

## RESPONSE PREPARED FOR: City of Laredo Metro Fire Department

Request for Bid for X Series Advanced Cardiac Monitor Supplies and Accessories Bid #FY24-044

Bid Due Date: February 15, 2024 5:00PM CT











269 Mill Road Chelmsford, MA 01824 978.421.9655 (main) 978.421.0025 (fax) zoll.com

February 14, 2024

Jesus E. Lopez City of Laredo Metro Fire Department 616 East Del Mar Blvd Laredo, TX 78040

Re: Request for Bid FY24-044 X Series Advanced Cardiac Monitor Supplies and Accessories

Jesus E. Lopez:

ZOLL® Medical Corporation ("ZOLL") is pleased to respond to your <u>Request for Bid of X Series Advanced Cardiac Monitor Supplies and Accessories.</u>

ZOLL is focused on improving patient outcomes with "cutting-edge" resuscitation and acute critical care technology. Our family of products offers the most integrated system of clinical solutions for Fire and EMS services as well as complementary products and services to provide data integration and management. We understand the unique needs of first responders and for four decades have been committed to developing "leading-edge" resuscitation products with those needs in mind; to that end our proposal was developed by taking into consideration your needs, and we are pleased to offer our X Series Advanced Cardiac Monitor Supplies and Accessories.

We believe we have offered very compelling clinical reasons for City of Laredo Metro Fire Department to include ZOLL in its award decision and we are confident that ZOLL's clinically advanced technology would significantly improve clinical outcomes for the Metro Fire Department. We are confident that our proposal is comprehensive and responsive. We respectfully request that you consider the X Series Advanced Cardiac Monitor Supplies and Accessories on the unique merits and benefits of each.

The City of Laredo Metro Fire Department is a member of National Purchasing Partners (NPP) PS20200 GPO Contract. NPP features competitive prices on ZOLL defibrillators and related accessories, these discounted prices are available to you only under the terms and conditions and insurance provisions of the National Purchasing Partners (NPP) PS20200 GPO Contract. If ZOLL is awarded this bid, the terms and conditions of the NPP PS20200 GPO Membership exclusively apply and shall be incorporated by reference, with no additional terms or insurance provisions added, unless as mutually agreed upon by the Parties. However, should City of Laredo Metro Fire Department not be amenable to this approach making purchases for the discounted prices provided in this bid submittal, the pricing provided in this submittal cannot be honored and ZOLL reserves the right to adjust the pricing accordingly and negotiate the final agreement terms and conditions.

Thank you for the opportunity to respond to this bid request. We stand ready to serve the needs of the City of Laredo Metro Fire Department and look forward to the possibility of a long and mutually rewarding partnership. If you need further information or have any questions concerning this submittal, please do not hesitate to contact Sr. Territory Manager, EMS Shayla Price at (317) 504-5421 or by e-mail at

<u>shayla.price@zoll.com</u> or Territory Manager, CPR Marcos Villarreal at (210) 202-7696 or by email at <u>marcos.villarreal@zoll.com</u>.

With Regards,

## Shayla Price

Shayla Price Sr. Territory Manager EMS SP/JP

## Marcs Villarreal

Marcos Villarreal Territory Manager CPR MV/JP

**Enclosures** 



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## Section 1 ZOLL Quotes











269 Mill Road Chelmsford, MA 01824-4105 Federal ID# 04-2711626

> Phone: (800) 348-9011 Fax: (978) 421-0015 Email: esales@zoll.com

Issued Date: February 8, 2024

Expiration Date: March 31, 2024

Quote No: Q-75899

Version: 1

Quote No: Q-75899 Version: 1

Laredo Metro Fire Department 616 East Del Mar Blvd Laredo, TX 78045

ZOLL Customer No: 233250

Robert Gonzalez 9567403948 rgonzalez8@ci.laredo.tx.us

FOB: Destination

Freight: Free Freight

Terms: NET 30 DAYS

Prepared by: Shayla Price **EMS Territory Manager** sshircliff@zoll.com +1 3175045421

