

TRI-TOWN Emergency Medical Service

Monthly Director's Report

for the Month of

November 2014



Municipal Ambulance Service

for the Towns of

Pembroke & Allenstown



Prepared By: *Christopher Gamache, Director*

December 7, 2014



PREFACE

Tri-Town Emergency Medical Service is a municipal agency which provides emergency ambulance services to the towns of Pembroke and Allenstown, New Hampshire and was created through an inter-municipal agreement between the two towns. Tri-Town Volunteer Emergency Ambulance Service (TTVEAS) had been the ambulance provider for the two town as well as the town of Hooksett since 1972. In 2010, Hooksett Fire Department started providing emergency ambulance



service for the Town of Hooksett, an event which set into motion the ambulance service becoming a municipality. TTVEAS and the two town came to an agreement where the towns would take possession of all operational equipment and assume any remaining debt on the equipment. The current staff of TTVEAS would become employees of



the new agency. On January 1, 2013 Tri-Town Emergency Medical Service started EMS operations for the two towns. The agency is governed by a Joint Board, comprised of the two town administrators, the two town fire chiefs, and a member-at-large from each town and an employee representative from Tri-Town EMS. The board appoints a director to oversee the overall operations of the agency. Today, Tri-Town EMS is *Paramedic Service*, comprised of full time, part time and per diem employees who staff an ambulance twenty-four hours a day.

REPORT INTRODUCTION

This report was generated on December 7, 2014 by the agency's Director, Christopher Gamache, and represent the EMS activity of the agency, current projects, agency concerns and performance projections. The content of this report shall be presented at the Monthly Meeting of the Joint Board on Wednesday December 10, 2014. This document contains data that was derived from the New Hampshire Department of Safety, Bureau of Emergency Medical Service patient care reporting web site, www.nhtems.org, where Tri-Town EMS documents all EMS related calls that are dispatched by Concord Fire Alarm. Additionally, this document contains data from the agency's billing contractor, ComStar.

Tri-Town EMS has a Medical Resource Hospital Agreement (MRHA) with Concord Hospital. This agreement entitles the agency to function under the medical oversight of the hospital's Medical Director, Dr. David Hirsh. As part of the MRHA, Tri-Town EMS has a Control Substance agreement with Concord Hospital, these two agreements afford TTEMS the ability to have Paramedic level medications and Controlled Substances.



SECTION 1: EMERGENCY MEDICAL SERVICE (EMS) ACTIVITY:

- Total Number of EMS Responses / Request for EMS Services79
- Total Number of Patient’s Transported59
 - Transports to Concord Hospital45 (76.3%)
 - Transports to Catholic Medical Center (CMC)9 (15.3%)
 - Transports to Elliot Hospital5 (8.4%)
 - Transports to Other Hospital0
- Total Number of EMS Runs Where Mutual Aid was Received5
 - Concord Fire Department2
 - Epsom Fire Department2
 - Hooksett Fire Department1
 - Other EMS Agency0
- Total Number of Patient’s Refusing Transport to the Emergency Department11
- Total Number of EMS Responses that Resulted in Another Disposition9
- Tri-Town EMS Transport Percentage (%)74.7%

SECTION 2: EMS RUN DATA

Average Run Times:

- Reaction Time: 1m 31s (49.4% <1min)
- Response Time: 1m 55s (63.29% <5min)
- On-Scene Time: 21m 40s (13%< 10min; 50.63%< 20 min)
- Transport Time:.....17m 40s
- Back In Service Time:24m 9s

EMS Call Location, by Town:

- Allentown, NH29 (36.71%)
- Pembroke, NH43 (54.43%)
- Epsom, NH2 (2.53%)
- Concord, NH1 (1.27%)
- Hooksett, NH4 (5.06%)



Times of Call

Time Period	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total	Percentage
0000 - 0300	1	2	0	0	0	0	4	7	8.86%
0300 - 0600	2	0	0	2	3	1	0	8	10.13%
0600 - 0900	3	1	1	0	1	1	0	7	8.86%
0900 - 1200	1	1	2	3	5	0	3	15	18.99%
1200 - 1500	3	0	2	1	4	4	3	17	21.52%
1500 - 1800	2	1	2	0	4	1	1	11	13.92%
1800 - 2100	3	0	1	0	2	1	1	8	10.13%
2100 - 2400	0	1	1	2	0	1	1	6	7.59%
Unknown	0	0	0	0	0	0	0	0	0.00%
Total	15	6	9	8	19	9	13	79	100%

Runs by Dispatch Reason

Dispatch Reason	# of Times	% of Times
Abdominal Pain	1	1.27%
Altered Mental Status	3	3.80%
Back Pain (Non-Traumatic / Non-Recent Trauma)	1	1.27%
Breathing Problem	7	8.86%
Cardiac Arrest	1	1.27%
Chest Pain	6	7.59%
CO Poisoning / Hazmat	1	1.27%
Fall Victim	12	15.19%
Fire Standby	1	1.27%
Headache	1	1.27%
Hemorrhage / Laceration	2	2.53%
Lift Assist / Invalid Assist	1	1.27%
Medical Alarm	3	3.80%
Motorized Vehicle Crash (Auto / Truck / ATV / Etc.)	5	6.33%
Other	5	6.33%
Overdose	2	2.53%
Psychiatric / Behavioral Problems	6	7.59%
Seizure / Convulsions	6	7.59%
Sick Person	9	11.39%
Stroke / CVA	2	2.53%
Traumatic Injury	1	1.27%
Unconscious / Fainting	3	3.80%
Unknown	0	0.00%
Total	79	100%

Procedure Administered

Procedure Name	#	%
Assessment: Orthostatic Vital Signs	3	3.80%
Assessment: Patient Assessment	34	43.04%
Cardiac: 12 Lead ECG Obtained	15	17.72%
Cardiac: 12/15/18 Lead ECG-Transmitted	2	2.53%
Cardiac: ECG Monitoring	19	24.05%
General: Patient Cooling (Cold Pack or Global)	1	1.27%
Movement: Cervical Collar Applied for Stabilization	1	1.27%
Musculoskeletal: Spinal Precautions Withheld Per Assessment Criteria	1	1.27%
Respiratory: Bagged Ventilations (via Mask)	1	1.27%
Respiratory: ETCO2 Digital Capnography	2	2.53%
Soft Tissue: General Wound Care	4	5.06%
Vascular: IV Catheterization (Extremity Vein)	50	56.96%
None	27	34.18%

