



Purchase Order

Dispatch via E-Mail

Lexington-Fayette Urban County
200 E Main Street
Lexington KY 40507
United States

Purchase Order LF00188759	Date 04/04/2022	Revision 1	Page 1
Payment Terms Net 30	Freight Terms Destination, Freight Prepaid	Ship Via Best way	
Buyer Hayes, Conni	Phone/Email	Currency USD	

Supplier: 0000018557
MERIDIAN MEDICAL TECHNOLOGIES
6350 STEVEN FOREST RD
SUITE 301
COLUMBIA MD 21046

Ship To: 0614
115 Cisco Road
Lexington KY 40504
United States

Attention: Brackensick, Yolanda

Bill To: 200 E Main Street
Lexington KY 40507
United States

Tax Exempt? Y	Tax Exempt ID: CT-34-100	Replenishment Option: Standard					
Line-Sch	Item/Description	Mfg ID	Quantity	UOM	PO Price	Extended Amt	Due Date

1- 1	DuoDotes ** Requester: Brackensick, Yolanda Phone: Email: ygriffin@lexingtonky.gov **		240.00	EA	61.94	14,865.60	04/11/2022
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Schedule Total 14,865.60

Item Total 14,865.60

2- 1	Add to PO LF00188424 ** Requester: Brackensick, Yolanda Phone: Email: ygriffin@lexingtonky.gov **		1.00	EA	461.40	461.40	04/11/2022
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Schedule Total 461.40

Item Total 461.40

SHIP TO:
Lt Sam Baumgartner
219 E 3rd Street
Lexington, KY 40508

Total PO Amount 15,327.00

By authority of the Division of Central Purchasing of the Lexington-Fayette Urban County Government, you are hereby requested to furnish the items/services as set forth in this document. Ship and invoice in accordance with the instruction, terms, and conditions herein. The signed official authorizes the entry of the order and certifies that funds are available.

- Address shipment exactly as shown in 'SHIP TO' address above. Shipments must be sent FOB Destination Prepaid & Added.
- When all items have been shipped submit your invoice directly to the Division of Accounting, 200 East Main Street, Lexington, KY 40507 (859) 258-3310
- Payments cannot be authorized for partial shipments, except for blanket purchase orders.
- Do not include Kentucky Sales Tax; Exemption Certificate No. CT-34-100 applies.
- All merchandise supplied to the government must fully comply with OSHA standards.
- Vendor shall provide two copies of Material Safety Data Sheet - MSDS - on material covered by OSHA Standard 1910-1200 and confirm it is asbestos free as a condition of purchase.
- LFUCG may assess administrative fees for invoices not issued in a timely manner.
- LFUCG will make all reasonable efforts to pay outstanding invoices within thirty (30) days of receipt. Vendor may impose late payment charges not to exceed one per cent per month to outstanding balances which are not paid within thirty days. However, vendor agrees that in circumstances beyond the direct control of the Urban County Government (such as required review of payments by external agencies), in cases where an invoice is disputed, or in cases of improper invoicing by the vendor no such penalty shall be imposed. Vendor also agrees that, in the case of partial shipments and/or backordered items, no penalty shall be assessed until thirty (30) days after receipt of invoice for the completed order.
- The signed official hereby certifies on behalf of the vendor that the vendor fully complies with 2 CFR 200.322, to the extent that 2 CFR 200.322 applies to this PO.

Authorized Signature



Purchase Order

Dispatch via E-Mail

Lexington-Fayette Urban County
200 E Main Street
Lexington KY 40507
United States

Supplier: 0000018557
MERIDIAN MEDICAL TECHNOLOGIES
6350 STEVEN FOREST RD
SUITE 301
COLUMBIA MD 21046

Purchase Order	Date	Revision	Page
LF00188424	03/17/2022		1
Payment Terms	Freight Terms	Ship Via	
Net 30	Destination, Freight Prepaid	Best way	
Buyer	Phone/Email	Currency	
Hayes, Conni		USD	

Ship To: 0614
115 Cisco Road
Lexington KY 40504
United States

Attention: Brackensick, Yolanda

Bill To: 200 E Main Street
Lexington KY 40507
United States

Tax Exempt? Y Tax Exempt ID: CT-34-100

Replenishment Option: Standard

Line-Sch	Item/Description	Mfg ID	Quantity	UOM	PO Price	Extended Amt	Due Date
1- 1	DuoDotes ** Requester: Brackensick, Yolanda Phone: Email: ygriffin@lexingtonky.gov **		240.00	EA	61.94	14,865.60	03/24/2022

Schedule Total 14,865.60

Item Total 14,865.60

Sole Source, RX and Meridian Order Form attached

SHIP TO:
Lt Sam Baumgartner
219 E 3rd Street
Lexington, KY 40508

Total PO Amount 14,865.60

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Authorized Signature

Prescription Drug Authorization Form

6350 Stevens Forest Road, Suite 301
Columbia, Maryland 21046 USA
Tel: 443-259-7800 | Fax: 845-474-5881

MERIDIAN
MEDICAL TECHNOLOGIES®

A Pfizer Company

In order for Meridian to ship pharmaceuticals to you we must have an authorization from the physician responsible for your department (Medical Director). Please fill in your customer information below. Have your authorizing physician complete the box below, then fax this entire form to Meridian Medical Technologies, Inc. with a valid copy of the physician's license.

