



CONTRA COSTA COUNTY

AGENDA

Medical Services (CCRMC) Joint Conference Committee and Professional Affairs Committee

Tuesday, May 26, 2026

2:00 PM

Conference room 1, Martinez Medical
Office Building 2500 Alhambra Ave.,
Martinez |
<https://cchealth.zoom.us/j/97488023442> |
Call in: 1 (646) 518-9805 access code
97488023442#
or Office of Supervisor Gioia, 11780 San
Pablo Ave., Suite D, El Cerrito

**Third meeting location: Office of Supervisor Carlson, 2255 Contra Costa Blvd., Suite 202,
Pleasant Hill.**

Agenda Items: Items may be taken out of order based on the business of the day and preference of the Committee

1. Call to Order; Roll Call (Supervisor John Gioia, Chair)
2. Public comment on any item under the jurisdiction of the Committee and not on this agenda (speakers may be limited to two minutes).
3. Consent Items
CONSIDER CONSENT ITEMS (Items listed as C.1. through C.4 on the following agenda) -
Items are subject to removal from Consent Calendar by request of any Member of the Medical
Services (CCRMC) Joint Conference Committee. Items removed from the Consent Calendar
will be considered with Discussion Items.

C.1. CONSIDER and ACCEPT the Minutes from 3/18/2026 Medical Services [26-2255](#)
(CCRMC) Joint Conference Committee Meeting.

Attachments: [3.C.1. JCC 3.18.26 Minutes](#)

C.2. CONSIDER and ACCEPT the Minutes from the CCRMC JCC Expedited [26-2256](#)
Privileges Subcommittee for March 2026 and April 2026 approving expedited
privileges for listed providers.

Attachments: [3.C.2. JCC Expedited Privileges Subcommittee Minutes \(Mar - Apr\)](#)

C.3. CONSIDER and RECOMMEND APPROVAL of the Operational Policies reviewed and revised following regulatory and best practice standards. [26-2257](#)

Attachments: [3.C.3 Operational Policies](#)

C.4. CONSIDER and RECOMMEND APPROVAL of the Patient Care Policies reviewed and revised following regulatory and best practice standards. [26-2258](#)

Attachments: [3.C.4. Patient Care Policies](#)

4. Presentations
N/A

5. Discussion Items

D.1. CONSIDER and ACCEPT report from Chief Executive Officer (David Culberson): Hospital and Health Centers administrative updates, including leadership, significant capital projects, House Resolution 1 (HR1) planning, business plan development, seismic project, and operations updates. [26-2259](#)

Attachments: [5.D.1. CEO Report Administrative Updates](#)

D.2. CONSIDER and ACCEPT report from Chief Financial Officer's (David D. Lee) office review of fiscal year 2025-2026 budget forecast and proposed removal of capital assets from county inventory, including attachments with estimated depreciation of capital assets and capital equipment removal list. [26-2260](#)

Attachments: [5.D.2. Finance Report](#)

2026 Relief of Custody for Capital Assets to BO Estimates [26-2261](#)

Attachments: [5.D.2a. 2026 Relief of Custody for Capital Assets to BO Estimates](#)

2026 Health Services Capital Equipment Estimated Depreciation [26-2262](#)

Attachments: [5.D.2b 2026 Health Services Capital Equipment Estimated Depreciation](#)

D.3. CONSIDER and ACCEPT report from Medical Staff President (Sarah McNeil, MD) providing general medical staff priorities and updates. [26-2263](#)

Attachments: [5.D.3. Medical Staff Updates](#)

D.4. CONSIDER and ACCEPT report from Chief Quality Officer (Shannon Abella) on regulatory activities, sharing an executive summary of recent and upcoming survey activities. [26-2264](#)

Attachments: [5.D.4. Regulatory Updates](#)

D.5. CONSIDER and APPROVE Contra Costa Health Policy 129A – Responding to Immigration Enforcement Issues. Revisions focused on three priorities: clarifying the chain of command, strengthening role boundaries, and improving clarity and consistency throughout. [26-2265](#)

Attachments: [5.D.5. Policy 129A Revisions Resp to Immigration Enforcement](#)

D.6. CONSIDER and APPROVE Contra Costa Regional Medical Center Clinical Staff Protocol: Care for Patients in ICE Custody. Protocol contains operational, clinical, and logistical guidance developed specifically by CCRMC clinical staff for ICE encounters, supplementing existing policies. [26-2271](#)

Attachments: [5.D.6. CCRMC Clinical Staff ICE Protocol](#)

D.7. CONSIDER and APPROVE Contra Costa Regional Medical Center & Health Centers Policy – Treatment of Incarcerated Patients [26-2266](#)

Attachments: [5.D.7. Policy for Treatment of Incarcerated Patients](#)

6. Closed Session Agenda

CS.1. CONSIDER and ACCEPT the Minutes from 3/18/2026 Medical Services (CCRMC) Professional Affairs Committee Meeting.

CS.2. Hospital MEDICAL AUDIT AND/OR QUALITY ASSURANCE COMMITTEE REPORT (Health and Safety Code section 1461)

CS.3. STAFF PRIVILEGES (Health and Safety Code section 1461)

7. Public Comment

At this time, members of the public may comment on any item under the jurisdiction of the Professional Affairs Committee not appearing on the agenda. It is recommended that you keep your comments to two minutes or less. Under State law, matters presented under this item cannot be discussed or acted upon by the Committee at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Committee consideration.

8. ADJOURNMENT to PROFESSIONAL AFFAIRS COMMITTEE CLOSED SESSION (Supervisor John Gioia, Chair)

9. MEDICAL SERVICES (CCRMC) ACRONYM LIST [26-2267](#)

Attachments: [9. CCRMC and CCHP Plan Acronym List](#)

The next meeting is currently scheduled for July 15, 2026, 2:00pm, at Conference room 1, Martinez Medical Office Building 2500 Alhambra Ave., Martinez, CA 94553; or Office of Supervisor Gioia, 11780 San Pablo Ave., Suite D, El Cerrito, CA 94530; or Office of Supervisor Carlson, 2255 Contra Costa Blvd., Suite 202, Pleasant Hill, CA 94523..

Adjourn

The Committee will provide reasonable accommodations for persons with disabilities planning to attend the Committee meetings. Contact Corticha Flucus at Corticha.Flucus@cchealth.org at least 72 hours before the meeting. Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the County to a majority of members of the Committee less than 96 hours prior to that meeting are available for public inspection at 2500 Alhambra Avenue, Martinez, during normal business hours. Staff reports related to items on the agenda are also accessible online at www.contracosta.ca.gov. If the Zoom connection malfunctions for any reason, the meeting may be paused while a fix is attempted. If the connection is not reestablished, the committee will continue the meeting in person without remote access. Public comment may be submitted via electronic mail on agenda items at least one full work day prior to the published meeting time.

For Additional Information Contact: David Culberson at David.Culberson@cchealth.org.



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2255

Agenda Date: 5/26/2026

Agenda #:



JOINT CONFERENCE COMMITTEE MINUTES

March 18, 2026 from 2:00 – 4:00 PM

Contra Costa Regional Medical Center

2500 Alhambra Avenue, Martinez, CA – Building 1 First Floor Conference Room

VOTING MEMBERS PRESENT: Supervisor John Gioia, District I; Supervisor Ken Carlson, District IV; Dayana Carcamo-Molina MD; Tarun Bhandari MD; NON-VOTING MEMBERS PRESENT: David Culberson, CCRMC Chief Executive Officer; Sarah McNeil MD, Medical Staff President; Grant Colfax, MD Contra Costa Director of Health Services; Harmandeep Madra MSN, RN; Chief Nursing Officer; NON-VOTING MEMBERS ABSENT: Sergio Urcuyo, MD, CCRMC Chief Medical Officer; Brian Buchanan, Contra Costa Health Services Chief Financial Officer; GUESTS PRESENT: Geena Jester MD, Hospital Medical Director; Andrea Sandler MD, Associate Ambulatory Care Medical Director; Gilbert Salinas, Roberto Vargas, Director, Safety and Performance Improvement; Leah Carlon, Health Care Risk Manager, Safety & Performance Improvement; Kali Stanger, MD; Emily Parmenter, Strategic Initiatives; Rajiv Pramanik Lavonna Martin, Rachel Birch, Matt Kaufmann, Jill Ray, Jenny Tsang, MD, Jackie Zahn, Julia Surges, Marianna Moore, Corticha Flucus, Chandra Sallas, Dorina Moraida, Greg Colley, Irma Peralta, Shanise Thomas, Shiu-Ming Cheer, Shelly Whalon, Tania Pulido, Vilma E Bocanegra, Ricardo Adman, Debra Ballinger; GUESTS ABSENT: Gabriela Sullivan MD, Ambulatory and Specialty Medical Director; Ira Beda Sabio RN, Inpatient Associate Nursing Manager; Jasmin Contreras RN, Director, Safety and Performance Improvement; Adalberto Garibay, Lieutenant Chief of Security; Manny Bowlby

AGENDA ITEM	ACTION
I. CALL TO ORDER AND INTRODUCTIONS Meeting Chair – Supervisor John Gioia, District I - Meeting called to order at 2:00 PM by Supervisor Gioia - Location of meeting at two locations under the Brown Act: CCRMC Building 1 Conference Room in Martinez; Supervisor Carlson’s office in Pleasant Hill; Public may attend meeting remotely VIA Zoom Webinar or Call In. - Agenda has been posted outside Supervisors’ offices and CCRMC. Public is invited to attend publicly or remotely.	
II. PUBLIC COMMENT Supervisor Gioia <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to two minutes or less. Under State law, matters presented under this item cannot be discussed or acted upon by the Board at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Board consideration.</i>	
No Public Comment.	
III. CONSENT ITEM C.1. APPROVAL OF MINUTES – November 24, 2025 Supervisor Gioia	Inform/Action

In open session, voting members of Contra Costa Regional Medical Center Joint Conference Committee voted to accept November 24, 2025, Joint Conference Committee minutes. <i>Supervisor Gioia suggestion: To list C.1. through C.4. under consent.</i>	<u>Motion:</u> Sup Carlson Seconded by Dr. Carcamo-Molina <u>Ayes:</u> Sup Gioia, Sup Carlson, Dr. Carcamo-Molina, Dr. Bhandari <u>Abstain:</u> None
No Public Comment.	
IV. No Presentation	
V. DISCUSSION ITEM D1: ADMINISTRATIVE UPDATE Hospital & Health Centers Operations Updates (David Culberson, Chief Executive Office, Contra Costa Regional Medical Center (CCRMC) and Clinics); DISCUSSION included leadership updates, current recruitment for Chief Operating Officer (COO) and Chief Quality Officer (CQO). Congratulations to Helena Martey, MSN, on her retirement after 33 years of service at CCRMC, Welcome to Peter Shih, Contra Costa Health Director and Facilities and Planning. The Significant Capital Projects (Anesthesia Machines: Board approval October 21, Interventional Radiology: C-Arm in OR, Seismic Project, Nursing Call System, Parking Structure). Hour Resolution 1 (HR1) Planning, Performance improvement in progress; Facility Optimization, Facilities Optimization Clinical, Information Technology, Labor and workforce, Pharmacy, Revenue Cycle, Service Optimization and Supply Chain. CCRMC Business Plan Development, Seismic Project and operations quotes. <i>Supervisor Gioia – raised issue on website impacts page of HR 1 and state budget impact working with Dr. Colfax and County Administrators Office to provide additional detail on the impacts page.</i> • HR 1 Strategic Planning possibly \$700,000 may lose health plan coverage, cuts start next January 2027 – currently working closely with Contra costa Health Plan on coordinate our inpatient and ambulatory services at CCRMC. ▪ Development of Basic Health Plan for new uninsured • HR 1 Operations Planning – Optimizing more process • CCRMC Business Plan Development – Product line assessment facilitated by Tosan Boyo have evaluation include service line scope of business plan with more to come. • Seismic Project update on page 20 PPT. Ward E scheduled for demolition this fall between cafeteria and new hospital building working on logistic plan to move employees to other locations. <i>Supervisor Carlson –Depending on our planning, if we should defer based on money or any other impacts, we could position for a delay retro fit timeline.</i>	Loss of internet connection and PowerPoint slides took place 24 minutes into item D1 26-1128 hyperlink

D. Culberson – I don't know how responsive HACI would be toward that but it's a great strategy.

Supervisor Gioia- Ask to summaries the money to fund all the projects.

D. Culberson – Seismic project is currently about 150M and 80M of measures X has been allocated to this project the balance comes from reserves.

Supervisor Gioia – Were these projects under the old 2020 deadline?

D. Culberson – responded that 2020 goal did not meet compliance extended to 2030 deadline.

Supervisor Gioia- Ask are there more structures required to be in seismic compliant?

S. Abella – scope of this project to upgrade the generator to make sure that it has what we need for the new cafeteria. All buildings that we have under the hospital license are seismically complaint except the kitchen and E Ward.

Supervisor Gioia- Any seismic requirements for any of the clinics? No.

Supervisor Gioia ask for D. Culberson to discuss more on E – demolition and relocate.

D. Culberson – explained E-demolition as the more employees we can take off this campus during construction and longer term the easier the parking structure.

S. Abella – Hospital based more administrative will be likely moved off campus. Vacating goal is July 1st, 2026 working with Peter Shih. We're looking at who is key and needs to be on campus than those that don't and can work elsewhere.

- Additional Operations Update include Physicians and Dentist of Contra Costa County (PDOCC) and California Nurses Association (CNA) Labor Agreement Negotiation Continue, Abridge AI Transcription Pilot Project expanded to all ambulatory care clinics to reduce time required by Physicians and Nurse Practitioners to complete visit notes. Another addition includes a parking lot lease in the downtown Martinez marina area, additional security guard and van transportation, 3 to 4 year project starting early as this fall 2026 to be completed by January 1, 2030.

No Public comments.

DISCUSSION ITEM D2: FINANCE REPORT David Lee, CCRMC Deputy Director shared highlight performance of CCRMC fiscal year 2025,

projection for fiscal year 2026 forecast and the budget for fiscal year 2026. Key variances drivers increase in patient revenue based on patient volume is about 1% increase year over year. Psych volume is currently up to the compacity. 1% is not enough as expenses growing by about 4% become part of the operation deficit including significant reduction in the supplemental revenue state programs. Earnings Before Interest and Depreciation (EBITDA) last year we managed a 19M loss this year we will go down to 108M loss. Cuts are not coming this fiscal year most likely next fiscal year 2027. Our focus on next step is to look at the operation efficiency HR1 initiative to do better with funding. No questions/comments.	
<i>No public comment.</i>	
VI. DISCUSSION ITEM D3: MEDICAL STAFF UPDATE Sarah McNeil, M.D., Medical Staff President • Concern about ICE and things that took place in Minneapolis. • HR1 – Data is clear we appreciate the work of the administration to put money toward the infrastructure. We want to be a part of the solution and a part of the community during this difficult time. • Providers – Inform how providers are needed and the importance of hours that needed for preventive service as we build more work we can continue both recruit and build revenue may ask. We doubled the number of patients and kept the number of providers, and we ask to continue to help support the physicians and fill the positions we have. <i>Supervisor Gioia- What type of position are you referring to?</i> <i>Dr. McNeil – More outpatient providers, OBGYN department and more primary care physicians.</i> <i>Supervisor Gioia –How would you characterize to the CAO, public and board now that you have less vacancies about 10% overall?</i> <i>D. Culberson – The temporary physicians (LoCUM) don't have a following the way community physicians would as primary care providers. Reestablishing a primary base give more solid linkage to our system providing more billable visits from the FQ side and more continuity of care if they need to be brought into the hospital for more acute services.</i> <i>Supervisor Carlson – Collaboration across the system is important.</i> <i>Dr. Stanger, shared Physicians, cannot work without a care team that comes along with the nursing support and clerical support that's needed. Request is not just for physicians, but what also helps makes them functional.</i>	Inform

<i>Supervisor Gioia – Relate back to the seismic allocation measure X, did we also have one for parking lot?</i> <i>D. Culberson – We brought a revised recommendation for site for Measure X in November 2024. We received updated construction estimates that the cost was too expensive for the entire construction. Most important project is the seismic.</i> <i>Supervisor Gioia-We have no money in measure X for the parking structure?</i> <i>D. Culberson – That’s correct.</i> <i>Roxanne – Disagreed with Behavior Health Services dropped from measure X suggested that Behavior Health find funding to build out above the parking structure.</i> No Public Comment.	
VII. DISCUSSION ITEM D4: REGULATORY UPDATE Roberto Vargas, MPH, Director of Safety and Performance Improvement Shared the Safer Matrix Tool from January 20-23, 2026, Survey which transparently displays The Joint Commission (TJC) standards linked to identified deficiencies. No patient harm identified during survey. Of the findings 51 in total 9 were labeled as condition level for revisit in 45 days of survey completion which happened March 9th, 2026. The Joint Commission (TJC) agreed with Contra Costa Regional Medical Center's (CCRMC) plans and were satisfied with our plans with put forward. We are working on a Correction Action Plan (CAP) and are completing to submit to TJC by March 29th, 2026, for 36 months accreditation status. Resurvey focus areas, Infection Prevention – Sterile Processing; Ligature Risk – Immediate repairs and daily safety checks; Restraint Orders and PPE & Hand Hygiene. <i>1 public comment via Zoom: Marianna Moore</i> <i>Interpretation and Translation Services were in the high quadrant and want to know what the issues are and how they’ll be mitigated.</i> <i>Roberto V. – We are making sure that adjusting polices are needed and make sure we are using patient requested language.</i> <i>D. Culberson – When patient say no thank you to our translator documentation was not there. We would rather not have a family member translation.</i>	Inform

Dr. Colfax – Congratulations to 2-hour survey revisit.

DISCUSSION ITEM D5: CONTRA COSTA HEALTH POLICY 129A – REPOSONDING TO IMMIGRATION ENFORCEMENT ISSUES David Culberson, Contra Costa Regional Medical Center (CCRMC), Chief Executive Officer (CEO)

- DISCUSSION senate bill 81 we continue to work. The SB you will not have your birth and location Protected Health Information (PHI). We must have a mechanism that has to protect the privacy of the patient such as waiting room or parking lot. You cannot cross those. We have a policy that states we will not interfere with ICE, but we will. We have added item number 13 what staff may or may not allow, we do not want staff to interfere but not allow. “saying “SB81 require facility of leaders we have 24 House Staff/ Coordinator, and my job is to contact Dr. Colfax and county council if we do have them now on grounds here pursuing a patient it’s our duty.

Public Comment: (In Person)

Roxanne Creo Garza – Senior Director, Healthy Contra Costa

Thank you to Mr. Culberson for meeting with us. Healthy Contra Costa learned from Los Angeles County due to being in the direct line of fire as well as Alameda, San Francisco and other counties involved with model policy to have when ICE shows up. Some changes were made in parts of the policy reason present today to say there’s still some inconsistencies and clear chain of command is needed. Suggested initial interaction protocol which requires the onsite administrator immediately contacts security, in some cases private should be in the loop and driving that initial interaction making sure ICE officer belongs to our campus. There is a court order that they should have access to the patient or our campus. It must be clear in the policy.

Supervisor Gioia –Ask what more details will be included.

Gilbert Salinas, Chief Equity Officer, informed us we have the protocol sitting with County Council they are currently revisiting we’re hoping to have a response and we’re just waiting for response.

Public Comment: (via Zoom)

Joanna Gordian, Resident Leadership Manager, Healthy Contra Costa 129A should reference the policies for staff direction. We urge the Joint Conference Committee to ensure the policy reinforces current protections, including HIPAA and CMIA standards, crisis intervention and designated safe areas. It needs clear directions to help staff respond confidently.

Public Comment: (via Zoom)

Debbie Toth- Choice and Aging

and support, we have heads we were told that ICE would be showing up. We reached out to everyone. We wrote written policy we made spaces

Motion:

By Bhandari

Seconded: Carlson

Ayes: Gioia, Carlson, Bhandari, Carcamo-Molina,

Abstain: None

where they needed to be, we have clear policy to protect the people and people we serve. We know who to call. We need to know what to do and we must protect our patients.

Public Comment: (via Zoom)

Marianna Moore, Ensuring Opportunity

SB81 is an important law that proves effective when staff are properly informed and committed to prioritizing in-person, scenario-based training for all frontline staff. It's important to have role play. Hands on exercised to protect patients and frontline workers.

Public Comment: (via Zoom)

Debra Ballinger, United Latino Voices of Contra Costa

Agree with comments this far that policy doesn't fully align with Senate Bill 81 and believe there are parts that can and must be strengthened and clarified to protect staff and patients.

Public Comment: (via Zoom)

Vilma E Bocanegra – Health Initiative Manager

We ask to include that patients under civil immigration custody should still have access to lawyers, family members and even rapid response networks to help directly then in the patient rooms if encountered with ICE agents.

Public Comment: (via Zoom)

Greg Colley- Multi Faith Action Coalition

Support revised 129A policy and respectfully urge the Board of Supervisors to adopt the new additions to the policy and to continue to support the partnership and collaboration between Contra Costa Health and Healthy Contra Costa. Policy 129A should also explicitly require the creation of specific nonpublic areas for immigration personnel to remain on those occasions when they enter a Contra Costa Health facility.

Public Comment: (via Zoom)

Anupama Chapagain – Center for Empowering Refugees and Immigrants

Support of revised 129A policy to find ways to protect all Contra Costa Health staff and patients.

Public Comment: (via Zoom)

Julian Dilatory – Healthy Contra Costa

Reiterate the importance of making the distinction between the two different populations mentioned and make sure the policy respects the delineation of our patient's rights.

Supervisor Gioia – requested more detail and clarification on access to public areas to ICE should only be in the designated areas and do not interfere with patient care.

D. Culberson – Designated area for ICE officials Gilbert Salinas discussed with County Council due to being public entity and create nonpublic area may be a problem for us.

G. Salinas –shared policy emphasizes that nonpublic clinical areas may not be accessed without a valid judicial warrant. Immigration officers may only remain in public or designated waiting areas unless legal documentation requires otherwise. Our policies and primary responsibility are to ensure patient care and confidentiality are protected and enforcement presences do not disrupt clinical operations. We are protected through that area and will not allow ICE in those areas.

Supervisor Gioia – Why didn't we include it in the language?

G. Salinas– Gave example about Glendale Hospital who used partition when ICE show they are advised to stay behind designated are and according to County Council, we would be alienating them from where other patients and staff should have access to and not recommended. public we were told in county counsel by alienating them and it wouldn't be recommended.

Supervisor Carlson – If you're creating a specific area for ICE to be. No way to prevent them in public space. You're now asking them to be in public space then you're asking them to be in private public place.

Supervisor Gioia - How do we address the issue if it puts fear in people who are public, who are there?

G. Salinas – We understand that ICE doesn't go by the rules or policies. Currently we don't have an answer to that concern.

Supervisor Gioia – How do you address the language in civil suite and civil custody and we're waiting on county council

G. Salinas - It would be in county policy – our policy we stat we patient of all

Supervisor Gioia- Who finalizes that policy? (We do – G. Salinas)

Supervisor Gioia –Upon ICE arrival who's notified?

D. Culberson – The on duty Medical Center Supervisor (MCS)

G. Salinas – 129A they all come to play and we're working on the protocol on prior escalation and who they should call. We're all notified when something like this happens. Dr. Colfax and many others are notified.

Supervisor Gioia – concern on statement "I have no other choice" is not being deemed consent.

Supervisor Gioia asks who do we report ICE related incidents to? G. Salinas let the board know that County Council is notified. Supervisor Gioia recommends notifying the Sheriff's Office to ensure a law enforcement record is created. Supervisor Carlson appreciates the work that's being done. I would love to see the protocol but there are a couple things that were working on county wide protection on how to manage these types of situations. We fight one law agency against another, and we can land in an uncomfortable place. For me protecting the patients is what I lean toward. If they come in their coming in and will do what they want. They do things outside Supervisor Gioia – The idea is to approve the changes today and they will have some alteration language. Public Comment: (via Zoom) Joanna Gudino- Thanks the board for allowing the opportunity to collaborate with the health department on the policy making concrete protection for staff and community members that enter our healthcare facilities. Top concern regarding the policy is no clear distinction between this policy and the inmate policy. The intention of SB81 was to clearly identify this population being different to ensure that they have their protection under HIPAA and CMIA. Supervisor Gioia – requested to have the protocol back at next meeting as well as changes on the inmate. We're going to the amendment to this policy as well to come back and talk about it. No Public Comment.			
VI. Adjourn at 4:01	Inform		
VII. NEXT MEETING: May 26, 2026			
Minutes approved by Chair: Supervisor John Gioia, District I <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> _____ Supervisor John Gioia </td> <td style="width: 50%; text-align: center;"> _____ Date </td> </tr> </table> Minutes by Corticha Flucus		_____ Supervisor John Gioia	_____ Date
_____ Supervisor John Gioia	_____ Date		



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 26-2256

Agenda Date: 5/26/2026

Agenda #:

JOINT CONFERENCE COMMITTEE EXPEDITED PRIVILEGES SUBCOMMITTEE MINUTES FOR MARCH

MARCH 23, 2023

VOTING MEMBERS PRESENT: Dayana Carcamo-Molina MD; Tarun Bhandari MD; Sergio Urcuyo, MD, CCRMC Chief Medical Officer, David Culberson, CEO	
GUESTS PRESENT: Aarden, Pyra, MD, Chair, Emergency Department; Katzman, Ken, MD, Division Chair, DFAM-Martinez; Kerbawy, Sofia, MD, Chair, Pediatrics Department-Inpatient; Bhandari, Vijay, MD, Chair, PCP&E Committee; Brooks, Nathan, MD, Division Chair, DFAM-East County; Lee, David, MD, Division Chair, DFAM-Far East Division; Lehman, Trang, MD, Division Chair, DFAM Concord; Colebourn, Laura, FNP, Chair, Ambulatory Policy Committee; McNeil, Sarah, MD, Medical Staff President, MEC; Murphy, Usha, MD, Chair, Diagnostic Imaging Department; Gynn, Michael, MD, Chair, Surgery Department; Wondolowski, Lauren, MD, Chair, Administrative Affairs Committee; Wong, Christina, MD, Chair, Department of Obstetrics & Gynecology; Buck, Adam, MD, CMIO; Piccinati, David, MD, Associate Medical Director; Sullivan; Gabriela, MD, Director, Ambulatory Medicine; Rodelo, Lisa, MD. Gynn, Michael, MD, Chair, Cancer Committee; Madra, Harmandeep, RN, CNO; Abhilasha Jamwal, MD, Pediatrics Outpatient Department, Ayala, Miguel, NP, Chair, Department of Family & Adult Medicine; Garcia, Darleen, DDS, Chair, Dental Department; Jester, Geena, MD, Hospital Medical Director; Initha Elangovan, Chair Critical Care Department, Tarun Bhandari, Director, PES; Peyman Keyashian, MD, Chair, Anesthesia Department; Romito, Leah, MD, Residency Director; Kari Kompaniez, MD, Chair Department of Hospital Medicine; Will Sheldon, MD, Chair, DFAM West County Sandler, Andrea, MD, Associate Ambulatory Medical Director; Terris Robert, Mediator; Guss, Jenny, Chair, Psychiatry/Psychology Department; Heather Cedermaz, FNP-Chair Credentials Committee; Shannon Abella, Shannon, COO; Sefanit Mekuria, MD, Director-Public Health; Gina Soleimanieh, Medical Staff Services Manager; Shideh Ataii, PharmD, Pharmacy Director; Kali Stanger, Associate Medical Director; HollandBerry, Kaitlin, MD-Chair, PROC; Moeller, Kristin, MD-Past President MEC; Das, Shweta, MD; Sutherland, Sonia, MD-Medical Director-Detention Health	
Agenda Item	Action
Call to Order	
Dr. McNeil called the meeting to order at 1:05 P.M.	
Roll Call	Quorum reached
Voting Committee Members roll call, all present, Quorum reached.	
Approve Expedited Credentialing	Approved
- Called and approved expedited credentials, voted, passed. Unanimously. - All names on the list were approved by MEC at this meeting:	<u>Ayes:</u> Dr. Carcamo-Molina, Dr. Bhandari, David Culberson <u>Nos:</u> None <u>Abstain:</u> None
ADJOURN	
ADJOURNMENT: Next Meeting Date, April 27, 2026 In Person Building one or Teams	

CCRMC JCC Expedited Privileges Subcommittee meets during the Medical Executive Committee (MEC) Meeting. Call to order reflects MEC convening and is done by the Medical Staff President. Roll call for the Subcommittee occurs when MEC reaches that agenda item of MEC.

Signed by:

Dr. Sarah McNeil

3/24/26

E7426480D8C84B9

Sarah McNeil, MD-Medical Staff President

Date



Credentials Committee Recommendations to the Medical Executive Committee

The Credentials Committee convened on March 18, 2026. The Credentials Committee makes the following recommendations to the Medical Executive Committee of March 23, 2026.

