

BIDDER : NMS Labs

CONTRACT FOR SERVICE

CONTRACT NO. 12-53-223



**FORENSIC TOXICOLOGICAL SERVICES
FOR
COOK COUNTY OFFICE OF THE MEDICAL EXAMINER**

**BIDS TO BE EXECUTED IN TRIPPLICATE
BID OPENING WILL BE ON FRIDAY, FEBRUARY 1, 2013 AT 10:00 A.M.
LATE BIDS WILL NOT BE CONSIDERED
DELIVER BIDS TO 118 N. CLARK ST., ROOM 1018, CHICAGO, IL 60602**

**CONTACT: KEVIN CASEY, SPECIFICATION ENGINEER, AT 312-603-6830
EMAIL: kevin.casey@cookcountyil.gov**

**ISSUED BY THE
OFFICE OF THE CHIEF PROCUREMENT OFFICER**

**BOARD OF COMMISSIONERS
COUNTY OF COOK
TONI PRECKWINKLE, PRESIDENT**

**APPROVED BY BOARD OF
COOK COUNTY COMMISSIONERS**

APR 17 2013

REQ# 102765

COM _____



TITLE PAGE

**RFP for Contract # 12-53-223
Forensic Toxicological Services for the Medical Examiner's Office of Cook County**

Bid Opening Date: February 1, 2013 - 10:00 AM

Submitting Organization:

NMS Labs
3701 Welsh Road
Willow Grove, PA 19090
800.522.6671

**Authorized Personnel for
Contractual Obligation:**

Shelly Carolan
Chief Marketing Officer
800.522.6671, ext. 1285

**Authorized Personnel for
Contractual Clarification:**

Skyler Colman
Business Development Manager - Forensics
215-366-1271

**INSTRUCTIONS TO BIDDERS
BID CONTRACTS
INDEX**

| <u>Section</u> | <u>Subject</u> | <u>Page</u> |
|-----------------------|--|--------------------|
| IB-01 | Definitions | IB-1 |
| IB-02 | Preparation of Bid Proposals | IB-1 |
| IB-03 | Site Inspection Certificate | IB-1 |
| IB-04 | Bid Deposit | IB-2 |
| IB-05 | Exceptions | IB-2 |
| IB-06 | Bidder Warranties | IB-2 |
| IB-07 | Submission of Bid Proposals | IB-3 |
| IB-08 | Bid Proposals to Conform to Requirements of Legal Advertising | IB-3 |
| IB-09 | Competency of Bidder | IB-3 |
| IB-10 | Local Business Preference | IB-3 |
| IB-11 | Consideration of Bid Proposals | IB-3 |
| IB-12 | Withdrawal of Bid Proposals | IB-4 |
| IB-13 | Acceptance of Bid Proposals | IB-4 |
| IB-14 | Performance and Payment Bond | IB-4 |
| IB-15 | Prices Firm | IB-4 |
| IB-16 | Cash Billing Discounts | IB-4 |
| IB-17 | Catalogs | IB-4 |
| IB-18 | Authorized Dealer/Distributor | IB-4 |
| IB-19 | Trade Names | IB-5 |
| IB-20 | Samples | IB-5 |
| IB-21 | Notices | IB-5 |
| IB-22 | Compliance with Laws - Public Contracts | IB-5 |
| IB-23 | Cooperation with Inspector General | IB-5 |

INSTRUCTIONS TO BIDDERS

IB-01 DEFINITIONS

- A. **BIDDER** shall mean the individual or business entity submitting a Bid Proposal to supply any or all of the services or goods required by the Contract Documents.
- B. **BID PROPOSAL** shall mean the Contract Documents as completed by the Bidder which constitutes the Bidder's offer.
- C. **CONTRACT** shall mean the agreement between the County and Contractor as set forth in the Contract Documents and as awarded by the Cook County Board of Commissioners.
- D. **CONTRACT DOCUMENTS** shall mean collectively the Instructions to Bidders, General Conditions, Special Conditions, Specifications, Attachments, Addenda, if any, Bid Proposal, Site Inspection Certificate, Contractor Certifications and Forms for Minority Participation. The above documents shall be considered as one integrated document setting forth the obligations of the parties.
- E. **CONTRACTOR** shall mean the individual or business entity submitting a Bid Proposal and to whom the Cook County Board of Commissioners awards the Contract.
- F. **COUNTY** shall mean the County of Cook, a body politic and corporate of the State of Illinois.
- G. **DIRECTOR** shall mean the person or persons authorized by the County to act in connection with this Contract. Such authorization shall not include any power to change the scope of the Contract or to obligate the County to pay additional sums beyond the amount of the Contract awarded by the Cook County Board of Commissioners.
- H. **CHIEF PROCUREMENT OFFICER** shall mean the Chief Procurement Officer of the County of Cook whose duties and responsibilities are more particularly described in the Illinois Compiled Statutes 1994, 55 ILCS 5/5-36003.
- I. **SPECIFICATIONS** shall mean the description of the required services, Contract Goods, equipment, personnel, volume and use statistics and all requirements for the scope of work set forth in the Contract Documents.

IB-02 PREPARATION OF PROPOSALS

The Bidder shall prepare one (1) copy of its Bid Proposal on the proposal forms within the Contract Documents and three (3) execution pages, all with original signatures in the back of the document. Unless otherwise stated, all blank spaces on the proposal forms shall be fully completed. Bidder bears all responsibility for error or omissions in the submission of the Bid Proposal.

IB-03 SITE INSPECTION CERTIFICATE

When required in the legal advertisement or the Special Conditions, the Bidder shall visit the job-site and shall carefully examine and become familiar with all conditions which may in any way affect the performance of the Contract and shall submit certification of such inspection along with the Bid Proposal. The dates and conditions of the site inspection are determined by County.

IB-04 BID DEPOSIT

When required in the legal advertisement, the Bid Proposal shall be accompanied by cash, cashier's check, certified check, bank draft or surety bond in the amount shown in the legal advertisement or as may be prescribed in these Contract Documents. A certified or cashier's check shall be drawn on a responsible bank doing business in the United States and shall be made payable to the order of the County of Cook. The Surety issuing the bond must have a general rating of "A", and shall be a Class VII or higher in the financial size category as defined by Best's Key Rating Guide - Property and Casualty. Failure to submit the bid deposit shall constitute an informal Bid Proposal and such Bid Proposal shall be rejected.

The Bidder hereby agrees that the bid deposit shall be forfeited to the County as liquidated damages and not as penalty in the event Bidder fails to comply with IB-11, IB-13, or otherwise fails or refuses to honor the Bid Proposal upon award of the Contract by the County.

The bid deposit of all bidders will be returned, with the exception of the Contractor, after the County has awarded the Contract. The bid deposit of the Contractor will be returned after the Contract has been awarded and the Contractor has submitted all insurance documentation and the Performance and Payment Bond, as required by the Contract Documents.

IB-05 EXCEPTIONS

If any Bidder intends to take any deviations or exceptions from the Specifications or other Contract Documents, Bidder shall submit to the Chief Procurement Officer a written request for a deviation or exception prior to the date and time of Bid Opening. If the Chief Procurement Officer considers such deviation or exception acceptable, the Chief Procurement Officer shall issue an Addendum setting forth such deviation or exception from the Specifications or other Contract Documents which shall be applicable to all Bidders submitting a Bid Proposal. If no Addendum is issued by the Chief Procurement Officer, then such deviation or exception shall be deemed rejected. The County may reject any Bid Proposal containing deviations or exceptions not previously accepted through a written Addendum. A copy of such Addendum will be mailed or delivered to each Bidder receiving a set of such Contract Documents. Bidder shall acknowledge receipt of each Addendum issued in the space provided on the proposal form. All written requests for deviations or exceptions shall be addressed to:

Chief Procurement Officer
Office of the Chief Procurement Officer
118 North Clark Street, Room 1018
Chicago, Illinois 60602
(Reference the Project Title and Contract Number)

IB-06 BIDDER WARRANTIES

The submission of a Bid Proposal shall constitute a warranty that: (i) Bidder has carefully and thoroughly reviewed the Contract Documents and has found them complete and free from ambiguities and sufficient to describe the Contract work; (ii) Bidder and all workmen and/or employees it intends to use in the performance of this Contract are skilled and experienced in the type of work or services called for by the Contract Documents; and (iii) neither the Bidder nor any of its employees, agents, suppliers or subcontractors have relied on any verbal representations from the County, or any of the County's employees, agents, or consultants, in preparing the Bid Proposal.

IB-07 SUBMISSION OF BID PROPOSALS

All Bidders shall submit the bound copy of the sealed Bid Proposal in an envelope and shall deposit them in the bid box located in the County Board Office of the Chief Procurement Officer, Room 1018, County Building, 118 North Clark Street, Chicago, Illinois 60602 by the date and hour for the Bid Opening as shown in the legal advertisement. The sealed envelope submitted by the Bidder shall carry the following information on the face of the envelope: Bidder's name, address, subject matter of Bid Proposal, advertised date of Bid Opening and the hour designated for Bid Opening as shown in the legal advertisement.

IB-08 BID PROPOSALS TO CONFORM TO REQUIREMENTS OF LEGAL ADVERTISING
COOK COUNTY ORDINANCE CHAPTER 34, ARTICLE IV, DIVISION 2, SECTION 34-151.

The County will not entertain or consider any Bid Proposals: (i) received after the exact time specified in the legal advertisements; (ii) not accompanied by the required bid deposit; or (iii) in any other way failing to comply fully with the conditions stated in the legal advertisement therefore.

IB-09 COMPETENCY OF BIDDER

No Bid Proposal will be accepted from or Contract awarded to a Bidder that is in arrears or is in default to the County upon any debt or Contract, or that is a defaulter, as surety or otherwise upon any obligation to said County, or has failed to perform faithfully any previous contract with the County.

IB-10 LOCAL BUSINESS PREFERENCE
COOK COUNTY ORDINANCE CHAPTER 34, ARTICLE IV, DIVISION 2, SECTION 34-151(d).

The Chief Procurement Officer shall, in the purchase of all supplies and services funded with County dollars by competitive sealed bidding, accept the lowest bid price or lowest evaluated bid price from a responsive or responsible local business, provided that the bid does not exceed the lowest bid price or lowest evaluated bid price from a responsive and responsible non-local business by more than five percent (5%).

"Local Business" shall mean a person authorized to transact business in this State and having a bona fide establishment for transacting business located within Cook County at which it was actually transacting business on the date when any competitive solicitation for a public contract is first advertised or announced and further which employs the majority of its regular, full time work force within Cook County, including a foreign corporation duly authorized to transact business in this State and which has a bona fide establishment for transacting business located within Cook County at which it was actually transacting business on the date when any competitive solicitation for a public contract is first advertised or announced and further which employs the majority of its regular, full time work force within Cook County.

IB-11 CONSIDERATION OF BID PROPOSALS

The County reserves the right to reject or accept any or all Bid Proposals, to extend the bidding period, to waive technicalities in the Contract Documents and/or to direct that the project be abandoned or rebid prior to award of the Contract.

After Bid Proposals are opened and read aloud, they will be evaluated based on the price, conformance with Specifications, the responsibility of the various Bidders taking into consideration factors including, but not limited to, those noted in IB-09, IB-10 and responsiveness to the County's Minority and Female Owned Business Ordinance.

IB-12 WITHDRAWAL OF BID PROPOSALS

Bidders may withdraw their Bid Proposals at any time prior to the time specified in the legal advertisement as the date and hour set for the Bid Opening. However, no Bidder shall withdraw, cancel or modify its Bid Proposal for a period of ninety (90) calendar days after said advertised Bid Opening.

IB-13 ACCEPTANCE OF PROPOSALS

The Chief Procurement Officer shall notify the successful Bidder, in writing, of award of the Contract by the County within ninety (90) days from the Bid Opening date. Upon receipt of the Notice of Award, the Contractor shall promptly secure, execute and deliver to the Chief Procurement Officer any documents required herein.

IB-14 PERFORMANCE AND PAYMENT BOND

When required in the legal advertisement or Special Conditions, the successful Bidder shall furnish a Performance and Payment Bond in the full amount of the Contract on the County Form, a specimen of which is provided herein. The Surety issuing the Performance and Payment Bond must have a general rating of "A" and shall be a Class VII or higher in the financial size category as defined by Best's Key Rating Guide-Property and Casualty.

In the event that the Bidder fails to furnish the Performance and Payment Bond within fourteen (14) calendar days after service of the Notice of Award, the County may elect to retain Bidder's bid deposit as liquidated damages and not as a penalty and the Contract may be terminated. The parties agree that the sum of the bid deposit is a fair estimate of the amount of damages that the County will sustain due to the Bidder's failure to furnish the Performance and Payment Bond and the termination of the Contract.

IB-15 PRICES FIRM

All prices quoted in the Bid Proposal shall be firm and will not be subject to increase during the term of the Contract awarded to the Contractor, except as otherwise provided in these Contract Documents.

IB-16 CASH BILLING DISCOUNTS

Cash billing or percentage discounts for payment will not be considered in evaluating Bid Proposals.

IB-17 CATALOGS

Each Bidder shall submit in TRIPLICATE, where necessary or when requested catalogs, descriptive literature, and detailed drawings, fully detailing features, designs, construction, appointment and finishes not covered in the Specifications but necessary to fully describe the materials, Contract Goods or work proposed to be furnished.

IB-18 AUTHORIZED DEALER/DISTRIBUTOR

The Bidder must be: (i) the manufacturer; (ii) an authorized dealer/distributor; or (iii) able to promptly secure the necessary genuine parts, assemblies and/or accessories as supplied by the original equipment manufacturer (O.E.M.), along with any necessary schematics or drawings to fulfill the contractual obligations. Further, the Bidder must be able to furnish original product warranty and manufacturer's related services such as product information, product re-call notices, etc. Proof of ability to transfer product warranty to the County is to be submitted with the Bid Proposal.

IB-19 TRADE NAMES

In cases where an item is identified by a manufacturer's name, trade name, catalog number, or reference, it is understood that the Bidder proposes to furnish the item identified and does not propose to furnish an "equal" unless the proposed "equal" is definitely indicated therein by the Bidder. The County reserves the right to review and award alternate Contracts, if the commodity and/or service is suitable to its requirement.

The reference to the above catalog is intended to be descriptive and not restrictive and to indicate to the prospective Bidder articles that shall be satisfactory. Bid Proposals on other makes and catalogs shall be considered, provided each Bidder states on the face of the Bid Proposal exactly what is being proposed to be furnished or forwards with the Bid Proposal an illustration, or other descriptive matter which shall clearly indicate the character of the article covered by the Bid Proposal.

The County reserves the right to approve as an equal, or to reject as not being an equal, any article the Bidder proposes to furnish which contains major or minor variations from Specifications but which may comply substantially.

IB-20 SAMPLES

Bidders may be asked upon request of the Chief Procurement Officer or the Director to furnish and deliver a representative sample sufficient to effectively evaluate each item listed in the Bid Proposal. All samples must be delivered F.O.B. DESTINATION, FREIGHT PREPAID to an identified delivery location within five (5) business days of the request. Samples submitted must be identical to those specified in the Bid Proposal. Submission of other than the samples reflected in the Bid Proposal or failure to furnish samples within the required time period shall be cause for rejection of the Bid Proposal. All samples are subject to mutilation and will not be returned. Bidders shall bear the cost of any samples and shipping or delivery costs related thereto.

IB-21 NOTICES

All communications and notices between the County and Bidders regarding the Contract Documents shall be in writing and hand delivered or delivered via first class United States mail, postage prepaid. Notices to the Bidders shall be addressed to the name and address provided by the Bidders; notices to the Chief Procurement Officer shall be addressed to Room 1018, County Building, 118 North Clark Street, Chicago, Illinois 60602.

IB-22 COMPLIANCE WITH LAWS - PUBLIC CONTRACTS

This Contract is a competitively bid public contract of Cook County government subject to laws and ordinances governing public contracts. The Bidder shall at all times observe and comply with all laws, ordinances, regulations and codes of the Federal, State, County and other local government agencies which may in any manner effect the preparation of the Bid Proposal or the performance of the Contract. If the Bidder observes that any of the Contract Documents are at variance therewith, it shall promptly notify the Chief Procurement Officer in writing and necessary changes shall be effected by appropriate modification.

IB-23 COOPERATION WITH INSPECTOR GENERAL

Persons or businesses seeking County contracts are required to abide by all of the applicable provisions of the Office of the Independent Inspector General Ordinance (Section 2-281 et. seq. of the Cook County Code of Ordinances). Failure to cooperate as required may result in monetary and/or other penalties.

END OF SECTION

**GENERAL CONDITIONS
BID CONTRACTS
INDEX**

| <u>Section</u> | <u>Subject</u> | <u>Page</u> |
|-----------------------|--|--------------------|
| GC-01 | Subcontracting or Assignment of Contract or Contract Funds | GC-1 |
| GC-02 | Indemnification | GC-1 |
| GC-03 | Inspection and Responsibility | GC-1 |
| GC-04 | Payment | GC-1 |
| GC-05 | Prepaid Fees | GC-1 |
| GC-06 | Taxes | GC-2 |
| GC-07 | Price Reduction | GC-2 |
| GC-08 | Contractor Credits | GC-2 |
| GC-09 | Disputes | GC-2 |
| GC-10 | Modifications and Amendments | GC-2 |
| GC-11 | Default | GC-3 |
| GC-12 | County's Remedies | GC-3 |
| GC-13 | Contractor's Remedies | GC-3 |
| GC-14 | Delays | GC-3 |
| GC-15 | Insurance Requirements | GC-4/6 |
| GC-16 | Patents, Copyrights and Licenses | GC-6 |
| GC-17 | Compliance with Laws | GC-6 |
| GC-18 | Delivery | GC-6 |
| GC-19 | MBE/WBE Cook County Ordinance | GC-7/10 |
| GC-20 | Material Safety Data Sheet | GC-10 |
| GC-21 | Conduct of the Contractor | GC-10 |
| GC-22 | Accident Reports | GC-11 |
| GC-23 | Use of Premises | GC-11 |
| GC-24 | General Notice | GC-11 |
| GC-25 | Termination for Convenience | GC-11 |

**GENERAL CONDITIONS
BID CONTRACTS
INDEX**

| <u>Section</u> | <u>Subject</u> | <u>Page</u> |
|-----------------------|--|--------------------|
| GC-26 | Guarantees and Warranties | GC-11 |
| GC-27 | Standard of Contract Goods | GC-12 |
| GC-28 | Confidentiality And Ownership Of Documents | GC-12 |
| GC-29 | Quantities | GC-12 |
| GC-30 | Audit; Examination of Records | GC-12 |
| GC-31 | Governing Law | GC-13 |
| GC-32 | Cooperation with Inspector General | GC-13 |
| GC-33 | Waiver | GC-13 |
| GC-34 | Entire Agreement | GC-13 |
| GC-35 | Force Majeure | GC-13 |
| GC-36 | Governmental Joint Purchasing Agreement | GC-13 |
| GC-37 | Cooperative Purchasing | GC-13 |
| GC-38 | Federal Clauses | GC-14/21 |
| GC-39 | Contract Interpretation | GC-22 |

GENERAL CONDITIONS

GC-01 SUBCONTRACTING OR ASSIGNMENT OF CONTRACT OR CONTRACT FUNDS

Once awarded, this Contract shall not be subcontracted or any part thereof assigned without the express written approval of the County Chief Procurement Officer ("Chief Procurement Officer"). In no case, however, shall such approval relieve the Contractor from his obligations or change the terms of the Contract. The Contractor shall not transfer or assign any Contract funds or claims due or to become due without the advance written approval of the Chief Procurement Officer. The unauthorized subcontracting or assignment of the Contract, in whole or in part, or the unauthorized transfer or assignment of any Contract funds, either in whole or in part, or any interest therein, which shall be due or are to become due the Contractor shall have no effect on the County and are null and void.

The Contractor shall identify any and all contractors and subcontractors it intends to use in the performance of the Contract. All such persons shall be subject to the prior approval of the County.

The Contractor and its employees, contractors, subcontractors, agents and representatives are, for all purposes arising out of this Contract, independent contractors and are not employees of the County. It is expressly understood and agreed that the Contractor and its employees, contractors, subcontractors, agents and representatives shall in no event as a result of a contract be entitled to any benefit to which County employees are entitled, including, but not limited to, overtime, retirement benefits, worker's compensation benefits and injury leave or other leave benefits.

GC-02 INDEMNIFICATION

The Contractor covenants and agrees to indemnify and save harmless the County and its commissioners, officials, employees, agents and representatives, and their respective heirs, successors and assigns, from and against any and all costs, expenses, attorney's fees, losses, damages and liabilities incurred or suffered directly or indirectly from or attributable to any claims arising out of or incident to the performance or nonperformance of the Contract by the Contractor, or the acts or omissions of the officers, agents, employees, contractors, subcontractors, licensees or invitees of the Contractor. The Contractor expressly understands and agrees that any Performance Bond or insurance protection required of the Contractor, or otherwise provided by the Contractor, shall in no way limit the responsibility to indemnify the County as hereinabove provided.

GC-03 INSPECTION AND RESPONSIBILITY

The County shall have a right to inspect any Contract Goods used in carrying out this Contract and shall be responsible for the quality and standards of all materials or completed work furnished under this Contract. Contract Goods or completed work not complying herewith may be rejected by the Chief Procurement Officer and/or the Director and shall be replaced and/or re-performed by the Contractor at no cost to the County. Any Contract Goods rejected shall be removed within a reasonable time from the premises of the County at the entire expense of the Contractor, after notice has been given by the County to the Contractor that such Contract Goods have been rejected.

GC-04 PAYMENT

All invoices submitted by the Contractor shall be in accordance with the cost provisions contained in the Contract Documents. No payments shall be made without such invoices having been submitted along with a County Voucher Form.

GC-05 PREPAID FEES

In the event this Contract is terminated by either party, for cause or otherwise, and the County has prepaid for any service or Contract Good to be provided pursuant to this Contract, Contractor shall refund to the County, on a prorated basis to the effective date of termination, all amounts prepaid for such service or Contract Good not actually provided as a result of the termination. The refund shall be made within fourteen (14) days of the effective date of termination.

GC-06 TAXES

Federal Excise Tax does not apply to materials purchased by the County by virtue of Exemption Certificate No. 36-75-0038K. Illinois Retailers' Occupation Tax, Use Tax and Municipal Retailers' Occupation Tax do not apply to materials or services purchased by the County by virtue of statute. The price or prices quoted herein shall include any and all other federal and/or state, direct and/or indirect taxes which apply to this Contract. The County's State of Illinois Sales Tax Exemption Identification No. is E-9998-2013-05.

GC-07 PRICE REDUCTION

If at any time after the contract award, Contractor makes a general price reduction in the price of any goods covered by the Contract, the equivalent price reduction based on similar quantities and/or considerations shall apply to this Contract for the duration of the Contract period. Such price reductions shall be effective at the same time and in the same manner as the reduction in the price to customers generally.

GC-08 CONTRACTOR CREDITS

To the extent the Contractor gives credits toward future purchases of goods or services, financial incentives, discounts, value points or other benefits based on the purchase of the materials or services provided for under this Contract, such credits belong to the County and not any specific using department. Contractor shall report any such credits to the Chief Procurement Officer.

GC-09 DISPUTES

Any dispute arising under the Contract between the County and Contractor shall be decided by the Chief Procurement Officer. The complaining party shall submit a written statement detailing the dispute and specifying the specific relevant Contract provision(s) to the Chief Procurement Officer. Upon request of the Chief Procurement Officer, the party complained against shall respond to the complaint in writing within five days of such request. The Chief Procurement Officer will reduce his decision to writing and mail or otherwise furnish a copy thereof to the Contractor and Director. Dispute resolution as provided herein shall be a condition precedent to any other action at law or in equity. Notwithstanding a dispute, Contractor shall continue to discharge all its obligations, duties and responsibilities set forth in the Contract during any dispute resolution proceeding unless otherwise agreed to by the County in writing.

GC-10 MODIFICATIONS AND AMENDMENTS

The parties may during the term of the Contract make modifications and amendments to the Contract but only as provided in this section. Such modifications and amendments shall only be made by mutual agreement in writing. In the case of Contracts not approved by the Board, the Chief Procurement Officer may amend a contract provided that any such amendment does not extend the Contract by more than one (1) year, and further provided that the total cost of all such amendments does not increase the total amount of the Contract beyond \$150,000. Such action may only be made with the advance written approval of the Chief Procurement Officer. If the amendment extends the Contract beyond one (1) year or increases the total award amount beyond \$150,000, then Board approval will be required.

In the case of Contracts approved by the Board, the total cost of all such amendments shall not increase the Contract by more than 10% of the original contract award and the term may only be extended for up to one (1) year. Such action may only be made with the advance written approval of the Chief Procurement Officer.

In the case of Contracts approved by the Board, modifications and amendments which individually or cumulatively result in additional costs of greater than 10% of the original awarded amount or which extend the term of the Contract by more than one (1) year shall be deemed as authorized with the advance approval of the Cook County Board of Commissioners.

No County department or employee thereof has authority to make any modifications or amendments to this Contract. Any modifications or amendments to this Contract made without the express written approval of the Chief Procurement Officer is void and unenforceable.

GC-11 DEFAULT

Contractor shall be in default hereunder in the event of a material breach by Contractor of any term or condition of this Contract where Contractor has failed to cure such breach within ten (10) days after written notice of breach is given to Contractor by the County, setting forth the nature of such breach.

A material breach of the contract by the Contractor includes but is not limited to the following:

1. Failure to begin performance under this Contract within the specified time;
2. Failure to perform under this Contract with sufficient personnel, equipment, or materials to ensure completion of said performance within the specified time or failure to assign qualified personnel to ensure completion within the specified time;
3. Performance of this contract in an unsatisfactory manner;
4. Refusal to perform services deemed to be defective or unsuitable;
5. Discontinuance of performance of Contractor's obligations under the Contract or the impairment or the reasonable progress of performance;
6. Becoming insolvent, being declared bankrupt or committing any act of bankruptcy or insolvency;
7. Any assignment of this contract for the benefit of creditors;
8. Any cause whatsoever which impairs performance in an acceptable manner; or
9. Any other material breach of any term or condition of this Contract.

County shall be in default hereunder if any material breach of the Contract by the County occurs which is not cured by the County within forty-five (45) days after written notice of breach has been given by Contractor to the County, setting forth the nature of such breach.

GC-12 COUNTY'S REMEDIES

If the Contractor fails to remedy a material breach during the ten (10) day cure period pursuant to General Condition GC-11, Default, the County shall have the right to terminate this Contract provided, however, that the County shall give Contractor prior written notice of its intent to terminate. Following notice of breach to Contractor, the County reserves the right to withhold payments owed to Contractor until such time as Contractor has cured the breach which is the subject matter of the notice. In addition, the County shall have the right to pursue all remedies in law or equity.

GC-13 CONTRACTOR'S REMEDIES

If the County has been notified of breach and fails to remedy the breach during the forty-five (45) day cure period pursuant to General Condition GC-11, Default, the Contractor shall have the right to terminate this Contract providing, however, that Contractor shall give the County thirty (30) days prior written notice of termination.

Contractor shall have the right to pursue all remedies available in law or equity. In all cases the Contractor's damages shall be those provable damages not to exceed the value of the Contract as awarded by the Cook County Board of Commissioners. Contractor shall not disrupt the operation or repossess any component thereof.

GC-14 DELAYS

Contractor agrees that no charges or claims for damages shall be made by Contractor for any delays or hindrances from any cause whatsoever during the progress of any portion of this Contract.

GC-15 INSURANCE REQUIREMENTS

- 1) The Contractor shall require all policies of insurance that are in any way related to the work and are secured and maintained by Contractor and all tiers of subcontractors to include clauses providing that each underwriter shall waive all of its rights of recovery, under subrogation or otherwise, against Cook County, Board of Commissioners and employees of the County.
- 2) The Contractor shall waive all rights of recovery against Cook County, Board of Commissioners, employees of the County and other Contractors and subcontractors which Contractor may have or acquired because of deductible clauses in or inadequacy of limits of any policies of insurance that are in any way related to the work and that are secured and maintained by Contractor.
- 3) The Contractor shall require all tiers of subcontractors to waive the rights of recovery against Cook County and all tiers of subcontractors.

Insurance Requirements of the Contractor

Prior to the effective date of this Contract, the Contractor, at its cost, shall secure and maintain at all times, unless specified otherwise, until completion of the term of this Contract the insurance specified below.

Nothing contained in these insurance requirements is to be construed as limiting the extent of the Contractor's responsibility for payment of damages resulting from its operations under this Contract. The insurance purchased and maintained by the Contractor shall be primary and not excess or pro rata to any other insurance issued to the County.

The Contractor's insurance shall apply separately to each insured against whom claim is made or suit is brought, except with respect to the limits of the insurer's liability.

The limits of liability shall be as stated below, unless, prior to the effective date of this Contract, written approval is granted by the Cook County Department of Risk Management for variance from those limits.

1. Coverages

(a) **Workers Compensation Insurance**

Workers' Compensation shall be in accordance with the laws of the State of Illinois or any other applicable jurisdiction.

The Workers Compensation policy shall also include the following provisions:

- (1) Employers' Liability coverage with a limit of
\$500,000 each Accident
\$500,000 each Employee
\$500,000 Policy Limit for Disease
- (2) Broad form all states coverage

GC-15 INSURANCE REQUIREMENTS (CON'T.)

(b) **Commercial General Liability Insurance**

- (1) The Commercial General Liability shall be on an occurrence form basis to cover bodily injury and property damage including loss of use.

General Liability limits shall not be less than \$1,000,000 per occurrence and \$2,000,000 aggregate combined single limit for bodily injury and property damage. The General Liability policy shall include, without limitation the following coverages:

- (a) All premises and operations;
- (b) Broad Form Blanket Contractual Liability;
- (c) Products/Completed Operations;
- (d) Broad Form Property Damage Liability;
- (e) Cross Liability.

(c) **Comprehensive Automobile Liability Insurance**

Comprehensive Automobile Liability to cover all owned, non-owned and hired automobiles, trucks and trailers. The Comprehensive Automobile Liability limits shall not be less than the following:

- 1) Liability - All Autos: Bodily Injury & Property Damage - \$1,000,000 per Occurrence
- 2) Uninsured/Motorists: Per Illinois Requirements

(d) **Umbrella/Excess Liability Insurance**

In addition to the coverages and limits specified above, Contractor and Sub-Contractors of any tier shall secure and maintain a limit of liability no less than:

- 1) \$2,000,000 each occurrence for all liability
- 2) \$2,000,000 in the aggregate per policy year separately with respect to products and completed operations

2. Additional requirements

(a) **Additional Insured**

Cook County, its officials, employees and agents shall be named as additional insureds under the Commercial General Liability policy.

(b) **Qualification of Insurers**

All insurance companies providing coverage shall be licensed or approved by the Department of Insurance, State of Illinois, and shall have a financial rating no lower than (A-) VII as listed in A.M. Best's Key Rating Guide, current edition or interim report. Companies with ratings lower than (A-) VII will be acceptable only upon written consent of the Cook County Department of Risk Management.

GC-15 INSURANCE REQUIREMENTS (CON'T.)

(c) **Insurance Notices**

All policies of insurance which may be required under terms of this Contract shall be endorsed to provide that the insurance company shall notify the Cook County Office of the Chief Procurement Officer, 118 North Clark Street, Room 1018, Chicago, Illinois 60602 at least 30 days prior to the effective date of any cancellation or modification of such policies. Prior to the date on which Contractor commences performance of its part of the work, Contractor shall furnish to the County certificates of insurance maintained by Contractor.

In no event shall any failure of the County to receive Certificates of Insurance required hereof or to demand receipt of such Certificates of Insurance be construed as a waiver of Contractor's obligations to obtain insurance pursuant to these insurance requirements.

GC-16 PATENTS, COPYRIGHTS AND LICENSES

Contractor agrees to hold harmless and indemnify the County, its officers, agents, employees and affiliates from and defend, at its own expense (including reasonable attorneys', accountants' and consultants' fees), any suit or proceeding brought against County based upon a claim that the ownership and/or use of equipment, hardware and software or any part thereof utilized in performing Contractor's services constitutes an infringement of any patent, copyright or license or any other intellectual property right.

In the event the use of any equipment, hardware or software or any part thereof is enjoined, Contractor with all reasonable speed and due diligence shall provide or otherwise secure for County, at the Contractor's election, one of the following: the right to continue use of the equipment, hardware or software; an equivalent system having the Specifications as provided in this Contract; or to modify the system or its component parts so that it becomes non-infringing while performing in a substantially similar manner to the original system, meeting the Specifications of this Contract.

GC-17 COMPLIANCE WITH LAWS

The Contractor shall observe and comply with the laws, ordinances, regulations and codes of the Federal, State, County and other local government agencies which may in any manner affect the performance of the Contract, including but not limited to those County Ordinances set forth in the Certifications attached hereto and incorporated herein. Assurance of compliance with this requirement by the Contractor's employees, agents or subcontractors shall be the responsibility of the Contractor.

The Contractor shall secure and pay for all federal, state and local licenses, permits and fees required hereunder.

GC-18 DELIVERY

All Contract Goods shipped to the County shall be shipped F.O.B., DESTINATION, FREIGHT PREPAID. Arrangements shall be made in advance by the Contractor in order that the County may arrange for receipt of the materials.

Truck deliveries will be accepted before 3:00 P.M. on weekdays only. No deliveries will be accepted on Saturdays, Sundays or County Holidays. The County is not responsible for delivery delays due to waiting times for loading and unloading at dock locations.

The quantity of Contract Goods delivered by truck will be ascertained from a weight certificate issued by a duly licensed Public Weight-Master. In the case of delivery by rail, weight will be ascertained from bill of lading from originating line, but the County reserves the right to re-weigh at the nearest available railroad scale.

The County reserves the right to add new delivery locations or delete previously listed delivery locations as required during the Contract period. The only restriction regarding the County's right to add new delivery locations shall be that any new or additional location shall be within the geographical boundaries of the County of Cook.

GC-19 MINORITY AND WOMEN BUSINESS ENTERPRISES
COOK COUNTY ORDINANCE CHAPTER 34, DIVISION 6, SECTION 34-275 to SECTION 34-303

I. POLICY AND GOALS

- A. It is the policy of the County of Cook to prevent discrimination in the award of or participation in County contracts and to eliminate arbitrary barriers for participation, as both prime and sub-contractors, in such contracts by local businesses certified as Minority Business Enterprises (MBE) and Women-owned Business Enterprises (WBE). In furtherance of this policy, the Cook County Board of Commissioners has adopted a Minority- and Women-owned Business Enterprise Ordinance (the "Ordinance") which establishes a goal of awarding not less than twenty-five percent (25%) of the annual total dollar amount of contracts to certified MBEs and ten percent (10%) of the annual dollar value of all such contracts to certified WBEs.
- B. **The County may set contract-specific goals for each contract, based on the commodities or services specified in this bid document. The MBE/WBE percentages required for this contract are stated in the Special Conditions.** A Bid or Quotation shall be rejected if the County determines that a Bid or Quotation fails to comply with this General Condition, including but not limited to, commitments to achieve for this contract, the MBE/ WBE goals of the contract amount or to include a Petition for Reduction/Waiver documenting why the goals are not attainable despite the contractor's Good Faith Efforts. A Bid or Quotation may be rejected and a new Bid or Quotation may be solicited if the public interest is served thereby. Unless otherwise specified in the Bid or Quotation Documents, for purposes of this GC-19, the contract amount is the amount that has been entered on the Proposal page of the Bid or Quotation Documents.
- C. Except to the extent that a Bid or Quotation includes a Reduction/Waiver request, the contract MBE and WBE participation goals may be achieved by the Bid or Quotation entities' status as a MBE or WBE; by entering into a joint venture with one or more MBEs and/or WBEs; by subcontracting a portion of the work to one or more MBEs and WBEs; by establishing and carrying out a mentor/protégé agreement; by the Indirect Participation of one or more MBEs and WBEs used by the entity submitting a Bid or Quotation in other aspects of its business; or by any combination of the foregoing so long as the Utilization Plan evidences a commitment to the MBE and WBE contract goals set forth in (B) above.
- D. The same Business Enterprise, whether as a contractor, subcontractor or supplier, cannot be utilized as both a MBE and a WBE on the same contract.
- E. To the extent that the Ordinance does not apply to this Bid or Quotation, unless specifically waived in the Bid or Quotation Documents, this GC-19 and the wording of the Ordinance shall apply. If there is a conflict between this GC-19 and the Ordinance or the wording of the Ordinance, the Ordinance or its wording controls.
- F. A Contractor's failure to carry out its commitments in the course of the Contract's performance shall constitute a material breach of the Contract and if such breach is not appropriately cured, may result in the termination of the Contract or such remedy authorized by the Ordinance as the County deems appropriate.

