

**PRICE SCHEDULE – IFB 21-B0003**  
**Category A: Soft Goods/Supplies**

No substitutions will be allowed on items that are clearly marked “No Exceptions.” All information must be completed for category to be considered responsive. In the event of a future item shortage, Bidder should list vendor-suggested substitutions (where available.) The City will be the sole judge in determining the acceptability of substitutions.

<b>Item</b>	<b>Item Description</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>	<b>Vendor-Suggested Substitution</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>
1	Board IV Padded Long Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Board IV Padded Long Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
2	Board IV Padded Short Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Board IV Padded Short Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
3	Plastic Blunt Needle Cannula Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Plastic Blunt Needle Cannula Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
4	Pressure Infuser 1000cc Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Pressure Infuser 1000cc Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
5	Container Sharps 1.4 QT SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Container Sharps 1.4 QT SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
6	Dressing Venigard Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dressing Venigard Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

7	Dressing Venigard JR Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dressing Venigard JR Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
8	Bag Bio Hazard LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bag Bio Hazard LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
9	Bag Bio Hazard SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bag Bio Hazard SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
10	Mask Heppa Adult 8610 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Mask Heppa Adult 8610 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
11	Mask Surgical with Shield Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Mask Surgical with Shield Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
12	Gown Medical Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gown Medical Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
13	Gloves Sterile XL Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloves Sterile XL Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

14	Gloves Sterile LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloves Sterile LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
15	Gloves Sterile MD Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloves Sterile MD Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
16	Gloves Sterile SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloves Sterile SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
17	Acetaminophen Liquid 325mg Individual Children's Dosage – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Acetaminophen Liquid 325 mg Individual Children's Dosage – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
18	Bag Emesis Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bag Emesis Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
19	Basin Emesis 500cc Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Basin Emesis 500cc Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
20	Pan Bed Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Pan Bed Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

21	Urinal Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Urinal Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
22	Lancets Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Lancets Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
23	Penlight Diagnostic Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Penlight Diagnostic Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
24	Depressor Tongue Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Depressor Tongue Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
25	Thermometer Rectal Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Thermometer Rectal Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
26	Cutter Ring Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cutter Ring Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
27	Cutter Ring Blade Replacement Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cutter Ring Blade Replacement Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

28	Razor Prep Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Razor Prep Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
29	O2 Regulator Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	O2 Regulator Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
30	Cuff BP Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
31	Cuff BP Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
32	Cuff BP Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
33	Cuff BP Thigh Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Thigh Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
34	Bougie Adult 15 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bougie Adult 15 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

35	Bougie Pediatric 10 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bougie Pediatric 10 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
36	Laryngoscope Handle Intubrite E-Flex Pistol Grip IB1010 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Laryngoscope Handle Intubrite E-Flex Pistol Grip IB1010 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
37	Board Back Custom Lettering Yellow Only – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Board Back Custom Lettering Yellow Only – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
38	Ked Extrication Device Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Ked Extrication Device Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
39	Splint Traction Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Splint Traction Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
40	Cuff BP Disposable Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Disposable Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
41	Cuff BP Disposable Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Disposable Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

42	Cuff BP Disposable Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Disposable Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
43	Cuff BP Disposable Adult SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Disposable Adult SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
44	Cuff BP Disposable Thigh Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cuff BP Disposable Thigh Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
45	Paper ECG for Lifepak15 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Paper ECG for Lifepak15 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
46	Electrode Adult AMBU – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Electrode Adult AMBU – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
47	Pad Alcohol Prep Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Pad Alcohol Prep Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
48	Povidone Iodine Prep Pad Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Povidone Iodine Prep Pad Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

49	Cloth Disposable Germicidal Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cloth Disposable Germicidal Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
50	Towellette Hand Antiseptic Paws Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Towellette Hand Antiseptic Paws Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
51	Gloves Medical MD Apex Pro LC100 White with Black Interior- No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloved Medical MD Apex Pro LC100 White with Black Interior – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
52	Gloves Medical SM Apex Pro LC100 White with Black Interior – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloves Medical SM Apex Pro LC100 White with Black Interior – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
53	Gloves Medical XL Apex Pro LC100 White with Black Interior – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloves Medical XL Apex Pro LC100 White with Black Interior – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
54	Gloves Medical 2X Apex Pro LC100 White with Black Interior – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gloves Medical 2X Apex Pro LC100 White with Black Interior – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____