A. Initial Appointments

The following applicants were reviewed by the Credentials Committee. The Committee has made the following recommendations for a provisional appointment:

Applicant	Department/Specialty	Staff Category	Recommendation
Anoushiravani, Afshin, MD	Surgery/Ortho	Active	Approve
Abbas, Fakhar, MD	IM-Rheumatology	Active	Approve
Hedayat, Tina, MD	IM-Neurology	Active	Approve
Roteff, Peyton, MD	DI-VRAD	Tele-Rad	Approve
Padilla, Veronica PA-C	Surgery/Ortho	Advanced Practice	Approve
Seeley, Christine, NP	DFAM	Advanced Practice Practitioner	Approve

B. Reappointments

The following applicants for reappointment were reviewed by the Credentials Committee. The Committee has made the following recommendations for reappointment:

Provider	Department	Category	Exp. Date	Recommendation
Bajpai-Pillai, Urmila, MD	Internal Medicine	Active	5/31/2026	Approve
Bone, Samuel, MD	Diagnostic Imaging	Tele-Rad	6/3/2026	Approve
Cominos, Eve, MD	DFAM	Active	5/31/2026	Approve
David, Miriam, MD	Diagnostic Imaging	Tele-Rad	6/3/2026	Approve
Glick, Stephanie, MD	DFAM	Active	5/31/2026	Approve
Keyashian, Peyman, MD	Anesthesia	Active	5/31/2026	Approve
Kogan, Mark, MD	Internal Medicine	Courtesy	5/31/2026	Approve
Manandhar, Manabu, DDS	Dental	Active	5/31/2026	Approve



Ratcliff, Stephannie, MD	DFAM	Active	5/31/2026	Approve
Sanchez, Lilia, MD	DFAM	Active	5/31/2026	Approve
Sheel, Sanjiv, MD	Diagnostic Imaging	Tele-Rad	6/3/2026	Approve
Shratter, Lee, MD	Diagnostic Imaging	Active	5/31/2026	Approve
Su, Gigi, MD	DFAM	Active	5/31/2021	Approve
Baughman, Sherilyn, MD	Internal Medicine	Active	6/3/2026	Approve
Cubillos Torres, Esteban, MD	Emergency Medicine	Active	5/31/2026	Approve
Duque-Silva, Alexandra, MD	Outpatient Pediatrics	Active	5/31/26	Approve
Fraser-Hulthage, Anna, MD	DFAM	Active	5/31/2026	Approve
Gravesandy Vassal, Moremi A, MD	Psychiatry/Psychology	Active	6/03/2026	Approve
Krol, John, MD	Diagnostic Imaging	Tele-Rad	5/31/2026	Approve
Shey, Jason, MD	Internal Medicine	Courtesy	5/31/2026	Approve
Shull, Jonah D, MD	Psychiatry/Psychology	Active	5/31/2026	Approve
Sussman, Arlene, MD	Diagnostic Imaging	Tele-Rad	6/3/2026	Approve
Weinreich, Don, MD	DFAM	Active	5/31/2026	Approve
Wong, Sammuel, DO	Internal Medicine	Courtesy	5/31/2026	Approve
Wong, Waikong, MD	Diagnostic Imaging	Tele-Rad	6/3/2026	Approve
McCorvey, Barbara, MD	Diagnostic Imaging	Tele-Rad	6/3/2026	Approve
Nkrumah, Rebecca, MD	Psychiatry/Psychology	Courtesy	5/13/2026	Approve
Porteous, Brent, DO	Hospitalist	Active	4/30/26	Approve
Roberts, Katherine, MD	Psychiatry/Psychology	Active	5/31/2026	Approve
Splivalo, Lesley, NP	DFAM	Allied Health	05/31/2026	Approve
Strozier, Stephanie, NP	DFAM	Allied Health	05/31/2026	Approve

C. Amendment of Clinical Privileges

The following providers have requested additional privileges. The Committee has made a recommendation to approve the following privileges:

Provider	Department	Requesting Department	Recommendation



Tsang, Jennifer, MD	Hospital Medicine	Ambulatory Care	Approve
Porteous, Brent	Hospital Medicine	Critical Care	Approve
Lougee, Mariel, MD	DFAM – Primary	OBGYN - Secondary	Approve

D. **Privilege Packets Approved:** Resident moonlighting, Pediatric cardiology, Neuro-Surgery, Physician assistant, Emergency Medicine, and OB/GYN

E. **Resignations/Terminations/Non-Renewals**

The following providers clinical privileges were considered for removal:

Provider	Department	Date
Escondon, Martin H, MD	OBGYN	Let Privileges expire 3/31/2026
Falk, Matthew, MD	Diagnostic Imaging	Voluntary Resignation-3/2/2026
Horn, Matthew, MD	Internal Medicine	Voluntary Resignation-3/2/2026
Mohebati, Arash, MD	Surgery	Voluntary Resignation-3/31/2026
Harris, Liam Randolph, MD	Surgery/Orthopedics	Let Privileges expire
Handly, Neal, MD	Emergency Medicine	Voluntary Resignation-3/11/2026

JOINT CONFERENCE COMMITTEE EXPEDITED PRIVILEGES SUBCOMMITTEE MINUTES FOR JANUARY

April 27, 2026

VOTING MEMBERS PRESENT: Dayana Carcamo-Molina MD; Tarun Bhandari MD; Sergio Urcuyo, MD, CCRMC Chief Medical Officer,	
GUESTS PRESENT: Aarden, Pyra, MD, Chair, Emergency Department; Katzman, Ken, MD, Division Chair, DFAM-Martinez; Kerbawy, Sofia, MD, Chair, Pediatrics Department-Inpatient; Bhandari, Vijay, MD, Chair, PCP&E Committee; Brooks, Nathan, MD, Division Chair, DFAM-East County; Lee, David, MD, Division Chair, DFAM-Far East Division; Lehman, Trang, MD, Division Chair, DFAM Concord; Colebourn, Laura, FNP, Chair, Ambulatory Policy Committee; McNeil, Sarah, MD, Medical Staff President, MEC; Murphy, Usha, MD, Chair, Diagnostic Imaging Department; Gynn, Michael, MD, Chair, Surgery Department; Wondolowski, Lauren, MD, Chair, Administrative Affairs Committee; Wong, Christina, MD, Chair, Department of Obstetrics & Gynecology; Buck, Adam, MD, CMIO; Piccinati, David, MD, Associate Medical Director; Sullivan; Gabriela, MD, Director, Ambulatory Medicine; Rodelo, Lisa, MD, Gynn, Michael, MD, Chair, Cancer Committee; Madra, Harmandeep, RN, CNO; Abhilasha Jamwal, MD, Pediatrics Outpatient Department, Ayala, Miguel, NP, Chair, Department of Family & Adult Medicine; Garcia, Darleen, DDS, Chair, Dental Department; Jester, Geena, MD, Hospital Medical Director; Initha Elangovan, Chair Critical Care Department, Tarun Bhandari, Director, PES; Peyman Keyashian, MD, Chair, Anesthesia Department; Romito, Leah, MD, Residency Director; Kari Kompaniez, MD, Chair Department of Hospital Medicine; Will Sheldon, MD, Chair, DFAM West County Sandler, Andrea, MD, Associate Ambulatory Medical Director; Terris Robert, Mediator; Guss, Jenny, Chair, Psychiatry/Psychology Department; Garcia, Darleen, DDS, Chair, Dental Department; Heather Cedermaz, FNP-Chair Credentials Committee; Shannon Abella, Shannon, COO; Sefanit Mekuria, MD, Director-Public Health; Gina Soleimanieh, Medical Staff Services Manager; Sarah Levin, MD; Park, May, HAS; Koeplin, Diana, Department HR Analyst II; Kaitlin HollandBerry, MD, PROC; Kali Stanger, Associate Medical Director; Ke Jesus-Saephram, Mary, Personnel Manager	
Agenda Item	Action
Call to Order	
Dr. McNeil called the meeting to order at 1:05 P.M.	
Roll Call	
Voting Committee Members roll call, all present, Quorum reached.	Quorum reached
Approve Expedited Credentialing	Approved
- Called and approved expedited credentials, voted, passed. Unanimously. - All names on the list were approved by MEC at this meeting:	<u>Ayes:</u> Dr. Carcamo-Molina, Dr. Bhandari, Dr. Urcuyo <u>Nos:</u> None <u>Abstain:</u> None
ADJOURN	
ADJOURNMENT: Next Meeting Date, May 18, 2026 In Person Building one or Teams	

CCRMC JCC Expedited Privileges Subcommittee meets during the Medical Executive Committee (MEC) Meeting. Call to order reflects MEC convening and is done by the Medical Staff President. Roll call for the Subcommittee occurs when MEC reaches that agenda item of MEC.

E7426480D8C84B9...

4/30/2026

Sarah McNeil, MD-Medical Staff President

Date

Credentials Committee Recommendations to the Medical Executive Committee

The Credentials Committee convened on 4-15-2026. The Credentials Committee makes the following recommendations to the Medical Executive Committee of 4-27-2026.

A. Privilege Packet(s) Approval:

The following privilege packet(s) have been reviewed by the Credentials Committee and are recommended for approval:

Privilege Department	Privilege Modification(s)	PMIS Update(s)
DFAM and Internal Medicine Ambulatory packet	Forensic exams added – non-core	New privilege code
DFAM: Moonlighting privileges	Format change including revisions approved in March	Potential new privilege code(s)
Anesthesia	Format change	None
DHM	Language clarification regarding pre-op exams in outpatient	None
Critical Care	Format change and criteria update: standardize to 50 patients/2 years, up from 40 patients	None
Dental	Format update to narrative with criteria updated	New privilege code
Diagnostic Imaging	Carotid Doppler added to core privilege	None
Internal Medicine	Format change with standardized criteria for all sections	None
Nurse Practitioner	Non-Core Tattoo removal	New privilege code
Pediatric Cardiology	New privilege packet approved in March	New privilege code(s)
Surgery	New Neurosurgery privilege packet approved in March	New privilege code(s)

B. Initial Appointments

The following applicants were reviewed by the Credentials Committee. The Committee has made the following recommendations for appointment:

Applicant	Department/Specialty	Discussion/Follow-Up	Recommendations
Guo, Tai Wei, MD	DFAM		Approve
Pan, Lawrence, MD	DI-VRAD		Approve
Patel, Saurabh, MD	Diagnostic Imaging		Approve

C. Reappointments

The following applicants for reappointment were reviewed by the Credentials Committee. The Committee has made the following recommendations for reappointment:

Provider	Primary Department	Category	Exp. Date	Recommendation
Alingog, Karen, MD	DFAM	Active	06/30/2026	Approve
Bhandari, Vijay, MD	Hospitalist	Active	06/30/2026	Approve
Curtis, Brett, MD	DFAM	Active	06/03/2026	Approve
Eipper, Jordan W, MD	Psychiatry/Psychology	Active	06/30/2026	Approve
Gutierrez, Matthew, MD	Hospitalist	Active	06/30/2026	Approve
Katzman, Kenneth, MD	DFAM	Active	06/30/2026	Approve
Kompaniez, Kari, MD	Hospitalist	Active	06/30/2026	Approve
Mbanugo, Ogo S, MD	DFAM	Courtesy	05/31/2026	Approve
Longstroth, David, MD	Hospitalist	Active	06/30/2026	Approve
McNeil, Sarah, MD	OBGYN	Active	05/31/2026	Approve
Molnar, Esther, MD	Internal Medicine	Courtesy	06/30/2026	Approve
Parvin, Nilofar, DDS	Dental	Active	06/30/2026	Approve
Ristow, Bryan, MD	Internal Medicine	Active	06/30/2026	Approve
Saraiya, Rupali, MD	Emergency Medicine	Courtesy	07/08/2026	Approve
Tortorelli, Cynthia, MD	Diagnostic Imaging	Tele-Rad	07/08/2026	Approve
Wrone, Elizabeth, MD	Internal Medicine	Courtesy	06/30/2026	Approve
Zaka, Jamal, MD	Internal Medicine	Courtesy	06/30/2026	Approve
Brown, Bradley D, MD	Psychiatry/Psychology	Active	06/30/2026	Approve
Chong, Deborah Ann, MD	OBGYN	Active	06/03/2026	Approve
Damento, Gena M, MD	Surgery	Active	06/30/2026	Approve
Halabi, Cathra, MD	Internal Medicine	Tele-Neurologist	06/30/2026	Approve

Kaji, Troy, MD	DFAM	Active	06/30/2026	Approve
Kerbawy, Sofia, MD	Inpatient Pediatrics	Active	06/30/2026	Approve
Sun, Xingbo P, DPM	Surgery	Active	06/30/2026	Approve
Takekuma, Hiromi, DO	Internal Medicine	Courtesy	06/30/2026	Approve
Vertudez, Janice, NP	DFAM	Active	06/30/2026	Approve
Lawton, Christopher, MD	Diagnostic Imaging	Tele-Rad	06/30/2026	Approve
Lee, Rebecca Y, MD	DFAM	Active	06/30/2026	Approve
McDonnell, Kevin, MD	Diagnostic Imaging	Tele-Rad	06/28/2026	Approve
Romito, Leah, MD	DFAM	Active	06/30/2026	Approve
Magargal, Spencer, MD	Neonatology	Courtesy	06/30/2026	Approve
Longstroth, David, MD	Hospital Medicine	Active	6/30/2026	Approve Needs POCUS as requested when meets criteria

D. Amendment of Clinical Privileges

The following providers have requested additional privileges. The Committee has made a recommendation to approve the following privileges:

Provider	Department	Requesting Department
McNeil, Sarah, MD	OBGYN/DFAM	DFAM/OBGYN

E. Resignations/Terminations/Non-Renewals

The following providers' clinical privileges were considered for removal:

Provider	Department	Date
Beach, Courtney, MD	DFAM	Voluntary Resignation 3/31/2026
Bold, Jonathan, MD	Diagnostic Imaging	Voluntary Resignation-3/26/2026
Najibi, Lakhta, MD	DFAM	Voluntary Resignation 4/30/2026



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2257

Agenda Date: 5/26/2026

Agenda #:

Operational Policies Agenda 5/26/2026

Title	Area	Revised?	Summary of Changes
Insurance Verification	Ambulatory Care	Unchanged	No Comment Provided
Medicare Secondary Payer Screening	Ambulatory Care	Unchanged	No Comment Provided
Policy for Expectations of Staff	Ambulatory Care	Unchanged	No Comment Provided
Policy for Orientation/Training/Competency Assessment	Ambulatory Care	Unchanged	No Comment Provided
Policy for Registration Intake and Checkout Process	Ambulatory Care	Unchanged	No Comment Provided
Policy for Unit Specific Disaster Plan	Ambulatory Care	Unchanged	No Comment Provided
Policy for Departmental Disaster Plan	Rehabilitation	Revised	Changed the date of Rehab committee approval



Origination 11/2015
 Last Approved N/A
 Effective Upon Approval
 Last Revised 08/2022
 Next Review 3 years after approval

Owner Nadja Renfro:
 Ambulatory Care
 Reg Mgr
 Area Ambulatory Care
 Applicability CCRMC, Health
 Centers &
 Detention

Insurance Verification

POLICY STATEMENT:

The registration clerk will request insurance information from the patient, patient's parent, legal guardian or designee presenting for care during the registration process.

GUIDELINES:

- A. The patient, patient's parent, legal guardian or designee presents to the registration unit to register for a scheduled or unscheduled visit.
- B. The registration clerk will screen the patient, patient's parent, legal guardian or designee for insurance coverage during the registration process.
 1. Insurance card is provided. The registration clerk will:
 - a. Scan the insurance card in the patient's Electronic Health Record (EHR) if the insurance card is not on file.
 - b. Use the coverage if it exists and is active or add the coverage to the patient's EHR and verify the coverage, as applicable.
 2. Patient has Insurance, but the card is NOT provided. The registration clerk will:
 - a. Use existing coverage if it is still *active*, OR, add the new insurance information to the patient's EHR only when *sufficient* insurance information is provided so that it can be *electronically* verified.
 - i. Verify coverage electronically, if applicable.
 - ii. In good faith use the existing coverage if unable to verify coverage electronically and the billers on the backend will

confirm if the coverage is still effective for the date of service.

- b. If the coverage is not *active* in the patient's EHR or the coverage could not be electronically verified, the registration clerk will "self-pay" the account and provide the patient, patient's parent, legal guardian or designee with a Patient Accounting self-addressed envelope and request a copy of the insurance card (front and back) be mailed to Patient Accounting.

3. Patient has NO Insurance. The registration clerk will:

- a. Screen the patient, patient's parent, legal guardian or designee to determine if the patient qualifies for any insurance the registration clerk can complete during the registration process.
- b. For a patient who presents to the Emergency Department or who is admitted to the hospital the registration clerk and/or Financial Counselor will screen the patient, patient's parent, legal guardian, or designee to determine if the patient qualifies for any insurance.

C. CCHS Contra Costa Health Centers Wallet Card with Financial Counselor contact information will be provided to the patient, patient's parent, legal guardian, or designee, as applicable.

REFERENCES:

Refer to internal processes.

APPROVALS:

Registration and Staffing Manager

Director of Ambulatory Care Nursing and Ancillary Departments

Director, Patient Accounting

Ambulatory Care Policy Committee: 12/2022

Patient Care Policy & Evaluation Committee: 1/2023

Medical Executive Committee: 1/2023

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
CCRMC Chiefs	David Culberson: CCRMC Chief Executive Officer	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination	07/2015
Last Approved	N/A
Effective	Upon Approval
Last Revised	08/2022
Next Review	3 years after approval

Owner	Nadja Renfro: Ambulatory Care Reg Mgr
Area	Ambulatory Care
Applicability	CCRMC, Health Centers & Detention

Medicare Secondary Payer Screening

POLICY STATEMENT:

The registration clerk will complete a Medicare Secondary Payer Screening questionnaire for every Medicare patient who presents to register for outpatient or inpatient services.

GUIDELINES:

- A. Medicare Secondary Payer Screening questionnaire will be completed for all Medicare patients registering for outpatient and inpatient services.
- B. Every Medicare patient will be asked the Medicare Secondary Payer Screening questions and answered, as applicable.
- C. If, during the registration process the registration clerk determines that there is a primary responsible insurer, a responsible employer or that the patient does have alternate health insurance, then the patient should be registered with the appropriate primary payer. Medicare should be identified in the registration as the secondary payer.
- D. The Medicare Secondary Payer Screening Questionnaire will be electronically filed as part of the registration visit.

REFERENCES:

Department of Health and Human Services Centers for Medicare & Medicaid Services.

APPROVALS:

Registration and Staffing Manager

Director of Ambulatory Care Nursing and Ancillary Departments

Director, Patient Accounting

Ambulatory Care Policy Committee: 12/2022

Patient Care Policy & Evaluation Committee: 1/2023

Medical Executive Committee: 1/2023

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
CCRMC Chiefs	David Culberson: CCRMC Chief Executive Officer	03/2026
	Nadja Renfro: Ambulatory Care Reg Mgr	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 02/2008
 Last Approved N/A
 Effective Upon Approval
 Last Revised 08/2022
 Next Review 3 years after approval

Owner Nadja Renfro:
 Ambulatory Care
 Reg Mgr
 Area Ambulatory Care
 Applicability CCRMC, Health
 Centers &
 Detention

Policy for Expectations of Staff

POLICY STATEMENT:

Registration clerks (permanent, permanent intermittent, temporary and contract personnel) are expected to adhere to each expectation as outlined in this policy. Clerks are expected to maintain professional, patient-centered conduct always.

GUIDELINES:

- A. Comply with established policies, including, but not limited to, those of:
 1. Contra Costa County
 2. Health Services Department
 3. Hospital and Health Center Division
 4. Ambulatory Care
 5. Ambulatory Care Registration
- B. Registration clerks shall:
 1. Know and adhere to their schedule.
 2. Arrive to work on time and be at the workstation according to the schedule work start time.
 3. Notify the department for an unplanned absence or late arrival at least one hour prior to the commencement of his/her work shift (if calling less than one hour prior to the commencement of his/her work shift, clerk should call/text immediate supervisor as well as call the staffing line):

- a. Ambulatory Care Registration: Staffing line 925.370.5316.
 - b. ER/Admission and Communication Center: Communication Center 925.370.5879.
4. Be responsible for notifying the Staffing Line or Communication Center when their schedule varies from their regularly scheduled work hours at any time during the day, for any reason, whether planned or unplanned.
5. Except in an extreme emergency, shall **not** leave the worksite before the end of the shift without informing the on duty Clerical Supervisor, Clerk Specialist, most Senior Clerk or Registration and Staffing Manager either in person or via office or cell phone **and** leaving a message on the staffing line for Ambulatory Care Registration -clerks at 925.370.5316 and ER/Admission and Communication Center clerks at 925.370.5879.
6. Limit break times to 15 minutes and take according to the established work schedule (one during each four hours). Scheduling of work breaks is at the discretion of management. The practice of working through one's breaks and leaving early or combining breaks will not be permitted. Under no circumstances will patient flow be negatively impacted by break schedules.
7. **Not** leave the workstation unattended to go on break. If no one was previously designated to cover for breaks, contact the on duty Clerical Supervisor, Clerk Specialist, most in-house Senior Clerk or Registration and Staffing Manager. On duty Supervisor, Lead Specialist, most in-house Senior Clerk or Manager will find coverage or provide coverage him/herself.
8. Wait until coverage arrives prior to departing the registration workstation if leaving before the end of clinic or the end of shift due to a planned or unplanned absence. Contact on duty Clerical Supervisor, Clerk Specialist, most in-house Senior Clerk or Registration and Staffing Manager if any problems arise.
9. Go to lunch break as established for 30 minutes or 1 hour in duration. Adherence to established schedule is essential. Under no circumstances will patient flow be negatively impacted by lunch break schedules.
10. Wear name tag in a **visible location** (i.e., shirt collar, breast pocket, etc).
11. Fill out timesheet completely and accurately and submit on time.
12. Treat patients, colleagues, and the public courteously with respect always by adhering to Contra Costa County Hospital and Health Centers, Divisions of Ambulatory Care Services - 8 Principles of Service Excellence and the Mission Statement of the Registration Department.
13. Be sensitive to ethnic diversity of patients and co-workers.
14. Use information systems in accordance with the established CCHS Information Systems Usage Policy and Network and Internet Acceptable Use agreement. Use of Facebook, My Space, Twitter, Instagram, Tik Tok, etc. or any kind of social networking media for personal reasons is not acceptable during business hours or in designated work areas at any time.
15. Be a team player with colleagues, which includes other shifts and units.

16. Not use profanity while on duty.
17. Conduct personal business during scheduled breaks and lunch or after business hours away from work area.
18. Limit personal telephone calls to scheduled break times only unless it is an emergency.
19. **Not** have personal cell phone, headphones, EarPods, etc or any electronic device in view of patient or public, use or charge at the registration workstation.
20. Consistently produce accurate and thorough work.
21. **Not** eat or store food in the work area. Beverages consumed in the work area **must** be in a container with a lid and "**out of sight**". Lunch food and beverages should be taken home daily. (Do not leave food or beverages overnight.)
22. Be expected to dress in business casual attire or solid colored scrubs. Clothing such as blue denim jeans (or attire which may appear as such), leggings, sweat suits, shorts, halter tops, t-shirts with prints or logos, etc. are not considered appropriate. Open-toe shoes pose a safety hazard and should not be worn. It is the responsibility of supervisor/manager to make known to employees under their jurisdiction what the applicable dress code is. Clerks who are unwilling to adhere to the established dress code may be counseled and requested to change into appropriate attire. Time off from work for this purpose will be charged as Absent Without Pay (AWOP). Repeated non-compliance may result in disciplinary action.
23. Check e-mail for incoming messages at least twice per day, at beginning and, prior to end of shift.
24. Present a professional and uncluttered image at the workstation. Personal items should be kept to a minimum.
25. Utilize time to complete other clerical tasks to be specified by the on duty Clerical Supervisor, Clerk Specialist, most in-house Senior Clerk or Registration and Staffing Manager when patient flow does not require all clerks to be involved in registering patients presenting for care.
26. Only authorized personnel will be admitted into the registration area at Contra Costa Regional Medical Center and Health Centers.
 - a. Family members and friends are not permitted in the registration work area.
 - b. County employees, who are not on official business, are not permitted in the registration work area.

C. Any observance of noncompliance to the expectations outlined above should be reported to a Clerical Supervisor or the Registration and Staffing Manager.

REFERENCES:

CCHSD Policy #111-A, "Mission of Contra Costa Health Services"

CCHSD Policy #112-A, "Name Tag/Employee Identification"

CCHSD Policy #113-A, "Information Systems Usage Policy"

CCHSD Policy #115-A, "Payroll Reporting"

CCHSD Policy #203-PM, "Dress Code"

CCHSD Policy #209-PM, "Hours of Work"

CCHSD Policy #500-PCC, "Confidentiality of Patient/Client Information"

Hospital Policy #271, "Appropriate Workplace Behavior Policy"

Ambulatory Care Policy #2005, "Professional Performance and Code of Conduct Guidelines"

Ambulatory Care, ER/Admission Registration and Communication Center Policy #8000, "Responsibilities for Planned and Unplanned Absences"

APPROVALS:

Registration and Staffing Manager

Director of Ambulatory Care Nursing and Ancillary Departments

Ambulatory Care Policy Committee: 12/2022

Patient Care Policy & Evaluation Committee: 1/2023

Medical Executive Committee: 1/2023

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
CCRMC Chiefs	David Culberson: CCRMC Chief Executive Officer	04/2026
	Nadja Renfro: Ambulatory Care Reg Mgr	04/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 02/2004
 Last Approved N/A
 Effective Upon Approval
 Last Revised 08/2022
 Next Review 3 years after approval

Owner Nadja Renfro:
 Ambulatory Care
 Reg Mgr
 Area Ambulatory Care
 Applicability CCRMC, Health
 Centers &
 Detention

Policy for Orientation/Training/Competency Assessment

POLICY STATEMENT:

Registration clerks will receive comprehensive orientation and training necessary for consistent and continuous satisfactory job performance. The orientation and training will include department policies and procedures, disaster preparedness, anti-harassment, health information privacy and protection, etc. Competency assessments will be conducted at the conclusion of the new employee training. In addition, competency assessments will be conducted annually for established employees concurrently with their annual performance evaluations.

GUIDELINES:

A. Site Orientation & Training

1. The site orientation and training for new employees will begin on the first day of employment. The appropriate Clerical Supervisor, Registration and Staffing Manager or designee will guide the new employee in a tour of the health center. After the tour, the Clerical Supervisor, Registration and Staffing Manager or designee will review with the new employee the sections of the Ambulatory Care Orientation Checklist dealing with the Emergency Response Plan, Fire Extinguisher and Evacuation Routes/Emergency Exits.
2. The Clerical Supervisor, Registration and Staffing Manager or designee will review with the new employee the Department Specific section of the checklist.
3. The appropriate Clinic Coordinator will review the remaining sections of the Ambulatory Care Orientation Checklist with the new employee.

B. Systems Orientation & Training

All new employees will receive registration systems training from the appropriate Clerical Supervisor or designee. This will be a comprehensive training of all registration functions.

C. Competency Assessment

1. It is the responsibility of the appropriate Clerical Supervisor or designee will assign a competency assessment on every new employee at the end of his/her training period. If any deficiencies are identified, the training will continue for a reasonable period of time.
2. It is the responsibility of the Clerical Supervisor to assign a competency assessment annually (or more often if necessary) for all employees under his/her direction.
3. It is the responsibility of the Clerical Supervisor to review the completed competency assessments to assess training needs and to establish a plan to provide training, individual or group, in deficient areas.

D. Maintaining Records

It is the responsibility of the appropriate Clerical Supervisor to maintain records of all employee orientation, training and competency assessments completed.

APPROVALS:

Registration and Staffing Manager

Director of Ambulatory Care Nursing and Ancillary Departments

Ambulatory Care Policy Committee: 12/2022

Patient Care Policy & Evaluation Committee: 1/2023

Medical Executive Committee: 1/2023

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
CCRMC Chiefs	David Culberson: CCRMC Chief Executive Officer	03/2026
	Nadja Renfro: Ambulatory Care Reg Mgr	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 02/2016
 Last Approved N/A
 Effective Upon Approval
 Last Revised 08/2022
 Next Review 3 years after approval

Owner Nadja Renfro:
 Ambulatory Care
 Reg Mgr
 Area Ambulatory Care
 Applicability CCRMC, Health
 Centers &
 Detention

Policy for Registration Intake and Checkout Process

POLICY STATEMENT:

All patients who present for care at Contra Costa Regional Medical Center and Health Centers will be checked in and checked out using the Electronic Health Record (EHR) system.

GUIDELINES:

- A. The patient, patient's parent, legal guardian or designee presents to the registration unit to register for a scheduled or unscheduled visit.
- B. The registration clerk will complete the registration intake process. The intake process will consist of the following:
 1. Patient Demographic Information
 2. Responsible Party Information (Guarantor Account)
 3. Emergency Contact Information
 4. Insurance Information
 5. Copay collection
 6. Visit Information
 7. Provide Applicable Notice(s)
 8. Sign Applicable Form(s)
- C. The registration clerk completes the check in and checkout process once the registration intake process is complete.
- D. The registration clerk will direct the patient, patient's parent, legal guardian, or designee to the

designated clinical area.