GC-19 MINORITY AND WOMEN BUSINESS ENTERPRISES
COOK COUNTY ORDINANCE CHAPTER 34, DIVISION 6, SECTION 34-275 to SECTION 34-303

II. REQUIRED BID OR QUOTATION SUBMITTALS

To be considered responsive, a Bid or Quotation shall meet the MBE and WBE goals by submitting a Utilization Plan with the Bid or Quotation, which shall be (1) supported by Letters of Intent from the MBEs and WBEs together with the MBEs/WBEs Letters of Certification, and/or (2) include a written Petition for Reduction/Waiver with the Bid or Quotation supported by documentation of Good Faith Efforts to meet the goals. Failure to submit the documents set forth in (A) and (B) of this Section II in accordance with these guidelines will cause the Bid or Quotation to be considered non-responsive and shall be cause to reject the Bid or Quotation.

A. MBE/WBE Utilization Plan

Each Bid or Quotation shall include with the Bid or Quotation a complete Utilization Plan. The Utilization Plan shall list the names, mail and email addresses, telephone number and contact persons of businesses intended to be used as MBEs and WBEs on the Contract. If the entity submitting a Bid or Quotation, or any of its subcontractors, suppliers or consultants, are certified MBEs or WBEs they shall be identified as an MBE or WBE within the Utilization Plan.

1. Letter(s) of Intent

Except as set forth below, a Bid or Quotation shall include with its Utilization Plan, Letter(s) of Intent executed by each MBE and WBE included in the Utilization Plan and by the entity submitting the Bid or Quotation, which sets forth that each MBE and WBE intends to perform as a subcontractor, supplier, joint venture partner and/or consultant on the contract. The Letters of Intent must accurately detail the work to be performed by the MBE or WBE firm and the agreed rates and/or prices to be paid.

If the Bid or Quotation does not include all Letter(s) of Intent with its Utilization Plan, such Letter(s) of Intent may be submitted to the Office of Contract Compliance within three (3) business days after the date of the Bid or Quotation Opening. Failure to submit all Letter(s) of Intent as required shall result in the Contract Compliance Administrator's determination that a Bid or Quotation is not responsive and shall be cause to reject the Bid or Quotation.

All commitments made by a Bid or Quotation in its Utilization Plan must conform to those included in the submitted Letter(s) of Intent. The Contract Compliance Administrator reserves the right to request supplemental information regarding the Letter(s) of Intent submitted with a Bid or Quotation and such information shall be furnished. (Reference pages EDS-2 for a format sample of a Letter of Intent)

2. Letter(s) of Certification

Only a Letter of Certification from one of the following entities shall be accepted as certification of MBE/WBE status:

County of Cook
Small Business Administration 8A Program
Illinois Unified Certification Program
or any other governmental body or agency approved by the Contract Compliance Administrator as applying certification standards substantially similar to those applied by the County of Cook may also be accepted.

The Contract Compliance Administrator retains the right to reject the certification of any MBE or WBE on the ground that it does not meet the County's definition of a MBE or WBE.

GC-19 MINORITY AND WOMEN BUSINESS ENTERPRISES
COOK COUNTY ORDINANCE CHAPTER 34, DIVISION 6, SECTION 34-275 to SECTION 34-303

3. Joint Venture Affidavit

In the event a Bid or Quotation achieves MBE and/or WBE participation by entering into a Joint Venture, the Bid or Quotation shall include the required Joint Venture Affidavit which is available in the Office of Contract Compliance. Such Joint Venture Affidavit shall be submitted with the Bid or Quotation along with Letter(s) of Certification.

B. Reduction/Waiver Petition

In the event a Bid or Quotation is unable to meet the applicable contract MBE and WBE participation goals, the Bid or Quotation must include a Petition for Reduction/Waiver and submit the Petition with its Bid or Quotation. The Petition for Reduction/Waiver shall be supported with evidence and sufficient documentation to demonstrate the Bid's or Quotation's Good Faith Efforts in attempting to achieve the applicable MBE and WBE goals. If a Bid or Quotation does not include all documentation in support of the Petition with its Bid or Quotation, such documentation must be submitted to the Office of Contract Compliance within three (3) business days after the date of the Bid or Quotation opening.

III. REDUCTION/WAIVER OF MBE/WBE GOALS

A. Granting a Reduction/Waiver Request.

1. The determination of the adequacy of the Good Faith Efforts to utilize MBEs and WBEs in a Bid or Quotation will be evaluated on the basis of the actions in attempting to achieve MBE and WBE participation goals set forth in the Bid or Quotation. Examples of actions constituting Good Faith Efforts for a Bid or Quotation are set forth within the Ordinance and in the "Petition for Reduction/Waiver of MBE/WBE Participation Goals" contained in the Bid or Quotation Documents.
2. The Contract Compliance Administrator may grant the Petition for Reduction/Waiver based upon the following criteria: (a) sufficient qualified MBEs and WBEs capable of providing the goods or services required by the contract are unavailable despite the good faith efforts of the contractor; (b) the specifications and the reasonable and necessary requirements for performing the contract make it impossible or economically infeasible to divide the contract into sufficiently small tasks or quantities to enable the contractor to utilize MBEs and WBEs in accordance with the applicable goals; (c) the price(s) quoted by any potential MBE or WBE source of goods or services is more than 10% above competitive levels; and (d) any other factor determined to be relevant by the Contract Compliance Administrator.

B. Denying a Reduction/Waiver Request.

1. If the Contract Compliance Administrator determines that a Bid or Quotation has not demonstrated adequate Good Faith Efforts to meet the applicable contract MBE and WBE goals, the Contract Compliance Administrator may deny a Petition for Reduction/Waiver and declare the Bid or Quotation non-responsive and recommend rejection of the Bid or Quotation.
2. Failure to undertake and/or to document adequate Good Faith Efforts shall be cause to deny a Petition for Reduction/Waiver. Determination of the adequacy of a Bid's or Quotation's Good Faith Effort will be evaluated on the basis of the Bid's or Quotation's actions as of the date of the Bid or Quotation opening.

GC-19 MINORITY AND WOMEN BUSINESS ENTERPRISES
COOK COUNTY ORDINANCE CHAPTER 34, DIVISION 6, SECTION 34-275 to SECTION 34-303

IV. CHANGES IN CONTRACTOR'S UTILIZATION PLAN

- A. Contractor, during its performance of the Contract, may not change the MBE or WBE commitments specified in its Utilization Plan, including but not limited to, terminating a MBE or WBE contract, reducing the scope of the work to be performed by a MBE/WBE, or decreasing the price to a MBE/WBE, except as otherwise provided by the Ordinance.
- B. Where an enterprise under the Contract was previously considered to be a MBE or WBE but is later found not to be, or work is found not to be creditable toward the MBE or WBE goals as stated in the Utilization Plan, the Contractor shall seek to discharge the disqualified enterprise, upon proper written notification to the Contract Compliance Administrator, and make every effort to identify and engage a qualified MBE or WBE as its replacement. Failure to obtain a MBE or WBE replacement within 30 working days of the Contract Compliance Administrator's written approval of the removal of a MBE or WBE may result in the termination of the contract or the imposition of such remedy authorized by the Ordinance, unless a written Petition for Reduction/Waiver is granted to Contractor allowing Contractor to award the work to a non-MBE or WBE.

V. NON-COMPLIANCE

If the County determines that the Contractor has failed to comply with its contractual commitments or any portion of the Ordinance or this GC-19, the Contract Compliance Administrator will notify the Contractor of such noncompliance and may take any and all appropriate actions as set forth within the Ordinance.

VI. REPORTING/RECORD-KEEPING REQUIREMENTS

The Contractor is required to comply with the reporting and record-keeping requirements as set forth in the Ordinance and as established by the Contract Compliance Administrator. Upon award of a Contract, Contractor is responsible for acquiring all necessary County reporting and record-keeping forms which will be made available in the Office of Contract Compliance.

VII. EQUAL EMPLOYMENT OPPORTUNITY

Compliance with MBE and WBE requirements will not diminish or supplant Equal Employment Opportunity and Civil Rights provisions as required by law as they relate to contractor and subcontractor obligations.

GC-20 MATERIAL DATA SAFETY SHEET

Where required under the Illinois "Toxic Substance Disclosure To Employees Act", Illinois Compiled Statutes, 1994, 820 ILCS 255/1, Contractor shall submit with each delivery of Contract Goods, a Material Safety Data Sheet.

GC-21 CONDUCT OF THE CONTRACTOR

The Contractor agrees to inform the County on a timely basis of all of the Contractor's interests, if any, which are or which the Contractor reasonably believes may be incompatible with any interest of the County. The Contractor shall take notice of and comply with the Cook County Lobbyist Registration Ordinance (No. 93-0-22, 6-22-93). The Contractor shall not use for personal gain or make other improper use of privileged information which is acquired in connection with the Contract.

GC-22 ACCIDENT REPORTS

The Chief Procurement Officer and Director shall be given written notification within twenty-four (24) hours of any occurrence, on the site or otherwise, which pertains in any way to this Contract and involves the Contractor's personnel, or those of any of his subcontractors or others whether said occurrence be in the nature of bodily injury to employees or third parties or property damage.

The report shall include the name of person(s) injured, name of his employer, date, time and location of occurrence, extent of injury and/or damage, name(s) of eyewitnesses, and who treated the person(s) for injuries sustained, and such other information as may be relevant. The Contractor shall notify the local police any occurrence requiring an official police record. The accident report should indicate whether the police were notified and, if so, the number of the police report.

GC-23 USE OF PREMISES

Contractor shall confer with the Director to ascertain full knowledge of all rules and regulations of the County facilities relative to this Contract and shall comply therewith. The Contractor shall confine the operations of its employees to the limits indicated by laws, ordinances, permits and/or direction of the Director and shall not encumber the premises with materials or debris. The Contractor shall not load or permit any part of the structure to be loaded with a weight that will endanger its safety.

The County reserves the right to prohibit any person from entering any County facility for any reason. All subcontractors, agents and employees of the Contractor shall be accountable to the Director while on any County property and shall abide by all security regulations imposed by the County.

GC-24 GENERAL NOTICE

All notices required pursuant to this Contract shall be in writing and addressed to the parties at their respective addresses set forth below. All such notices shall be deemed duly given if hand delivered or if deposited in the United States mail, registered or certified, return receipt requested. Notice as provided herein does not waive service of summons or process.

TO THE COUNTY:

Chief Procurement Officer
County of Cook
Room 1018 County Building
118 North Clark Street
Chicago, Illinois 60602
(Reference County Contract Number)

TO THE CONTRACTOR:

At address provided in its bid document or as otherwise indicated in writing to County.

GC-25 TERMINATION FOR CONVENIENCE

The County may terminate this Contract, or any portion, at any time by notice in writing from the County to the Contractor.

GC-26 GUARANTEES AND WARRANTIES

All guarantees and warranties required shall be furnished by the Contractor and shall be delivered to the Director before final voucher on the Contract is issued. The Contractor agrees that the Contract Goods or services to be furnished shall be covered by the most favorable commercial warranties the Contractor gives to any customer for the same or substantially similar Contract Goods or services and that the rights and remedies so provided are in addition to and do not limit any rights afforded to County.

GC-27 STANDARD OF CONTRACT GOODS

Only new, originally manufactured Contract Goods will be accepted by the County. The County will not accept any Contract Goods that have been refurbished, rebuilt, restored or renovated in any manner. In addition, experimental materials will not be acceptable. Contract Goods not produced by regular production methods and/or which have not been offered for sale to the public through accepted industry trade channels for a reasonable period of time prior to the offering of the proposal, will be considered experimental.

GC-28 CONFIDENTIALITY AND OWNERSHIP OF DOCUMENTS

Contractor acknowledges and agrees that information regarding this Contract is confidential and shall not be disclosed, directly, indirectly or by implication, or be used by Contractor in any way, whether during the term of this Contract or at any time thereafter, except solely as required in the course of Contractor's performance of Services hereunder. Contractor shall comply with the applicable privacy laws and regulations affecting Owner and will not disclose any of Owner's records, materials, or other data to any third party. Contractor shall not have the right to compile and distribute statistical analyses and reports utilizing data derived from information or data obtained from Owner without the prior written approval of Owner. In the event such approval is given, any such reports published and distributed by Contractor shall be furnished to Owner without charge.

All documents, data, studies, reports, work product or product created as a result of the performance of Service(s) shall be the property of the County of Cook. It shall be a breach of this Contract for the Contractor to reproduce or use, any documents, data, studies, report, work product or product obtained from the County of Cook or created hereby for its own purposes or to be copied and used by any third party. During the performance of the Services herein provided for, the Contractor shall be responsible of any loss or damage to the documents herein enumerated while they are in his possession, and any such document lost or damaged shall be restored at the expense of the Contractor. Full access to the work during the preparation of the plans shall be available to the County and other public agencies interested in this work.

GC-29 QUANTITIES

The quantities of materials required for the performance of the Contract are estimates for the purpose of determining an approximate total Contract amount and may not be the actual quantities required during the term of the Contract. The County reserves the right to increase or decrease the quantities at the Contract price, to correspond to the actual needs of the County. The County will be obligated to order and pay for only such quantities as are from time to time ordered, delivered, and accepted on purchase orders issued by the Chief Procurement Officer.

GC-30 AUDIT; EXAMINATION OF RECORDS

The Contractor agrees that the Cook County Auditor or any of its duly authorized representatives shall, until expiration of three (3) years after the final payment under the Contract, have access and the right to examine any books, documents, papers, canceled checks, bank statements, purveyor's and other invoices, and records of the Contractor related to the Contract, or to Contractor's compliance with any term, condition or provision thereof. The Contractor shall be responsible for establishing and maintaining records sufficient to document the costs associated with performance under the terms of this Contract.

The Contractor further agrees that it shall include in all of its subcontracts hereunder a provision to the effect that the subcontractor agrees that the Cook County Auditor or any of its duly authorized representatives shall, until expiration of three (3) years after final payment under the subcontract, have access and the right to examine any books, documents, papers, canceled checks, bank statements, purveyor's and other invoices and records of such subcontractor involving transactions relating to the subcontract, or to such subcontractor's compliance with any term, condition or provision thereunder or under the Contract.

In the event the Contractor receives payment under the Contract, reimbursement for which is later disallowed by the County, the Contractor shall promptly refund the disallowed amount to the County on request, or at the County's option, the County may credit the amount disallowed from the next payment due or to become due to the Contractor under any contract with the County.

GC-31 GOVERNING LAW

This Contract shall be governed by and construed under the laws of the State of Illinois. The Contractor irrevocably agrees that, subject to the County's sole and absolute election, any action or proceeding in any way, manner or respect arising out of the Contract, or arising from any dispute or controversy arising in connection with or related to the Contract, shall be litigated only in courts within the City of Chicago, County of Cook, State of Illinois, and the Contractor consents and submits to the jurisdiction thereof. In accordance with these provisions, Contractor waives any right it may have to transfer or change the venue of any litigation brought against it by the County pursuant to this Contract.

GC-32 COOPERATION WITH INSPECTOR GENERAL

Contractors, subcontractors, licensees, grantees or persons or businesses who have a County contract, grant, license, or certification of eligibility for County contracts shall abide by all of the applicable provisions of the Office of the Independent Inspector General Ordinance (Section 2-281 et. seq. of the Cook County Code of Ordinances). Failure to cooperate as required may result in monetary and/or other penalties.

GC-33 WAIVER

No term or provision of this Contract shall be deemed waived and no breach consented to unless such waiver or consent shall be in writing and signed by the party claimed to have waived or consented. The waiver of any such provision shall be strictly limited to the identified provision.

GC-34 ENTIRE CONTRACT

It is expressly agreed that the provisions set forth in this Contract constitute all the understandings and agreements between the parties. Any prior agreements, promises, negotiations, or representations not expressly set forth in this Contract are of no force and effect.

GC-35 FORCE MAJEURE

Neither Contractor nor County shall be liable for failing to fulfill any obligation under this Contract if such failure is caused by an event beyond such party's reasonable control and which is not caused by such party's fault or negligence. Such events shall be limited to acts of God, acts of war, fires, lightning, floods, epidemics, or riots.

GC-36 GOVERNMENTAL JOINT PURCHASING AGREEMENT

Pursuant to Section 4 of the Illinois Governmental Joint Purchasing Act (30 ILCS 525) and the Joint Purchase Agreement approved by the Cook County Board of Commissioners (April 9, 1965), other units of government may purchase goods or services under this contract.

In the event that other agencies participate in a joint procurement, the County reserves the right to renegotiate the price to accommodate the larger volume.

GC-37 COOPERATIVE PURCHASING

As permitted by the County of Cook, other government entities may wish to also participate under the same terms and conditions contained in this contract (piggyback). Each entity wishing to piggyback must have prior authorization from the County of Cook and vendor. If such participation is authorized, all purchase orders will be issued directly from and shipped directly to the entity requiring supplies/services. The County shall not be held responsible for any orders placed, deliveries made or payment for supplies/services ordered by these entities. Each entity reserves the right to determine their participation in this contract.

GC-38 FEDERAL CLAUSES

1. Interest of Members of or Delegates to the United States Congress

In accordance with 41 U.S.C. § 22, the Contractor agrees that it will not admit any member of or delegate to the United States Congress to any share or part of the Contract or any benefit derived therefrom.

2. False or Fraudulent Statements and Claims

(a) The Contractor recognizes that the requirements of the Program Fraud Civil Remedies Act of 1986, as amended, 49 U.S.C. §§ 3081 et seq and U.S. DOT regulations, "Program Fraud Civil Remedies," 49 C.F.R. Part 31, apply to its actions pertaining to the Contract. Accordingly, by signing the Contract, the Contractor certifies or affirms the truthfulness and accuracy of any statement it has made, it makes, or it may make pertaining to the Contract, including without limitation any invoice for its services. In addition to other penalties that may be applicable, the Contractor also acknowledges that if it makes a false, fictitious, or fraudulent claim, statement, submission, or certification, the Federal Government reserves the right to impose the penalties of the Program Fraud Civil Remedies Act of 1986, as amended, on the Contractor to the extent the Federal Government deems appropriate.

(b) The Contractor also acknowledges that if it makes a false, fictitious, or fraudulent claim, statement, submission, or certification to the County or Federal Government in connection with an urbanized area formula project financed with Federal assistance authorized by 49 U.S.C. § 5307, the Government reserves the right to impose on the Contractor the penalties of 18 U.S.C. § 1001 and 49 U.S.C. § 5307(n)(1), to the extent the Federal Government deems appropriate.

3. Federal Interest in Patents

(a) General. If any invention, improvement, or discovery of the Contractor is conceived or first actually reduced to practice in the course of or under the Contract, and that invention, improvement, or discovery is patentable under the laws of the United States of America or any foreign country, the Contractor agrees to notify County immediately and provide a detailed report.

(b) Federal Rights. Unless the Federal Government later makes a contrary determination in writing, the rights and responsibilities of the County, Contractor, and the Federal Government pertaining to that invention, improvement, or discovery will be determined in accordance with applicable Federal laws and regulations, including any waiver thereof. Unless the Federal Government later makes a contrary determination in writing, the Contractor agrees that, irrespective of its status or the status of any subcontractor at any tier (e.g., a large business, small business, non-profit organization, institution of higher education, individual), the Contractor agrees it will transmit to the Federal Government those rights due the Federal Government in any invention resulting from the contract.

4. Federal Interest in Data and Copyrights

(a) Definition. The term "subject data" used in this section means recorded information, whether or not copyrighted, that is delivered or specified to be delivered under the Contract. Examples include, but are not limited, to: computer software, engineering drawings and associated lists, specifications, standards, process sheets, manuals, technical reports, catalog item identifications, and related information. The term "subject data" does not include financial reports, cost analyses, and similar information incidental to Contract administration.

(b) Federal Restrictions. The following restrictions apply to all subject data first produced in the performance of the Contract. Except as provided in the Contract and except for its own internal use, the Contractor may not publish or publicly reproduce subject data in whole or in part, or in any manner or form, nor may the Contractor authorize others to do so, without the written consent of the County and the Federal Government, until such time as the Federal Government may have either released or approved the release of such data to the public.

GC-38 FEDERAL CLAUSES (CON'T.)

- (c) **Federal Rights in Data and Copyrights.** In accordance with subparts 34 and 36 of the Common Rule, the County and the Federal Government reserve a royalty-free, non-exclusive and irrevocable license to reproduce, publish, or otherwise use, and to authorize others to use, for County or Federal Government purposes, the types of subject data described below. Without the copyright owner's consent, the County and Federal Government may not extend their license to other parties.
 - (1) Any subject data developed under the contract or subagreement financed by a federal Grant Agreement or Cooperative Agreement, whether or not a copyright has been obtained; and
 - (2) Any rights of copyright which the Contractor purchases ownership with Federal assistance.

- (d) **Special Federal Rights for Planning Research and Development Projects.** When the Federal Government provides financial assistance for a planning, research, development, or demonstration project, its general intention is to increase public knowledge, rather than limit the benefits of the project to participants in the project. Therefore, unless the Federal Government determines otherwise, the Contractor on a planning, research, development, or demonstration project agrees that, in addition to the rights in data and copyrights set forth above, the County or Federal Government may make available to any third party either a license in the copyright to the subject data or a copy of the subject data. If the project is not completed for any reason whatsoever, all data developed under the project will become subject data and will be delivered as the County or Federal Government may direct. This subsection, however, does not apply to adaptations of automatic data processing equipment or previously existing software programs for the County's use whose costs are financed with Federal transportation funds for capital projects.

- (e) **Hold Harmless.** Unless prohibited by state law, upon request by the County or the Federal Government, the Contractor agrees to indemnify, save, and hold harmless the County and the Federal Government and their officers, agents, and employees acting within the scope of their official duties against any liability, including costs and expenses, resulting from any willful or intentional violation by the Contractor of proprietary rights, copyrights, or right of privacy, arising out of the publication, translation, reproduction, delivery, use, or disposition of any data furnished under the Contract. The Contractor will not be required to indemnify the County or Federal Government for any such liability arising out of the wrongful acts of employees or agents of the County or Federal Government.

- (f) **Restrictions on Access to Patent Rights.** Nothing contained in this section on rights in data will imply a license to the County or Federal Government under any patent or be construed as affecting the scope of any license or other right otherwise granted to the County or Federal Government under any patent.

- (g) **Application on Materials Incorporated into Project.** The requirements of Subsections 2, 3, and 4 of this Section do not apply to material furnished by the County and incorporated into the work.

GC-38 FEDERAL CLAUSES (CON'T.)

5. **Records and Audits**

Contractor will deliver or cause to be delivered all documents (including but not limited to all Deliverables and supporting data, records, graphs, charts and notes) prepared by or for the County under the terms of this Agreement to the County promptly in accordance with the time limits prescribed in this Contract, and if no time limit is specified, then upon reasonable demand therefor or upon termination or completion of the Services hereunder. In the event of the failure by the Contractor to make such delivery, then and in that event, the Contractor will pay to County reasonable damages the County may sustain by reason thereof.

The County and the Federal Government will have the right to audit all payments made to the Contractor under this Agreement. Any payments to the Contractor which exceed the amount to which the Contractor is entitled under the terms of this Agreement will be subject to set-off.

The Contractor will keep and retain records relating to this Agreement and will make such records available to representatives of the County and the Federal Government, including without limitation the sponsoring federal agency, other participating agencies, and the Comptroller General of the United States, at reasonable times during the performance of this Agreement and for at least five years after termination of this Agreement for purposes of audit, inspection, copying, transcribing and abstracting.

No provision in this Agreement granting the County or the Federal Government a right of access to records is intended to impair, limit or affect any right of access to such records which the County or the Federal Government would have had in the absence of such provisions.

6. **Environmental Requirements**

The Contractor recognizes that many Federal and state laws imposing environmental and resource conservation requirements may apply to the Contract. Some, but not all, of the major Federal Laws that may affect the Contract include: the National Environmental Policy Act of 1969, as amended, 42 U.S.C. §§ 4321 et seq.; the Clean Air Act, as amended, 42 U.S.C. §§ 7401 et seq. and scattered sections of 29 U.S.C.; the Clean Water Act, as amended, scattered sections of 33 U.S.C. and 12 U.S.C.; the Resource Conservation and Recovery Act, as amended, 42 U.S.C. §§ 6901 et seq.; and the Comprehensive Environmental Response, Compensation, and Liability Act, as amended, 42 U.S.C. §§ 9601 et seq. The Contractor also recognizes that U.S. EPA, U.S. DOT and other agencies of the Federal Government have issued and are expected in the future to issue regulations, guidelines, standards, orders, directives, or other requirements that may affect the Contract. Thus, the Contractor agrees to adhere to, and impose on its subcontractors, any such Federal requirements as the Federal Government may now or in the future promulgate. Listed below are requirements of particular concern. The Contractor acknowledges that this list does not constitute the Contractor's entire obligation to meet all Federal environmental and resource conservation requirements. The Contractor will include these provisions in all subcontracts.

- (a) Environmental Protection. The Contractor agrees to comply with the applicable requirements of the National Environmental Policy Act of 1969, as amended, 42 U.S.C. §§ 4321 et seq. in accordance with Executive Order No. 12898, "Federal Actions to Address Environmental Justice in Minority Populations and Low-Income Populations," 59 Fed. Reg. 7629, Feb. 16, 1994; U.S. DOT statutory requirements on environmental matters at 49 U.S.C. § 5324(b); Council on Environmental Quality regulations on compliance with the National Environmental Policy Act of 1969, as amended, 40 C.F.R. Part 1500 et seq.; and U.S. DOT regulations, "Environmental Impact and Related Procedures," 23 C.F.R. Part 771 and 49 C.F.R. Part 622.

GC-38 FEDERAL CLAUSES (CON'T.)

- (b) **Air Quality.** The Contractor agrees to comply with all applicable standards, orders, or regulations issued pursuant to the Clean Air Act, as amended, 42 U.S.C. §§ 7401 et seq. Specifically, the Contractor agrees to comply with applicable requirements of U.S. EPA regulations, "Conformity to State of Federal Implementation Plans of Transportation Plans, Programs, and Projects Developed, Funded or Approved Under Title 23 U.S.C. or the Federal Transit Act," 40 C.F.R. Part 51, Subpart T; and "Determining Conformity of Federal Actions to State or Federal Implementation Plans," 40 C.F.R. Part 93. The Contractor further agrees to report and require each subcontractor at any tier to report any violation of these requirements resulting from any Contract implementation activity to the County and the appropriate U.S. EPA Regional Office.
- (c) **Clean Water.** The Contractor agrees to comply with all applicable standards, orders, or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. §§ 1251 et seq. The Contractor further agrees to report and require each subcontractor at any tier to report any violation of these requirements resulting from any Contract implementation activity to the County and the appropriate U.S. EPA Regional Office.
- (d) **List of Violating Facilities.** The Contractor agrees that any facility to be used in the performance of the Contract or to benefit from the Contract will not be listed on the U.S. EPA List of Violating Facilities ("List"), and the Contractor will promptly notify the County if the Contractor receives any communication from the U.S. EPA that such a facility is under consideration for inclusion on the List.
- (e) **Preference for Recycled Products.** To the extent practicable and economically feasible and to the extent that it does not reduce or impair the quality of the work, the Contractor agrees to use recycled products in performance of the Contract pursuant to U.S. Environment Protection Agency (U.S. EPA) guidelines at 40 C.F.R. Parts 247-253, which implement section 6002 of the Resource Conservation and Recovery Act, as amended, 42 U.S.C. § 6962.

7. **No Exclusionary or Discriminatory Specifications**

Apart from inconsistent requirements imposed by Federal statute or regulations, the Contractor agrees that it will comply with the requirements of 49 U.S.C. § 5323(h)(2) by refraining from using any Federal assistance to support subcontracts procured using exclusionary or discriminatory specifications.

8. **Cargo Preference - Use of United States Flag Vessels**

The Contractor agrees to comply with U.S. Maritime Administration regulations, "Cargo-Preference – U.S. Flag Vessels," 49 C.F.R. Part 381, and to include the clauses required by those regulations, modified as necessary to identify the affected parties, in each subcontract or subagreement involving equipment, materials, or commodities suitable for transport by ocean vessel.

9. **Fly America**

Section 14.c of the Master Agreement states that if the contract or subcontracts may involve the international transportation of goods, equipment, or personnel by air, the contract must require Contractors and subcontractors at every tier to use U.S.-flag air carriers, to the extent service by these carriers is available. 49 U.S.C. 40118 and 4 C.F.R. Part 52.

GC-38 FEDERAL CLAUSES (CON'T.)

10. No Federal Government Obligations to Third Parties

The Contractor agrees that, absent the Federal Government's express written consent, the Federal Government will not be subject to any obligations or liabilities to any contractor or any other person not a party to the Grant Agreement or Cooperative Agreement between the County and the Federal Government which is a source of funds for this Contract. Notwithstanding any concurrence provided by the Federal Government in or approval of any solicitation, agreement, or contract, the Federal Government continues to have no obligations or liabilities to any party, including the Contractor.

11. Allowable Costs

Notwithstanding any compensation provision to the contrary, the Contractor's compensation under this Contract will be limited to those amounts which are allowable and allocable to the Contract in accordance with OMB Circular A-87 and the regulations in 49 C.F.R. Part 18. To the extent that an audit reveals that the Contractor has received payment in excess of such amounts, the County may offset such excess payments against any future payments due to the Contractor and, if no future payments are due or if future payments are less than such excess, the Contractor will promptly refund the amount of the excess payments to the County.

12. Trade Restrictions

Contractor certifies that neither it nor any Subcontractor:

- (a) is owned or controlled by one or more citizens of a foreign country included in the list of countries that discriminate against U.S. firms published by the Office of the United States Trade Representative (USTR);
- (b) has knowingly entered into any contract or subcontract with a person that is a citizen or national of a foreign country on said list, nor is owned or controlled directly or indirectly by one or more citizens or nationals of a foreign country on said list;
- (c) will procure, subcontract for, or recommend any product that is produced in a foreign country on said list.

Unless the restrictions of this clause are waived by the Secretary of Transportation in accordance with 49 CFR 30.17, no Notice-to-Proceed will be issued to an entity who is unable to certify to the above. If Contractor knowingly procures or subcontracts for the supply of any product or service of a foreign country on said list for use on the project, the USDOT may direct, through the County, cancellation of the Contract at no cost to the Government.

Further, Contractor agrees that it will incorporate this provision for certification without modification in each subcontract. Contractor may rely on the certification of a prospective Subcontractor unless it has knowledge that the certification is erroneous. Contractor will provide immediate written notice to the County if it learns that its certification or that of a Subcontractor was erroneous when submitted or has become erroneous by reason of changed circumstances. Each Subcontractor must agree to provide written notice to Contractor if at any time it learns that its certification was erroneous by reason of changed circumstances. Nothing contained in the foregoing will be construed to require establishment of a system of records in order to render, in good faith, the certification required by this provision. The knowledge and information of the Contractor is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

This certification concerns a matter within the jurisdiction of an agency of the United States of America and the making of a false, fictitious, or fraudulent certification may render the maker subject to prosecution under Title 18, United States Code, Section 100

GC-38 FEDERAL CLAUSES (CON'T.)

13. **Contract Work Hours and Safety Standards Act**

If applicable according to their terms, the Contractor agrees to comply and assures compliance with sections 102 and 107 of the Contract Work Hours and Safety Standards Act, as amended, 40 U.S.C. §§ 327 through 333, and implementing U.S. DOL regulations, "Labor Standards Provisions Applicable to Contracts Governing Federally Financed and Assisted Construction (also Labor Standards Provisions Applicable to Nonconstruction Contracts Subject to the Contract Work Hours and Safety Standards Act)," 29 C.F.R. Part 5; and U.S. DOL regulations, "Safety and Health Regulations for Construction," 29 C.F.R. Part 1926. In addition to other requirements that may apply:

- (a) In accordance with section of the Contract Work Hours and Safety Standards Act, as amended, 40 U.S.C. §§ 327 through 332, the Contractor agrees and assures that, for the Contract, the wages of every mechanic and laborer will be computed on the basis of a standard work week of 40 hours, and that each worker will be compensated for work exceeding the standard work week at a rate of not less than 1.5 times the basic rate of pay for all hours worked in excess of 40 hours in the work week. The Contractor agrees that determinations pertaining to these requirements will be made in accordance with applicable U.S. DOL regulations, "Labor Standards Provisions Applicable to Contracts Governing Federally Financed and Assisted Construction (also Labor Standards Provisions Applicable to Nonconstruction Contracts Subject to the Contract Work Hours and Safety Standards Act)," 29 C.F.R. Part 5.
- (b) In accordance with section 107 of the Contract Work Hours and Safety Standards Act, as amended, 40 U.S.C. § 333, the contractor agrees and assures that no laborer or mechanic working on a construction contract will be required to work in surroundings or under working conditions that are unsanitary, hazardous, or dangerous to his or her health and safety, as determined in accordance with U.S. DOL regulations, "Safety and Health Regulations for Construction," 29 C.F.R. Part 1926.

14. **Veteran's Preference**

In the employment of labor (except in executive, administrative, and supervisory positions), preference will be given to Vietnam-era veterans and disabled veterans. However, this preference may be given only where individuals are available and qualified to perform the work to which employment relates.

15. **Copyright Ownership**

Consultant and the County intend that, to the extent permitted by law, the Deliverables to be produced by Consultant at the County's instance and expense pursuant to this Agreement are conclusively deemed "works made for hire" within the meaning and purview of Section 101 of the United States Copyright Act, 17 U.S.C. §101 et seq. (the "Copyright Act"), and that the County will be the copyright owner of the Deliverables and of all aspects, elements and components of them in which copyright can subsist.

To the extent that any Deliverable does not qualify as a "work made for hire," Consultant irrevocably grants, conveys, bargains, sells, assigns, transfers and delivers to the County, its successors and assigns, all right, title and interest in and to the copyrights and all U.S. and foreign copyright registrations, copyright applications and copyright renewals for them, and other intangible, intellectual property embodied in or pertaining to the Deliverables prepared for the County under this Agreement, free and clear of any liens, claims or other encumbrances, to the fullest extent permitted by law. Consultant will execute all documents and perform all acts that the County may reasonably request in order to assist the County in perfecting its rights in and to the copyrights relating to the Deliverables, at the sole expense of the County. Consultant warrants to County, its successors and assigns, that on the date of transfer Consultant is the lawful owner of good and marketable title in and to the copyrights for the Deliverables and has the legal rights to fully assign them. Consultant further warrants that it has not assigned any copyrights nor granted any licenses, exclusive or nonexclusive, to any other party, and that it is not a party to any other agreements or subject to any other restrictions with respect to the Deliverables. Consultant warrants and represents that the Deliverables are complete and comprehensive, and the Deliverables are a work of original authorship.

GC-38 FEDERAL CLAUSES (CON'T.)

16. Accessibility Compliance

If this Agreement involves design for construction, the Consultant warrants that all design documents produced or utilized under this Agreement and all construction or alterations undertaken under this Agreement will comply with all federal, state and local laws and regulations regarding accessibility standards for persons with disabilities or environmentally limited persons including, but not limited to, the following: the Americans with Disabilities Act of 1990, 42 U.S.C. § 12101 et seq. and the Americans with Disabilities Act Accessibility Guidelines for Buildings and Facilities ("ADAAG"); the Architectural Barriers Act, Pub. L. 90-480 (1968), and the Uniform Federal Accessibility Standards ("UFAS"); and the Illinois Environmental Barriers Act, 410 ILCS 25/1 et seq., and all regulations promulgated thereunder, see Illinois Administrative Code, Title 71, Chapter 1, Section 400.110. If the above standards are inconsistent, the Consultant must comply with the standard providing the greatest accessibility. Also, the Consultant must, prior to construction, review the plans and specifications to insure compliance with the above referenced standards. If the Consultant fails to comply with the foregoing standards, the Consultant must perform again, at no expense, all services required to be re-performed as a direct or indirect result of such failure.

17. Visual Rights Act Waiver

The Consultant/Contractor waives any and all rights that may be granted or conferred under Section 106A and Section 113 of the United States Copyright Act, (17 U.S.C. § 101 et seq.) (the "Copyright Act") in any work of visual art that may be provided pursuant to this Agreement,. Also, the Consultant/Contractor represents and warrants that the Consultant/Contractor has obtained a waiver of Section 106A and Section 113 of the Copyright Act as necessary from any employees and subcontractors, if any.

