**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>5/3/2018</th>
<th>Requisition Number (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Request Submitted by</td>
<td>Bradley A. Ross</td>
<td>Title</td>
</tr>
<tr>
<td>Department</td>
<td>Surgical Services</td>
<td>Email <a href="mailto:baross@salud.unm.edu">baross@salud.unm.edu</a></td>
</tr>
<tr>
<td>Proposed Vendor</td>
<td>Atricure</td>
<td>Estimated Dollar Amt and Contract Term 90K annually up to 8 year term</td>
</tr>
</tbody>
</table>

Provide a basic description of goods/services to be provided:

☐ Cryoablation used to treat Atrial Fibrillation with a generator and disposables

Intended use of/reason for purchase:

Cryoablation used to treat Atrial Fibrillation

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.*

Atricure's Synergy Isolator RF System is the only device system with FDA approval for the treatment of persistent and longstanding persistent Atrial Fibrillation.

☐ COMPATIBLE. *Desired purchase must be compatible with existing item, technology or service.*
RENEWAL. Support, maintenance, software subscription, technology or other intellectual property must be renewed ONLY from proposed vendor.

OTHER. Other basis for Sole Source not described above.
   1. Market leader in surgical treatment of Afib

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.

Only device that ensures transmural lesion when performing MAZE procedure

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

Medtronic does not ensure transmural lesion when performing MAZE procedure and does not exhibit same level of consistency in success rates

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: 5/3/18

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