- E. During the checkout process the registration clerk will schedule follow-up appointments as directed by the clinician.

REFERENCES:

Refer to the internal processes.

APPROVALS:

Director, Patient Accounting

Registration and Staffing Manager

Director of Ambulatory Care Nursing and Ancillary Departments

Ambulatory Care Policy Committee: 12/2022

Patient Care Policy & Evaluation Committee: 1/2023

Medical Executive Committee: 1/2023

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
CCRMC Chiefs	David Culberson: CCRMC Chief Executive Officer	03/2026
	Nadja Renfro: Ambulatory Care Reg Mgr	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 02/2013
 Last Approved N/A
 Effective Upon Approval
 Last Revised 08/2022
 Next Review 3 years after approval

Owner Nadja Renfro:
 Ambulatory Care
 Reg Mgr
 Area Ambulatory Care
 Applicability CCRMC, Health
 Centers &
 Detention

Policy for Unit Specific Disaster Plan

POLICY STATEMENT:

To provide guidelines to Ambulatory Care and ER/Admission Registration and Communication Center registration clerks during an internal or external disaster. These guidelines will assist the registration clerks in responding efficiently and appropriately. The role of a registration clerk is to page the Disaster and Shelter in Place code via the overhead public-address system, control incoming telephone calls and register disaster victims.

GUIDELINES:

- A. Main Functions/Services (During a Disaster or Shelter in Place) Listed according to Priority:
1. Upon notification of a Disaster or Shelter in Place order, the hospital operator (clerk) will wait for instruction from the Command Center.
 2. The operator will overhead announce, via the overhead public-address system, Disaster or Shelter in Place instructions already in place, or announce specific instructions given by person in charge.
 3. The operator will control non-essential telephone calls. Calls of this nature are not permitted in the event of a Disaster or Shelter in Place order.
 4. Once the Medical Coordinator – Triage – Center is set up in the hospital, the registration clerks will obtain information from patients and register them by normal or downtime procedures.
 5. Evacuation: Should an immediate evacuation of registration clerks be necessary, CCRMC and/or health center registration clerks will follow instructions given by administration, or designee. Registration clerks will log off computers, close doors,

and windows (if time permits), and assist in instructing all lobby visitors/patients to leave the lobby area and report to the designated evacuation area(s) at CCRMC and health centers.

B. Departmental Communication Plan (Fan-Out Telephone Calling System)

1. Should the activities of the Ambulatory Care and/or the ER/Admission Registration and Communication Center Departments become unmanageable with assigned Registration clerks, the Clerical Supervisor or Registration and Staffing Manager will activate the "Fan-Out Telephone List".
2. Registration clerks that are off duty at such time that a disaster is declared will be expected to report for duty in accordance with Contra Costa County Disaster Service Worker policy.
3. It is anticipated that registration clerks will learn of the disaster conditions via public media or "Fan-Out List" phone calls. Registration clerks should call the CCHSD Employee Emergency Hotline (866-946-9911) for current hospital and health center information.

C. Who will oversee department operations during normal business hours and non-business hours?

(Listed in successive order)

1. Registration and Staffing Manager
2. Clerical Supervisors
3. Clerk Specialists
4. Registration Clerks by seniority

D. Termination of Disaster and Shelter in Place operation

1. Upon instructions, the operator will announce via the overhead public-address system, the termination of the Disaster or Shelter in Place order.

RELATED LINKS:

Attachment A – Unit Emergency Plan Guide

REFERENCES:

- A. Hospital Policy #350, "Disaster Preparedness and Evacuation Plan"
- B. Contra Costa Regional Medical Center HICS Manual
- C. Ambulatory Care Policy #3019, "Disaster Response Responsibilities of Employees"
- D. Ambulatory Care Policy #3021, "Emergency Response Plan"

APPROVALS:

Registration and Staffing Manager

Director of Ambulatory Care Nursing and Ancillary Departments

Ambulatory Care Policy Committee: 12/2022

Patient Care Policy & Evaluation Committee: 1/2023

Medical Executive Committee: 1/2023

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
CCRMC Chiefs	David Culberson: CCRMC Chief Executive Officer	03/2026
	Nadja Renfro: Ambulatory Care Reg Mgr	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 03/2024
 Last Approved N/A
 Effective Upon Approval
 Last Revised 04/2026
 Next Review 3 years after approval

Owner Mahjobeh Rezazadeh: Asst Dir Of Rehab Ther Sv
 Area Rehabilitation
 Applicability CCRMC, Health Centers & Detention

Policy for Departmental Disaster Plan

POLICY STATEMENT:

To outline the responsibilities of rehabilitation department employees during a disaster. Under California Law, when a disaster is declared, county employees become part of disaster. service work force which will respond to disaster. Disaster plan initiated by Command Center. After hours/weekends: Announcement via public address system. Main functions/services (during disaster) listed by priority to augment ambulatory services as assigned by the Command Center officials.

GUIDELINES:

The number of staff available varies depending upon patient census and service sites, Martinez, WCHC and PHC.

A. Departmental Communication Plan (e.g., Fan-Out Telephone Calling System):

1. Daytime Procedure: All rehabilitation staff will convene at the F Unit reception desk. The department Assistant Director or designee will contact the Command Center identifying the availability of staff. Assignments will be delegated by the designated supervisor in accordance with facility-wide labor need.
2. Weekend, Evening, Night Procedure: Responsible person in the Command Center will use the department's fan-out list until reaching one Rehab Services employee. The employee will in turn activate the list by making their first call. This procedure will continue until the list has been exhausted and all employees have been notified. As the first person contacted may be from the middle of the list, they will attempt to contact coworkers in both directions. Each employee is responsible for maintaining a copy of the list at their residence.

3. Staff who are off duty at such time a disaster is declared will be expected to report for duty in accordance with Contra Costa County policy. It is anticipated that such employees will learn of disaster conditions via public media or Fan-Out list phone calls, as possible.
4. Fan-Out List:
 - a. Responsibilities: Rehabilitation staff involvement will be dependent upon the nature and extent of the declared emergency as communicated from Hospital Command Center. Following consultation with the designated labor pool representative, the Assistant Director of Rehabilitation, or a designated representative, will assume responsibility for the delegation of duties to rehabilitation staff. As staffing needs during a disaster will most likely not require "rehabilitative" training, staff will be assigned duties as deemed necessary.
 - b. Procedure for modifying or discontinuing less than essential services: During a declared emergency, continuation of patient treatment will be dependent upon the nature of the disaster and corresponding Contra Costa Regional Medical Center staffing needs, as identified by Command Center officials.
 - c. Should the nature of the disaster allow outpatients and accompanying significant others to be sent home. If conditions do not allow, rehabilitation staff will direct patients in accordance with Command Center instructions. If operational, telephone use will be limited to that necessary for the care and treatment of patients and the development of the disaster plan. It will be assumed that outpatients will be aware of treatment cancellations through radio/television public service announcements. Upon termination of the disaster plan, rehabilitation personnel will contact patients to reschedule therapies. Patient records will be maintained under usual and customary procedures for the duration of the disaster process.
 - d. Evacuation: Should evacuation of Rehabilitation (F Unit) be necessary, staff will direct and/or assist patients to the nearest exit in accordance with posted evacuation routes. All staff and evacuated patients will convene in ~~the parking area between~~ **Parking Lot F and Engineering**. If conditions require a greater evacuation distance, patients and employees will convene across C Street, opposite the Emergency/Psychiatric Emergency Driveway.
 - e. Staff orientation to CCRMC and Rehabilitation Department disaster preparedness policies: Each new employee will be introduced to department specific disaster plans by his/her supervisor as part of introductory orientations. In addition, county and hospital disaster procedures will be introduced by representatives of each respective organization during respective orientations.
 - f. All staff will annually participate in SICRR (Safety and Infection Control Review) procedures. Completion of SICRR documented and will be maintained in departmental records.

- B. Who will be in charge of departmental operations during normal working hours and during non-business hours. (listed in successive order)
1. Assistant Director, Rehabilitation Therapy Services
 2. Rehabilitation Therapy Supervisor
 3. Rehabilitation Therapy Supervisor
 4. Rehabilitation Therapy Supervisor
 5. Staff- Physical, Occupational and Speech Therapist, by seniority
 6. Staff- Therapy Assistants, by seniority
 7. Clerks, by seniority
 8. Aides, by seniority
 9. Student Workers, by seniority

REFERENCES:

- A. [Contra Costa Health Services Emergency Plan](#)
- B. California Code of Regulations, Title 22, Division 5, Chapter 1 "General Acute Care Hospital" Article 7, 70741 "Disaster and Mass Casualty Program"
- C. California Code of Regulations, Title 22, Division 5, Chapter 1 "General Acute Care Hospital" Article 7, 70743 "Fire and Internal Disasters"
- D. [HSD Emergency Management Plan-Disaster Response](#)

APPROVALS:

~~Rehab Committee: 3/2024~~

~~Patient Care Policy and Evaluation Committee: 6/24~~

~~Joint Conference Committee: 11/2024~~

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
CCRMC Chiefs	David Culberson: CCRMC Chief Executive Officer	04/2026
	Mahjobeh Rezazadeh: Asst Dir Of Rehab Ther Sv	04/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2258

Agenda Date: 5/26/2026

Agenda #:

Patient Care Policies Agenda 5/26/2026

Title	Area	Revised?	Summary of Changes
Policy for Nursing Standard Orders for Prenatal Patients in Healthy Start Program	Ambulatory Care	Revised	No Comment Provided
Policy for Patient Treatment Management Plan	Ambulatory Care	Revised	Made changes adding Medical Director
Policy for Quick Response Cart	Ambulatory Care	Revised	JUST CHANGED DATES AND DID NOT MATCH FOR NEXT REVIEW
Policy for Receipt of Packages Containing Radioactive Materials	Diagnostic Imaging	Unchanged	No Comment Provided
Cardiology Privileges	Hospital & Health Centers	New	No Comment Provided
Emergency Medicine Privilege	Hospital & Health Centers	New	No Comment Provided
Policy for Anatomical Donations for Tissue and Organ Transplantation	Hospital & Health Centers	Revised	Updated to align policy for CDPH morgue program flexibility application during seismic compliance construction project.
Policy for Management of Patients' Personal Property After Discharge or Death	Hospital & Health Centers	Revised	Updated to align policy for CDPH morgue program flexibility application during seismic compliance construction project.
Psychiatry Privileges	Hospital & Health Centers	New	No Comment Provided
Resident Moonlighting-DFAM	Hospital & Health Centers	New	No Comment Provided
Anesthesiology Privilege	Hospital & Health Centers	Revised	Format change with criteria alignment
Contra Costa Regional Medical Center & Health Centers Medical Staff Rules and Regulations	Hospital & Health Centers	Revised	Added inpatient progress notes to our delinquency tracking protocol. It also added Results and Cosign Orders to the tracking, which were previously listed as "proposed changes." Lastly, it removed a section that was labeled "other inpatient documentation, as required by law" as this was felt to be unclear and duplicated by the other requirements.
Ambulatory Physician Privileges	Hospital & Health Centers	Unchanged	No Comment Provided
Policy for Cleaning and Disinfection of Ophthalmic Laser Lens	Infection Control	Revised	Updated related links
Policy for Diet Manual	Nutrition	Revised	Updated to match the Nutrition Care Manual
Policy for Umbilical Catheters	Perinatal	Unchanged	No Comment Provided
Policy for Quality Assurance in Pharmaceutical Compounding	Pharmacy	New	No Comment Provided
Medication Error Reduction Plan-Annual MERP Review	Pharmacy	Revised	Updated signature page date (page 1 of attachment) from 3/2025 to 3/2026.
MERP Plan for the Year 2026	Pharmacy	Revised	Replaced MERP Plan for the year 2025 with new MERP plan for the year 2026. New processes are noted under each MERP element in the document.
Policy for Medication Error Reduction Plan (MERP)	Pharmacy	Revised	References were updated
Policy for Mifepristone-RU486 (Mifeprex®)	Pharmacy	Revised	Approval section was removed
Policy for Record Retention and Management	Pharmacy	Revised	Removed approvals section
Policy for Close Observation in Psychiatric Units	Psychiatry	Revised	Changed 4 minor instead of 5 to care in the minor room in policy & attachment, updated references, removed arm length practices in the attachment



Origination 05/2012
 Last Approved N/A
 Effective Upon Approval
 Last Revised 03/2026
 Next Review 3 years after approval

Owner Kelley Taylor:
 Ambulatory Care
 Clin Supv
 Area Ambulatory Care
 Applicability CCRMC, Health
 Centers &
 Detention

Policy for Nursing Standard Orders for Prenatal Patients in Healthy Start Program

POLICY STATEMENT:

To facilitate the ordering of prenatal laboratory tests and prenatal vitamins for pregnant patients entering care. Documented lab results from another medical facility may be used if they can be obtained expeditiously. If only a handwritten report of lab results is available, attempt to get a lab printout of results. Positive pregnancy test should be documented on all patients.

GUIDELINES:

- A. Initial tests to order on all prenatal patients:
 1. AMB Healthy Start EUSD PANEL. Order under the name of the EUSD Provider performing the initial care risk stratification.
 2. Type & Screen.
 3. HBsAG.
 4. RPR.
 5. HbA1C.
 6. Hepatitis B-~~surface antigen~~
 7. Hepatitis C RNA.
 8. RPR
 9. CBC.

10. HIV
 11. HbA1c
 12. Hemoglobinopathy Screen- for all patients not of Northern European descent. No need to repeat if previous screen or HB electrophoresis.
 13. Pregnancy Test, unless valid proof of pregnancy, from another health care facility is provided.
- B. Order AMB HEALTHY START INITIAL PN Lab Panel. Order under the name ~~of~~of the Initial Prenatal Care Visit Provider. .
1. Rubella IgG.
 2. Varicella.
 3. Cystic Fibrosis.
 4. UCRE.
 5. UA.
 6. GC/GT.
 7. POCT Dipstick 4.
 8. SMA.
 9. cFDNA.
 10. MSAFP.
 11. ~~Quantiferon~~QuantiFERON. Do not repeat testing unless there are new risk factors since the last test. Do not repeat if prior positive ~~Quantiferon~~QuantiFERON.
 - a. Birth, traveled to, lived in or often crossed the border to a country where TB is common, Includes any country other than the United States, Canada, Australia, New Zealand, or a country in Western or Northern Europe.
 - b. Have lived with or spent time with someone who has had TB.
 - c. A person living with HIV/AIDS or have received and organ transplant.
 - d. Takes medication that weakens their immune system
 - e. ~~Llive~~Live, ~~if~~or have lived in a group setting such as homeless shelter or a jail or a prison.
- C. Additional laboratory test to order on risk factors- may be ordered by Healthy Start Staff or deferred to provider assessment.
1. TSH-Thyroid Stimulating Hormone. History of past or current thyroid disease, on or off medication, no test ~~int-he~~in the last 6 weeks.
 2. ~~Pre~~History of Diabetes (pre-gestational DM)
- D. Comprehensive Prenatal Services Program, State of California
1. Counseling and tests per the current State of California program.
- E. Data gathering that includes Combined Assessment on nutrition, psychosocial, and prenatal

education.

- F. Genetic Screening. Screening should be offered to patients meeting the guidelines and scheduled by Healthy Start staff at the correct time if desired by patient as part of the State screening program and if presenting gestational age is early enough and appointment is available.
1. cfDNA screen – Client desires, recommended screening from 10 weeks 0 days through 21 weeks 0 days. It can also be done throughout the pregnancy.
 2. MSAFP client desires and gestational age from 15 weeks 0 days through 21 weeks 0 days.
 3. NT ultrasound Guidelines.
 - a. History of neural tube defect in the mother or a previous fetus.
 - b. History of congenital heart disease in the mother, father of pregnancy, or prior fetus/child.
 - c. Known teratogen exposure.
 - d. Known pre-gestational DM1 or DM2.
 - e. Screening Hemoglobin A1c ≥ 6.5 at entry to care.
 - f. AMA AGE ≥ 35 Years old at EDD.
 - g. Patients scheduled for genetic counseling prior to 14 weeks 2 days.
 4. Follow-up on all abnormal NT and PNS screening for any recommended testing by the State Coordinator.
 5. Additional Tests: Additional test orders may be obtained by calling one of the OB attending physicians.
- G. Advanced Maternal Age (AMA) - for women who will be 35 years at the time of EDD, ~~offer~~ offer a NT or Level 112 ultrasound and genetic counseling with the option of amniocentesis ~~or~~ cell-free fetal DNA test or CVS depending on the insurance coverage (CCHP) and provider discretion.
- H. EARLY SCREENING GESTATIONAL AGE <24 WEEKS

1. ~~For patients with a diagnosis of diabetes preceding pregnancy:~~
 - a. ~~Draw HbA1C with Initial Prenatal Labs~~
 - b. ~~Do POCT Glucose~~
 - c. ~~Providing patients with a glucometer if she does not have one. Instruct patients to begin monitoring glucoses by the usual protocol of fasting and hour postprandial.~~
 - d. ~~Continue pre-existing glyburide or glipizide or metformin and insulin. Consult MD by phone if on other medications.~~
 - e. ~~Schedule MD visit within one week. If patient is less than 10 EGA and reports glucose >110 fasting or >180 postprandial or has random glucose >180 consult physician in call for consideration and management.~~

~~2. For all other prenatal patients:~~

- ~~a. Draw HbA1C on initial prenatal lab test.~~
- ~~b. If the initial HbA1c IS 6.5 OR ABOVE, order glucometer supplies and schedule diabetic teaching with close follow-up within one week to assess for the need of medication. Check blood sugar during teaching, if glucose >180, call MD on call for consideration of more immediate management.~~
- ~~c. If the HbA1c is 5.7 to 6.4, order 2 hours 75 GTT. If one value is abnormal, order glucometer supplies and schedule diabetic teaching and follow-up in 1-2 weeks to assess the need for medication.~~

~~3. 24-28 week GDM Screen:~~

- ~~a. All prenatal patients not already diagnosed with diabetes or gestational diabetes should have a 50 gram one hour GTT ordered between 24-28 weeks' gestation, or at the time of presentation if later than 28 weeks EGA. This includes all patients who had a normal screen prior to 24 weeks EGA.~~

4. Screening Test:

For patients with a diagnosis of diabetes preceding pregnancy:

- a. Draw HbA1C with Initial Prenatal Labs
- b. Do POCT Glucose
- c. Providing patients with a glucometer if she does not have one. Instruct patients to begin monitoring glucoses by the usual protocol of fasting and hour postprandial.
- d. Continue pre-existing glyburide/glipizide or metformin and insulin. Consult MD by phone if on other medications.
- e. Schedule MD visit within one week. If patient is less than 10 EGA and reports glucose >110 fasting or >180 postprandial or has random glucose >180 consult physician in call for consideration and management.
- 2. For all other prenatal patients:
 - f. Draw HbA1C on initial prenatal lab test.
 - g. If the initial HbA1c IS 6.5 OR ABOVE, order glucometer supplies and schedule diabetic teaching with close follow-up within one week to assess for the need of medication. Check blood sugar during teaching, if glucose >180, call MD on call for consideration of more immediate management.
 - h. If the HbA1c is 5.7 to 6.4, order 2 hours 75 GTT. If one value is abnormal, order glucometer supplies and schedule diabetic teaching and follow-up in 1-2 weeks to assess the need for medication.
 - 3. 24-28 week GDM Screen:
 - i. All prenatal patients not already diagnosed with diabetes or gestational diabetes should have a 50 gram one hour GTT ordered between 24-28 weeks' gestation, or at the time of presentation if later than 28 weeks EGA. This includes all patients who had a normal screen prior to 24 weeks EGA.

4. Screening Test:

~~j. 50 grams one hour GTT~~

- ~~i. The one hour 50-gram GTT is not fasting. Patients should be instructed not to drink or eat a large carbohydrate load immediately preceding the 50 GTT.~~
- ~~ii. They should not eat, smoke, or walk a significant amount during the test hour.~~
- ~~iii. If the one hour GTT is >130 and <200, Healthy Start nurses should contact the patient within one week to have them do the indicated follow-up of a 3 hour 100 gram GTT.~~
- ~~iv. If the one hour GTT is >200 make a presumptive diagnosis of GDM, order glucometer and supplies. schedule patient for GDM teaching. Follow-up in one or two weeks to check blood sugar numbers.~~

~~b. 100 grams 3 hour pregnancy GTT~~

- ~~i. Order if 50 grams one hour GTT is >130 and <200.~~
- ~~ii. The patient should be instructed to fast at least 8 hours and not more than 14 hours prior to the test.~~
- ~~iii. They should not eat, smoke or walk a significant amount during the test.~~
- ~~iv. Some providers may choose to go directly to a 3 hour 100 grams GTT skipping the 50 grams screen. This is most appropriate for patients at higher risk for GDM and acceptable for any patients. This is recommended by the American Diabetic Association.~~
- ~~v. A diagnosis of GDM is made if any two values are abnormal.~~

~~c. After Diagnosis of GDM~~

50 grams one hour GTT

- i. The one hour 50-gram GTT is not fasting. Patients should be instructed not to drink or eat a large carbohydrate load immediately preceding the 50 GTT.
- ii. They should not eat, smoke, or walk a significant amount during the test hour.
- iii. If the one hour GTT is >130 and <200, Healthy Start nurses should contact the patient within one week to have them do the indicated follow-up of a 3 hour 100 gram GTT.
- iv. If the one hour GTT is >200 make a presumptive diagnosis of GDM, order glucometer and supplies. schedule patient for GDM teaching. Follow-up in one or two weeks to check blood sugar numbers.

- b. 100 grams 3 hour pregnancy GTT
- v. Order if 50 grams one hour GTT is >130 and <200.
- vi. The patient should be instructed to fast at least 8 hours and not more than 14 hours prior to the test.
- vii. They should not eat, smoke or walk a significant amount during the test.
- viii. Some providers may choose to go directly to a 3 hour 100 grams GTT skipping the 50 grams screen. This is most appropriate for patients at higher risk for GDM and acceptable for any patients. This is recommended by the American Diabetic Association.
- ix. A diagnosis of GDM is made if any two values are abnormal.
- c. After Diagnosis of GDM

- x. Patients will be scheduled for glucometer teaching. Healthy Start RN will order supplies for monitoring of glucoses according to the standard regimen of fasting and one hour after each meal for total of 4 times per day.
- xi. The Healthy start RN may order the patient's diabetic supplies through the patients preferred designated pharmacy.
- xii. An appointment with a dietician will be scheduled as soon as possible.
- xiii. Glucose targets are 60-95 fasting and 1 hour postprandial <140. If 20% or more of the blood glucose are above the recommended range 60-95 fasting and more than 140 postprandial despite diet and exercise, the Healthy Start nurse will consult with the primary prenatal provider for possible initiation of medication.

d. Additional Screening for Congenital Anomalies

- xiv. Patients with poorly controlled Diabetes Mellitus at the time of conception have an increase incidence of congenital fetal abnormalities. These patients should be scheduled for the following examinations:
 - a. HbA1c > 6.5 of FBS >100s:
 - i. Order a Level 11 anatomy ultrasound, ideally performed at 20 weeks gestation.
 - ii. Order a fetal echocardiogram in addition to the Level 2 anatomy scan, ideally performed at 20-24 weeks gestation.

~~d. Additional Screening for Congenital Anomalies~~

- ~~i. Patients with poorly controlled Diabetes Mellitus at the time of conception have an increase incidence of congenital fetal abnormalities. These patients should be scheduled for the~~

following examinations:

a. HbA1c > 6.5 or FBS > 100s:

- i. Order a Level 11 anatomy ultrasound, ideally performed at 20 weeks gestation.
- ii. Order a fetal echocardiogram in addition to the Level 11 anatomy scan, ideally performed at 20-24 weeks gestation.

I. Postpartum Screenings:

~~Patients with a diagnosis of DM in pregnancy should be encouraged to continue diet, glucose monitoring and medication per instructions of their primary provider after pregnancy. They should be encouraged to continue diet, glucose monitoring and medication according to the instructions of their provider after pregnancy. They should be encouraged to breastfeed, use contraception when not intending pregnancy, and to seek assistance with attaining excellent glucose control prior to conception of their next pregnancy.~~

~~Patients with a diagnosis of GDM should be encouraged to maintain a healthy diet, like the GDM diet. They should be encouraged to monitor their weight and to maintain regular exercise to prevent Type 11 Diabetes in later life. They should be screened for diabetes or glucose intolerance with HbA1c at 2 – 3 months postpartum. Those with a diagnosis of impaired glucose tolerance should be encouraged to continue diet and exercise, and to be re-screened for diabetes in one year. Medication: Standing Orders.~~

J. Medications:

Postpartum Screenings:

Patients with a diagnosis of DM in pregnancy should be encouraged to continue diet, glucose monitoring and medication per instructions of their primary provider after pregnancy. They should be encouraged to continue diet, glucose monitoring and medication according to the instructions of their provider after pregnancy. They should be encouraged to breastfeed, use contraception when not intending pregnancy, and to seek assistance with attaining excellent glucose control prior to conception of their next pregnancy.

Patients with a diagnosis of GDM should be encouraged to maintain a healthy diet, like the GDM diet. They should be encouraged to monitor their weight and to maintain regular exercise to prevent Type 11 Diabetes in later life. They should be screened for diabetes or glucose intolerance with HbA1c at 2 – 3 months postpartum. Those with a diagnosis of impaired glucose tolerance should be encouraged to continue diet and exercise, and to be re-screened for diabetes in one year.

J. Medications:

1. ~~for Prenatal Vitamins~~
2. ~~Dispense: 1 bottle containing 100 tablets- 3 month supply~~
3. ~~Direction: Take one tablet daily during your pregnancy.~~
4. ~~The registered nurse will document the provision of the prenatal vitamins in ccLink and complete the Bulk Charging to generate a charge~~Prenatal Vitamins

- a. Dispense: 1 bottle containing 100 tablets- 3 month supply
 - b. Direction: Take one tablet daily during your pregnancy.
 - c. The registered nurse will document the provision of the prenatal vitamins in ccLink and complete the Bulk Charging to generate a charge
5. ~~Doxylamine-pyridoxine vit B6 (Diclegis) 10-10 mg delayed release tablet.~~
~~Dispense: 60 tablets, refills x 1.~~
~~Direction: Take 2 tablets by mouth at bedtime, if nausea still occurring after 3 days, increase 1 tab in the AM and 2 tabs at bedtime.~~
~~The HS RN will order medication, update medication lists, and complete documentation in Epic.~~
If indicated, Doxylamine-pyridoxine vit B6 (Diclegis) 10-10 mg delayed release tablet.
 - a. Dispense: 60 tablets, refills x 1.
 - b. Direction: Take 2 tablets by mouth at bedtime, if nausea still occurring after 3 days, increase 1 tab in the AM and 2 tabs at bedtime.
 - c. The HS RN will order medication, update medication lists, and complete documentation in Epic.

REFERENCES:

Comprehensive Prenatal Services Program, State of California, "Steps to Take", State Of California Training Binder

~~APPROVALS:~~

~~Perinatal Providers: 10/2022, 7/2025~~

~~Ambulatory Care Policy Committee: 5/2012, 7/2014, 4/2017, 2/2018, 6/2018, 10/2022, 12/2025~~

~~Ambulatory Policy Committee: 9/2012, 12/2014, 4/2018, 7/2018, 11/2022~~

~~Medical Executive Committee: 9/2012, 1/2015, 5/2018, 8/2018, 01/23~~

~~Joint Conference Committee:~~

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Ambulatory Policy Committee	Laura R. Colebourn [LC]	03/2026

Ambulatory Clinical Practice
Committee

Helena Martey: Director of
Ambulatory Nursing

02/2026

Kelley Taylor: Ambulatory Care
Clin Supv

02/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 07/2018
 Last Approved N/A
 Effective Upon Approval
 Last Revised 04/2026
 Next Review 3 years after approval

Owner Kelley Taylor:
 Ambulatory Care
 Clin Supv
 Area Ambulatory Care
 Applicability CCRMC, Health
 Centers &
 Detention

Policy for Patient Treatment Management Plan

POLICY STATEMENT:

Any patient, who exhibits behavior problems which contribute to an "incident" in any Health Center, will receive a face-to-face communication or phone call by the Ambulatory Care Clinical Services Manager (ACCS) or Clinic Coordinator/Center Manager (CC/CM) or designee, to review the incident and to reinforce expected behavior management plan.

GUIDELINES:

- A. Whenever a health center employee is aware of or is the recipient of inappropriate behavior by a patient/family member(s)/significant other which contributes to an "incident," that employee should document the incident in the Safety Event Reporting System (SERS) and notify their Ambulatory Care Clinical Services Manager or Clinic Coordinator/Center Manager (CC/CM) as well as the Safety Office/Deputy, if appropriate.
 1. Documentation should be specific as to the contributing factors to the "incident."
- B. Ambulatory Care Clinical Supervisor or designee will reach out to the patient for an interview, preferably in person, or via phone to obtain their point of view and provide service recovery if warranted.
 1. If appropriate, acknowledge not being able to meet their expectations.
 2. Take action to address the concerns addressed by the patient.
 3. Explain to the patient what they did that was inappropriate.
 4. Follow up with a summary of the in-person interview or phone conversation, action taken, targeted treatment plan and expectations for future visits to the health center.