18. Equal Employment Opportunity

All contracts shall contain a provision requiring compliance with E.O. 11246, "Equal Employment Opportunity," as amended by E.O. 11375, "Amending Executive Order 11246 Relating to Equal Employment Opportunity," and as supplemented by regulations at 41 CFR part 60, "Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor."

19. Copeland "Anti-Kickback" Act (18 U.S.C. 874 and 40 U.S.C. 276c)

All contracts and subgrants in excess of \$2000 for construction or repair awarded by recipients and subrecipients shall include a provision for compliance with the Copeland "Anti-Kickback" Act (18 U.S.C. 874), as supplemented by Department of Labor regulations (29 CFR part 3, "Contractors and Subcontractors on Public Building or Public Work Financed in Whole or in Part by Loans or Grants from the United States"). The Act provides that each contractor or subrecipient shall be prohibited from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part of the compensation to which he is otherwise entitled. The recipient shall report all suspected or reported violations to the Federal awarding agency.

20. Davis-Bacon Act, as amended (40 U.S.C. 276a to a-7)

When required by Federal program legislation, all construction contracts awarded by the recipients and subrecipients of more than \$2000 shall include a provision for compliance with the Davis-Bacon Act (40 U.S.C. 276a to a-7) and as supplemented by Department of Labor regulations (29 CFR part 5, "Labor Standards Provisions Applicable to Contracts Governing Federally Financed and Assisted Construction"). Under this Act, contractors shall be required to pay wages to laborers and mechanics at a rate not less than the minimum wages specified in a wage determination made by the Secretary of Labor. In addition, contractors shall be required to pay wages not less than once a week. The recipient shall place a copy of the current prevailing wage determination issued by the Department of Labor in each solicitation and the award of a contract shall be conditioned upon the acceptance of the wage determination. The recipient shall report all suspected or reported violations to the Federal awarding agency.

GC-38 FEDERAL CLAUSES (CON'T.)

21. Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333)

Where applicable, all contracts awarded by recipients in excess of \$2000 for construction contracts and in excess of \$2500 for other contracts that involve the employment of mechanics or laborers shall include a provision for compliance with Sections 102 and 107 of the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), as supplemented by Department of Labor regulations (29 CFR part 5). Under Section 102 of the Act, each contractor shall be required to compute the wages of every mechanic and laborer on the basis of a standard work week of 40 hours. Work in excess of the standard work week is permissible provided that the worker is compensated at a rate of not less than 1 ½ times the basic rate of pay for all hours worked in excess of 40 hours in the work week. Section 107 of the Act is applicable to construction work and provides that no laborer or mechanic shall be required to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous. These requirements do not apply to the purchases of supplies or materials or articles ordinarily available on the open market, or contracts for transportation or transmission of intelligence.

22. Rights to Inventions Made Under a Contract or Agreement

Contracts or agreements for the performance of experimental, developmental, or research work shall provide for the rights of the Federal Government and the recipient in any resulting invention in accordance with 37 CFR part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the awarding agency.

23. Clean Air Act (42 U.S.C. 7401 et seq.) and the Federal Water Pollution Control Act (33 U.S.C. 1251 et seq.), as amended

Contracts and subgrants of amounts in excess of \$100,000 shall contain a provision that requires the recipient to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401 et seq.) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251 et seq.). Violations shall be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).

24. Byrd Anti-Lobbying Amendment (31 U.S.C. 1352)

Contractors who apply or bid for an award of \$100,000 or more shall file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier shall also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the recipient.

25. Debarment and Suspension (E.O.s 12549 and 12689)

No contract shall be made to parties listed on the General Services Administration's List of Parties Excluded from Federal Procurement or Nonprocurement Programs in accordance with E.O.s 12549 and 12689, "Debarment and Suspension." This list contains the names of parties debarred, suspended, or otherwise excluded by agencies, and contractors declared ineligible under statutory or regulatory authority other than E.O. 12549. Contractors with awards that exceed the small purchase threshold shall provide the required certification regarding its exclusion status and that of its principal employees.

GC-39 CONTRACT INTERPRETATION

Whenever the singular is used herein, the masculine, feminine and neuter gender shall be deemed to include the others. The headings of articles, paragraphs and sections in this Contract are included for convenience only and shall not be considered by either party in construing the meaning of this Contract. If any provision or clause of this Contract shall be held to be invalid, such provision or clause shall be deleted from the Contract and the Contract shall be construed to give effect to the remaining portions thereof.

This Contract shall be interpreted and construed based upon the following order of precedence of component parts. Such order of precedence shall govern to resolve all cases of conflict, ambiguity or inconsistency.

1. Addenda, if any.
2. Execution Forms
3. Specification.
4. Special Conditions.
5. General Conditions.
6. Instruction to Bidders.
7. Legal Advertisement.
8. Bid Proposal.

END OF SECTION

SPECIAL CONDITIONS**SC-01 SCOPE**

The vendor shall provide FORENSIC TOXICOLOGICAL SERVICES for the COOK COUNTY OFFICE OF THE MEDICAL EXAMINER, all in accordance with the Contract Documents, Specifications and Proposal herein.

SC-02 CONTRACT PERIOD

This is a twenty-four (24) month contract with two, one (1) year renewal options effective after award by the Board of Commissioners and after proper execution of the Contract Documents. The contract will consist of a firm price for twenty-four (24) months. Price increases or decreases are not to exceed three percent (3%) for the renewal options, and are at the discretion of the Chief Procurement Officer. Contractor must provide justification for the price adjustment.

This Contract may be renewed in writing by mutual agreement of the parties not less than 30 days before its expiration.

SC-03 AWARD OF CONTRACT

The contract shall be awarded to the lowest responsible and responsive bidder whose bid meets the requirements and criteria set forth in the request for sealed bid. All items, unless otherwise stated, will be assumed to meet all specifications and requirements as set forth in the request for sealed bid. Ambiguous bids which are uncertain as to terms, delivery, quantity or compliance with specifications may be rejected or declared non-responsive. The County shall be sole determinant of the relevant and appropriate cost factors used in evaluating any Base, options and/or alternate bids. Bidders must quote all lines for consideration. It is the intent of the County to award this bid in whole and not in part. Only one award will result for this bid.

SC-04 MBE/WBE REQUIREMENTS FOR THIS CONTRACT

The bidder shall have a subcontracting goal of not less than twelve percent (12%) MBE and five percent (5%) WBE of the awarded contract price for the work to be performed.

The bidder must comply with the County's MBE/WBE participation requirements. The County has issued the MBE/WBE goals to this Project. The bidder shall submit with its Proposal, and MBE/WBE Utilization Plan indicating how it proposes to meet these goals. If the bidder has not met the goals or made good faith efforts to meet the goals, the bidder's response will (may) be deemed non-responsive and will not be considered for award.

Certified MBE/WBE bidders may count their own participation, however, a female firm certified as a M/WBE or W/MBE may be counted towards the MBE or WBE goal, but not both. (Designations cannot be changed after submission of the compliance plan.)

Unless otherwise specified in the Bid Documents, for purpose of this contract, the contract amount is the total bid amount that has been entered on the Proposal Page of the Bid Documents.

SPECIAL CONDITIONS

SC-05 PRE-BID CONFERENCE

The County will hold a Pre-Bid Conference at the Office of the Chief Procurement Officer. Representatives from the Procurement Division and the Cook County Office of the Medical Examiner will comprise the panel to respond to answer any questions regarding the Toxicological Services. It is not mandatory that the Contractors attend this Pre-Bid Conference, however it is highly recommended.

Prospective Proposers must respond to Kevin Casey at 312-603-6830 or e-mail kevin.casey@cookcountyil.gov on or before Wednesday, January 16, 2013, with firm's name and number of attendees. A maximum of two (2) representatives from each firm may attend.

The Pre-Bid Conference will be held on:

DATE: Thursday, January 17, 2013
 TIME: 10:00 a.m.
 PLACE: Cook County
 Office of the Chief Procurement Officer
 118 N. Clark St, Room 1018
 Chicago, IL 60602

SC-06 INQUIRES

A copy of any written request for interpretation of documents shall be provided to the Office of Chief Procurement Officer at the address set forth below.

Inquiries about the interpretation of the Specifications must be made only in writing and shall be directed to the Chief Procurement Officer. Inquiries will be answered in writing, if deemed necessary, by means of an Addendum issued by the Office of the Chief Procurement Officer. (Reference Instructions to Bidders, Section IB-05 "Exceptions", Page IB-2). **Inquiries must be received no later than 5:00 p.m. Tuesday, January 22, 2013. Inquiries will be answered by the close of business on Friday, January 25, 2013.**

During the bid process, all inquiries must be directed, in writing, only to the Office of the Cook County Chief Procurement Officer as follows:

Shannon Andrews
 Cook County Acting Chief Procurement Officer
 c/o Kevin Casey, Specifications Engineer
 118 N. Clark Street, Room 1018
 Chicago, IL 60602
 Or via email to kevin.casey@cookcountyil.gov

Contact Info for Specifications Engineer No. 53
 Kevin Casey: 312 603-6830, kevin.casey@cookcountyil.gov

SC-07 PICK-UP AND DELIVERY LOCATION

All pick-ups and deliveries shall be made to:

Cook County Office of the Medical Examiner
 2121 W. Harrison Street
 Chicago, IL 60612

SC-08 NOTIFICATION

Do not service until notified by Using Department.

SPECIFICATIONS

1. The Contractor shall be certified by the College of American Pathologists (CAP). Bidder shall submit a copy of their laboratory certificates along with the bid document.
2. The laboratory director of the Contractor shall be certified by the American Board of Forensic Toxicology.
3. The Contractor shall have previous experience working with postmortem specimens with medical examiners or coroners. Bidder shall submit the names of the Medical Examiner's or Coroner's Offices, along with their contact information with their bid document.
4. The Contractor should be able to do all the tests listed in Exhibit A with post-mortem blood specimens. The Contractor should include the quantitation of the drugs in either the screen or the confirmation methodology. When postmortem blood is not available the Contractor should be able to handle alternate postmortem specimens (ex. Liver, kidney, bile etc.).
5. The Contractor should be able to do the majority of the tests listed in Exhibit A with post-mortem tissue, urine, bile, chest fluid, and other post-mortem specimens. The Contractor shall include the quantitation of the drugs in either the screen or the confirmation methodology.
6. The Contractor report format should contain at a minimum the following:
 - Deceased name
 - Cook County Medical Examiner's case number (e.g., 888 Dec 09)
 - Cook County Toxicology case number (e.g. 09-8688)
 - Contractor case number
 - Specimen type
 - Analytical methodology
 - Result
 - Concentration unit
 - Date specimen received
 - Report date
7. The Contractor should provide the reporting limit on the report for the majority of the tests. The reference range should be provided on the report whenever possible. Quantitation of the drugs should be included in either the screen or the confirmation methodology.
8. The Contractor shall return the reports to the Medical Examiner's Office within the following turnaround times:

| | |
|----------------------|-------------------------|
| (i) Standard Reports | Seven (7) Business Days |
| (ii) Rush Cases | Two (2) Business days |

SPECIFICATIONS

9. Contractor shall submit with their bid proposal sample reports of the following twenty drugs:
- Cocaine and metabolite screen and confirmation in blood
 - Opiates screen and free (unconjugated) confirmation in blood
 - Barbiturates screen and confirmation in blood
 - Fentanyl and metabolite screen and confirmation in blood
 - Methamphetamine and Amphetamine screen and confirmation in blood
 - Phencyclidine screen and confirmation in blood
 - Alprazolam and metabolite screen and confirmation in blood
 - Bupropion screen and confirmation in blood
 - Clonazepam and metabolite screen and confirmation in blood
 - Olanzapine in blood
 - Risperidone and metabolite in blood
 - Ethylene Glycol in blood
 - Carbamazepine in blood
 - Phenytoin in blood
 - Lamotrigine in blood
 - Lorazepam in blood
 - Temazepam in blood
 - Quetiapine in blood
 - Ziprasidone in blood
 - Pseudoephedrine vs Ephedrine Differentiation screen and confirmation in blood
10. The Contractor should handle all specimens with forensic chain of custody. Cook County shall not be charged for any special forensic handling fee.
11. Cook County Office of the Medical Examiner can add new test request after receiving the result from the Contractor. Cook County will pay for the new tests. Cook County will not pay any forensic re-open case fee.
12. The Contractor will be responsible for all shipping costs of the specimens from Cook County Office of the Medical Examiner to the Contractor via Federal Express Priority Overnight (Next Business Morning Delivery).
13. The Contractor's Office must be able to accept Saturday mornings delivery to receive any Federal Express Priority Overnight shipments.
14. The Contractor's office must be located in a zip code zone that will receive Federal Express Priority Overnight (Saturday Morning Delivery) and Federal Express Priority Overnight (next business morning delivery).
15. The Contractor shall supply the Medical Examiner's Office with all Federal Express forms pre-printed with the outside laboratory's name, address, telephone number and their Federal Express Account Number. The Contractor shall be responsible for covering all costs associated with shipping the supply items.
16. The Contractor will supply the Medical Examiner's Office with all collection kits, small mailer and evidence seal bags at no charge to the County. The Contractor will cover the cost of shipping of these supply items.
17. The Contractor will supply requisition/chain of custody forms with preprinted control labels at no Charge to the County. The Contractor will cover the cost of shipping of these supply items.
18. The Contractor will ship to Cook County Office of the Medical Examiner the initial shipment of all

SPECIFICATIONS

the supply items listed in (15) through (17) via Federal Express at no cost to Cook County.

19. Cook County Office of the Medical Examiner will sign and relinquish the requisition/chain of custody form and specimen to the Contractor via Federal Express at no cost to Cook County.
20. The Contractor will receive the specimen and sign the requisition/chain of custody form. The Contractor will return copy(s) of the requisition/ chain of custody form(s) to Cook County Office of the Medical Examiner at no cost to Cook County.
21. The Contractor will return the Styrofoam Frozen shipping containers to the Cook County Office of the Medical Examiner at no cost to Cook County.
22. Results will be returned to Cook County Office of the Medical Examiner via fax.
23. The Contractor will release results only to Cook County Office of the Medical Examiner.
24. The Contractor will dedicate an experienced client service representative to monitor the case flow of specimens from Cook County Office of the Medical Examiner.
25. It is understood that Cook County Office of the Medical Examiner will order the tests as needed against a purchase order.
26. The Contractor will send monthly bill to the Cook County Office of the Medical Examiner.
27. The description of toxicological tests and methods and are listed in Exhibit A of this bid document.
28. The quantities listed on the Proposal pages are only an approximation. The actual quantity of each test ordered by the Cook County Office of the Medical Examiner may change depending on the circumstances.



April 4, 2013

County of Cook
Office of the Chief Procurement Officer
Attn: Kevin Casey
118 N. Clark St. Rm 1018
Chicago, IL 60602

Dear Kevin Casey:

NMS Labs strives to give our government accounts the most cost effective solutions for their forensic analysis needs. Each year we do our best to maintain our price listings despite various increases to the cost associated with transportation, reagents, and other services related to the analysis that we provide our customers. As we work with many government procurement agencies, we know that we must offer our lowest price on all submissions in effort to secure the contract being addressed.

Regarding the bid submission provided for contract 12-53-223 on February 1, 2013, NMS Labs provided the lowest pricing possible to sustain the business outlined within the contract. NMS Labs has reviewed our pricing proposal for contract 12-53-223 and would like to extend a decrease to our price proposal of 1% to each analysis code discounted in the price proposal. Please find the price adjustment listed in the unconditional price proposal document attached.

Should you have any questions or concerns regarding this price decrease to our pricing submission for contract 12-53-223, please feel free to contact me directly.

Sincerely,

A handwritten signature in black ink, appearing to read "SKYLER COLMAN". The signature is stylized and cursive.

Skyler Colman

Business Development Manager, Forensic Midwest
1 800 522-6671 X1271
cc: NMS Labs GoldMine Database

**THE BOARD OF COMMISSIONERS
TONI PRECKWINKLE, PRESIDENT**

| | | | |
|--------------------|-----------------------|----------------------------|------------------------|
| Erleen Collins | 1 st Dist. | Bridget Gainer | 10 th Dist. |
| Robert Steele | 2 nd Dist. | John P. Daley | 11 th Dist. |
| Jerry Butler | 3 rd Dist. | John A. Fritchey | 12 th Dist. |
| William M. Beavers | 4 th Dist. | Lawrence Suffredin | 13 th Dist. |
| Deborah Sims | 5 th Dist. | Gregg Goslin | 14 th Dist. |
| Joan P. Murphy | 6 th Dist. | Timothy O. Schneider | 16 th Dist. |
| Jesus G. Garcia | 7 th Dist. | Jeffrey R. Tobolski | 16 th Dist. |
| Edwin Reyes | 8 th Dist. | Elizabeth Ann Duddy Gorman | 17 th Dist. |
| Peter N. Silvestri | 9 th Dist. | | |



**COUNTY OF COOK
BUREAU OF FINANCE
OFFICE OF THE CHIEF PROCUREMENT OFFICER
SHANNON E. ANDREWS
CHIEF PROCUREMENT OFFICER**

County Building
118 North Clark Street, Room 1018
Chicago, Illinois 60602-1304
TEL: (312) 603-5370

March 27, 2013

Mr. Eric Rieders
National Medical Services, Inc. d/b/a NMS Labs
3701 Welsh Road
Willow Grove, PA 19090

Re: Contract Number 12-53-223
Forensic Toxicological Services

Dear Mr. Rieders:

The Office of the Chief Procurement Officer is seeking an unconditional price reduction under the same terms and conditions of the bid document for the above referenced contract. Please provide your revised pricing on the attached Revised Pricing Proposal. The revised pricing may only contain reductions. Price increases in any line item or changes to other components of the bid will invalidate the unconditional price reduction. This unconditional price reduction will be incorporated into your bid document. Please note that submittal of the unconditional price reduction does not equate to the acceptance of the bid.

It is requested that you submit this information by no later than 10:00 a.m. Central Time on Thursday, April 4, 2013 to the attention of:

Kevin Casey
Specifications Engineer
County of Cook
The Office of the Chief Procurement Officer
118 N. Clark St., Room 1018
Chicago, Illinois 60602

Please include a cover letter acknowledging your unconditional price reduction in addition to the Revised Pricing Proposal. If you have any questions, please call Kevin Casey at 312-603-6830 or send an email to kevin.casey@cookcountyil.gov.

Thank you for your immediate response to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Shannon E. Andrews".

Shannon E. Andrews
Chief Procurement Officer

SEA/kc

cc: Nadine Jakubowski
Medical Examiner's Office
File (Contract No. 12-53-223)



UNCONDITIONAL PRICE REDUCTION PROPOSAL

The undersigned declares that they have carefully examined the Proposal Form, General and Special Conditions and Specifications identified as Contract Number 12-53-223 for FORENSIC TOXICOLOGICAL SERVICES for the COOK COUNTY OFFICE OF THE MEDICAL EXAMINER, as prepared by Cook County, and that they have familiarized themselves with all of the conditions under which it must be carried out and understand that in making this Proposal they waive all right to plead any misunderstanding regarding the same.

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 1. | TEST | 7 | 1,1- DIFLUOROETHANE \$ <u>489</u> /TEST \$ <u>3423</u> TOTAL |
| 2. | TEST | 20 | ACETAMINOPHEN CONFIRMATION, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY \$ <u>91</u> /TEST \$ <u>1820</u> TOTAL |
| 3. | TEST | 50 | ACETAMINOPHEN SCREEN, BLOOD, COLORIMETRY \$ <u>46</u> /TEST \$ <u>2300</u> TOTAL |
| 4. | TEST | 15 | ALBUTEROL, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY \$ <u>179</u> /TEST \$ <u>2685</u> TOTAL |
| 5. | TEST | 5 | ALCOHOL CONFIRMATION, BLOOD, ENZYME IMMUNOASSAY \$ <u>0.00</u> /TEST \$ <u>0.00</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 6. | TEST | 5 | ALCOHOL PANEL, BLOOD, HEADSPACE GAS CHROMATOGRAPHY \$ <u>109</u> /TEST \$ <u>545</u> TOTAL |
| 7. | TEST | 25 | ALPRAZOLAM AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY \$ <u>93</u> /TEST \$ <u>2325</u> TOTAL |
| 8. | TEST | 40 | ALPRAZOLAM AND METABOLITE SCREEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY \$ <u>62</u> /TEST \$ <u>2480</u> TOTAL |
| 9. | TEST | 15 | AMITRIPTYLINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY \$ <u>78</u> /TEST \$ <u>1170</u> TOTAL |
| 10. | TEST | 20 | AMITRIPTYLINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY \$ <u>91</u> /TEST \$ <u>1820</u> TOTAL |
| 11. | TEST | 30 | AMYL ALCOHOLS, N- AND ISO-, BLOOD, GAS CHROMATOGRAPHY \$ <u>71</u> /TEST \$ <u>2130</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 12. | TEST | 3 | ARSENIC, BLOOD, GRAPHITE FURNACE ATOMIC ABSORPTION SPECTROSCOPY |
| | | | \$ <u>70</u> /TEST |
| | | | \$ <u>210</u> TOTAL |
| 13. | TEST | 1 | ATENOLOL, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>133</u> /TEST |
| | | | \$ <u>133</u> TOTAL |
| 14. | TEST | 2 | AUTOPSY DRUGS AND POISONS PROFILE, TISSUES, GAS CHROMATOGRAPHY, GAS CHROMATOGRAPHY/MASS SPECTROMETRY, ETC. |
| | | | \$ <u>1120</u> /TEST |
| | | | \$ <u>2240</u> TOTAL |
| 15. | TEST | 1 | BACLOFEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>139</u> /TEST |
| | | | \$ <u>139</u> TOTAL |
| 16. | TEST | 15 | BARBITURATES CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>166</u> /TEST |
| | | | \$ <u>2490</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 17. | TEST | 30 | BARBITURATES SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY \$ <u>51</u> /TEST \$ <u>1530</u> TOTAL |
| 18. | TEST | 5 | BENZODIAZEPINES CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY \$ <u>122</u> /TEST \$ <u>610</u> TOTAL |
| 19. | TEST | 10 | BENZODIAZEPINES SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY \$ <u>64</u> /TEST \$ <u>640</u> TOTAL |
| 20. | TEST | 10 | BENZTROPINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY \$ <u>98</u> /TEST \$ <u>980</u> TOTAL |
| 21. | TEST | 15 | BENZTROPINE SCREEN, BLOOD, GAS CHROMATOGRAPHY \$ <u>76</u> /TEST \$ <u>1140</u> TOTAL |
| 22. | TEST | 2 | BUPIVACAINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY \$ <u>0.00</u> /TEST \$ <u>0.00</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 23. | TEST | 2 | BUPIVACAINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>75</u> /TEST |
| | | | \$ <u>150</u> TOTAL |
| 24. | TEST | 20 | BUPROPION CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>76</u> /TEST |
| | | | \$ <u>1520</u> TOTAL |
| 25. | TEST | 30 | BUPROPION SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>110</u> /TEST |
| | | | \$ <u>3300</u> TOTAL |
| 26. | TEST | 4 | BUPROPION CONFIRMATION, TISSUE, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>287</u> /TEST |
| | | | \$ <u>1148</u> TOTAL |
| 27. | TEST | 5 | BUPROPION SCREEN, TISSUE, GAS CHROMATOGRAPHY |
| | | | \$ <u>315</u> /TEST |
| | | | \$ <u>1575</u> TOTAL |
| 28. | TEST | 6 | BUSPIRONE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>120</u> /TEST |
| | | | \$ <u>720</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 29. | TEST | 8 | BUSPIRONE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>163</u> /TEST |
| | | | \$ <u>1304</u> TOTAL |
| 30. | TEST | 2 | CAFFEINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>83</u> /TEST |
| | | | \$ <u>166</u> TOTAL |
| 31. | TEST | 3 | CAFFEINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>56</u> /TEST |
| | | | \$ <u>168</u> TOTAL |
| 32. | TEST | 5 | CANNABINOIDS CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>139</u> /TEST |
| | | | \$ <u>695</u> TOTAL |
| 33. | TEST | 10 | CANNABINOIDS SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>59</u> /TEST |
| | | | \$ <u>590</u> TOTAL |
| 34. | TEST | 15 | CARBAMAZEPINE AND METABOLITE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>57</u> /TEST |
| | | | \$ <u>855</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 35. | TEST | 1 | CARBON MONOXIDE-IRON RATIO PROFILE, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY, INDUCTIVELY COUPLED PLASMA ATOMIC EMISSION SPECTROSCOPY |
| | | | \$ <u>309</u> /TEST |
| | | | \$ <u>309</u> TOTAL |
| 36. | TEST | 5 | CARISOPRODOL AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>116</u> /TEST |
| | | | \$ <u>580</u> TOTAL |
| 37. | TEST | 5 | CARISOPRODOL AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>121</u> /TEST |
| | | | \$ <u>605</u> TOTAL |
| 38. | TEST | 3 | CELECOXIB, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>172</u> /TEST |
| | | | \$ <u>516</u> TOTAL |
| 39. | TEST | 2 | CETIRIZINE, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>259</u> /TEST |
| | | | \$ <u>518</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 40. | TEST | 20 | CHLORDIAZEPOXIDE AND METABOLITE, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>123</u> /TEST |
| | | | \$ <u>2460</u> TOTAL |
| 41. | TEST | 1 | CHLOROQUINE, BLOOD, HIGH PERFORMANCE THIN LAYER CHROMATOGRAPHY |
| | | | \$ <u>220</u> /TEST |
| | | | \$ <u>220</u> TOTAL |
| 42. | TEST | 2 | CHLORPHENIRAMINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>73</u> /TEST |
| | | | \$ <u>146</u> TOTAL |
| 43. | TEST | 4 | CHLORPHENIRAMINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>82</u> /TEST |
| | | | \$ <u>328</u> TOTAL |
| 44. | TEST | 7 | CHLORPROMAZINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>121</u> /TEST |
| | | | \$ <u>847</u> TOTAL |
| 45. | TEST | 15 | CHLORPROMAZINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>89</u> /TEST |
| | | | \$ <u>1335</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 46. | TEST | 20 | CITALOPRAM, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>120</u> /TEST |
| | | | \$ <u>2400</u> TOTAL |
| 47. | TEST | 3 | CLOMIPRAMINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>133</u> /TEST |
| | | | \$ <u>399</u> TOTAL |
| 48. | TEST | 3 | CLOMIPRAMINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>89</u> /TEST |
| | | | \$ <u>267</u> TOTAL |
| 49. | TEST | 35 | CLONAZEPAM AND METABOLITE CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>186</u> /TEST |
| | | | \$ <u>6510</u> TOTAL |
| 50. | TEST | 40 | CLONAZEPAM AND METABOLITE SCREEN, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>137</u> /TEST |
| | | | \$ <u>5480</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 51. | TEST | 10 | CLONAZEPAM AND METABOLITE CONFIRMATION, FLUID, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>210</u> /TEST |
| | | | \$ <u>2100</u> TOTAL |
| 52. | TEST | 20 | CLONAZEPAM AND METABOLITE SCREEN, FLUID, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>159</u> /TEST |
| | | | \$ <u>3180</u> TOTAL |
| 53. | TEST | 6 | CLONIDINE, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>165</u> /TEST |
| | | | \$ <u>990</u> TOTAL |
| 54. | TEST | 2 | CLORAZEPATE AS METABOLITE, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>163</u> /TEST |
| | | | \$ <u>326</u> TOTAL |
| 55. | TEST | 10 | CLOZAPINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>0.00</u> /TEST |
| | | | \$ <u>0.00</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 56. | TEST | 10 | CLOZAPINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>79</u> /TEST |
| | | | \$ <u>790</u> TOTAL |
| 57. | TEST | 250 | COCAINE AND METABOLITES CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>119</u> /TEST |
| | | | \$ <u>29750</u> TOTAL |
| 58. | TEST | 300 | COCAINE AND METABOLITES SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>54</u> /TEST |
| | | | \$ <u>16200</u> TOTAL |
| 59. | TEST | 25 | COCAINE AND METABOLITES CONFIRMATION, FLUID, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>142</u> /TEST |
| | | | \$ <u>3550</u> TOTAL |
| 60. | TEST | 25 | COCAINE AND METABOLITES SCREEN, FLUID, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>191</u> /TEST |
| | | | \$ <u>4775</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 61. | TEST | 1 | COLCHICINE, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>498</u> /TEST |
| | | | \$ <u>498</u> TOTAL |
| 62. | TEST | 1 | CRESOLS, BLOOD, GAS CHROMATOGRAPHY, 1 |
| | | | \$ <u>97</u> /TEST |
| | | | \$ <u>97</u> TOTAL |
| 63. | TEST | 1 | CYANIDE CONFIRMATION, BLOOD, MICRODIFFUSION, |
| | | | \$ <u>59</u> /TEST |
| | | | \$ <u>59</u> TOTAL |
| 64. | TEST | 1 | CYANIDE SCREEN, BLOOD, SPECTROPHOTOMETRY |
| | | | \$ <u>47</u> /TEST |
| | | | \$ <u>47</u> TOTAL |
| 65. | TEST | 15 | CYCLOBENZAPRINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>118</u> /TEST |
| | | | \$ <u>1770</u> TOTAL |
| 66. | TEST | 20 | CYCLOBENZAPRINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>97</u> /TEST |
| | | | \$ <u>1940</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 67. | TEST | 10 | DEXTROMETHORPHAN CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>144</u> /TEST |
| | | | \$ <u>1440</u> TOTAL |
| 68. | TEST | 15 | DEXTROMETHORPHAN SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>104</u> /TEST |
| | | | \$ <u>1560</u> TOTAL |
| 69. | TEST | 10 | DIAZEPAM AND METABOLITES CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>93</u> /TEST |
| | | | \$ <u>930</u> TOTAL |
| 70. | TEST | 10 | DIAZEPAM AND METABOLITES SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>96</u> /TEST |
| | | | \$ <u>960</u> TOTAL |
| 71. | TEST | 10 | DICHLOROMETHANE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>640</u> TOTAL |
| 72. | TEST | 1 | DIFLUNISAL, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>221</u> /TEST |
| | | | \$ <u>221</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 73. | TEST | 10 | DILTIAZEM, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>148</u> /TEST |
| | | | \$ <u>1480</u> TOTAL |
| 74. | TEST | 5 | DIGOXIN, BLOOD |
| | | | \$ <u>197</u> /TEST |
| | | | \$ <u>985</u> TOTAL |
| 75. | TEST | 20 | DIPHENHYDRAMINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>133</u> /TEST |
| | | | \$ <u>2660</u> TOTAL |
| 76. | TEST | 20 | DIPHENHYDRAMINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>91</u> /TEST |
| | | | \$ <u>1820</u> TOTAL |
| 77. | TEST | 1 | DISULFIRAM (DEDTC METABOLITE), BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>166</u> /TEST |
| | | | \$ <u>166</u> TOTAL |
| 78. | TEST | 15 | DOXEPIN AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>90</u> /TEST |
| | | | \$ <u>1350</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 79. | TEST | 15 | DOXEPIN AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY, 15 |
| | | | \$ <u>104</u> /TEST |
| | | | \$ <u>1560</u> TOTAL |
| 80. | TEST | 7 | DOXYLAMINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>112</u> /TEST |
| | | | \$ <u>784</u> TOTAL |
| 81. | TEST | 8 | DOXYLAMINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>72</u> /TEST |
| | | | \$ <u>576</u> TOTAL |
| 82. | TEST | 5 | DRUG SCREEN BY GC, BLOOD, GAS CHROMATOGRAPHY, GAS CHROMATOGRAPHY |
| | | | \$ <u>503</u> /TEST |
| | | | \$ <u>2515</u> TOTAL |
| 83. | TEST | 40 | DULOXETINE, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>146</u> /TEST |
| | | | \$ <u>5840</u> TOTAL |
| 84. | TEST | 25 | ETHYLENE GLYCOL, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>112</u> /TEST |
| | | | \$ <u>2800</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 85. | TEST | 25 | FENTANYL AND METABOLITE CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY/MASS SPECTROMETRY \$ <u>94</u> /TEST \$ <u>2350</u> TOTAL |
| 86. | TEST | 60 | FENTANYL AND METABOLITE SCREEN, BLOOD, LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY/MASS SPECTROMETRY \$ <u>71</u> /TEST \$ <u>4260</u> TOTAL |
| 87. | TEST | 2 | FLUORIDE, BLOOD, ION CHROMATOGRAPHY \$ <u>96</u> /TEST \$ <u>192</u> TOTAL |
| 88. | TEST | 15 | FLUOXETINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY \$ <u>83</u> /TEST \$ <u>1245</u> TOTAL |
| 89. | TEST | 20 | FLUOXETINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY \$ <u>86</u> /TEST \$ <u>1720</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 90. | TEST | 4 | FLUPHENAZINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>84</u> /TEST |
| | | | \$ <u>336</u> TOTAL |
| 91. | TEST | 2 | FLUPHENAZINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>93</u> /TEST |
| | | | \$ <u>186</u> TOTAL |
| 92. | TEST | 5 | FLURAZEPAM AND METABOLITES CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>142</u> /TEST |
| | | | \$ <u>710</u> TOTAL |
| 93. | TEST | 5 | FLURAZEPAM AND METABOLITES SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>93</u> /TEST |
| | | | \$ <u>465</u> TOTAL |
| 94. | TEST | 50 | GABAPENTIN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>82</u> /TEST |
| | | | \$ <u>4100</u> TOTAL |
| 95. | TEST | 10 | GAMMA-HYDROXYBUTYRIC ACID CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>0.00</u> /TEST |
| | | | \$ <u>0.00</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 96. | TEST | 10 | GAMMA-HYDROXYBUTYRIC ACID SCREEN, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>165</u> /TEST |
| | | | \$ <u>1650</u> TOTAL |
| 97. | TEST | 1 | GLIPIZIDE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>140</u> /TEST |
| | | | \$ <u>140</u> TOTAL |
| 98. | TEST | 2 | HALOCARBONS PANEL, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>140</u> /TEST |
| | | | \$ <u>280</u> TOTAL |
| 99. | TEST | 20 | HALOPERIDOL CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>125</u> /TEST |
| | | | \$ <u>2500</u> TOTAL |
| 100. | TEST | 25 | HALOPERIDOL SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>1600</u> TOTAL |
| 101. | TEST | 2 | HYDROCARBON AND OXYGENATED VOLATILES PANEL, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>72</u> /TEST |
| | | | \$ <u>144</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 102. | TEST | 25 | HYDROCODONE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>129</u> /TEST |
| | | | \$ <u>3225</u> TOTAL |
| 103. | TEST | 45 | HYDROCODONE SCREEN, BLOOD, GAS CHROMATROGRAPHY |
| | | | \$ <u>65</u> /TEST |
| | | | \$ <u>2925</u> TOTAL |
| 104. | TEST | 10 | HYDROMORPHONE CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>0.00</u> /TEST |
| | | | \$ <u>0.00</u> TOTAL |
| 105. | TEST | 15 | HYDROMORPHONE SCREEN, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>142</u> /TEST |
| | | | \$ <u>2130</u> TOTAL |
| 106. | TEST | 20 | IBUPROFEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>63</u> /TEST |
| | | | \$ <u>1260</u> TOTAL |
| 107. | TEST | 5 | IMIPRAMINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>72</u> /TEST |
| | | | \$ <u>360</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 108. | TEST | 5 | IMIPRAMINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>76</u> /TEST |
| | | | \$ <u>380</u> TOTAL |
| 109. | TEST | 10 | INHALANTS PANEL, HALOCARBONS |
| | | | \$ <u>128</u> /TEST |
| | | | \$ <u>1280</u> TOTAL |
| 110. | TEST | 5 | KETAMINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>320</u> TOTAL |
| 111. | TEST | 3 | KETAMINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>140</u> /TEST |
| | | | \$ <u>420</u> TOTAL |
| 112. | TEST | 1 | LABETALOL, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>295</u> /TEST |
| | | | \$ <u>295</u> TOTAL |
| 113. | TEST | 30 | LAMOTRIGINE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>54</u> /TEST |
| | | | \$ <u>1620</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 114. | TEST | 15 | LEVETIRACETAM, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>76</u> /TEST |
| | | | \$ <u>1140</u> TOTAL |
| 115. | TEST | 2 | LIDOCAINE AND METABOLITE (MEGX) CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>124</u> /TEST |
| | | | \$ <u>248</u> TOTAL |
| 116. | TEST | 2 | LIDOCAINE AND METABOLITE (MEGX) SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>118</u> /TEST |
| | | | \$ <u>236</u> TOTAL |
| 117. | TEST | 3 | LITHIUM, BLOOD, ATOMIC EMISSION SPECTROSCOPY |
| | | | \$ <u>36</u> /TEST |
| | | | \$ <u>108</u> TOTAL |
| 118. | TEST | 40 | LORAZEPAM, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>80</u> /TEST |
| | | | \$ <u>3200</u> TOTAL |
| 119. | TEST | 5 | LSD CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>114</u> /TEST |
| | | | \$ <u>570</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 120. | TEST | 5 | LSD SCREENING, BLOOD, RADIOIMMUNOASSAY |
| | | | \$ <u>57</u> /TEST |
| | | | \$ <u>285</u> TOTAL |
| 121. | TEST | 3 | MEPERIDINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>83</u> /TEST |
| | | | \$ <u>249</u> TOTAL |
| 122. | TEST | 3 | MEPERIDINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>72</u> /TEST |
| | | | \$ <u>216</u> TOTAL |
| 123. | TEST | 2 | METALS/METALLOIDS ACUTE POISONING PANEL, BLOOD, INDUCTIVELY COUPLED PLASMA/MASS SPECTROMETRY, GRAPHITE FURNACE ATOMIC ABSORBTION SPECTROSCOPY, FIAS |
| | | | \$ <u>252</u> /TEST |
| | | | \$ <u>504</u> TOTAL |
| 124. | TEST | 20 | METHADONE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>133</u> /TEST |
| | | | \$ <u>2660</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 125. | TEST | 20 | METHADONE SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>1280</u> TOTAL |
| 126. | TEST | 35 | METHAMPHETAMINE AND AMPHETAMINE SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>67</u> /TEST |
| | | | \$ <u>2345</u> TOTAL |
| 127. | TEST | 20 | METHAMPHETAMINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>114</u> /TEST |
| | | | \$ <u>2280</u> TOTAL |
| 128. | TEST | 5 | METHANE, BLOOD GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>111</u> /TEST |
| | | | \$ <u>555</u> TOTAL |
| 129. | TEST | 2 | METHOCARBAMOL, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>75</u> /TEST |
| | | | \$ <u>150</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 130. | TEST | 20 | METHYLENEDIOXYMETH- AMPHETAMINE AND METABOLITE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>77</u> /TEST |
| | | | \$ <u>1540</u> TOTAL |
| 131. | TEST | 20 | METHYLENEDIOXYMETH AMPHETAMINE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>71</u> /TEST |
| | | | \$ <u>1420</u> TOTAL |
| 132. | TEST | 4 | METHYLPHENIDATE AND METABOLITE, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>77</u> /TEST |
| | | | \$ <u>308</u> TOTAL |
| 133. | TEST | 1 | METOCLOPRAMIDE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>368</u> /TEST |
| | | | \$ <u>368</u> TOTAL |
| 134. | TEST | 1 | METOLAZONE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>96</u> /TEST |
| | | | \$ <u>96</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 135. | TEST | 2 | METOPROLOL, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>83</u> /TEST |
| | | | \$ <u>166</u> TOTAL |
| 136. | TEST | 10 | MIDAZOLAM, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>69</u> /TEST |
| | | | \$ <u>690</u> TOTAL |
| 137. | TEST | 10 | MIRTAZAPINE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>78</u> /TEST |
| | | | \$ <u>780</u> TOTAL |
| 138. | TEST | 1 | NALBUPHINE CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>0.00</u> /TEST |
| | | | \$ _____ TOTAL |
| 139. | TEST | 2 | NALBUPHINE SCREEN, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>206</u> /TEST |
| | | | \$ <u>412</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 140. | TEST | 5 | NALOXONE CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>0.00</u> /TEST |
| | | | \$ <u>0.00</u> TOTAL |
| 141. | TEST | 5 | NALOXONE SCREEN, BLOOD LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>235</u> /TEST |
| | | | \$ <u>1175</u> TOTAL |
| 142. | TEST | 3 | NAPROXEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>71</u> /TEST |
| | | | \$ <u>213</u> TOTAL |
| 143. | TEST | 2 | NEFAZODONE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>82</u> /TEST |
| | | | \$ <u>164</u> TOTAL |
| 144. | TEST | 2 | NIFEDIPINE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>157</u> /TEST |
| | | | \$ <u>314</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 145. | TEST | 5 | NITROUS OXIDE, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>324</u> /TEST |
| | | | \$ <u>1620</u> TOTAL |
| 461. | TEST | 5 | NORDIAZEPAM AND METABOLITE, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>148</u> /TEST |
| | | | \$ <u>740</u> TOTAL |
| 147. | TEST | 35 | OLANZAPINE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>199</u> /TEST |
| | | | \$ <u>6965</u> TOTAL |
| 148. | TEST | 200 | OPIATES-FREE (UNCONJUGATED) CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>178</u> /TEST |
| | | | \$ <u>35600</u> TOTAL |
| 149. | TEST | 300 | OPIATES SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>51</u> /TEST |
| | | | \$ <u>15300</u> TOTAL |
| 150. | TEST | 1 | ORPHENADRINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>101</u> /TEST |
| | | | \$ <u>101</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 151. | TEST | 10 | OXCARBAZEPINE AS METABOLITE, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>51</u> /TEST |
| | | | \$ <u>510</u> TOTAL |
| 152. | TEST | 15 | OXYCODONE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>83</u> /TEST |
| | | | \$ <u>1245</u> TOTAL |
| 153. | TEST | 15 | OXYCODONE SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>71</u> /TEST |
| | | | \$ <u>1065</u> TOTAL |
| 154. | TEST | 20 | PAROXETINE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>1280</u> TOTAL |
| 155. | TEST | 1 | PEMOLINE SCREEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>68</u> /TEST |
| | | | \$ <u>68</u> TOTAL |
| 156. | TEST | 3 | PHENCYCLIDINE SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY |
| | | | \$ <u>76</u> /TEST |
| | | | \$ <u>228</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 157. | TEST | 1 | PHENCYCLIDINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>169</u> /TEST |
| | | | \$ <u>169</u> TOTAL |
| 158. | TEST | 4 | PHTERMINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>0.00</u> /TEST |
| | | | \$ <u>0.00</u> TOTAL |
| 159. | TEST | 4 | PHTERMINE SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>109</u> /TEST |
| | | | \$ <u>436</u> TOTAL |
| 160. | TEST | 30 | PHENYTOIN CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>134</u> /TEST |
| | | | \$ <u>4020</u> TOTAL |
| 161. | TEST | 35 | PHENYTOIN SCREEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>2240</u> TOTAL |
| 162. | TEST | 5 | PROCHLORPERAZINE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>62</u> /TEST |
| | | | \$ <u>310</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 163. | TEST | 1 | PROMETHAZINE SCREEN, BLOOD, GAS CHROMATOGRAPHY \$ <u>87</u> /TEST \$ <u>87</u> TOTAL |
| 164. | TEST | 1 | PROMETHAZINE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY \$ <u>117</u> /TEST \$ <u>117</u> TOTAL |
| 165. | TEST | 5 | PROPOFOL CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY \$ <u>118</u> /TEST \$ <u>590</u> TOTAL |
| 166. | TEST | 5 | PROPOFOL SCREEN, BLOOD, GAS CHROMATOGRAPHY \$ <u>118</u> /TEST \$ <u>590</u> TOTAL |
| 167. | TEST | 10 | PROPOXYPHENE AND METABOLITE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY \$ <u>116</u> /TEST \$ <u>1160</u> TOTAL |
| 168. | TEST | 10 | PROPOXYPHENE SCREEN, BLOOD, ENZYME LINKED IMMUNOSORBANT ASSAY \$ <u>78</u> /TEST \$ <u>780</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 169. | TEST | 10 | PSEUDOEPHEDRINE VS EPHEDRINE DIFFERENTIATION CONFIRMAITON, BLOOD, LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY \$ <u>125</u> /TEST \$ <u>1250</u> TOTAL |
| 170. | TEST | 15 | PSEUDOEPHEDRINE VS EPHEDRINE DIFFERENTIATION SCREEN, BLOOD, LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY \$ <u>131</u> /TEST \$ <u>1965</u> TOTAL |
| 171. | TEST | 75 | QUETIAPINE, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTRCOMETRY \$ <u>98</u> /TEST \$ <u>7350</u> TOTAL |
| 172. | TEST | 40 | RISPERIDONE AND METABOLITE, BLOOD, LIQUID CHROMATOGRAPHY/ MASS SPECTROMETRY \$ <u>96</u> /TEST \$ <u>3840</u> TOTAL |
| 173. | TEST | 5 | SALICYLATE SCREEN, BLOOD, COLORIMETRY \$ <u>32</u> /TEST \$ <u>160</u> TOTAL |
| 174. | TEST | 4 | SALICYLATES CONFIRMATION, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY \$ <u>85</u> /TEST \$ <u>340</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 175. | TEST | 20 | SALICYLATES SCREEN, BLOOD, SPECTROMETRY |
| | | | \$ <u>135</u> /TEST |
| | | | \$ <u>2700</u> TOTAL |
| 176. | TEST | 10 | SERTRALINE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>640</u> TOTAL |
| 177. | TEST | 25 | TEMAZEPAM AND METABOLITE, BLOOD, GAS CHROMATOGRAPHY/ MASS SPECTROMETRY |
| | | | \$ <u>78</u> /TEST |
| | | | \$ <u>1950</u> TOTAL |
| 178. | TEST | 3 | THEOPHYLLINE SCREEN, BLOOD, IMMUNOASSAY |
| | | | \$ <u>91</u> /TEST |
| | | | \$ <u>273</u> TOTAL |
| 179. | TEST | 2 | THEOPHYLLINE CONFIRMATION, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>147</u> /TEST |
| | | | \$ <u>294</u> TOTAL |
| 180. | TEST | 1 | THIOCYANATE, BLOOD, ION CHROMATOGRAPHY |
| | | | \$ <u>64</u> /TEST |
| | | | \$ <u>64</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|--|
| 181. | TEST | 1 | THIOTHIXENE (CIS ISOMER) SCREEN, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>66</u> /TEST |
| | | | \$ <u>66</u> TOTAL |
| 182. | TEST | 3 | TOPIRAMATE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>87</u> /TEST |
| | | | \$ <u>261</u> TOTAL |
| 183. | TEST | 20 | TRAMADOL AND METABOLITE CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>168</u> /TEST |
| | | | \$ <u>3360</u> TOTAL |
| 184. | TEST | 35 | TRAMADOL AND METABOLITE SCREEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>51</u> /TEST |
| | | | \$ <u>1785</u> TOTAL |
| 185. | TEST | 20 | TRAZODONE CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>108</u> /TEST |
| | | | \$ <u>2160</u> TOTAL |
| 186. | TEST | 35 | TRAZODONE SCREENING, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>71</u> /TEST |
| | | | \$ <u>2485</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 187. | TEST | 1 | TRICHLOROETHYLENE, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>133</u> /TEST |
| | | | \$ <u>133</u> TOTAL |
| 188. | TEST | 1 | TRI HEXYPHENIDYL, BLOOD, GAS CHROMATOGRAPHY |
| | | | \$ <u>89</u> /TEST |
| | | | \$ <u>89</u> TOTAL |
| 189. | TEST | 2 | VALPROIC ACID, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>102</u> /TEST |
| | | | \$ <u>204</u> TOTAL |
| 190. | TEST | 20 | VENLAFAXINE AND METABOLITE CONFIRMATION, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY/MASS SPECTROMETRY |
| | | | \$ <u>172</u> /TEST |
| | | | \$ <u>3440</u> TOTAL |
| 191. | TEST | 30 | VENLAFAXINE AND METABOLITE SCREEN, BLOOD, HIGH PERFORMANCE LIQUID CHROMATOGRAPHY |
| | | | \$ <u>98</u> /TEST |
| | | | \$ <u>2940</u> TOTAL |
| 192. | TEST | 6 | VERAPAMIL CONFIRMATION, BLOOD, GAS CHROMATOGRAPHY/MASS SPECTROMETRY |
| | | | \$ <u>71</u> /TEST |
| | | | \$ <u>426</u> TOTAL |