- To purchase **controlled narcotics**, we MUST also have on file a copy of your Medical Director's or your agencies Federal DEA Certificate along with this form. Please note that all controlled narcotic orders may ship only to the address listed on that Federal DEA certificate (no residential addresses please).
- Class IV controlled narcotics, such as **diazepam**, may be ordered once the above required information is on file.
- Class II controlled narcotics, such as **morphine**, require an original Federal DEA Form 222 completed and signed by your Medical Director. Meridian Medical Technologies, Inc. must physically receive the completed Form 222, for every Class II Narcotic order that you place. Meridian will complete Suppliers DEA Registration, NDC and shipping information for you. This Federal Form 222 is in triplicate: Meridian will only accept forms where copies 1 and 2 are not separated with the carbons intact. Please retain copy 3 for your records.

SHIPPING ORDER TO:


Organization Name: Lexington Division of Fire/EMS
 Attention to: LT Sam Baumgartner
 Address: 219 E 3rd Street
 City: Lexington State: KY Zip: 40508
 Phone Number: 859-621-3799 Fax Number: _____
 E-mail: BAUMGARS@lexingtonky.gov

This section is to be fully completed by your Medical Director. I hereby authorize the internally designated representative of this department to order emergency prescription medications.

Please INITIAL ALL BLANKS THAT APPLY:

- Limited authorization for the following emergency medications only:
 ___ AtroPen (atropine injection) 2 mg, 1 mg, 0.5 mg DuoDote Auto-Injector (atropine and pralidoxime Cl injection)
 ___ CYANOKIT 5g (hydroxocobalamin for injection) ___ Pralidoxime Chloride 600 mg Auto-Injector (pralidoxime Cl injection)
- Limited authorization for emergency medications and narcotics (**No shipments to residential addresses**):
 Please check the appropriate box(s) for controlled substance authorization:
 Class IV Narcotic Substance Authorization of: ___ Diazepam 10 mg Auto-Injector (diazepam injection)
 Class II Narcotic Substance Authorization that the following controlled substances may be listed on the Federal DEA Form 222:
 ___ Morphine 10 mg Auto-Injector (morphine sulfate injection)

NOTE: To process any medication orders, State License number and copy of license is required. If submitting any orders for Narcotics, a DEA number and copy of DEA is required (shipments to residential addresses are not permitted).

Physician Name (please print): Ryan Stanton
 State License Number (COPY OF THE LICENSE must be attached to this form): KY-41963
 DEA Number(s) (if applicable, COPY OF THE LICENSE must be attached to this form): FS-5778305
 E-mail: StantonR@LexingtonKY.gov Phone: 859-948-2560 Fax: _____
 Signature:  Date: 4/11/22

Authorization is valid for one year from the date shown above.



Physician Ryan Stanton
Phone 859-948-2566 DEA F35778305

Address _____

Patient _____

Address _____

Date _____



- 1-24
- 25-49
- 50-74
- 75-100
- 101-150
- 151 and over

Refill NR 1 2 3 4 5

Signature _____

007722 Revised 02/2013
Prescription is void if more than one (1) prescription is written per blank

MERIDIAN MEDICAL TECHNOLOGIES™



Company Address 6350 Stevens Forest Road, Suite 301
Columbia, MD 21046
US

Quote Number 22-0321-01572
Created Date 3/21/2022
Expiration Date 6/21/2022

Prepared By Beverly Yadlosky
Phone (443) 259-7826
Email beverly.yadlosky@meridianmt.com
Fax 845-474-5881

Contact Name Lanni Griffin-Brackensick
Phone (859) 280-8055
Email ygriffin@lexingtonky.gov

Bill To Name Lexington Division of Emergency Management
Bill To Attn: A/P
115 Cisco Road
Lexington, KY 40504
US

Ship To Name Lexington Division of Emergency Management
Shipping Street 219 East 3rd Street
Shipping City Lexington
Shipping State / Province KY
Shipping Zip / Postal code 40508

Product	Product Code	Quantity	List Price	Total Price
DuoDote Auto-Injector (30 ea. / interior pack)	FPAE	240.00	\$63.86	\$15,326.40

Subtotal \$15,326.40
Discount 0.00%
Total Price \$15,326.40
Grand Total \$15,326.40

All Sales Final - No Returns

CONFIDENTIALITY: This quotation is the confidential information of Meridian Medical Technologies, Inc. and may not be further distributed without prior consent.