5. For cases involving a provider, [refer to medical director to](#) contact the staff member involved in the incident. If the provider no longer feels safe or comfortable caring for this patient, this patient will be assigned another provider. For other staff members –for example Nursing, Registration, Laboratory, if their future assignment puts them in contact with this patient, another colleague will care for this patient.
6. If the incident involves a primary care provider and the provider no longer feels safe or comfortable caring for this patient, [refer to the Medical Director to](#) then follow the process to have the patient reassigned to a new provider. This includes the provider filing the CCHP Provider Complaint Form for all CCHP patients. Follow the regulations as specified by the Medical Board of California for discharging a patient from a provider's practice. This includes notifying in writing:
 - a. The last day the physician will be available to render medical care, assuring the patient has been provided at least 15 days of emergency treatment and prescriptions before discontinuing the physician's availability.
 - b. The process for obtaining a different primary care provider in our system including contacting CCHP Member Services or the Appointment Line
 - c. The information necessary to obtain the medical records compiled during the patient's care (whom to contact, how and where).
7. The ACCS will send the letter to the patient and be distributed as follows:
 - a. Scanned into patient's medical record.
 - b. Patient's Primary Care Provider/Electronic notification of Primary Care Provider and Treatment Provider.
 - c. Patient Relations Department
 - d. CCHP (if patient is a CCHP member).
8. The ACCS will direct the provider to document the inappropriate behavior under the problem list as History of Behavior Incident at Health Center on ---- (date). (ICD-10 Code Z86.59). The provider will include Patient Treatment Management Provider will include Patient Treatment Management Plan letter was sent to patient. letter was sent to a patient.

- C. If, after receiving this initial letter, the patient contributes to another incident at the health center, the care team will collaborate with the Patient Relations Department for possible consideration for a care contract. ~~(See also Policy #1006).~~

In the rare event of an egregious incident, the patient may proceed directly to care contract and/or clinic reassignment. This decision shall be made in consultation with the Ambulatory Nursing Director and/or the Ambulatory Medical Director. ~~AC Policy # 6004 regarding Changing.~~

REFERENCES:

- A. [HSD Workplace Violence Prevention Plan](#)
- B. Joint Commission Standard 2024, PC.01.03.05, "The hospital's use of behavior management

procedures adhere to the patient's plan for care, treatment, and services and organization policy." EP 2: "Behavior management procedures, when used, are part of the patient's plan of care."

APPROVALS:

~~Ambulatory Clinical Practice Committee: 7/2018, 11/2024~~

~~Ambulatory Policy Committee: 7/2018, 6/2019, 10/2019, 11/2024~~

~~Medical Executive Committee: 10/2019, 11/2024~~

Attachments

 [Sample Letter 1](#)

 [Sample Letter 2](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Ambulatory Policy Committee	Laura R. Colebourn [LC]	04/2026
Ambulatory Clinical Practice Committee	Kelley Taylor: Ambulatory Care Clin Supv	04/2026
	Kelley Taylor: Ambulatory Care Clin Supv	04/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination	04/2008
Last Approved	N/A
Effective	Upon Approval
Last Revised	04/2026
Next Review	3 years after approval

Owner	Kelley Taylor: Ambulatory Care Clin Supv
Area	Ambulatory Care
Applicability	CCRMC, Health Centers & Detention

Policy for Quick Response Cart

POLICY STATEMENT:

Trained and qualified health center staff will respond to potentially life-threatening medical emergencies at the Basic Life Support level and call 9-1-1 to activate the county's EMS system. These carts will remain locked at all times except when in use.

To specify the medications and supplies to be kept on hand at each Health Center except the Infusion Clinic* located on the CCRMC Campus in Martinez.

The Infusion Clinic located on the CCRMC campus will maintain a crash cart as described in [CCRMC Nursing Policy for Crash Cart Readiness](#).

GUIDELINES:

- A. Check Quick Response Cart **DAILY** to make sure locking mechanism is intact and ensure:
 1. All supplies stored on top and outside of the Quick Response Cart are present per **Quick Response Medication and Supply Contents and Expiration List** (See [attachment A](#)).
 2. Oxygen cylinder is > 1000 psi and replace if necessary.
 3. Battery operated portable suction is functional.
 4. Battery operated portable suction is plugged into a power source when not in use.
 5. Readiness of AED and resuscitation kit plus extra electrodes with current date. The QUIK-PAK electrode packet should remain connected to the defibrillator and unopened until required for an SCA (sudden cardiac arrest) Quick Response.

6. Expiration date sticker on all drawers is current.
 7. One (1) pair of scissors
 8. Sign and date the List of Expiration Dates Form.
- B. If security seal is broken:
1. Check the contents immediately.
 2. Replace missing items.
 3. Reseal the Quick Response Cart with appropriate locking mechanism.
 4. Document name, date and seal number on the Quick Response Cart check form.
- C. Check the expiration dates of the Quick Response Cart **ONCE A MONTH**.
1. It will be the monthly responsibility of sterile processing and pharmacy to do monthly checks.
 2. Replace any outdated supplies.
 3. Place date of first drug to outdate on front of drawer.
 4. Check and replenish/exchange all necessary items to the Quick Response Cart immediately after using the cart.
 5. Seal the Quick Response Cart with the appropriate locking device if needed.
 6. Nursing will document with name, seal number and date on the Quick Response Cart check form daily.

REFERENCES:

- A. 2020 American Heart Association Advanced Cardiac Life Support (ACLS).
- B. American Academy of Pediatrics and the American Heart Association Pediatric Advanced Life Advanced Life Support (PALS) 2016 Guidelines.
- C. [Nursing Policy for Crash Cart Readiness](#)
- D. [Pharmacy Policy for Ambulatory Care Quick Response Carts](#)

APPROVALS:

Ambulatory Clinical Practice Committee: 4/2016, 9/2019, 10/2022, [3/2026](#)

Ambulatory Policy Committee: 3/2013, 7/2016, 9/2019, 11/2022, [3/2026](#)

Medical Executive Committee: 8/2016, 10/2017, 12/2022, [3/2026](#)

Joint Conference Committee: 3/2023, [3/2026](#)

Attachments

[!\[\]\(125d701e9425b54c764340b5671b38cd_img.jpg\) A_ Quick Response Cart Contents updated old 4064 A.docx](#)

[!\[\]\(21199eb166cc97331a0c54c649195dcc_img.jpg\) B: Ambulatory Care Quick Response Cart Log](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Ambulatory Policy Committee	Laura R. Colebourn [LC]	04/2026
Ambulatory Clinical Practice Committee	Kelley Taylor: Ambulatory Care Clin Supv	04/2026
	Kelley Taylor: Ambulatory Care Clin Supv	04/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 01/2011
 Last Approved N/A
 Effective Upon Approval
 Last Revised 04/2024
 Next Review 1 year after approval

Owner Angela Womble:
 Chief Radiologic Technologist
 Area Diagnostic Imaging
 Applicability CCRMC, Health Centers & Detention

Policy for Receipt of Packages Containing Radioactive Materials

POLICY STATEMENT:

To assure the safety of all personnel, patients, and visitors by avoiding unintended radiation exposure, and to assure the security of radioactive materials and prevent unauthorized use.

GUIDELINES:

Procedures are in place to assure the safety and security of radioactive materials as required by CCRMC's Radioactive Materials License. Under NO circumstances are couriers to have unsupervised access to the Nuclear Medicine Department.

- A. During business hours, the radiopharmaceutical couriers have been instructed to deliver radioactive packages directly to the Nuclear Medicine department.
- B. Deliveries outside of business hours must be made by prior arrangements by the radiopharmacy with the Nuclear Medicine staff.

APPROVALS:

Diagnostic Imaging Leadership: 8/2022, 8/2023, 4/2024
 Patient Care Policy & Evaluation Committee: 9/2022, 6/2024
 Medical Executive Committee: 9/2022, 6/2024
 Joint Conference Committee: 11/14/2024

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [SP]	04/2026
DI Policy & Procedure Committee	Angela Womble: Chief Radiologic Technologist	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Cardiology Privileges

Name:
(Please Print)

Instructions to applicant

1. Initial to the left of each privilege requested.
2. Sign form and submit **with the required documentation/case log/certificate(s). Experience can be from direct patient care, precepting, CCRMC simulation lab, or documented outside trainings.** Medical Staff Office can help you pull relevant reports from EPIC.

Required Qualifications

Education/Training

Documentation of successful completion of an Accreditation Council for Graduate Medical Education (ACGME) – or American Osteopathic Association (AOA)–accredited postgraduate training program in the relevant medical specialty and successful completion of an accredited fellowship in Cardiology.

Certification

Documentation of current subspecialty certification or Board eligibility (with achievement of certification within the required time frame set forth by the respective Boards) leading to subspecialty certification in Cardiology by the relevant American Board of Medical Specialties or the American Osteopathic Board.

AND

Inpatient/outpatient care to at least 200 patients with cardiovascular diseases, reflective of the scope of privileges requested, during the past 24 months, or successful completion of an ACGME- or AOA-accredited residency, or clinical fellowship within the past 24 months. Please provide a clinical activity/procedure log.

Continuing Education

Continuing education accordance with requirements to maintain certification and licensure in this specialty.

Certificates

Advanced Cardiac Life Support

For EACH core privilege requested, you must demonstrate the following Clinical Experience:

Initial Applicants

Maintenance of Certification or Osteopathic Ongoing Certification is required.

Renewal

Current documented competence and an adequate volume of experience (200 patients) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Cardiovascular Disease Core Privileges

This is not intended to be an all-encompassing procedures list. It defines the types of activities/procedures and privileges that the majority of practitioners in this specialty perform at this organization and inherent activities/procedures/privileges requiring similar skill sets and techniques, as determined by the department chair.

To the Applicant: Initial and date next to the privileges you are requesting.

Applicant: initial to request	For Core Privileges: you do not have to do all these procedures, but having the privilege allows you to.	Division/ Dept Chair: initial to recommend
☐	<i>Initial request:</i> Cardiology Clinic and Hospital Based Care • Performance of history and physical exam • Adult transthoracic echocardiography (TTE), including Doppler and color flow • Adult transesophageal echocardiography (TEE), including Doppler and color flow • Ambulatory electrocardiography monitor interpretation (eg, Holter monitor, etc). • Cardioversion, electrical • ECG (EKG) interpretation • Insertion and management of central venous catheters, pulmonary artery catheters, and arterial lines • Noninvasive hemodynamic monitoring • Exercise Treadmill testing • Stress echocardiography (exercise and pharmacologic stress) • Transcutaneous and transcutaneous External Pacemaker Placement • Pericardiocentesis • Cardioversion • Insertion and management of central venous catheters, pulmonary artery catheters and arterial line for hemodynamic monitoring	☐

Non-Core Privileges

To obtain these privileges, you must provide documentation of the minimum number of procedures required (provider, supervising attending, or during department in-service). Privileges will be considered based on applicability, scope of practice, and documentation of experience.

Applicant: initial to request	Non-core privileges are requested individually, in addition to requesting core privileges.	Division/ Dept Chair: initial to recommend
☐	Documented current competence and evidence of the performance of at least two cases within the past five years for each requested privilege. Supervision of myocardial Perfusion testing: administration and monitoring of vasodilator agents (Regadenoson, Persantine, Adenosine), including interpretation of ECG (EKG) portion (does not include interpretation of imaging portion-see below) Interpretation of myocardial perfusion studies, imaging portion ☐ <i>Criteria for Initial Request of each/any of the above-listed non-core privileges:</i> 1. Successful completion of an ACGME– or AOA–accredited post graduate training program in the relevant medical specialty and successful completion of an accredited fellowship in Cardiology, including minimum of 50 interpretations of myocardial perfusion studies and/or coronary CT angiograms during training or career. <u>AND</u> 2. Documented current competence and evidence of the performance of at least 5 cases of each requested privilege within the past 24 months, or completion of training within the past 24 months. Please provide clinical activity/procedure log. <i>Criteria for Renewal of Privileges:</i> Documented current competence and evidence of the performance of at least five (5) cases within the past 24 months. Administration of Sedation and Analgesia: ☐ Conscious Sedation (e.g. versed, morphine, fentanyl) – DOES NOT INCLUDE USE OF KETAMINE OR PROPOFOL <i>Criteria for Initial Request:</i> 3. Successful completion of an ACGME– or AOA–accredited post graduate training program which included training in administration of sedation and	☐

	analgesia, including the necessary airway management skills, or department-approved extra training and experience. <u>AND</u> 4. Documented current competence and evidence of the performance of at least five (5) cases (can be any combination) within the past 24 months, or completion of training within the past 24 months. Please provide clinical activity/procedure log. <i>Criteria for Renewal of Privileges:</i> 1. Documented current competence and evidence of the performance of at least 5 cases (can be any combination) within the past 24 months.	
☐	Privilege to operate and/or supervise operation of fluoroscopy equipment. Requirement: Current Fluoroscopy or Radiology X-Ray Supervisor and Operator Permit from CDPH.	☐

Other Privileges

If you wish to obtain any privilege not listed above, please list it here and the Credentials Committee will review.

Initial Focused Professional Practice Evaluation (iFPPE) Requirements

For initial requests, providers must complete ALL iFPPE forms through Medical Staff Office (MSO) and return to MSO.

ACKNOWLEDGMENT OF PROVIDER

I have requested only those privileges for which by education, training, current experience, and documented performance I am qualified to perform and for which I wish to exercise at Contra Costa Regional Medical Center Hospital and Clinics, and I understand that:

- a. In exercising any clinical privileges granted, I will adhere by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related

documents.

Provider's Signature: _____

Date: _____

DEPARTMENT CHAIR'S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- ☐ **Recommend All Requested Privileges**
☐ **Recommend Privileges with the Following Conditions/Modifications:**
☐ **Do Not Recommend the Following Requested Privileges:**

Privilege	Condition/Modification/Explanation

Notes:

Department Chair Name (Print): _____

Department Chair Signature: _____

Date: _____



Emergency Medicine Privileges

Name:
(Please Print)

Instructions to applicant

1. Initial to the left of each privilege requested.
2. Sign form and submit **with the required documentation/case log/certificate(s). Experience can be from direct patient care, precepting, CCRMC simulation lab, or documented outside trainings- Medical Staff Office can help you pull relevant reports from EPIC.**

Required Qualifications

Education/Training	Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)—or American Osteopathic Association (AOA)—accredited residency in Emergency Medicine
Certification	Current certification or Board eligibility in the examination process leading to certification in Emergency Medicine by the American Board of Emergency Medicine (ABEM) or American Osteopathic Board of Emergency Medicine (AOBEM)

OR

Education/Training	Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)—or American Osteopathic Association (AOA)—accredited residency in Family Medicine. <u>AND</u> EM fellowship or Department-approved experience equivalent to fellowship or Department-approved training planning to get to fellowship-equivalent experience <u>AND</u> Training in the administration of sedation and analgesia, including necessary airway management skills.
Certification	Board Certification or Board Eligibility by the American Board of Family Medicine (ABFM), or American Osteopathic Board of Family Physicians (AOBFP)

AND

Continuing Education	As per state licensure
Clinical Experience (Initial)	At least 200 patient encounters with acceptable results, reflective of the scope and complexity of the privileges requested during the past 24 months. <u>OR</u> Completion of residency training during the past 24 months
Clinical Experience (Reappointment)	At least 200 patient encounters with acceptable results, reflective of the scope and complexity of the privileges requested during the previous 24 months based on results of ongoing professional practice evaluation and outcomes.
Other Requirements	For providers who are Family Medicine-trained with less than five years of FTE employment at CCRMC, or Emergency Medicine-trained, but not yet board certified,

please include documentation of current:

- ATLS certification
- ACLS certification
- NRP certification
- PALS certification

Emergency Medicine – Children & Adult Patients Core Privileges

Applicant: initial to request	For Core Privileges: you do not have to do all these procedures, but having the privilege allows you to.	Division/ Dept Chair: initial to recommend
(initials)	Assess, evaluate, diagnose, and initially treat patients of all ages who present in the ED with any symptom, illness, injury, or condition. Provide immediate recognition, evaluation, care, stabilization, and disposition in response to acute illness and injury. Privileges include the performance of history and physical examinations, the ordering and interpretation of diagnostic studies, including laboratory, diagnostic imaging, and electrocardiographic examinations, and the administration of medications normally considered part of the practice of emergency medicine. Privileges include, but are not limited to anoscopy, arterial catheter insertion; assessment and examination of physical and sexual abuse; biohazard decontamination; bladder catheterization (foley catheter, suprapubic), capnometry; cardiac pacing (cutaneous, transvenous); cardiopulmonary resuscitation (CPR), including pediatric resuscitation; central venous access, measurement of compartment pressures, control of epistaxis, cricothyrotomy; cystourethrogram; delivery of newborn; drainage of peritonsillar abscess; escharotomy/burn management; evaluation/initial management of testicular torsion; excision of thrombosed hemorrhoid; foreign body removal; fracture/dislocation management, reduction, immobilization; gastric lavage; gastronomy tube placement; history and physical; incision and drainage; intracardiac injection; intubation; laryngoscopy; lateral canthotomy; local anesthesia; lumbar puncture; mechanical ventilation; nasogastric tube placement; non-invasive ventilatory management; ocular pH determination; ocular tonometry; paracentesis; percutaneous transtracheal ventilation; pericardiocentesis; perichondral hematoma incision and draining; peripheral venous cutdown; peritoneal lavage; placement of intraosseous line; POCUS (point of care ultrasound); procedural sedation(including conscious); regional nerve block; removal of rust ring; slit lamp examination; spine immobilization; thoracentesis/thoracotomy/thoracostomy tube insertion; tonometry; tooth stabilization/emergency dental management; tracheostomy management; trephination of nails; trephination of skull; violent patient management/restrain; wound closure and management.	(initials)

Other Privileges

If you wish to obtain any privilege not listed above, please list it here and the Credentials Committee will review.

Initial Focused Professional Practice Evaluation (iFPPE) Requirements

For initial requests, providers must complete ALL iFPPE forms through Medical Staff Office (MSO) and return to MSO.

ACKNOWLEDGMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and documented performance I am qualified to perform and for which I wish to exercise at Contra Costa Regional Medical Center, and I understand that:

- a. In exercising any clinical privileges granted, I will adhere by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Practitioner's Signature: _____

Date: _____

DEPARTMENT / DIVISION CHAIR'S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- ☐ **Recommend All Requested Privileges**
- ☐ **Recommend Privileges with the Following Conditions/Modifications:**
- ☐ **Do Not Recommend the Following Requested Privileges:**

Privilege	Condition/Modification/Explanation

Notes:

Department Chair Name (Print): _____

Department Chair Signature: _____

Date: _____



Origination	05/1999	Owner	Akiko Tennison: Nursing Program Manager
Last Approved	N/A	Area	Hospital & Health Centers
Effective	Upon Approval	Applicability	CCRMC, Health Centers & Detention
Last Revised	05/2026		
Next Review	3 years after approval		

Policy for Anatomical Donations for Tissue and Organ Transplantation

POLICY STATEMENT:

To insure that hospital deaths are considered for possible anatomical donations in conformance with Assembly Bill (AB) 1689, the California Uniform Anatomical Gift Act. To provide a mechanism for the procurement and donation of organs and tissues. This policy applies to donation and procurement after brain death. For policy and procedures relating to organ donation after circulatory/cardiac death (DCD), see Policy #612C.

- A. Except in the case where the useful life of the part does not permit, a reasonable search (for at least 12 hours) will be made for possible consenting authority for organ and tissue donation. This search to locate other persons should be documented in the medical record.
- B. The Donor Network West (DNW) will be notified of any patient who has died in the hospital (including a stillborn infant and fetus) or whose death is imminent for possible anatomical donations.

GUIDELINES:

- A. Procedure:
 1. At or near the time of death, the deceased individual's next-of-kin (or other individual) will be asked, by Donor Network West staff, whether the deceased was an

organ donor or if the family is a donor family. Donor Network West staff will work collaboratively with CCRMC staff regarding the suitability of a potential donor.

2. Medical Social Services will assist in conducting a reasonable search for possible consenting authority for organ and tissue donation.
3. Nursing Unit
 - a. Charge Nurse or designee will notify the Medical Center Supervisor of the impending death and the need to call Donor Network West.
 - b. If organs are to be retrieved, the Operating Room is to be notified by the charge nurse or medical center supervisors after consent for donation is obtained.
 - c. The potential donor information worksheet will be initiated to gather information such as the patient's name, medical record number, name of next-of-kin, status of donor authorization, and disposition of the body.
 - d. In case of Operating Room (OR) deaths, the potential donor information worksheet will be initiated by the OR Nurse and given to the Medical Center Supervisor to complete the process.
4. Consent for Donation
 - a. At the time of death or near the time of death, the family of the deceased shall be asked about the possibility of organ donations by DONOR NETWORK WEST in collaboration with CCRMC staff. Approaching the donor family will be done with sensitivity so as not to impose on their grieving process.
 - b. Approval for donation must be obtained by the most reasonably available next-of-kin: (a) the spouse or domestic partner, (b) an adult son or daughter, (c) either parent, (d) an adult brother or sister, (e) adult grandchildren, (f) grandparents, (g) any adult who exhibited special care and concern for the decedent during the decedent's lifetime, (h) a guardian or conservator of the decedent at the time of death, (i) any other person authorized or under obligation to dispose of the body. Immediate acceptance of a family's decision to decline the option to donate organs or tissues will be acknowledged; for un-emancipated minor donors between 15- 18 years of age, only upon written consent of parent or guardian
 - c. Donor Network West, or Tissue Bank, staff will obtain the consent from the next-of-kin in person, or on the telephone. A copy of the consent form or transcription of the telephone conversation will be sent to Medical Records for documentation.
5. Notification to Donor Network West
 - a. Donor Network West will be notified of a potential organ donors/ at the first indication of irrecoverable illness/ injury, imminent death, prior to family discussion regarding withdrawal life sustaining measure, prior to formal brain death evaluation. For potential tissue donors, DNW will be notified within 1 hour of asystole. Its services are available twenty-four hours of the day, seven days a week, to handle any type of donation and

can assist the hospital staff with any questions that arise.

- b. The patient's physician, registered nurse, or designee will (1) notify Donor Network West at 1-800-55-DONOR who will arrange for organ removal and, (2) inform the Executive Director of CCRMC and CCHCs of the anatomical donation. The Unit/Department shall arrange for all fees to be billed to the Donor Network West.
- c. The process for ensuring that charges are billed to the Donor Network West at the time of declaration of brain death is as follows:
 - i. Notify Admissions Registration at 925-370-5160 to add Specialty Billing Value: Donor Network West to the patient's inpatient encounter which flags the Hospital Account Record (HAR) with a Do Not Bill (DNB) for Patient Accounting to review.

6. Organ Donation: Definitions of Terms

- a. Organ donation can take place when death has been established, and the potential donor is maintained on organ support systems. Contraindications for donation will vary with each organ system; therefore, each potential donor is evaluated on an individual basis. See DONOR NETWORK WEST Referral Guide for additional criteria information
 - b. Brain Death: Two physicians must independently confirm brain death, and both physicians must document in the progress records of the chart that the patient is neurologically dead. The Checklist for Determination and Declaration of Brain Death (MR 209) may be completed in lieu of progress notes. Neither physician may be a member of the transplant team.
 - c. A brain death is evidenced by an individual who has sustained irreversible cessation of all functions of the entire brain, including the brainstem, as determined by accepted medical standards. The California Brain Death Statute of 1974 (California Health and Safety Code 7180) states, "A person shall be pronounced dead if it is determined by a physician that the person has suffered a total and irreversible cessation of brain function." The Donor Network West Organ/Tissue Donation Referral Guide may be used to obtain additional details.
7. Donor Maintenance: The donor must be maintained on organ support systems until the transplant team can arrive to remove the organs in surgery.
8. Donation after - Circulatory /cardiac Death: See Policy #612C "Organ Donation after Cardiac Death" for policy and procedures relating to organ donation from a patient who has not been diagnosed as brain dead but will be pronounced dead on the basis of irreversible cessation of circulatory and respiratory functions.
9. Imminent Death: A severely brain injured, ventilator patient, with either clinical findings consistent with a Glasgow Coma Score (GCS) of ≤ 5 , or a plan to discontinue mechanical/pharmacological support.
- a. Early Referral for Timely Notification: Referral by a hospital to the Organ Procurement Organization (OPO) at the first indication of irrecoverable illness/ injury, prior to family discussion regarding withdrawal life sustaining measure, prior to formal brain death evaluation.

- b. Early Referral for Timely Notification of Potential Tissue Donors: Referral from hospital to the Donor Network within 1 hour of asystole for evaluation of potential tissue donor eligibility.
- 10. Hospital Reimbursement
 - a. All charges that are incurred from the time the patient is declared neurologically dead, including operating room fees, shall be billed to the: DONOR NETWORK WEST -
 - b. Notify admissions of the time of brain death declaration (for financial accounting).
- 11. Tissue Donation
 - a. The following are general criteria for tissue donors:
 - i. All death: Every hospital death will be evaluated as a potential tissue/eye donor.
 - ii. Eye Donations: If used for transplant purposes, the eyes must be recovered within 12 hours after cardiac death. The eye enucleation procedure is performed by a staff member of the Tissue Bank who is trained and authorized by law.
- 12. Other Tissue Donations: These tissues can be recovered within 24 hours after cardiac death. Potential tissue donors must be placed in refrigeration -immediately after cardiac death. Tissue recovery is performed by the staff of the tissue bank. The tissue bank staff prefers a sterile environment; however, a non-sterile environment, i.e., pathology department, ~~morgue~~ or coroner's office, may be used if necessary.
- 13. Coroner Authorization:
If the deceased falls under the jurisdiction of the coroner, the coroner must be advised that a request for anatomical donation has been made; his/her authorization must be obtained before proceeding with the organ and/or tissue donation. Donor Network West will obtain this authorizations.
- 14. For whole body donation, please refer to The Donor Network West Organ/Tissue Donation Referral Guide (available on nursing units).
- 15. All dead-on arrival (DOA) cases will be assessed using the same procedures above.
- 16. Medical Records: On a quarterly basis, copies of the death log will be sent to the Donor Network West for bi-annual audits.
- 17. Donor Network West/-will provide information regarding referral rates to Administration on a quarterly basis. This information will be shared with appropriate committees within CCRMC.

RELATED LINKS:

[MR 211 Death Procedure](#)

[MR 209 Checklist for Determination & Declaration of Brain Death](#)

DONOR NETWORK WEST – Consent for Organ and Tissue Donation (brought by Donor Network West)

REFERENCES:

- A. California Health and Safety Code "Uniform Anatomical Gift Act" Sections 7150 – 7151.40
- B. The Routine Death Notification Legislation (42 CFR Part 482)
- C. Designated Organ Procurement Organization (OPO): DONOR NETWORK WEST Resource Manual
- D. Contra Costa Regional Medical Center Hospital [Procedure for Patient Expiration](#)
- E. TJC TS.01.01.01 "The hospital, with the medical staff's participation, develops and implements written policies and procedures for donating and procuring organs and tissues."

APPROVALS:

Clinical Practice Committee: 2/2018, 10/2022

Patient Care Policy & Evaluation Committee: 7/2012, 3/2018, 11/2022

Medical Executive Committee: 5/2018, 11/2022

Joint Conference Committee: 3/2023

Attachments

 [Potential Donor Information Worksheet](#)

 [Tissue Donor Referral](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [TT]	05/2026
Clinical Practice Committee	Ira-Beda Sabio: Director, Inpatient Nursing OP [LS]	05/2026
	Akiko Tennison: Nursing Program Manager	05/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 06/1997
 Last Approved N/A
 Effective Upon Approval
 Last Revised 05/2026
 Next Review 3 years after approval

Owner Ira-Beda Sabio:
 Director, Inpatient Nursing OP
 Area Hospital & Health Centers
 Applicability CCRMC, Health Centers & Detention

Policy for Management of Patients' Personal Property After Discharge or Death

POLICY STATEMENT:

It is the duty of all hospital employees to return personal belongings inadvertently left at the facility to the patient or their representative whenever possible. The hospital will be liable for the damage to or loss of personal property of a patient only if negligence or willful wrongdoing by the hospital/health centers or its employees can be shown.

