

# REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/Ord No.: 20070

Sponsor(s): Crystal Williams

Date: December 3, 2018

<b>SUBJECT</b>	<p>Action Requested  <input checked="" type="checkbox"/> Resolution  <input type="checkbox"/> Ordinance</p> <p><b>Project/Title:</b>          Requesting the transfer of \$68,743 within the Medical Examiner's budget for the purchase of digital xray equipment.</p>												
<b>BUDGET INFORMATION</b> <i>To be completed By Requesting Department and Finance</i>	<table border="1" data-bbox="310 611 1349 957"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$68,743.</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$68,743.</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$0</td> </tr> <tr> <td>Source of funding (name of fund) and account code number; FROM: 002-2001 56570 Health Fund, MEO, Maint &amp; Repair Misc</td> <td>FROM ACCT \$68,743.</td> </tr> <tr> <td>TO: 002-2001 58170 Health Fund, MEO, Other Equipment</td> <td>TO ACCT \$68,743.</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p><b>OTHER FINANCIAL INFORMATION:</b></p> <p><input checked="" type="checkbox"/> No budget impact (no fiscal note required)  <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract:          Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable): \$          Prior Year Actual Amount Spent (if applicable): \$</p>	Amount authorized by this legislation this fiscal year:	\$68,743.	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$68,743.	Amount budgeted for this item * (including transfers):	\$0	Source of funding (name of fund) and account code number; FROM: 002-2001 56570 Health Fund, MEO, Maint & Repair Misc	FROM ACCT \$68,743.	TO: 002-2001 58170 Health Fund, MEO, Other Equipment	TO ACCT \$68,743.
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<b>PRIOR LEGISLATION.</b>	<p>Prior ordinances and (date):          Prior resolutions and (date): Ord 5174 11/26/18</p>												
<b>CONTACT INFORMATION</b>	<p>RLA drafted by (name, title, &amp; phone): Kandi Brooke, Administrative Supervisor for Dr. Diane Peterson, Chief Medical Examiner (816) 881-6600</p>												
<b>REQUEST SUMMARY</b>	<p>Requesting the transfer of \$68,743 within the Medical Examiner's budget for the purchase of digital xray equipment DR System, GE AMX 4, and Fuji T2 CR Imaging</p>												
<b>CLEARANCE</b>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing &amp; Department)  <input type="checkbox"/> Business License Verified (Purchasing &amp; Department)  <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>												

ATTACHMENTS	Quote for DR System (\$27,943.75), GE AMX 4 (\$19,000), and Fuji T2 CR Imaging (\$21,800)
REVIEW	Department Director: <i>Diane Peterson MD</i> Date: <i>11/28/2018</i>
	Finance (Budget Approval): <i>If applicable</i> <i>[Signature]</i> Date: <i>11/28/18</i>
	Division Manager: <i>[Signature]</i> Date: <i>11-28-18</i>
	County Counselor's Office: Date:

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the \_\_\_\_\_ Fund in \_\_\_\_.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance #
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.





**OFFICE OF THE JACKSON COUNTY MEDICAL EXAMINER**

950 East 21<sup>st</sup> Street  
Kansas City, Missouri 64108  
(816) 881-6600  
(816) 881-6641 fax

To: Barbara Casamento, Purchasing

From: Diane C. Peterson, MD, Chief Medical Examiner

Re: Emergency Purchase of new x-ray equipment

The Medical Examiner Office had a previous ordinance to repair our broken x-ray equipment (Ordinance 5174). However, in the time between initial request and passage, our office was made aware of the limited lifespan of the machine, even after repair. Therefore, we request funds to be moved from 6570 Maintenance & Repair to 8170 Other Equipment for the emergency purchase of new machine and readers. We have been using our KCRMORG x-ray to get by, but it is not ideal as it does not fit our x-ray table.

We would like to complete this purchase this budget year with currently available funds. Transfer of funds within our budget is sufficient. No outside funds will be necessary.

If you have any questions, please let me know.

Thank you,

A handwritten signature in cursive script, reading "Diane C. Peterson MD".