UNCONDITIONAL PRICE REDUCTION PROPOSAL

| <u>ITEM NO.</u> | <u>UNIT OF MEASURE</u> | <u>QTY.</u> | <u>DESCRIPTION</u> |
|-----------------|------------------------|-------------|---|
| 193. | TEST | 8 | VERAPAMIL SCREEN, BLOOD, GAS CHROMATOGRAPHY \$ <u>104</u> /TEST \$ <u>832</u> TOTAL |
| 194. | TEST | 20 | ZIPRASIDONE, BLOOD, LIQUID CHROMATOGRAPHY/MASS SPECTROMETRY \$ <u>86</u> /TEST \$ <u>1720</u> TOTAL |
| 195. | TEST | 20 | ZOLPIDEM, BLOOD, GAS CHROMATOGRAPHY \$ <u>109</u> /TEST \$ <u>2180</u> TOTAL |

GRAND TOTAL: \$ 338,173

DELIVERY DATE: 0 (zero)
(NUMBER OF CALENDAR DAYS AFTER AWARD OF CONTRACT)

The receipt of the following addenda to the Specifications is acknowledged:

Addendum No. 1 Date: 1/25/2013
 Addendum No. _____ Date: _____
 Addendum No. _____ Date: _____

UNCONDITIONAL PRICE REDUCTION PROPOSAL

QUICK PAYMENT DISCOUNTS

Cook County is working hard to reduce budgets, engage in strategic sourcing, and streamline internal processes. Consequently, Cook County has initiated a Quick Payment program. The Quick Payment program serves the purpose of both benefiting Cook County and the vendor community. The County will be able to purchase goods and services in a timelier manner while improving vendor relations. Vendors will benefit from reduced collection periods and improved capital charges. This will allow the vendor community to also reduce opportunity costs and improve strategic planning capabilities. In the chart below please provide what quick payment discounts your company is willing to offer. This will be used for informational purposes.

Quick Payment Discounts

| | | | |
|---|--|---------------|------------|
| 1 | What payment terms would your company propose for this program? | | |
| 2 | Is there a quick payment discount that your company would be willing to offer? If so, please provide details | EARLY PAYMENT | % DISCOUNT |
| | | NET 30 | 0% |
| | | NET 20 | 0% |
| | | OTHER | 0% |

RESPONSE TO SPECIFICATIONS

1. **The Contractor shall be certified by the College of American Pathologists (CAP). Bidder shall submit a copy of their laboratory certificates along with the bid document.**

NMS Labs is certified by the College of American Pathologist (CAP). Please see the attached list of licensure and copy of our current CAP certificate.

2. **The laboratory director of the Contractor shall be certified by the American Board of Forensic Toxicology.**

Our Laboratory Director, Dr. Robert Middleberg, is certified by the American Board of Forensic Toxicology as a diplomat. Please see the below narrative of his condensed Curriculum Vitae.

Robert A. Middleberg, Ph.D., DABFT, DABCC-TC
Vice President, Quality Assurance Laboratory Director & Forensic Toxicologist

Dr. Middleberg earned a Ph.D. in Pharmacology from Thomas Jefferson University and a Masters Degree in Chemistry from the University of Pittsburgh. He is a Diplomate of the American Board of Forensic Toxicology (DABFT) and Diplomat in Toxicological Chemistry from the American Board of Clinical Chemistry (DABCC-TC). Dr. Middleberg is an Adjunct Clinical Assistant Professor of Pharmacology at Jefferson Medical College, Thomas Jefferson University. He holds a position on the Board of Directors for the American Board of Forensic Toxicology and is an Inspector for the American Board of Forensic Toxicology—Laboratory Accreditation Program. He is a member of many professional organizations, including the Society of Forensic Toxicologists, The International Association of Forensic Toxicologists, the American Association for Clinical Chemistry, the International Association of Therapeutic Drug Monitoring and Clinical Toxicology and is a fellow of the American Academy of Forensic Sciences and current Chair of the Toxicology Section. Dr. Middleberg is a member of the College of American Pathologists Toxicology Resource Committee and sits on the Editorial Board for the Journal of Forensic Sciences.

3. **The Contractor shall have previous experience working with postmortem specimens with medical examiners or coroners. Bidder shall submit the names of the Medical Examiner's or Coroner's Offices, along with their contact information with their bid document.**

NMS Labs performs Forensic Toxicology analysis for Medical Examiner and Coroner clients throughout the United States. Please see the attached List of ME/Coroners that we provide similar analysis of postmortem specimens

4. **The Contractor should be able to do all the tests listed in Exhibit A with post-mortem blood specimens. The Contractor should include the quantitation of the drugs in either the screen or the confirmation methodology. When postmortem blood is not available the Contractor should be able to handle alternate postmortem specimens (ex. Liver, kidney, bile etc.).**

NMS Labs can perform testing for each of the listed compounds in Exhibit A in postmortem blood samples with quantitative methodology. We also have the ability to perform analysis for most of the compounds in alternative postmortem forensic specimens. Please refer to our online Test Catalog consisting of over 2,500 different analyses that NMS Labs offers to appropriately identify each

analysis that we offer across the different forensic matrices. Hard Copies of our catalog are available upon request.

Regarding the request for Thiocyanate, Blood by Ion Chromatography, NMS Labs has found the most effective forensic matrices for detection of this compound to be pursued through serum/plasma, tissue, and fluid samples rather than blood. It is the preference of NMS Labs to perform analysis for Thiocyanate using these matrices, but upon special request, NMS Labs can perform an analysis for Thiocyanate in postmortem blood.

5. **The Contractor should be able to do the majority of the tests listed in Exhibit A with post-mortem tissue, urine, bile, chest fluid, and other post-mortem specimens. The Contractor shall include the quantitation of the drugs in either the screen or the confirmation methodology.**

NMS Labs is fully capable of performing the analyses listed in Exhibit A in post-mortem samples including but not limited to Tissue, Urine, Chest Fluid and other post-mortem specimens. Please refer to our online Test Catalog for a complete listing of the different analyses available for each of these postmortem sample types. We provide quantitation of the drugs listed in Exhibit A as part of our analysis.

Regarding your request for "Autopsy drugs and poisons profile tissue" NMS Labs is fully capable of meeting the specification of compounds listed in this line item. To most effectively detect all of the compounds listed in this line item, NMS Labs would utilize multiple analysis methodologies. Please see the selection finder for analysis code 8092TI and 2964TI (in Section 8) for a complete listing of the compounds detected by these panels. The 8092TI analysis is our most comprehensive scope panel for post-mortem tissue samples. NMS Labs no longer detects the compounds Cyanide, Ethchlorvynol, and Fluoride as part of the 8092TI analysis.

Regarding your request for "Drug Screen by GC-MS" please also see the attached selection finder in Section 8 for our analysis code 8092B for the compounds associated with this analysis.

6. **The Contractor report format should contain at a minimum the following:**

- Deceased name
- Cook County Medical Examiner's case number (e.g., 888 Dec 09)
- Cook County Toxicology case number (e.g. 09-8688)
- Contractor case number
- Specimen type
- Analytical methodology
- Result
- Concentration unit
- Date specimen received
- Report date

NMS Labs toxicology reports will include all the listed information. Please see the Sample Report in Section 8.

7. **The Contractor should provide the reporting limit on the report for the majority of the tests. The reference range should be provided on the report whenever possible. Quantitation of the drugs should be included in either the screen or the confirmation methodology.**

NMS Labs provides reporting limits for the majority of our analysis as well as we provide reference comments for each positive finding. These comments include general information related to the compound detected and reference ranges that have been researched and compiled from data previously published in peer review journals and articles. Please review the sample laboratory report (Section 8) for examples of the reference comments provided with positive findings in our toxicology report.

8. **The Contractor shall return the reports to the Medical Examiner's Office within the following turnaround times: (i) Standard Reports Seven (7) Business Days (ii) Rush Cases Two (2) Business days**

NMS Labs can fully meet the turnaround time needs listed by the Cook County Medical Examiner for standard reports. We will work diligently in the event that a rush case has been submitted in an effort to meet the requested two (2) day turnaround time request but due to the complexity of the types of analysis that we perform and the various sample types submitted to our laboratory, we cannot guarantee that every rush case will be completed within two (2) business days.

9. **Contractor shall submit with their bid proposal sample reports of the following twenty drugs:**

- Cocaine and metabolite screen and confirmation in blood
- Opiates screen and free (unconjugated) confirmation in blood
- Barbiturates screen and confirmation in blood
- Fentanyl and metabolite screen and confirmation in blood
- Methamphetamine and Amphetamine screen and confirmation in blood
- Phencyclidine screen and confirmation in blood
- Alprazolam and metabolite screen and confirmation in blood
- Bupropion screen and confirmation in blood
- Clonazepam and metabolite screen and confirmation in blood
- Olanzapine in blood
- Risperidone and metabolite in blood
- Ethylene Glycol in blood
- Carbamazepine in blood
- Phenytoin in blood
- Lamotrigine in blood
- Lorazepam in blood
- Temazepam in blood
- Quetiapine in blood
- Ziprasidone in blood
- Pseudoephedrine vs Ephedrine Differentiation screen and confirmation in blood

Please find Sample Report in Section 8 to include all of the compounds listed.

10. **The Contractor should handle all specimens with forensic chain of custody. Cook County shall not be charged for any special forensic handling fee.**

NMS Labs will handle all specimens with forensic chain of custody and will not charge any fees for

special forensic handling.

11. **Cook County Office of the Medical Examiner can add new test request after receiving the result from the Contractor. Cook County will pay for the new tests. Cook County will not pay any forensic re-open case fee.**

NMS Labs offers the ability for the Cook County Office of the Medical Examiner to add new test requests after receiving results from NMS Labs. There will not be a forensic re-open case fee associated with the additional analysis.

12. **The Contractor will be responsible for all shipping costs of the specimens from Cook County Office of the Medical Examiner to the Contractor via Federal Express Priority Overnight (Next Business Morning Delivery).**

NMS Labs is open to utilizing priority overnight shipment on specimen submission from the Cook County Office of the Medical Examiner to NMS Labs, however it is our preference to use FedEx Standard Overnight shipping terms. NMS Labs utilizes Standard Overnight delivery because we employ an in-house courier that makes daily has routine pickups from the local FedEx station to expedite all deliveries. With this supplemental courier service, we have decreased the delivery time to our facility between Standard next day air and Priority next day air. All cases submitted to NMS Labs via standard overnight delivery are received in our laboratory for process by 12:00pm on the day of delivery.

13. **The Contractor 's Office must be able to accept Saturday mornings delivery to receive any Federal Express Priority Overnight shipments.**

NMS Labs is staffed to received and begin processing of forensic cases that are received on Saturdays.

14. **The Contractor's office must be located in a zip code zone that will receive Federal Express Priority Overnight (Saturday Morning Delivery) and Federal Express Priority Overnight (next business morning delivery).**

NMS Labs is located within a zip code zone that will receive FedEx priority overnight delivery.

15. **The Contractor shall supply the Medical Examiner's Office with all Federal Express forms pre-printed with the outside laboratory's name, address, telephone number and their Federal Express Account Number. The Contractor shall be responsible for covering all costs associated with shipping the supply items.**

NMS Labs will supply the Cook County Medical Examiner's Office with all Federal Express forms pre-printed with the outside laboratory's name, address, telephone number and their Federal Express Account Number. NMS Labs will cover all costs associated with shipping the supply items.

16. **The Contractor will supply the Medical Examiner's Office with all collection kits, small mailer and evidence seal bags at no charge to the County. The Contractor will cover the cost of shipping of these supply items.**



NMS Labs will supply the Medical Examiner's Office with all collection kits, small mailer and evidence seal bags at no charge to the Cook County Office of the Medical Examiner. NMS Labs will cover the cost of shipping of these supply items.

- 17. The Contractor will supply requisition/chain of custody forms with preprinted control labels at no Charge to the County. The Contractor will cover the cost of shipping of these supply items.**

NMS Labs will supply requisition/chain of custody forms with preprinted control labels at no Charge to the County with no cost associated for their shipment to the Cook County Office of the Medical Examiner.

- 18. The Contractor will ship to Cook County Office of the Medical Examiner the initial shipment of all the supply items listed in (15) through (17) via Federal Express at no cost to Cook County.**

NMS Labs will ship to Cook County Office of the Medical Examiner the initial shipment of all the supply items listed in (15) through (17) via Federal Express at no cost to Cook County.

- 19. Cook County Office of the Medical Examiner will sign and relinquish the requisition/chain of custody form and specimen to the Contractor via Federal Express at no cost to Cook County.**

NMS Labs understands that the Cook County Office of the Medical Examiner will sign and relinquish the requisition/chain of custody form and specimen to the Contractor via Federal Express at no additional cost.

- 20. The Contractor will receive the specimen and sign the requisition/chain of custody form. The Contractor will return copy(s) of the requisition/ chain of custody form(s) to Cook County Office of the Medical Examiner at no cost to Cook County.**

NMS Labs will receive the specimen, sign the requisition/chain of custody form and return copy(s) of the requisition/ chain of custody form(s) to Cook County Office of the Medical Examiner at no additional cost.

- 21. The Contractor will return the Styrofoam Frozen shipping containers to the Cook County Office of the Medical Examiner at no cost to Cook County.**

NMS Labs will return the Styrofoam shipping containers to the Cook County Office of the Medical Examiner at no additional cost.

- 22. Results will be returned to Cook County Office of the Medical Examiner via fax.**

NMS Labs will provide all laboratory results to the Cook County Office of the Medical Examiner office via a controlled and secure fax.

- 23. The Contractor will release results only to Cook County Office of the Medical Examiner.**

NMS Labs will only release results to the Cook County Office of the Medical Examiner.

- 24. The Contractor will dedicate an experienced client service representative to monitor the case flow of specimens from Cook County Office of the Medical Examiner.**

NMS Labs currently employs a staff of 15 employees within our Client Service department with 5 dedicated employees for the forensic accounts. Our client support team is staffed from 7:00am-7:30pm central standard time. NMS Labs will assign 1 (one) client support representative to manage the Cook County Office of the Medical Examiner account.

- 25. It is understood that Cook County Office of the Medical Examiner will order the tests as needed against a purchase order.**

NMS Labs recognizes that Cook County Office of the Medical Examiner will order tests as needed against a purchase order.

- 26. The Contractor will send monthly bill to the Cook County Office of the Medical Examiner.**

NMS Labs complies with monthly billing to the Cook County Office of the Medical Examiner.

- 27. The description of toxicological tests and methods and are listed in Exhibit A of this bid document.**

NMS Labs utilizes most of the technologies listed in exhibit A and recognize that they are minimum requirements for the contract. There are a select number of compounds where NMS Labs has moved forward with the utilization of more advanced technologies to improve our operational efficiency and detection capabilities, including High Performance Liquid Chromatography with Tandem Mass Spectrometry (LC-MS/MS). More information about the exact technologies utilized in comparison to the technologies listed in exhibit A is available upon request.

- 28. The quantities listed on the Proposal pages are only an approximation. The actual quantity of each test ordered by the Cook County Office of the Medical Examiner may change depending on the circumstances.**

NMS Labs recognizes that the quantities listed on the Proposal pages are an approximation and may vary during the contract period at the discretion or needs of the Cook County Medical Examiner's Office.



When you need to know.*

LABORATORY LICENSURE AS OF JANUARY 2013

1. **College of American Pathologists (CAP) International Standards - ISO 15189:2007 Accreditation:** Certification No. 3030301 (Expires August 12, 2013)
2. **Clinical Laboratory Improvement Amendments (CLIA) Certificate of Accreditation:** Laboratory No. 39DO197898 (Expires May 7, 2014)
3. **College of American Pathologists (CAP) Laboratory Accreditation Program (LAP):** Accreditation No. 30303-01 (Expires December 8, 2013)
4. **Pennsylvania Department of Health:** Laboratory Permit No. 000504A (Expires August 15, 2013)
5. **New York State Department of Health:** PFI No. 3772 (Expires June 30, 2013)
6. **State of California Department of Public Health:** Lab ID Number COS 800001 (Expires May 30, 2013)
7. **Maryland Department of Health:** For Welsh Road location, Laboratory Permit No. 580 (Expires June 30, 2014)
8. **Maryland Department of Health:** For Stratford Avenue location, Laboratory Permit No. FL009X (Expires December 4, 2015)
9. **Medicare No. 39-8154** (No hard copy of license; covered under inspection by Commonwealth of PA)
10. **DEA Registration** (Expires October 31, 2013)
11. Approved by **OSHA for Blood Lead Analysis** (No Expiration Date)
12. **NRC Registration No. 8405** (No expiration date)
13. **National Provider Identifier (NPI) Number** – 1922177732
14. **FDA Registration No. 949561885** (2300 Stratford Ave)
15. **The American Society of Crime Lab Directors/Laboratory Accreditation Board ISO 17025 accreditation (ASCLD/LAB-International):** Certificate No. ALI-112-T (April 19, 2015)
16. **American Board of Forensic Toxicology (ABFT) accreditation:** Certificate No. L017 (Expires May 1, 2013)
17. **Texas Department of Public Safety Accreditation in Controlled Substances, Biology, and Trace Evidence** (No expiration date – tied to ASCLD/LAB accreditation)
18. **Texas Department of Public Safety Accreditation in Toxicology** (No expiration date – tied to ABFT accreditation)
19. **Louisiana Department of Public Safety and Corrections - Forensic Toxicology Analysis** (Expires July 1, 2013 – tied to CAP accreditation)
20. **Rhode Island Department of Health – Office of Facilities Regulation:** License No. LCO00262 (Expires December 30, 2014)
21. **Florida Department of Law Enforcement** – License No. 800003261 (Expires September 30, 2013)



Advancing Excellence

**Accredited
Laboratory**



The College of American Pathologists

certifies that the laboratory named below

**National Medical Services Inc
dba NMS Labs**

**Willow Grove, Pennsylvania
Robert A. Middleberg, PhD**

LAP Number: 3030301
AU-ID: 1189546
CLIA Number: 39D0197898

*has met all applicable standards for accreditation and
is hereby fully accredited by the College of American Pathologists'
Laboratory Accreditation Program. Reinspection should occur prior
to December 8, 2013 to maintain accreditation.*

Accreditation does not automatically survive a change in director, ownership,
or location and assumes that all interim requirements are met.

Frank R Rudy

Chair, Commission on Laboratory Accreditation

Stephen M. Baum MD FACP

President, College of American Pathologists



CERTIFICATE OF ACCREDITATION

The College of American Pathologists has accredited

National Medical Services, Inc. dba NMS Labs Willow Grove, Pennsylvania

in accordance with the recognized International Standard
ISO 15189:2007, Medical Laboratories – Particular requirements for
quality and competence. This accreditation demonstrates
competence for a defined scope and the operation of a
laboratory quality management system.

Effective August 12, 2010

Wendy A. Sever, MD
Chair, CAP 15189 Committee

Expires August 12, 2013

Steph A. Baum MD RCAP
President, College of American Pathologists

This laboratory has received CAP 15189 accreditation in chemistry.

CAP #3030301



15189SM

cap

ACCREDITED

ISO 15189:2007

AMERICAN BOARD OF FORENSIC TOXICOLOGY

INCORPORATED 1976 IN THE DISTRICT OF COLUMBIA

THE AMERICAN BOARD OF FORENSIC TOXICOLOGY, INC., HEREBY DECLARES THAT THIS BOARD'S STANDARDS FOR LABORATORY ACCREDITATION HAVE BEEN FULFILLED AND THE OTHER REQUIREMENTS OF THIS BOARD HAVE BEEN MET; AND THEREFORE GRANTS THIS

CERTIFICATE OF LABORATORY ACCREDITATION

IN

FORENSIC TOXICOLOGY

TO

NATIONAL MEDICAL SERVICES, INC. d/b/a NMS LABS FORENSIC TOXICOLOGY LABORATORY

EFFECTIVE THIS FIRST DAY OF MARCH 2011
FOR A PERIOD OF TWO YEARS AND FOUR MONTHS



SPONSORING ORGANIZATIONS
OF THE
AMERICAN BOARD OF FORENSIC TOXICOLOGY, INC.

American Academy of Forensic Sciences

California Association of Toxicologists

Society of Forensic Toxicologists

Canadian Society of Forensic Science

Southwestern Association of Toxicologists

Devin Stajic

PRESIDENT

Ann A. ...

VICE-PRESIDENT

Paul ...

SECRETARY

William R. ...

