 (Masimo)	\$8,931.10

## Bundles

81701-000001	Bundle: LIFEPAK 20e w/ CodeManagement Module™ (Wireless)	\$7,625.63
81701-000002	Bundle: LIFEPAK 20e (Pacing) w/ CodeManagement Module (Wireless)	\$8,228.64
81701-000003	Bundle: LIFEPAK 20e (Pacing & Masimo SpO2) w/ CodeManagement Module (Wireless)	\$9,334.17
81701-000004	Bundle: LIFEPAK 20e (Pacing & Masimo/Legacy Nellcor SpO2) w/ CodeManagement Module (Wireless)	\$10,024.06
81701-000005	Bundle: LIFEPAK 20e w/ CodeManagement Module (Wireless & EtCO2)	\$9,924.62
81701-000006	Bundle: LIFEPAK 20e (Pacing) w/ CodeManagement Module (Wireless & EtCO2)	\$10,527.64
81701-000007	Bundle: LIFEPAK 20e (Pacing and Masimo SpO2) w/ CodeManagement Module (Wireless & EtCO2)	\$11,633.17
81701-000008	Bundle: LIFEPAK 20e (Pacing & Masimo/Legacy Nellcor SpO2) w/ CodeManagement Module (Wireless & EtCO2)	\$12,323.06

## ECG Cables

11110-000066	5-Lead ECG Cable for use with LP20/20e	\$156.33
11110-000029	3-lead ECG cable for use with LP12 or LP20	\$83.01

## Therapy Delivery

11110-000040	QUIK-COMBO Therapy Cable for use with LP12 or LP20	\$231.47
11110-000052	QUIK-COMBO to FAST-PATCH Adapter Cable for use with LP12 or LP20	\$176.88
11130-000037	LIFEPAK 20/20e Standard Detachable Hard Paddles	\$467.34
11131-000001	Internal Paddle Handles (with discharge control)	\$466.58
11131-000010	Internal Paddles - 1" size	\$127.39
11131-000011	Internal Paddles - 1.5" size	\$127.39
11131-000012	Internal Paddles - 2" size	\$127.39
11131-000013	Internal Paddles - 2.5" size	\$127.39
11131-000014	Internal Paddles - 3.5" size	\$127.39

## Masimo SET® Sensors

11171-000017	Masimo SET LNCS Adult Reusable Sensor	\$217.09
11171-000018	Masimo SET LNCS Pediatric Reusable Sensor	\$217.09
11171-000007	Masimo SET SpO2 Sensor - Adult Reusable	\$256.28

# LIFEPAK 20e Monitor/Defibrillator

---

## Nellcor™ Sensors

11996-000060	DS100A Finger Sensor (Nellcor)	\$175.13
--------------	--------------------------------	----------

## Power

11141-000112	LIFEPAK 20e Lithium Ion Battery Pack	\$199.75
--------------	--------------------------------------	----------

## Communication and Replacement Parts

21330-001007	LIFEPAK 20/20e Front Door	\$25.87
11230-000020	Serial Port Cable	\$79.60



# LIFEPAK CR Plus Defibrillator

## LIFEPAK CR Plus Defibrillator

### Device Includes:

- 2 pair QUIK-PAK electrodes with REDI-PAK™ preconnect system
- CHARGE-PAK™ Charging Unit Quick reference instruction card Carrying case
- Ambu® Res-Cue Mask
- AED program implementation starter kit
- Reference manual (CD) Orientation DVD
- 8 Year Warranty



## Options & Configurations

80403-000148	LIFEPAK CR Plus Defibrillator Semi-automatic (AHA 2005)	\$1,301.51
80403-000149	LIFEPAK CR Plus Defibrillator Fully automatic (AHA 2005)	\$1,402.01

## Solutions

50999-000180	Adult Supply Replenishment - CR Plus	\$75.38
50999-000245	Heart Safe Solution Service Pack No Training	\$603.02
50999-000243	Heart Safe Solution Service Pack with training	\$1,206.03
50999-000168	Addtl Responder Enrollments per year	\$75.38
50999-000248	Upgrade Training BBP	\$25.13
50999-000252	Upgrade Training First Aid	\$42.21

## Therapy Delivery

11403-000001	Replacement Kit for LIFEPAK CR Plus CHARGE-PAK Charging Unit & 2 QUIK-PAK Electrodes	\$81.69
11101-000017	Infant/Child AED Reduced Energy Electrode Starter Kit	\$105.53

## Communication

21300-005026	IrDA Adapter with USB Port (LIFENET DTX required)	\$92.46
--------------	---	---------