Diane C. Peterson, MD  
Chief Medical Examiner

\$ 19,000.<sup>00</sup>

**SALES QUOTATION**

<b>QUOTE #</b>	RADQ4225
<b>DATE</b>	11/8/2018
<b>VALID THROUGH</b>	12/8/2018



<b>Account Manager</b>	Nancy Briney
<b>Phone</b>	816-741-5558
<b>Email</b>	nbriney@radsourcenet.com

**CUSTOMER DETAILS**

**Jackson County Medical Examine**

JACKSON CO MED EXAM-2062-MO  
 950 EAST 21ST STREET  
 KANSAS CITY, MO 64108

Bill To:

**Dr Diane Peterson / Medical Examin**

Phone (816)881-6600  
 Email KBrooke@jacksongov.org  
 GPO:

Ship To:

Part Number	Unit Price	Qty	Ext. Price
<b>Platinum Select GE AMX-4+ Portable System</b>			

**GE AMX 4 Portable Include:**

- MX-75 275k HU X-ray tube with a .75mm focal spot
- GE AMX-IV collimator
- High-quality image
- Forward and reverse variable speed
- Completely mobile
- LED display
- Operates at full power with no power connection
- 24 kVp stations
- 30 mAs stations
- 100 mA constant
- kVp 50-125
- mAs 0.4-320

10,000

Part Number	Unit Price	Qty	Ext. Price
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**Dimensions**

- Size (height x width x length): 76" (1,930 mm) x 25 3/16 (640 mm) x 45 3/8" (1,153 mm)
- Weight: 1,050 lbs (477 kg)

**Battery**

Nine 12.9 volt batteries connected in series provide approximately 116 volt at full charge. Battery capacity is approximately 20,000 mAs at 100 kVp when fully charged and under specific conditions. Actual mAs capacity depends on the condition of the batteries, use of collimator lamp, electric brakes, rotor, and distance driven.

**Movements (tube vertical movement measured at the focal spot)**

- Range: At least 52.5" (1,334 mm)
- Lowest position: 26.1" (663 mm) maximum from floor
- Highest position: 78.6" (1,996 mm) minimum from floor
- Horizontal movement measured at focal spot relative to column face: 24" (610 mm) minimum to 40" (1,016 mm) maximum
- Tube column rotation measured from horizontal latch: 360°
- Tube and yoke rotation around horizontal arm measured from tube port down position: Range (360°), detent locations (0, ±90°, ±180°)
- Tube trunion rotation measured from tube port down position: Range (120°), forward (110°), backward (10°), detent (0°, 90°)
- Collimator rotation measured from the front of the collimator with the tube port facing down: Range (180°), right (90°), left (90°), detent (0°, 90°)

**Drive Speeds**

Speed 1: Drive speed with horizontal arm secured for support - 264' (6.705 mm) per minute ±25%

Speed 2: Maneuvering speed with horizontal tube arm removed from the transport latch - (30% to 60% of drive speed)

\*Drive speed is measured on a smooth, hard and level surface. Speed will be reduced by inclines, carpeted or soft surfaces.

**Reproducibility**

Coefficient of variation of radiation output is less than 0.045 for successive exposures having constant technique factors.



Part Number	Unit Price	Qty	Ext. Price
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**Collimator**

Minimum source to skin distance is limited to more than 30 cm by the skin spacers at the beam exit of the collimator. Full 17" x 17" (43 cm x 43 cm) radiographic coverage at 40" (1.02 mm) source to image distance. Minimum inherent filtration of 2.0 mm aluminum equivalent at 100 kVp.

*\*Note: If purchased with a Used CR or New DR panel AMX IV will be priced at \$19,000*

19000

**System Purchase Price: \$20,000.00**

Taxes and Freight charges will be included in the final invoice if not specified on this quotation.

Tax Exempt: YES / NO (please circle one)  
If yes, we will require a copy of your tax exempt certificate.

Subtotal	\$20,000.00
Sales Tax	
Shipping	
<b>Grand Total</b>	<b>\$20,000.00</b>

Please choose / check by one of the following:

**Deposit Required \$10,000.00**

Funding Source:  **Cash**  **Credit Card**  **Bank Loan**  **Lease**

Credit Card Name: \_\_\_\_\_  
 Credit Card Number: \_\_\_\_\_  
 Name of Bank: \_\_\_\_\_  
 Lessor: \_\_\_\_\_

*\*If order is being leased, a Leasing Company's Purchase Order is required.*

**Payment Terms:**

The terms stated in this agreement are an important part of this business/purchase agreement. The buyer certifies and agrees to the stated payment terms and agrees that they or their purchasing organization will carry them out as stated in this agreement.

50% due with signed buyer's agreement, 40% due 10-Business Days prior to the scheduled installation of this equipment, remaining 10% due upon completion of installation.

Additional convenience fee of 3% will be added to all invoices paid by approved credit card.

Pricing contained within this proposal excludes shipping and applicable taxes. Shipping charges are pre-paid by RadSource and shall be added to the buyer's final invoice. Any applicable taxes are the responsibility of the buyer. If the buyer is tax-exempt, RadSource Imaging will require a copy of their tax exempt certificate.