Item	Contract Reference	Part Number	Description	Qty	List Price	Adj. Price	Total Price
1	1374349	8900-0402	CPR Stat-padz HVP Multi-Function CPR Electrodes - 1 pair	1	\$95.00	\$71.25	\$71.25
2	1374349	8300-000676	OneStep Cable, X Series		\$544.00	\$446.08	\$446.08
3	1374349	8009-0020	CPR-D-padz and CPR Stat Padz Connector		\$471.00	\$386.22	\$386.22
4	1374349	8900-000220-01	OneStep Pediatric CPR Electrode (8 per case)	1	\$831.00	\$681.42	\$681.42
5	1374349	8000-001128	Accuvent Flow Tube (Box of 10)	1	\$762.00	\$624.84	\$624.84
6	1374349	REUSE-09-2MQ	Welch Allyn REUSE-09-2MQ Cuff, Child, 2-Tube, Twist Lock connector	1	\$63.00	\$51.66	\$51.66
7	1374349	8000-000151	RD Rainbow SET MD20-04 EMS Patient Cable, 4ft	1	\$299.00	\$245.18	\$245.18
8	1374349	8000-000862	LNCS-II Rainbow DCI 8λ SpCO Adult Sensor, 3ft	1	\$1,080.00	\$843.78	\$843.78
9	1374349	8000-000875-01	Paper, Thermal, BPA Free (Box of 6)	1	\$30.00	\$24.60	\$24.60
10	1374349	8000-000819	RD Rainbow Pediatric 8λ SpCO Adhesive Sensor (10/box)	1	\$969.00	\$794.58	\$794.58
11	1374349	REUSE-07-2MQ	Welch Allyn REUSE-07-2MQ Cuff, Infant, 2-Tube, Twist Lock connector	1	\$63.00	\$51.66	\$51.66



269 Mill Road Chelmsford, MA 01824-4105 Federal ID# 04-2711626

> Phone: (800) 348-9011 Fax: (978) 421-0015 Email: esales@zoll.com

Laredo Metro Fire Department Quote No: Q-75899 Version: 1

Item	Contract Reference	Part Number	Description	Qty	List Price	Adj. Price	Total Price
12	1374349	8000-000863	LNCS-II Rainbow DCIP 8λ SpCO Pediatric Sensor, 3ft	1	\$1,080.00	\$843.78	\$843.78
13	1374349	8000-0895	Cuff Kit with Welch Allyn Small Adult, Large Adult and Thigh Cuffs	1	\$186.00	\$152.52	\$152.52

Subtotal: \$5,217.57

Total: \$5,217.57

Contract Reference	Description
1374349	Reflects GPO NPP 2020 - Contract No. PS20200 contract pricing. Notwithstanding anything to the contrary herein, the terms and conditions set forth in NPP 2020 - Contract No. PS20200 shall apply to the customer's purchase of the products set forth on this quote.

To the extent that ZOLL and Customer, or Customer's Representative have negotiated and executed overriding terms and conditions ("Overriding T's & C's"), those terms and conditions would apply to this quotation. In all other cases, this quote is made subject to ZOLL's Standard Commercial Terms and Conditions ("ZOLL T's & C's") which for capital equipment, accessories and consumables can be found at <a href="https://www.zoll.com/about-zoll/invoice-terms-and-conditions">https://www.zoll.com/about-zoll/invoice-terms-and-conditions</a> and for software products can be found at <a href="http://www.zoll.com/SSPTC">https://www.zoll.com/SSPTC</a> and for hosted software products can be found at <a href="http://www.zoll.com/SSPTC">http://www.zoll.com/SSPTC</a>. Except in the case of overriding T's and C's, any Purchase Order ("PO") issued in response to this quotation will be deemed to incorporate ZOLL T's & C's, and any other terms and conditions presented shall have no force or effect except to the extent agreed in writing by ZOLL.