Medication Administered

Medication Name	#	%
Albuterol Sulfate	4	2.53%
Aspirin (ASA)	3	3.80%
Dextrose 50% (D50)	1	1.27%
DuoNeb (0.5 Atrovent/3.0 Albuterol)	5	6.33%
Fentanyl	2	2.53%
Glucose (Oral)	1	1.27%
Ipratropium Bromide (Atrovent)	2	2.53%
Morphine Sulfate	6	6.33%
Nitroglycerin	6	3.80%
Nitropaste (Transdermal Nitroglycerin Ointment)	1	1.27%
Normal Saline	14	17.72%
Ondansetron (Zofran)	7	8.86%
Oxygen	4	5.06%
Oxygen (non-rebreather mask)	1	1.27%
Oxygen by Nasal Cannula	3	3.80%
Oxygen by Nebulizer	1	1.27%
Prochlorperazine (Compazine)	2	1.27%
None	49	62.03%

SECTION 3: TRI-TOWN EMS PERSONNEL:

During the month of November 2014, One (1) full time employee was terminated from the agency following the submission of their letter of resignation and two (2) per diem employees were terminated for inactivity. One of the terminated per diem employees requested to opportunity to resign, and submitted a letter of resignation to be considered by the board at the December meeting. The Current Staffing of Tri-Town EMS:

- Full Time Employees2



- Part Time Employees6
- Per Diem Employees20
- TOTAL WORK FORCE28

SECTION 4: EQUIPMENT

- In the month of December, the agency purchased and took delivery of two B. Braun Infusomat Space Pumps (medication infusion pumps).
- Pulse Oximeter to replace a malfunctioning one.
- Verizon Wi-Fi units were added to both ambulances.
- The agency submitted request for bids from Physio-Control, Zoll, and Philips for the purchase of a cardiac monitor with a minimum of the following:
 - Cardiac Monitoring
 - Diagnostic 12-Lead
 - Cardiac Pacing
 - Cardio-Version (Synchronized & Un-Synchronized)
 - Non-Invasive Blood Pressure
 - Pulse Oximetry with Wave Form (spO₂)
 - End-Tidal Carbon Dioxide Monitoring with Wave Form (etCO₂)
 - Carbon Monoxide Monitoring (spCO)
 - Temperature Monitoring
 - 12-Lead Transmission to Agency Receiving Facilities
 - Data Transmission Capabilities to Agency Tablets/Computers
 - Fully Cased
 - Batteries & Battery Charger
 - Trade-in Credit for Current Agency Cardiac Monitors (LP-12)
 - **Physio-Control Price:** \$29,717.35
 - **Zoll Price:** \$25,709.98
 - **Philips:** No Quote Submitted
- The agency requested a quote from Stryker for the purchase of a power stretcher to replace the agency's other stretcher (non-power). The quote is for the Power-PRO with the XPS upgrade. The XPS upgrade allows the stretcher move comfortable accommodate larger patients. The quote also includes a 7-year service plan. The quoted cost is: \$18,730.02

SECTION 5: CORESPONDANCE WITH STAFF, OTHER EMS AGENCIES & OTHER HEALTHCARE AGENGIES

Staff Meeting: November 9th; discussed the transition from TTVEAS to Tri-Town EMS, and the two agencies are not the same, agency priorities, went over basic professional expectations, 2015 budget, uniforms to include the requirement of agency staff to be in agency issued Polo's during the day shift and TTVEAS items will not be allowed after January 1st, up-coming training and training initiatives, the grievance process, Infection Control, Scheduling, Billing procedures for our staff, new forms, shift swapping, vehicle concerns, and equipment updates.

Concord Hospital: November 18th; met with Sue Prentiss and Dr. David Hirsh. Discussed, ways to solve the issue of the facility receiving Patient Care Reports, Tri-Town's efforts with infection control, Alternative ways to administer Cardizem, Up-coming training opportunities provided by the hospital and Tri-Town's efforts to procure new cardiac monitors and returning Concord Hospital's modems that are currently used to transmit 12-lead EKG's..

Medical Control Board Meeting: November 20th; Topics included, Ebola, EMS Best Practices for Mass Gathering Events, Agency's responsibilities for sponsoring EMS licensing (MCB highly recommended not having inactive people on the agency's roster), TEMSIS Updates, HB 1603 – Grandfathering of EMT-I's – was effectively defeated, EMS Protocol Updates; Bariatric Project, Critical Care Update; Drug Diversion (control substance), and Naloxone Shortage.

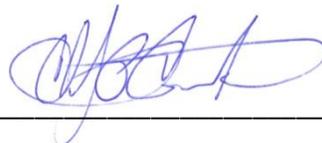
SECTION 6: VEHICLE MAINTENANCE

- Ambulance 2 had lights worked on (Patient Compartment and Scene), sharps containers and hand sanitizers hung in the patient compartment.
- Ambulance 3 had the rear door holders replaced, garbage can replaced, sharps containers and hand sanitizers hung in the patient compartment.

SECTION 7: TRI TOWN EMERGENCY MEDICAL SERVICE LEADERSHIP

- Chairman of the Joint Board & Allenstown Town Administrator: Shaun Mulholland
- Pembroke Town Administrator: David Jodoin
- Allenstown Fire Chief: Dana Pendergast
- Pembroke Fire Chief: Harold Paulsen
- Allenstown Member-At-Large: Veronica "Paige" Lorenz
- Pembroke Member-At-Large: Robert "Bob" Bourque
- Tri-Town EMS Employee Member: Stephanie Locke, NREMT-P
- Tri-Town EMS Director: Christopher Gamache BS, NREMT-P

This monthly Director's Report was created by the agency's director and is represents a summary of available data that was generated for the agency performing EMS runs.