System(s) installation will be scheduled on a mutually agreeable date. Installation will not begin until the (first and second) progress payments have been submitted to RadSource Imaging Technologies, Inc.

**Warranty:**

GE AMX IV PARTS WARRANTY:

Twelve (36) months full warranty, for all parts, including X-ray tube, and batteries.

36

All warranties are subject to manufacturer's terms and conditions. Service hours of warranty coverage are Monday through Friday from 8:00 AM to 5:00 PM excluding holidays.

Extended warranty Information available under separate cover.

**Warranty Exclusions:**

DR Drop Protection excluded if applicable. Warranty does not cover damage caused by any act of God, war, terrorism, normal wear and tear, dropping or impact, neglect, power spikes or surges that might potentially damage the equipment's internal components, loss of power, water, smoke, fire, fire suppressant, high winds, lightning strikes, viruses, tampering, operator abuse or use other than what the equipment is intended to be used for. Warranty is non-transferrable. RadSource Imaging Technologies, Inc. is not responsible for lost revenue due to down time.

DR panel drop protection not included in system warranty.

**Notes:**

Upon acceptance by both parties, as indicated by their signatures below, this Quotation shall become a binding Sales Contract between BUYER and SELLER.

Installation will be performed during RadSource Imaging Technologies normal operational hours, Monday through Friday, 8:00AM to 5:00PM. Requests for overtime installation services will need to be approved by RadSource Imaging Technologies Service Manager. RadSource Imaging Technologies prevailing overtime rates will apply, times the number of men required to perform the required installation.

**Buyer Site Preparation and Installation:**

Buyer is responsible for all site and/or room preparation including but not limited to Electrical, Plumbing, Overhead Support Work, Power Access, and providing the necessary Networking Access. Professional room drawings can be provided by RadSource Imaging Technologies Inc. upon customer's request with purchase of equipment from RadSource. Drawings will be started once down payment is received. The area where the X-ray equipment is to be installed will need to be completely finished including paint, baseboards, ceiling etc. before the equipment installation can take place.

Quoted Prices and specifications are subject to change without notice prior to signed buyers agreement. Service Agreement Options are available to protect your purchase after the initial warranty has expired.

During or following installation, a RadSource employee may take photographs of the system being installed at your facility along with an image of the outside of your facility to include on their website's installation gallery ([www.radsourcenet.com/installation-gallery/](http://www.radsourcenet.com/installation-gallery/)). By signing this agreement, you agree to grant to RadSource, permission to use, reuse, publish, and republish any photographs that they have taken, or may take of your facility, or the equipment installed at your facility. (RadSource will never take photographs of people, or any other hospital, patient or other confidential information.) The photographs can be used in any and all media now or hereafter, including the internet, for the purpose of promoting our installation process at your facility; and to use your company name in connection with any images RadSource so chooses to use. You agree to release and discharge RadSource from any and all claims and demands that may arise out of or in connection with the use of the photographs.

**CUSTOMER ACCEPTANCE**

**RADSOURCE ACCEPTANCE**

<b>NAME</b>	_____
<b>SIGN</b>	_____
<b>DATE</b>	_____

<b>NAME</b>	_____
<b>SIGN</b>	_____
<b>DATE</b>	_____

**Thank You For Your Business!**



\$27,943.75



8121 NW Terrace, Kansas City, MO 64153  
Phone: 816-741-5558 Fax: 816-587-2423

Visit Us Online At:  
[www.radsourcenet.com](http://www.radsourcenet.com)

### SALES QUOTATION

QUOTE #	RADQ4226
DATE	11/8/2018
VALID THROUGH	12/8/2018



Account Manager	Nancy Briney
Phone	816-741-5558
Email	nbriney@radsourcenet.com

### CUSTOMER DETAILS

#### Jackson County Medical Examine

JACKSON CO MED EXAM-2062-MO  
950 EAST 21ST STREET  
KANSAS CITY, MO 64108

Bill To:

#### Dr Diane Peterson / Medical Examin

Phone (816)881-6600  
Email KBrooke@jacksongov.org  
GPO:

Ship To:

Part Number		Unit Price	Qty	Ext. Price
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#### **New Vieworks VIVIX-S DR 14x17V Wireless Gadox DR System**

HV6056	VIVIX .S View DR 14x17 Wireless Gadox Panel . Scintillator: Amorphous Silicon Gadolinium Oxysulfide Gd.O.S:Tb (Gadox) <i>Scintillator Amorphous Silicon: Gadolinium Oxysulfide Gd.O.S:Tb (Gadox)</i>	\$27,200.00	1	\$27,200.00
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ALTO DR™ 14x17 Wireless Detectors Include:  
14x17 Wireless Flat Panel Detector, System Control Unit (SCU), Battery Charger, Battery Pack, Image Processing Viewer Software, Cables, and Acquisition Workstation.