- 1. Delivery will be made upon availability.
- 2. This Quote expires on March 31, 2024. Pricing is subject to change after this date.
- 3. Applicable tax, shipping & handling will be added at the time of invoicing.
- 4. All purchase orders are subject to credit approval before being accepted by ZOLL.
- 5. To place an order, please forward the purchase order with a copy of this quotation to esales@zoll.com or via fax to 978-421-0015.
- 6. All discounts from list price are contingent upon payment within the agreed upon terms.
- 7. Place your future accessory orders online by visiting the ZOLL Webstore.



269 Mill Road Chelmsford, MA 01824-4105 Federal ID# 04-2711626

> Phone: (800) 348-9011 Fax: (978) 421-0015 Email: esales@zoll.com

Laredo Metro Fire Department Quote No: Q-75899 Version: 1

Order Information (to be completed by the customer)								
[ ] Tax Exempt Entity (Tax Exempt Certificate must be provide	ded to ZOLL)							
] Taxable Entity (Applicable tax will be applied at time of invoice)								
BILL TO ADDRESS	SHIP TO ADDRESS							
Name/Department:	Name/Department:							
Address:	Address:							
City / State / Zip Code:	City / State / Zip Code:							
Is a Purchase Order (PO) required for the purchase and/or paymen  [ ] Yes PO Number: PO  (A copy of the Purchase Order must be included)	Amount:							
[ ] No (Please complete the below section when submi	•							
For organizations that do not require a PO, ZOLL requires written of warrants that she or he has the authority to bind the party for which   Laredo Metro Fire Department  Authorized Signature:								
Name:								
Title:								
Date:								



269 Mill Road Chelmsford, MA 01824-4105 Federal ID# 04-2711626

> Phone: (800) 348-9011 Fax: (978) 421-0015 Email: esales@zoll.com

Quote No: Q-75844 Version: 1

Laredo Metro Fire Department 616 East Del Mar Blvd Laredo, TX 78045

ZOLL Customer No: 233250

Robert Gonzalez 9567403948 rgonzalez8@ci.laredo.tx.us

Quote No: Q-75844 Version: 1

Issued Date: February 8, 2024 Expiration Date: March 31, 2024

Terms: NET 30 DAYS

FOB: Destination Freight: Free Freight

Prepared by: Marcos Villarreal **EMS CPR Territory Manager** marcos.villarreal@zoll.com +1 2102027696

Item	Contract Reference	Part Number	Description	Qty	List Price	Adj. Price	Total Price
1	1374349	8700-0706-01	LifeBand 3 pack	500	\$457.00	\$447.86	\$223,930.00
			Single-use chest compression band (3 per package)				
2	1374349	8700-0710-01	AutoPulse Head Immobilizer (5 per package)	500	\$68.00	\$66.64	\$33,320.00
3	1374349	8700-0709-01	AutoPulse Shoulder Restraint	500	\$74.00	\$72.52	\$36,260.00
4	1374349	12-0822-000	ResQPOD ITD 16	500	\$141.00	\$138.18	\$69,090.00

Subtotal: \$362,600.00

\$362,600.00 Total:

Contract Reference	Description
1374349	Reflects GPO NPP 2020 - Contract No. PS20200 contract pricing. Notwithstanding anything to the contrary herein, the terms and conditions set forth in NPP 2020 - Contract No. PS20200 shall apply to the customer's purchase of the products set forth on this quote.

To the extent that ZOLL and Customer, or Customer's Representative have negotiated and executed overriding terms and conditions ("Overriding T's & C's"), those terms and conditions would apply to this quotation. In all other cases, this quote is made subject to ZOLL's Standard Commercial Terms and Conditions ("ZOLL T's & C's") which for capital equipment, accessories and consumables can be found at https://www.zoll.com/about-zoll/invoice-terms-and-conditions and for software products can be found at http://www.zoll.com/SSPTC and for hosted software products can be found at http://www.zoll.com/SSHTC. Except in the case of overriding T's and C's, any Purchase Order ("PO") issued in response to this quotation will be deemed to incorporate ZOLL T's & C's, and any other terms and conditions presented shall have no force or effect except to the extent agreed in writing by ZOLL.