TREASURER

CHAIR, ACCREDITATION COMMITTEE

CERTIFICATE NO. L017

NMS Labs List of Medical Examiners / Coroners

| Company Name | Contact | Street Address | City | State | Zip | Phone |
|---|--------------------|--|------------------|-------|-------|----------------|
| Alaska State Medical Examiners Office, Anchorage | Dr. Kathy Raven | 5455 Dr Martin L. King Jr Ave | Anchorage | AK | 99507 | 1-907-334-2207 |
| Medical Examiner of Mohave County, Lake Havasu City | Rexene Worrell, MD | 1145 Aviation Drive - Unit A | Lake Havasu City | AZ | 86404 | 1-702-682-7777 |
| Los Angeles County Coroner Medical Examiner, Los Angeles | Dan Anderson | 1104 N. Mission Road | Los Angeles | CA | 90033 | 1-323-343-0691 |
| San Francisco Medical Examiner Office, San Francisco | Nikolas Lemos | Susan M Keller, Hall of Justice, N. Terrace 850 Bryant Street | San Francisco | CA | 94103 | 1-415-553-1699 |
| Sonoma County Sheriff's Office, Santa Rosa | Sgt. Greg Stashyn | 3336 Chanate Road | Santa Rosa | CA | 95404 | 1-707-565-5070 |
| Marin County Sheriff Coroner, San Rafael | Sgt. Keith Boyd | Civic Center- Room 145 | San Rafael | CA | 94903 | 1-415-473-5280 |
| Kern County Sheriff Coroner, Bakersfield | Dawn Ratliff | 1832 Flower Street | Bakersfield | CA | 93305 | 1-661-868-0117 |
| Yolo County Sheriff Dept., Woodland | Robert A. LaBrash | 140 Tony Diaz Drive | Woodland | CA | 95776 | 1-530-668-5290 |
| Sacramento County Coroner, Sacramento | Gregory Wyatt | 4800 Broadway, Suite 100 | Sacramento | CA | 95820 | 1-916-874-9353 |
| Santa Barbara County Coroner | Dr. Robert Anthony | 4434 Calle Real, PO Box 6427 | Santa Barbara | CA | 93160 | 1-805-681-4297 |
| Santa Clara County Coroner, San Jose | Mark Eastus | 850 Thornton Way | San Jose | CA | 95128 | 1-408-793-1900 |
| El Dorado County Coroner, Placerville | Michael Berry MD | 300 Fair Lane | Placerville | CA | 95667 | 1-530-573-3000 |
| Mendocino County, Ukiah | Jason Trent, M.D. | 464 Luce Ave | Ukiah | CA | 95482 | 1-707-463-1578 |
| Nevada County Coroner, Nevada City | Paul Schmidt | 950 Maidu Avenue | Nevada City | CA | 95959 | 1-530-265-1220 |
| Santa Cruz County Coroner, Santa Cruz | Alan Burt | 701 Ocean Street #340 | Santa Cruz | CA | 95060 | 1-831-454-3184 |
| Placer County Sheriff's Office - Coroner Division, Auburn | Dennis H. Watt | 2929 Richardson Drive | Auburn | CA | 95603 | 1-530-889-7878 |
| San Diego County Medical Examiner, San Diego | Dr. Iain McIntyre | 5570 Overland Ave - Ste 101 | San Diego | CA | 92123 | 1-858-694-2909 |
| Denver Chief Medical Examiner & Deputy Coroner, Denver | Amy Martin | 660 Bannock Street | Denver | CO | 80204 | 1-303-436-7711 |
| Connecticut Office of Chief Medical Examiner, Farmington | Kerry Slattery | 11 Shuttle Road | Farmington | CT | 6032 | 1-860-679-3986 |

NMS Labs List of Medical Examiners / Coroners

| Company Name | Contact | Street Address | City | State | Zip | Phone |
|---|----------------------------|-------------------------------------|-----------------|-------|-------|----------------|
| Broward Medical Examiner Office, Fort Lauderdale | Michael Wagner | 5301 SW-31St. Ave | Fort Lauderdale | FL | 33312 | 1-954-327-6500 |
| Volusia County Medical Examiner Office, Daytona Beach | Chris Boden | 1360 Indian Lake Road | Daytona Beach | FL | 32124 | 1-386-258-4060 |
| District 23 Medical Examiner's Office, St. Augustine | Pedrag Bulic | 4501 Avenue A | Saint Augustine | FL | 32095 | 1-904-209-0820 |
| Dekalb Medical Examiner, Decatur | Gerald Gowitt | 3550 Kensington Rd. | Decatur | GA | 30032 | 1-404-508-3568 |
| Fulton County Medical Examiner, Atlanta | Randy Hanzlick | 430 Pryor Street | Atlanta | GA | 30312 | 1-404-730-4400 |
| Polk County Medical Examiner, Des Moines | Dr. Gregory Schmunk | 1801 Hickman Road | Des Moines | IA | 50314 | 1-515-286-2102 |
| Iowa Office of the State Medical Examiner, Ankeny | Dr. Julia Goodin | 2250 S. Ankeny Blvd | Ankeny | IA | 50023 | 1-515-725-1400 |
| Will County Coroners Office, Joliet | Patrick O'Neil, Coroner | 57 N. Ottawa St, Ste 412 | Joliet | IL | 60432 | 1-815-727-5675 |
| Kankakee County Coroner's Office, Kankakee | Robert Gessner, Coroner | 3000 S. Justice Way | Kankakee | IL | 60901 | 1-815-802-7190 |
| Champaign County Coroner's Office, Urbana | Duane Northrup, Coroner | 202 S. Art Bartell Road | Urbana | IL | 61802 | 1-217-384-3888 |
| Kane County Coroner, Geneva | Robert Russell, Coroner | 719 S. Batavia Ave., Bldg. E | Geneva | IL | 60134 | 1-630-232-3535 |
| Lake County Coroner's Office, Waukegan | Dr. Thomas Rudd | 26 N. Martin Luther King Ave. | Waukegan | IL | 60085 | 1-847-377-2364 |
| LaSalle County Coroner's Office, Ottawa | Jody Bernard, Coroner | 707 Etna Road, Rm. 144 | Ottawa | IL | 61350 | 1-815-434-8268 |
| Livingston County Coroner, Pontiac | Michael Burke, Coroner | PO Box 527 | Pontiac | IL | 61764 | 1-815-844-6367 |
| Peoria County Coroner's Office, Peoria | Johanna Ingersoll, Coroner | 506 East Seneca Place | Peoria | IL | 61603 | 1-309-669-2000 |
| Sangamon County Coroner's Office, Springfield | Cinda Edwards, Coroner | 200 South 9th Street - Rm 203 | Springfield | IL | 62701 | 1-217-753-6610 |
| Jefferson Parish Coroner's Office, Harvey | Dr. Gerald Cvitanovich | 2018 8th Street | Harvey | LA | 70058 | 1-504-365-9100 |
| LSUHSC Pathology Outreach Services, Shreveport | Dr. James Traylor | PO Box 33932 | Shreveport | LA | 71130 | 1-318-675-5000 |
| Maine Office of Chief Medical Examiner, Augusta | Margaret Greenwald, MD | State House Station #37 | Augusta | ME | 4333 | 1-207-624-7180 |
| Oakland County Medical Examiner, Pontiac | Dr. Gary W. Kunsman | 1200 N Telegraph Road, Bldg 28 East | Pontiac | MI | 48341 | 1-248-858-4042 |

NMS Labs List of Medical Examiners / Coroners

| Company Name | Contact | Street Address | City | State | Zip | Phone |
|--|-----------------------|--------------------------------|---------------|-------|-------|----------------|
| Macomb County Medical Examiner, Mt. Clemens | Dr. Dan Spitz | 43585 Elizabeth Road | Mount Clemens | MI | 48043 | 1-586-469-5768 |
| St Clair County Medical Examiner, Port Huron | Dr. Dan Spitz | 1221 Pine Grove Ave | Port Huron | MI | 48060 | 1-810-982-4111 |
| Saginaw County Medical Examiner's Office, Saginaw | Kanu Virani, M.D. | 111 S Michigan Ave-Lower Level | Saginaw | MI | 48602 | 1-989-792-6052 |
| University of Michigan - Wayne County, Detroit | Dr. Carl J. Schmidt | 1301 Catherine St-5231 MedSci1 | Ann Arbor | MI | 48109 | 1-734-936-0460 |
| Hennepin County Medical Center, Minneapolis | Julie Kloss | 701 Park Ave S | Minneapolis | MN | 55415 | 1-612-873-3012 |
| Mississippi State Medical Examiner Office, Jackson | Sam Howell | 1700 E. Woodrow Wilson | Jackson | MS | 39216 | 1-601-987-1600 |
| North Carolina Chief Medical Examiner, Chapel Hill | Dr. Ruth Winecker | Room 1004 BBB (228-H) | Chapel Hill | NC | 27599 | 1-919-445-4408 |
| New Hampshire Chief Medical Examiner, Concord | Dr. Thomas Andrew | 33 Capitol Street | Concord | NH | 03301 | 1-603-271-1232 |
| Morris County Medical Examiner's Office (14), Morristown | Dr. Ronal Suarez | P.O. Box 900 | Morristown | NJ | 07963 | 1-973-829-8273 |
| Bergen County Medical Examiner, Paramus | Fredrick DiCarlo M.D. | 351 Ridgewood Avenue | Paramus | NJ | 07652 | 1-201-634-2940 |
| Morris County Medical Examiner's Office (19), Morristown | Dr. Ronald Suarez | PO Box 900 | Morristown | NJ | 07963 | 1-973-829-8270 |
| Atlantic County Medical Examiner Office, Northfield | Tammy Schaab | 201 Shore Road | Northfield | NJ | 08225 | 1-609-645-5942 |
| Burlington County ME Office, Mount Holly | Dr. Ian Hood | 4 Academy Drive | Mount Holly | NJ | 08060 | 1-609-702-7030 |
| Ocean County Office of the Medical Examiner, Toms River | Dr. Donato Santangelo | PO Box 2191 | Toms River | NJ | 08754 | 1-732-341-3424 |
| Gloucester County Medical Examiner, Clarksboro | Dee Michael | 254 County House Road | Clarksboro | NJ | 08020 | 1-856-384-6910 |
| Camden County Medical Examiner's Office, Clarksboro | Dee Michael | 254 County House Road | Clarksboro | NJ | 08020 | 1-856-384-6910 |
| Morris County Medical Examiner's Office (21), Morristown | Dr. Ronald Suarez | PO Box 900 | Morristown | NJ | 07963 | 1-973-829-8270 |
| State of New Jersey State Toxicology Laboratory, Newark | Robert Havier, Ph.D | 325 Norfolk Street | Newark | NJ | 07103 | 1-973-648-7260 |

NMS Labs List of Medical Examiners / Coroners

| Company Name | Contact | Street Address | City | State | Zip | Phone |
|--|------------------------|--|--------------|-------|-------|----------------|
| New Mexico Office of Medical Investigators, Albuquerque | Amy Boule | 1 University of New Mexico | Albuquerque | NM | 87131 | 1-505-272-6936 |
| Clark County Coroner's Office, Las Vegas | Bill Gazza | 1704 Pinto Lane | Las Vegas | NV | 89106 | 1-702-455-3210 |
| Washoe County Medical Examiner & Coroner, Reno | Lynn Sack | 10 Kirman Ave | Reno | NV | 89502 | 1-775-785-6114 |
| New York Office of Chief Medical Examiner, New York | Dr. Marina Stajic | 421 East 26th St | New York | NY | 10016 | 1-212-447-4025 |
| Sullivan County Coroners Department, Harris | Alan Keston | P.O. Box 5012 | Monticello | NY | 12701 | 1-845-807-0427 |
| Greene County Coroner, Greenville | Richard E. Viglio | P.O. Box 383 | Cairo | NY | 12413 | 1-518-622-9503 |
| Westchester County Medical Examiner, Valhalla | Betsy Spratt | 10 Dana Road | Valhalla | NY | 10595 | 1-914-231-1751 |
| Dutchess County Office of the Medical Examiner, Poughkeepsie | Patricia Wright | 387 Main Street | Poughkeepsie | NY | 12601 | 1-845-486-3414 |
| Clinton County Coroner (CVPH), Plattsburgh | Debra McKenna | 137 Margaret St. Ste. 208 | Plattsburgh | NY | 12901 | 1-518-574-0911 |
| Rockland County Medical Examiner's Office, Pomona | Dr. Laura Carbone | 50 Sanatorium Road- Building A | Pomona | NY | 10970 | 1-845-364-2826 |
| Orange County Office of the Medical Examiner, Goshen | Dr. Charles Catanese | 22 Wells Farm Road | Goshen | NY | 10924 | 1-845-615-3870 |
| Saratoga County Coroner, Saratoga Springs | Dr. Michael Sikirica | Saratoga County Municipal Ctr. 40 McMaster Street | Ballston Spa | NY | 12020 | 1-518-884-4742 |
| Montgomery County (Ohio) Coroner, Dayton | Dr. Laureen Marinetti | 361 W. 3rd Street | Dayton | OH | 45402 | 1-937-225-4156 |
| Franklin County Coroner's Office, Columbus | Bev Harper | 520 King Avenue | Columbus | OH | 43201 | 1-614-525-5290 |
| Lucas County Coroner Toxicology Lab, Toledo | Sue Charney | 2595 Arlington Avenue | Toledo | OH | 43614 | 1-419-213-3900 |
| Lake County Coroner's Office, Painesville | Dr. Lynn Smith Coroner | 104 E. Erie St. | Painesville | OH | 44077 | 1-440-350-2793 |
| Chester County Coroner, West Chester | Steven Dickter, M.D. | 313 W Market Street - Ste 4102 | West Chester | PA | 19382 | 1-610-344-6165 |
| Montgomery County Coroner- Court House, Norristown | Dr. Walter Hofman | P.O. Box 311 | Norristown | PA | 19404 | 1-610-278-3057 |
| Bucks County Coroner, Warminster | Keith Preston | 850 Eagle Blvd | Warminster | PA | 18974 | 1-267-880-5040 |
| Dauphin County Coroner, Harrisburg | Graham Hetrick | 1274 S. 28th Street | Harrisburg | PA | 17111 | 1-717-564-4567 |

NMS Labs List of Medical Examiners / Coroners

| Company Name | Contact | Street Address | City | State | Zip | Phone |
|--|-----------------------|--|------------------|-------|-------|----------------|
| Allegheny Coroner's Forensic Division Labs., Pittsburgh | Jennifer Jannsen | 1520 Penn Ave | Pittsburgh | PA | 15222 | 1-412-350-3741 |
| Luzerne County Coroner, Wilkes Barre | William W. Lisman | Luzerne County Court | Wilkes Barre | PA | 18711 | 1-570-825-1664 |
| Lancaster County Coroner, Lancaster | Stephen G. Diamantoni | 150 North Queen St - Ste 602 | Lancaster | PA | 17602 | 1-717-735-2123 |
| Erie County Coroner's Office, Erie | Lyell Cook | 140 West 6th Street | Erie | PA | 16501 | 1-814-451-6331 |
| Fayette County Coroner, Uniontown | Jessie Camilli | 34 West Peter Street - Ste. 3 | Uniontown | PA | 15401 | 1-724-430-1270 |
| Northampton County Coroner, Easton | Zachary Lysek | 146 Country Club Road | Easton | PA | 18045 | 1-610-258-1806 |
| Westmoreland County Coroner's Office, Greensburg | Kenneth A. Bacha | Courthouse Square 2 Main St., Ste.602 | Greensburg | PA | 15601 | 1-724-830-3636 |
| Greene County Coroner's Office, Waynesburg | Greg Rohanna | 22 W. High Street | Waynesburg | PA | 15370 | 1-724-883-4477 |
| Butler County Coroner, Butler | William F. Young | 227 W. Cunningham Street | Butler | PA | 16001 | 1-724-477-3137 |
| Armstrong County Coroner, Kittanning | Robert Bower, Coroner | Admn. Bldg. - 450 Market St. | Kittanning | PA | 16201 | 1-724-548-3281 |
| Schuylkill County Coroner, New Philadelphia | Dr. David Moylan | 15 Alliance Street | New Philadelphia | PA | 17959 | 1-570-277-0200 |
| The Forensic Science Network, Columbia | Demi Garvin | 1225 Laurel Street, Suite 300 | Columbia | SC | 29201 | 1-803-337-6325 |
| Richland County Coroner, Columbia | Cathy Rawls | 1931 Pineview Dr -P.O. Box 192 | Columbia | SC | 29202 | 1-803-576-1799 |
| Spartanburg County Coroner, Spartanburg | Rusty Clevenger | 366 North Church St - Ste 1700 | Spartanburg | SC | 29303 | 1-864-596-2509 |
| Pickens County Coroner, Pickens | Kandy Kelley | 186 Prison Camp Road | Pickens | SC | 29671 | 1-864-898-5561 |
| Forensic Medical Management Services - Nashville, Nashville, | Fran Wheaty | 850 R.S. Gass Blvd. | Nashville | TN | 37216 | 1-615-743-1800 |
| East Tennessee State University, Johnson City | Dr. Ken Ferslew | P.O. Box 70422 | Johnson City | TN | 37614 | 1-423-439-6274 |
| Collin County, Mc Kinney | Dr. William Rohr | 2300 Bloomdale Rd. Ste - 3100 | Mc Kinney | TX | 75071 | 1-972-548-3775 |
| Webb County Medical Examiners Office, Laredo | Dr. Corrine Stern | PO BOX 2353 | Laredo | TX | 78044 | 1-956-722-7054 |
| Travis County Medical Examiner, Austin | Dr. Brad Hall | P.O. Box 1748 | Austin | TX | 78767 | 1-512-854-9599 |
| Tarrant County Medical Examiner, Fort Worth | Dr. Robert Johnson | 200 Feliks Gwozdz Place | Fort Worth | TX | 76104 | 1-817-920-5700 |

NMS Labs List of Medical Examiners / Coroners

| Company Name | Contact | Street Address | City | State | Zip | Phone |
|--|-----------------------|-------------------------------|----------------|-------|-------|----------------|
| Nueces County Office of The Medical Examiner, Corpus Christi | Dr. Ray Fernandez | 2610 Hospital Boulevard | Corpus Christi | TX | 78405 | 1-361-884-4994 |
| El Paso County Medical Examiner's Office, El Paso | Dr. Juan Contin | 500 E. San Antonio St, Rm 406 | El Paso | TX | 79901 | 1-915-546-2040 |
| Forensic Medical Management Services - Beaumont, Beaumont | Dr. John Ralston | PO Box 20097 | Beaumont | TX | 77720 | 1-409-726-2571 |
| Forensic Medical Management Services - Tyler, Tyler | Dr. John Stash | 11980 Hwy. 155 North | Tyler | TX | 75708 | 1-903-877-3800 |
| Valley Forensics, P.L.L.C., Edinburg | Dr. Norma Farley | 3100-B S. Business Hwy 281 | Edinburg | TX | 78539 | 1-956-292-7014 |
| Lubbock County Medical Examiners Office, Lubbock | Dr. Sridhar Natarajan | 4434 South Loop 289 | Lubbock | TX | 79414 | 1-806-687-9434 |
| American Forensics, LLC, Dallas | Dr. Amy Gruszecki | PO Box 550846 | Dallas | TX | 75355 | 1-214-221-2700 |
| Montgomery County Forensic Services, Conroe | Dr. Sparks Veassey | PO Box 539 | Conroe | TX | 77305 | 1-936-539-7820 |
| South Plains Forensic Pathology, P.A., Lubbock | Dr. Thomas Parsons | 202 Ave Q | Lubbock | TX | 79415 | 1-806-790-9611 |
| Central Texas Autopsy, PLLC, Lockhart | Dr. Suzanna Dana | 1515 S. Commerce | Lockhart | TX | 78644 | 1-512-398-4974 |
| Vermont Office Chief Medical Examiner, Burlington | Dr. Steven Shapiro | 111 Colchester Avenue | Burlington | VT | 5401 | 1-802-863-7320 |
| Milwaukee County Medical Examiner, Milwaukee | Karen Domagalski | 933 W. Highland Avenue | Milwaukee | WI | 53233 | 1-414-223-1207 |
| WV Office of the Chief Medical Examiner, Charleston | Dr James Kraner | 619 Virginia Street W. | Charleston | WV | 25302 | 1-304-356-4095 |
| Fremont County Coroner's Office, Riverton | Mark Stratmoen | 322 N. 8th St. West | Riverton | WY | 82501 | 1-307-856-7150 |



NMS Labs

TESTING: BETALIMS

3701 Welsh Road, PO Box 433A, Willow Grove, PA 19090-0437

Phone: (215) 657-4900 Fax: (215) 657-2972

e-mail: nms@nmslabs.com

Robert A. Middleberg, PhD, DABFT, DABCC-TC, Laboratory Director

Toxicology Report

Report Issued 01/26/2013 08:53

To: 10075
Cook County Medical Examiner
Attn: Kathleen Mittel
2121 West Harrison Street Rm14
Chicago, IL 60612

Patient Name DOE, JOHN
Patient ID EXAMPLE REPORT
Chain 123456
Age 40 Y
Gender Male
Workorder 13000165

Page 1 of 16

Positive Findings:

| <u>Compound</u> | <u>Result</u> | <u>Units</u> | <u>Matrix Source</u> |
|--|---------------|--------------|----------------------|
| Carbamazepine | 6.0 | mcg/mL | Post Mortem Blood |
| Lorazepam | 97 | ng/mL | Post Mortem Blood |
| Ethylene Glycol | 50 | mg/dL | Post Mortem Blood |
| Lamotrigine | 3.0 | mcg/mL | Post Mortem Blood |
| Olanzapine | 23 | ng/mL | Post Mortem Blood |
| Quetiapine | 1600 | ng/mL | Post Mortem Blood |
| Risperidone | 13 | ng/mL | Post Mortem Blood |
| 9-Hydroxyrisperidone | 9.0 | ng/mL | Post Mortem Blood |
| Risperidone and 9-Hydroxyrisperidone - Total | 22.0 | ng/mL | Post Mortem Blood |
| Ziprasidone | 54 | ng/mL | Post Mortem Blood |
| Phenytoin | 10 | mcg/mL | Post Mortem Blood |
| Temazepam | 870 | ng/mL | Post Mortem Blood |
| Clonazepam | 70 | ng/mL | Post Mortem Blood |
| Bupropion | 200 | ng/mL | Post Mortem Blood |
| 7-Amino Clonazepam | 140 | ng/mL | Post Mortem Blood |
| Hydroxybupropion | 500 | ng/mL | Post Mortem Blood |
| Ephedrine | 80 | ng/mL | Post Mortem Blood |
| Pseudoephedrine | 210 | ng/mL | Post Mortem Blood |
| Cocaine | 90 | ng/mL | Post Mortem Blood |
| Phencyclidine | 39 | ng/mL | Post Mortem Blood |
| Benzoylcegonine | 1400 | ng/mL | Post Mortem Blood |
| Fentanyl | 2.0 | ng/mL | Post Mortem Blood |
| Alprazolam | 90 | ng/mL | Post Mortem Blood |
| Norfentanyl | 4.0 | ng/mL | Post Mortem Blood |
| Alpha-Hydroxyalprazolam | 5.0 | ng/mL | Post Mortem Blood |
| Morphine - Free | 100 | ng/mL | Post Mortem Blood |
| 6-Monoacetylmorphine - Free | 12 | ng/mL | Post Mortem Blood |
| Phenobarbital | 30 | mcg/mL | Post Mortem Blood |
| Oxycodone - Free | 46 | ng/mL | Post Mortem Blood |
| Amphetamine | 190 | ng/mL | Post Mortem Blood |
| Oxymorphone - Free | 12 | ng/mL | Post Mortem Blood |
| Methamphetamine | 57 | ng/mL | Post Mortem Blood |

See Detailed Findings section for additional information

Testing Requested:



TESTING: BETALIMS

Workorder

13000165

Chain

123456

Patient ID

EXAMPLE REPORT

Page 2 of 16

| Analysis Code | Description |
|---------------|--|
| 0512B | Barbiturates Screen, Blood |
| 0606B | Cocaine and Metabolites Screen, Blood |
| 0970B | Carbamazepine and Metabolite, Blood |
| 2062B | Ethylene Glycol, Blood |
| 2484B | Lamotrigine, Blood |
| 2535B | Lorazepam, Blood |
| 3226B | Olanzapine, Blood |
| 3236B | Opiates Screen, Blood |
| 3532B | Phencyclidine Screen, Blood |
| 4051B | Quetiapine, Blood |
| 4105B | Risperidone and Metabolite, Blood |
| 4860B | Ziprasidone, Blood |
| 9106B | Alprazolam and Metabolite Screen, Blood |
| 9122B | Bupropion and Metabolite Screen, Blood |
| 9139B | Clonazepam and Metabolite Screen, Blood |
| 9176B | Fentanyl and Metabolite Screen, Blood |
| 9239B | Phenytoin Screen, Blood |
| 9249B | Pseudoephedrine vs Ephedrine Differentiation Screen, Blood |
| 9399B | Temazepam and Metabolite Screen, Blood |
| 9522B | Methamphetamine and Amphetamine Screen, Blood |

Specimens Received:

| ID | Tube/Container | Volume/ Mass | Collection Date/Time | Matrix Source | Miscellaneous Information |
|-----|----------------|-----------------|-------------------------|-------------------|------------------------------|
| 001 | Gray top tube | 10 mL | 01/24/2013 12:12 | Post Mortem Blood | |
| 002 | Gray top tube | 10 mL | 01/24/2013 12:12 | Post Mortem Blood | |
| 003 | Gray top tube | 10 mL | 01/24/2013 12:12 | Post Mortem Blood | |

All sample volumes/weights are approximations.

Specimens received on 01/25/2013.

Detailed Findings:

| Analysis and Comments | Result | Units | Rpt. Limit | Specimen Source | Analysis By |
|--|--------|--------|---------------|-------------------------|-------------|
| Carbamazepine | 6.0 | mcg/mL | 0.20 | 002 - Post Mortem Blood | HPLC |
| Lorazepam | 97 | ng/mL | 5.0 | 003 - Post Mortem Blood | LC-MS/MS |
| Ethylene Glycol | 50 | mg/dL | 5.0 | 002 - Post Mortem Blood | GC |
| Lamotrigine | 3.0 | mcg/mL | 0.20 | 001 - Post Mortem Blood | HPLC |
| Olanzapine | 23 | ng/mL | 3.0 | 002 - Post Mortem Blood | GC |
| Quetiapine | 1600 | ng/mL | 20 | 002 - Post Mortem Blood | LC-MS/MS |
| Risperidone | 13 | ng/mL | 1.0 | 002 - Post Mortem Blood | LC-MS/MS |
| 9-Hydroxyrisperidone | 9.0 | ng/mL | 1.0 | 002 - Post Mortem Blood | LC-MS/MS |
| Risperidone and 9-Hydroxyrisperidone - Total | 22.0 | ng/mL | | 002 - Post Mortem Blood | LC-MS/MS |
| Ziprasidone | 54 | ng/mL | 2.0 | 002 - Post Mortem Blood | LC-MS/MS |
| Phenytoin | 10 | mcg/mL | 0.50 | 003 - Post Mortem Blood | HPLC |
| Temazepam | 870 | ng/mL | 20 | 001 - Post Mortem Blood | LC-MS/MS |
| Clonazepam | 70 | ng/mL | 2.0 | 003 - Post Mortem Blood | LC-MS/MS |



TESTING: BETALIMS

Workorder

13000165

Chain

123456

Patient ID

EXAMPLE REPORT

Page 3 of 16

Detailed Findings:

| Analysis and Comments | Result | Units | Rpt. Limit | Specimen Source | Analysis By |
|-----------------------------|-----------|--------|------------|-------------------------|-------------|
| Bupropion | 200 | ng/mL | 10 | 001 - Post Mortem Blood | LC-MS/MS |
| 7-Amino Clonazepam | 140 | ng/mL | 2.0 | 003 - Post Mortem Blood | LC-MS/MS |
| Hydroxybupropion | 500 | ng/mL | 100 | 001 - Post Mortem Blood | LC-MS/MS |
| Ephedrine | 80 | ng/mL | 5.0 | 003 - Post Mortem Blood | LC-MS/MS |
| Pseudoephedrine | 210 | ng/mL | 5.0 | 003 - Post Mortem Blood | LC-MS/MS |
| Cocaine | 90 | ng/mL | 20 | 001 - Post Mortem Blood | GC/MS |
| Phencyclidine | 39 | ng/mL | 5.0 | 002 - Post Mortem Blood | GC/MS |
| Benzoylcegonine | 1400 | ng/mL | 50 | 001 - Post Mortem Blood | GC/MS |
| Fentanyl | 2.0 | ng/mL | 0.10 | 003 - Post Mortem Blood | LC-MS/MS |
| Alprazolam | 90 | ng/mL | 5.0 | 002 - Post Mortem Blood | LC-MS/MS |
| Norfentanyl | 4.0 | ng/mL | 0.20 | 003 - Post Mortem Blood | LC-MS/MS |
| Alpha-Hydroxyalprazolam | 5.0 | ng/mL | 5.0 | 002 - Post Mortem Blood | LC-MS/MS |
| Morphine - Free | 100 | ng/mL | 10 | 003 - Post Mortem Blood | GC/MS |
| 6-Monoacetylmorphine - Free | 12 | ng/mL | 10 | 003 - Post Mortem Blood | GC/MS |
| Phenobarbital | 30 | mcg/mL | 0.20 | 001 - Post Mortem Blood | GC/MS |
| Oxycodone - Free | 46 | ng/mL | 10 | 003 - Post Mortem Blood | GC/MS |
| Amphetamine | 190 | ng/mL | 5.0 | 001 - Post Mortem Blood | LC-MS/MS |
| Oxymorphone - Free | 12 | ng/mL | 10 | 003 - Post Mortem Blood | GC/MS |
| Methamphetamine | 57 | ng/mL | 5.0 | 001 - Post Mortem Blood | LC-MS/MS |
| Phenytoin | Confirmed | mcg/mL | 0.50 | 003 - Post Mortem Blood | GC/MS |

Other than the above findings, examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

Reference Comments:

- 1. 6-Monoacetylmorphine - Free (6-MAM; Heroin Metabolite) - Post Mortem Blood:

6-monoacetylmorphine (6-MAM) is the 6-monoacetylated form of morphine, which is pharmacologically active. When present it is indicative of heroin (diacetylmorphine) use. It may be present in both conjugated and unconjugated forms.

A healthy man administered 12 mg heroin intravenously achieved peak blood concentrations at two minutes post injection of 141 ng/mL of heroin and 151 ng/mL of 6-monoacetylmorphine and 41 ng/mL of morphine.

Eight subjects who died within fifteen minutes of heroin administration had free morphine concentrations of 360 ng/mL and 6-monoacetylmorphine concentrations of 19 ng/mL.

- 2. 7-Amino Clonazepam (Clonazepam Metabolite) - Post Mortem Blood:

Plasma concentrations following chronic therapy with 6 mg/day of Clonazepam: 20 - 140 ng/mL.

**Reference Comments:****3. 9-Hydroxyrisperidone (Risperidone Metabolite) - Post Mortem Blood:**

9-Hydroxyrisperidone is a major active metabolite of risperidone, an antipsychotic agent. Risperidone and 9-hydroxyrisperidone are approximately equi-effective, therefore, the clinical effects result from the combined concentrations of risperidone and 9-hydroxyrisperidone. The rate of metabolism to 9-hydroxyrisperidone is subject to genetic predisposition, meaning that extensive metabolizers (approximately 92% of the population) convert risperidone rapidly to 9-hydroxyrisperidone, while poor metabolizers convert at a much slower rate. The pharmacokinetics of the sum of risperidone plus 9-hydroxyrisperidone is similar for both extensive and poor metabolizers with an overall mean elimination half-life of approximately 24 hours (see reference comment for Risperidone and 9-Hydroxyrisperidone - Total).

4. Alpha-Hydroxyalprazolam (Alprazolam Metabolite) - Post Mortem Blood:

Alpha-Hydroxyalprazolam is an active metabolite of alprazolam. It has approximately 66% of the potency of the parent drug. It is typically present at concentrations less than 10% of the parent.

5. Alprazolam (Xanax®) - Post Mortem Blood:

Alprazolam is a DEA Schedule IV second-generation benzodiazepine, which is effective at very low doses. It shares the actions of other benzodiazepines in the management of anxiety disorders and short-term relief of anxiety associated with depressive symptoms. Alpha-hydroxyalprazolam is an active metabolite of alprazolam. Common CNS-depressant side effects of alprazolam include drowsiness and fatigue. For anxiety, daily doses of 0.8 to 4 mg are effective whereas for phobic and panic disorders, 6 to 9 mg daily is recommended.

Reported therapeutic plasma concentrations of alprazolam are proportional to dose given: 3 mg/day produced steady-state levels of 30 ng/mL; 6 mg/day, 60 ng/mL; and 9 mg/day, 100 ng/mL.

In reported cases involving driving under the influence, alprazolam concentrations ranged from 8 - 640 ng/mL. Alcohol greatly enhances the activity of benzodiazepines.

Reported blood concentrations of alprazolam in alprazolam-related fatalities ranged from 100 - 400 ng/mL (mean, 200 ng/mL). In combination with other central nervous system depressants such as ethyl alcohol, alprazolam can become toxic at low concentrations.

6. Amphetamine (Methamphetamine Metabolite) - Post Mortem Blood:

Amphetamine (Adderall, Dexedrine) is a Schedule II phenethylamine CNS-stimulant. It is used therapeutically in the treatment of narcolepsy and obesity and also in the treatment of hyperactivity in children. Amphetamine has a high potential for abuse. When used in therapy, initial doses should be small and increased gradually. In the treatment of narcolepsy, amphetamine is administered in daily divided doses of 5 to 60 mg. For obesity and children with attention deficits, usual dosage is 5 or 10 mg daily.

Following a single oral dose of 10 mg amphetamine sulfate, a reported peak blood concentration of 40 ng/mL was reached at 2 hr. Following a single 30 mg dose to adults, an average peak plasma level of 100 ng/mL was reported at 2.5 hr. A steady-state blood level of 2000 - 3000 ng/mL was reported in an addict who consumed approximately 1000 mg daily.

Overdose with amphetamine can produce restlessness, hyperthermia, convulsions, hallucinations, respiratory and/or cardiac failure. Reported blood concentrations in amphetamine-related fatalities ranged from 500 - 41000 ng/mL (mean, 9000 ng/mL). Amphetamine is also a metabolite of methamphetamine, benzphetamine and selegiline.

7. Benzoylcegonine (Cocaine Degradation Product) - Post Mortem Blood:

Benzoylcegonine is an inactive metabolite and chemical breakdown product of cocaine. Cocaine is a DEA Schedule II controlled central nervous stimulant drug. Effects following cocaine use can include euphoria, excitement, restlessness, risk taking, sleep disturbance, and aggression. A period of mental and physical fatigue and somnolence follow the use of cocaine after the excitant-stimulant effects wear off.

Benzoylcegonine has a half-life of 6 to 10 hours. The average blood benzoylcegonine concentration in 906 impaired drivers was 1260 ng/mL (range 5 - 17600 ng/mL). Benzoylcegonine blood concentrations in patients admitted to an emergency room for cocaine related medical complaints were 1280 ng/mL (SD = 1290 ng/mL). Benzoylcegonine concentrations in plasma following oral administration of 2 g/day of cocaine over 6 days, averaged 4900 ng/mL. The average blood benzoylcegonine concentration in 37 cocaine related fatalities was 7900 ng/mL (range 700 - 31000 ng/mL).

**Reference Comments:****8. Bupropion (Wellbutrin®) - Post Mortem Blood:**

Bupropion is a drug that is marketed for oral use as an antidepressant (Wellbutrin®) and as a smoking deterrent (Zyban®). As an antidepressant, it is chemically different than other antidepressant compounds; it is structurally similar to the sympathomimetic compound diethylpropion. For use as an antidepressant, the common adult dosage of bupropion is up to 300 mg daily, given in 3 divided doses (via immediate-release tablets) or once daily (by using extended-release tablets). For use as an aid to stop smoking, the recommended dosage is 300 mg per day, given as 150 mg twice daily (sustained-release tablets).

Maximum antidepressant response was observed at trough plasma concentrations of 50 - 100 ng/mL bupropion with virtually no response below 25 ng/mL. Juvenile patients taking once daily, extended release bupropion for two weeks had the following peak plasma levels:

100 mg/day (n = 11), 25 +/- 8 ng/mL bupropion

200 mg/day (n = 8), 53 +/- 22 ng/mL bupropion

Bupropion is extensively metabolized to several products (e.g., hydroxybupropion, and erythroamino and threoamino metabolites). Although all metabolites have less pharmacological activity than the parent drug, they have longer elimination half-lives than bupropion and generally exceed the plasma concentration of the parent compound.

Adverse effects of bupropion overdose may include nausea and vomiting, agitation, dizziness, seizures, sleep disturbances, tachycardia, lethargy, confusion, tremors and death. In five fatalities from overdose of bupropion, postmortem blood concentrations have been reported to range from 4000 - 13,000 ng/mL (mean, 7300 ng/mL). The ratio of whole blood concentration to serum or plasma concentration is unknown for this analyte.

9. Carbamazepine (Tegretol®) - Post Mortem Blood:

Carbamazepine is a tricyclic anticonvulsant agent. It is also prescribed for the treatment of pain associated with trigeminal neuralgia. It is extensively metabolized to the active carbamazepine-10,11-epoxide as well as other metabolites. Dosage should be adjusted to meet individual requirements. Total dosage should generally not exceed 1.2 g daily.

Following a chronic oral dose of 5-20 mg/Kg (mean, 12 mg/Kg), reported plasma concentrations averaged 5.4 mcg/mL (range, 1.4 to 12 mcg/mL) for carbamazepine and 1.1 mcg/mL (range, 0.2 - 2.0 mcg/mL) for the epoxide.

Signs and symptoms associated with acute carbamazepine overdose include dizziness, stupor, disorientation, hypo- or hypertension and coma. In a series of non-fatal overdoses, peak plasma concentrations of the parent compound ranged from 12 - 77 mcg/mL whereas the levels of the epoxide ranged from 4 - 34 mcg/mL. In an individual who died after ingesting 50 g of carbamazepine, a plasma level of 120 mcg/mL was reported; cardiorespiratory arrest occurred about 14 hr after hospital admission at which point the carbamazepine plasma concentration was 90 mcg/mL.

10. Clonazepam (Klonopin®) - Post Mortem Blood:

Clonazepam is a DEA Schedule IV benzodiazepine-derivative anticonvulsant agent. It is used in both the prophylaxis and treatment of various seizure disorders. The dosage of clonazepam should be carefully and slowly adjusted to meet the needs and requirements of the individual. Initial adult dose, however, should not exceed 1.5 mg daily. Adult maintenance dosage should generally not exceed 20 mg daily.

Usual therapeutic serum levels of clonazepam range from 10 to 60 ng/mL. Values in excess of 100 ng/mL have been associated with adverse effects including drowsiness and ataxia. 7-Aminoclonazepam is the major metabolite of the drug; it achieves plasma concentrations equivalent to those of clonazepam, but is a poor anticonvulsant.

Overdosage with clonazepam can produce somnolence, confusion, ataxia and coma. However, as with most benzodiazepines, death due solely to clonazepam is generally not seen.

**Reference Comments:**

11. Cocaine - Post Mortem Blood:

Cocaine is a DEA Schedule II controlled central nervous stimulant drug. Effects following cocaine use can include euphoria, excitement, restlessness, risk taking, sleep disturbance, and aggression. A period of mental and physical fatigue and somnolence follow the use of cocaine after the excitant-stimulant effects wear off. Cocaine is metabolized to the inactive compounds benzoylecgonine, ecgonine methyl ester, and ecgonine. Benzoylecgonine and ecgonine methyl ester can form from cocaine breakdown after death and even after sample collection. The average blood cocaine concentration in 906 impaired drivers was 87 ng/mL (range 5 - 2390 ng/mL). Blood cocaine concentrations in patients admitted to an emergency room for cocaine related medical complaints were 260 ng/mL (SD = 500 ng/mL). Cocaine concentrations in plasma following oral administration of 2 g/day over 6 days, averaged 1260 ng/mL. The average blood cocaine concentration in 37 cocaine related fatalities was 4600 ng/mL (range 40 - 31000 ng/mL). (See also Benzoylecgonine).

12. Ephedrine - Post Mortem Blood:

Ephedrine is a naturally occurring, active stimulant of the sympathetic nervous system that may cause bronchodilation, vasoconstriction and increased cardiac activity. The drug has mild central nervous system stimulant effects. It is found in a number of Ephedra plant species. Ephedrine is used therapeutically as a nasal decongestant and bronchodilator. A number of food supplements containing Ephedra alkaloids (that provide between 8 and 24 mg per dose) are sold as stimulants and aids for weight loss.