- Detection Area: 14x17 inch (35cm x 43cm)  
Dimensions: 18.1"W x 15.1"L x .59"D (46 x 38.4 x 1.5 cm)
- Pixels: 2560 x 3072
  - Pixel Pitch: 140 µm x 140 µm
  - Scintillator: Cesium (CsI:TI) or Gadox (Gd2O2S:Tb)
  - Grayscale: 16,384
  - A/D Conversion: 14 bit
  - X-Ray Voltage Range: 40-150 kVp
  - Weight: 7.27 lbs./3.3 kg. (CsI) or 6.83 lbs./3.1 kg. (Gadox)
  - Power: 7.4V 4000mAh Lithium Ion Polymer Battery

Part Number		Unit Price	Qty	Ext. Price
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**DR ACQUISITION  
WORKSTATION**

**Acquisition Workstation**

*Acquisition Hardware:*

- Intel Core i3 Processor 6100 CPU (3.7GHz)
- 4 GB. Windows 7 Professional 64-bit
- 1 TB Local Mini-PACs in a RAID 1 (2 drives total)
- Professional Monitor: 22 in. Touch Screen Resolution: 1920 X 1080, full HD Ratio: 1000:1 (typical)

*VxVue Imaging Acquisition Software:*

- Viewers - 5 (LAN) Local Area Network Clinical Viewing Licenses
- AED Technology - Automatic Exposure Detection: No Generator Interfacing is required, as the AED Feature instantly detects x-ray upon exposure and then completes the acquisition process for review and transfer of studies to PACS
- DICOM Store/Transfer to PACS, Auto-Routing and Scheduled periodic back-up
- Image Preview - in 3 seconds
- Customizable Anatomical exam tree and image processing parameters.
- Image Acquisition + QC (brightness/contrast, window/level, flip, rotate, zoom, annotations, measurements, pan, mag, crop, invert, line measurement, angle measurement, text, arrow, L&R Markers, clockwise rotation, counter-clockwise rotation.)
- Patient Registration - Manually or DICOM Modality Worklist. DICOM Modality Worklist is a standard feature and is available for use provided that the EMR/EHR/RIS accommodates Modality Worklist.
- Print: DICOM Printer or Desk Top Paper Printer.
- Stitching: Manual and Auto.
- Archive: CD/DVD - Archive to removable drive.
- Export Images as, JPEG, TIFF, BMP, and DICOM with or without Viewer to CD or other media.
- Patient Size Selection: Pediatric, Small, Medium, Large Adult.
- Black Surround Fill

**APPS 2.0**

**2 Days Applications Training Included in purchase price.**

	<b>System Purchase Price</b>	<b>\$27,200.00</b>
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Part Number		Unit Price	Qty	Ext. Price
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**Optional Items (Please add to system purchase price)**

WDDR14	14X17 WEIGHT DISTRIBUTION CAP (Optional)	\$400.00	1	DP Initials
PH1417	14X17 PROTECT-A-GRID (PLASTIC) ENCASEMENT WITH 2 HANDLES AND DOUBLE RELEASE LOCKS (Optional)	\$743.75	1	DP Initials

Must be ordered with the below "Installed Grid" Cat. #K14102040SD. Please add both prices for the complete Protect-A-Grid Protector and Appropriate Grid set. Specified Grid is built into a durable plastic protective casing.

K14102040SD	14X17 10:1/215/40-72 GRID (SHORT DIMENSION) (Optional)	\$842.50	1	DP Initials
TTDR	TABLETOP DR PANEL HOLDER (Optional)	\$600.00	1	DP Initials

(used for performing lateral tabletop radiographs. Holds the Protect-A-Grid and DR Panel)

If DR is purchased with AMX IV + from RadSource the DR price will be lowered to \$26,200

Taxes and Freight charges will be included in the final invoice if not specified on this quotation.

Tax Exempt: YES / NO (please circle one)  
If yes, we will require a copy of your tax exempt certificate.

Subtotal	\$27,200.00
Sales Tax	
Shipping	
Grand Total	\$27,200.00

Please choose / check by one of the following:

- Funding Source:
- Cash
  - Credit Card
  - Bank Loan
  - Lease

Credit Card Name: \_\_\_\_\_  
 Credit Card Number: 27943.75  
 Name of Bank: \_\_\_\_\_  
 Lessor: \_\_\_\_\_

\*If order is being leased, a Leasing Company's Purchase Order is required.