The hospital is not responsible for:

Patient's personal articles not deposited for safekeeping

Personal articles that cannot be deposited for safekeeping

~~The hospital is not responsible for:~~

~~Patient's Unclaimed personal articles not deposited for safekeeping~~

~~Personal articles that cannot be deposited for safekeeping~~

~~Unclaimed personal articles~~ held in Lost and Found located in Environmental Services (EVS) office which will be discarded after 7 calendar days

GUIDELINES:

A. Unclaimed Personal Property:

1. Property of No Substantial Value

- a. When personal effects having no apparent substantial value (i.e. clothes) are forgotten or abandoned by a patient, the Charge Nurse or designee will

call the patient and inform them of items forgotten and confirm their address. Disposition of the articles will be discussed at that time. Options include:

- i. Disposing of the item in the trash.
 - ii. Having the patient or a designee come within 24 to 48 hours to retrieve the items from the nursing unit.
 - iii. ~~If longer than 24 hours, picking items up from the Lost & Found located in the Environmental Services (EVS) office which is located on the southwest corner of CCRMC campus.~~
 - iv. ~~Items left in Lost & Found longer than 7 calendar days will be discarded.~~
- b. After disposition is confirmed, the Charge Nurse or designee will bag the articles and place an **Unclaimed Patient Property** sticker (see attached form MR13) on the outside of the bag. If patient is coming back within 24 hours, hold the bag at the nurses' desk. ~~If the bag is~~Can be discarded from the unit if not retrieved at the end of 24~~picked up after 48 hours, take directly to Environmental Services Senior Clerk who must accept items. Do not leave bags outside the door.~~
- c. ~~Items will be held in Lost and Found up to 7 calendar days, after which time they will be discarded.~~
- d. In case of expiration, all valuables (jewelry, etc.) should be safeguarded as soon as possible and released to a family member after signature is obtained. If no family available, all valuables will be listed on the Personal Valuables form and sent to the safe. All clothing, dentures, etc., will be placed in a sealed and labeled bag (as directed above) ~~and sent with the body to the morgue by the~~ Charge Nurse or designee. ~~The will contact next of kin and seek direction on disposition of items. If items will be left~~picked up, they will be held on the ~~gurney with the body and released to the mortician at the same time~~unit for up to 48 hours. If the personal~~Items not picked up after 48 hours will be discarded. Alternatively, the items are not picked up by the mortician, Pathology will call~~can be disposed of if so requested by the next-of-kin and seek direction on disposition of the items. ~~If the items will be picked up, they will be held 24 hours at the Lab reception desk. If not retrieved in 24 hours, the items will be delivered to Lost and Found located in the Environmental Services (EVS) office and held for up to 7 days. Items not picked up after 7 days will be discarded. Alternatively, the items can be disposed of if so requested by the next-of-kin.~~
- e. Weapons: Contact Sheriff Deputy in HSD Security office.

2. Property of Substantial Value

- a. When personal effects with apparent substantial value are left after a patient's death or discharge, the Charge Nurse or designee will deposit the valuables in the hospital safe located in the Admissions Office. The

envelope will be marked "expired" in the case of a patient's death. The Valuable Receipt form will be attached to the Patient's Personal Property Inventory (MR598-0) form and sent to Health Information Management.

- b. Admissions clerk will contact the appropriate party via registered mail four weeks after discharge or death and document that on the Unclaimed Valuables Log after Discharge or Death form.
 - c. The Admissions clerk will track the registered mail. If the return receipt, or letter is returned within 30 days, the Admissions clerk will document that on the Unclaimed Valuables Log after Discharge or Death form and send a second letter via registered mail.
 - d. If personal property is not claimed within 180 days of deposit in safe or patient's discharge, it will be disposed of according to county procedure. A notice will be mailed to the owner's last known address by certified mail. The letter will contain:
 - i. Patient's name
 - ii. Hospital's name
 - iii. Envelope #
 - iv. Instructions to obtain valuables
3. Time and place of disposal or auction
 - a. The Admissions clerks will open the unclaimed valuable envelope(s) and dispose of at Administration's discretion.
 - b. Unclaimed funds will be deposited into fund 813700. .
 - c. If item(s) is sold, the facility may deduct from the proceeds of the sale reasonable charges for storage, expenses of sale, and money owed to facility by last known owner. If there is any balance remaining from the sale after the deductions, the owner must claim the funds within one year. If the funds are not claimed, they must be deposited to the county's general fund. In the interim, the funds are to be transferred to the Auditor's Office.

B. Missing Property

1. The patient/visitor must complete the "Board of Supervisors of Contra Costa County Instructions to Claimant Form" and forward to the Clerk of the Board of Supervisors, County Administration Building, Room 106, 651 Pine Street, Martinez, CA, 94553. This form can be obtained from the Patient Relations staff or online from the Contra Costa County website.
2. If an employee receives a report of lost or damaged patient/visitor property, the event must be entered into the Safety Event Reporting System (SERS) which alerts the appropriate supervisor and/or manager for initial investigation and follow-up.
3. Upon receipt of the completed Claim Form by Contra Costa County Risk Management, a written notification will be emailed to Contra Costa Regional Medical Center, Healthcare Risk Manager, who will forward this form to the Patient Relations

Service Coordinator.

4. The Patient Relations Coordinator will contact the Nurse Program Manager (NPM) who will have the patient's health record reviewed to investigate the circumstances of the loss. The NPM will complete the Patient/Visitor Request for Personal Property Reimbursement Form Investigation Form (A408) specifically noting information obtained during the investigation.
5. The Patient/Visitor Request for Personal Property Reimbursement Investigation Form (A408) should be returned to Patient Relations Service Coordinator within 5 calendar days of written notification.
6. The Patient Relations Service Coordinator will return the completed Patient/Visitor Request for Personal Property Reimbursement Investigation Form (A408) and claimant document to Contra Costa County Risk Management for final approval. A copy of this form will be emailed to the Healthcare Risk Manager.
7. After Contra Costa County Risk Management receives the completed A-408 form from Patient Relations Service Coordinator and the filed County Claim Form by the patient/visitor, County Risk Management will review all documents and evaluate for claim payment consideration.
8. Contra Costa County Risk Management will notify patient/visitor of claim reimbursement determination.

RELATED LINKS:

[Patient/Visitor Request for Personal Property Reimbursement, form A-408](#)

[MR 598-0 Patient's Personal Property Inventory](#)

Admission - Unclaimed Valuable Log after Discharge or Death

Admission - Unclaimed Inventory form

Admission - Letter #1

Admission - Letter #2

Admission - Valuables Release form

Admission - Disposal of Valuables

Board of Supervisors of Contra Costa County Instructions to Claimant Form

[Demand on the Treasury of the County of Contra Costa](#)

[MR 13 Unclaimed Patient Property form](#)

[Property Damage Release](#)

REFERENCES:

- A. California Hospital Association Consent Manual 2008, 35th edition, "Hospital Liability for

Patients' Belongings " Chapter 22

- B. CCRMC/HCs Policy & Procedure Manual: [Procedure for Compensation for Loss or Damage to Hospital and Health Centers Patient/Visitor Property](#)
- C. CCRMC/HCs Policy & Procedure Manual: [Procedure for Securing & Releasing Patient's Valuables](#)

APPROVALS:

Clinical Practice Committee: 11/19

Patient Care Policy & Evaluation Committee: 12/19

Medical Executive Committee: 1/20

Attachments

[Valuables Receipt Slip](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [TT]	05/2026
Clinical Practice Committee	Ira-Beda Sabio: Director, Inpatient Nursing OP [LS]	05/2026
	Ira-Beda Sabio: Director, Inpatient Nursing OP [LS]	05/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Psychiatry Privileges

Name:
(Please Print)

Instructions to applicant

1. Initial to the left of each privilege requested.
2. Sign form and submit **with the required documentation/case log/certificate(s). Experience can be from direct patient care, precepting, CCRMC simulation lab, or documented outside trainings.** Medical Staff Office can help you pull relevant reports from EPIC.

Required Qualifications

Education/Training

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)– or American Osteopathic Association (AOA)–accredited residency in psychiatry.

If requesting pediatric core privileges only, must have completed Pediatric Psychiatry Fellowship

Certification

Current board certification or board eligible leading to certification in psychiatry (with achievement of certification within the required time frame set forth by the respective Boards) by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry.

Continuing Education

As per California license and section-specific requirements below.

For EACH core privilege requested, you must demonstrate the following Clinical Experience:

Initial or Reappointment

Maintenance of board certification or Osteopathic Ongoing Certification is required.

Initial or Reappointment

Current documented competence and an adequate volume of experience 100 patient encounters with acceptable results, reflective of the scope of privileges requested (of the age range of patients they will see at CCRMC), within the past 24 months, based on results of ongoing professional practice evaluation and outcomes.

Inpatient-Outpatient Psychiatry Core Privileges

Applicant:	For Core Privileges: you do not have to do all these procedures, but	Division/

initial to request	having the privilege allows you to.	Dept Chair: initial to recommend
(initials)	Adult Core Privileges Admit, evaluate, diagnose, treat (including the outpatient treatment of drug overdoses and outpatient detoxification when either is appropriate to an outpatient setting and medication assisted treatment – MAT) and provide consultation to patients presenting with mental, behavioral, addictive, or emotional disorders (e.g., psychoses, depression, anxiety disorders, substance use disorders, developmental disabilities, sexual dysfunctions, and adjustment disorders). Privileges include providing consultation with physicians in other fields regarding mental, substance use, behavioral, or emotional disorders, pharmacotherapy, psychotherapy, family therapy, behavior modification, consultation to the courts, and emergency psychiatry as well as the ordering of diagnostic laboratory tests and prescribing medications. Includes the performance of a history and physical exam. May provide psychiatric care to patients in the intensive care setting. Assess, stabilize, and determine the disposition of patients with emergent conditions regarding emergency and consultative call services.	(initials)
(initials)	Pediatric Core Privileges (18 years of age and younger) <i>(If requesting pediatric core privileges only, must have completed Pediatric Psychiatry Fellowship)</i> Admit, evaluate, diagnose, treat (including the outpatient treatment of drug overdoses and outpatient detoxification when either is appropriate to an outpatient setting and medication assisted treatment – MAT) and provide consultation to patients presenting with mental, behavioral, addictive, or emotional disorders (e.g., psychoses, depression, anxiety disorders, substance use disorders, developmental disabilities, sexual dysfunctions, and adjustment disorders). Privileges include providing consultation with physicians in other fields regarding mental, substance use, behavioral, or emotional disorders, pharmacotherapy, psychotherapy, family therapy, behavior modification, consultation to the courts, and emergency psychiatry as well as the ordering of diagnostic laboratory tests and prescribing medications. Includes the performance of a history and physical exam. May provide psychiatric care to patients in the intensive care setting. Assess, stabilize, and determine the disposition of patients with emergent conditions regarding emergency and consultative call services.	(initials)

Addiction Psychiatry

Privileges

Required Qualifications

Education/Training	The same as for general psychiatry, plus successful completion of an accredited ACGME or AOA residency/fellowship in addiction medicine.
Certification	Current subspecialty board certification or board eligibility leading to subspecialty certification (with achievement of certification within the required time frame set forth by the respective Boards) in addiction medicine by the American Board of Psychiatry and Neurology, or completion of a certificate of added qualifications in addiction medicine by the American Osteopathic Board of Neurology and Psychiatry.
Continuing Education	As per California license and section-specific requirements below.

For EACH core privilege requested, you must demonstrate the following Clinical Experience:

Initial or Reappointment	Maintenance of board certification or Osteopathic Ongoing Certification is required. Provision of inpatient, outpatient, or consultative services, reflective of the scope of privileges requested, for at least 100 patient encounters within the past 24 months, or successful completion of an ACGME– or AOA–accredited residency or clinical fellowship, within the past 24 months. Please provide a clinical activity log
Initial or Reappointment	Current documented competence and an adequate volume of experience: 50cases with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Addiction Psychiatry Core Privileges

To obtain these privileges, you must provide documentation of the minimum number of procedures required (provider, supervising attending, or during department in-service). Privileges will be considered based on applicability, scope of practice, and documentation of experience.

Applicant: initial to request	For Core Privileges: you do not have to do all these procedures, but having the privilege allows you to	Division/ Dept Chair: initial to recommend
(initials)	Admit, evaluate, diagnose, treat, and provide consultation to patients with alcohol or other substance use disorders and to individuals with the dual diagnosis of substance use disorders and other psychiatric disorders. Treatment modalities, beyond core privileges, include inpatient detoxification, inpatient management of overdoses. and maintenance pharmacotherapy. Includes performance of history and physical exam. May provide care to patients in the intensive care setting. Assess, stabilize, and determine the disposition of patients with emergent conditions regarding emergency and consultative call services.	(initials)

Hypnotherapy Non-Core Privileges

To obtain these privileges, you must provide documentation of the minimum number of procedures required (provider, supervising attending, or during department in-service). Privileges will be considered based on applicability, scope of practice, and documentation of experience.

Applicant: initial to request	Non-core privileges are requested individually, in addition to requesting core privileges.	Division/ Dept Chair: initial to recommend
(initials)	<i>Initial request:</i> Successful completion of an ACGME– or AOA–accredited residency in psychiatry AND Evidence of at least 40 hours of post-degree training that included at least 20 hours of individualized training by a practitioner experienced in the procedure. AND Documented current competence and evidence of the performance of at least 10 hypnotherapy procedures within the past 24 months, or completion of training within the past 24 months. Please provide clinical activity log. <i>Renewal/Reappointment:</i> Documented current competence and evidence of the performance of at least 10 hypnotherapy procedures within the past 24 months based on results of ongoing professional practice evaluation and outcomes.	(initials)

Other Privileges

If you wish to obtain any privilege not listed above, please list it here and the Credentials Committee will review.

Initial Focused Professional Practice Evaluation (iFPPE) Requirements

For initial requests, providers must complete ALL iFPPE forms through Medical Staff Office (MSO) and return to MSO.

ACKNOWLEDGMENT OF PROVIDER

I have requested only those privileges for which by education, training, current experience, and documented performance I am qualified to perform and for which I wish to exercise at Contra Costa Regional Medical Center Hospital and Clinics, and I understand that:

- a. In exercising any clinical privileges granted, I will adhere by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Provider's Signature: _____

Date: _____

DEPARTMENT CHAIR'S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- ☐ **Recommend All Requested Privileges**
- ☐ **Recommend Privileges with the Following Conditions/Modifications:**
- ☐ **Do Not Recommend the Following Requested Privileges:**

Privilege	Condition/Modification/Explanation

Notes:

Department Chair Name (Print): _____

Department Chair Signature: _____

Date: _____



Resident Moonlighting Ambulatory Medicine Privileges

Name:
(Please Print)

Instructions to applicant

1. Initial to the left of each privilege requested.
2. Sign form and submit **with the required documentation/case log/certificate(s). Experience can be from direct patient care, precepting, CCRM simulation lab, or documented outside trainings.** Medical Staff Office can help you pull relevant reports from EPIC.

Required Qualifications

Education/Training	Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)—or American Osteopathic Association (AOA) and active Residency in Contra Costa Health Family Residency program
Certification	Documentation of current certification or board eligibility (with achievement of certification within 3 years) leading to certification in Family Medicine by the American Board of Family Medicine or Family Practice and Osteopathic Manipulative Treatment by the American Osteopathic Board of Family Physicians.
Continuing Education	As per California license and section-specific requirements below.

For EACH core privilege requested, you must demonstrate the following Clinical Experience:

Initial Applicants	Provision of care, reflective of the scope of privileges requested, for at least 200 adult medicine patient visits during the past 24 months. If requesting pediatric privileges, at least 100 pediatric patients. Please provide clinical activity/procedure log. Experience must correlate to requested privileges <u>As well as</u> Successful completion of 24 months of residency training and confirmation of good standing by the Residency Program Director or Designee.
Renewal	No renewal provisions, must apply for privileges in the desired department upon graduation from residency

Diagnostic Imaging Core Privileges

Applicant: initial to request	For Core Privileges: you do not have to do all these procedures, but having the privilege allows you to.	Division/ Dept Chair: initial to

		recommend
(initials)	Evaluate, diagnose, treat, and provide consultation to all patients 18 years old and above, with a wide variety of illnesses, diseases, injuries, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, integumentary, nervous, female reproductive and family planning, genitourinary systems, and including mild to moderate -psychiatric disorders, dependence or addiction to alcohol or other drugs, and medical management of chronic pain. Assess, stabilize, consult, and determine disposition of patients with emergent conditions. Procedures include, but are not limited to: performance of history and physical; arthrocentesis and joint injections; cryotherapy (e.g. for removal of warts); excision of cutaneous and subcutaneous lesions, tumors, and nodules and superficial foreign body; facilitate medical groups; fluorescein exam; incision and drainage of abscesses; local anesthesia; management of uncomplicated, minor, closed fractures and uncomplicated dislocations; nasal packing for hemostasis; pap smears; POCT (point of care testing); peripheral nerve blocks; provider performed microscopy (PPM); removal of IUD; removal of a nonpenetrating foreign body from the eye, nose, ear, or vagina; simple skin excision and biopsy; simple wound care and management of superficial burns; subcutaneous, intradermal and intramuscular injections; suture of uncomplicated laceration.	(initials)
(initials)	Pediatric Core Privileges evaluate, diagnose, and treat pediatric patients who have common illnesses, injuries, or disorders from birth through 21 years old. This includes routine uncomplicated newborn care in the hospital (i.e. L&D, nursery, postpartum, etc.), assessment of physical, emotional, and social health, treating acute and chronic disease, and determining the disposition of patients with emergent conditions. Procedures include but are not limited to: performance of history and physical; bladder catheterization, cryotherapy (e.g. for removal of warts); excision of cutaneous and subcutaneous lesions, nodules, and superficial foreign body; facilitate medical groups; incision and drainage of abscesses; local anesthesia; management of uncomplicated, minor, closed fractures and uncomplicated dislocations; nasal packing for hemostasis; POCT (point of care testing); peripheral nerve blocks; provider performed microscopy (PPM); removal of IUD; removal of a nonpenetrating foreign body from the eye, nose, ear, or vagina; simple skin excision and biopsy; simple wound care and management of superficial burns; subcutaneous, intradermal and intramuscular injections; suture of uncomplicated laceration.	(initials)

Non-Core Privileges

To obtain these privileges, you must provide documentation of the minimum number of procedures required (provider, supervising attending, or during department in-service). Privileges will be considered based on applicability, scope of practice, and documentation of experience.

Applicant: initial to request	Non-core privileges are requested individually, in addition to requesting core privileges.	Division/ Dept Chair: initial to recommend
(initials)	Nexplanon Insertion & Removal <i>Initial Request:</i> Completion of the Nexplanon training program. Please submit Training Certification. <i>Reappointment/Renewal:</i> none - MSO has on file.	(initials)
(initials)	Low-risk obstetrics (prenatal and postpartum)	(initials)

	Evaluate, diagnose, and treat low-risk patients who are pregnant, intend to become pregnant, or are recently post-pregnancy. Management of patients with obesity with BMI ≤ 60; chronic Hypertension with BP $< 150/100$ WITHOUT medication; GDM on diet or orals with A1c < 6.5; AMA; history of pre-eclampsia in one previous pregnancy at ≥ 37 weeks; history of cesarean section; substance abuse with or without buprenorphine therapy; cholestasis of pregnancy; size vs. date discrepancies with EFW $> 10\%$; UTI; anemia with hemoglobin > 8; vaginitis. Procedures include but are not limited to: third-trimester POCUS (please request below) <i>Initial Request:</i> training during family medicine residency of at least 2 months of obstetrics, including prenatal/postpartum care and POCUS.	
(initials)	Basic First and Second Trimester POCUS for dating, location, and viability of pregnancy. <i>Initial request:</i> 30 ultrasounds in the past 24 months.	(initials)
(initials)	<u>Third trimester OB ultrasound</u> for placental location, viability, presentation, amniotic fluid assessment ☐ Requested Initial Criteria: Training in Residency or an Ultrasound course and 20 cases.	(initials)

Other Privileges

If you wish to obtain any privilege not listed above, please list it here and the Credentials Committee will review.

Initial Focused Professional Practice Evaluation (iFPPE) Requirements

For initial requests, providers must complete ALL iFPPE forms through Medical Staff Office (MSO) and return to MSO.

ACKNOWLEDGMENT OF PROVIDER

I have requested only those privileges for which by education, training, current experience, and documented performance I am qualified to perform and for which I wish to exercise at Contra Costa Regional Medical Center

Hospital and Clinics, and I understand that:

- a. In exercising any clinical privileges granted, I will adhere by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Provider's Signature: _____

Date: _____

DEPARTMENT CHAIR'S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- ☐ **Recommend All Requested Privileges**
- ☐ **Recommend Privileges with the Following Conditions/Modifications:**
- ☐ **Do Not Recommend the Following Requested Privileges:**

Privilege	Condition/Modification/Explanation

Notes:

Department Chair Name (Print): _____

Department Chair Signature: _____

Date: _____



Anesthesiology Delineation of Privileges

Name: _____
Effective From: ____/____/____ to ____/____/____

Instructions:

1. Check the Request checkbox to each privilege in the Core Privileges or Special Non-Core Privileges section.
2. Sign form and submit with the required documentation.
3. This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

Note that privileges granted may only be exercised at the site(s) designated by CCRMC and/or setting(s) that have sufficient space, equipment, staffing, and other resources required to support the privilege.

Required Qualifications

Education/Training	Successful completion of an ACGME or AOA-accredited residency in Anesthesiology.
Certification	Current certification or Board eligibility in the examination process leading to certification in Anesthesiology by the American Board of Anesthesiology (ABA) or American Osteopathic Board of Anesthesiology (AOBA)
Continuing Education	Applicant must provide 50 Category I CMEs from the past 24 months. (Waived for applicants who completed training during the past 24 months)
Clinical Experience (Initial)	Applicant must provide a clinical activity/procedure log documentation of 200 cases of anesthesia performed in the hospital, reflective of the scope and complexity of the privileges requested during the past 24 months. (Waived for applicants who completed residency or fellowship training during the past 24 months)
Clinical Experience (Reappointment)	Applicant must provide a clinical activity/procedure log documentation of 200 cases of anesthesia performed in the hospital with acceptable results, reflective of the scope and complexity of the privileges requested during the previous 24 months based on results of ongoing professional practice evaluation and outcomes.
Other Requirements	Current ACLS certification required.

Anesthesiology – Adolescent (≥ 14 yrs of age) & Adult Patients Core Privileges

Check the appropriate box of each privilege/procedure requested.

Request		Chair

Name: _____

Effective From: ____/____/____ to ____/____/____

		Recommends
	General Anesthesia Privileges for Adolescent and Adult Patients The practitioner is authorized to provide comprehensive anesthesia care for adolescent and adult patients across all appropriate hospital areas, including the intensive care unit, emergency department, and radiology departments. This scope includes the administration of general, regional, and local anesthesia, as well as all levels of sedation. Care focuses on maintaining or restoring stable physiologic function during and immediately following surgical, gynecologic, and diagnostic procedures. As part of these privileges, the practitioner may conduct all essential pre-anesthetic assessments and clinical evaluations, and is responsible for perioperative physiological management and pain control. This includes care of critically ill patients and the use of image-guided techniques as needed. Key capabilities include: • Administering general, regional, and local anesthesia, and all levels of sedation • Providing anesthesia services in all hospital locations (ICU, ED, radiology, and others) • Performing history and physical examinations • Assessing, consulting, and preparing patients for anesthesia • Managing and teaching cardiac and pulmonary resuscitation • Diagnosing and treating acute pain • Evaluating respiratory function and applying respiratory therapy • Performing image-guided procedures such as ultrasound localization • Managing critically ill patients requiring anesthesiologic expertise • Monitoring and maintaining normal physiology during the perioperative period • Preventing and treating pain during and after procedures through sedation/analgesia, general anesthesia, or regional anesthesia	

Obstetrics Anesthesia Core Privileges

Request		Chair Recommends
	Obstetric Anesthesia Privileges The practitioner is authorized to provide comprehensive anesthetic care for women during pregnancy and throughout the puerperium. This includes the administration of general, regional, and local anesthesia, as well as all levels of sedation for adult and adolescent female patients. Privileges apply across all appropriate hospital	

Name: _____

Effective From: ____/____/____ to ____/____/____

areas, including the ICU, emergency department, and radiology.

Within obstetric anesthesia, the practitioner is eligible to perform all forms of neuraxial analgesia, support labor and delivery (both spontaneous and operative), and provide anesthesia for obstetric procedures as well as non-obstetric surgical care for pregnant patients. Competence in image-guided techniques, including ultrasound assistance, is also included.

Key capabilities include:

- Administering anesthesia and sedation for pregnant and postpartum patients across all hospital areas
- Performing history and physical examinations
- Providing epidural, spinal, and combined spinal-epidural analgesia
- Managing maintenance of neuraxial analgesia via bolus, continuous infusion, or patient-controlled epidural analgesia
- Providing anesthesia for spontaneous and operative vaginal delivery
- Managing anesthesia for retained placenta, cervical dilation, uterine curettage, postpartum tubal ligation, and cervical cerclage
- Consulting on and managing pregnant patients undergoing non-obstetric surgery
- Administering general anesthesia for cesarean delivery
- Performing ultrasound-guided localization of relevant anatomical structures

Focused Professional Practice Evaluation (FPPE) Requirements

For detailed information regarding FPPE/proctoring, see attached guidelines.

ACKNOWLEDGMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and documented performance I am qualified to perform and for which I wish to exercise at Contra Costa Regional Medical Center, and I understand that:

- a. In exercising any clinical privileges granted, I will adhere by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Practitioner's Signature: _____

Date: _____

Name:
Effective From: ____/____/____ to ____/____/____

DEPARTMENT / DIVISION CHAIR'S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- ☐ **Recommend All Requested Privileges**
☐ **Recommend Privileges with the Following Conditions/Modifications:**
☐ **Do Not Recommend the Following Requested Privileges:**

Privilege	Condition/Modification/Explanation

Notes:

Department Chair Name (Print): _____

Department Chair Signature: _____

Date: _____



Origination 05/2025
 Last Approved N/A
 Effective Upon Approval
 Last Revised 03/2026
 Next Review 1 year after approval

Owner Lauren Wondolowski: Primary Care Prov Lmted Ex
 Area Hospital & Health Centers
 Applicability CCRMC, Health Centers & Detention
 References TJC 2025

Contra Costa Regional Medical Center & Health Centers Medical Staff Rules and Regulations

Table of Contents

ARTICLE I. INTRODUCTION

1.1 INTRODUCTION

ARTICLE II. ADMISSION AND DISCHARGE

2.1 ADMISSIONS

2.2 EMERGENCY PATIENTS

2.3 TRANSFERS

2.4 PATIENTS WHO ARE A DANGER TO THEMSELVES AND OTHERS

2.5 DISCHARGE ORDERS AND INSTRUCTIONS

2.6 DISCHARGE AGAINST MEDICAL ADVICE

2.7 DISCHARGE PLANNING

2.8 DISCHARGING FROM THE PSYCHIATRIC UNIT

ARTICLE III. MEDICAL RECORDS

3.1 GENERAL REQUIREMENTS

3.2 AUTHENTICATION

- 3.3 CLARITY, LEGIBILITY, AND COMPLETENESS
- 3.4 ABBREVIATIONS AND SYMBOLS
- 3.5 ADMISSION HISTORY AND PHYSICAL EXAMINATION
- 3.6 PREOPERATIVE DOCUMENTATION
- 3.7 PROGRESS NOTES
- 3.8 OPERATIVE / PROCEDURE REPORTS
- 3.9 IMMEDIATE POST-OPERATIVE / PROCEDURE NOTES
- 3.10 PRE-ANESTHESIA NOTES AND PRE-SEDATION ASSESSMENTS
- 3.11 ANESTHESIA RECORD
- 3.12 POST-ANESTHESIA NOTES AND POST-SEDATION NOTES
- 3.13 CONSULTATION REPORTS
- 3.14 INPATIENT PSYCHIATRIC UNIT CARE PLANS
- 3.15 FINAL DIAGNOSES
- 3.16 DISCHARGE SUMMARIES
- 3.17 CLINIC DOCUMENTATION AND IN-BASKET MANAGEMENT
- 3.18 STUDENTS, RESIDENTS, AND FELLOWS IN TRAINING
- 3.19 ACCESS AND CONFIDENTIALITY
- 3.20 INCOMPLETE/DELINQUENT MEDICAL RECORDS
- 3.21 COPY AND PASTE FUNCTIONALITY
- ARTICLE IV. STANDARDS OF PRACTICE
- 4.1 ORDERS
- 4.2 CONSULTATIONS
- 4.3 DEATH IN HOSPITAL
- 4.4 AUTOPSY
- 4.5 ADVANCED PRACTICE PROVIDERS
- 4.6 INFECTION PREVENTION AND CONTROL
- ARTICLE V. PATIENT RIGHTS
- 5.1 PATIENT RIGHTS
- 5.2 INFORMED CONSENT
- 5.3 ADVANCE DIRECTIVES AND DO NOT ATTEMPT RESUSCITATION

5.4 DISCLOSURE AND REPORTING OF UNANTICIPATED OUTCOMES

5.5 RESTRAINTS AND SECLUSION

5.6 INVESTIGATIONAL STUDIES

ARTICLE VI. SURGICAL CARE

6.1 TISSUE SPECIMENS

6.2 VERIFICATION OF CORRECT PATIENT, SITE, AND PROCEDURE

ARTICLE VII. RULES OF CONDUCT

7.1 DISRUPTIVE BEHAVIOR

7.2 IMPAIRED PRACTITIONERS

7.3 TREATMENT OF FAMILY MEMBERS

7.4 MEDICAL RECORDS OF SELF AND FAMILY MEMBERS

7.5 COMPLIANCE WITH HOSPITAL HEALTH REQUIREMENTS

7.6 COMMUNICATION METHODS

ARTICLE VIII. FUNCTIONS OF THE MEDICAL STAFF

8.1 Description of Medical Staff Functions

ARTICLE IX. MEDICAL STAFF COMMITTEES

9.1 General

9.2 Credentials Committee

9.3 Peer Review Oversight Committee (PROC)

9.4 Administrative Affairs (Bylaws) Committee

9.5 Ambulatory Policy Committee

9.6 Ethics Committee

9.7 Continuing Medical Education Committee

9.8 Cancer Committee

9.9 Medical Staff Assistance Committee

9.10 Inter-Disciplinary Practice Committee

9.11 Patient Care Policy and Evaluation Committee (PCP&E)

9.12 Patient Safety and Performance Improvement Committee

Appendix A

ARTICLE I. INTRODUCTION

1.1 INTRODUCTION

These Rules and Regulations are adopted by the Medical Executive Committee and approved by the County Board of Supervisors of Contra Costa Medical Center & Health Centers (collectively referred to as Contra Costa Health or "CCH") to further define the general policies contained in the Contra Costa Medical Center & Health Centers Medical Staff Bylaws ("Bylaws"), and to govern the discharge of professional services within the Hospital. These Rules and Regulations are binding on all Medical Staff appointees and other individuals exercising clinical privileges (collectively referred to as "Practitioners" as defined within the Bylaws). Hospital policies concerning the delivery of health care may not conflict with these Rules and Regulations, and these Rules and Regulations shall prevail in any area of conflict. These Rules and Regulations of the Medical Staff may be adopted, amended, or repealed only by the mechanism provided in the Bylaws. This article supersedes and replaces all other Medical Staff rules and regulations, or policies and procedures, pertaining to the subject matter thereof.