55	Gloves Medical LG Apex Pro LC100 White with Black Interior – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Gloves Medical LG Apex Pro LC100 White with Black Interior – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
56	Mask Face Ear Loop  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Mask Face Ear Loop  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
57	Test Strips Blood Glucose Level Fast Take  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Test Strips Blood Glucose Level Fast Take  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
58	Glucometers  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Glucometers  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
59	Glucose Oral 15 GM  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Glucose Oral 15 GM  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
60	Lubricating Jelly 3 GM  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Lubricating Jelly 3 GM  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
62	Cover Thermometer Thermoscan Welch Allyn – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Cover Thermometer Thermoscan Welch Allyn – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____

63	Bite Stick Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bite Stick Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
64	Inhalant Ammonia Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Inhalant Ammonia Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
65	Pad Abdominal 8x10 Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Pad Abdominal 8x10 Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
66	Bandaid Adhesive Strip Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bandaid Adhesive Strip Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
67	Seal Chest Halo Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Seal Chest Halo Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
68	Dressing Non Adhering Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dressing Non Adhering Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
69	Sponge Versalon 4x4 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Sponge Versalon 4x4 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

70	Dressing Gauze Petrolatum 3x9 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dressing Gauze Petrolatum 3x9 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
71	Bandage Elastic 2 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bandage Elastic 2 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
72	Bandage Elastic 4 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bandage Elastic 4 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
73	Blanket Mylar Emergency Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blanket Mylar Emergency Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
74	Blanket Insulated Emergency 56x90 IN – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blanket Insulated Emergency 56x90 IN – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
75	Pack Cold Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Pack Cold Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
76	Tape 3 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tape 3 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

77	Water Sterile 250ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Water Sterile 250ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
78	Tourniquet Cat North American Rescue Orange – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tourniquet Cat North American Rescue Orange – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
79	Gauze Quick Clot EMS – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Gauze Quick Clot EMS – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
80	CPAP Max with Nebulizer Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	CPAP Max with Nebulizer Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
81	Cannula Nasal Adult Curved Tip – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cannula Nasal Adult Curved Tip – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
82	O2 Tubing 7 FT Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	O2 Tubing 7 FT Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
83	Stethoscope Proscope 670 ADC 6038D – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Stethoscope Proscope 670ADC 6038D – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

84	Stethoscope Ambulance Adscope 63 ADC 603BD – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Stethoscope Ambulance Adscope 63 ADC 603BD – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
85	Canister Suction with Lid 1200ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Canister Suction with Lid 1200ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
86	Hose Suction 6 FT Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Hose Suction 6 FT Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
87	Big Stick Suction Tip Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Big Stick Suction Tip Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
88	Aspirator Meconium Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Aspirator Meconium Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
89	Strap Board Back 5 FT Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Strap Board Back 5 FT Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
90	Collar Extrication Adult Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Collar Extrication Adult Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

91	Collar Extrication Pediatric Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Collar Extrication Pediatric Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
92	Immobilizer Head Laerdal Sta-Blok – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Immobilizer Head Laerdal Sta-Blok – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
93	Holder Limb Wrist (2) Posey 2790 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Holder Limb Wrist (2) Posey 2790 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
94	Holder Limb Ankle (2) Posey 2791 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Holder Limb Ankle (2) Posey 2791 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
95	Prosplint Combo Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Combo Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
96	Prosplint Arm Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Arm Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
97	Prosplint Leg Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Leg Adult LG Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

98	Prosplint Arm Adult SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Arm Adult SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
99	Prosplint Leg Adult SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Leg Adult SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
100	Prosplint Wrist Forearm Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Wrist Forearm Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
101	Prosplint Combo Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Combo Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
102	Prosplint Arm Child Full Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Arm Child Full Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
103	Prosplint Leg Child Full Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Leg Child Full Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
104	Prosplint Wrist Forearm Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Prosplint Wrist Forearm Child Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

105	Bag Prosplint Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bag Prosplint Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
106	Hitch Ankle Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Hitch Ankle Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
107	Dressing Multi Trauma 12x30 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dressing Multi Trauma 12x30 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
108	Bandage Triangle Cravat Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bandage Triangle Cravat Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
109	Pad Eye Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Pad Eye Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
110	Bandage Conforming Stretch 2 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bandage Conforming Stretch 2 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
111	Bandage Conforming Stretch 4 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bandage Conforming Stretch 4 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____