1. Delivery will be made upon availability.



269 Mill Road Chelmsford, MA 01824-4105 Federal ID# 04-2711626

> Phone: (800) 348-9011 Fax: (978) 421-0015 Email: esales@zoll.com

Laredo Metro Fire Department Quote No: Q-75844 Version: 1

- 2. This Quote expires on March 31, 2024. Pricing is subject to change after this date.
- 3. Applicable tax, shipping & handling will be added at the time of invoicing.
- 4. All purchase orders are subject to credit approval before being accepted by ZOLL.
- 5. To place an order, please forward the purchase order with a copy of this quotation to <a href="mailto:esales@zoll.com">esales@zoll.com</a> or via fax to 978-421-0015.

	price are contingent upon payment within ressory orders online by visiting the ZOLL \						
Order Information (to	be completed by the customer)						
[ ] Tax Exempt E	ntity (Tax Exempt Certificate must be provi	ded to ZOLL)					
[ ] Taxable Entity	(Applicable tax will be applied at time of in	voice)					
BILL TO ADDRESS		SHIP TO ADDRESS					
Name/Department: Name/Department:							
Address:		Address:					
City / State / Zip Code	:	City / State / Zip Code:					
[ ] Yes PO N (A co	py of the Purchase Order must be included se complete the below section when submon to not require a PO, ZOLL requires written	Amount: I with this Quote when returned to ZOLL)					
Laredo Metro Fire Authorized Signature	•						
Name:							
Title:							
Date:							



## Section 2 City of Laredo Forms









#### **CONFLICT OF INTEREST QUESTIONNAIRE**

FORM CIQ

For vendor doing business with local governmental entity									
This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.	OFFICE USE ONLY								
This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).	Date Received								
By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.									
A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.									
Name of vendor who has a business relationship with local governmental entity.									
Check this box if you are filing an update to a previously filed questionnaire. (The law re completed questionnaire with the appropriate filing authority not later than the 7th busines you became aware that the originally filed questionnaire was incomplete or inaccurate.)	s day after the date on which								
3 Name of local government officer about whom the information is being disclosed.									
Name of Officer									
Describe each employment or other business relationship with the local government officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with Complete subparts A and B for each employment or business relationship described. Attack CIQ as necessary.  A. Is the local government officer or a family member of the officer receiving or lother than investment income, from the vendor?  Yes No  B. Is the vendor receiving or likely to receive taxable income, other than investment of the local government officer or a family member of the officer AND the taxable local governmental entity?  Yes No  Describe each employment or business relationship that the vendor named in Section 1 members of the officer and in Section 1 members of the	h the local government officer. h additional pages to this Form  kely to receive taxable income, tincome, from or at the direction income is not received from the								
other business entity with respect to which the local government officer serves as an o ownership interest of one percent or more.									
Check this box if the vendor has given the local government officer or a family member as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a)(B), excluding gifts described in Section	of the officer one or more gifts 003(a-1).								
	4/2024 Date								