**Payment Terms:**

The terms stated in this agreement are an important part of this business/purchase agreement. The buyer certifies and agrees to the stated payment terms and agrees that they or their purchasing organization will carry them out as stated in this agreement.

50% due with signed buyer's agreement, 40% due 10-Business Days prior to the scheduled installation of this equipment, remaining 10% due upon completion of installation.

Additional convenience fee of 3% will be added to all invoices paid by approved credit card.

Pricing contained within this proposal excludes shipping and applicable taxes. Shipping charges are pre-paid by RadSource and shall be added to the buyer's final invoice. Any applicable taxes are the responsibility of the buyer. If the buyer is tax-exempt, RadSource Imaging will require a copy of their tax exempt certificate.

System(s) installation will be scheduled on a mutually agreeable date. Installation will not begin until the (first and second) progress payments have been submitted to RadSource Imaging Technologies, Inc.

**Warranty:**

**VIEWWORKS ALTO MANUFACTURERS WARRANTY:**

Sixty (60) Months on manufacturer defects on the DR Detector. 36-Months on manufacturer defects on the standard PC acquisition station, and software.

**RADSOURCE LABOR WARRANTY:**

Twelve (12) months service from date of completion of installation.

All warranties are subject to manufacturer's terms and conditions. Service hours of warranty coverage are Monday through Friday from 8:00 AM to 5:00 PM excluding holidays.

Extended warranty information available under separate cover.

**Warranty Exclusions:**

DR Drop Protection excluded if applicable. Warranty does not cover damage caused by any act of God, war, terrorism, normal wear and tear, dropping or impact, neglect, power spikes or surges that might potentially damage the equipment's internal components, loss of power, water, smoke, fire, fire suppressant, high winds, lightning strikes, viruses, tampering, operator abuse or use other than what the equipment is intended to be used for. Warranty is non-transferrable. RadSource Imaging Technologies, Inc. is not responsible for lost revenue due to down time.

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**CUSTOMER ACCEPTANCE**

NAME

SIGN

DATE

**RADSOURCE ACCEPTANCE**

NAME

SIGN

DATE

***Thank You For Your Business!***



### SALES QUOTATION

QUOTE #	RADQ4231
DATE	11/12/2018
VALID THROUGH	12/12/2018



Account Manager	Nancy Briney
Phone	816-741-5558
Email	nbriney@radsource.net

### CUSTOMER DETAILS

#### Jackson Co. Medical Examiner

JACKSON CO MED EXAM-2062-MO  
 950 EAST 21ST STREET  
 Kansas City, MO 64108

Bill To:

Dr Diane Peterson

Ship To:

Phone (816)881-6600  
 Email KBrooke@jacksongov.org  
 GPO:

Part Number	Unit Price	Qty	Ext. Price
<b>New Fuji Prima T2 CR Package Proposal with Cassettes and Imaging Plates</b>			

800042146 FCR Prima T2 with FDX Console - Package for PPG Markets

*Fujifilm FCR Prima T2 reader unit packaged with the FDX Console workstation and a choice of cassette packages based on specialty market.*

.19,000



**FCR Prima T2 Reader Unit:**

- Small Footprint: 3.2 sq. ft, 21"W x 22"D x 15.5"H. 86 lbs.
- Single cassette insertion
- Throughput speeds of up to 47 plates per hour
- 6-outlet surge protection power-strip

**Workstation Cart**

- Heavy duty space-saving workstation and countertop workspace, custom designed to fit over the reader making the system a compact all-in-one set up.
- Stitching accessories are available.

**The FDX Console:**

*Simplifies and speeds workflow with an extra-large image display area, an easy-to-read, customizable interface and an intuitive arrangement of operation buttons to make exams faster for both the technologist and the patient.*

- Hardware includes desktop CPU (Windows 10 Professional, 64-bit, Core i5 processor with 3.2GHz, 4G RAM, and 500 GB HDD), keyboard, mouse, and 19" color touchscreen monitor and barcode scanner.
- Integrated MC functionality
- FDX V11.0 Software
- DICOM CR Store for connectivity to PACS
- FDX Console Human markers and menus
- Dynamic Visualization™ advanced image processing presents images with optimal clarity. Includes FNC (Flexible Noise Control) to suppress noise without loss of diagnostic information or sharpness and MFP (Multi-Frequency Processing) providing overall density uniformity for all anatomical regions.
- Technologist editing tools such as automatic and manual Shutters (black borders) and movable annotation markers
- Auto trimming simplifies off-center imaging of small anatomy by recognizing the collimated area and applying it to the full screen for optimized display at PACS.
- QC adjustments including exam reprocessing, sensitivity, latitude, density and contrast
- Free Text Annotation with commenting text annotation marker capability
- Image Magnification for enhanced full screen, magnification and zoom image display tools
- Basic security features include user restriction and are customizable by technologist log in/out.
- Statistical Analysis reporting of the patient image database, including reason for image rejection coding, for reject or other performance analyses