ARTICLE II. ADMISSION AND DISCHARGE

2.1 ADMISSIONS

2.1.1 General

Patients are admitted to the hospital only on the decision of a licensed practitioner permitted by the state of California to admit patients to a hospital.

- a. **Admitting Privileges:** A patient may be admitted to the hospital only by a practitioner on the Medical Staff with admitting privileges.
- b. **Admitting Diagnosis:** Except in an emergency, no patient will be admitted to the hospital until a provisional diagnosis or valid reason for admission has been written in the medical record. In the case of emergency, the admitting diagnosis will be recorded as soon as possible.
- c. **Admission Priority and Procedure:** The Hospital "Policy for Admission, Unit Transfer, and Discharge" shall be followed.

2.1.2 Inpatient Psychiatric Services

- a. The hospital policies for admission shall be followed for admission to the inpatient psychiatric unit, including specific psychiatry "Policy for Admission Criteria to Inpatient Psychiatry," "Inpatient Psychiatry – Medical/Physical Care of Patients," and "Procedure for Admission Process to Inpatient Psychiatric Service from Psychiatric Emergency Services (PES)."

2.2 EMERGENCY PATIENTS

The Emergency Medical Treatment and Active Labor Act (EMTALA) requires that for all patients who present to the Emergency Department, the Hospital must, at a minimum, provide for an appropriate medical screening examination within the capability of the hospital's emergency department, including ancillary services routinely available to the emergency department, to determine whether or not an emergency medical condition exists. Practitioners should follow the hospital Policy for EMTALA.

2.2.1 Emergency Department Call Coverage

- a. **Call Schedule:** The Hospital is required to maintain a list of physicians who are on call for duty after the initial examination to provide treatment necessary to stabilize an individual with an

emergency medical condition. The Department/Division Chairs shall provide the hospital with a list of physicians who are scheduled to provide call coverage to respond to medical emergencies.

b. Response Time:

- i. It is the responsibility of the on-call physician, or designee, to respond in an appropriate time frame.
- ii. The on-call physician, or designee, should respond to calls from the Emergency Department no longer than twenty (20) minutes by telephone, unless a shorter time is required by contract or accrediting body. The on-call physician or designee must arrive at the Hospital, if requested to see the patient, in a timeframe based on the communication between the ED practitioner and the on-call physician. Specialties that provide telemedicine coverage shall see the patient based on the timeframes defined by contract and/or agreed upon between the ED practitioner and the on-call telemedicine physician.
- iii. In areas of dispute, the ED physician decision rules. If there is disagreement on the timeframe, the ED practitioner shall define the timeframe.
- iv. If the on-call physician does not respond to being called or paged, the physician's documented designee shall be contacted. If the physician's designee does not respond to being called or paged, the Administrative Director should be contacted. Any violations of EMTALA will be reported in compliance with the policy.
- v. Teaching services are expected to respond in the same timeframes or sooner in lieu of the on-call physician when appropriate.

- c. **Substitute Coverage:** It is the on-call physician's responsibility to change the online call schedule through communication with the Department or Division leadership when there is enough time to do so as determined by the hospital. Short timeframes require the on-call physician to arrange for coverage and notify the Emergency Department if they are unavailable to take call when assigned. Failure to notify the Emergency Department of alternate call coverage may result in the initiation of disciplinary action.

2.2.2 Patients Not Requiring Admission

In cases where the Emergency Department consults with the on-call physician and no admission is deemed medically necessary, the Emergency Department physician shall implement the appropriate care/treatment and discharge the patient with arrangements made for appropriate follow-up care. If the Emergency Department physician and the consultant agree that the outpatient visit can serve in lieu of the consultant coming into the Emergency Department, an appropriate outpatient follow-up care plan shall be developed.

If the consultant, in disagreement with the emergency physician, feels 1) that inpatient admission is not warranted, or 2) the patient requires transfer to another facility, then the consultant, at the request of the emergency physician, is required to assess the patient and make appropriate arrangements and document their decision.

2.2.3 Patient Follow-up After Discharge from the ED

The ED will coordinate or provide information about follow-up care with an appropriate practitioner at CCHS or an external provider as appropriate.

2.2.4 Guidelines for Call Coverage

The following rules should be used in developing service policies regarding call coverage obligations:

- a. The hospital shall have physician coverage to comply with basic emergency medical service capability requirements.¹
 - b. Call duties, to supply basic stabilization and disposition of the patient, should be based on the practitioner's core privileges and training.
-

[1] Title 22, § 70413. Basic Emergency Medical Service, Physician on Duty, General Requirements.

- c. The Medical Executive Committee in consultation with Administration shall determine which specialties are required to have call schedules (in addition to the basic medical service capability requirements),
- d. Emergency duties may be divided by specialty or subspecialty.
- e. Call is assigned by the Department or Division Leadership.
- f. Call coverage is documented in an electronic call roster (e.g., Amion).
- g. If a physician is on-call at more than one hospital simultaneously, they must have an agreed upon back-up physician named to provide coverage in case of emergencies.
- h. Physicians must be listed by name on the call roster (they cannot be listed by group).
- i. Departments or specialties that do not provide 24/7/365 call coverage shall work with Administration to communicate the coverage schedule to the Emergency Department and develop a back-up plan when coverage is not available.²

2.2.5 Failure to Meet Call Obligations

All failures to meet call responsibilities shall be reported to the Department Chair and the Medical Executive Committee. Recurrent failure to meet call obligations may result in corrective action per the Medical Staff Bylaws.

2.2.6 Qualified Medical Personnel for Screening Examinations

Only physicians are deemed to be Qualified Medical Personnel (QMP) for purposes of (1) performing an appropriate medical screening examination of an individual presenting to CCH to determine whether the individual suffers from an emergency medical condition, and (2) completing the required physician certification for transfer of a patient with an emergency medical condition including active labor who has not been stabilized to another facility for treatment at the direction of the Responsible Physician.

2.3 TRANSFERS

2.3.1 Transfers To and From Other Acute Care Facilities

Patients who are transferred to or from another hospital must follow the Hospital policies including "Policy for Patient Transfers to Other Facilities" and "Policy for Accepting Patient Transfers from Outside Facilities and Referrals from Contra Costa Health Centers," and ensure EMTALA compliance.

2.3.2 Transfers Within the Hospital

Patients may be transferred from one patient care unit to another in accordance with the priority established by the Hospital. All practitioners actively providing care to the patient will be notified of all transfers. Hospital policies must be followed including "Policy for Admission, Unit Transfer, and Discharge."

[2] §489.24(j) - Availability of On-call Physicians In accordance with the on-call requirements specified in §489.20(r)(2), a hospital must have written policies and procedures in place: (1) To respond to situations in which a particular specialty is not available or the on-call physician cannot respond because of circumstances beyond the physician's control.

2.4 PATIENTS WHO ARE A DANGER TO THEMSELVES AND OTHERS

The attending physician, or designee, is responsible for providing the Hospital with necessary information to assure the protection of the patient from self-harm and to assure the protection of others. Practitioners caring for patients who are a danger to themselves and/or others should follow "Procedure for Assault Precautions" policy and "Suicide Risk Screening, Evaluation, and Precautions in Psychiatric Units" policy.

2.5 DISCHARGE ORDERS AND INSTRUCTIONS

Patients will be discharged or transferred only upon the authenticated order of the attending physician, or designee, who shall provide, or assist Hospital personnel in providing, written discharge instruction in a form that can be understood by all individuals and organizations responsible for the patient's care. See Section 3 for the elements of the Discharge Summary. The discharge instructions should include, if appropriate based on age and condition:

- a. A list of all medications the patient is to take post-discharge
- b. Dietary instructions and modifications
- c. Medical equipment and supplies
- d. Instructions for pain management
- e. Any restrictions or modification of activity
- f. Follow up appointments and continuing care instructions
- g. Referrals to rehabilitation, physical therapy, and home health services, and
- h. Recommended lifestyle changes, such as smoking cessation.

2.6 DISCHARGE AGAINST MEDICAL ADVICE

Should a patient or a patient and their legally authorized representative leave the hospital against the advice of the attending physician, or without a discharge order, hospital policies "Procedure for Patient Leaving Against Medical Advice (AMA)," "Absent Without Leave (AWOL)" and "Access to Outdoors" shall be followed. The attending physician shall be notified that the patient has left against medical advice.

2.7 DISCHARGE PLANNING

Discharge planning is a formalized process through which follow-up care is planned and carried out for each patient. Discharge planning is undertaken to ensure that a patient remains in the hospital only for as long as medically necessary. All practitioners are expected to participate in the discharge planning activities established by the Hospital and approved by the Medical Executive Committee.

2.8 DISCHARGING FROM THE PSYCHIATRIC UNIT

The patient, patient's family, physicians, other licensed practitioners, clinical psychologists, and staff involved in the patient's care, treatment, and services shall participate in planning the patient's discharge or transfer. Psychiatry policies "Policy for Discharge Planning / After-Care Plan for Inpatient Psychiatry" and "PES

Discharge Process and After Visit Summary" should be followed.

ARTICLE III. MEDICAL RECORDS

3.1 GENERAL REQUIREMENTS

The attending physician is responsible for the preparation of the physician components of the medical record to ensure a complete and legible medical record for each patient.

All practitioners with privileges are required to utilize the electronic health record (EHR), unless a "rare user" exception has been granted, to meet regulatory requirements and provide efficiencies in delivering healthcare to the community. All practitioners will complete EHR training, and comply with security guidelines, per the hospital's policy on use of the EHR.

The medical record must be complete within thirty (30) days after the patient's discharge unless a shorter timeframe is defined by policy.³ Hospital policies on medical record documentation shall be followed, including "Authority to Make Medical Record Entries", and "Procedure for Medical Record Content."

3.2 AUTHENTICATION

All clinical entries in the patient's medical record will be accurately dated, timed, and authenticated (signed) with the practitioner's legible signature or by approved electronic means.⁴

3.3 CLARITY, LEGIBILITY, AND COMPLETENESS

All handwritten entries in the paper medical record shall be made in ink and shall be clear, complete, and legible. Orders which are, in the opinion of the authorized individual responsible for executing the order, illegible, unclear, incomplete, or improperly documented (such as those containing prohibited abbreviation and symbols) will not be implemented. Improper orders shall be called to the attention of the ordering practitioner immediately.

3.4 ABBREVIATIONS AND SYMBOLS

The use of abbreviations can be confusing and may be a source of medical errors. However, the Medical Staff recognizes that abbreviations may be acceptable to avoid repetition of words and phrases in written documents. The use of abbreviations and symbols in the medical record must be consistent with the following rules:

3.4.1 Prohibited Abbreviations, Acronyms, and Symbols

The Medical Executive Committee shall adopt a list of prohibited abbreviations and symbols that may not be used in medical record entries or orders; these are noted in the policy on prohibited abbreviations, Pharmacy Policy Unacceptable Abbreviations and Symbols List.⁵

[3] TJC RC.01.03.01-01: The hospital defines the time frame for completion of the medical record, which does not exceed 30 days after the patient's discharge.

[4] TJC RC.01.02.01: Entries in the medical record are authenticated.

[5] TJC IM.02.02.01-03: The hospital follows its list of prohibited abbreviations, acronyms, symbols, and dose designations, which includes those listed in this document.

At a minimum, the following abbreviations, acronyms, symbols, and dose designations are prohibited:

- U,u
- IU
- Q.D., QD, q.d., qd
- Q.O.D., QOD, q.o.d, qod
- Trailing zero (X.0 mg)
- Lack of leading zero (.X mg)
- MS
- MSO4
- MgSO4

3.4.2 Situations Where Abbreviations Are Not Allowed

Abbreviations, acronyms, and symbols may not be used on informed consents.

3.5 ADMISSION HISTORY AND PHYSICAL EXAMINATION

3.5.1 Time Limits

Time limits for performance of the medical history and physical examination are noted in Part I, Section 2 of the medical staff bylaws. For the inpatient psychiatric unit, a psychiatric evaluation must be completed within sixty (60) hours of admission or registration.⁶

3.5.2 Who May Perform and Document the Admission History and Physical Examination

All medical staff with H&P privileges are allowed to perform admitting and outpatient history and physical examinations regardless of specialty.

b. Advanced Practice Providers (e.g., CRNA, NP, PA) may also complete the required history and physical examination if they possess the necessary privileges.⁷

c. For residents and practitioners requiring supervision or collaboration, a physician with privileges shall review and countersign the history and physical examination record within twenty-four (24) hours.⁸

[6] TJC PC.01.02.13-07: Each patient receives a psychiatric evaluation completed within sixty (60) hours of admission.

[7] TJC MS.03.01.01-08: The medical staff requires that a physician or other licensed practitioner who has been granted privileges by the hospital to do so perform a patient's medical history and physical examination and required updates.

[8] TJC MS.03.01.01-10: The organized medical staff defines when a medical history and physical examination must be validated and countersigned by a physician with appropriate privileges.

d. **Examinations by Practitioners without Privileges:** The hospital may accept a history and physical examination performed within thirty (30) days prior to admission by a practitioner without current hospital membership or privileges as long as a practitioner with current hospital membership or privileges endorses

the findings and enters an interval note within twenty-four (24) hours after admission and prior to any operative or other invasive procedure involving general or major regional anesthesia.

3.5.3 Compliance with Documentation Guidelines

a. The documentation of the admission history and physical examination shall be consistent with the current guidelines for the documentation of evaluation and management services as promulgated by the Centers for Medicare and Medicaid Services or comparable regulatory authority.

b. **Complete History and Physical Exam:** A complete history and physical examination is required for all admissions, all operative or invasive procedures requiring anesthesia (general, regional, MAC, or deep/moderate sedation), and all observation patients. A complete history and physical examination report must include the following information, as age appropriate and based on the patient's condition:

- i. Chief complaint or reason for the admission or procedure
- ii. A description of the present illness
- iii. Past medical history, including current medications, allergies, past and present diagnoses, illnesses, operations, injuries, treatment, and health risk factors;
- iv. An age-appropriate social history;
- v. A pertinent family history;
- vi. A review of systems;
- vii. Physical examination and relevant physical findings; and
- viii. Diagnosis or problem list with a plan of care.

c. Behavioral and Emotional Assessment⁹

Based on the patient's age and needs, the assessment for patients who receive treatment for emotional and behavioral disorders includes the following:

- i. A psychiatric evaluation
- ii. Psychological assessments, including intellectual, projective, neuropsychological, and personality testing
- iii. Complete neurological examination at the time of the admission physical examination, when indicated

[9] TJC PC.01.02.13-06

d. **Focused History and Physical Examination/Outpatient Assessment:** A focused history and physical examination or outpatient assessment, is used for those outpatients who are undergoing invasive procedures under local anesthesia or conscious sedation should include, as age appropriate and based on the patient's condition:¹⁰

- i. Elements that are immediately pertinent to the chief complaint or presenting problem, including a physical examination of the area of interest for the planned procedure and surrounding structures, if applicable,
- ii. Medications and known allergies,

- iii. An examination of the heart, lungs, and neurological status, and
- iv. Additional assessment as deemed necessary for the safe and effective treatment of the patient.

A brief history and physical may be appropriate in lieu of a comprehensive history and physical, in the following types of care environments: radiology, endoscopy, emergency medicine, and oncology services. The decision must be documented and based on the patient's age, diagnosis, type and number of procedures to be performed, comorbidities, and the level of anesthesia required for the surgery or procedure.¹¹

e. Exceptions:

- i. A clinically pertinent note may be substituted for a history and physical for the purpose of emergency surgery or prior to other urgent interventions involving general or major regional anesthesia.
- ii. A patient's prenatal records may serve as the history and physical examination for vaginal deliveries as long as there is a documented visit within the thirty (30) days prior to admission. However, an update note should be added to the prenatal record after admission and prior to any procedure requiring general or major regional anesthesia.
- iii. An assessment may be substituted for a pre-surgical history and physical examination to the extent allowed for low-risk patients and procedures.

[10] TJC MS.03.01.01-11: The organized medical staff defines the scope of the medical history and physical examination when required for non-inpatient services.

[11] TJC MS.03.01.01-19: If the medical staff chooses to develop and maintain a policy for the identification of specific patients to whom the assessment requirements would apply, in lieu of a comprehensive medical history and physical examination, the policy is based on the following: patient age, diagnosis, the type and number of surgeries and procedures scheduled to be performed, comorbidities, and the level of anesthesia required for the surgery or procedure. Nationally recognized guidelines and standards of practice for assessment of particular types of patients prior to specific outpatient surgeries and procedures. Applicable state and local health laws.

f. Interval Note:

- i. An update or interval note should be entered in the medical record whenever the history and physical examination was performed prior to admission or registration for surgery.
- ii. Such update or interval note shall document any significant changes reported by or observed in the patient since the pre-admission / pre-registration history and physical examination.
- iii. The note should be documented in the medical record within twenty-four (24) hours following admission, and prior to any operative or invasive procedure requiring general or major regional anesthesia.
- iv. The interval note may be entered by any practitioner otherwise privileged to complete a history and physical examination as described above.

3.5.4 Responsibility for the Admission History and Physical Examination

The admitting practitioner entering the admission order, or designee with privileges to complete the exam, is responsible for completing the admission history and physical examination.

3.5.5 Admissions for Emotional and Behavioral Disorders¹²

The admitting practitioner is responsible for documenting the 1) reason for admission as stated by the patient and/or others involved in the patient's care, 2) onset of the patient's illness and circumstances leading to admission, and 3) inventory of the patient's strengths and disabilities (such as psychiatric, biopsychosocial problems requiring treatment/intervention) written in a descriptive manner on which to base a treatment plan.

The admitting practitioner shall also assess and document the following:

- a. Current mental, emotional, and behavioral functioning
- b. Maladaptive or other behaviors that create risk to the patient or others
- c. Mental status examination

3.6 PREOPERATIVE DOCUMENTATION

3.6.1 Policy

Except in an emergency, a current medical history and appropriate physical examination will be documented in the medical record prior to:

[12] TJC PC.01.02.13: The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.

- a. all invasive procedures performed in the Hospital's surgical suites;
- b. certain procedures performed in the Interventional Radiology Department, and
- c. certain procedures performed in other treatment areas (such as bronchoscopy, gastrointestinal endoscopy, transesophageal echocardiography, therapeutic nerve blocks, and elective electrical cardioversion).

When a history and physical examination is required prior to a procedure, and the procedure is not deemed an emergency, the procedure will be cancelled if an H&P is not completed.¹³

In cases of procedures performed by dentists, the pre-anesthesia evaluation may suffice for the update to the history and physical examination.

3.7 PROGRESS NOTES

The attending physician or designee shall see the patient and record a daily progress note, unless a more frequent requirement is documented in a unit policy. Progress notes documented by residents/fellows in training require co-signature by a supervising physician, or designee.

There should also be a progress note for each significant patient encounter, on all hospitalized patients. Progress notes must document the reason for continued hospitalization.

In the Inpatient Psychiatric Unit, progress notes shall be documented at least weekly for the first two (2) months and at least once a month thereafter, and must contain recommendations for revisions in the

treatment plan as indicated as well as a precise assessment of the patient's progress in accordance with the original or revised treatment plan.¹⁴

3.8 OPERATIVE / PROCEDURE REPORTS

Operative reports will be written or dictated immediately after surgery,¹⁵ and prior to transferring the patient to the next level of care. Operative/procedure reports will include:¹⁶

[13] TJC RC.02.01.03-03: The patient's medical history and physical examination are recorded in the medical record before an operative or other high-risk procedure is performed. See also PC.01.02.03-04 and 05.

[14] TJC RC.02.01.01-07

[15] TJC RC.02.01.03-05: An operative or other high-risk procedure report is written or dictated upon completion of the operative or other high-risk procedure and before the patient is transferred to the next level of care.

[16] TJC RC.02.01.03-06 includes the list of required information in the operative report.

- a. Names of the physician or other licensed practitioner(s) who performed the procedure and his or her assistant(s)
- b. The name of the procedure performed
- c. A description of the procedure
- d. Any estimated blood loss
- e. Any specimen(s) removed
- f. The postoperative diagnosis

3.9 IMMEDIATE POST-OPERATIVE / PROCEDURE NOTES

If there is a delay in getting the operative/procedure report in the medical record due to an unforeseen emergency, a brief operative/procedure note is recorded in the medical record, prior to transfer to the next level of care, outlining the procedure performed. Operative/procedure notes will include:¹⁷

- a. Names of the physician or other licensed practitioner(s) who performed the procedure and his or her assistant(s)
- b. The name of the procedure performed
- c. A description of each procedure finding
- d. Any estimated blood loss
- e. Any specimen(s) removed
- f. The post-operative diagnoses

3.10 PRE-ANESTHESIA NOTES AND PRE-SEDATION ASSESSMENTS¹⁸

3.10.1 Pre-anesthesia notes

a. Anesthesia consists of general anesthesia and spinal or major regional anesthesia, does not include local anesthesia. General anesthesia is a drug-induced loss of consciousness during which patients are not

arousable even by painful stimulation. The ability to independently maintain ventilatory function is often impaired. Patients often require assistance maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function. Cardiovascular function may be impaired.

[17] TJC RC.02.01.03-07 addresses the requirements of the post-operative progress note.

[18] TJC PC.03.01.03-01: Before operative or other high-risk procedures are initiated, or before moderate or deep sedation or anesthesia is administered the hospital conducts a pre-sedation or pre-anesthesia patient assessment.

b. Moderate sedation is a drug-induced depression of consciousness during which patients respond to purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Reflex withdrawal from a pain stimulus is not considered a purposeful response. No interventions are required to maintain a patient airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

c. Deep sedation is a drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Patients may require assistance and maintaining a patent airway and spontaneous ventilation may be inadequate. Cardiovascular function is usually maintained.

d. The pre-anesthesia evaluation must be completed and documented within forty-eight (48) hours immediately prior to any inpatient or outpatient surgery or procedure requiring anesthesia, or moderate/deep sedation services. The delivery of the first dose of medication(s) for the purpose of inducing anesthesia, as defined above, marks the end of the forty-eight (48) hour time frame.¹⁹

In accordance with current standards of anesthesia care, some of the individual elements contributing to the pre-anesthesia evaluation may be performed prior to the forty-eight (48) hour timeframe. However, under no circumstances may these elements²⁰ be performed more than thirty (30) days prior to surgery or a procedure requiring anesthesia services. A review of these elements must be conducted, and any appropriate updates documented, within the forty-eight (48) hour timeframe.

3.10.2 Pre-sedation assessments

Pre-sedation assessments should comply with the Hospital policy, including "Procedure for Moderate Sedation Administration by Non-Anesthesiologists."

3.11 ANESTHESIA RECORD

A record of anesthesia that conforms to the policies and procedures developed by the Department of Anesthesia shall be made for each patient receiving sedation or anesthesia at any anesthetizing location.

3.12 POST-ANESTHESIA NOTES AND POST-SEDATION NOTES²¹

Post-anesthesia and post-sedation notes shall be placed in the record within twenty-four (24) hours after the completion of a procedure involving anesthesia or sedation. The note shall contain the requirements in the appropriate hospital policy.

[19] TJC PC.03.01.03-18: A pre-anesthesia evaluation is completed and documented by an individual qualified to administer anesthesia within 48 hours prior to surgery or a procedure requiring anesthesia services.

[20] 482.52(b)(1): Interpretive Guidelines - Elements that must be performed within 48-hours are medical history, drug and allergy history, medical interview, and exam.

3.13 CONSULTATION REPORTS

- a. Consultation orders shall be entered into the EHR.
- b. The documentation in the consultation report shall be consistent with the current guidelines for the documentation of evaluation and management services as promulgated by the Centers for Medicare and Medicaid Services or comparable regulatory authority. Consultation reports will demonstrate evidence of review of the patient's record by the consultant, pertinent findings on examination of the patient, the consultant's opinion, and recommendations. This report will be made part of the patient's record.
- c. The consultation report should be completed and entered in the patient's chart no later than twenty-four (24) hours after receipt of notification of the consult request, unless a later timeframe is agreed upon and documented in the medical record.
- d. If a consultation is performed by an APP who cannot practice independently in the state of California or a resident/fellow in training, the supervising physician should review and add an addendum with their assessment and recommendations in a timely manner and not more than twenty-four (24) hours after the consult is completed.
- e. If a full consultation report is not immediately available after the consultation, a note should be documented in the record containing the consultant's assessment and plan for the care of the patient. When operative procedures are involved, the consultation report, except in emergency situations so verified on the record, will be recorded prior to the operation/procedure.

3.14 INPATIENT PSYCHIATRIC UNIT CARE PLANS

The written plan of care shall be based on the patient's short and long-term goals and the time frames, settings, and services required to meet the goals. The written care plan includes the responsibilities of each team member²² and the following:

- a. A substantiated diagnosis
- b. Documentation to justify the diagnosis and the treatment and rehabilitation activities carried out
- c. Documentation that demonstrates all active therapeutic efforts
- d. The specific treatment modalities used to treat the patient

[21] TJC PC.03.01.07-07: A post-anesthesia evaluation is completed and documented by an individual qualified to administer anesthesia no later than 48 hours after surgery or a procedure requiring anesthesia services. TJC PC.03.01.07-08: The post-anesthesia evaluation for anesthesia recovery is completed in accordance with law and regulation and policies and procedures that have been approved by the medical staff.

[22] TJC PC.01.03.01-05/06/43

3.15 FINAL DIAGNOSES

The final diagnoses will be recorded in full, dated and signed by the discharging practitioner in the discharge summary, transfer note, or death summary of the patient. If pertinent diagnostic information has not been received at the time the patient is discharged, the discharging practitioner will be required to document such in the patient's record.

3.16 DISCHARGE SUMMARIES

At the time of the patient's discharge or transfer, the patient or their representative shall be informed about the care, treatment, and services provided to the patient.²³ The content of the medical record will be sufficient to justify the diagnosis, treatment, and outcome. All discharge summaries, including the Death Summary, are the responsibility of the discharging physician, or designee. Documentation should be completed within twenty-four (24) hours of discharge. All discharge summaries completed by APPs who are not permitted to practice independently in California and residents/fellows in training must be cosigned.

a. Content: Information for service providers shall include:²⁴

- i. The reason for the patient's discharge or transfer
- ii. The patient's physical and psychosocial status
- iii. A summary of care, treatment, and services provided
- iv. The patient's progress toward goals
- v. A list of community resources or referrals made or provided
- vi. The patient's treatment preferences

b. Content: The discharge summary shall contain²⁵

- i. The reason for hospitalization
- ii. The procedures performed
- iii. The care, treatment, and services provided
- iv. The patient's condition and disposition at discharge
- v. Information provided to the patient and family
- vi. Provisions for follow-up care

[23] TJC PC.04.02.01

[24] TJC PC.04.02.01-01: At the time of the patient's discharge or transfer, the hospital informs other service providers who will provide care, treatment, and services to the patient about the elements noted.

[25] TJC RC.02.04.01-03: In order to provide information to other caregivers and facilitate the patient's continuity of care, the medical record contains a concise discharge summary that includes the elements noted.

c. Death Summary: A discharge summary is required on all inpatients who have expired and will include:

- i. Reason for admission,

- ii. Summary of hospital course,
- iii. Cause of death, and
- iv. Final diagnoses.

3.17 CLINIC DOCUMENTATION AND IN-BASKET MANAGEMENT

3.17.1 See Appendix A.

3.18 STUDENTS, RESIDENTS, AND FELLOWS IN TRAINING

3.18.1 Residents shall be permitted to function clinically only in accordance with the written training protocols developed by the Graduate Medical Education Committee (GMEC) and the Medical Executive Committee (MEC).