12/07/2014

Director Christopher Gamache

Date





TO: Tri Town Ambulance

PO Box 219
Pembroke, NH 03275

Attn: **Chris Gamache**
Director

email: gamache@pembroke-nh.com
Tel: *

ZOLL Medical Corporation

Worldwide HeadQuarters
269 Mill Rd
Chelmsford, Massachusetts 01824-4105
(978) 421-9655 Main
(800) 348-9011
(978) 421-0015 Customer Support
FEDERAL ID#: 04-2711626

QUOTATION 178412 V:1

DATE: November 24, 2014

TERMS: Net 30 Days

FOB: Shipping Point

FREIGHT: Prepay and Add

ITEM	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
1	601-2231411-01	<p>X Series Manual Monitor/Defibrillator \$14,995 with 4 trace tri-mode display monitor/ defibrillator/ printer. comes with Real CPR Help®, advisory algorithm, advanced communications package (Wi-Fi, Bluetooth, USB cellular modem capable) USB data transfer capable and large 6.5" (16.5cm) diagonal screen, full 12 ECG lead view with both dynamic and static 12-lead mode display.</p> <p>Accessories Included:</p> <ul style="list-style-type: none"> • Six (6) foot 3- Lead ECG cable • MFC cable • MFC CPR connector • A/C power adapter/ battery charger • A/C power cord • One (1) roll printer paper • 6.6 Ah Li-ion battery • Carry case • Declaration of Conformity • Operator's Manual • Quick Reference Guide • One (1)-year EMS warranty <p>Advanced Options:</p> <p>Real CPR Help Expansion Pack \$ 995 CPR Dashboard quantitative depth and rate in real time, release indicator, interruption timer, perfusion performance indicator (PPI)</p> <ul style="list-style-type: none"> • See - Thru CPR artifact filtering <p>ZOLL Noninvasive Pacing Technology: \$2,550</p>	2	\$41,015.00	\$31,581.55	\$63,163.10 *

This quote is made subject to ZOLL's standard commercial terms and conditions (ZOLL T's + C's) which accompany this quote. Any purchase order (P.O.) issued in response to this quotation will be deemed to incorporate ZOLL T's + C's. Any modification of the ZOLL T's + C's must be set forth or referenced in the customer's P.O. No commercial terms or conditions shall apply to the sale of goods or services governed by this quote and the customer's P.O unless set forth in or referenced by either document.

Page 1 Subtotal \$63,163.10

1. DELIVERY WILL BE MADE 60-90 DAYS AFTER RECEIPT OF ACCEPTED PURCHASE ORDER.
2. PRICES QUOTED ARE VALID UNTIL DECEMBER 31, 2014.
3. APPLICABLE TAX, SHIPPING & HANDLING WILL BE ADDED AT THE TIME OF INVOICING.
4. ALL PURCHASE ORDERS ARE SUBJECT TO CREDIT APPROVAL BEFORE ACCEPTABLE BY ZOLL.
5. FAX PURCHASE ORDER AND QUOTATION TO ZOLL CUSTOMER SUPPORT AT 978-421-0015 OR EMAIL TO ESALES@ZOLL.COM.
6. ALL DISCOUNTS OFF LIST PRICE ARE CONTINGENT UPON PAYMENT WITHIN AGREED UPON TERMS.
7. PLACE YOUR ACCESSORY ORDERS ONLINE BY VISITING www.zollwebstore.com.

Ian Foucher
Sr. EMS Territory Manager
603-235-8359





TO: Tri Town Ambulance

PO Box 219
Pembroke, NH 03275

Attn: **Chris Gamache**
Director

email: gamache@pembroke-nh.com
Tel: *

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ITEM	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
		Masimo Pulse Oximetry SP02& SpCO \$4,540 • Signal Extraction Technology (SET) • Rainbow SET (for SpCO & SpMet) NIBP Welch Allyn includes: \$3,495 • Smartcuff 10 foot Dual Lumen hose • SureBP Reusable Adult Medium Cuff End Tidal Carbon Dioxide monitoring (ETCO2) Oridion Microstream Technology: \$4,995 Order required Microstream tubing sets separately Interpretative 12- Lead ECG: \$8,450 • 12-Lead one step ECG cable- includes 4- Lead limb lead cable and removable precordial 6- Lead set Two Temperature monitoring channels with digital displays: \$ 995 Order Temperature probes separately				
2	8000-0341	SpO2/SpCO/SpMet Rainbow Resuable Patient Cable: Connects to Single Use Sensors (4 ft)	2	\$225.00	\$173.25	\$346.50 *
3	8000-000371	SpO2/SpCO/SpMet Rainbow DCI Adult Reusable Sensor with connector (3 ft)	2	\$415.00	\$319.55	\$639.10 *
4	8000-000372	SpO2/SpCO/SpMet Rainbow DCI Reusable Sensor/Cable (3 ft) Pedi	2	\$445.00	\$342.65	\$685.30 *

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Page 2 Subtotal \$64,834.00

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ITEM	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
5	8000-0580-01	Six hour rechargeable Smart battery	3	\$495.00	\$381.15	\$1,143.45 *
6	8200-000100-01	Single Bay Charger for the SurePower and SurePower II batteries	1	\$945.00	\$790.00	\$790.00 *
7	8000-0895	Cuff Kit with Welch Allyn Small Adult, Large Adult and Thigh Cuffs	2	\$157.50	\$121.28	\$242.56 *
8	7800-0312	LifePak 12 Biphasic w/Pacing, 12 lead + 3 parameters or more Trade-In	2		(\$7,795.03)	(\$15,590.06) **

**Trade-In Value valid if all units purchased are in good operational and cosmetic condition, and include all standard accessories such as paddles, cables, etc. Customer assumes responsibility for shipping trade-in equipment to ZOLL Chelmsford within 60 days of receipt of new equipment. Customer agrees to pay cash value for trade-in equipment not shipped to ZOLL on a timely basis.

*Reflects Discount Pricing.

TRADE IN VALUES ARE ONLY VALID UNTIL DECEMBER 31, 2014.

