

**DEPARTMENTAL INPUT
CONTRACT/PROJECT MEASURE ANALYSIS AND RECOMMENDATION**

Rev 1

New contract
 OTR
 CO
 SS
 BW
 Emergency
 Previous Contract/Project No: **N/A**

Re-Bid
 Other
 LIVING WAGE APPLIES: ___ YES ___ NO
 Requisition/Project No: ROAD150003
 TERM OF CONTRACT: ___ years with ___ one year options-to-renew

Requisition/Project Title: Veterinary Laboratory Supplies & Services

Description: _____

User Department(s): ASD
 Issuing Department: ASD
 Contact Person: Caroline Burgos
 Phone: 305-375-2037
 Estimated Cost: \$51,686.81
 Funding Source: General Funds

ANALYSIS

Commodity/Service No:	SIC:			
Trade/Commodity/Service Opportunities				
875-15 DIAGNOSTIC TEST KITS AND SUPPLIES, VETERINARY	961-86 Veterinary Services			
961-48 Laboratory and Field Testing Services				
Contract/Project History of Previous Purchases For Previous Three (3) Years Check Here <input type="checkbox"/> if this is a New Contract/Purchase with no Previous History				
<table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;"><u>EXISTING</u></td> <td style="width:33%; text-align: center;"><u>2ND YEAR</u></td> <td style="width:33%; text-align: center;"><u>3RD YEAR</u></td> </tr> </table>		<u>EXISTING</u>	<u>2ND YEAR</u>	<u>3RD YEAR</u>
<u>EXISTING</u>	<u>2ND YEAR</u>	<u>3RD YEAR</u>		
Contractor:				
Small Business Enterprise:				
Contract Value:				
Comments:				
Continued on another page (s): ___ Yes ___ No				

RECOMMENDATIONS

SBE	Set-Aside	Sub-Contractor Goal	Bid Preference	Selection Factor
		%		
		%		
		%		
		%		

Basis of Recommendation:

Signed: Caroline Burgos
 Date to DBD: 03/05/2015
 Date Returned to DPM: _____



SECTION #3
EMERGENCY PURCHASES

NOTE TO DEPARTMENTS: COMPLETE ITEMS MARKED WITH (▶)

▶ REQUISITION #: RQAD150001 P.O. #: _____ BCC DATE: _____

▶ ACQUISITION DATE (Date Order Is Placed): 10/01/2014 – 01/31/2015

▶ TITLE: IDEXX Laboratories
▶ DESCRIPTION: In the past and currently, the Department uses the P-card for lab services offered by IDEXX since there is no contract in place given that our annual expenditures related to lab work is usually under \$12K, we had not pursued a contract for this service in the past. However, the Department is now in pursuit of a contract and working with ISD Procurement to have a contract in place for this type of service since samples are sent to an offsite medical lab for analyses. Recently, we had an uncommon incident that required most animals housed within the shelter be tested and in some cases retested. The result is a \$51,686.81 balance due. However, we are requesting an allocation of \$150,00.00 in order to pay the outstanding balance and allow us to continue using this service which is critical to the health of the shelter pets (please see attached justification from the shelter Treatment Veterinarian) until the new contract is in place.
▶ PURPOSE: Pay for the outstanding balance while a Contract takes place and continue using these much needed services.

Table with 3 columns: Department(s), Funding Source(s), Allocation(s). Row 1: AD-Animal Services, General Fund, \$ 150,000.00. Row 2: *, \$

▶ TERM OF CONTRACT:
One [] Two [] Three [] Four [] Five [] Year(s) [x]
[] Month(s)
[] Contract Period From _____ to _____
[] Upon Completion [x] From _____ to _____
[] Upon Delivery [x] _____ Days A.R.O. (after Receipt of Order)

Special Conditions:
[] Insurance Type _____
[] Performance/Payment Bond
[] Certificate of Competency
[] Living Wage Applies

SBE Measures: [] None [] Set Aside [] Bid Preference [] Goal [] SBE [] Micro Enterprise [] SBE [] Micro Enterprise [] SBE [] Micro Enterprise
Review Committee Date: _____
Item #: _____

▶ Number of Price Quotation(s): Requested: _____ Received: _____

Awarded To Low Bidder: [x] [] YES [] NO, If "NO", provide explanation in the Comments section

Table with 2 columns: Vendor, Vendor: _____. Row 1: IDEXX LABORATORIES, Vendor: _____. Row 2: Vendor: _____, Vendor: _____

Contract Value: \$ _____

Did Local Preference affect the outcome of the [] YES [] NO, if "YES", provide detailed

SECTION #3
EMERGENCY PURCHASES

Vendor Assistance Section

Date

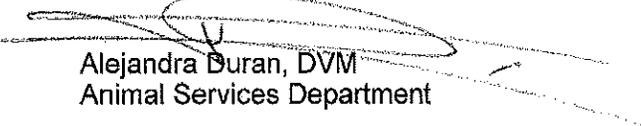
Attach: 1. Explanation of the emergency situation. 2. Written price quotation(s) including terms and conditions. 3. Vendor(s) Certificate of Insurance. 4. Copy of invoice(s).

Memorandum



Date: March 3, 2015

To: Alex Muñoz, Director

From: 
Alejandra Duran, DVM
Animal Services Department

Subject: IDEXX Laboratory Services

Laboratory services for polymerase chain reaction (PCR) testing are critical to life saving shelter operations. PCR testing identifies disease based on the presence of the pathogen's DNA or RNA in the patient sample. Testing is essential to diagnosing and managing infectious disease outbreaks within the shelter as well as the community. Failure to routinely screen the shelter population through PCR testing may result in the introduction of disease into the community.

The services were recently required in response to an increase in the number of animals exhibiting symptoms of infectious disease. Through PCR testing the Department was able to identify the presence of a virus and mitigate the health impact to the shelter and community pets. The monitoring and identification of infectious disease is an ongoing concern which requires routine access to PCR testing.

C: Gilda Nuñez, Chief, Outreach and Development, ASD