Part Number	Unit Price	Qty	Ext. Price
14x17 Cassette Type CC with imaging plates (included)		2	

**System Purchase Price**      \$19,000.00

**Optional Items (Please add to system purchase price)**

800019001	14X17 CASSETTE TYPE CC (Optional)	\$743.75	x 2	1	DP	1487.5	Initials
800019003	10X12 CASSETTE TYPE CC (Optional)	\$481.25		1			Initials
15189368	14 X 17 ST VI IMAGING PLATE (Optional)	\$656.25	x 2	1	DP	1312.5	Initials
15189382	10 X 12 ST VI IMAGING PLATE (Optional)	\$371.88		1			Initials
800020606	Prima T Cart (Optional)	\$1,362.50		1			Initials

Taxes and Freight charges will be included in the final invoice if not specified on this quotation.

Tax Exempt: YES / NO (please circle one)  
If yes, we will require a copy of your tax exempt certificate.

<b>Subtotal</b>	<b>\$19,000.00</b>
Sales Tax	
Shipping	
<b>Grand Total</b>	<b>\$19,000.00</b>

Please choose / check by one of the following:

- Funding Source:
- Cash
  - Credit Card**
  - Bank Loan
  - Lease

Credit Card Name: \_\_\_\_\_  
 Credit Card Number: \_\_\_\_\_  
 Name of Bank: \_\_\_\_\_  
 Lessor: \_\_\_\_\_

**Deposit Required**      **\$0.00**

21800

*\*If order is being leased, a Leasing Company's Purchase Order is required.*

**Payment Terms:**

The terms stated in this agreement are an important part of this business/purchase agreement. The buyer certifies and agrees to the stated payment terms and agrees that they or their purchasing organization will carry them out as stated in this agreement.

50% due with signed buyer's agreement, 40% due 10-business days prior to the scheduled installation of this equipment, remaining 10% due upon completion of installation.

Pricing contained within this proposal excludes shipping and applicable taxes. Shipping charges are pre-paid by RadSource and shall be added to the buyer's final invoice. Any applicable taxes are the responsibility of the buyer. If the buyer is tax-exempt, RadSource Imaging will require a copy of their tax exempt certificate.

System(s) installation will be scheduled on a mutually agreeable date.

**Warranty:**

**RADSOURCE WARRANTY:**  
 Twelve (12) months service from date of completion of installation.

**FUJI WARRANTY:**

Reader Unit	2 Years
Cassettes/Imaging plates	2 Years
Console	1 Year

All warranties are subject to manufacturer's terms and conditions. Service hours of warranty coverage are Monday through Friday from 8:00 AM to 5:00 PM CST, excluding holidays.

Extended warranty information available under separate cover.

**Warranty Exclusions:**

DR Drop Protection excluded if applicable. Warranty does not cover damage caused by any act of God, war, terrorism, normal wear and tear, dropping or impact, neglect, power spikes or surges that might potentially damage the equipment's internal components, loss of power, water, smoke, fire, fire suppressant, high winds, lightning strikes, viruses, tampering, operator abuse or use other than what the equipment is intended to be used for. Warranty is non-transferrable. RadSource Imaging Technologies, Inc. is not responsible for lost revenue due to down time.

**Notes:**

Upon acceptance by both parties, as indicated by their signatures below, this Quotation shall become a binding Sales Contract between BUYER and SELLER.

Installation will be performed during RadSource Imaging Technologies normal operational hours, Monday through Friday, 8:00AM to 5:00PM. Requests for overtime installation services will need to be approved by RadSource Imaging Technologies Service Manager. RadSource Imaging Technologies prevailing overtime rates will apply, times the number of men required to perform the required installation.

**Buyer Site Preparation and Installation:**

Buyer is responsible for all site and/or room preparation including but not limited to Electrical, Plumbing, Overhead Support Work, Power Access, and providing the necessary Networking Access. Professional room drawings can be provided by RadSource Imaging Technologies Inc. upon customer's request with purchase of equipment from RadSource. Drawings will be started once down payment is received. The area where the X-ray equipment is to be installed will need to be completely finished including paint, baseboards, ceiling etc. before the equipment installation can take place.

Quoted Prices and specifications are subject to change without notice prior to signed buyers agreement. Service Agreement Options are available to protect your purchase after the initial warranty has expired.

