PROPOSED SOLE SOURCE PURCHASE
DEPARTMENT REQUESTOR FORM

Pursuant to New Mexico Procurement law, the UNM Hospitals Purchasing Department will post your completed form on the UNM Sunshine Portal for 30 days prior to purchase of the goods/services.

I. GENERAL INFORMATION. Please Provide Complete Information:

<table>
<thead>
<tr>
<th>Date of Request</th>
<th>1/10/2018</th>
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</thead>
<tbody>
<tr>
<td>Requisition Number (if applicable)</td>
<td></td>
</tr>
<tr>
<td>Request Submitted by</td>
<td>Bradley Ross</td>
</tr>
<tr>
<td>Department</td>
<td>Surgical Services</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:baross@salud.unm.edu">baross@salud.unm.edu</a></td>
</tr>
<tr>
<td>Phone</td>
<td>306-8124</td>
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<tr>
<td>Proposed Vendor</td>
<td>Cartiva, Inc</td>
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<tr>
<td>Estimated Dollar Amt</td>
<td>$60,000.00 Annually up to eight years</td>
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Provide a basic description of goods/services to be provided:
Cartiva Synthetic Cartilage implant

Intended use of/reason for purchase:
The Cartiva Synthetic Cartilage implant is intended for use in the treatment of patients with painful degenerative or post-traumatic arthritis in the first metatarsophalangeal joint with or without the presence of mild hallux valgus.

II. BASIS FOR IDENTIFYING VENDOR AS SOLE SOURCE PROCUREMENT. Choose Applicable Box(es) and Provide Detailed Information:

☐ PROPRIETARY. Item, technology, or service is proprietary and available ONLY from the proposed vendor.

PMA# P150017 classification name: Prosthesis Metatarsophalangeal joint cartilage

☐ COMPATIBLE. Desired purchase must be compatible with existing item, technology or service.

☐ RENEWAL. Support, maintenance, software subscription, technology or other intellectual property must be
III. SUPPLEMENTAL DETAILS. Please Provide Additional Information As Requested Below:

Describe the unique capabilities of the proposed vendor's goods, services, or personnel performing the work and substantial risks that could not be overcome without purchase.

Cartiva SCI is a proprietary polyvinyl alcohol hydrogel device that has been designed to mimic natural cartilage. The durable, viscoelastic surface replacement provides flexible cushioning intended to maintain natural joint mechanics by repairing focal cartilage defects and osteoarthritic joints, while minimizing the resection of healthy tissue.

Identify other vendors or sources and the reason they were found to be unsatisfactory for providing the goods, services, or personnel performing the work.

N/A

IV. DEPARTMENT APPROVAL.

By signing below, the department certifies that the information submitted on this form has been reviewed and this purchase has departmental approval. The final determination of Sole Source approval shall be made by the Purchasing Department.

Requestor: [Signature]  Date: 1/11/18

Administrator: [Signature]  Date: 1/11/18

Purchasing Director: [Signature]  Date: 1/29/18

UNMH Proposed Sole Source Form – Rev 7/30/14