112	Sheet Burn Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Sheet Burn Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
113	Kit OB Soft Pack Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Kit OB Soft Pack Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
114	Shears Medic Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Shears Medic Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
115	Shears Bandage Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Shears Bandage Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
116	Tape 1 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tape 1 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
117	Tape 2 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tape 2 IN Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
118	Sam Splint 36 x 4.25 IN Orange/Blue Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Sam Splint 36 x 4.25 IN Orange/Blue Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

119	Disposable Ear Probe Covers Thermoscan Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Disposable EAR Probe Covers Thermoscan Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
120	Disposable Suretemp Probe Covers Welch Allyn – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Disposable Suretemp Probe Covers Welch Allyn – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
121	Mega Mover Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Mega Mover Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
122	Mucosal Atomization Device without Syringe MAD300 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Mucosal Atomization Device without Syringe MAD300 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
<b>Grand Total (Lines 1 – 122)</b>		\$ _____				

**Company Name:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**PRICE SCHEDULE – IFB 21-B0003**  
**Category B: Medications**

No substitutions will be allowed on items that are clearly marked “No Exceptions.” All information must be completed for category to be considered responsive. In the event of a future item shortage, Bidder should list vendor-suggested substitutions (where available.) The City will be the sole judge in determining the acceptability of substitutions.

<b>Item</b>	<b>Item Description</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>	<b>Vendor-Suggested Substitution</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>
1	Dopamine 400mg Premix Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dopamine 400mg Premix Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
2	Adenosine 6mg Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Adenosine 6mg Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
3	Albuterol Neb Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Albuterol Neb Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
4	Amiodarone 150mg Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Amiodarone 150mg Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
5	Atropine 1mg Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Atropine 1mg Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
6	Calcium Gluconate 1g Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Calcium Gluconate 1g Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

7	Dextrose 50% 50ml Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dextrose 50% 50ml Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
8	Diltiazem 25 mg/5ml Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Diltiazem 25 mg/5ml Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
9	Diphenhydramine 50 MG Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Diphenhydramine 50 MG Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
10	Dopamine 800mg Premix IV Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dopamine 800mg Premix IV Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
11	Duoneb Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Duoneb Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
12	Epinephrine 1mg AMP (1:1000) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Epinephrine 1mg AMP (1:1000) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

13	Epinephrine 1mg Syringe (1:1000) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Epinephrine 1mg Syringe (1:1000) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
14	Furosemide 40mg Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Furosemide 40mg Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
15	Dopamine 400mg Premix Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dopamine 400mg Premix Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
16	Glucagon 1mg Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Glucagon 1mg Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
17	Labetolol 100mg Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Labetolol 100mg Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
18	Lidocaine 100mg Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Lidocaine 100mg Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

19	Magnesium Sulfate 1gmVials Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Magnesium Sulfate 1gm Vials Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
20	Narcan 2mg Injection/2ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Narcan 2mg Injection/2ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
21	Nitromist 400mcg Spray 8.5 GM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Nitromist 400mcg Spray 8.5 GM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
22	Nitrostat 0.4 mg Tabs (4 BTL of 25) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Nitrostat 0.4 mg Tabs (4 BTL of 25) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
23	Ondansetron Vial 4mg/2ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Ondansetron Vial 4mg/2ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
24	Racemic Epinephrine Solution 2.25% Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Racemic Epinephrine Solution 2.25% Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

25	Sodium Bicarb 50 MEQ Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Sodium Bicarb 50 MEQ Syringe Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
26	Solu Medrol 125mg/2ml Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Solu Medrol 125mg/2ml Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
27	Thiamine 100mg Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Thiamine 100mg Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
28	Cefepime 2gm Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cefepime 2gm Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
29	Ceftriaxone 2gm Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Ceftriaxone 2gm Injection Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
30	Vancomycin 1gm Infusion Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Vancomycin 1gm Infusion Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

31	Adrenalin (Epinephrine) 1mg 1ml Vial (1:1000) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Adrenalin (Epinephrine) 1mg 1ml Vial (1:1000) Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
32	Cyanokit including 5gm Hydroxocobalamin with 1 IV Admin set and 1 Transfer Spike Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Cyanokit including 5gm Hydroxocobalamin with 1 IV Admin set and 1 Transfer Spike Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
33	Dextrose 50% 50ml Injection Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Dextrose 50% 50ml Injection Vial Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
<b>Grand Total (Lines 1 – 33)</b>		\$ _____				

**Company Name:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_



**PRICE SCHEDULE – IFB 21-B0003**

**Category C: Airways**

No substitutions will be allowed on items that are clearly marked “No Exceptions.” All information must be completed for category to be considered responsive. In the event of a future item shortage, Bidder should list vendor-suggested substitutions (where available.) The City will be the sole judge in determining the acceptability of substitutions.