This quote is made subject to ZOLL's standard commercial terms and conditions (ZOLL T's + C's) which accompany this quote. Any purchase order (P.O.) issued in response to this quotation will be deemed to incorporate ZOLL T's + C's. Any modification of the ZOLL T's + C's must be set forth or referenced in the customer's P.O. No commercial terms or conditions shall apply to the sale of goods or services governed by this quote and the customer's P.O. unless set forth in or referenced by either document.

TOTAL \$51,419.95

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 Sr. EMS Territory Manager
 603-235-8359



ZOLL QUOTATION GENERAL TERMS & CONDITIONS

1. ACCEPTANCE. This Quotation constitutes an offer by ZOLL Medical Corporation to sell to the Customer the equipment (including a license to use certain software) listed in this Quotation and described in the specifications either attached to or referred to in this Quotation (hereinafter referred to as "Equipment"). Any acceptance of such offer is expressly limited to the terms of this Quotation, including these General Terms and Conditions. Acceptance shall be so limited to this Quotation notwithstanding (i) any conflicting written or oral representations made by ZOLL Medical Corporation or any agent or employee of ZOLL Medical Corporation or (ii) receipt or acknowledgement by ZOLL Medical Corporation of any purchase order, specification, or other document issued by the Customer. Any such document shall be wholly inapplicable to any sale made pursuant to this Quotation, and shall not be binding in any way on ZOLL Medical Corporation.

Acceptance of this Quotation by the Customer shall create an agreement between ZOLL Medical Corporation and the Customer (hereinafter referred to as the "Contract") the terms and conditions of which are expressly limited to the provisions of this Quotation including these Terms and Conditions. No waiver change or modification of any of the provisions of this Quotation or the Contract shall be binding on ZOLL Medical Corporation unless such waiver, change or modification (i) is made in writing (ii) expressly states that it is a waiver, change or modification of this Quotation or the Contract and (iii) is signed by an authorized representative of ZOLL Medical Corporation.

2. DELIVERY AND RISK OF LOSS. Unless otherwise stated, all deliveries shall be F.O.B. ZOLL Medical Corporation's facility. Risk of loss or damage to the Equipment shall pass to the Customer upon delivery of the Equipment to the carrier.

3. TERMS OF PAYMENT. Unless otherwise stated in its Quotation payment by Customer is due thirty (30) days after the ship date appearing on ZOLL Medical Corporation invoice. Any amounts payable hereunder which remain unpaid after the date shall be subject to a late charge equal to 1.5% per month from the due date until such amount is paid.

4. CREDIT APPROVAL. All shipments and deliveries shall at all times be subject to the approval of credit by ZOLL Medical Corporation. ZOLL Medical Corporation may at any time decline to make any shipment or delivery except upon receipt of payment or security or upon terms regarding credit or security satisfactory to ZOLL Medical Corporation.

5. TAXES & FEES. The pricing quoted in this Quotation do not include sales use, excise, or other similar taxes or any duties or customs charges, or any order processing fees. The Customer shall pay in addition for the prices quoted the amount of any present or future sales, excise or other similar tax or customs duty or charge applicable to the sale or use of the Equipment sold hereunder (except any tax based on the net income of ZOLL Medical Corporation), and any order processing fees that ZOLL may apply from time to time. In lieu thereof the Customer may provide ZOLL Medical Corporation with a tax exemption certificate acceptable to the taxing authorities.

6. WARRANTY. (a) ZOLL Medical Corporation warrants to the Customer that from the earlier of the date of installation or thirty (30) days after the date of shipment from ZOLL Medical Corporation's facility, the Equipment (other than accessories and electrodes) will be free from defects in material and workmanship under normal use and service for the period noted on the reverse side. Accessories and electrodes shall be warranted for ninety (90) days from the date of shipment. During such period ZOLL Medical Corporation will at no charge to the Customer either repair or replace (at ZOLL Medical Corporation's sole option) any part of the Equipment found by ZOLL Medical Corporation to be defective in material or workmanship. If ZOLL Medical Corporation's inspection detects no defects in material or workmanship, ZOLL Medical Corporation's regular service charges shall apply. (b) ZOLL Medical Corporation shall not be responsible for any Equipment defect failure of the Equipment to perform any specified function, or any other nonconformance of the Equipment caused by or attributable to (i) any modification of the Equipment by the Customer, unless such modification is made with the prior written approval of ZOLL Medical Corporation; (ii) the use of the Equipment with any associated or complementary equipment accessory or software not specified by ZOLL Medical Corporation, or (iii) any misuse or abuse of the Equipment; (iv) exposure of the Equipment to conditions beyond the environmental, power or operating constraints specified by ZOLL Medical Corporation, or (v) installation or wiring of the Equipment other than in accordance with ZOLL Medical Corporation's instructions. (c) Warranty does not cover items subject to normal wear and burnout during use, including but not limited to lamps, fuses, batteries, cables and accessories. (d) The foregoing warranty does not apply to software included as part of the Equipment (including software embodied in read-only memory known as "firmware"). (e) The foregoing warranty constitutes the exclusive remedy of the Customer and the exclusive liability of ZOLL Medical Corporation for any breach of any warranty related to the Equipment supplied hereunder. THE WARRANTY SET FORTH HEREIN IS EXCLUSIVE AND ZOLL MEDICAL CORPORATION EXPRESSLY DISCLAIMS ALL OTHER WARRANTIES WHETHER WRITTEN, ORAL, IMPLIED, OR STATUTORY, INCLUDING BUT NOT LIMITED TO ANY WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

