



# Request for Quote

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 ONE CAPITOL HILL  
 PROVIDENCE RI 02908

BUYER: Melillo, Charlotte A  
 PHONE #: 401-574-8110

CREATION DATE : 07-OCT-13  
 BID NUMBER: 7520364  
 TITLE: X-RAY SERVICES FOR OFFICE OF THE MEDICAL EXAMINER  
 BLANKET START : 01-JAN-14  
 BLANKET END : 31-DEC-16  
 BID CLOSING DATE AND TIME: 31-OCT-2013 10:00:00

**B** DOA CONTROLLER  
**I** ONE CAPITOL HILL, 4TH FLOOR  
**L** SMITH ST  
**L** PROVIDENCE, RI 02908  
**T** US  
**O**

**S** DOH MEDICAL EXAMINER  
**H** CHAPIN BLDG, 1ST FLOOR  
**I** 48 ORMS ST  
**P** PROVIDENCE, RI 02904  
**T** US  
**O**

Requisition Number: 1314772

Line	Description	Quantity	Unit	Unit Price	Total
1	<p>1/1/14 - 12/31/16</p> <p>X-RAY SERVICES FOR THE OFFICE OF THE MEDICAL EXAMINER PER ATTACHED BID SPECIFICATIONS.</p> <p>QUESTIONS REGARDING THIS BID SHOULD BE EMAILED TO: charlotte.melillo@purchasing.ri.gov</p> <p>BID PACKAGE MUST BE MAILED FOR HAND DELIVERED TO:</p> <p>DEPT. OF ADMINISTRATION            DIVISION OF PURCHASES            ONE CAPITOL HILL 2ND FL            PROVIDENCE, RI 02908</p> <p>VENDOR MUST PROVIDE (WITH THEIR BID) PROOF OF PASSING THE CERTIFICATION EXAMINATION GIVEN BY THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS AND MUST HAVE THREE OR MORE CONSECUTIVE YEARS OF EXPERIENCE PRACTICING IN THE FIELD OF RADIOLOGIC TECHNOLOGY.</p> <p>1/1/14 - 12/31/16 - XRAY SERVICES (ESTIMATE 125 CASES) PER ATTACHED BID SPECIFICATIONS - (EACH = PER CASE AND/OR DECEDENT BASIS)</p>	125.00	Each		

Delivery: \_\_\_\_\_

Terms of Payment: \_\_\_\_\_

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer

## **X-RAY SERVICES BID REQUIREMENTS**

### **GENERAL STATEMENT OF DUTIES:**

The Office of the State Medical Examiner (OSME) requires the services of a radiologic technologist to perform postmortem x-rays with the purpose of identifying projectiles and other foreign objects that may be in the decedent's body. In addition, it is imperative to identify skeletal injuries and to perform required x-ray views to compare with pre-mortem images to allow the Medical Examiner to establish positive forensic identification.

### **REQUIRED KNOWLEDGE, DUTIES, AND SKILLS:**

1. The ability to direct the positioning of the decedent by the medical examiner agents and or field investigators so as to obtain the equivalent of clinically used x-ray positions, which is to include AP and laterals;
2. The ability to take the views needed for total body x-ray;
3. The ability to take views necessary to locate the position of projectiles in the body in 2-dimensions, which is to include AP and lateral;
4. The ability to obtain x-rays of dentition adequate to make pre-mortem comparisons to establish positive identification;
5. Working knowledge relative to the use of x-ray equipment, loading film in cassettes, proper labeling of x-rays and the use of film developing equipment at the OSME.

### **SPECIAL CONDITIONS:**

1. The radiologic technologist must be available by pager and/or cell phone at all times to coordinate schedule;
2. The radiologic technologist must be available on an on-call, as needed basis to be present at the OSME offices Monday through Saturday during the hours of 7am-7pm, as well as Sunday on an emergency basis;
3. Due to the nature of the work performed by the OSME office the radiologic technologist may be exposed to extreme odors (due to decomposition of tissues), body fluids and be witness to the effects of violence on the body.