<b>Item</b>	<b>Item Description</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>	<b>Vendor-Suggested Substitution</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>
1	Tube ET 2.5 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube ET 2.5 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
2	Tube ET 3.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube ET 3.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
3	Tube ET 4.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube ET 4.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
4	Tube ET 5.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube Et 5.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
5	Tube ET 6.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube ET 6.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
6	Tube ET 7.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube ET 7.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

7	Tube ET 8.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube ET 8.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
8	Tube ET 9.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tube ET 9.0 Rousch – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
9	Bulb ET CK Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bulb ET CK Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
10	Holder Tube ET Adult Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Holder Tube ET Adult Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
11	Holder Tube ET Pediatric Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Holder Tube ET Pediatric Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
12	Airway King LTD SZ 5 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway King LTD SZ 5 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
13	Airway King LTD SZ 4 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway King LTD SZ 4 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

14	Airway King LTD SZ 3 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway King LTD SZ 3 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
15	Airway King LTD SZ 2.5 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway King LTD SZ 2.5 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
16	Airway King LTD SZ 2 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway King LTD SZ 2 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
17	Airway King LTD SZ 0 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway King LTD SZ 0 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
18	Airway King LTD SZ 1 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway King LTD SZ 1 Ambu – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
19	Blade King Vision Channeled Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade King Vision Channeled Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

20	Airway Nasal 14 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 14 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
21	Airway Nasal 16 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 16 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
22	Airway Nasal 18 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 18 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
23	Airway Nasal 20 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 20 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
24	Airway Nasal 22 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 22 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
25	Airway Nasal 24 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 24 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____

26	Airway Nasal 26 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 26 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
27	Airway Nasal 28 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 28 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
28	Airway Nasal 30 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 30 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
29	Airway Nasal 32 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 32 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
30	Airway Nasal 34 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Airway Nasal 34 FR Individually Wrapped – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
31	Nebulizer Adult  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Nebulizer Adult  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____

32	Mask Non Rebreather Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Mask Non Rebreather Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
33	Mask Non Rebreather Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Mask Non Rebreather Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
34	O2 Humidifier 300ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	O2 Humidifier 300ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
35	O2 Cylinder Wrench SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	O2 Cylinder Wrench SM Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
36	Airway Oral 40mm Infant Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway Oral 40mm Infant Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
37	Airway Oral 60mm Pediatric Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway Oral 60mm Pediatric Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
38	Airway Oral 80mm Adult SM Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway Oral 80mm Adult SM Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

39	Airway Oral 90mm Adult MD Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway Oral 90mm Adult MD Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
40	Airway Oral 100mm Adult LG Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway Oral 100mm Adult LG Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
41	Airway Oral 110mm Adult XL Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Airway Oral 110mm Adult XL Individually Wrapped – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
42	Catheter Suction 10 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Catheter Suction 10 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
43	Catheter Suction 12 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Catheter Suction 12 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
44	Catheter Suction 14 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Catheter Suction 14 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
45	Catheter Suction 16 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Catheter Suction 16 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

46	Catheter Suction 18 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Catheter Suction 18 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
47	Catheter Suction 6 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Catheter Suction 6 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
48	Catheter Suction 8 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Catheter Suction 8 FR Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
49	Lateral V-Vac Portable Suction Unit Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Lateral V-Vac Portable Suction Unit Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
50	Portable Suction Replacement Cartridge Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Portable Suction Replacement Cartridge Laerdal – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
<b>Grand Total (Lines 1 – 50)</b>		\$ _____				

**Company Name:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_



**PRICE SCHEDULE – IFB 21-B0003**  
**Category D: Needles and Fluids**

No substitutions will be allowed on items that are clearly marked “No Exceptions.” All information must be completed for category to be considered responsive. In the event of a future item shortage, Bidder should list vendor-suggested substitutions (where available.) The City will be the sole judge in determining the acceptability of substitutions.