7. SOFTWARE LICENSE. (a) All software (the "Software" which term shall include firmware) included as part of the Equipment is licensed to Customer pursuant to a nonexclusive limited license on the terms hereinafter set forth. (b) Customer may not copy, distribute, modify, translate or adapt the Software, and may not disassemble or reverse compile the Software, or seek in any manner to discover, disclose or use any proprietary algorithms, techniques or other confidential information contained therein. (c) All rights in the Software remain the property of ZOLL Medical Corporation, and Customer shall have no right or interest therein except as expressly provided herein. (d) Customer's right to use the Software may be terminated by ZOLL Medical Corporation in the event of any failure to comply with terms of this quotation. (e) Customer may transfer the license conferred hereby only in connection with a transfer of the Equipment and may not retain any copies of the Software following such transfer. (f) ZOLL Medical Corporation warrants that the read-only memory or other media on which the Software is recorded will be free from defects in materials and workmanship for the period and on terms set forth in section 6. (g) Customer understands that the Software is a complex and sophisticated software product and no assurance can be given that operation of the Software will be uninterrupted or error-free, or that the Software will meet Customer's requirements. Except as set forth in section 7(f), ZOLL MEDICAL CORPORATION MAKES NO REPRESENTATIONS OR WARRANTIES WITH RESPECT TO THE SOFTWARE AND IN PARTICULAR DISCLAIMS ANY IMPLIED WARRANTIES OR MERCHANTABILITY OR FITNESS OF A PARTICULAR PURPOSE WITH RESPECT THERETO. Customer's exclusive remedy for any breach of warranty or defect relating to the Software shall be the repair or replacement of any defective read-only memory or other media so that it correctly reproduces the Software. This License applies only to ZOLL Medical Corporation Software.

8. DELAYS IN DELIVERY. ZOLL Medical Corporation shall not be liable for any delay in the delivery of any part of the Equipment if such delay is due to any cause beyond the control of the ZOLL Medical Corporation including, but not limited to acts of God, fires, epidemics, floods, riots, wars, sabotage, labor disputes, governmental actions, inability to obtain materials, components, manufacturing facilities or transportation or any other cause beyond the control of ZOLL Medical Corporation. In addition ZOLL Medical Corporation shall not be liable for any delay in delivery caused by failure of the Customer to provide any necessary information in a timely manner. In the event of any such delay, the date of shipment or performance hereunder shall be extended to the period equal to the time lost by reason of such delay. In the event of such delay ZOLL Medical Corporation may allocate available Equipment among its Customers on any reasonable and equitable basis. The delivery dates set forth in this Quotation are approximate only and ZOLL Medical Corporation shall not be liable for or shall the Contract be breached by, any delivery by ZOLL Medical Corporation within a reasonable time after such dates.

9. LIMITATIONS OF LIABILITY. IN NO EVENT SHALL ZOLL MEDICAL CORPORATION BE LIABLE FOR INDIRECT SPECIAL OR CONSEQUENTIAL DAMAGES RESULTING FROM ZOLL MEDICAL CORPORATION'S PERFORMANCE OR FAILURE TO PERFORM PURSUANT TO THIS QUOTATION OR THE CONTRACT OR THE FURNISHING, PERFORMANCE, OR USE OF ANY EQUIPMENT OR SOFTWARE SOLD HERETO, WHETHER DUE TO A BREACH OF CONTRACT, BREACH OF WARRANTY, THE NEGLIGENCE OF ZOLL MEDICAL CORPORATION OR OTHERWISE.

10. PATENT INDEMNITY. ZOLL Medical Corporation shall at its own expense defend any suit that may be instituted against the Customer for alleged infringement of any United States patents or copyrights related to the parts of the Equipment or the Software manufactured by ZOLL Medical Corporation, provided that (i) such alleged infringement consists only in the use of such Equipment or the Software by itself and not as a part of or in combination with any other devices or parts, (ii) the Customer gives ZOLL Medical Corporation immediate notice in writing of any such suit and permits ZOLL Medical Corporation through counsel of its choice, to answer the charge of infringement and defend such suit, and (iii) the Customer gives ZOLL Medical Corporation all requested information, assistance and authority at ZOLL Medical Corporation's expense, to enable ZOLL Medical Corporation to defend such suit.

In the case of a final award of damages for infringement in any such suit, ZOLL Medical Corporation will pay such award, but it shall not be responsible for any settlement made without its written consent.

Section 10 states ZOLL Medical Corporation's total responsibility and liability's, and the Customer's sole remedy for any actual or alleged infringement of any patent by the Equipment or the Software or any part thereof provided hereunder. In no event shall ZOLL Medical Corporation be liable for any indirect, special, or consequential damages resulting from any such infringement.

11. CLAIMS FOR SHORTAGE. Each shipment of Equipment shall be promptly examined by the Customer upon receipt thereof. The Customer shall inform ZOLL Medical Corporation of any shortage in any shipment within ten (10) days of receipt of Equipment. If no such shortage is reported within ten (10) day period, the shipment shall be conclusively deemed to have been complete.

12. RETURNS AND CANCELLATION. (a) The Customer shall obtain authorization from ZOLL Medical Corporation prior to returning any of the Equipment. (b) The Customer receives authorization from ZOLL Medical Corporation to return a product for credit, the Customer shall be subject to a restocking charge of twenty percent (20%) of the original list purchase price, but not less than \$50.00 per product. (c) Any such change in delivery caused by the Customer that causes a delivery date greater than six (6) months from the Customer's original order date shall constitute a new order for the affected Equipment in determining the appropriate list price.

13. APPLICABLE LAW. This Quotation and the Contract shall be governed by the substantive laws of the Commonwealth of Massachusetts without regard to any choice of law provisions thereof.

14. COMPLIANCE WITH LAWS. (a) ZOLL Medical Corporation represents that all goods and services delivered pursuant to the Contract will be produced and supplied in compliance with all applicable state and federal laws and regulations, including the requirements of the Fair Labor Standards Act of 1938, as amended. (b) The Customer shall be responsible for compliance with any federal, state and local laws and regulations applicable to the installation or use of the Equipment furnished hereunder, and will obtain any permits required for such installation and use.

15. NON-WAIVER OF DEFAULT. In the event of any default by the Customer, ZOLL Medical Corporation may decline to make further shipments or render any further warranty or other services without in any way affecting its right under such order. If despite any default by Customer, ZOLL Medical Corporation elects to continue to make shipments its action shall not constitute a waiver of any default by the Customer or in any way affect ZOLL Medical Corporation's legal remedies regarding any such default. No claim or right arising out of a breach of the Agreement by the Customer can be discharged in whole or in part by waiver or renunciation of the claim or right unless the waiver or renunciation is supported by consideration and is in writing signed by ZOLL Medical Corporation.

16. ASSIGNMENT. This Quotation, and the Contract, may not be assigned by the Customer without the prior written consent of ZOLL Medical Corporation, and any assignment without such consent shall be null and void.