		OFFI	CEUSEONLY
Complete Nos. 1 - 4 and 6 if the Complete Nos. 1, 2, 3, 5, and 6	re are interested parties. if there are no interested parties.		<b>46</b> 9 9 5 9 11 11
Name of business entity filing form, a entity's place of business.		zeenizi	
ZOLL Medical Corporation Name of governmental entity or state which the form is being filed.		for	
City of Laredo		ľ	
Provide the identification number use and provide a description of the good FY24-044	d by the governmental entity or state s or services to be provided under the	agency to track or ide contract.	entify the contract,
Name of Interested Party	City, State, Country	Nature of Interes	t (check applicable)
1141119 41 111119 41119	(place of business)	Controlling	Intermediary
	1111-111-11-11-11-11-11-11-11-11-11-11-		
-			
	_		
			-
			<del> </del>
Check only if there is NO Interested P	arby FTM		
	· 🗠/	/_	
3 AFFIDAVIT	I swear, or affirm, under papelly of pe Signature of authorize	four, that the above disclosed the second of	•
AFFIX NOTARY STAMP / SEAL ABOVE	/		
OF XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXX¥¥
Signature of officer administering oath	Printed name of officer administering or	ath Title of offic	cer administering oath
ADD	ADDITIONAL PAGES AS NEC	ESSARY	
ил provided by Texas Ethics Commission	www.ethics.state.tx.us		Adopted 10/5/2015
			r E-mail <u>mpescador@ci</u>

whose name is signed on the preceding or attached document in my presence on this day of CAITLIN K. BAILLARGEON, Notary Public My Commission Expires October 18, 2030

#### CITY OF LAREDO PURCHASING DIVISION

#### **AFFIDAVIT**

Project: FY24-044 X Series Advanced Cardiac Monitor Supplies and Accessories Form of Non-Collusive Affidavit
STATE OF TEXAS {} COUNTY OF WEBB {}
Neil Johnston
Being first duly sworn, deposes and says:
That he/she is VP of Global Sales of ZOLL Medical Corporation (a Partner of officer of the firm of, etc.)
The party making the foregoing SOQ or bid, that such SOQ or bid is genuine and not collusive or sham; that said Bidder has not colluded, conspired, connived or agreed directly or indirectly, with any Bidder or Person, to put in a sham bid or to refrain from bidding, and has not in any manner, directly or indirectly, sought by agreement or collusion, or communication or conference, with any person, to fix the bid price or affiant or of any other Bidder or to fix any overhead, profit or cost element of said bid price, or of that of any other Bidder, or to secure any advantage against the City of Laredo or any person interested in the proposed Contract; and that all statements in said SOQ or bid are true.  Signature of Neil Johnston Vice President of Global Sales Bidder, if the Bidder is an individual Partner, if the Bidder is a Partnership Officer, if the Bidder is a Corporation
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
personally appeared before me, the undersigned notary public, and proved to me his/her identity through satisfactory evidence, which were PCYSONO to be the person whose name is signed on the preceding or attached document in my presence on this 19 day of 10 day of 10 My Commission Expires October 18, 2030



# Section 3 Limited Product Warranty









### **ZOLL Limited Product Warranty**

ZOLL Medical Corporation (ZOLL) warrants to the customer that the product(s) purchased from ZOLL or its authorized dealers shall be free from defects in material and workmanship under normal use and maintenance conditions for the period of time set forth in the attached schedule. This warranty begins on the date of shipment from ZOLL's facility. During the applicable warranty period, ZOLL shall, at no cost to customer, either repair or replace (at ZOLL's sole discretion) any part of the product found to be defective in material or workmanship. If ZOLL's inspection detects no defects in material or workmanship, ZOLL's regular service charges shall apply. This warranty is not transferrable.

The foregoing warranty shall not apply if the defect, failure or other nonconformance of the product is caused by or attributable to: (i) any maintenance, repair or modification of the product by any party other than ZOLL or its authorized representatives, unless such modification is made with the prior written approval of ZOLL; (ii) use of the product with any associated or complementary equipment, accessory or software not supplied by ZOLL; (iii) any accident, negligence, misuse or accidental damage of the product; or (iv) use of the product in contradiction with applicable operating instructions or outside of the product's intended purpose, environment or setting. The foregoing warranty shall not apply to any equipment on which any original serial numbers have been removed or destroyed. The following are not covered under the warranty: (1) items subject to normal wear and burnout during use, including but not limited to, lamps, fuses, batteries, patient cables and accessories, and (2) software included as part of the equipment (including software embodied in read-only memory, known as "firmware").