<b>Item</b>	<b>Item Description</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>	<b>Vendor-Suggested Substitution</b>	<b>Price per Each</b>	<b>Price per Multi-Unit Packaging</b>
1	Needle Safety 18 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle Safety 18 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
2	Needle Safety 23 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle Safety 23 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
3	Needle Safety 25 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle Safety 25 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
4	Needle Decompression 14 GA – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle Decompression 14 GA – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
5	Needle Intraosseous 18 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle Intraosseous 18 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

6	Needle IV Catheter 14 GA Jelco Medex #3048 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle IV Catheter 14 GA Jelco Medex #3408 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
7	Needle IV Catheter 16 GA Jelco Medex #3042 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle IV Catheter 16 GA Jelco Medex #3402 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
8	Needle IV Catheter 18 GA Jelco Medex #3055 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle IV Catheter 18 GA Jelco Medex #3055 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
9	Needle IV Catheter 20 GA Jelco Medex #3056 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle IV Catheter 20 GA Jelco Medex #3056 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
10	Needle IV Catheter 22 GA Jelco Medex #3050 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle IV Catheter 22 GA Jelco Medex #3050 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
11	Needle IV Catheter 24 GA Jelco Medex #3053 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle IV Catheter 24 GA Jelco Medex #3053 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

12	Tubing IV Extension Loops 8 IN Amsino AE3108 – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Tubing IV Extension Loops 8 IN Amsino AE3108 – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
13	Container Sharps 5 QT LG  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Container Sharps 5 QT LG  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
14	Syringe 1cc Safety Needle Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Syringe 1cc Safety Needle Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
15	Syringe 10cc Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Syringe 10cc Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
16	Syringe 20cc Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Syringe 20cc Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
17	Syringe 50cc Luer Slip – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Syringe 50cc Luer Slip – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____
18	Syringe Interline 3cc Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____	Syringe Interline 3cc Luer Lock – No Exceptions  Brand: _____  Vendor Item #: _____	\$ _____	\$ _____  Sold as: _____

19	Syringe Prefill NaCL 10cc – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Syringe Prefill NaCL 10cc – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
20	Bag Valve Mask Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bag Valve Mask Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
21	Bag Valve Mask Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bag Valve Mask Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
22	Bag Valve Mask Infant Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Bab Valve Mask Infant Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
23	Blade Mac #1 Infant INT-1021B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Mac #1 Infant INT-1021B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
24	Blade Mac #2 Child INT-1022B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Mac #2 Child INT-1022B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
25	Blade Mac #3 Adult MD INT-1023B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Mac #3 Adult MD INT-1023 – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

26	Blade Mac #4 Adult LG INT-1024B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Mac #4 Adult LG INT-1024B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
27	Blade Miller #0 Newborn INT-1030B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Miller #0 Newborn INT-1030B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
28	Blade Miller #1 Infant INT-1031B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Miller #1 Infant INT-1031B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
29	Blade Miller #2 Child INT-1032B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Miller #2 Child INT-1032B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
30	Blade Miller #3 Adult MD INT-1033B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Miller #3 Adult MD INT-1033B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
31	Blade Miller #4 Adult LG INT-1034B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Blade Miller #4 Adult LG INT-1034B – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

32	Forceps Magill Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Forceps Magill Adult Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
33	Forceps Magill Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Forceps Magill Pediatric Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
34	Fluid IV NaCL 1000ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Fluid IV NaCL 1000ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
35	Fluid IV NaCL 250ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Fluid IV NaCL 250ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
36	Fluid IV NaCL 50ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Fluid IV NaCL 50ml Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
37	Needle Intraosseous 15 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Needle Intraosseous 15 GA Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
38	Set IV Drip 10gtts Amsino – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Set IV Drip 10gtts Amsino – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____

39	Set IV Drip 60gtts Amsino – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Set IV Drip 60gtts Amsino – No Exceptions Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
40	Kit IV Start Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Kit IV Start Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
41	Tourniquets 1x18 Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Tourniquets 1x18 Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
42	Filter Needles 1.5 IN 5 Micron 18g Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Filter Needles 1.5 IN 5 Micron 18g Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
43	Anti-Stick Needle Connectors Plastic Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____	Anti-Stick Needle Connectors Plastic Brand: _____ Vendor Item #: _____	\$ _____	\$ _____ Sold as: _____
<b>Grand Total (Lines 1 – 43)</b>		\$ _____				

**Company Name:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_