17. TITLE TO PRODUCTS. Title to right of possession of the products sold hereunder shall remain with ZOLL Medical Corporation until ZOLL Medical Corporation delivers the Equipment to the carrier and agrees to do all acts necessary to perfect and maintain such right and title in ZOLL Medical Corporation. Failure of the Customer to pay the purchase price for any product when due shall give ZOLL Medical Corporation the right, without liability to repossess the Equipment, with or without notice, and to avail itself of any remedy provided by law.

18. EQUAL EMPLOYMENT OPPORTUNITY / AFFIRMATIVE ACTION.

VETERAN'S EMPLOYMENT - If this order is subject to Executive Order 11710 and the rules, regulations, or orders of the Secretary of Labor issued thereunder the contract clause as set forth at 41 CFR 60-250.4 is hereby included as part of this order.

EMPLOYMENT OF HANDICAPPED - If this order is subject to Section 503 of the Rehabilitation Act of 1973, as amended and the rules, regulations or orders of the Secretary of Labor as issued thereunder, the contract clause at 41 CFR 60-741.7 is hereby included as part of this order.

EQUAL OPPORTUNITY EMPLOYMENT - If this order is subject to the provisions of Executive Order 11246, as amended, and the rules, regulations or orders of the Secretary of Labor issued thereunder, the contract clause set forth at 41 CFR 60-1.4 (a) and 60-1.4 (b) are hereby included as a part of this order and Seller agrees to comply with the reporting requirements set forth at 41 CFR 60-1.7 and the affirmative action compliance program requirements set forth as 41 CFR 60-1.40.

19. VALIDITY OF QUOTATION. This Quotation shall be valid and subject to acceptance by the Customer, in accordance with the terms of Section 1 hereof for the period set forth on the face hereof. After such period, the acceptance of this Quotation shall not be binding upon ZOLL Medical Corporation and shall not create a contract, unless such acceptance is acknowledged and accepted by ZOLL Medical Corporation by a writing signed by an authorized representative of ZOLL Medical Corporation.

20. GENERAL. Any Contract resulting from this Quotation shall be governed by and interpreted in accordance with the laws of the Commonwealth of Massachusetts. This constitutes the entire agreement between Buyer and Supplier with respect to the purchase and sale of the Products described in the face hereof, and only representations or statements contained herein shall be binding upon Supplier as a warranty or otherwise. Acceptance or acquiescence in the course of performance rendered pursuant hereto shall not be relevant to determine the meaning of this writing even though the accepting or acquiescing party has knowledge of the nature of the performance and opportunity for objection. No addition to or modification of any of the terms and conditions specified herein shall be binding upon Supplier unless made in writing and signed by a duly authorized representative of Supplier. The terms and conditions specified shall prevail notwithstanding any variance from the terms and conditions of any order or other form submitted by Buyer for the Products set forth on the face of this Agreement. To the extent that this writing may be treated as an acceptance of Buyer's prior offer, such acceptance is expressly made conditional on assent by Buyer to the terms hereof, and, without limitation, acceptance of the goods by Buyer to the terms hereof, and, without limitation, acceptance of the goods by Buyer shall constitute such assent. All cancellations and reschedules require a minimum of thirty (30) days notice.



Physio-Control, Inc.
 11811 Willows Road NE
 P.O. Box 97023
 Redmond, WA 98073-9723 U.S.A
 www.physio-control.com
 tel 800.442.1142
 fax 800.732.0956

To: Chris Gamache
 Tri Town Ambulance
 247 Pembroke St
 PEMBROKE, NH 03275
 Phone: (603) 430-5569
 cgamache@pembroke-nh.com

Quote#: 1-270662698
Rev#: 3
Quote Date: 11/24/2014
Sales Consultant: Peter Landry
 800-442-1142 x 72166
FOB: Redmond, WA

Terms: All quotes subject to credit approval and the following terms & conditions

Contract: None

Exp Date: 02/22/2015

Line	Catalog # / Description	Qty	Price	Unit Disc	Trade-In	Unit Price	Ext Total
1	99577-001218 - LP15 v2 MONITOR/DEFIB, CPR, Pace, to 360J, SPO2/CO, 12L GL, NIBP, CO2, Trend, BT, TMP INCLUDED AT NO CHARGE: 2 PAIR QUIK-COMBO ELECTRODES PER UNIT - 11996-000091, TEST LOAD - 21330-001365, N-SERVICE DVD - 21330-001486 (one per order), SERVICE MANUAL CD - 21300-008084 (one per order) and ShipKit- (RC Cable) 41577-000109 INCLUDED. HARD PADDLES, BATTERIES, CARRYING CASE NOT INCLUDED.	1	\$34,545.00	\$5,181.75	\$3,500.00	\$25,863.25	\$25,863.25
2	21330-001176 - LI-ION BATTERY 5.7 AMP HOUR CAPACITY RECHARGEABLE LITHIUM-ION, WITH FUEL GAUGE	3	\$424.00	\$63.60	\$0.00	\$360.40	\$1,081.20
3	11140-000052 - LP 15 ADAPTER- REDI-CHARGE BATTERY CHARGER LP 15 ADAPTER- REDI-CHARGE BATTERY CHARGER	1	\$185.00	\$27.75	\$0.00	\$157.25	\$157.25
4	11171-000046 - M-LNCS DCI, ADULT REUSABLE SENSOR, REF 2501 M-LNCS DCI, ADULT REUSABLE SENSOR, REF 2501	1	\$295.00	\$44.25	\$0.00	\$250.75	\$250.75
5	11171-000049 - RAINBOW DCI ADT REUSABLE SENSOR, REF 2696 RAINBOW DCI ADT REUSABLE SENSOR, REF 2696	1	\$796.00	\$119.40	\$0.00	\$676.60	\$676.60
6	11160-000001 - NIBP CUFF- REUSEABLE,INFANT	1	\$21.00	\$3.15	\$0.00	\$17.85	\$17.85
7	11160-000003 - NIBP CUFF- REUSEABLE,CHILD	1	\$24.00	\$3.60	\$0.00	\$20.40	\$20.40
8	11160-000007 - NIBP CUFF- REUSEABLE,LARGE ADULT	1	\$32.00	\$4.80	\$0.00	\$27.20	\$27.20
9	11160-000009 - NIBP CUFF- REUSEABLE,X-LARGE ADULT	1	\$47.00	\$7.05	\$0.00	\$39.95	\$39.95
10	21300-007299 - NIBP TUBING - 9 FOOT FOR USE WITH LIFEPAK 15 MONITOR/DEFIBRILLATOR	1	\$54.00	\$8.10	\$0.00	\$45.90	\$45.90