3.18.2 The post-graduate education program director or committee must communicate periodically with the MEC.²⁶

3.19 ACCESS AND CONFIDENTIALITY

A patient's medical record is the property of the Hospital. If requested, protected health information (PHI) contained in the record will be made available to any privileged practitioner attending the patient, to practitioners at other hospitals, and to others in accordance with the Health Insurance Portability and Accountability Act (HIPAA), Health Information Technology for Economic and Clinical Health Act (HITECH) and state information privacy and security laws. See hospital policies on confidentiality and protected health information.

3.20 INCOMPLETE/DELINQUENT MEDICAL RECORDS

Penalties for noncompliance with medical record completion requirements are outlined in "CCHS Provider Notification and Suspension of Privileges Process" (see Appendix A).

3.21 COPY AND PASTE FUNCTIONALITY

Previously documented information that is carried forward, imported, or supplied by use of a template must be reviewed and edited to accurately reflect the services provided during the current encounter.

[26] TJC MS.04.01.01-05: There is a mechanism for effective communication between the committee(s) responsible for professional graduate education and the organized medical staff and the governing body.

ARTICLE IV. STANDARDS OF PRACTICE

4.1 ORDERS

4.1.1 Verbal/Telephone Orders

Verbal/telephone orders are discouraged and should be reserved for those situations when it is impossible or impractical for the practitioner to write the order or enter it in the EHR. Verbal orders are given directly from the ordering practitioner to the recipient hospital staff; telephone orders are given directly from the ordering practitioner to the recipient hospital staff via telephonic communication means. Verbal/telephone orders must be given to an authorized individual²⁷ and comply with Hospital Pharmacy "Policy for Telephone, Verbal, and Written Orders for Medication," "Policy for Verbal and Written Orders," and "Policy for Medication

Preparation."

4.1.2 Orders from sources other than the Electronic Health Record

Orders should be entered in the EHR except in cases when the EHR is not available including during downtime. In this case, the Hospital downtime policies should be followed. Orders transmitted by facsimile, written/printed on paper, or other forms of transmittal other than the electronic health record shall be considered properly authenticated and executable provided that:

- a. The order is legible, clear, and complete
- b. The identity of the patient is clearly documented
- c. The order contains the name of the ordering practitioner, address and a telephone number for verbal confirmation, the time and date of transmission, and the name of the intended recipient of the order, as well as any other information required by federal or state law, and
- d. The order contains the practitioner's signature.
- e. The order may be executed by hospital policy or by a privileged practitioner.

4.1.3 Medication Reconciliation

Medication reconciliation is performed when the patient:

- a. is admitted,
- b. following surgery (OR/PACU to the unit),
- c. is transferred to or from a unit,
- d. is transferred to, and readmitted from, another hospital or health care facility, or
- e. is discharged.

New orders shall be specifically written following surgery or the transfers noted above.

[27] RC.02.03.07-01: The hospital identifies, in writing, the staff who are authorized to receive and record verbal orders, in accordance with law and regulation. RC.02.03.07-02: Only authorized staff receive and record verbal orders.

4.1.4 Drugs and Medications

Orders for drugs and medications must follow "Hospital Pharmacy Policy for Prescribing & Ordering", "Policy for Verbal and Written Orders", and "Policy for Telephone, Verbal, and Written Orders for Medications".

4.2 CONSULTATIONS

4.2.1 The following circumstances may prompt consultation or management by a physician or other licensed practitioner:²⁸

- a. Treatments needs are outside of the scope of privileges of the attending physician,
- b. Doubt exists as to the diagnosis or choice of therapeutic measures to be utilized,

- c. In unusually complicated situations where specific skills of other practitioners may be needed, and
- d. When requested by a patient or their representative and deemed appropriate by the attending physician.

4.2.2 Any qualified practitioner with clinical privileges may be requested for consultation within their area of expertise. The attending physician, or designee, will provide written authorization in the EMR requesting the consultation, permitting the consulting practitioner to attend or examine their patient. The referring practitioner can determine if the consulting physician, or their designee, is necessary to perform the consultation.

a. Every consultation request should contain the reason for the consultation and the urgency of the consultation; the following timeframes should be followed:

- i. Routine consultation – within twenty-four (24) hours,
- ii. Urgent/STAT consultation – based on the conversation between the referring and consulting practitioners

b. Practitioner-to-practitioner communication is required for all non-routine consultations (i.e. Urgent or STAT priority).

c. Consultations may be done in timeframes longer than twenty-four (24) hours if appropriate for the patient and their medical condition.

d. Consultants are not required to perform daily visits, unless the patient's condition warrants it.

e. APPs may perform the consultation, including ordering diagnostics or therapeutics.

f. Residents may perform the consultation, including ordering diagnostics or therapeutics. The supervising physician will cosign the resident consultation note.

[28] TJC MS.03.01.03-04: The organized medical staff, through its designated mechanism, determines the circumstances under which consultation or management by a Doctor of Medicine or Osteopathy, or other licensed practitioner, is required.

4.3 DEATH IN HOSPITAL

4.3.1 Pronouncing and Certifying the Cause of Death

In the event of a Hospital death, the deceased shall be pronounced dead by a physician within a reasonable time. For inpatients, the attending physician is responsible for certifying the cause of death and completing the Death Certificate within fifteen (15) hours and prior to release of the body from the Hospital, in accordance with law.²⁹ The "Hospital Procedure for Patient Expiration" must be followed. In cases of fetal demise or neonatal death, the "Hospital Policy for Fetal Demise/Neonatal Death" must be followed.

4.3.2 Organ Procurement

When death is imminent, physicians should assist the Hospital in making a referral to its designated organ procurement organization before a potential donor is removed from a ventilator and while the potential organs are still viable. "Hospital Policy for Anatomical Donations for Tissue and Organ Transplantation" should be followed.

4.4 AUTOPSY

Unless the Medical Examiner exercises jurisdiction, it is the responsibility of the attending physician to consider and order autopsies. It is the responsibility of the attending physician to consider an autopsy in all cases of unusual deaths, in cases of medico-legal, or of special educational interest. A provisional diagnosis and the complete autopsy report will be completed as soon as possible. See "Policy for Patient Expiration" and "Policy for Autopsy Protocol".

4.5 ADVANCED PRACTICE PROVIDERS

4.5.1 Overview

Advanced Practice Providers (APPs) are defined in the Medical Staff Bylaws.

4.5.2 Guidelines for Advanced Practice Providers (APP)

- a. Health care services delivered by APPs to patients under their care must be within the scope of each practitioner's authorized practice, as defined by state law.
 - b. The APP is responsible for coordinating and managing the care of their patients, in collaboration with specialists and other qualified medical professionals, and ensuring the quality of health care provided to patients.
 - c. The role of the APP in the delivery of care shall be defined through mutually agreed upon Scope of Practice Guidelines that are developed by the Interdisciplinary Practice Committee and approved by the Medical Executive Committee.
-

[29] Cal. Health & Saf. Code § 102800: Attending to complete the death certificate within fifteen (15) hours.

- d. Consultation, either in person or through telecommunication systems or other means, shall be available at all times.
- e. Patients should be made aware whether they are being cared for by a physician or APP.
- f. Ongoing Professional Performance Evaluations will be completed on schedule for the APP with the supervising physician or department/division chair as established by MEC policy. The supervising or specialty physician is responsible for clarifying and familiarizing the APP with supervision methods and style of delegating patient care.
- g. A record of all supervising or delegating physicians is kept on file by the Medical Staff office, as applicable, and reviewed regularly through the credentialing process.

4.5.3 Supervising/Delegating Practice Agreements

Advanced Practice Providers that require supervision or collaboration must have a written Supervision/ Collaboration Agreement on file in the Medical Staff Office that describes health care-related tasks which may be performed by the APP. This document must be signed by the APP and the supervising/collaborating physician. Changes to the APP's supervising/collaborating physician will be updated through the credentials process.

4.5.4 Supervising/Delegating Physician

- a. A physician may not supervise more APPs than is allowed by state law.
- b. A physician who fails to fulfill the responsibilities defined in this section and/or in a sponsorship agreement for the supervision of, or collaboration with, an APP shall be subject to appropriate corrective action as provided in the Medical Staff Bylaws.

4.5.5 Medical Record Documentation

Advanced Practice Provider medical record documentation is addressed in Section 3, and in policies "Authority to Make Medical Record Entries" and "Procedure for Medical Record Content".

4.6 INFECTION PREVENTION AND CONTROL

All practitioners are responsible for complying with "Infection Prevention" policies and procedures in the performance of their duties, including hand hygiene.

ARTICLE V. PATIENT RIGHTS

5.1 PATIENT RIGHTS

All practitioners shall respect the patient rights as delineated in "Hospital Policy for Patients' Rights."

5.2 INFORMED CONSENT

The patient's right of self-decision can be effectively exercised only if the patient possesses enough information to enable an intelligent choice. The patient should make their own determination regarding medical treatment. The practitioner's obligation is to present the medical facts accurately to the patient, or the patient's surrogate decision-maker, and to make recommendations for management in accordance with good medical practice. The practitioner has an ethical and legal obligation to help the patient make choices from among the therapeutic alternatives consistent with good medical practice. Informed consent is a process of communication between a patient and the practitioner that results in the patient's authorization or agreement to undergo a specific medical intervention. Informed consent should follow the "Hospital Policy for Consent to Medical Treatment."

5.3 ADVANCE DIRECTIVES AND DO NOT ATTEMPT RESUSCITATION

Hospital policies delineate the responsibilities, procedure, and documentation that must occur regarding Advance Directives, when withdrawing or withholding life-sustaining treatment, and when initiating or cancelling a Do Not Resuscitate order. See "Policy for Do Not Resuscitate (DNR)," "Policy for Advance Health Care Directive (Patient Self-Determination Act)," and "Policy for Pre-Hospital Do Not Resuscitate Orders."

5.4 DISCLOSURE AND REPORTING OF UNANTICIPATED OUTCOMES

Hospital policies delineate the responsibilities, procedure, and documentation that must occur when an unanticipated outcome does occur. See policy "Adverse Event Reporting."

5.5 RESTRAINTS AND SECLUSION

The Hospital policy "Procedure for Denial of Patient Rights" delineates the responsibilities, procedure, and documentation that must occur when ordering restraints or seclusion.

5.6 INVESTIGATIONAL STUDIES

Investigational studies and clinical trials conducted at the Hospital must be approved in advance by the

Institutional Review Board. When patients are asked to participate in investigational studies, Hospital policy should be followed.

ARTICLE VI. SURGICAL CARE

6.1 TISSUE SPECIMENS

Specimens removed during the operation will be sent to the Hospital pathologist who will make such examination as may be considered necessary to obtain a tissue diagnosis. Certain specimens are exempt from pathology examination, as defined in "Policy for Specimen Exempted from Submission for Pathology Examination and Specimens not Routinely Examined Histologically." The pathologist's report will be made a part of the patient's medical record.³⁰

6.2 VERIFICATION OF CORRECT PATIENT, SITE, AND PROCEDURE³¹

The physician/surgeon has the primary responsibility for verification of the patient, surgical site, and procedure to be performed. Patients requiring a procedure or surgical intervention will be identified by an ID with the patient's name and a second identifier as chosen by the hospital. Hospital policy "Universal Protocol Procedure", shall be followed.

[30] TJC PC.03.01.08: The medical staff approves a policy in coordination with Pathology and the Laboratory regarding specimens removed during surgical procedures.

[31] UP.01.01.01-02: Conduct a pre-procedure verification process. The expectation of this element of performance is that the standardized list is available and is used consistently during the pre-procedure verification.

ARTICLE VII. RULES OF CONDUCT

7.1 DISRUPTIVE BEHAVIOR

Practitioners are expected to conduct themselves in a professional and cooperative manner in the Hospital. Disruptive behavior is behavior that is disruptive to the operations of the Hospital or could compromise the quality of patient care, either directly or by disrupting the ability of other professionals to provide quality patient care. "Policy for Appropriate Workplace Behavior" shall be followed.

7.2 IMPAIRED PRACTITIONERS

Reports and self-referrals concerning possible impairment or disability due to physical, mental, emotional, or personality disorders, deterioration through the aging process, loss of motor skill, or excessive use or abuse of drugs or alcohol shall be referred to the Medical Staff Assistance Committee.

7.3 TREATMENT OF FAMILY MEMBERS

The following is based on the AMA *Code of Medical Ethics'* Opinion on Physicians Treating Family Members. In general, practitioners should not treat themselves or their family members. Family members are deemed to include spouses, domestic partners, parents, parents-in-law, children, stepchildren, and siblings.

In emergency settings or isolated settings where there is no other qualified physician available, physicians should not hesitate to treat themselves or family members until another physician becomes available. In addition, while physicians are discouraged to serve as a primary or regular care provider for immediate family

members, there are situations in which routine care is acceptable for short-term, minor problems. Except in emergencies, it is not appropriate for physicians to write prescriptions for controlled substances for themselves or immediate family members.

7.4 MEDICAL RECORDS OF SELF AND FAMILY MEMBERS

Practitioners shall follow the "Confidentiality of Patient/Client Information" policy and "Confidentiality/ Security of Electronic Patient Information" policy, regarding access, use, and disclosure to protected health information of themselves or family members to maintain compliance with HIPAA and state privacy laws. Practitioners must utilize the Patient Portal or the traditional release of records process to access their own, or their family member's, medical records. See Procedure for "Removal, Retention, and Destruction of Protected Health Information" policy.

7.5 COMPLIANCE WITH HOSPITAL HEALTH REQUIREMENTS

All practitioners must comply with the Hospital's policy on testing, vaccinations, and all other infection control measures.

7.6 COMMUNICATION METHODS

All practitioners must maintain a currently accessible county e-mail address on file in the Medical Staff Office, as well as a current cell phone number.

All practitioners must use the accepted method of communication regarding clinical care as determined by the MEC and department leadership (eg: Epic Chat, cell phone, etc).

ARTICLE VIII. FUNCTIONS OF THE MEDICAL STAFF

8.1 Description of Medical Staff Functions

The Medical Staff is responsible for the oversight of the quality of patient care, treatment, and services provided by physicians and other licensed practitioners privileged through the medical staff process.³² In addition, the medical staff is responsible for the leadership and oversight of activities related to patient safety.³³ To ensure appropriate oversight, the Medical Staff, acting as a whole or through committees, participates in hospital committees or medical staff committees that address the following:

1) governance, 2) medical care evaluation/performance improvement/patient safety activities, 3) hospital performance improvement and patient safety programs, 4) credentials review, 5) information management, 6) emergency and disaster preparedness, 7) strategic planning, 8) bylaws review, 9) nominating process, 10) infection prevention and control, 11) pharmacy and therapeutics, 12) practitioner health, 13) utilization management 14) continuing education, and 15) collaboration with administration and nursing.

[32] TJC MS.03.01.01

[33] TJC MS.03.01.01-04/05

ARTICLE IX. MEDICAL STAFF COMMITTEES

9.1 General

Committees, designation, substitution, meetings, special meetings, quorum, and attendance are all outlined

in the Bylaws. The committees listed below report to the MEC, and address the medical staff's responsibility to oversee and participate in hospital and medical staff functions.³⁴

9.2 Credentials Committee

The Credentials Committee details are documented in Part III, Section 1 of the Medical Staff Bylaws.

9.3 Peer Review Oversight Committee (PROC)

The details of this committee are documented in the Peer Review Oversight Committee Charter. (see attachments)

9.4 Administrative Affairs (Bylaws) Committee

9.4.1 Composition: Chair and at least one (1) other member of the Medical Staff.

9.4.2 Meetings: The committee shall meet at least biennially, or more often to address required or requested amendments.

9.4.3 Responsibilities: The committee shall be responsible for making recommendations relating to revisions and updating the Bylaws and Rules & Regulations; receiving all correspondence regarding any suggestions of changes or additions to the Bylaws or Rules & Regulations and acting on these suggestions; and being responsible for a comprehensive review of the Bylaws and Rules & Regulations biennially.

9.5 Ambulatory Policy Committee

9.5.1 Composition: Chair, DFAM Chair or designee, at least one Allied Health Professional, ideally one representative from Ob/Gyn, Surgery, Pediatrics, and Specialty Medicine, anyone with special expertise needed on an ad-hoc basis. Non-voting members: Ambulatory Care Medical Director, Chief Nursing Officer or designee. Regional representation (Martinez, Concord, East County, Far East County, West County, North Richmond) is strongly recommended.

9.5.2 Meetings: The committee shall ideally meet monthly, but at minimum ten (10) times per year.

9.5.3 Responsibilities: Sets Medical Staff policy in the health centers and acts as a liaison with Nursing and Administration for coordination of policies and procedures under joint Medical Staff-Administration or Medical Staff-Nursing purview. APC develops policies to resolve issues that affect more than one Medical Staff Department and focuses on policies and projects that relate to quality of care, the efficiency of the health centers and patients that relate to quality care, the regulatory compliance. APC coordinates its activities with PSPIC and receives quality assurance reports suggestive of or requiring changes in policies and procedures from individual Medical Staff Departments and from the Ambulatory Subcommittee of PSPIC.

[34] Title XXII 70703(d): the medical staff bylaws and rules shall include the following functions: executive review, credential, medical records, tissue review, utilization review, infection control, pharmacy and therapeutics, and assisting medical staff members impaired by chemical dependency and/or mental illness.

9.6 Ethics Committee

9.6.1 Composition: Chair and at least 4 members from a multidisciplinary representation of clinical services, lay members, hospital administration. The Committee is encouraged to invite other professional or

community members to be utilized when discussing issues involving their particular clinical, ethnic, religious or other background.

9.6.2 Meetings: The committee will meet regularly (at least six (6) times yearly) and will also provide a mechanism for other meetings as necessary to perform case consultation functions.

9.6.3 Responsibilities: The Bioethics Committee provides a multi-disciplinary forum for the development of guidelines for consideration of cases and issues having bioethical implications; development and implementation of procedures for the review of such cases; development and/or review of institutional policies regarding care and treatment in cases or issues having bioethical implications; consultation with concerned parties to facilitate and education of the hospital staff regarding bioethical matters. The committee chair will report to the Medical Executive Committee.

See "Ethics Committee Policy" for additional committee guidelines.

9.7 Continuing Medical Education Committee

9.7.1 Composition: A Chairperson appointed by the Medical Staff President, subject to MEC approval; at least two additional Medical Staff Members; and, if available, the Medical Librarian, without vote.

9.7.2 Meetings: at least twice a year, and more frequently as needed

9.7.3 Purpose: The Continuing Medical Education Committee (CMEC) directs the development of CME programs in response to quality assurance findings and needs of Medical Staff, in collaboration with nursing staff. The committee apprises the Medical Staff of outside education opportunities. The CMEC also analyzes the status and needs of, and makes recommendations regarding, the medical library services via provider journal subscriptions. The CMEC supports the provider simulation lab to help Medical Staff learn and keep up procedural skills. Simulated procedures can help providers get/maintain privileging. The CMEC Chair will coordinate with departments who will utilize the lab, and with Professional Development on upkeep and expansion.

9.8 Cancer Committee

See Committee Charter (see attachments)

9.9 Medical Staff Assistance Committee

See Committee Charter (see attachments)

9.10 Inter-Disciplinary Practice Committee

See Committee Charter (see attachments)

9.11 Patient Care Policy and Evaluation Committee (PCP&E)

See Committee Charter (see attachments)

9.12 Patient Safety and Performance Improvement Committee

9.12.1 Composition: Chair appointed by the Medical Staff President, subject to MEC Approval; Medical Staff President; CCRMC CEO; Director of Pharmacy; CMO; CNO; Ambulatory Care Medical Director; COO; CQO; past Medical Staff President; Chair of PCP&E; Patient Safety Officer; Director of Safety and Performance Improvement; Medical Director of Quality and Safety; Hospital Medical Director, Specialty Medical Director;

Hospital Regulatory Compliance Officer; Quality Manager Program Coordinator; two medical staff representatives, appointed by the Medical Staff President, subject to MEC approval; one medical staff member representative from the Behavioral Health Division, appointed by the Medical Staff President, subject to MEC approval

9.12.2 Meetings: The committee shall ideally meet monthly, but at minimum 10 times per year.

9.12.3 Responsibilities: The Patient Safety and Performance Improvement Committee (PSPIC) has the authority and responsibility for implementing and directing the Quality Management Program for the Hospital. It is responsible for setting the quality management standards, determining criteria by which care will be measured, setting priorities for which aspects of care will be monitored, and analyzing the quality-of-care studies, indicators, utilization reports, grievances, survey data, and risk management information. A systematic, multi-disciplinary improvement process is followed. It develops an annual plan for performance improvement activities (Quality Management Plan).

Appendix A (screen shot and attachment link provided)

CCRMC Provider Notification and Suspension of Clinical Privileges Process

Current support of In Basket management for providers:

- Medical Staff Office (MSO) can schedule Dragon voice recognition software training upon request
- MSO can help you schedule Super User sessions and cancel clinic for this
- Once you reach delinquency, Health Information Management (HIM) will automatically notify you and your dept/division chair per the attached algorithm
- A human in the MSO will call you once you are one week away from suspension
- Your department/division chair can help you navigate work-life balance, assist adjusting your schedule if possible, and make a referral to the Medical Staff Assistance Committee
- Primary care health home team will help PCPs address messages, prior authorizations, etc.
- As a reminder to PDOCC (Physicians' and Dentists' Organization of Contra Costa) members: MOU (Memorandum of Understanding) changes have helped to increase clinical admin time, and add telephone clinics, and bill for extra telephone encounters
- Future state: Superusers can set you up with AI note writing upon request

* Please remember: If you feel you are falling behind, and might be in danger of a suspension, be PROACTIVE. Call HIM and come up with a plan to get the support you need!

Resources

Your Deficiency Team

- Your Department Chair
- Medical Staff President/Designee
- HIM Deficiency Analyst
- HIM Director

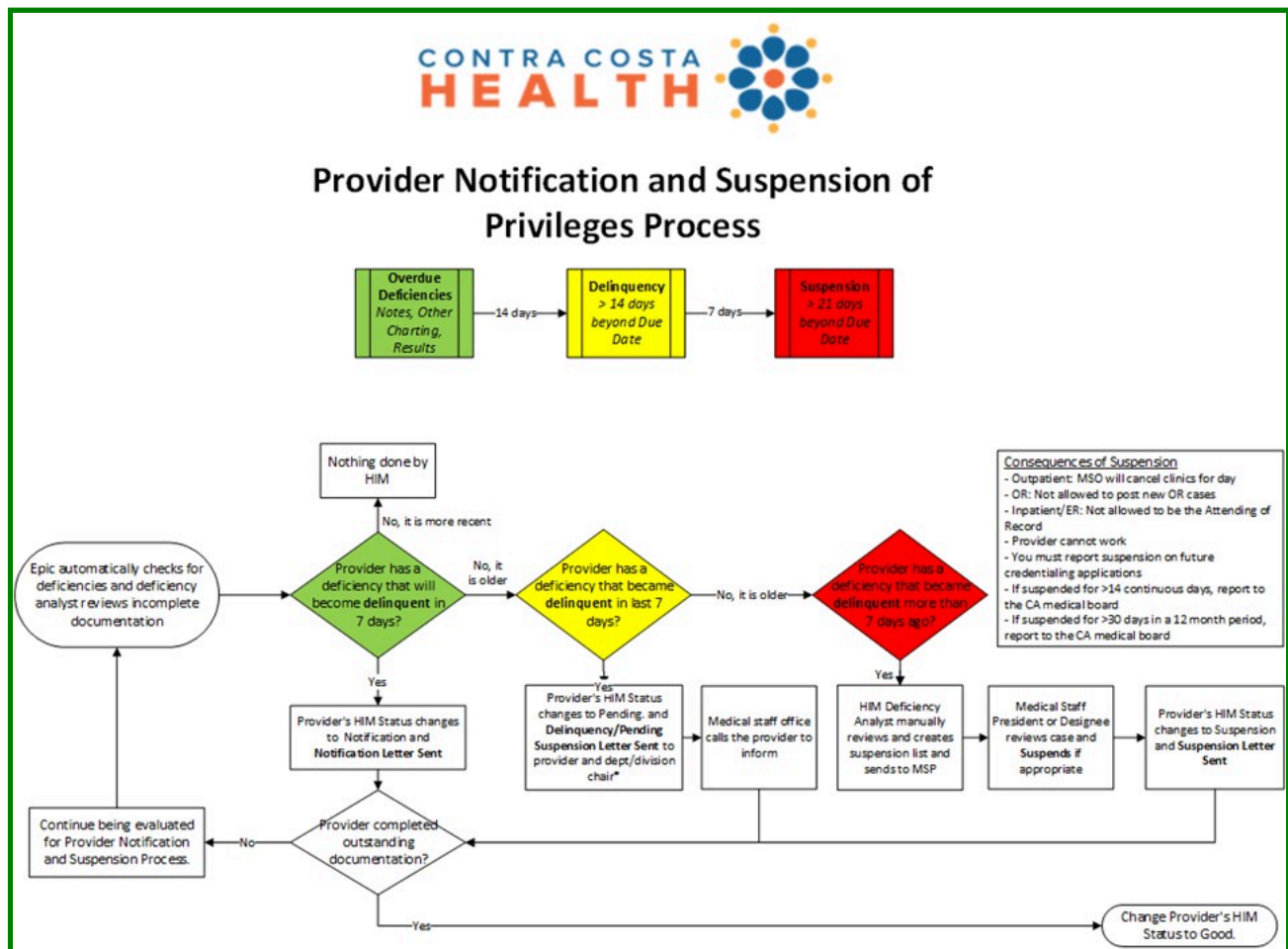
**CONTRA COSTA
HEALTH**

**Provider Notification and
Suspension of Privileges Process**



Contra Costa Regional Medical Center & Health Centers Medical Staff Rules and Regulations. Retrieved 05/2026. Official copy at <http://cchealth-ccrmc-hc-detention.policystat.com/policy/20225003/>. Copyright © 2026 CCRMC, Health Centers & Detention

ED Provider Notes	<u>24 hours post-ED Admission</u>
L&D Summary Notes	<u>24 hours post-L&D Delivery</u>
Consult and Progress Notes	<u>24 hours after note/deficiency creation</u>
Open Clinic Encounter	<u>24 hours post-encounter</u>
Result In Basket Messages	<u>7 days after creation</u>
Cosign Orders	<u>7 days after creation</u>



Attachments

[Cancer Committee Charter](#)

[CCRMC Provider Notification and Suspension of Clinical Privileges Process.pdf](#)

[Inter-Disciplinary Practice Committee Charter](#)

[!\[\]\(cead67df4d82d6c83effe4f8699a7d8f_img.jpg\) Medical Staff Assistance Committee Charter](#)

[!\[\]\(1d3a1175dd4902218e694b9c098adb83_img.jpg\) Patient Care Policy and Evaluation Committee](#)

[!\[\]\(c507f772dba2b921f86777f01218e570_img.jpg\) Peer Review Oversight Charter](#)

Approval Signatures

Step Description	Approver	Date
Joint Conference Committee	John Gioia: Board of Supervisor	Pending
Medical Executive Committee	Sarah E. Mcneil [TT]	03/2026
	Lauren Wondolowski: Primary Care Prov Lmted Ex	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Ambulatory Physician Privileges

Name:
(Please Print)

Instructions to applicant

1. Initial to the left of each privilege requested.
2. Sign form and submit **with the required documentation/case log/certificate(s). Experience can be from direct patient care, precepting, CCRM simulation lab, or documented outside trainings.** Medical Staff Office can help you pull relevant reports from EPIC.

Required Qualifications

Education/Training	Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)—or American Osteopathic Association (AOA)—accredited residency in Family Medicine or Internal Medicine. Family Medicine training is required for Pediatric Privileges.
Certification	Documentation of current certification or board eligibility (with achievement of certification within 3 years) leading to certification in Family Medicine by the American Board of Family Medicine or Family Practice and Osteopathic Manipulative Treatment by the American Osteopathic Board of Family Physicians. <u>OR</u> Internal Medicine by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine.
Continuing Education	As per California license and section-specific requirements below.

For EACH core privilege requested, you must demonstrate the following Clinical Experience:

Adult Medicine (Initial or Reappointment)	Provision of care, reflective of the scope of privileges requested, for at least 200 adult medicine patient visits during the past 24 months. If requesting pediatric privileges, at least 100 pediatric patients. Please provide clinical activity/procedure log. Experience must correlate to requested privileges <u>OR</u> Successful completion of an ACGME—or AOA—accredited residency or clinical fellowship within the past 24 months.
Pediatric Medicine (Initial or Reappointment)	Provision of care, reflective of the scope of privileges requested, for at least 100 pediatric patient visits during the past 24 months. Please provide clinical activity/procedure log. Experience must correlate to requested privileges. <u>OR</u> Successful completion of an ACGME—or AOA—accredited residency or clinical fellowship within the past 24 months.