### **REQUIRED EXPERIENCE AND CREDENTIALS:**

The successful candidate must have passed the certification examination given by the American registry of radiologic technologists and provide proof of same and must have three or more consecutive years of experience practicing in the field of radiologic technology.

### **NOTE:**

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1. Radiographic films are provided by the OSME. Currently, all x-rays will be processed at the OSME on a Kodak RP X-OMAR Processor Model M7B; however, new digital x-ray equipment should be acquired and installed by fiscal year 2011.
2. Bids are to be made on a per case basis. The Chief Medical Examiner or his designee will determine the number of individual x-rays required per case. Payment will not be made on per x-ray basis, but rather a per case and/or decedent basis.
3. Invoices should be received in this office no later than the 10<sup>th</sup> of the month.
4. All invoices should have an attached breakdown separate from the invoice and including the following:
  - a. Date of Case
  - b. Time
  - c. Last Name, First Name
  - d. Case Number
  - e. Cost per case
  - f. Total cases for month
  - g. Total cost for the month
  - h. Invoice number and date

## **REQUEST FOR QUOTATION      BID 7520364**

**BIDDING** (a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State. (b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered. (c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost. (d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request. **ORDERING** (a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period. (b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.

### **MULTI YEAR**

THIS IS A MULTI-YEAR BID/CONTRACT. PER RHODE ISLAND STATE LAW 37-2-33, CONTRACT OBLIGATIONS BEYOND THE CURRENT FISCAL YEAR ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.

### **INSURANCE**

AN INSURANCE CERTIFICATE IN COMPLIANCE WITH PROVISIONS OF ITEM 31 (INSURANCE) OF THE GENERAL CONDITIONS OF PURCHASE IS REQUIRED FOR COMPREHENSIVE GENERAL LIABILITY, AUTOMOBILE LIABILITY, AND WORKERS' COMPENSATION AND MUST BE SUBMITTED BY THE SUCCESSFUL BIDDER(S) TO THE DIVISION OF PURCHASES PRIOR TO AWARD. THE INSURANCE CERTIFICATE MUST NAME THE STATE OF RHODE ISLAND AS CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED. FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN REJECTION OF THE OFFEROR'S BID. ANNUAL RENEWAL CERTIFICATES MUST BE SUBMITTED TO THE AGENCY IDENTIFIED ON THE PURCHASE ORDER. FAILURE TO DO SO MAY BE GROUNDS FOR CANCELLATION OF CONTRACT.

## **LICENSE**

VENDOR (OWNER OF COMPANY) IS RESPONSIBLE TO COMPLY WITH ALL LICENSING OR STATE PERMITS REQUIRED FOR THIS TYPE OF SERVICE. A COPY OF LICENSE/PERMIT SHOULD BE SUBMITTED WITH THIS BID. IN ADDITION TO THESE LICENSE REQUIREMENTS, BIDDER, BY SUBMISSION OF THIS BID, CERTIFIES THAT ANY/ALL WORK RELATED TO THIS BID, AND ANY SUBSEQUENT AWARD WHICH REQUIRES A RHODE ISLAND LICENSE(S), SHALL BE PERFORMED BY AN INDIVIDUAL(S) HOLDING A VALID RHODE ISLAND LICENSE.

## **RIVIP**

IT IS THE VENDOR'S RESPONSIBILITY TO CHECK AND DOWNLOAD ANY AND ALL ADDENDA FROM RIVIP. THIS OFFER MAY NOT BE CONSIDERED UNLESS A SIGNED RIVIP GENERATED BIDDER CERTIFICATION COVER FORM IS ATTACHED AND THE UNIT PRICE COLUMN IS COMPLETE. THE SIGNED CERTIFICATION COVER FORM MUST BE ATTACHED TO THE FRONT OF THE OFFER. WHEN DELIVERING OFFERS IN PERSON TO ONE CAPITOL HILL, VENDORS ARE ADVISED TO ALLOW AT LEAST ONE HOUR ADDITIONAL TIME FOR CLEARANCE THROUGH SECURITY CHECKPOINTS.

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## **DELIVERY**

DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.