Quote#: 1-270662698
 Rev#: 3
 Quote Date: 11/24/2014

Quote Products (continued)

Line	Catalog # / Description	Qty	Price	Unit Disc	Trade-In	Unit Price	Ext Total
11	11577-000002 - LIFEPAK 15 Basic Carry Case w/ right & left pouches Includes shoulder strap 11577-000001	1	\$284.00	\$42.60	\$0.00	\$241.40	\$241.40
12	11220-000028 - Top Pouch Storage for sensors and electrodes. Insert in place of standard paddles.	1	\$50.00	\$7.50	\$0.00	\$42.50	\$42.50
13	11260-000039 - LP15 Rear Pouch for carrying case	1	\$73.00	\$10.95	\$0.00	\$62.05	\$62.05
14	11996-000360 - Temp Sensor, Esophageal-Rectal, 9FR, Disp (box of 20)	1	\$153.00	\$22.95	\$0.00	\$130.05	\$130.05
15	21996-000073 - TITAN II WIRELESS GATEWAY	1	\$876.00	\$0.00	\$0.00	\$876.00	\$876.00

SUB TOTAL \$29,532.35
 ESTIMATED TAX \$0.00
 ESTIMATED SHIPPING & HANDLING \$185.00
GRAND TOTAL \$29,717.35

Trade-in Detail			
Product	Qty	Unit Value	Total Value
Pricing Summary Totals			
List Price:			\$38,707.00
Trade-ins:			- \$3,500.00
Cash Discounts:			- \$5,674.65
Tax + S&H:			+ \$185.00

GRAND TOTAL FOR THIS QUOTE \$29,717.35



**TO PLACE AN ORDER, PLEASE FAX A COPY OF THE QUOTE AND PURCHASE ORDER TO:
800-732-0956, ATTN: REP SUPPORT**

PHYSIO-CONTROL, INC. REQUIRES WRITTEN VERIFICATION OF THIS ORDER. A PURCHASE ORDER IS REQUIRED ON ALL ORDERS \$10,000 OR GREATER BEFORE APPLICABLE FREIGHT AND TAXES. THE UNDERSIGNED IS AUTHORIZED TO ACCEPT THIS ORDER IN ACCORDANCE WITH THE TERMS AND PRICES DENOTED HEREIN. SIGN TO THE RIGHT:

CUSTOMER APPROVAL (AUTHORIZED SIGNATURE)

NAME

TITLE

DATE

Ref. Code: CH/10257401/1-4GPI8Q

Notes:

Taxes, shipping and handling fees are estimates only and are subject to change at the time of order. Shipping and handling applies to ground transport only. Physio-Control will assess a \$10 handling fee on any order less than \$200.00.

Above pricing valid only if all items in quote are purchased (optional items not required).

To receive a trade-in credit, Buyer agrees to return the trade-in device(s) within 30 days of receipt of the replacement device(s) to Physio-Control's place of business or to an authorized Physio-Control representative. Physio-Control will provide instructions for returning the device(s) and will pay for the associated shipping cost.

In the event that trade-in device(s) are not received by Physio-Control within the 30-day window, Buyer acknowledges that this quote shall constitute a purchase order and agrees to be invoiced for the amount of the trade-in discount. Invoice shall be payable upon receipt.

Items listed above at no charge are included as part of a package discount that involves the purchase of a bundle of items. Buyer is solely responsible for appropriately allocating the discount extended on the bundle when fulfilling any reporting obligations it might have.

If Buyer is ordering service, Buyer affirms reading and accepts the terms of the Physio-Control, Inc. Technical Service Support Agreement which is available from your sales representative or <http://www.physio-control.com/uploadedFiles/products/service-plans/TechnicalServiceAgreement.pdf>

1 LIFEPAK 12 Biphasic 2 Feature trade in

Trade-in values are a function of the market value and the condition of the device at the time of trade in, thus values may be subject to change. Please note that device serial numbers are required at time of order.

TERMS OF SALE

General Terms

Physio-Control, Inc.'s acceptance of the Buyer's order is expressly conditioned on product availability and the Buyer's assent to the terms set forth in this document and its attachments. Physio-Control, Inc. agrees to furnish the goods and services ordered by the Buyer only on these terms, and the Buyer's acceptance of any portion of the goods and services covered by this document shall confirm their acceptance by the Buyer. These terms constitute the complete agreement between the parties and they shall govern any conflicting or ambiguous terms on the Buyer's purchase order or on other documents submitted to Physio-Control, Inc. by the Buyer. These terms may only be revised or amended by a written agreement signed by an authorized representative of both parties.

Pricing

Unless otherwise indicated in this document, prices of goods and services covered by this document shall be Physio-Control, Inc. standard prices in effect at the time of delivery. Prices do not include freight insurance, freight forwarding fees, taxes, duties, import or export permit fees, or any other similar charge of any kind applicable to the goods and services covered by this document. Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services covered by this document unless Physio-Control, Inc. receives a copy of a valid exemption certificate prior to delivery. Please forward your tax exemption certificate to the Physio-Control, Inc. Tax Department P.O. Box 97006, Redmond, Washington 98073-9706.

Payment

Unless otherwise indicated in this document or otherwise confirmed by Physio-Control, Inc. in writing, payment for goods and services supplied by Physio-Control, Inc. shall be subject to the following terms:

- Domestic (USA) Sales - Upon approval of credit by Physio-Control, Inc., 100% of invoice due thirty (30) days after invoice date.
- International Sales - Sight draft or acceptable (confirmed) irrevocable letter of credit.