Ephedrine is metabolized by the liver primarily to phenylpropanolamine (norephedrine). From 70 - 80% of an oral dose is eliminated in the 48 hour urine as the parent compound, with about 4% being present as phenylpropanolamine.

Peak plasma concentrations 1 hour after taking a single 24 mg oral dose were reported to be 100 ng/mL; during chronic total daily 45 mg oral use in 3 equal doses, a plasma concentration of 95 ng/mL was measured at 4 hr, and 65 ng/mL at 6 hr after an additional 15 mg dose. Fatalities with ephedrine have been reported with blood concentrations that range from 3500 - 21000 ng/mL.

13. Ethylene Glycol - Post Mortem Blood:

Ethylene Glycol is a nonvolatile liquid used as an antifreeze, coolant, preservative and glycerin substitute. It also has intoxicating properties similar to ethanol and has therefore been abused for this purpose. The metabolites of ethylene glycol, including oxalate, are toxic and can elicit CNS, cardiopulmonary and renal dysfunction as well as severe metabolic acidosis. Ethylene glycol has not been detected in the blood of normal, unexposed individuals.

Following ingestion, toxicity of ethylene glycol is manifested in three stages depending on the dose administered. Initially, CNS depression is noted with signs including intoxication, coma, convulsions and possibly death. Also during this 1 to 12 hours post-ingestion period, metabolic acidosis and gastrointestinal disturbances can be noted. The second stage (12 to 24 hours post-ingestion) is often characterized by cardiopulmonary disturbances including tachycardia, tachypnea and hypertension. In severe ingestions, congestive heart failure and circulatory collapse may be seen. The end stage of ethylene glycol toxicity is renal failure (24 to 72 hours post-ingestion).

Reported post-mortem blood concentrations of ethylene glycol in fatal overdoses range from 30 - 430 mg/dL; post-mortem blood concentrations are dose and time-dependent.

14. Fentanyl (Sublimaze®) - Post Mortem Blood:

Fentanyl is a DEA Schedule II synthetic morphine substitute anesthetic/analgesic. It is reported to be 80 to 200 times as potent as morphine and has a rapid onset of action as well as addictive properties.

It is reported that patients lost consciousness at mean plasma levels of fentanyl of 34 ng/mL when infused with 75 mcg/Kg over a 15 min period; peak plasma levels averaged 50 ng/mL.

After application of a fentanyl transdermal preparation (patch), serum fentanyl concentrations are reported to be in the following ranges within 24 hours:

25 mcg/hour patch: 0.3 - 1.2 ng/mL
50 mcg/hour patch: 0.6 - 1.8 ng/mL
75 mcg/hour patch: 1.1 - 2.6 ng/mL
100 mcg/hour patch: 1.9 - 3.8 ng/mL

**Reference Comments:**

Following removal of the patch, serum fentanyl concentrations are reported to decrease with a mean elimination half-life of 17 hours (range, 13 to 22 hours).

The mean peak plasma serum fentanyl concentration in adults given an 800 mcg oral transmucosal fentanyl preparation over 15 minutes is reported at 2.1 ng/mL (range, 1.4 - 3.0 ng/mL) at approximately 0.4 hours.

Signs associated with fentanyl toxicity include severe respiratory depression, seizures, hypotension, coma and death. In fatalities from fentanyl, blood concentrations are variable and have been reported as low as 3 ng/mL.

15. Hydroxybupropion (Bupropion Metabolite) - Post Mortem Blood:

Bupropion is a drug that is marketed for oral use as an antidepressant (Wellbutrin®) and as a smoking deterrent (Zyban®). Bupropion is extensively metabolized to several products (e.g., hydroxybupropion, and erythroamino and threoamino metabolites). Although all metabolites have less pharmacological activity than the parent drug, they have longer elimination half-lives than bupropion and generally exceed the plasma concentration of the parent compound.

Juvenile patients taking once daily, extended release bupropion for two weeks had the following peak plasma levels:

100 mg/day (n = 11), 450 +/- 210 ng/mL hydroxybupropion

200 mg/day (n = 8), 710 +/- 350 ng/mL hydroxybupropion

A delayed death due to overdose with bupropion had serum concentrations of 446 ng/mL bupropion and 3212 ng/mL hydroxybupropion at 20 hours post ingestion.

The ratio of whole blood concentration to Serum or plasma concentration is unknown for this analyte.

16. Lamotrigine (Lamictal®) - Post Mortem Blood:

Lamotrigine is a synthetic anticonvulsant phenytriazine compound. It is used in the management of seizures. Initial therapeutic doses start at 50 mg per day, with daily maintenance dosages usually between 300 and 500 mg, but the dose can range as high as 700 mg. If valproate is co-administered, lower doses of the lamotrigine are recommended.

Steady-state plasma levels from patients on 100 to 600 mg per day ranged between 0.5 - 4.5 mcg/mL.

Adverse effects of lamotrigine include dizziness, blurred vision, somnolence, headache, ataxia, nausea, vomiting, and depression. Individuals have survived a significant overdose of lamotrigine, even with blood concentrations at and around 50 mcg/mL. Deaths have also been reported, however, at such high concentrations.

17. Lorazepam (Ativan®) - Post Mortem Blood:

Lorazepam is a DEA Schedule IV benzodiazepine used in the treatment of anxiety and for short-term relief of anxiety associated with depressive symptoms. It shares the actions and adverse reactions of other CNS-depressants. This compound does have abuse potential and should be used cautiously with other CNS-depressants.

Lorazepam can be administered by oral, IV and IM routes; daily divided oral doses of up to 10 mg are generally prescribed for anxiety. Following a single oral dose of 2 mg, lorazepam concentrations in plasma averaged 20 ng/mL, declining to 10 ng/mL by 12 hour. Chronic oral administration of 10 mg dose resulted in an average steady-state plasma lorazepam level of 200 ng/mL (range, 140 - 240 ng/mL). In blood, the maximum therapeutic effect with lorazepam is reported to within the range of 30 - 50 ng/mL.

Fatalities with lorazepam are relatively rare and generally have postmortem blood concentrations exceeding 300 ng/mL; however, such concentrations are not necessarily fatal.

18. Methamphetamine - Post Mortem Blood:

d-Methamphetamine is a DEA schedule II stimulant drug capable of causing hallucinations, aggressive behavior and irrational reactions. Chemically, there are two forms (isomers) of methamphetamine: l- and d-methamphetamine. The l-isomer is used in non-prescription inhalers as a decongestant and has weak CNS-stimulatory activity. The d-isomer has been used therapeutically as an anorexigenic agent in the treatment of obesity and has potent CNS-, cardiac- and circulatory-stimulatory activity. Amphetamine and norephedrine (phenylpropanolamine) are metabolites of methamphetamine. d-Methamphetamine is an abused substance because of its stimulatory effects and is also addictive.

**Reference Comments:**

A peak blood concentration of methamphetamine of 20 ng/mL was reported at 2.5 hr after an oral dosage of 12.5 mg. Blood levels of 200 - 600 ng/mL have been reported in methamphetamine abusers who exhibited violent and irrational behavior. High doses of methamphetamine can also elicit restlessness, confusion, hallucinations, circulatory collapse and convulsions.

*In this case, the level of methamphetamine determined has not been differentiated according to its isomeric forms. Differentiation of the isomers of methamphetamine is available upon request.

19. Morphine - Free - Post Mortem Blood:

Morphine is a DEA Schedule II narcotic analgesic. In analgesic therapy, it is usually encountered as the parent compound, however, it is also commonly found as the metabolite of codeine and heroin. In illicit preparations from which morphine may arise, codeine may be present as a contaminant. A large portion of the morphine is bound to the blood proteins or is conjugated; that which is not bound or conjugated is termed 'free morphine'. Hydromorphone is a reported metabolite of morphine.

In general, free morphine is the active biologic agent. Morphine has diverse effects that may include analgesia, drowsiness, nausea and respiratory depression. 6-monoacetylmorphine (6-MAM) is the 6-monoacetylated form of morphine, which is pharmacologically active. It is commonly found as the result of heroin use.

Peak serum concentrations occur within 10 to 20 minutes of a 10 mg/70 kg intramuscular dose, with an average concentration of 60 ng/mL 30 minutes following administration. IV administration of the same dose resulted in an average concentration of 80 ng/mL after 30 minutes. Chronic pain patients receiving an average of 90 mg (range 20 - 1460) daily oral morphine had average serum concentrations of 73 ng/mL (range 13 - 710) morphine. In 15 cases where cause of death was attributed to opiate toxicity (heroin, morphine or both), free morphine concentrations were 0 - 3700 ng/mL (mean = 420 +/- 940). In comparison, in cases where COD was unrelated to opiates (n=20) free morphine was 0 - 850 ng/mL (mean = 90 +/- 200). The ratio of whole blood concentration to serum or plasma concentration is approximately one.

20. Olanzapine (Zyprexa®) - Post Mortem Blood:

Olanzapine is a drug used in the treatment of psychotic disorders (schizophrenia and bipolar mania). It is administered orally (5 to 20 mg daily) or by intramuscular injection (2.5 to 10 mg) for the relief of symptoms. Plasma concentrations required for effective treatment of psychotic episodes have not been established, however trough plasma concentrations in patients receiving 10, 15 or 20 mg of olanzapine daily chronically were reported to average 9.3, 19 and 26 ng/mL respectively.

The following side effects have been reported following use of this compound; disturbances of body temperature, cardiovascular complications, altered mental status and tardive dyskinesia (uncontrolled movements of extremities). In 3 reported fatalities involving acute overdoses of the drug, postmortem blood concentrations ranged from 1000 - 4900 ng/mL.

21. Oxycodone - Free (OxyContin®; Roxicodone®) - Post Mortem Blood:

Oxycodone is a DEA Schedule II controlled semi-synthetic narcotic analgesic. It is used to control pain associated with such ailments as bursitis, injuries, simple fractures and neuralgia. The addiction liability of oxycodone is about the same as for morphine. This compound should be administered in the smallest effective dose and as infrequently as possible. The usual adult dose of the hydrochloride salt is 5 mg every 6 hr.

Following the oral administration of oxycodone as both sustained-release (Oxycontin®) and regular formulations, peak plasma concentrations of the compound are generally less than 100 ng/mL; however, the sustained-release preparation may also result in peak concentrations of oxycodone less than 10 ng/mL serum. Oxymorphone is a pharmacologically active metabolite of oxycodone that may be seen in blood in very low concentrations.

In overdose, oxycodone can produce stupor, coma, muscle flaccidity, severe respiratory depression, hypotension and cardiac arrest. In two oxycodone-related suicides, blood concentrations of 4300 and 14000 ng/mL were reported. However, sustained-release preparations appear to produce adverse reactions, up to and including death, at concentrations of oxycodone well less than 1000 ng/mL, especially in combination with other central nervous system depressants, depending on use pattern and route of administration.

**Reference Comments:****22. Oxymorphone - Free (Numorphan®; Opana®; Oxycodone Metabolite) - Post Mortem Blood:**

Oxymorphone is a semisynthetic opioid analgesic. It is indicated for use in the relief of moderate to severe pain and as a preanesthetic medication. The compound may be administered by injection or by mouth. Oral preparations are available as immediate-release tablets (5 or 10 mg) and as extended-release tablets (5 to 40 mg). Oxymorphone is also a pharmacologically active metabolite of oxycodone.

The mean oral bioavailability of oxymorphone is approximately 10%. The compound is extensively metabolized by reduction to 6-oxymorphol and conjugation to oxymorphone glucuronide and oxymorphone sulfate. Approximately 50% of an oral dose of oxymorphone is eliminated in the urine over 5 days primarily as conjugated oxymorphone and smaller amounts of free oxymorphone and free and conjugated 6-oxymorphol. The mean elimination half-life of oxymorphone is approximately 7.5 to 9.5 hours.

Thirty minutes following a single 5, 10, or 20 mg immediate-release tablet, mean peak plasma concentrations were 1.1, 1.9 and 4.4 ng/mL, respectively. Twenty mg extended-release tablets given every 12 hours for 3 days resulted in a mean peak plasma concentration of 2.5 ng/mL within 3.5 hours following the last dose. Doubling the dose to 40 mg increased the mean peak plasma concentration to 4.5 ng/mL.

Adverse effects of oxymorphone are typical of the opioid group of compounds.

23. Phencyclidine (Angel Dust; PCP; Sherm) - Post Mortem Blood:

Phencyclidine (PCP) is a DEA Schedule II controlled dangerous hallucinogenic drug. There exists a dearth of pharmacokinetic data of PCP usage in humans; however, it has been reported that blood levels of phencyclidine ranged from 7 - 240 ng/mL (mean, 75 ng/mL) in individuals stopped for driving under the influence of drugs or for being intoxicated in public.

Ataxia, agitation, combativeness, seizures, spasticity, coma and respiratory depression are associated with phencyclidine concentrations ranging from 90 - 220 ng/mL plasma.

The physiological effects of PCP can be classified as low or high dose. In low doses, PCP can elicit visual disturbances, drowsiness, agitation, hallucinations, aggressiveness, increased pulse rate and blood pressure, bronchospasm, increased respiratory rate and hyperthermia. In high doses, PCP can elicit convulsions, opisthotonos, coma, arrhythmias, decreased blood pressure and respirations and rhabdomyolysis.

There appears to be no relation between plasma levels of phencyclidine and degree of intoxication. Even so, death has been reported following the use of only 120 mg of phencyclidine. Blood concentrations in phencyclidine-related fatalities have been reported to range from 300 - 25000 ng/mL (mean, 5000 ng/mL).

24. Phenobarbital (Luminal®) - Post Mortem Blood:

Phenobarbital is a DEA Schedule IV barbiturate derivative with a long duration of action. It is primarily used as therapy in the control of seizures due to its CNS-depressant activity. It may be encountered as a parent compound or as the metabolite of primidone. At excessively high levels, drowsiness, slurring of speech, ataxia, respiratory depression and coma may be manifested. The recommended therapeutic range for effective anticonvulsant therapy is 10 - 30 mcg/mL.

Reported blood levels of phenobarbital in fatalities associated with use of this compound range from 64 - 116 mcg/mL.

Concomitant use of phenobarbital with other CNS-depressant agents, e.g., ethyl alcohol, would produce at least additive CNS-depressant effects.

25. Phenytoin (Dilantin®) - Post Mortem Blood:

Phenytoin is an anticonvulsant agent due to its CNS-depressant effects. Phenytoin is used alone or adjvantly with other more potent anticonvulsants in a regimen to control epilepsy. The drug is generally given in oral daily doses of 300 to 400 mg; it may, however, also be given by the IV or IM route for acute seizure problems.

Following administration of a single 100 mg oral dose, peak serum concentrations of phenytoin of 2 to 3 mcg/mL were reported 2 to 4 hrs after administration. During chronic phenytoin treatment with 300 to 400 mg

**Reference Comments:**

phenytoin daily, plasma concentrations averaged 8 - 18 mcg/mL. The range for desirable therapeutic results with phenytoin is 10 to 20 mcg/mL.

In a reported fatality due to phenytoin a blood level of 45 mcg/mL was reported 80 hrs after an acute overdose; the antemortem level was 94 mcg/mL twenty-four hrs after ingestion.

The concomitant use of phenytoin with other CNS-depressant agents, e.g., ethyl alcohol, would produce at least additive CNS-depressant effects.

26. Pseudoephedrine - Post Mortem Blood:

Pseudoephedrine is a sympathomimetic decongestant used to treat respiratory symptoms of allergies and the common cold. It is commonly found in both prescription and non-prescription cold/allergy remedies either alone or in combination with antihistamines, antitussives, expectorants, and/or analgesics. The usual oral adult dosage of pseudoephedrine in immediate-release preparations is 60 mg every 4 to 6 hours; the usual oral dosage for extended-release preparations is either 120 mg every 12 hours or 240 mg once daily.

Pseudoephedrine is metabolized to a small extent in the liver by N-demethylation to form cathine (norpseudoephedrine). About 90% of a dose is excreted in the urine within 36 hours. Between 55 - 75% of a dose is excreted as unchanged drug, the remainder as metabolites with less than 1% excreted as norpseudoephedrine. The elimination in urine is pH-dependent, increasing with acidification and decreasing with alkalinization (tubular reabsorption occurs at pH > 7.0). Due primarily to the pH-dependent differences in excretion, the elimination half-life of pseudoephedrine may vary from 3 to 16 hours.

Following a 60 mg oral dose, a mean peak plasma level of 200 ng/mL at 3 hours was reported; after a 180 mg oral dose, the mean peak plasma level was 800 ng/mL. A postmortem blood concentration of 19000 ng/mL was reported in a fatal case. Pseudoephedrine may exhibit postmortem redistribution; the mean heart/femoral ratio reported is 1.5 (range, 0.9 - 2.2).

27. Quetiapine (Seroquel®) - Post Mortem Blood:

Quetiapine is an antipsychotic compound approved by the FDA for the management of the manifestations of psychotic disorders, including schizophrenia. It is a structural analogue of clozapine that addresses the positive and negative symptoms of schizophrenia, but does so with few of the traditional side effects of conventional or other atypical antipsychotic medications.

Steady-state peak (1.0 to 1.5 hours) plasma levels following a TID daily regimen:

225 mg/day - 286 ng/mL

450 mg/day - 598 ng/mL

750 mg/day - 828 ng/mL

The plasma half-life is approximately 6 hours.

After an apparent quetiapine overdose, a postmortem blood concentration of 170000 ng/mL was reported. In a case of suicide with quetiapine and 4 other drugs, postmortem cardiac blood contained 49000 ng/mL of quetiapine.

28. Risperidone (Risperdal®) - Post Mortem Blood:

Risperidone is an atypically-structured antipsychotic agent. The initial recommended dosage in adults is 1 mg twice daily.

Risperidone is metabolized in the liver to 9-hydroxyrisperidone, a major active metabolite. Risperidone and 9-hydroxyrisperidone are approximately equally active. Consequently, the clinical effect of the drug results from the combined concentrations of risperidone plus 9-hydroxyrisperidone. The rate of metabolism to 9-hydroxyrisperidone is subject to genetic predisposition, meaning that extensive metabolizers (approximately 92% of the population) convert risperidone rapidly to 9-hydroxyrisperidone, while poor metabolizers convert at a much slower rate. The pharmacokinetics of the sum of risperidone plus 9-hydroxyrisperidone is similar for both extensive and poor metabolizers with an overall mean elimination half-life of approximately 24 hours.



TESTING: BETALIMS

Workorder 13000165
Chain 123456
Patient ID EXAMPLE REPORT

Page 11 of 16

Reference Comments:

Risperidone and 9-hydroxyrisperidone are approximately equally effective, therefore, the sum of the concentrations is pertinent.

Mean steady-state plasma levels for the total active moiety following daily regimens:

- 2 mg/day - 14 ng/mL (Risperidone + Metabolite)
- 6 mg/day - 45 ng/mL (Risperidone + Metabolite)
- 10 mg/day - 73 ng/mL (Risperidone + Metabolite)
- 16 mg/day - 110 ng/mL (Risperidone + Metabolite)

29. Risperidone and 9-Hydroxyrisperidone - Total (Total Active Moiety) - Post Mortem Blood:

Mean steady-state plasma levels for the total active moiety (Risperidone + Metabolite) following daily regimens:

- 2 mg/day - 14 ng/mL
- 6 mg/day - 45 ng/mL
- 10 mg/day - 73 ng/mL
- 16 mg/day - 110 ng/mL

30. Temazepam (Normison®; Restoril®) - Post Mortem Blood:

Temazepam is a benzodiazepine hypnotic agent used in the short-term relief of insomnia. Its major metabolite, oxazepam, is also a pharmacologically active depressant. Temazepam is also a metabolite of diazepam (Valium®). The usual adult dosage of temazepam is 30 mg, however, 15 mg may be adequate.

Following a single 30 mg oral dose of temazepam, reported peak plasma concentrations averaged 900 ng/mL (range, 500 - 1100 ng/mL).

In overdose, temazepam shares the same clinically observed signs and symptoms as other benzodiazepines, e.g., sedation, lethargy, loss of consciousness and respiratory depression. In two fatalities from temazepam, blood concentrations of 4000 and 9000 ng/mL were reported.

Alcohol greatly enhances the activity of benzodiazepines.

31. Ziprasidone (Geodon®; Zeldox®) - Post Mortem Blood:

Ziprasidone is a relatively new antipsychotic drug that is chemically related to risperidone. The drug is indicated for the treatment of schizophrenia at oral dosages between 20 and 80 mg twice daily. The drug is metabolized to a number of pharmacologically inactive products and the parent compound and metabolites are eliminated primarily in the feces. The elimination half-life of ziprasidone is reported to be between 4 to 8 hours. The pharmacokinetics of the drug do not appear to be altered significantly by age, gender, hepatic dysfunction or renal disease.

In clinical trials, the following mean plasma concentrations (+/- SD) were reported in non-fasting subjects at steady-state:

- 14.8 +/- 6.7 ng/mL (10 mg/day),
- 44.6 +/- 48 ng/mL (40 mg/day),
- 118 +/- 80 ng/mL (80 mg/day),
- 139 +/- 81 ng/mL (120 mg/day).

Steady-state concentrations occurred 1 to 3 days following initialization of dosing.

Adverse reactions to ziprasidone may include headache, sedation and postural hypotension.

Workorder 13000165 was electronically signed on 01/25/2013 15:58 by:

Diane Ellmore, Example Signature
Forensic Review

Analysis Summary and Reporting Limits:

Acode 0512B - Barbiturates Screen, Blood - Post Mortem Blood



Analysis Summary and Reporting Limits:

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Barbiturates | 0.040 mcg/mL | | |

Acode 0606B - Cocaine and Metabolites Screen, Blood - Post Mortem Blood

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------------|-------------------|-----------------|-------------------|
| Cocaine / Metabolites | 20 ng/mL | | |

Acode 0970B - Carbamazepine and Metabolite, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography (HPLC) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|------------------------------|-------------------|
| Carbamazepine | 0.20 mcg/mL | Carbamazepine-10, 11 Epoxide | 0.20 mcg/mL |

Acode 2062B - Ethylene Glycol, Blood - Post Mortem Blood

-Analysis by Gas Chromatography (GC) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Ethylene Glycol | 5.0 mg/dL | | |

Acode 2484B - Lamotrigine, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography (HPLC) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Lamotrigine | 0.20 mcg/mL | | |

Acode 2535B - Lorazepam, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Lorazepam | 5.0 ng/mL | | |

Acode 3226B - Olanzapine, Blood - Post Mortem Blood

-Analysis by Gas Chromatography (GC) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Olanzapine | 3.0 ng/mL | | |

Acode 3236B - Opiates Screen, Blood - Post Mortem Blood

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Opiates | 20 ng/mL | | |

Acode 3532B - Phencyclidine Screen, Blood - Post Mortem Blood



TESTING: BETALIMS

Workorder 13000165
Chain 123456
Patient ID EXAMPLE REPORT

Page 13 of 16

Analysis Summary and Reporting Limits:

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Phencyclidine | 10 ng/mL | | |

Acode 4051B - Quetiapine, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Quetiapine | 20 ng/mL | | |

Acode 4105B - Risperidone and Metabolite, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|----------------------|-------------------|--|-------------------|
| 9-Hydroxyrisperidone | 1.0 ng/mL | Risperidone and 9-Hydroxyrisperidone - Total | N/A |
| Risperidone | 1.0 ng/mL | | |

Acode 4860B - Ziprasidone, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Ziprasidone | 2.0 ng/mL | | |

Acode 5430B - Temazepam and Metabolite Confirmation, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Oxazepam | 20 ng/mL | Temazepam | 20 ng/mL |

Acode 5466B - Bupropion and Metabolite Confirmation, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|------------------|-------------------|
| Bupropion | 10 ng/mL | Hydroxybupropion | 100 ng/mL |

Acode 5488B - Clonazepam and Metabolite Confirmation, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|--------------------|-------------------|-----------------|-------------------|
| 7-Amino Clonazepam | 2.0 ng/mL | Clonazepam | 2.0 ng/mL |

Acode 5569B - Pseudoephedrine vs Ephedrine Differentiation Confirmation, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Ephedrine | 5.0 ng/mL | Pseudoephedrine | 5.0 ng/mL |

Acode 5637B - Cocaine and Metabolites Confirmation, Blood - Post Mortem Blood



Analysis Summary and Reporting Limits:

-Analysis by Gas Chromatography/Mass Spectrometry (GC/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Benzoylcegonine | 50 ng/mL | Cocaine | 20 ng/mL |
| Cocaethylene | 20 ng/mL | | |

Acode 5640B - Fentanyl and Metabolite Confirmation, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Fentanyl | 0.10 ng/mL | Norfentanyl | 0.20 ng/mL |

Acode 5645B - Opiates - Free (Unconjugated) Confirmation, Blood - Post Mortem Blood

-Analysis by Gas Chromatography/Mass Spectrometry (GC/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|------------------------------------|-------------------|----------------------|-------------------|
| 6-Monoacetylmorphine - Free | 10 ng/mL | Hydromorphone - Free | 10 ng/mL |
| Codeine - Free | 10 ng/mL | Morphine - Free | 10 ng/mL |
| Dihydrocodeine / Hydrocodol - Free | 10 ng/mL | Oxycodone - Free | 10 ng/mL |
| Hydrocodone - Free | 10 ng/mL | Oxymorphone - Free | 10 ng/mL |

Acode 5651B - Barbiturates Confirmation, Blood - Post Mortem Blood

-Analysis by Gas Chromatography/Mass Spectrometry (GC/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Amobarbital | 0.20 mcg/mL | Pentobarbital | 0.20 mcg/mL |
| Butobarbital | 0.20 mcg/mL | Phenobarbital | 0.20 mcg/mL |
| Butalbital | 0.20 mcg/mL | Secobarbital | 0.20 mcg/mL |

Acode 5657B - Phencyclidine Confirmation, Blood - Post Mortem Blood

-Analysis by Gas Chromatography/Mass Spectrometry (GC/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Phencyclidine | 5.0 ng/mL | | |

Acode 5660B - Alprazolam and Metabolite Confirmation, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-------------------------|-------------------|-----------------|-------------------|
| Alpha-Hydroxyalprazolam | 5.0 ng/mL | Alprazolam | 5.0 ng/mL |

Acode 5673B - Phenytoin Confirmation, Blood - Post Mortem Blood

-Analysis by Gas Chromatography/Mass Spectrometry (GC/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Phenytoin | 0.50 mcg/mL | | |

Acode 5687B - Methamphetamine and Metabolite Confirmation, Blood - Post Mortem Blood



Analysis Summary and Reporting Limits:

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Amphetamine | 5.0 ng/mL | Methamphetamine | 5.0 ng/mL |

Acode 9106B - Alprazolam and Metabolite Screen, Blood - Post Mortem Blood

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Benzodiazepines | 100 ng/mL | | |

Acode 9122B - Bupropion and Metabolite Screen, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|------------------|-------------------|
| Bupropion | 10 ng/mL | Hydroxybupropion | 100 ng/mL |

Acode 9139B - Clonazepam and Metabolite Screen, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|--------------------|-------------------|-----------------|-------------------|
| 7-Amino Clonazepam | 2.0 ng/mL | Clonazepam | 2.0 ng/mL |

Acode 9176B - Fentanyl and Metabolite Screen, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Fentanyl | 0.10 ng/mL | Norfentanyl | 0.20 ng/mL |

Acode 9239B - Phenytoin Screen, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography (HPLC) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Phenytoin | 0.50 mcg/mL | | |

Acode 9249B - Pseudoephedrine vs Ephedrine Differentiation Screen, Blood - Post Mortem Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Ephedrine | 5.0 ng/mL | Pseudoephedrine | 5.0 ng/mL |

Acode 9399B - Temazepam and Metabolite Screen, Blood - Post Mortem Blood

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Benzodiazepines | 100 ng/mL | | |

Acode 9522B - Methamphetamine and Amphetamine Screen, Blood - Post Mortem Blood



TESTING: BETALIMS

Workorder 13000165
Chain 123456
Patient ID EXAMPLE REPORT

Page 16 of 16

Analysis Summary and Reporting Limits:

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

| <u>Compound</u> | <u>Rpt. Limit</u> | <u>Compound</u> | <u>Rpt. Limit</u> |
|-----------------|-------------------|-----------------|-------------------|
| Amphetamines | 20 ng/mL | | |



3701 Welsh Road
Willow Grove PA, 19090

Selection Finder

Effective Date: 1/29/2013

| Compound Description | 8092TI PM Expert | 2693TI Metals | 8092B PM Expert |
|--------------------------------------|---------------------|------------------|--------------------|
| 10-Hydroxycarbazepine | X | | X |
| 11-Hydroxy Delta-9 THC | X | | X |
| 4-Bromo-2,5-Dimethoxyphenethylamine | X | | X |
| 4-Hydroxy-Tamoxifen | | | X |
| 5-Methoxy-N,N-Diisopropyltryptamine | X | | X |
| 6-Monoacetylmorphine - Free | | | X |
| 7-Amino Clonazepam | X | | X |
| 7-Amino Flunitrazepam | X | | X |
| Acepromazine | X | | X |
| Acetaminophen | X | | X |
| Acetohexamide | X | | X |
| Acetone | X | | X |
| Alfentanil | X | | X |
| Allobarbitol | X | | X |
| Alpha-Hydroxyalprazolam | X | | X |
| Alphaprodine | X | | X |
| Alphenal | X | | X |
| Alprazolam | X | | X |
| Amantadine | X | | X |
| Amitriptyline | X | | X |
| Amlodipine | X | | X |
| Amobarbital | X | | X |
| Amoxapine | X | | X |
| Amphetamine | X | | X |
| Antimony | | X | |
| Antipyrine | X | | X |
| Aprobarbital | X | | X |
| Arsenic | | X | |
| Atomoxetine | X | | X |
| Atropine | X | | X |
| Azatadine | X | | X |
| BDB | X | | X |
| Barbital | X | | X |
| Barium | | X | |
| Benzocaine | X | | X |
| Benzodiazepines | X | | X |
| Benzoic Acid, 4 Amino-, Methyl Ester | X | | X |
| Benzoyllecgonine | X | | X |
| Benzphetamine | X | | X |
| Benztropine | X | | X |
| Beta-Phenethylamine | X | | X |
| Biperiden | X | | X |
| Bismuth | | X | |
| Blood Alcohol Concentration (BAC) | | | X |
| Bromocriptine | X | | X |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

| Compound Description | 8092T1 | 2693T1 | 8092B | | |
|-------------------------------|-----------|--------|-----------|--|--|
| | PM Expert | Metals | PM Expert | | |
| Bromodiphenhydramine | X | | X | | |
| Brompheniramine | X | | X | | |
| Bupivacaine | X | | X | | |
| Buprenorphine - Free | X | | X | | |
| Buprenorphine / Metabolite | X | | X | | |
| Bupropion | X | | X | | |
| Bupropion Metabolite | X | | X | | |
| Buspirone | X | | X | | |
| Butabarbital | X | | X | | |
| Butalbital | X | | X | | |
| Butorphanol | X | | X | | |
| Butorphanol - Free | X | | X | | |
| Caffeine | X | | X | | |
| Cannabinoids | X | | X | | |
| Carbamazepine | X | | X | | |
| Carbamazepine-10, 11 Epoxide | X | | X | | |
| Carbinoxamine | X | | X | | |
| Carbromal | X | | X | | |
| Carisoprodol | X | | X | | |
| Cathine / Phenylpropanolamine | X | | X | | |
| Cathinone | X | | X | | |
| Cetirizine | X | | X | | |
| Chlorcyclizine | X | | X | | |
| Chlordiazepoxide | X | | X | | |
| Chlormezanone | X | | X | | |
| Chlorophene | X | | X | | |
| Chlorpheniramine | X | | X | | |
| Chlorphentermine | X | | X | | |
| Chlorpromazine | X | | X | | |
| Chlorpropamide | X | | X | | |
| Chlorzoxazone | X | | X | | |
| Cinnamoylcocaine | X | | X | | |
| Cinnarizine | X | | X | | |
| Cis-Thiothixene | X | | X | | |
| Citalopram / Escitalopram | X | | X | | |
| Clemastine | X | | X | | |
| Clobazam | X | | X | | |
| Clomipramine | X | | X | | |
| Clonazepam | X | | X | | |
| Clotrimazole | X | | X | | |
| Clozapine | X | | X | | |
| Cocaethylene | X | | X | | |
| Cocaine | X | | X | | |
| Cocaine / Metabolites | X | | X | | |
| Codeine - Free | | | X | | |
| Codeine - Total | X | | | | |
| Coniine | X | | X | | |
| Cotinine | X | | X | | |
| Cyclizine | X | | X | | |
| Cyclobenzaprine | X | | X | | |
| Cyproheptadine | X | | X | | |
| Delta-9 Carboxy THC | X | | X | | |
| Delta-9 THC | X | | X | | |
| Desalkylflurazepam | X | | X | | |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

| Compound Description | 8092TI PM Expert | 2693TI Metals | 8092B PM Expert | | |
|-------------------------------------|---------------------|------------------|--------------------|--|--|
| Descarboethoxylopratadine | X | | X | | |
| Desipramine | X | | X | | |
| Desmethylcitalopram | X | | X | | |
| Desmethylclomipramine | X | | X | | |
| Desmethyldoxepin | X | | X | | |
| Desmethylnianserin | X | | X | | |
| Desmethylnirtazapine | X | | X | | |
| Desmethylsertraline | X | | X | | |
| Desmethylterbinafine | X | | X | | |
| Desmethyltrimipramine | X | | X | | |
| Dextro / Levo Methorphan | X | | X | | |
| Dextrorphan / Levorphanol | X | | X | | |
| Diazepam | X | | X | | |
| Dicyclomine | X | | X | | |
| Diethylpropion | X | | X | | |
| Dihydrocodeine / Hydrocodol - Free | | | X | | |
| Dihydrocodeine / Hydrocodol - Total | X | | | | |
| Diltiazem | X | | X | | |
| Dimethyltryptamine | X | | X | | |
| Diphenhydramine | X | | X | | |
| Diphenoxylate | X | | X | | |
| Disopyramide | X | | X | | |
| Donepezil | X | | X | | |
| Dothiepin | X | | X | | |
| Doxapram | X | | X | | |
| Doxepin | X | | X | | |
| Doxylamine | X | | X | | |
| Duloxetine | X | | X | | |
| Duloxetine Artifact | X | | X | | |
| EDDP | X | | X | | |
| EMDP | X | | X | | |
| Endoxifen | | | X | | |
| Ephedrine | X | | X | | |
| Ephedrine / Pseudoephedrine | X | | X | | |
| Estazolam | X | | X | | |
| Eszopiclone / Zopiclone | X | | X | | |
| Eszopiclone / Zopiclone Breakdown | X | | X | | |
| Ethanol | X | | X | | |
| Ethinamate | X | | X | | |
| Ethosuximide | X | | X | | |
| Ethotoin | X | | X | | |
| Ethylecgonine | X | | X | | |
| Ethylmorphine | X | | X | | |
| Etodolac (Methyl Artifact) | X | | X | | |
| Etodolac Breakdown | X | | X | | |
| Etomidate | X | | X | | |
| Felodipine | X | | X | | |
| Fenfluramine | X | | X | | |
| Fenpropfen (Methyl Artifact) | X | | X | | |
| Fentanyl | X | | X | | |
| Flecainide | X | | X | | |
| Fluconazole | X | | X | | |
| Flunitrazepam | X | | X | | |
| Fluoxetine | X | | X | | |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