## Mounting

11260-000015	Case-Hard, LPCR	\$162.06
11998-000292	LIFEPAK 500 Wall Cabinet semi-recessed 3" return trim	\$199.78
11998-000293	Wall Box, Full Recessed, AED	\$171.21
11210-000026	Wall Box, Semi Recessed, Fire-Rated, 3" Trim	\$305.28
11210-000027	Wall Box, Semi Recessed, Fire-Rated, 1.5" Trim	\$309.55
11210-000028	LIFEPAK AED Cabinet - Free standing, white	\$722.92
11210-000029	LIFEPAK AED Cabinet - Free standing, grey	\$721.39
11220-000076	Standard Cabinet - SM, SS	\$377.47
11220-000077	Standard Cabinet - FR, SS	\$341.30
11220-000079	LIFEPAK 500 Wall Cabinet surface mounted trim	\$184.16

# LIFEPAK 1000 Defibrillator

## LIFEPAK 1000 Defibrillator with ADAPTIV™ biphasic waveform

Device Includes:

Includes cprMAX™ Technology

QUIK-COMBO® electrodes with REDI-PAK™ preconnect system (2 pair) Operating Instructions

Getting Started Guide

Non-Rechargeable Lithium Manganese Dioxide (LiMnO2) Battery

Soft Shell Carrying Case

Shoulder Strap

5 Year Warranty



### Options & Configurations

99425-000023	LIFEPAK 1000 Graphical Display	\$1,969.85
99425-000025	LIFEPAK 1000 ECG Display	\$2,194.97

### Power

11141-000100	LIFEPAK 1000 LiMnO2 Non-Rechargeable Battery	\$234.83
--------------	--	----------

### Electrodes

11111-000016	3-Wire ECG Cable (Lead II)	\$160.70
--------------	----------------------------	----------

### Trainers

99996-000117	LIFEPAK 1000 Trainer	\$749.75
--------------	----------------------	----------

### Mounting

11998-000292	LIFEPAK 500 Wall Cabinet semi-recessed 3" return trim	\$199.78
11998-000293	Wall Box, Full Recessed, AED	\$171.21
11210-000026	Wall Box, Semi Recessed, Fire-Rated, 3" Trim	\$305.28
11210-000027	Wall Box, Semi Recessed, Fire-Rated, 1.5" Trim	\$309.55
11210-000028	LIFEPAK AED Cabinet - Free standing, white	\$722.92
11210-000029	LIFEPAK AED Cabinet - Free standing, grey	\$721.39
11220-000076	Standard Cabinet - SM, SS	\$377.47
11220-000077	Standard Cabinet - FR, SS	\$341.30
11220-000079	LIFEPAK 500 Wall Cabinet surface mounted trim	\$184.16

### Communication

21300-005026	IrDA Adapter with USB Port (LIFENET DTX required)	\$92.46
--------------	---	---------



# LUKAS 2 Chest Compression System



## LUCAS 2 Chest Compression System

Device Includes: Carrying Bag Patient Straps (2) Stabilization Strap Suction Cup (3)  
 Rechargeable Lithium-Polymer Battery  
 Instructions for Use

99576-000024	LUCAS 2 Chest Compression System	\$11,654.27
--------------	----------------------------------	-------------

### Air and Additional Equipment

	LUCAS 1 Chest Compression System	
21996-000061	LUCAS Extension Hose (11.5')	\$214.56
11996-000278	LUCAS Connector – Chemetron Air	\$226.39
11996-000279	LUCAS Connector – Ohmeda Air	\$226.39
11996-000280	LUCAS Connector – Puritan Bennet Air	\$226.39
11996-000281	LUCAS Connector – Diss Air	\$226.39
11996-000282	LUCAS Connector – Schrader Air	\$226.39
11996-000283	LUCAS Connector – Oxequip Air	\$226.39
	LUCAS 1 & 2 Chest Compression System	
11576-000064	PCI Back Plate	\$2,412.06

### LIFEPAK 500 AED

11141-000158	LIFEPAK 500 LiSO2 battery	\$207.29
50999-000181	Supply Replenishment - LP500	\$99.50

### Testing & Training

11113-000002	QUIK-COMBO Test plug	\$14.81
11996-000310	QUIK-COMBO 3-lead patient simulator	\$542.71
11996-000311	QUIK-COMBO 12-lead patient simulator	\$627.14
11998-000011	QUIK-COMBO Test Post adapter kit	\$63.50
21330-001365	Test Load	\$63.83
11998-000060	Defib checker for hard paddles	\$194.24

PHYSIO-CONTROL PROPRIETARY AND CONFIDENTIAL — FOR PHYSIO-CONTROL CUSTOMER USE ONLY

For further information, please contact your local Physio-Control representative or visit [www.physio-control.com](http://www.physio-control.com).

For further information, please contact Physio-Control at 800.442.1142 (U.S.) or visit our website at [www.physio-control.com](http://www.physio-control.com)

---



Physio-Control Headquarters  
11811 Willows Road NE  
Redmond, WA 98052  
[www.physio-control.com](http://www.physio-control.com)

*Customer Support*  
P. O. Box 97006  
Redmond, WA 98073  
Toll free 800.442.1142  
Fax 800.426.8049

---

©2015 Physio-Control, Inc. Specifications subject to change without notice.  
GDR 3304860 K