JUSTIFICATION FOR SOLE SOURCE CERTIFICATION

Sole Source Purchases are defined clearly, based upon a legitimate need, and are limited to a single supplier. Sole source purchases are normally not allowed except when based upon strong technological grounds such as operational compatibility with existing equipment and related parts or upon a clearly unique and/or cost effective feature requirement. The use of sole source purchases must be justified and shall be limited only to those specific instances in which compatibility or technical performance needs are being satisfied.

Sole Source Services are defined as a service provider providing technical expertise of such a unique nature that the service provider is clearly and justifiably the only practicable source available to provide the service. The justification shall be based on the uniqueness of the service, sole availability at the location required, or warranty or defect correction service obligations of the service provider.

This form must be filled out for the request to purchase any good or non-professional service that requires a competitive procurement process (informal quotes (\$1001-\$10,000), formal quotes (\$10,001 - \$19,999.99), or formal bid (\$30,000 or more) as defined in the LFUCG's Purchasing Manual. This form must be completed in its entirety and attached to the purchase requisition.

Note: Sole Source Purchase requests for goods exceeding \$30,000 will require approval by the Urban County Council by submitting an Administrative Review Form. A copy of this form must be signed off by Central Purchasing and attached to the Administrative Review Form.

Requesting Division

Name Lanni Griffin Division/Dept DEM/CSEPP Phone 859-280-8055
Email ygriffin@lexingtonky.gov

Type of Purchase: () Goods/Materials/Equipment () Services

Cost: \$14,865.00

Sole Source Request for the Purchase of: _____

8 boxes DuoDotes Auto
Injectors _____ One

Time Purchase To Establish Sole Source Provider Contract

(subject to annual review and approval by Central Purchasing and/or Urban County Council)

Vendor Information

Business Name Meridian Medical Technologies

Contact Name Beverly Yadlosky

Address 6350 Stevens Forest Rd, Ste 301 Columbia, MD 21046

Phone 443-259-7826 Email Beverly.yadlosky@meridianmt.com



JUSTIFICATION FOR SOLE SOURCE CERTIFICATION

STATEMENT OF NEED: (Add additional pages as needed)

My division/department's recommendation for sole source is based upon an objective review of the product/service required and appears to be in the best interest of the LFUCG. I know of no conflict of interest on my part, and I have no personal involvement in any way with this request. No gratuities, favors, or compromising actions have taken place. Neither has my personal familiarity with particular brands, types of equipment, materials, persons or firms been a deciding influence on my request to sole source this purchase when there are other known suppliers to exist.

1. Describe the product or service and list the necessary features this product provides that are not available from any other option.

Meridian Medical Technologies manufactures an antidote (DuoDote) for nerve agent exposure that will be used by emergency medical personnel to treat patients exposed to those agents. Nerve agents are currently stored at the BlueGrass Army Depot. Meridian is the only manufacturer of this product and can sell directly to the consumer without a distributor.

2. Below are eligible reasons for sole source. Check one and describe.

Licensed or patented product or service. No other vendor provides this. Warranty or defect correction service obligations to the consultant. Describe why it is mandatory to use this licensed or patented product or service.

The DuoDote Injector is required for medical personnel to treat/save the lives of patients exposed to nerve agent.

Existing LFUCG equipment, inventory, custom-built information system, custom-built data inventory system, or similar products or programs. Describe. If product is off-the-shelf, list efforts to find other vendors (i.e. web site search, contacting the manufacturer to see if other dealers are available to service this region, etc.)

Uniqueness of the service. Describe.

The LFUCG has established a standard for this manufacturer, supplier, or provider and there is only one vendor. Attach documentation from manufacturer to confirm that only one dealer provides the product.

Factory-authorized warranty service available only from this single dealer. Sole availability at the location required. Describe.

Used item with bargain price (describe what a new item would cost). Describe.



JUSTIFICATION FOR SOLE SOURCE CERTIFICATION

Other – The above reasons are the most common and established causes for an eligible sole source. If you have a different reason, please describe:

-

3. Describe efforts to find other vendors or consultants (i.e. phone inquires, web site search, contacting the manufacturer to see if other dealers are available to service region, etc.).

Meridian Medical Technologies is the only manufacturer

4. How was the price offered determined to be fair and reasonable?

(Explain what the basis was for comparison and include cost analyses as applicable.)

_Meridian is the only manufacturer of this life-saving product. They sell to distributors but purchasing directly from manufacturer eliminates additional costs.

5. Describe any cost savings realized or costs avoided by acquiring the goods/services from this supplier.

_Purchasing directly from the manufacturer eliminates 3rd party costs