| Compound Description | 8092TI | 2693TI | 8092B | | |
|------------------------------|-----------|--------|-----------|--|--|
| | PM Expert | Metals | PM Expert | | |
| Fluphenazine | X | | X | | |
| Fluphenazine Overdose | X | | X | | |
| Flurazepam | X | | X | | |
| Fluvoxamine | X | | X | | |
| Gabapentin | X | | X | | |
| Galantamine | X | | X | | |
| Gemfibrozil | X | | X | | |
| Glutethimide | X | | X | | |
| Guaifenesin | X | | X | | |
| Haloperidol | X | | X | | |
| Hexobarbital | X | | X | | |
| Hydrastine | X | | X | | |
| Hydrocodone - Free | | | X | | |
| Hydrocodone - Total | X | | | | |
| Hydromorphone - Free | X | | X | | |
| Hydromorphone - Total | X | | | | |
| Hydroxybupropion | X | | X | | |
| Hydroxychloroquine | X | | X | | |
| Hydroxycotinine | X | | X | | |
| Hydroxyethylflurazepam | X | | X | | |
| Hydroxytriazolam | X | | X | | |
| Hydroxyzine | X | | X | | |
| Ibuprofen | X | | X | | |
| Imipramine | X | | X | | |
| Isopropanol | X | | X | | |
| Ketamine | X | | X | | |
| LSD | X | | X | | |
| Lamotrigine | X | | X | | |
| Laudanosine | X | | X | | |
| Lead | | X | | | |
| Leucocrystal Violet | X | | X | | |
| Leucocrystal Violet Artifact | X | | X | | |
| Levamisole | X | | X | | |
| Levetiracetam | X | | X | | |
| Lidocaine | X | | X | | |
| Loratadine | X | | X | | |
| Lorazepam | X | | X | | |
| Lorcainide | X | | X | | |
| Loxapine | X | | X | | |
| MBDB | X | | X | | |
| MDA | X | | X | | |
| MDEA | X | | X | | |
| MDMA | X | | X | | |
| Maprotiline | X | | X | | |
| Mazindol | X | | X | | |
| Meclizine | X | | X | | |
| Mefloquine | X | | X | | |
| Memantine | X | | X | | |
| Meperidine | X | | X | | |
| Mephentermine | X | | X | | |
| Mephénytoin | X | | X | | |
| Mephobarbital | X | | X | | |
| Mepivacaine | X | | X | | |
| Meprobamate | X | | X | | |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

| Compound Description | 8092TI PM Expert | 2693TI Metals | 8092B PM Expert | | |
|---------------------------------|---------------------|------------------|--------------------|--|--|
| Mercury | | X | | | |
| Mescaline | X | | X | | |
| Mesoridazine | X | | X | | |
| Metaxalone | X | | X | | |
| Methadone | X | | X | | |
| Methamphetamine | X | | X | | |
| Methanol | X | | X | | |
| Methapyrilene | X | | X | | |
| Methaqualone | X | | X | | |
| Metharbital | X | | X | | |
| Methcathinone | X | | X | | |
| Methdilazine | X | | X | | |
| Methocarbamol | X | | X | | |
| Methohexital | X | | X | | |
| Methorphan | X | | X | | |
| Methotrimeprazine | X | | X | | |
| Methsuximide | X | | X | | |
| Methylecgonine | X | | X | | |
| Methylephedrine | X | | X | | |
| Methylphenidate | X | | X | | |
| Methylprimidone | X | | X | | |
| Methylpropylsuccinimide | X | | X | | |
| Methyprylon | X | | X | | |
| Metoclopramide | X | | X | | |
| Metoprolol | X | | X | | |
| Mexiletine | X | | X | | |
| Mianserin | X | | X | | |
| Midazolam | X | | X | | |
| Mirtazapine | X | | X | | |
| Molindone | X | | X | | |
| Monoethylglycinexylidide (MEGX) | X | | X | | |
| Morphine - Free | X | | X | | |
| Morphine - Total | X | | | | |
| N-Acetylprocainamide | X | | X | | |
| N-Benzylpiperazine | X | | X | | |
| N-Desmethylselegiline | X | | X | | |
| N-Ethylamphetamine | X | | X | | |
| N-desmethyltamoxifen | | | X | | |
| Naibuphine - Free | X | | X | | |
| Naloxone - Free | X | | X | | |
| Naltrexone | X | | X | | |
| Naltrexone - Free | X | | X | | |
| Naproxen | X | | X | | |
| Naproxen (Methyl Artifact) | X | | X | | |
| Nevirapine | X | | X | | |
| Nicardipine | X | | X | | |
| Nicotine | X | | X | | |
| Nifedipine | X | | X | | |
| Norbuprenorphine - Free | X | | X | | |
| Norclozapine | X | | X | | |
| Norcodeine | X | | X | | |
| Norcyclobenzaprine | X | | X | | |
| Nordiazepam | X | | X | | |
| Norfenfluramine | X | | X | | |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

| Compound Description | 8092TI | 2693TI | 8092B | | |
|------------------------------|-----------|--------|-----------|--|--|
| | PM Expert | Metals | PM Expert | | |
| Norfentanyl | X | | X | | |
| Norflunitrazepam | X | | X | | |
| Norfluoxetine | X | | X | | |
| Norhydroxyzine | X | | X | | |
| Norketamine | X | | X | | |
| Normeperidine | X | | X | | |
| Normephenytoin | X | | X | | |
| Normethsuximide | X | | X | | |
| Noroxycodone | X | | X | | |
| Norpropoxyphene | X | | X | | |
| Norpropoxypheneamide | X | | X | | |
| Norpseudoephedrine | X | | X | | |
| Nortriptyline | X | | X | | |
| O-Desmethyltramadol | X | | X | | |
| O-Desmethylvenlafaxine | X | | X | | |
| Olanzapine | X | | X | | |
| Opiates | X | | X | | |
| Orphenadrine | X | | X | | |
| Other Findings | X | | X | | |
| Oxazepam | X | | X | | |
| Oxcarbazepine | X | | X | | |
| Oxcarbazepine Breakdown | X | | X | | |
| Oxybutynin | X | | X | | |
| Oxycodone - Free | | | X | | |
| Oxycodone - Total | X | | | | |
| Oxymetazoline | X | | X | | |
| Oxymorphone - Free | | | X | | |
| Oxymorphone - Total | X | | | | |
| Oxyphenbutazone | X | | X | | |
| Papaverine | X | | X | | |
| Para-Methoxy-Amphetamine | X | | X | | |
| Paroxetine | X | | X | | |
| Pentazocine | X | | X | | |
| Pentobarbital | X | | X | | |
| Pentoxifylline | X | | X | | |
| Pentoxifylline Artifact | X | | X | | |
| Pergolide | X | | X | | |
| Phenacetin | X | | X | | |
| Phencyclidine | X | | X | | |
| Phendimetrazine | X | | X | | |
| Pheniramine | X | | X | | |
| Phenmetrazine | X | | X | | |
| Phenobarbital | X | | X | | |
| Phensuximide | X | | X | | |
| Phentermine | X | | X | | |
| Phenylbutazone | X | | X | | |
| Phenylethylmalonamide (PEMA) | X | | X | | |
| Phenylpropanolamine | X | | X | | |
| Phenyltoloxamine | X | | X | | |
| Phenytoin | X | | X | | |
| Prazepam | X | | X | | |
| Primidone | X | | X | | |
| Procainamide | X | | X | | |
| Procaine | X | | X | | |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

| Compound Description | 8092TI PM Expert | 2693TI Metals | 8092B PM Expert | | |
|----------------------|---------------------|------------------|--------------------|--|--|
| Prochlorperazine | X | | X | | |
| Procyclidine | X | | X | | |
| Promazine | X | | X | | |
| Promethazine | X | | X | | |
| Propafenone | X | | X | | |
| Propiomazine | X | | X | | |
| Propofol | X | | X | | |
| Propoxyphene | X | | X | | |
| Protriptyline | X | | X | | |
| Pseudoephedrine | X | | X | | |
| Pyrilamine | X | | X | | |
| Pyrimethamine | X | | X | | |
| Quetiapine | X | | X | | |
| Quinidine | X | | X | | |
| Quinine | X | | X | | |
| Ramelteon | X | | X | | |
| Reboxetine | X | | X | | |
| Ritalinic Acid | X | | X | | |
| Ropinirole | X | | X | | |
| Ropivacaine | X | | X | | |
| Salicylate | X | | X | | |
| Salicylates | X | | X | | |
| Scopolamine | X | | X | | |
| Secobarbital | X | | X | | |
| Selegiline | X | | X | | |
| Selenium | | X | | | |
| Sertraline | X | | X | | |
| Strychnine | X | | X | | |
| Sufentanil | X | | X | | |
| TFMPP | X | | X | | |
| Talbutal | X | | X | | |
| Tamoxifen | X | | X | | |
| Temazepam | X | | X | | |
| Terbinafine | X | | X | | |
| Tetracaine | X | | X | | |
| Tetrahydrozoline | X | | X | | |
| Thallium | | X | | | |
| Thenylidamine | X | | X | | |
| Theobromine | X | | X | | |
| Theophylline | X | | X | | |
| Thiamylal | X | | X | | |
| Thiopental | X | | X | | |
| Thioridazine | X | | X | | |
| Thiothixene | X | | X | | |
| Ticlopidine | X | | X | | |
| Tiletamine | X | | X | | |
| Timolol | X | | X | | |
| Tocainide | X | | X | | |
| Topiramate | | | X | | |
| Tramadol | X | | X | | |
| Tramadol Metabolite | X | | X | | |
| Tranylcypromine | X | | X | | |
| Trazodone | X | | X | | |
| Trazodone Metabolite | X | | X | | |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

| Compound Description | 8092TI PM Expert | 2693TI Metals | 8092B PM Expert | | |
|------------------------|---------------------|------------------|--------------------|--|--|
| Triazolam | X | | X | | |
| Trifluoperazine | X | | X | | |
| Tyflupromazine | X | | X | | |
| Trihexyphenidyl | X | | X | | |
| Trimeprazine | X | | X | | |
| Trimethobenzamide | X | | X | | |
| Trimethoprim | X | | X | | |
| Trimipramine | X | | X | | |
| Tripelennamine | X | | X | | |
| Tripolidine | X | | X | | |
| Venlafaxine | X | | X | | |
| Venlafaxine Metabolite | X | | X | | |
| Verapamil | X | | X | | |
| Warfarin | X | | X | | |
| Xylazine | X | | X | | |
| Yohimbine | X | | X | | |
| Zaleplon | X | | X | | |
| Zolazepam | X | | X | | |
| Zolpidem | X | | X | | |
| Zonisamide | X | | X | | |
| Zotepine | X | | X | | |

For informational purposes only. Analytes are subject to change at any time.

© 2010 NMS Labs. All Rights Reserved.

**ECONOMIC DISCLOSURE STATEMENT
AND EXECUTION DOCUMENT
INDEX**

| Section | Description | Pages |
|----------------|---|--------------|
| Instructions | Instructions for Completion of EDS | EDS i - ii |
| 1 | MBE/WBE Utilization Plan | EDS 1 |
| 2 | Letter of Intent | EDS 2 |
| 3 | Petition for Reduction/Waiver of MBE/WBE Participation Goals | EDS 3 |
| 4 | Certifications | EDS 4, 5 |
| 5 | Economic and Other Disclosures, Affidavit of Child Support Obligations and Disclosure of Ownership Interest | EDS 6 – 12 |
| 6 | Sole Proprietor Signature Page | EDS 13a/b/c |
| 7 | Partnership Signature Page | EDS 14/a/b/c |
| 8 | Limited Liability Corporation Signature Page | EDS 15a/b/c |
| 9 | Corporation Signature Page | EDS 16a/b/c |
| 10 | Cook County Signature Page | EDS 17 |

**INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

This Economic Disclosure Statement and Execution Document ("EDS") is to be completed and executed by every Bidder on a County contract, every party responding to a Request for Proposals or Request for Qualifications ("Proposer"), and others as required by the Chief Procurement Officer. If the Undersigned is awarded a contract pursuant to the procurement process for which this EDS was submitted (the "Contract"), this Economic Disclosure Statement and Execution Document shall stand as the Undersigned's execution of the Contract.

Definitions. Capitalized terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, or other documents, as applicable.

"Affiliated Entity" means a person or entity that, directly or indirectly: controls the Bidder, is controlled by the Bidder, or is, with the Bidder, under common control of another person or entity. Indicia of control include, without limitation, interlocking management or ownership; identity of interests among family members; shared facilities and equipment; common use of employees; and organization of a business entity following the ineligibility of a business entity to do business with the County under the standards set forth in the Certifications included in this EDS, using substantially the same management, ownership or principals as the ineligible entity.

"Bidder," "Proposer," "Undersigned," or "Applicant," is the person or entity executing this EDS. Upon award and execution of a Contract by the County, the Bidder, Proposer, Undersigned or Applicant, as the case may be, shall become the Contractor or Contracting Party.

"Proposal," for purposes of this EDS, is the Undersigned's complete response to an RFP/RFQ, or if no RFQ/RFP was issued by the County, the "Proposal" is such other proposal, quote or offer submitted by the Undersigned, and in any event a "Proposal" includes this EDS .

"Code" means the Code of Ordinances, Cook County, Illinois available through the Cook County Clerk's Office website (<http://www.cookctyclerk.com/sub/ordinances.asp>). This page can also be accessed by going to www.cookctyclerk.com, clicking on the tab labeled "County Board Proceedings," and then clicking on the link to "Cook County Ordinances."

"Contractor" or "Contracting Party" means the Bidder, Proposer or Applicant with whom the County has entered into a Contract.

"EDS" means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

"Lobby" or "lobbying" means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

"Lobbyist" means any person or entity who lobbies.

"Prohibited Acts" means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

Sections 1 through 3: MBE/WBE Documentation. Sections 1 and 2 must be completed in order to satisfy the requirements of the County's MBE/WBE Ordinance, as set forth in the Contract Documents, if applicable. If the Undersigned believes a waiver is appropriate and necessary, Section 3, the Petition for Waiver of MBE/WBE Participation must be completed.

Section 4: Certifications. Section 4 sets forth certifications that are required for contracting parties under the Code. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

Section 5: Economic and Other Disclosures Statement. Section 5 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Undersigned to the warranties, representations, agreements and acknowledgements contained therein.

**INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

Sections 6, 7, 8, 9: Execution Forms. The Bidder executes this EDS, and the Contract, by completing and signing three copies of the appropriate Signature Page. Section 6 is the form for a sole proprietor; Section 7 is the form for a partnership or joint venture; Section 8 is the form for a Limited Liability Corporation, and Section 9 is the form for a corporation. Proper execution requires **THREE ORIGINALS**; therefore, the appropriate Signature Page must be filled in, three copies made, and all three copies must be properly signed, notarized and submitted. The forms may be printed and completed by typing or hand writing the information required.

Required Updates. The information provided in this EDS will be kept current. In the event of any change in any information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Undersigned will supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is requested.

Additional Information. The County's Governmental Ethics and Campaign Financing Ordinances, impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit our web-site at www.cookcountygov.com and go to the Ethics Department link. The Bidder must comply fully with the applicable ordinances.

MBE/WBE UTILIZATION PLAN (SECTION 1)

BIDDER/PROPOSER HEREBY STATES that all MBE/WBE firms included in this Plan are certified MBEs/WBEs by at least one of the entities listed in the General Conditions.

I. BIDDER/PROPOSER MBE/WBE STATUS: (check the appropriate line)

- Bidder/Proposer is a certified MBE or WBE firm. (If so, attach copy of appropriate Letter of Certification)
- Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified MBEs or WBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available from the Office of Contract Compliance)
- Bidder/Proposer is not a certified MBE or WBE firm, nor a Joint Venture with MBE/WBE partners, but will utilize MBE and WBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II and III).

II. Direct Participation of MBE/WBE Firms Indirect Participation of MBE/WBE Firms

Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

MBEs/WBEs that will perform as subcontractors/suppliers/consultants include the following:

MBE/WBE Firm: Maximum Business Solutions inc

Address: 2158 45th st. Highland, IN 46322

E-mail: RBrown@maxbss.com

Contact Person: Robert Brown Phone: 219-933-1809

Dollar Amount Participation: \$ \$40,000 per the two (2) year contract period

Percent Amount of Participation: 11.8 % of contract %

*Letter of Intent attached? Yes No

*Letter of Certification attached? Yes No

MBE/WBE Firm: _____

Address: _____

E-mail: _____

Contact Person: _____ Phone: _____

Dollar Amount Participation: \$ _____

Percent Amount of Participation: _____ %

*Letter of Intent attached? Yes _____ No _____

*Letter of Certification attached? Yes _____ No _____

Attach additional sheets as needed.

***Additionally, all Letters of Intent, Letters of Certification and documentation of Good Faith Efforts omitted from this bid/proposal must be submitted to the Office of Contract Compliance so as to assure receipt by the Contract Compliance Administrator not later than three (3) business days after the Bid Opening date.**

COOK COUNTY GOVERNMENT LETTER OF INTENT (SECTION 4)

MWBE Firm: Maximum Business Solutions Inc Certifying Agency: CMSDC
Address: 2158 45th St. Certification Expiration Date: 10/2013
City/State: Highland, IL 46322 FEIN #: 37-1470805
Phone: 219-933-1809 Fax: 219-931-7007 Contact Person: Robert Brown
Email: RBrown@maxbss.com Contract #: 219-933-1809

Participation: Direct Indirect

Will the MWBE firm be subcontracting any of the performance of this contract to another firm?

No Yes - Please attach explanation.

Proposed Subcontractor: There will be multiple Trade Suppliers that produce products for the Proj

The undersigned MWBE is prepared to provide the following Commodities/Services for the above named Project/ Contract:

Commercial Printing, Business Forms, Promotional Products
Office Supplies & Apparel.

Indicate the Dollar Amount, or Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$20,000 Dollars Annual spend. with 30 days net Terms

(If more space is needed to fully describe MWBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement conditioned upon the Bidder/Proposer's receipt of a signed contract from the County of Cook. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Robert Brown
Signature (MWBE)
ROBERT BROWN
Print Name
Maximum Business Solutions
Firm Name
1/29/13
Date

[Signature]
Signature (Prime Bidder/Proposer)
ANDREW C. NOLAN
Print Name
NATIONAL MEDICAL SERVICES, INC.
Firm Name
3-5-13
Date

Subscribed and sworn before me

this 29 day of January, 2013.

Notary Public Justine Jones

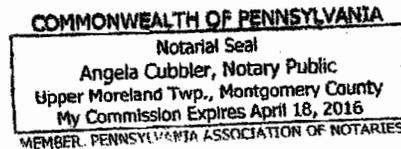
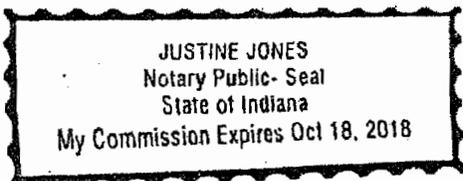
SEAL

Subscribed and sworn before me

this 5th day of March, 2013.

Notary Public Angela Cubbler

SEAL





CHICAGO MINORITY SUPPLIER DEVELOPMENT COUNCIL

THIS CERTIFIES THAT

MAXIMUM BUSINESS SOLUTIONS, INC.

Has met the requirements for certification as a bona fide Minority Business Enterprise as defined by the National Minority Supplier Development Council, Inc. (NMSDC) and as adopted by the Chicago Minority Supplier Development Council.

NAICS Codes: 453220, 453210, 448190, 323119

Description of their products/services as defined by the North American Industry Classification System (NAICS)

Product/Service Description: DISTRIBUTOR OF BUSINESS FORMS, PROMOTIONAL PRODUCTS, OFFICE SUPPLIES, CASINO PRODUCTS/UNIFORMS AND COMMERCIAL PRINTING

10/31/2012

Issued Date

10/31/2013

Expiration Date

CH1304

Certificate Number

Sharon C. Deil Morgan
President, ChicagoMSDC

By using your assigned (through NMSDC only) password, NMSDC Corporate Members may view the original certificate by logging in at: <http://www.nmsdc.org>



An affiliate of the National Minority Supplier Development Council, Inc. (NMSDC)

PETITION FOR WAIVER OF MBE/WBE PARTICIPATION (SECTION 3)

A. BIDDER/PROPOSER HEREBY REQUESTS:

- FULL MBE WAIVER FULL WBE WAIVER
 REDUCTION (PARTIAL MBE and/or WBE PARTICIPATION)

_____ % of Reduction for MBE Participation
_____ % of Reduction for WBE Participation

B. REASON FOR FULL/REDUCTION WAIVER REQUEST

Bidder/Proposer shall check each item applicable to its reason for a waiver request. Additionally, supporting documentation shall be submitted with this request. If such supporting documentation cannot be submitted with bid/proposal/quotation, such documentation shall be submitted directly to the Office of Contract Compliance no later than three (3) days from the date of submission date.

- (1) Lack of sufficient qualified MBEs and/or WBEs capable of providing the goods or services required by the contract. **(Please explain)**
- (2) The specifications and necessary requirements for performing the contract make it impossible or economically infeasible to divide the contract to enable the contractor to utilize MBEs and/or WBEs in accordance with the applicable participation. **(Please explain)**
- (3) Price(s) quoted by potential MBEs and/or WBEs are above competitive levels and increase cost of doing business and would make acceptance of such MBE and/or WBE bid economically impracticable, taking into consideration the percentage of total contract price represented by such MBE and/or WBE bid. **(Please explain)**
- (4) There are other relevant factors making it impossible or economically infeasible to utilize MBE and/or WBE firms. **(Please explain)**

C. GOOD FAITH EFFORTS TO OBTAIN MBE/WBE PARTICIPATION

- (1) Made timely written solicitation to identified MBEs and WBEs for utilization of goods and/or services; and provided MBEs and WBEs with a timely opportunity to review and obtain relevant specifications, terms and conditions of the proposal to enable MBEs and WBEs to prepare an informed response to solicitation. **(Please attach)**
- (2) Followed up initial solicitation of MBEs and WBEs to determine if firms are interested in doing business. **(Please attach)**
- (3) Advertised in a timely manner in one or more daily newspapers and/or trade publication for MBEs and WBEs for supply of goods and services. **(Please attach)**
- (4) Used the services and assistance of the Office of Contract Compliance staff. **(Please explain)**
- (5) Engaged MBEs & WBEs for indirect participation. **(Please explain)**

D. OTHER RELEVANT INFORMATION

Attach any other documentation relative to Good Faith Efforts in complying with MBE/WBE participation.

PETITION FOR WAIVER OF MBE/WBE PARTICIPATION (SECTION 3 EDS-3)

We would like to provide Cook County information related to National Medical Services efforts to support Minority Business Enterprises/Minority Business Enterprises/and Disadvantaged Business Enterprises (MBE/WBE/DBE). This communication is for the purpose of supplementing the bid response information that was submitted to Cook County from National Medical Services for Contract 12-52-223 Testing, Forensic Toxicological for Cook County Office of the Medical Examiner. This information is intended to exhibit to Cook County the continued good faith efforts that National Medical Services has executed to fulfill the MBE/WBE participation goals of Cook County, GC-17 Minority and Business Enterprises Cook County Ordinance Chapter 34, Division 6, Section 34-275 to Section 34-303.

Petition for Waiver of MBE/WBE Goals-

Supplemental information to petition for waiver of MBE/WBE participation goals (Section 3 EDS-3)

National Medical Services (NMS) received the Cook County Invitation to Bid on January 10, 2013 with a due date of bid opening date of 10:00 am February 1, 2013. This time frame makes it unfeasible to execute (2), (3) and (5) of the Good Faith Efforts (Part C section EDS-3) that are recommended requiring public solicitation and review of responses.

The reason for the waiver request is due to the nature of the work performed on this contract and the contract specifications that are outlined on pages S-1 through S-3 in the bid for toxicological services for Cook County. The products and supplies that are utilized by a laboratory cannot reasonably be sequestered or committed solely to the contract with Cook County as they are shared. An example of this is our laboratory information system that is used to track incoming samples, sample status, invoicing and information on NMS clients. It would be unfeasible to divide this type of products for the utilization of a single government contract as required in the Cook County Letter of Intent.

NMS has previously taken the following good faith steps toward compliance with Cook County's MBE/WBE goals.

- NMS has access to the directory of MBE/WBE businesses through use of the Cook County Procurement website for use in consideration of vendors. NMS has requested an updated directory from the Cook County Contract Compliance Office on 1/29/13 via email to maintain in-house within multiple departments for ease of access to MBE/WBE approved vendors.
- NMS has a Vendor Policy currently implemented, which includes a section on MBE/WBE/DBE. Please see attachment that outlines the MBE/WBE vendor consideration policy.
- NMS has surveyed our significant vendors in 2012 to determine their MBE/WBE/DBE status. All certified vendors were documented and requests for certificates were made. All MBE/WBE vendors that were identified but did not have certifications were documented and encouraged to apply for certification from appropriate agencies. There were no vendors identified during this survey that were certified by Cook County. Please see attached vendor application.

Additional information relevant to NMS current business practices include:

- National Medical Services EEOC Policy Summary Statement – Please see attached EEOC policy.
- National Medical Services Affirmative Action Plan
The complete Policies are available to Cook County upon request



- National Medical Services Company is a percentage owned women business. NMS is currently 12.35% women owned.

Good Faith Efforts to Obtain MBE/WBE Participation

The items listed below are supplemental Good Faith Efforts by National Medical Services to reach compliance with the MBE/WBE participation goals of Cook County. These items are in addition to the information submitted for our petition for waiver of MBE/WBE Participation (Section 3)

- NMS retains specialized legal counsel in employee law for consultation related to Vendor policy, including MBE/WBE participation
- Identified the mechanism to find and use the database www.dgs.state.pa.us. This database allows NMS to identify certified vendors in Pennsylvania by county and commodity code. The surrounding counties of Bucks, Montgomery County and Philadelphia were printed and will be included in NMS list of vendors. They will be considered for future service and supply needs, for products where NMS is dissatisfied with current vendors.
- NMS requested the complete list of certified Cook County MBE/WBE business from Cook County compliance office on 1/29/13 via email.
- NMS has a detailed policy improvement plan for MBE/WBE vendor usage that is submitted to executive management for review and implementation at NMS.
- NMS has extracted and compiled a list of approved Cook County Certified MBE/WBE's from the Cook County Procurement website. This select list of vendors has the potential to offer competitive services or supplies for future business. This list is attached and was utilized in a direct mailer sent out for future solicitations on 1/29/13. Please find the attachment for the MBE/WBE solicitation letter as well as the list of recipients, attachment MBE/WBE prospective vendor list 2013.

Section D - Other Relevant Information

- NMS is exhibiting an increase in utilization of certified MBE/WBE businesses from 2011 to 2012. Please see MBE/ WBE vendor list 2012 as attachment for complete breakdown of certified vendors and their annual expenses.
- NMS has spent \$ 212,162.75 with certified vendors in 2011 with a 170% increase in spending across this vendor demographic to \$375,103 in 2012. In addition to these expenditures, NMS has spent another \$361,434 in 2012 with non-certified MBE/WBE companies and expects to increase that in 2013. We expect that some of those vendors will pursue certification in 2013.
- NMS is nearly complete with finalizing a vendor relationship with Maximum Business Solutions, a Chicago based company that is a certified MBE for an expenditure of \$31,000 in 2013.
- Please find the attachment for Maximum Business Solutions certification and our letter for intent business in 2013 with them.

VENDER CONSIDERATIONS AND REQUIREMENTS

A. Responsibilities

The general responsibility for relationships with vendors, contractors and subcontractor with the Company resides with the Chief Financial Officer ("CFO"). These relationships include those established by government orders and regulations in the areas of equal employment opportunity and minority/women vendors.

B. Minority/Women Business Enterprise Procedures

1. Executive Order 11625 of 1971 states the national policy for fostering and encouraging minority business enterprises (MBE), and including women business enterprises (WBE). The Company's general policy is: "The Company will establish and conduct a program which will enable and encourage relationships with MBE and WBE suppliers of materials, equipment, goods, or services to the fullest extent consistent with the efficient operations of business."

2. Minority/Women Business Enterprise Definitions

A "minority/women business enterprise" is a business enterprise that is owned or controlled by a minority group member or members or women, respectively. A public corporation under this definition is at least fifty-one percent (51%) minority/women owned. A partnership under this definition is at least fifty percent (50%) minority/women owned.

3. Minority Group Definition

A minority member is defined as belonging to at least one of the following groups:

- | | | |
|-----------------------------------|---|---|
| Blacks | - | All persons having origins in any of the black racial groups |
| American Indians, Eskimos, Aleuts | - | All persons having origins in any of the original peoples of North America. |
| Hispanic | - | All persons of Mexican, Puerto Rican, Cuban, Central or South American origin. |
| Asian or Pacific | - | All persons having origins in any of the original peoples of the Far East, Southeast Asia, including the Indian Sub-Continent, or the Pacific Islands. This includes , for example, China, Japan, Korea, the Philippine Islands, and Samoa. |

4. General Procedures

The Company shall:

- a. Integrate MBE/WBE purchasing into the normal operating purchasing function. The Company gathers information pertaining to MBE/WBE status as part of the new vendor application process.
- b. Identify needs for materials, equipment, goods, and services that MBE/WBE businesses may be able to provide.
- c. Actively promote the procurement of materials, equipment, goods, and services from qualified MBE/WBE businesses consistent with the efficient operation of the business. Because of the specialized nature of the Company's operations, reasonable MBE/WBE vendor alternatives may not exist for certain products/services.
- d. Continually seek out qualified and qualifiable MBE/WBE businesses to respond to procurement needs.
- e. Provide adequate consideration of the potential of known MBE/WBE businesses in all "make or buy" decisions.
- f. Assure that known qualified MBE/WBE businesses have an equitable opportunity to compete for requirements.
- g. Promote qualified or qualifiable MBE/WBE subcontractors.
- h. Provide assistance, where appropriate, for a limited time, in such areas as: bid preparations, help in finding raw materials, relaxed deadlines, etc.
- i. Aid in arranging assistance from available public sources in financing and technical areas.
- j. Establish annual dollar goals for purchases from MBE/WBE vendors and establish objectives by which progress can be measured. The Company maintains a database of all vendors which includes MBE/WBE status if applicable.
- k. Maintain records showing (a) procedures which have been adopted to comply with the Company's policy including the establishment of a source list of MBE/WBE businesses, (b) awards to MBE/WBE businesses on the source list, (c) specific efforts to identify and purchase from MBE/WBE businesses, (d) opportunities offered to known MBE/WBE businesses.
- l. Select suppliers on the basis of a quality product, produced on a timely basis and at a fair price.
- m. Exchange information with other corporations' counterparts on MBE/WBE source identification.
- n. Submit periodic reports on purchases from MBE/WBE businesses.

5. Procedures for Purchases for Government Contracts

On December 15, 2011, the Company entered into a Federal Supply Schedule Contract that requires annual reporting on the achievement of subcontracting goals pertaining to SBE/MBE/WBE.

The Company, as well as the Company's suppliers, vendors or subcontractors, must comply with the following for purchases for government contracts:

- a. Contracts (commitments) in amounts exceeding \$5,000:
 - 1) Consistent with the efficient performance of purchase commitments, MBE/WBE businesses shall have an equitable opportunity to participate in the performance of purchase commitments.

- b. Contracts (commitments) in amounts exceeding \$500,000:

The purchase contract must contain provisions which shall conform substantially to the language as follows (Contractor is understood as interchangeable with Supplier, Vendor, or Subcontractor):

 - 1) Consistent with the efficient performance of purchase commitments, MBE/WBE businesses shall have an equitable opportunity to participate in the performance of purchase commitments.
 - 2) The Contractor agrees to establish and conduct a program which will enable MBE/WBE businesses to be considered fairly as subcontractors and suppliers under this contract. In this connection, the Contractor shall:
 - a) Designate a liaison officer who will administer the Contractor's MBE/WBE businesses program.
 - b) Provide adequate and timely consideration of the potential of known MBE/WBE businesses in all "make-or-buy" decisions.
 - c) Assure that known qualified MBE/WBE businesses have an equitable opportunity to compete for subcontracts.
 - d) Maintain records showing (1) procedures which have been adopted to comply with the policies set forth in this clause, including the establishment of a source list of MBE/WBE businesses, (2) awards to MBE/WBE businesses on the source list, and (3) specific efforts to identify and award contracts to MBE/WBE businesses.
 - e) Include the Utilization of MBE/WBE businesses clause in subcontracts which offer substantial MBE/WBE businesses subcontracting opportunities.
 - f) Submit periodic reports of subcontracting to known MBE/WBE businesses.

- g) The Contractor further agrees to insert, in any subcontract which may exceed \$500,000, provisions which shall conform substantially to the language of this clause, including this paragraph g).

6. Documentation

All records related to bids where MBE/WBE businesses were given the opportunity to participate will become a part of the purchase commitment file and will be retained in accordance with the Company's applicable records retention directive.

7. Methods

- a. Stimulation of MBE/WBE businesses participation should not be viewed as a charity or give-away of dollars or equipment, but as an investment of time and talent to stimulate the economic growth of the minority and women enterprises sector.

Minority and women-owned firms can most effectively be assisted in their development by stimulating greater participation in the competitive flow of commerce.

It must be recognized that, unlike most majority-owned businesses, most minority and women-owned firms have had little experience in dealing with corporate buyers and little opportunity to establish rapport, develop supplier/buyer relationships, and demonstrate their capabilities. Once identified, MBE/WBE vendors should be encouraged to develop these relationships.

In order not to disrupt valuable existing supplier relationships, the Company encourages a search for minority and women suppliers for new requirements or for purchasing volumes great enough that some portion may be diverted without adversely affecting present suppliers. Another area of interest is in sole-supply situations where a new MBE/WBE supplier might become an alternative source.

- b. Assistance is offered in locating and identifying MBE/WBE businesses through the following:

- 1) Regional Minority Purchasing Councils

Regional offices of the National Council have been established in major cities. Their goals are twofold:

- a) Identify minority and women-owned firms and assist them to qualify as suppliers of goods and services to corporations in the region.
- b) Promote policies that will encourage the corporations to participate in purchasing from such MBE/WBE firms.

The Regional Purchasing Councils are sponsoring the publication of MBE/WBE supplier directories, with in-depth profiles of local area firms. It is anticipated that these directories, when placed in the hands of those responsible for purchasing, will be a valuable resource in the selection of MBE/WBE suppliers.

The Regional Purchasing Council addresses and phone numbers may be obtained from the local Chamber of Commerce.

2) U.S. Department of Commerce, Office of Minority Business Enterprises (OMBE)

OMBE is responsible for coordinating the efforts of other government agencies in developing minority businesses and for stimulating the active participation and financial assistance of private industry. OMBE has representatives in a number of large cities.

3) Small Business Administration (SBA), MBE/WBE Section - (Federal Government Agency)

4) List of MBE/WBE certified vendors supplied by the contracting agency.

c. Advice on other potential sources of MBE/WBE information will be sought through the Company's CFO.



3701 Welsh Road
 Willow Grove, PA 19090
 215-657-4900
 Fax 215-366-1506

Vendor Application Form

Company Name _____
 Address _____
 City/State/Zip _____
 Phone _____ Fax _____
 CEO Name _____ CEO Title _____
 CEO E-mail _____ CEO Phone _____
 Social Security Number _____ Name of SSN Owner _____
 Federal Tax ID Number _____ D & B Number _____

----- COMPANY INFORMATION -----

Organization Type: Sole Owner Corporation S-Corp.
 State of Incorporation? _____ Nonprofit? Yes No
 Number of years in business _____
 Is your company owned by a parent company? Yes No
 Parent Company Name _____
 Parent Company Address _____
 Parent Company Tax ID _____
 Are you: Small Business? Minority-Owned Business? Veteran-Owned Business?
 Women-Owned Business? Veteran Disabled-Owned Business?
 Certifications: 8a Certified? Minority? Women-Owned? HUBZone?

*****Where applicable, include copies of Certifications when submitting this application*****

Does your company accept credit cards? Yes No
 Company's Web Site(s): _____
 Did your company have a name change in the past 12 months? Yes No
 Previous Name _____
 Company Contact _____ Quality Assurance Contact _____



3701 Welsh Road
Willow Grove, PA 19090
215-657-4900
Fax 215-366-1506

----- GENERAL INFORMATION -----

Number of Personnel: Manufacturing _____ Quality Assurance _____ Engineering _____
Are clean room facilities used for manufacturing product? _____ Yes _____ No
Do you have a current ISO Certification _____ Yes _____ No ISO Certificate Type _____
Registrar _____ Certificate Number _____
Expiration Date: ISO READY/Not Certified _____ Date of Certification _____
Registered or certified to any other Quality Management System or model?
_____ Mil-I-45208 _____ Mil-Q-9858 _____ Other

*****Where applicable, include copies of Certifications when submitting this application*****

----- QUALITY MANAGEMENT SYSTEM -----

Do you maintain operation policies and procedures for your quality management system? _____ Yes _____ No
Is an internal audit program maintained that reviews compliance with all aspects of the quality program? _____ Yes _____ No
Does the organizational structure define quality responsibility and authority? _____ Yes _____ No
Does the organizational structure provide access to top management? _____ Yes _____ No
Is the health and status of your quality management system periodically reviewed with management? _____ Yes _____ No
Do you have a documented employee training program? _____ Yes _____ No
Is the quality organization responsible for acceptance of product and services? _____ Yes _____ No
Are records of inspections and tests maintained? _____ Yes _____ No
Are quality data used in reporting results and trends to management? _____ Yes _____ No
Are quality records available to support customer certifications? _____ Yes _____ No

Name _____ Title _____ Date _____

EQUAL EMPLOYMENT OPPORTUNITY POLICY

41 C.F.R. Section 60-741.44(a); 60-250.5

The employment policy of NMS Labs is to provide equal opportunity to all persons. Our company, therefore, has made a commitment to equal employment opportunity through a positive and continuing Affirmative Action Program. No employee or applicant for employment will be discriminated against because of race, color, religion, sex, national origin, age, disability, veteran status or any other Federal or State legally-protected classes.