During or following installation, a RadSource employee may take photographs of the system being installed at your facility along with an image of the outside of your facility to include on their website's installation gallery ([www.radsourcenet.com/installation-gallery/](http://www.radsourcenet.com/installation-gallery/)). By signing this agreement, you agree to grant to RadSource, permission to use, reuse, publish, and republish any photographs that they have taken, or may take of your facility, or the equipment installed at your facility. (RadSource will never take photographs of people, or any other hospital, patient or other confidential information.) The photographs can be used in any and all media now or hereafter, including the internet, for the purpose of promoting our installation process at your facility; and to use your company name in connection with any images RadSource so chooses to use. You agree to release and discharge RadSource from any and all claims and demands that may arise out of or in connection with the use of the photographs.

**CUSTOMER ACCEPTANCE**

**RADSOURCE ACCEPTANCE**

<b>NAME</b>	_____
<b>SIGN</b>	_____
<b>DATE</b>	_____

<b>NAME</b>	_____
<b>SIGN</b>	_____
<b>DATE</b>	_____

**Thank You For Your Business!**

### SALES QUOTATION

QUOTE #	RADQ4226
DATE	11/8/2018
VALID THROUGH	12/8/2018



Account Manager	Nancy Briney
Phone	816-741-5558
Email	nbriney@radsources.net

### CUSTOMER DETAILS

#### Jackson County Medical Examine

JACKSON CO MED EXAM-2062-MO  
 950 EAST 21ST STREET  
 KANSAS CITY, MO 64108

Bill To:

#### Dr Diane Peterson / Medical Examin

Phone (816)881-6600  
 Email KBrooke@jacksongov.org  
 GPO:

Ship To:

Part Number		Unit Price	Qty	Ext. Price
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**New Vieworks VIVIX-S DR 14x17V Wireless Gadox DR System**

HV6056	VIVIX .S View DR 14x17 Wireless Gadox Panel . Scintillator: Amorphous Silicon Gadolinium Oxysulfide Gd.O.S:Tb (Gadox) Scintillator Amorphous Silicon: Gadolinium Oxysulfide Gd.O.S:Tb (Gadox)	\$27,200.00	1	\$27,200.00
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ALTO DR™ 14x17 Wireless Detectors Include:  
 14x17 Wireless Flat Panel Detector, System Control Unit (SCU), Battery  
 Charger, Battery Pack, Image Processing Viewer Software. Cables, and  
 Acquisition Workstation.

- Detection Area: 14x17 inch (35cm x 43cm)  
 Dimensions: 18.1"W x 15.1"L x .59"D (46 x 38.4 x 1.5 cm)
- Pixels: 2560 x 3072
  - Pixel Pitch: 140 μm x 140 μm
  - Scintillator: Cesium (CsI:TI) or Gadox (Gd2O2S:Tb)
  - Grayscale: 16,384
  - A/D Conversion: 14 bit
  - X-Ray Voltage Range: 40-150 kVp
  - Weight: 7.27 lbs./3.3 kg. (CsI) or 6.83 lbs./3.1 kg. (Gadox)
  - Power: 7.4V 4000mAh Lithium Ion Polymer Battery

*Handwritten:* total 608743.75



Part Number	Unit Price	Qty	Ext. Price
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**DR ACQUISITION  
WORKSTATION**

**Acquisition Workstation**

*Acquisition Hardware:*

- Intel Core i3 Processor 6100 CPU (3.7GHz)
- 4 GB, Windows 7 Professional 64-bit
- 1 TB Local Mini-PACs in a RAID 1 (2 drives total)
- Professional Monitor: 22 in. Touch Screen Resolution: 1920 X 1080, full HD Ratio: 1000:1 (typical)

*VxVue Imaging Acquisition Software:*

- Viewers – 5 (LAN) Local Area Network Clinical Viewing Licenses
- AED Technology – Automatic Exposure Detection: No Generator Interfacing is required, as the AED Feature instantly detects x-ray upon exposure and then completes the acquisition process for review and transfer of studies to PACS
- DICOM Store/Transfer to PACS, Auto-Routing and Scheduled periodic back-up
- Image Preview - in 3 seconds
- Customizable Anatomical exam tree and image processing parameters.
- Image Acquisition + QC (brightness/contrast, window/level, flip, rotate, zoom, annotations, measurements, pan, mag, crop, invert, line measurement, angle measurement, text, arrow, L&R Markers, clockwise rotation, counter-clockwise rotation.)
- Patient Registration - Manually or DICOM Modality Worklist. DICOM Modality Worklist is a standard feature and is available for use provided that the EMR/EHR/RIS accommodates Modality Worklist.
- Print: DICOM Printer or Desk Top Paper Printer.
- Stitching: Manual and Auto.
- Archive: CD/DVD – Archive to removable drive.
- Export Images as, JPEG, TIFF, BMP, and DICOM with or without Viewer to CD or other media.
- Patient Size Selection: Pediatric, Small, Medium, Large Adult.
- Black Surround Fill