ZOLL, in its sole discretion, will determine whether warranty service on the product will be performed in the field or through ship-in repair. For field repair, this warranty service will be provided by ZOLL at the customer's facility or an authorized ZOLL facility during normal business hours. For ship-in repair, all products and/or assemblies requiring warranty service should be returned to a location designated by ZOLL, freight prepaid.

Products repaired or replaced under this warranty retain the remainder of the warranty period of the repaired or replaced product.

Repair or replacement constitutes the exclusive remedy of the customer and the exclusive liability of ZOLL for any breach of any warranty related to the equipment, accessories or electrodes supplied hereunder.

THE WARRANTY SET FORTH HEREIN IS EXCLUSIVE AND ZOLL 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. ZOLL IS NOT LIABLE FOR INDIRECT, SPECIAL, INCIDENTAL OR CONSEQUENTIAL DAMAGES (INCLUDING LOSS OF BUSINESS OR PROFITS) WHETHER BASED ON CONTRACT, TORT, OR ANY OTHER LEGAL THEORY.

## $\textbf{Expert} \mathsf{Care}^{^{\mathsf{TM}}} \, \mathsf{Limited} \, \, \mathsf{Warranty} \, \, \mathsf{Matrix}$

GLOBAL PRODUCT LIMITED FACTORY WARRANTIES									
PRODUCT		EMS		HOSPITAL		MILITARY / FEDERAL GOVERNMENT		PUBLIC SAFETY / ALTERNATE CARE	
MONITORS/ DEFIBRILLATORS	US & Canada	International	US & Canada	International	US & Canada	International	US & Canada	International	
X Series®	1 year	1 year	5 years	1 year	5 years	5 years	5 years	N/A	
R Series®	1 year	3 years	5 years	3 years	5 years	5 years	5 years	N/A	
Propaq® M	1 year	1 year	5 years	1 year	5 years	5 years	N/A	N/A	
Propaq® MD	5 years	5 years	5 years	5 years	5 years	5 years	N/A	N/A	
VENTILATORS									
Z Vent®	1 year	1 year	1 year	1 year	N/A	N/A	1 year	N/A	
EMV+®	1 year	1 year	1 year	1 year	5 years	5 years	1 year	N/A	
330 Multifunction Aspirator	1 year	1 year	N/A	N/A	5 years	5 years	N/A	N/A	
MECHANICAL CPR	MECHANICAL CPR								
AutoPulse®	1 year	1 year	1 year	1 year	1 year	1 year	1 year	N/A	
ResQPUMP®	1 year	1 year	N/A	N/A	1 year	1 year	N/A	N/A	

PRODUCT	EMS		HOSPITAL		MILITARY / FEDERAL GOVERNMENT		PUBLIC SAFETY / ALTERNATE CARE	
AEDS	US & Canada	International	US & Canada	International	US & Canada	International	US & Canada	International
AED Plus®	5 years	5 years	5 years	5 years	5 years	5 years	5 years	5 years
AED Pro®	5 years	5 years	5 years	5 years	5 years	5 years	5 years	5 years
ZOLL AED 3®	6 years	6 years	6 years	6 years	6 years	6 years	6 years	6 years
Powerheart® G3 Pro	5 years	5 years	5 years	5 years	5 years	5 years	5 years	5 years
Powerheart® G3 Plus	5 years	5 years	5 years	5 years	5 years	5 years	5 years	5 years
Powerheart® G3 Elite	N/A	5 years	N/A	5 years	N/A	5 years	N/A	5 years
Powerheart® G5	6 years	6 years	6 years	6 years	6 years	6 years	6 years	6 years
Mobilize™	N/A	N/A	N/A	N/A	N/A	N/A	1 year	N/A

ADD 2 YEARS ADDITIONAL WARRANTY FROM SHIP DATE WITH AED REGISTRATION Registering ZOLL AED Plus, Powerheart, and ZOLL AED 3 devices provides two additional years of (not applicable in Japan) warranty.