To implement these policies, NMS Labs will continue to:

- A. Recruit, hire, train and promote persons in all job classifications without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other Federal or State legally-protected classes. National Medical Services does not discriminate on the basis of national origin or citizenship status as provided under the Immigration Reform and Control Act of 1986;
- B. Base decisions on employment so as to further the principle of equal employment opportunity;
- C. Insure that promotion decisions are in accord with the principles of equal employment opportunity by imposing only valid requirements for promotional opportunities;
- D. Insure that all personnel actions (including but not limited to compensation, benefits, transfers, layoffs, return from layoffs, company-sponsored training, education, tuition assistance, social and recreational programs) are administered without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other Federal or State legally-protected classes.

William Hough, SR Human Resources Director, has been designated EEO Coordinator and is responsible for compliance with state and federal equal employment opportunity laws, and for implementing the affirmative action program, including equal employment practices, monitoring, and internal reporting. Employees believing they have not been treated in accord with this policy are encouraged to contact William Hough at 215.366.1217, during regular business hours.

The affirmative action plan is available for review in Human Resources during the business hours of 8:30 a.m. to 5:00 p.m. by appointment. To make an appointment, please contact William Hough at 215-366-1217 or via email william.hough@nmslabs.com.

The continued success of our Affirmative Action Program requires maximum cooperation from every employee throughout our organization. Equal employment opportunity is not only the law, but it is a principle of NMS Labs.

Approved by:



Eric F. Rieders, Ph.D. September 2012
President & CEO



Dear Supplier:

National Medical Services, Inc is actively looking to increase our vendor database to include Cook County Certified Minority & Women Business Enterprises.

We have selected your company as a possible supplier of goods or services from the Cook County Directory of Minority & Women Business Enterprises.

If you would like to be considered for future bids, please submit your business profile and a copy of your catalog or brochure to the below address.

National Medical Services, Inc.
Attn: Purchasing Compliance Services
3701 Welsh Road
Willow Grove, PA 19090

I would like to take this opportunity to thank you for your time and encourage your participation. If you have any questions, please feel free to contact me.

Thank you,

Donna Miller
Purchasing Manager

NMS LABS MBE/WBE VENDOR LIST 2013

Name: B2B Strategic Solutions
Phone: 312-368-1700
Fax: 866-213-8350
URL:
No. of Employees: 25
Race: African American or Black
Gender: Female

Contact Information

Name: Donna C. Bryant
Phone: 312-368-1700
Email: donna@b2bssi.com
Primary Address: 150 North Michigan, Ste. 2800, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|--|-------------|----------------------|-----------------|
| | | Consulting: Management Consulting, HIPAA & HITECH Consulting, Professional Development, Emergency Management, Technology: Staff Augmentation | | | |

Industries and Services Information

| Industry | Service Product |
|--|---|
| 924 EDUCATIONAL/TRAINING SERVICES | 92416 Course Development Services, Instructional/Training |
| 958 MANAGEMENT SERVICES | 95800 MANAGEMENT SERVICES |
| 962 MISCELLANEOUS SERVICES, NO. 2 (NOT OTHERWISE CLASSIFIED) | 96269 Personnel Services, Temporary |
| Consulting | Consulting |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Jane R. Bilger Community Strategies Consulting
Phone: 312.758.7318
Fax: n/a
URL:
No. of Employees: 1
Race: Caucasian
Gender: Female

Contact Information

Name: Jane R. Bilger
Phone: 312.758.7318
Email: jrbilger1000@gmail.com
Primary Address: 1000 West Washington Blvd., Suite 503, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 0 | Cook County | WBE | 05/02/2012 | 05/02/2015 | 05/02/2013 |

Product/Service Description: Consulting: Community Development, Finance, Government Administration and Organizational Management

Industries and Services Information

| Industry | Service Product |
|-------------------------|--|
| 918 CONSULTING SERVICES | 91883 Organizational Development Consulting |
| 918 CONSULTING SERVICES | 91832 Consulting Services (Not Otherwise Classified) |
| 918 CONSULTING SERVICES | 91863 Housing Consulting |
| 918 CONSULTING SERVICES | 91858 Governmental Consulting |
| 918 CONSULTING SERVICES | 91849 Finance/Economics Consulting |
| 918 CONSULTING SERVICES | 91827 Community Development Consulting |
| Consulting | Consulting |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: JLC & Associates
Phone: 312-450-1265
Fax:
URL:
No. of Employees: 0
Race: Hispanic American
Gender: Male

Contact Information

Name: Juan Calahorrano
Phone: 312-450-1265
EMail: juanfc@jlcconsultant.net
Primary Address: 2822 N Neva, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| | Cook County | MBE | Unknown | Unknown | Unknown |

Product/Service Description: Consulting: Business Development

Industries and Services Information

| Industry | Service Product |
|------------|-----------------|
| Consulting | Consulting |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Medical Business Associates, Inc.
Phone: 630 789 9000
Fax: 630-413-5993
URL:
No. of Employees:
Race: Hispanic American
Gender: Female

Contact Information

Name: Rebecca Saltiel Busch
Phone: 630 789 9000
EMail: bbusch@mbaaudit.com
Primary Address: 580 Oakmont Lane, Westmont, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 0 | Cook County | MBE/WBE | 06/18/2012 | 06/18/2015 | 06/18/2013 |

Product/Service Description: Consulting: Healthcare - Consulting, Auditing, Forensic and Training Services

Industries and Services Information

| Industry | Service Product |
|--|---|
| 946 FINANCIAL SERVICES | 94620 Auditing |
| 918 CONSULTING SERVICES | 91878 Medical Consulting |
| 918 CONSULTING SERVICES | 91838 Education and Training Consulting |
| 961 MISCELLANEOUS SERVICES, NO. 1 (NOT OTHERWISE CLASSIFIED) | 96140 Forensic Services |
| 952 HUMAN SERVICES | 95290 Training and Instruction (For Clients, Not Staff) |
| 952 HUMAN SERVICES | 95277 Research and Evaluation, Human Services (Including Productivity Audits) |
| 952 HUMAN SERVICES | 95259 Human Services (Not Otherwise Classified) |
| Consulting | Consulting |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Sandi Llano & Associates, Inc.
Phone: 847-364-7164
Fax: 847-593-2443
URL:
No. of Employees: 1
Race: Caucasian
Gender: Female

Contact Information

Name: Sandi Llano
Phone: 847-364-7164
EMail: sandi@sllano.com
Primary Address: 460 Eagle, Suite 202, Elk Grove Village, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 1 | Cook County | WBE | 07/14/2012 | 07/14/2014 | 07/14/2013 |

Product/Service Description: Consulting: Supplier Diversity Consultant

Industries and Services Information

| Industry | Service Product |
|-------------------------|--|
| 918 CONSULTING SERVICES | 91875 Management Consulting |
| 918 CONSULTING SERVICES | 91879 Minority and Small Business Consulting |
| 918 CONSULTING SERVICES | 91835 Disadvantage Business Enterprise (DBE) and Historically Underutilized Business (HUB) Consulting Including Technical Assistance |
| Consulting | Consulting |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: The Ware Group Incorporated
Phone: 312-213-2436
Fax: 773-539-0916
URL:
No. of Employees: 0
Race: African American or Black
Gender: Female

Contact Information

Name: Dyahanne are
Phone: 312-213-2436
EMail: dyahanne@thewaregroup.com
Primary Address: 3651 N. Mozart, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
|--------------------|--------------|------------------|-------------|----------------------|-----------------|

Product/Service Description: Business Consulting and Transactional Services

Industries and Services Information

| Industry | Service/Product |
|-------------------------|----------------------------------|
| 918 CONSULTING SERVICES | 91821 Business Consulting, Large |
| Consulting | Consulting |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: CS Insurance Strategies, Inc.
Phone: 312-566-9700
Fax: 312-566-0965
URL:
No. of Employees: 6
Race: African American or Black
Gender: Male

Contact Information

Name: Charles Smith
Phone: 312-566-9700
EMail: csmith@csstrategy.com
Primary Address:

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 0 | Cook County | MBE | 04/10/2012 | Unknown | 04/10/2013 |

Product/Service Description: Insurance Services

Industries and Services Information

| Industry | Service Product |
|--|---|
| 953 INSURANCE AND INSURANCE SERVICES, (ALL TYPES) | 95352 Insurance and Insurance Services (Not otherwise classified) |
| Insurance (Employee Benefits, Risk Management, etc.) | Insurance |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Gonzalez Saggio and Harlan, LLC
Phone: 312-236-0475
Fax: 312-236-1750
URL:
No. of Employees: 5
Race: African American or Black
Gender:

Contact Information

Name: Timothy W. Wright III
Phone: 312-236-0475
EMail: tim_wright@gshllc.com
Primary Address: 180 N. Stetson Avenue, Suite 4525, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
|--------------------|--------------|------------------|-------------|----------------------|-----------------|

Product/Service Description: Legal Services

Industries and Services Information

| Industry | Service Product |
|--|---------------------------------|
| 961 MISCELLANEOUS SERVICES, NO. 1 (NOT OTHERWISE CLASSIFIED) | 96149 Legal Services, Attorneys |
| Legal Services | Legal Services |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: RAB & Khan LLP
Phone: 312-612-7619
Fax: 312-575-9053
URL:
No. of Employees: 5
Race: Asian - Pacific American
Gender: Male

Contact Information

Name: Cyrus Rab
Phone: 312-612-7619
EMail: cyrus@rabkhan.com
Primary Address: 560 West Washington, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 0 | Cook County | MBE | 01/30/2012 | 01/30/2015 | 01/30/2013 |

Product/Service Description: Legal Services

Industries and Services Information

| Industry | Service/Product |
|----------------|-----------------|
| Legal Services | Legal Services |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Saulter Tarver LLP
Phone: 312-899-6519
Fax: 312-577-1710
URL:
No. of Employees: 3
Race:
Gender:

Contact Information

Name: Curtis J. Tarver II
Phone: 312-899-6519
EMail: ctarver@swtllp.com
Primary Address: 330 South Wells, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
|--------------------|--------------|------------------|-------------|----------------------|-----------------|

Product/Service Description: Legal Services

Industries and Services Information

| Industry | Service Product |
|----------------|-----------------|
| Legal Services | Legal Services |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Candleberrie Creative
Phone: 847-864-8032
Fax: 773-564-9736
URL:
No. of Employees: 0
Race: African American or Black
Gender:

Contact Information

Name: Rachel O. Williams
Phone: 847-864-8032
EMail: rwilliams@candleberrie.com
Primary Address: 2906 Central Street, Suite 258, Evanston, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 0 | Cook County | MBE/WBE | 10/23/2012 | 10/23/2014 | 10/23/2013 |

Product/Service Description: **MARKETING: COMMUNICATIONS STRATEGIES, PROGRAMS AND SERVICES**

Industries and Services Information

| Industry | Service Product |
|-----------------------|-----------------------|
| Marketing/Advertising | Marketing/Advertising |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Diametric Professional Group
Phone: 312-865-3317
Fax: 312-977-0878
URL:
No. of Employees: 0
Race: African American or Black
Gender: Male

Contact Information

Name: Marcus Chapman
Phone: 312-865-3317
EMail: mchapman@diametricprogrp.com
Primary Address: 201 West Lake Street, #83, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
|--------------------|--------------|------------------|-------------|----------------------|-----------------|

Product/Service Description: Marketing: Marketing Consultant in Print Procurement Strategies

Industries and Services Information

| Industry | Service/Product |
|--|---|
| 961 MISCELLANEOUS SERVICES, NO. 1 (NOT OTHERWISE CLASSIFIED) | 96153 Marketing Services (Incl. Distribution, Research, Sales Promotions, etc.) |
| Marketing/Advertising | Marketing/Advertising |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Administrative Resource Options, Inc.
Phone: 312-634-0300
Fax: 312-634-1030
URL:
No. of Employees: 300
Race: Caucasian
Gender: Female

Contact Information

Name: Alecia McClung
Phone: 312-634-0300
EMail: amclung@aroptions.com
Primary Address: 200 W. Adams, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
|--------------------|--------------|------------------|-------------|----------------------|-----------------|

Contract Management Services including Backroom Support
Product/Service Description: and Administrative Office Services

Industries and Services Information

| Industry | Service/Product |
|--|---|
| 918 CONSULTING SERVICES | 91885 Personnel/Employment Consulting (Human Resources) |
| 918 CONSULTING SERVICES | 91806 Administrative Consulting |
| 958 MANAGEMENT SERVICES | 95868 Support Services, Management |
| 961 MISCELLANEOUS SERVICES, NO. 1 (NOT OTHERWISE CLASSIFIED) | 96102 Administrative Services, All Kinds (Incl. Clerical, Secretarial Services, etc.) |
| Professional Services | Professional Services |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Community Capital LLC dba ComCap Advisors, a division of
Community Capital LLC
Phone: 901-274-5666
Fax: 901-274-8040
URL:
No. of Employees: 3
Race: African American or Black
Gender: Female

Contact Information

Name: Pamela Z. Clary
Phone: 901-274-5666
EMail: pclary@community-capital.com
Primary Address: PO Box 42188, Memphis, TN, 38174-2188

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|-----------------------|--------------|---------------------|----------------|-------------------------|--------------------|
|-----------------------|--------------|---------------------|----------------|-------------------------|--------------------|

Product/Service Description: Municipal finance consulting services

Industries and Services Information

| Industry | Service/Product |
|------------------------|------------------------|
| 946 FINANCIAL SERVICES | 94625 Banking Services |
| Professional Services | Professional Services |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Global Capital LTD
Phone: 312-846-6918
Fax:
URL:
No. of Employees: 5
Race: Caucasian
Gender: Female

Contact Information

Name: Terri E. McNally
Phone: 312-846-6918
EMail: temb@globalcapitaltd.com
Primary Address: 200 West Superior, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| | | | | | |

Product/Service Description: Professional Service: Equipment Financing & Asset Management

Industries and Services Information

| Industry | Service/Product |
|------------------------|---|
| 946 FINANCIAL SERVICES | 94654 Installment Purchase/Lease Purchase Financing and Lease With Option to Purchase Financing |
| 946 FINANCIAL SERVICES | 94649 Financial Services (Not Otherwise Classified) |
| Professional Services | Professional Services |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Huskey & Associates
Phone: 773-348-3852
Fax: 773-348-1233
URL:
No. of Employees: 2
Race: Caucasian
Gender: Female

Contact Information

Name: Bobbie Huskey
Phone: 773-348-3852
EMail: bhuskey@huskey-associates.com
Primary Address: P.O. Box 578534, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 0 | Cook County | WBE | 06/13/2012 | Unknown | 06/13/2013 |

Product/Service Description: Professional Service: Facility & Strategic Planning and Research

Industries and Services Information

| Industry | Service Product |
|-------------------------|--|
| 918 CONSULTING SERVICES | 91832 Consulting Services (Not Otherwise Classified) |
| Professional Services | Professional Services |

NMS LABS MBE/WBE VENDOR LIST 2013

Name: Janice C Hodge DBA JC Hodge & Associates
Phone: 7737524769
Fax: 773 4092368
URL:
No. of Employees: 1
Race: African American or Black
Gender: Female

Contact Information

Name: Janice C. Hodge
Phone: 7737524769
EMail: janhodge@msn.com
Primary Address: 1525 E 53rd St, 410, Chicago, IL,

Certification Information

| Certificate Number | Jurisdiction | Certificate Type | Issued Date | Recertification Date | Expiration Date |
|--------------------|--------------|------------------|-------------|----------------------|-----------------|
| 0 | Cook County | MBE/WBE | 10/30/2012 | 10/30/2015 | 10/30/2013 |

Product/Service Description: Mental Healthcare

Industries and Services Information

| Industry | Service/Product |
|-------------------------|--|
| 918 CONSULTING SERVICES | 91867 Human Services Consulting (To Include Mental Health Consulting Services) |
| Professional Services | Professional Services |

NMS NMS LABS MBE/M VENDOR LIST 2011-2012

| Vendor Name | Service | Status/Certification | 2011 | 2012 | 2013 |
|--|-------------------|---|--------------|--------------|------|
| American Diversity Business Forms | Business Forms | Women Womens Business Development Center & Womens Business Enterprise National Council | \$12,642.75 | \$31,000.00 | |
| ChemWare, Inc. | Software Provider | Woman North Carolina State, Dept. of Admin. Historically Underutilized Business Program, Woman owned | \$197,509.00 | \$233,234.00 | |
| Business Interiors | Office Furniture | Woman/ HUB HUB Certification, WBENC Certified, NCTRCA Certified all certification thru 2012. As of 2013 no longer WO Business | | \$106,857.00 | |
| High Purity Standards | Reagent Standards | WO WBENC | | \$2,000.00 | |
| Total Annual Expenditures with Certified MBE/WBE Vendors | | | \$212,162.75 | \$375,103.00 | |

| New vendor Future Spending for 2013 | Business Forms/Promotional items | MBE | Chicago MSDC MBE, State of Indiana MBE | |
|-------------------------------------|----------------------------------|-----|--|-------------|
| Maximum Business Solutions, Inc. | | | | \$31,000.00 |

***Additional NMS MBE/WBE Vendors Identified**

| | | | | |
|---------------------------------|-----------------------------|----------|-------------------------------|---------------------|
| HR Works | Personnel Staffing Co. | Woman | Woman owned, not certified | \$2,500.00 |
| Loreli Bauer & Associates | Health & Wellness | Woman | Woman owned, not certified | \$1,300.00 |
| Diversity Data & Imaging | Printer Supplies | Woman | Woman owned, not certified | \$29,445.00 |
| Heather Harris | Technical Consultant | Woman | Woman owned, not certified | \$104,240.00 |
| Heather Mazzanti | Technical Consultant | Woman | Woman owned, not certified | \$40,500.00 |
| Elizabeth Spratt, MS, DABFT | Technical Consultant | Woman | Woman owned, not certified | \$12,000.00 |
| Keystone Bioanalytical | Technical Consultant | Minority | Minority owned, not certified | \$18,921.00 |
| Tira Solutions | IT Consultant | Minority | Minority owned, not certified | \$69,100.00 |
| Quality Assurance Service Corp. | Biological Matrix Materials | Woman | Woman owned, not certified | \$83,428.00 |
| | | | | \$361,434.00 |

*NMS has encouraged these vendors to apply for formal certification through their appropriate certifying agency



CHICAGO MINORITY SUPPLIER DEVELOPMENT COUNCIL

THIS CERTIFIES THAT

MAXIMUM BUSINESS SOLUTIONS, INC.

Has met the requirements for certification as a bona fide Minority Business Enterprise as defined by the National Minority Supplier Development Council, Inc. (NMSDC) and as adopted by the Chicago Minority Supplier Development Council.

****NAICS Codes: 453220, 453210, 448190, 323119**

****Description of their products/services as defined by the North American Industry Classification System (NAICS)**

Product/Service Description: DISTRIBUTOR OF BUSINESS FORMS, PROMOTIONAL PRODUCTS, OFFICE SUPPLIES, CASINO PRODUCTS/UNIFORMS AND COMMERCIAL PRINTING

10/31/2012
Issued Date

CH1304
Certificate Number

10/31/2013
Expiration Date

Sharon C. Hill Morgan
President, Chicago MSDC

By using your assigned (through NMSDC only) password, NMSDC Corporate Members may view the original certificate by logging in at: <http://www.nmsdc.org>



An affiliate of the National Minority Supplier Development Council, Inc. (NMSDC)



STATE OF INDIANA

Mitchell E. Daniels Jr., Governor

DEPARTMENT OF ADMINISTRATION
Minority and Women's Business Enterprises Division

Indiana Government Center South
402 West Washington Street, Room W469
Indianapolis, IN 46204
(317) 232 - 3061

May 18, 2010

Mr. Robert Brown
Maximum Business Solutions Inc.
5930 Hohman Avenue, Suite 201
Hammond, IN 46230

Subject: Application for MBE certification

Dear Mr. Brown

Congratulations! The Indiana Department of Administration, Minority and Women's Business Enterprises Division is pleased to inform you that Maximum Business Solutions Inc. is hereby certified as a Minority-owned Business Enterprise (MBE).

Your company provides a commercially useful function in the areas listed below. Only work performed in these areas will be counted towards Minority Business Enterprise participation:

UNSPSC CODES(S)

| <i>Code</i> | <i>Description</i> |
|-------------|--|
| 80141618 | Sales marketing agencies including print |
| 82140000 | Graphic design |
| 80140000 | Marketing and distribution |
| 82100000 | Advertising |
| 82121505 | Promotional or advertising printing |
| 14111806 | Business forms or questionnaires |
| 80101706 | Professional procurement services |

This certification is valid through April 30, 2013. Although your certification is valid for a three-year period, you will be required to submit an annual *Affidavit of Continued Eligibility*, which reflects updates regarding the issues critical to maintaining your certification. However, you must notify us immediately if any changes occur. Failure to notify us of changes or to provide the *Affidavit of Continued Eligibility* form annually will result in revocation of your certification. Changes include, but are not limited to:

- Change in location or contact information (address, phone number, e-mail address, etc.)
- Change in services provided (amendment to certification)
- Change in ownership
- Change in control

In addition to your official notifications to this office, we encourage you to visit our website at www.in.gov/idoa/mwbe and update your Business Registration Profile. It is important that you review and update your profile regularly, because state purchasing agents and prime contractors will use this information to contact you for business opportunities. For questions regarding your registration profile, you may contact Amey Redding at 317-234-3542.

While this letter serves as notification of certification, it does not serve to prove continued eligibility. Please visit <http://www.in.gov/idoa/minority/Certifications.xls> to verify certification status. Please contact our office at (317) 232-3061 if you have any other questions.

Sincerely,

Alice Watson, Deputy Commissioner
Indiana Department of Administration
Minority and Women's Business Enterprises Division
AW/JKW/NIW

CERTIFICATIONS (SECTION 4)

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE UNDERSIGNED IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE UNDERSIGNED THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE UNDERSIGNED IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE UNDERSIGNED SHALL BE SUBJECT TO TERMINATION.

A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- 3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.*;
- 5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- 6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in sub-paragraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20 % or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

THE UNDERSIGNED HEREBY CERTIFIES THAT: The Undersigned has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Undersigned has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Undersigned would not violate the provisions of such Section or of the Code.

B. BID-RIGGING OR BID ROTATING

THE UNDERSIGNED HEREBY CERTIFIES THAT: *In accordance with 720 ILCS 5/33 E-11, neither the Undersigned nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.*

C. DRUG FREE WORKPLACE ACT

THE UNDERSIGNED HEREBY CERTIFIES THAT: The Undersigned will provide a drug free workplace, as required by Public Act 86-1459 (30 ILCS 580/2-11).

D. DELINQUENCY IN PAYMENT OF TAXES

THE UNDERSIGNED HEREBY CERTIFIES THAT: *The Undersigned is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, by a local municipality, or by the Illinois Department of Revenue, which such tax or fee is delinquent, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-129.*

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 *et seq.*).

F. ILLINOIS HUMAN RIGHTS ACT

THE UNDERSIGNED HEREBY CERTIFIES THAT: *It is in compliance with the the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.*

G. MACBRIDE PRINCIPLES, CODE CHAPTER 34, SECTION 34-132

If the primary contractor currently conducts business operations in Northern Ireland, or will conduct business during the projected duration of a County contract, the primary contractor shall make all reasonable and good faith efforts to conduct any such business operations in Northern Ireland in accordance with the MacBride Principles for Northern Ireland as defined in Illinois Public Act 85-1390.

H. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-127;

The Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is determined from time to time by, and is available from, the Chief Financial Officer of the County.

For purposes of this EDS Section 4, H, "Contract" means any written agreement whereby the County is committed to or does expend funds in connection with the agreement or subcontract thereof. The term "Contract" as used in this EDS, Section 4, I, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United State Internal Revenue Code and recognized under the Illinois State not-for -profit law);
- 2) Community Development Block Grants;
- 3) Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

4. REAL ESTATE OWNERSHIP DISCLOSURES.

The Undersigned must indicate by checking the appropriate provision below and providing all required information that either:

- a) The following is a complete list of all real estate owned by the Undersigned in Cook County:

PERMANENT INDEX NUMBER(S): _____

(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX NUMBERS)

OR:

- b) X The Undersigned owns no real estate in Cook County.

5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.

If the Undersigned is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Undersigned must explain below:

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Undersigned certified to all Certifications and other statements contained in this EDS.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and
2. An individual or Legal Entity that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name National Medical Services Inc. D/B/A: NMS Labs EIN NO.: 23-1731658

Street Address: 3701 Welsh Road

City: Willow Grove State: PA Zip Code: 19090

Phone No.: _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each individual and each Entity having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

| Name | Address | Percentage Interest in Applicant/Holder |
|-----------------|--------------------------------------|---|
| Eric Rieders | 900 Hill Road, Rushland, PA 18956 | 50.00% |
| Michael Rieders | 8100 Accomac Road, Wyncote, PA 19095 | 37.65% |
| Marian Rieders | 8100 Accomac Road, Wyncote, PA 19095 | 12.35% |

2. If the interest of any individual or any Entity listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

| Name of Agent/Nominee | Name of Principal | Principal's Address |
|-----------------------|-------------------|---------------------|
| | | |
| | | |

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [X] No
 If yes, state the name, address and percentage of beneficial interest of such person or legal entity, and the relationship under which such control is being or may be exercised.

| Name | Address | Percentage of Beneficial Interest | Relationship |
|------|---------|-----------------------------------|--------------|
| | | | |
| | | | |

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

Shelly Carolan
 Name of Authorized Applicant/Holder Representative (please print or type)

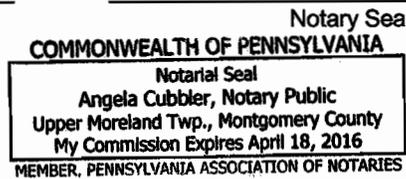
 Signature
NMS@NMSLabs.com
 E-mail address

Chief Marketing Officer
 Title
1/29/13
 Date
215-657-4900
 Phone Number

Subscribed to and sworn before me this 29th day of Jan., 2013

My commission expires: 4/18/16

x Angela Cubbler
 Notary Public Signature





COOK COUNTY BOARD OF ETHICS

69 W. WASHINGTON STREET, SUITE 3040

CHICAGO, ILLINOIS 60602

312/603-4304

312/603-9988 FAX 312/603-1011 TT/TDD

FAMILIAL RELATIONSHIP DISCLOSURE PROVISION:

Section 2-582 of the Cook County Ethics Ordinance requires any person or persons doing business with Cook County, upon execution of a contract with Cook County, to disclose to the Cook County Board of Ethics the existence of familial relationships they may have with all persons holding elective office in the State of Illinois, the County of Cook, or in any municipality within the County of Cook.

The disclosure required by this section shall be filed by January 1 of each calendar year or within thirty (30) days of the execution of any contract or lease. Any person filing a late disclosure statement after January 31 shall be assessed a late filing fee of \$100.00 per day that the disclosure is late. Any person found guilty of violating any provision of this section or knowingly filing a false, misleading, or incomplete disclosure to the Cook County Board of Ethics shall be prohibited, for a period of three (3) years, from engaging, directly or indirectly, in any business with Cook County. *Note:* Please see Chapter 2 Administration, Article VII Ethics, Section 2-582 of the Cook County Code to view the full provisions of this section.

If you have questions concerning this disclosure requirement, please call the Cook County Board of Ethics at (312) 603-4304.

Note: A current list of contractors doing business with Cook County is available via the Cook County Board of Ethics' website at:

http://www.cookcountygov.com/taxonomy/ethics/Listings/cc_ethics_VendorList_.pdf

DEFINITIONS:

"Calendar year" means January 1 to December 31 of each year.

"Doing business" for this Ordinance provision means any one or any combination of leases, contracts, or purchases to or with Cook County or any Cook County agency in excess of \$25,000 in any calendar year.

"Familial relationship" means a person who is related to an official or employee as spouse or any of the following, whether by blood, marriage or adoption:

- | | | |
|-----------|-------------------|----------------|
| ▪ Parent | ▪ Grandparent | ▪ Stepfather |
| ▪ Child | ▪ Grandchild | ▪ Stepmother |
| ▪ Brother | ▪ Father-in-law | ▪ Stepson |
| ▪ Sister | ▪ Mother-in-law | ▪ Stepdaughter |
| ▪ Aunt | ▪ Son-in-law | ▪ Stepbrother |
| ▪ Uncle | ▪ Daughter-in-law | ▪ Stepsister |
| ▪ Niece | ▪ Brother-in-law | ▪ Half-brother |
| ▪ Nephew | ▪ Sister-in-law | ▪ Half-sister |

"Person" means any individual, entity, corporation, partnership, firm, association, union, trust, estate, as well as any parent or subsidiary of any of the foregoing, and whether or not operated for profit.

SWORN FAMILIAL RELATIONSHIP DISCLOSURE FORM

Pursuant to Section 2-582 of the Cook County Ethics Ordinance, any *person* doing business** with Cook County must disclose, to the Cook County Board of Ethics, the existence of *familial relationships** to any person holding elective office in the State of Illinois, Cook County, or in any municipality within Cook County. Please print your responses.

Name of Owner/Employee: Eric Rieders Title: President & CEO

Business Entity Name: NMS Labs Phone: 215-657-4900

Business Entity Address: 3701 Welsh Road, Willow Grove, PA 19090

 The following familial relationship exists between the owner or any employee of the business entity contracted to do business with Cook County *and* any person holding elective office in the State of Illinois, Cook County, or in any municipality within Cook County.

| Owner/Employee Name: | Related to: | Relationship: |
|----------------------|-------------|---------------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |

If more space is needed, attach an additional sheet following the above format.

There is *no* familial relationship that exists between the owner or any employee of the business entity contracted to do business with Cook County and any person holding elective office in the State of Illinois, Cook County, or in any municipality within Cook County.

To the best of my knowledge and belief, the information provided above is true and complete.

J. Rieders 1-29-13
Owner/Employee's Signature Date

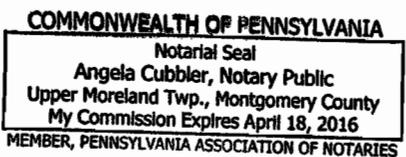
Subscribe and sworn before me this 29th Day of January, 2013

a Notary Public in and for Montgomery County
Angela Cubbler
(Signature)

NOTARY PUBLIC My Commission expires 4/18/16
SEAL

Completed forms must be filed within 30 days of the execution of any contract or lease with Cook County and should be mailed to:

Cook County Board of Ethics
69 West Washington Street,
Suite 3040
Chicago, Illinois 60602



SIGNATURE BY A SOLE PROPRIETOR - NOT APPLICABLE
(SECTION 6)

The Undersigned hereby certifies and warrants: that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Undersigned is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Undersigned with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Undersigned in this EDS are true, complete and correct. The Undersigned agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE: _____ FAX NUMBER: _____

FEIN/SSN: _____

COOK COUNTY BUSINESS REGISTRATION NUMBER: _____

SOLE PROPRIETOR'S SIGNATURE: _____

PRINT NAME: _____

DATE: _____

Subscribed to and sworn before me this

_____ day of _____, 20__.

My commission expires:

X _____

Notary Public Signature

Notary Seal

SIGNATURE BY A PARTNERSHIP (AND/OR A JOINT VENTURE) - NOT APPLICABLE
(SECTION 7)

The Undersigned hereby certifies and warrants: that all of the statements, certifications, and representations set forth in this EDS are true, complete and correct; that the Undersigned is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Undersigned with all the policies and requirements set forth in this EDS; and that all of the facts and information provided by the Undersigned in this EDS are true, complete and correct. The Undersigned agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege. .

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE: _____ FAX NUMBER: _____

CONTACT PERSON: _____ FEIN/SSN: _____

*COOK COUNTY BUSINESS REGISTRATION NUMBER: _____

SIGNATURE OF PARTNER AUTHORIZED TO EXECUTE CONTRACTS ON BEHALF OF PARTNERSHIP:

*BY: _____

Date: _____

Subscribed to and sworn before me this

_____ day of _____, 20____.

My commission expires:

X _____
Notary Public Signature

Notary Seal

* **Attach hereto a partnership resolution or other document authorizing the individual signing this Signature Page to so sign on behalf of the Partnership.**

SIGNATURE BY A LIMITED LIABILITY CORPORATION - NOT APPLICABLE
(SECTION 8)

The Undersigned hereby certifies and warrants: that all of the statements, certifications, and representations set forth in this EDS are true, complete and correct; that the Undersigned is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Undersigned with all the policies and requirements set forth in this EDS; and that all of the facts and information provided by the Undersigned in this EDS are true, complete and correct. The Undersigned agrees to inform the Procurement Director in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS TELEPHONE: _____ FAX NUMBER: _____

CONTACT PERSON: _____

FEIN: _____ * CORPORATE FILE NUMBER: _____

MANAGING MEMBER: _____ MANAGING MEMBER: _____

**SIGNATURE OF MANAGER: _____

ATTEST: _____

Subscribed and sworn to before me this

_____ day of _____, 20_____.

X _____
Notary Public Signature

Notary Seal

* **If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.**

** **Attach either a certified copy of the by-laws, articles, resolution or other authorization demonstrating such persons to sign the Signature Page on behalf of the LLC.**

SIGNATURE BY A CORPORATION
(SECTION 9)

The Undersigned hereby certifies and warrants: that all of the statements, certifications, and representations set forth in this EDS are true, complete and correct; that the Undersigned is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Undersigned with all the policies and requirements set forth in this EDS; and that all of the facts and information provided by the Undersigned in this EDS are true, complete and correct. The Undersigned agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

BUSINESS NAME: NMS Labs

BUSINESS ADDRESS: 3701 Welsh Road, Willow Grove, PA 19090

BUSINESS TELEPHONE: 215-657-4900 FAX NUMBER: 215-657-2972

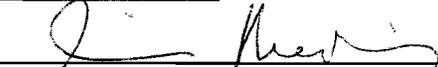
CONTACT PERSON: Shelly Carolan

FEIN: 23-1731658 *IL CORPORATE FILE NUMBER: _____

LIST THE FOLLOWING CORPORATE OFFICERS:

PRESIDENT: Eric Rieders VICE PRESIDENT: n/a

SECRETARY: Michael Rieders TREASURER: Marian Rieders

**SIGNATURE OF PRESIDENT: 

ATTEST:  (CORPORATE SECRETARY)

Subscribed and sworn to before me this
29th day of January, 2013.

My commission expires: 4/18/16

x 
Notary Public Signature

Notary Seal

* If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

** In the event that this Signature Page is signed by any persons than the President and Secretary, attach either a certified copy of the corporate by-laws, resolution or other authorization by the corporation, authorizing such persons to sign the Signature Page on behalf of the corporation.

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Angela Cubbler, Notary Public
Upper Moreland Twp., Montgomery County
My Commission Expires April 18, 2016
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

JANUARY 28, 2013

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

NATIONAL MEDICAL SERVICES, INC.

is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

A handwritten signature in cursive script, appearing to read "Carol Aichele".

Secretary of the Commonwealth

COOK COUNTY SIGNATURE PAGE
(SECTION 10)

ON BEHALF OF THE COUNTY OF COOK, A BODY POLITIC AND CORPORATE OF THE STATE OF ILLINOIS, THIS CONTRACT IS HEREBY EXECUTED BY:



COOK COUNTY CHIEF PROCUREMENT OFFICER

DATED AT CHICAGO, ILLINOIS THIS 25 DAY OF April, 2013.

IN THE CASE OF A BID PROPOSAL, THE COUNTY HEREBY ACCEPTS:

THE FOREGOING BID/PROPOSAL AS IDENTIFIED IN THE CONTRACT DOCUMENTS FOR CONTRACT NUMBER

12-53-223

OR

ITEM(S), SECTION(S), PART(S): _____

TOTAL AMOUNT OF CONTRACT: \$ 338,173⁰⁰
(DOLLARS AND CENTS)

FUND CHARGEABLE: _____

APPROVED AS TO FORM:

Not required
ASSISTANT STATE'S ATTORNEY
(Required on contracts over \$1,000,000.00)

APPROVED BY BOARD OF
COOK COUNTY COMMISSIONERS

APR 17 2013

COM _____