Physio-Control, Inc. may change the terms of payment at any time prior to delivery by providing written notice to the Buyer.

Delivery

Unless otherwise indicated in this document, delivery shall be FOB Physio-Control, Inc. point of shipment and title and risk of loss shall pass to the Buyer at that point. Partial deliveries may be made and partial invoices shall be permitted and shall become due in accordance with the payment terms. In the absence of shipping instructions from the Buyer, Physio-Control, Inc. will obtain transportation on the Buyer's behalf and for the Buyer's account.

Delays

Delivery dates are approximate. Physio-Control, Inc. will not be liable for any loss or damage of any kind due to delays in delivery or non-delivery resulting from any cause beyond its reasonable control, including but not limited to, acts of God, labor disputes, the requirements of any governmental authority, war, civil unrest, terrorist acts, delays in manufacture, obtaining any required license or permit, and Physio-Control, Inc. inability to obtain goods from its usual sources. Any such delay shall not be considered a breach of Physio-Control, Inc. and the Buyer's agreement and the delivery dates shall be extended for the length of such delay.

Inspections and Returns

Claims by the Buyer for damage to or shortages of goods delivered shall be made within thirty (30) days after shipment by providing Physio-Control, Inc. with written notice of any deficiency. Payment is not contingent upon immediate correction of any deficiencies and Physio-Control, Inc. prior approval is required before the return of any goods to Physio-Control, Inc. Physio-Control, Inc. reserves the right to charge a 15% restocking fee for returns. The Physio-Control Returned Product Policy is located at http://www.physio-control.com/uploadedFiles/support/ReturnPolicy_3308529_A.pdf.

Service Terms

All device service will be governed by the Physio-Control, Inc. Technical Services Support Agreement which is available from your sales representative or <http://www.physio-control.com/uploadedFiles/products/service-plans/TechnicalServiceAgreement.pdf>. All devices that are not under Physio-Control Limited Warranty or a current Technical Service Support Agreement must be inspected and repaired (if necessary) to meet original specifications at then-current list prices prior to being covered under a Technical Service Support Agreement. If Buyer is ordering service, Buyer affirms reading and accepts the terms of the Technical Service Support Agreement.

Warranty

Physio-Control, Inc. warrants its products in accordance with the terms of the standard Physio-Control, Inc. product warranty applicable to the product to be supplied. Physio-Control, Inc. warrants services and replacement parts provided in performing such services against defects in accordance with the terms of the Physio-Control, Inc. service warranty set forth in the Technical Service Support Agreement. The remedies provided under such warranties shall be the Buyer's sole and exclusive remedies. Physio-Control, Inc. makes no other warranties, express or implied, including, without limitation, NO WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND IN NO EVENT SHALL PHYSIO-CONTROL, INC. BE LIABLE FOR INCIDENTAL, CONSEQUENTIAL, SPECIAL OR OTHER DAMAGES.

Patent & Indemnity

Upon receipt of prompt notice from the Buyer and with the Buyer's authority and assistance, Physio-Control, Inc. agrees to defend, indemnify and hold the Buyer harmless against any claim that the Physio-Control, Inc. products covered by this document directly infringe any United States of America patent.

Miscellaneous

a) The Buyer agrees that products purchased hereunder will not be reshipped or resold to any persons or places prohibited by the laws of the United States of America. b) Through the purchase of Physio-Control, Inc. products, the Buyer does not acquire any interest in any tooling, drawings, design information, computer programming, patents or copyrighted or confidential information related to said products, and the Buyer expressly agrees not to reverse engineer or decompile such products or related software and information. c) The rights and obligations of Physio-Control, Inc. and the Buyer related to the purchase and sale of products and services described in this document shall be governed by the laws of the State of Washington, United States of America. All costs and expenses incurred by the prevailing party related to enforcement of its rights under this document, including reasonable attorneys fees, shall be reimbursed by the other party.



Comprehensive Quotation

Sales Account Manager
 RYAN SHAUGHNESSY
 Ryan.Shaughnessy@stryker.com
 1-800-327-0770

Remit to:
 P.O. Box 93308
 Chicago, IL 60673-3308

End User Shipping Address	Shipping Address	Billing Address
1245721 STRYKER QUOTE 3800 E CENTRE AVE PORTAGE, MI 49002	1245721 STRYKER QUOTE 3800 E CENTRE AVE PORTAGE, MI 49002	1245721 STRYKER QUOTE 3800 E CENTRE AVE PORTAGE, MI 49002

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
Chris Gamache	3893618	12/03/2014	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1.00	1	Power-PRO XT	6506000000	\$16,239.52	\$16,239.52	
		Options				
	1	Power-PRO XT	6506000000	\$16,239.52	\$16,239.52	
	1	Dual Wheel Lock	6086602010			
	1	PR Cot Retaining Post	6085033000			
	1	Power Pro Standard Components	6506026000			
	1	XPS Option	6506040000			
	1	No Runner/HE O2	0054200994			
	1	Equipment Hook	6500147000			
	1	Non Power-Load Compatible	6506029000			
	1	Trendelenburg	6085031000			
	1	Retractable Head Section O2	6085046000			
	1	Pocketed Back Rest Pouch	6500130000			
	1	Head End Storage Flat	6500128000			
	1	English Manual	6506600000			
	1	SMRT Charger Mounting Bracket	6500034000			
	1	120V AC SMRT Charging Kit	6500028000			
	1	Short Hook	6060036017			
	1	XPS Knee Gatch Bolster Matrss	6500003130			
	1	No Steer Lock Option	6506037000			
	1	3 YR X-Frame Powertrain Wmty	7777881669			
	1	2 Yr Bumper to Bumper Warranty	7777881670			
	1	DOM SHIP (NOT HI, AK, PR, GM)	0054030000			
	1	3 Stage IV Pole PR Option	6500315000			
	1	G-RATED RESTRAINT PACKAGE	6500002030			
2.00	1	Protect Power Cot 6506- 7year	77115001	\$2,490.50	\$2,490.50	

Note:

Product Total	\$18,730.02
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$18,730.02

Signature: _____ Title/Position: _____ Date: _____

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.
Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.
Terms: Net 30 Days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.
Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