**APPS 2.0**

**2 Days Applications Training Included in purchase price.**

<b>System Purchase Price</b>	<b>\$27,200.00</b>
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Part Number		Unit Price	Qty	Ext. Price
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**Optional Items (Please add to system purchase price)**

WDDR14	14X17 WEIGHT DISTRIBUTION CAP (Optional)	\$400.00	1	<u>DP</u> Initials
PH1417	14X17 PROTECT-A-GRID (PLASTIC) ENCASEMENT WITH 2 HANDLES AND DOUBLE RELEASE LOCKS (Optional)	\$743.75	1	<u>DP</u> Initials
Must be ordered with the below "Installed Grid" Cat. #K14102040SD. Please add both prices for the complete Protect-A-Grid Protector and Appropriate Grid set. Specified Grid is built into a durable plastic protective casing.				
K14102040SD	14X17 10:1/215/40-72 GRID (SHORT DIMENSION) (Optional)	<del>\$842.50</del>	1	<u>DP</u> Initials
TTDR	TABLETOP DR PANEL HOLDER (Optional)	\$600.00	1	<u>DP</u> Initials
(used for performing lateral tabletop radiographs. Holds the Protect-A-Grid and DR Panel)				

Taxes and Freight charges will be included in the final invoice if not specified on this quotation.

Tax Exempt: YES / NO (please circle one)  
If yes, we will require a copy of your tax exempt certificate.

Subtotal	\$27,200.00
Sales Tax	
Shipping	
Grand Total	\$27,200.00

Please choose / check by one of the following:

Funding Source:

- Cash  
 Credit Card  
 Bank Loan  
 Lease

Credit Card Name: \_\_\_\_\_  
 Credit Card Number: \_\_\_\_\_  
 Name of Bank: \_\_\_\_\_  
 Lessor: \_\_\_\_\_

Deposit Required	\$0.00
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28943.75

\*If order is being leased, a Leasing Company's Purchase Order is required.

**Payment Terms:**

The terms stated in this agreement are an important part of this business/purchase agreement. The buyer certifies and agrees to the stated payment terms and agrees that they or their purchasing organization will carry them out as stated in this agreement.

50% due with signed buyer's agreement, 40% due 10-Business Days prior to the scheduled installation of this equipment, remaining 10% due upon completion of installation.

Additional convenience fee of 3% will be added to all invoices paid by approved credit card.

Pricing contained within this proposal excludes shipping and applicable taxes. Shipping charges are pre-paid by RadSource and shall be added to the buyer's final invoice. Any applicable taxes are the responsibility of the buyer. If the buyer is tax-exempt, RadSource Imaging will require a copy of their tax exempt certificate.

System(s) installation will be scheduled on a mutually agreeable date. Installation will not begin until the (first and second) progress payments have been submitted to RadSource Imaging Technologies, Inc.

**Warranty:**

**VIEWWORKS ALTO MANUFACTURERS WARRANTY:**

Sixty (60) Months on manufacturer defects on the DR Detector. 36-Months on manufacturer defects on the standard PC acquisition station, and software.

**RADSOURCE LABOR WARRANTY:**

Twelve (12) months service from date of completion of installation.

All warranties are subject to manufacturer's terms and conditions. Service hours of warranty coverage are Monday through Friday

RADQ4226

Initial Here

from 8:00 AM to 5:00 PM excluding holidays.

Extended warranty information available under separate cover.

**Warranty Exclusions:**

DR Drop Protection excluded if applicable. Warranty does not cover damage caused by any act of God, war, terrorism, normal wear and tear, dropping or impact, neglect, power spikes or surges that might potentially damage the equipment's internal components, loss of power, water, smoke, fire, fire suppressant, high winds, lightning strikes, viruses, tampering, operator abuse or use other than what the equipment is intended to be used for. Warranty is non-transferrable. RadSource Imaging Technologies, Inc. is not responsible for lost revenue due to down time.

DR panel drop protection not included in system warranty.

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**CUSTOMER ACCEPTANCE**

**RADSOURCE ACCEPTANCE**

NAME	_____
SIGN	_____
DATE	_____

NAME	_____
SIGN	_____
DATE	_____

**Thank You For Your Business!**