PRODUCT	EMS		HOSPITAL		MILITARY / FEDERAL GOVERNMENT		PUBLIC SAFETY / ALTERNATE CARE	
TEMPERATURE MANAGEMENT	US & Canada	International	US & Canada	International	US & Canada	International	US & Canada	International
Thermogard XP®	1 year	1 year	1 year	1 year	1 year	1 year	N/A	N/A
SUPERSATURATED OXYGEN THERAPY	US & Canada	International	US & Canada	International	US & Canada	International	US & Canada	International
TherOx®	1 year	1 year	1 year	1 year	1 year	1 year	N/A	N/A

#### **GLOBAL PRODUCT LIMITED FACTORY WARRANTIES**

		BATTERIES	
MONITORS/ DEFIBRILLATORS	Part Number Description		Warranty
X Series®	8000-0580-01	Battery, Lithium-Ion, SurePower™ II	1 year
R Series®	8019-0535-01	SurePower™ Rechargeable Lithium-Ion Battery Pack	1 year
Propaq <sup>®</sup>	8000-0580-01	Battery, Lithium-Ion, SurePower™ II	1 year
VENTILATORS			
Z Vent®	703-0731-01-01	Battery Pack, 6.6 AH, 14.8V, Lithium-Ion, 12- Cell Conditioned	90 days
EMV+®	703-0731-01-01	Battery Pack, 6.6 AH, 14.8V, Lithium-Ion, 12- Cell Conditioned	90 days
MECHANICAL CPR			
AutoPulse <sup>®</sup>	8700-0752-01	Lithium-Ion Battery	1 year
AEDs			
AED Plus®	8000-0807-01	Type 123 Lithium Batteries	N/A
AED Pro®	8000-0860-01	Non-Rechargeable Lithium Battery Pack	90 days
ALDITIO	8019-0535-01	SurePower™ Rechargeable Lithium-Ion Battery Pack	1 year
ZOLL AED 3®	D 3® Lithium Manganese Dioxide Battery Pack		90 days
Powerheart® G3 Pro	9145-301	Intellisense® Lithium Battery	90 days*
Powerheart® G3 Plus	9146-302	Intellisense® Lithium Battery	90 days*
Powerheart® G3 Elite	9146-702	Intellisense® Lithium Battery	90 days*
Powerheart® G5	XBTAED001A	Intellisense® Lithium Battery	90 days*
	(	* Intellisense <sup>®</sup> Lithium Battery Replacement Program Four years from date of installation. Conditions Apply - See Policy For Details)	

GLOBAL PRODUCT LIMITED FACTORY WARRANTIES					
CHARGERS					
Part Number	Description	Warranty			
8200-00010-01	SurePower™ Single Bay Charger	1 year			
8050-0030-01	SurePower™ Charger Station	1 year			
8300-0500-01	SurePower™ Charger Station w/Charger Adaptors	1 year			
8700-0753-01	AutoPulse® Battery Charger, U.S., Multi-Chemistry	1 year			
8911-000290-01	Mobilize™ Refill, Item PC, Tablet Charger	90 days			

GLOBAL PRODUCT LIMITED FACTORY WARRANTIES					
ACCESSORIES					
Product	Part Number	Description	Warranty		
X Series <sup>®</sup> R Series <sup>®</sup> Propaq <sup>®</sup>		SPO2 Cables and Sensors	9 months		
X Series®	8000-001392	Masimo Rainbow® EMS RC-4 Patient Cable	2 years		
R Series <sup>®</sup>	8000-0312 8000-0367	Mainstream - CAPNO 5 CO2 Sensor and Cable Sidestream - CAPNO 5 LoFlo CO2 Module	limited lifetime warranty* *Original purchaser only		
Thermogard XP® Catheters Start Up kits Guidewires		6 months			
TherOx® SSO <sub>2</sub> Catheters and Cartridges	Warranty is valid through the shelf life date stated on the packaging.				
Electrodes	90 days				
Other Cables	90 days				