Ambulatory Physician Core Privileges

Applicant: initial to request	For Core Privileges: you do not have to do all these procedures, but having the privilege allows you to.	Division/ Dept Chair: initial to recommend
(initials)	Adult Medicine Core Privileges Evaluate, diagnose, treat, and provide consultation to all patients 18 years old and above, with a wide variety of illnesses, diseases, injuries, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, integumentary, nervous, female reproductive and family planning, genitourinary systems, and including mild to moderate psychiatric disorders, dependence or addiction to alcohol or other drugs, and medical management of chronic pain. Assess, stabilize, consult, and determine disposition of patients with emergent conditions. Procedures include, but are not limited to: performance of history and physical; arthrocentesis and joint injections; cryotherapy (e.g. for removal of warts); excision of cutaneous and subcutaneous lesions, tumors, and nodules and superficial foreign body; facilitate medical groups; fluorescein exam; incision and drainage of abscesses; local anesthesia; management of uncomplicated, minor, closed fractures and uncomplicated dislocations; nasal packing for hemostasis; pap smears; POCT (point of care testing); peripheral nerve blocks; provider performed microscopy (PPM); removal of IUD; removal of a nonpenetrating foreign body from the eye, nose, ear, or vagina; simple skin excision and biopsy; simple wound care and management of superficial burns; subcutaneous, intradermal and intramuscular injections; suture of uncomplicated laceration; toenail trephination and removal; venipuncture.	(initials)
(initials)	Pediatric Core Privileges Evaluate, diagnose, and treat pediatric patients who have common illnesses, injuries, or disorders from birth through 21 years old. This includes routine uncomplicated newborn care in the hospital (i.e. L&D, nursery, postpartum, etc.), assessment of physical, emotional, and social health, treating acute and chronic disease, and determining the disposition of patients with emergent conditions. Procedures include but are not limited to: performance of history and physical; bladder catheterization, cryotherapy (e.g. for removal of warts); excision of cutaneous and subcutaneous lesions, nodules, and superficial foreign body; facilitate medical groups; incision and drainage of abscesses; local anesthesia; management of uncomplicated, minor, closed fractures and uncomplicated dislocations; nasal packing for hemostasis; POCT (point of care testing); peripheral nerve blocks; provider performed microscopy (PPM); removal of IUD; removal of a nonpenetrating foreign body from the eye, nose, ear, or vagina; simple skin excision and biopsy; simple wound care and management of superficial burns; subcutaneous, intradermal and intramuscular injections; suture of uncomplicated laceration; toenail trephination and removal; venipuncture.	(initials)

Ambulatory Physician Special/Non-Core Privileges

To obtain these privileges, you must provide documentation of the minimum number of procedures required (provider, supervising attending, or during department in-service). Privileges will be considered based on applicability, scope of practice, and documentation of experience.

Applicant: initial to request	Non-core privileges are requested individually, in addition to requesting core privileges.	Division/ Dept Chair: initial to recommend
(initials)	Nexplanon Insertion & Removal	(initials)

	<i>Initial Request:</i> Completion of the Nexplanon training program. Please submit Training Certification. <i>Reappointment/Renewal:</i> none - MSO has on file.	
(initials)	EMB and/or Insertion of IUD <i>Initial Request:</i> Residency training in EMB and IUD Insertion OR completion of a hands-on training under the supervision of a qualified preceptor. <u>AND</u> 4 successful EMB/IUD insertions within the past 24 months. <i>Renewal/Reappointment:</i> 2 successful EMB/IUD insertions in the past 24 months.	(initials)
(initials)	Paracentesis <i>Initial Request:</i> Residency training in paracentesis OR completion of a hands-on training in paracentesis under the supervision of a qualified preceptor. <u>AND</u> 2 paracentesis procedures in the past 24 months. <i>Renewal/Reappointment:</i> 1 paracentesis procedure in the past 24 months	(initials)
(initials)	Early pregnancy management: manual uterine aspiration (MUA) and treatment with methotrexate <i>Initial Request:</i> Training during or following residency with 50 MUAs. <u>AND</u> 6 MUAs in the past 24 months. <i>Renewal/Reappointment:</i> 6 MUAs in the past 24 months.	(initials)
(initials)	Acupuncture <i>Initial Request:</i> 200 Hours CME or 10 years of experience. <u>AND</u> 10 cases in the last 24 months <i>Renewal/Reappointment:</i> 10 cases in the past 24 months.	(initials)
	Tattoo Removal <i>Criteria for Initial Request:</i> Completion of a hands on training in tattoo removal including minimum of 10 tattoo removal procedures (Documented Evidence of Training and clinical log required). <i>Criteria for Renewal of Privileges:</i> Demonstrated current competence and evidence of the performance of at least 5 tattoo removal procedures in the past 24 months (Clinical log required) OR Department approved in-service course in tattoo removal in the past 24 months	
(initials)	HIV/AIDS care <i>Initial Request and Renewal/Reappointment:</i> Requirements of AB 2168 (see attached) must be met.	(initials)
(initials)	Care of Newborn with Complications in the Level 2 Nursery <i>Routine care of well newborns does not require this privilege.</i> Including but not limited to the admission and care of the late preterm infant 34 – 36 weeks gestation without significant complications, low birth weight, transient hypoglycemia, sepsis risk factors, mild respiratory issues with need for no or minimal respiratory support, in utero drug exposure not requiring medical management, mild to moderate hyperbilirubinemia, and congenital issues without significant clinical impact. This includes attendance at deliveries with mild to moderate risk factors if NRP certification is current. <i>Initial Request:</i> Completion of residency training in the past 24 months that included at least 1 month in the Nursery. <u>OR</u> 10 encounters with this level of care in the past 24 months.	(initials)

	<i>Renewal/Reappointment:</i> 10 inpatient encounters in the past 24 months. Specialty Department Chair/Head reviewed (name): _____	
(initials)	Inpatient obstetrics with consultation Admit, evaluate, and manage patients with uncomplicated term pregnancy, with an expectation of uncomplicated vaginal delivery. <u>Procedures include but are not limited to:</u> amniotomy, assisting with delivery of twins, assisting with fetal versions, augmentation of labor, episiotomy, fetal heart rate monitoring (external and internal), induction of labor, initial management of postpartum hemorrhage, normal spontaneous vaginal delivery; POCUS (please see request below); postpartum care, post-delivery removal of placenta with consultation; repair of 1st and 2nd-degree lacerations; repair of cervical, 3rd, and 4th-degree lacerations with consultation; surgical assisting; vacuum-assisted delivery with consultation. <i>Initial Request:</i> Completion of residency in the last 24 months with documentation of at least 4 months of obstetrical rotation during family medicine residency, 80 patients delivered, and ultrasound training <u>OR</u> 8 deliveries in the past 24 months. <i>Renewal/Reappointment:</i> 8 deliveries in the last 24 months. Specialty Department Chair/Head reviewed (name): _____	(initials)
(initials)	Low-risk obstetrics (prenatal and postpartum) Evaluate, diagnose, and treat low-risk patients who are pregnant, intend to become pregnant, or are recently post-pregnancy. Management of patients with obesity with BMI $\leq$ 60; chronic Hypertension with BP < 150/100 WITHOUT medication; GDM on diet or orals with A1c < 6.5; AMA; history of pre-eclampsia in one previous pregnancy at $\geq$ 37 weeks; history of cesarean section; substance abuse with or without buprenorphine therapy; cholestasis of pregnancy; size vs. date discrepancies with EFW > 10%; UTI; anemia with hemoglobin > 8; vaginitis. <u>Procedures include but are not limited to:</u> third-trimester POCUS (please request below) <i>Initial Request:</i> training during family medicine residency of at least 2 months of obstetrics, including prenatal/postpartum care and POCUS. <u>OR</u> 50 prenatal/postpartum visits in the past 24 months. <i>Renewal/Reappointment:</i> 50 patients plus attestation of 8 Units AAFP/ACOG CME in prenatal care in the past 24 months as well as complete CClearn OB/GYN Q 2 years	(initials)
(initials)	Forensic Examination Initial: CCFMTC (California Clinical Forensic Medical Training Center) Training Verification or approved equivalent. Clinical log and verification of experience in this service line with combination of 20 pediatric and adult forensic examinations within last 24 months (train up plan must be included with initial requesting privilege without documentation required) Forensic Evaluation Reappointment: Maintain certifications required for initial privilege Combination of 20 pediatric and adult forensic examinations within last 24 months Recommend Sexual Assault Nurse Examiner (SANE) certification when eligible	
(initials)	All focused and limited POCUS (Point of Care Ultrasound) <i>Initial Request:</i> Successful completion of an accredited POCUS training <u>OR</u> 15	

	hours of Point of Care Ultrasound CME. <u>AND</u> 6 hours of hands-on POCUS relevant to privileges being requested. <i>Renewal/Reappointment: 20 ultrasounds in the past 24 months.</i>	
(initials)	Basic First and Second Trimester POCUS for dating, location, and viability of pregnancy. <i>Initial Request: 30 ultrasounds in the past 24 months.</i> <i>Renewal/Reappointment: 20 ultrasounds in the past 24 months.</i>	(initials)
(initials)	Third trimester OB POCUS for placental location, viability, presentation, amniotic fluid assessment <i>Initial Request: 20 ultrasounds in the past 24 months.</i> <i>Renewal/Reappointment: 8 ultrasounds in the past 24 months.</i>	(initials)

Other Privileges

If you wish to obtain any privilege not listed above, please list it here and the Credentials Committee will review.

Initial Focused Professional Practice Evaluation (iFPPE) Requirements

For initial requests, providers must complete ALL iFPPE forms through Medical Staff Office (MSO) and return to MSO.

ACKNOWLEDGMENT OF PROVIDER

I have requested only those privileges for which by education, training, current experience, and documented performance I am qualified to perform and for which I wish to exercise at Contra Costa Regional Medical Center Hospital and Clinics, and I understand that:

- a. In exercising any clinical privileges granted, I will adhere by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related

documents.

Provider's Signature: _____

Date: _____

DEPARTMENT CHAIR'S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- ☐ **Recommend All Requested Privileges**
☐ **Recommend Privileges with the Following Conditions/Modifications:**
☐ **Do Not Recommend the Following Requested Privileges:**

Privilege	Condition/Modification/Explanation

Notes:

Department Chair Name (Print): _____

Department Chair Signature: _____

Date: _____



Origination 03/2021
 Last Approved N/A
 Effective Upon Approval
 Last Revised 03/2026
 Next Review 3 years after approval

Owner Erwin Sison:
 Infection Control Coord
 Area Infection Control
 Applicability CCRMC, Health Centers & Detention

Policy for Cleaning and Disinfection of Ophthalmic Laser Lens

POLICY STATEMENT:

Laser lens that touches the surface of the eye will be cleaned and disinfected between each patient use according to the procedure outlined below.

GUIDELINES:

~~A logbook will be kept at each site where laser lens are used. Place patient label on log The Laser Lens log page attached to this policy will be the log form used. Place patient label on log along with lens # that was used on patient, include the date and clinic staff name who cleaned lens below patient label.~~

~~Employees who assist with laser lens examinations will receive initial training/competency and will annually be required to show competence by successful completion of e-learning module.~~

Laser Lens used at the Martinez Health Center and West County Health Center will be cleaned and disinfected by the Sterile Processing Departments located in the Health Centers named above.

A logbook will be kept that will include information regarding the patient, the date when the lens was cleaned and disinfected and the name of the person who performed the cleaning and disinfection.

RELATED LINKS:

[Procedure for Cleaning and Disinfection of Ophthalmic Lens](#)

[Reusable Ophthalmic Laser Lens Logbook](#)

[Sterilization Cycle Log for Reusable Ocular Laser Lens with Grey Paint](#)

[Procedure for Point of Use of Reusable Ophthalmic Laser Lens](#)

REFERENCES:

- A. Centers for Disease Control, "Guidelines for Disinfection and Sterilization in Healthcare Facilities", 2008
- B. Ocular Inc., Product Care Instructions: Cleaning Method 1

APPROVALS:

Infection Prevention & Control Committee: 3/21, 5/21, 1/23

Ambulatory Care Policy and Procedure Committee: 5/21, 3/23

Medical Executive Committee: 5/21, 3/23

Attachments

[Ocular Laser Lens IFU 7.27.23](#)

[Volk Laser Lens IFU 9.22.22](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy & Evaluation Committee	Vijay K. Bhandari [SP]	05/2026
Infection Prevention & Control Committee	Kathy Ferris: Infection Control Coord	04/2026
	Erwin Sison: Infection Control Coord	02/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 05/2003
 Last Approved N/A
 Effective 01/2026
 Last Revised 04/2026
 Next Review 1 year after approval

Owner Stephanie Dockham: Dietitian
 Area Nutrition
 Applicability CCRMC, Health Centers & Detention

Policy for Diet Manual

POLICY STATEMENT:

~~The Diet Manual is based on evidenced based recommendations of the Academy of Nutrition and Dietetics Nutrition Care Manual. The Diet Manual describes various aspects of the diets such as the indication and purpose of each diet. A general description of the diet with information on nutritional adequacy, appropriate foods, and a sample meal pattern as available is also included.~~

~~To provide facility-specific guidelines for the ordering and preparing of patient diets and to function as a reference for diet and nutrition-related information.~~

The CCRMC Diet Manual is the designated therapeutic diet manual at Contra Costa Regional Medical Center (CCRMC); provides guidelines for the ordering and preparing of patient diets and to function as a reference for diet related information.. The manual reflects current scientific practices and nutrient analyses based upon recognized national dietary standards. The publication or revision date of the approved therapeutic diet manual must not be more than 5 years old. The manual is reviewed annually, revised as needed to meet the needs of the patient population and approved by a qualified dietitian and medical staff.

GUIDELINES:

- ~~A. The Diet Manual is accessible to all patient units via the iSite online Intranet by doing the following:~~
- ~~1. Click on "iSite" on the desktop~~
 - ~~2. In iSite click on "Clinical Resources"~~
 - ~~3. In Clinical Resources click "Recommended" tab~~

- ~~B. Hard copies are available in the Food and Nutrition Services Department and the Nursing Administration Office in the event of Computer Downtime.~~
- ~~C. Revisions to the Diet Manual are approved in writing, prior to implementation by the Physician designee of the Medical Staff (Patient Care Policy and Evaluation Committee).~~
- A. The Dietitian will identify an appropriate diet manual, make recommendations to the Chief Medical Officer and seek approval of the manual for use within the facility.
- B. The diet manual will be approved by the Dietitian and Chief Medical Officer.
- C. The approved diet manual will be available throughout the facility to all medical, nursing and food service personnel via hard copy or PolicyStat. Hard copies are available in the Food and Nutrition Services Department and the Nursing Administration Office in the event of Computer Downtime.
- D. The Dietitian will review the diet manual annually noting any updates needed to address current scientific practices or changes in the patient population served by the facility and initiate these procedures on an ongoing basis as needed.

REFERENCES:

- ~~A. The Joint Commission Standard PC.02.02.03 EP 22~~
- ~~B. Center for Medicare and Medicaid Services § 482.28, 482.28 (b)(3)~~

APPROVALS:

~~Patient Care Policy and Evaluation Committee: 5/2003, 10/2022~~

~~Medical Executive Committee: 6/2018, 10/2022~~

~~Joint Conference Committee:~~

- : Centers for Medicare & Medicaid Services: State Operations Manual for Hospitals (2018)
- : The Joint Commission: Comprehensive Accreditation Manual for Hospitals (2019)
- : Nutrition Care Manual® (NCM®) (2025)

Attachments

-  [CCRMC Diet Manual.pdf](#)
-  [Diet Manual Crosswalk.pdf](#)
-  [Diet Manual Fiber Position Statement.pdf](#)
-  [Diet Manual Sources of Under Reported Nutrients.pdf](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy & Evaluation Committee	Vijay K. Bhandari [SP]	04/2026
Clinical Practice Committee	Ira-Beda Sabio: Director, Inpatient Nursing OP [LS]	03/2026
	Sergio Urcuyo: Chief Medical Officer	01/2026
	Stephanie Dockham: Dietitian	01/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 06/2007
 Last Approved N/A
 Effective Upon Approval
 Last Revised 05/2022
 Next Review 3 years after approval

Owner Cita Richeson:
 Nursing Program Manager
 Area Perinatal
 Applicability CCRMC, Health Centers & Detention

Policy for Umbilical Catheters

POLICY STATEMENT:

This policy outlines how to safely care for neonates with umbilical catheters.

GUIDELINES:

Umbilical artery (UAC) or venous catheters (UVC) will be safely inserted by a physician and maintained by the Nursery RN.

- A. Umbilical artery catheters provide access for:
 - 1. Arterial blood sampling
 - 2. Continuous arterial blood pressure monitoring
 - 3. Vascular access for IV fluids when other sites are not available or suitable
- B. Umbilical venous catheters provide access for:
 - 1. Administration of drugs
 - 2. Fluid administration (hypertonic solutions or inadequate peripheral IV access)
 - 3. Exchange Transfusion
 - 4. Central venous pressure monitoring
 - 5. Measurement of PCO2 and pH
 - 6. Blood sampling (UAC is preferred)

RELATED LINKS:

[Procedure for Umbilical Catheters](#)

REFERENCES:

- A. Karlsen, K. (2013). The S.T.A.B.L.E. program: Pre-transport / post-resuscitation stabilization care of sick infants: Guidelines for neonatal healthcare providers: Learner *Provider Manual*. S.T.A.B.L.E. Program. 6th Edition
- B. The Joint Commission Standard (2024).IC.02.02.01 "The hospital reduces the risk of infections associated with medical equipment, devices, and supplies".
- C. Verklan, M. T., Walden, M., & Forest, S. (2021). *Core curriculum for Neonatal Intensive Care Nursing* (6th ed.). Elsevier.

APPROVALS:

Pediatric Department: 06/2018, 05/2022

Clinical Practice Committee: 01/2013, 05/2022

Patient Care Policy and Evaluation Committee: 02/2013, 08/2018, 05/2022

Medical Executive Committee: 08/2018, 09/2022

Joint Conference Committee: 09/2022

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [SP]	05/2026
Clinical Practice Committee	Ira-Beda Sabio: Director, Inpatient Nursing OP [LS]	05/2026
	Cita Richeson: Nursing Program Manager	02/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination	N/A
Last Approved	N/A
Effective	Upon Approval
Last Revised	N/A
Next Review	1 year after approval

Owner	Shideh Atai: Director Of Pharmacy Svcs
Area	Pharmacy
Applicability	CCRMC, Health Centers & Detention

Policy for Quality Assurance in Pharmaceutical Compounding

POLICY STATEMENT:

To establish a Quality Assurance (QA) program for compounded preparations under USP General Chapter <797> Pharmaceutical Compounding – Sterile Preparations and USP General Chapter <795> Pharmaceutical Compounding – Non-Sterile Preparations.

Pharmacy Administration, the Pharmacist-In-Charge, and the Designated Person (Pharmacist II) have the authority and responsibility for the Quality Assurance Program.

The Designated Person (DP) may separately train designee(s) to be an Assigned Trainer. The DP assigns trainers didactic and practical education every 12 months. Assigned Trainers may also be responsible for parts of administering the Quality Assurance program as it relates to compounded preparations.

GUIDELINES:

A. Training

1. There is documentation of training and skill competency for personnel involved in sterile and non-sterile compounding (see [Policy for Compounding Competency Assessment](#)).

B. Standard Operating Procedures include but not limited to:

1. Chemical and physical stability and Beyond-Use Dating [Procedure E. Assigning Beyond-Use Dates \(BUDs\)](#)
2. Cleaning and Disinfecting [Procedure F. Cleaning the Primary Engineering Controls by](#)

[Pharmacy](#) and [Procedure G. Cleaning of Secondary Engineering Controls \(Compounding Suites\) by Environmental Services](#)

3. Component quality evaluation and compounding methods [Procedure B. Aseptic Technique](#)
4. Dispensing [Policy for Dispensing](#)
5. Documentation [Policy for Compounding of Medications](#) and [Procedure A. Sterile Compounding of Medications](#)
6. Environmental quality and maintenance [Policy for Maintenance of Sterile Compounding Facilities and Equipments](#), [Procedure H. Environmental Surface Sampling](#), [Procedure I. Viable and Non-Viable Environmental Air Sampling](#)
7. Equipment maintenance, calibration, and operation [Policy for Maintenance of Sterile Compounding Facilities and Equipments](#)
8. Labeling [Policy for Labeling Standards](#)
9. Materials and final compounded preparation handling and storage [Procedure A. Sterile Compounding of Medications](#)
10. Measuring and weighing [Policy for Maintenance and Calibration of Weighing Balance](#)
11. Packaging and repackaging [Policy for Re-Packaging Drugs](#)
12. Patient monitoring, complaints, and adverse event reporting [Policy for Adverse Event Reporting](#) and [Policy for Medication Recall](#)
13. Personnel cleanliness and garb [Procedure C. Hand Hygiene for Sterile and Non-Sterile Compounding](#)
14. Purchasing [Policy for Procurement of Medications](#) and [Policy for Drug Procurement, Storage & Inventory Control](#)
15. Quality assurance and continuous quality monitoring
16. Training and retraining [Policy for Compounding Competency Assessment](#)
17. SOPs are reviewed regularly and updated as necessary

C. Documentation

1. All aspects of compounding operations and procedures are recorded as described in USP Chapter <797> and <795>. See [Policy for Maintenance of Sterile Compounding Facilities and Equipments](#)
2. The pharmacist with oversight on compounding personnel is the QA personnel responsibility for reviewing accuracy and completeness of compounding records, prior to dispensing.

D. Verification - to ensure a process, procedure or piece of equipment is functioning properly and producing the expected results.

1. The pharmacist with oversight on compounding personnel provides verification of the compounding procedure, which involves checking to ensure the calculations, weighting and measuring, order of mixing, and compounding techniques and

equipment (e.g. closed-system transfer devices [CSTDs], CADD cassettes, IV tubing, etc.), if necessary, were appropriate and accurately performed.

2. Quality of ingredients are verified upon receipt by purchasing commercially manufactured products as per [Policy for Procurement of Medications](#)
 3. Equipment verification following equipment manufacturer manual(s) and internally developed documentation logs is performed at regular intervals by the compounding personnel on a daily basis on days when compounding occurs as per [Policy for Maintenance of Sterile Compounding Facilities and Equipments](#).
- E. Testing - to determine accurately the adequacy of the compounding process and the quality of the preparation
1. Based on the scope of compounding performed at CCRMC Pharmacy Department, there are minimal to zero number of tests required *during* the compounding process and of the *finished* compounded preparation.
 2. The microbiological testing that is performed on *finished* compounded preparations is part of the quality assurance of compounded products and includes sterility testing (for sterile compounded products), potency testing, and endotoxin testing to assess the qualitative and quantitative properties of the compounded preparations. See [Procedure J. End Product Testing of IV Admixtures](#)
 3. Testing is outsourced to a contract laboratory that shall follow standards set forth in USP general chapters, as appropriate, and preferably be registered with the U.S. Food and Drug Administration (FDA) or accredited through ANSI National Accreditation Board.
 - a. To be assured of the contract laboratory activities, the credentials, training and continuing competency activities of the personnel at the contract laboratory may be requested initially and annually thereafter.
- F. Cleaning, disinfecting and safety
1. Cleaning and disinfecting of EQUIPMENT used in sterile compounding is performed by the pharmacy personnel as per [Policy for Maintenance of Sterile Compounding Facilities and Equipments](#) and [Procedure F. Cleaning of Primary Engineering Controls by Pharmacy](#)
 2. Cleaning and disinfecting of FACILITIES used in sterile compounding is performed by environmental services (EVS) as per [Procedure G. Cleaning of Secondary Engineering Controls \(Compounding Suites\) by Environmental Services \(EVS\)](#)
 3. The effectiveness of the cleaning and disinfecting of the equipment and facilities is monitored following [Procedure H. Environmental Surface Sampling](#) and [Procedure I. Viable and Non-Viable Environmental Air Sampling](#)
 4. The safety of the sterile compounding equipment and facilities is monitored following [Policy for Maintenance of Sterile Compounding Facilities and Equipments](#)
- G. Containers, packaging, repackaging, labeling and storage
1. See [Policy for Compounding of Medications](#), [Procedure E. Assigning Beyond-Use Dates](#), [Policy for Drug Storage Temperatures – Pharmacy Department Only](#), [Policy](#)

[for Room Temperature Monitoring for Drug Storage Areas](#)

2. [Policy for Labeling Standards](#)
3. [Policy for Re-Packaging Drugs](#)

H. Outsourcing of compounded preparations from pharmacy to pharmacy

1. See [Policy for Outsourced Compounding Pharmacy- Quality Assurance](#)
2. Documentation of beyond-use dating for compounded preparations sold to or received from another pharmacy is required and shall be provided upon request.

RELATED LINKS:

[Policy for Procurement of Medications](#)

[Policy for Drug Procurement, Storage & Inventory Control](#)

[Policy for Compounding of Medications](#)

[Policy for Compounding Competency Assessment](#)

[Policy for Medication Recall](#)

[Policy for Adverse Event Reporting](#)

[Policy for Maintenance of Sterile Compounding Facilities and Equipments](#)

[Policy for Labeling Standards](#)

[Policy for Re-Packaging Drugs](#)

[Policy for Drug Storage Temperatures – Pharmacy Department Only](#)

[Policy for Room Temperature Monitoring for Drug Storage Areas](#)

[Policy for Outsourced Compounding Pharmacy- Quality Assurance](#)

[Procedure A. Sterile Compounding of Medications](#)

[Procedure B. Aseptic Technique](#)

[Procedure C. Hand Hygiene for Sterile and Non-Sterile Compounding](#)

[Procedure E. Assigning Beyond-Use Dates \(BUDs\)](#)

[Procedure F. Cleaning the Primary Engineering Controls by Pharmacy](#)

[Procedure G. Cleaning of Secondary Engineering Controls \(Compounding Suites\) by Environmental Services](#)

[Procedure H. Environmental Surface Sampling](#)

[Procedure I. Viable and Non-Viable Environmental Air Sampling](#)

[Procedure J. End Product Testing of IV Admixtures](#)

REFERENCES:

- A. USP General Chapter <1163>. Quality Assurance in Pharmaceutical Compounding
- B. USP General Chapter <795>. Pharmaceutical Compounding – Non-Sterile Preparations
- C. USP General Chapter <797>. Pharmaceutical Compounding – Sterile Preparations

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [SP]	04/2026
	Shideh Ataii: Director Of Pharmacy Svcs	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

Approval	Signatures	Date
Chief Executive Officer		3/2025
Chief Medical Officer		3/2025
Chief Nursing Officer		3/2025
Director of Safety and Performance Improvement		3/2025
Medical Executive Committee		3/2025
Patient Safety and Performance Improvement Committee		3/2025
Patient Care Policy and Evaluation		3/2025
Governing Body		3/2025
Director of Pharmacy Services, Medication Safety Committee		3/2025

The Medication Error Reduction Plan submitted to CDPH in 2001 as a facility plan to eliminate or substantially reduce medication-related errors (by authority of SB1875/801) and Health & Safety code 1339) has been incorporated in this policy.

Annual review of the effectiveness of the plan will be performed. If the plan is not effective in reducing medication errors, MERP will be revised to redesign actions and achieve goals.

Background

CDPH shall monitor the implementation of the plan upon licensure visit every three years.

CCRMC cycles per CDPH audits: started in 2009 and repeats every three years.

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

Table of content

- I. Introduction**
 - A. Contra Costa Regional Medical Center (CCRMC) MERP**
 - B. Vision**
 - C. Mission**
 - D. Values**
 - E. Strategic directions**
- II. Overview of CCRMC MERP**
 - A. Scope**
 - B. Goal and objective**
 - C. Action plans and initiatives**
- III. Organization Responsibility and Accountability**
 - A. Quality system that addresses the issue of facility-wide reduction of medication errors**
 - B. Medication safety subcommittee of Pharmacy and Therapeutics committee (i.e., PCP&E)**
- IV. Reporting system and Monitoring**
- V. Process-MERP Implementation Assessment**
- VI. MERP Elements of the plan to monitor and evaluate safe medication practices in error reduction**
- VII. Effectiveness of the Plan**

Addendum I: Pharmacy Department's QA/PI collaborative structure

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW

CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

I. INTRODUCTION

The following is Contra Costa Regional Medical Center (CCRMC) and Healthcenters' plan (HC) to eliminate or substantially reduce medication-related errors as part of Senate Bill 1875/ 801 and Health & Safety Code 1339 (MERP).

A. CONTRA COSTA REGIONAL MEDICAL CENTER AND HEALTHCENTERS MERP

Contra Costa Regional Medical Center is a 167 bed county hospital located in Martinez California. We are directed and guided by established policies and procedures, protocols and guidelines to minimize medication errors and adverse drug events. Events are reported through an electronic event reporting system (SERS), a voluntary, non-punitive reporting system for all problems/risks identified. Preventive action plans are designed for implementation to reduce errors or potential risks. Medication safety initiatives were developed in 2001. Over the years we have incorporated into our medication safety and quality system risk reduction requirements from Federal and State Laws, including but not limited to CMS, CDPH, FDA, other governmental agencies, TJC standards; National Patient Safety Goals & applicable clinical practice guidelines and recommendations from nationally recognized organizations (e.g., ISMP, The Medical Letter, IDSA, SIDP etc...), professional societies and associations (e.g., ASHP, CSHP, APhA, ADA, etc...) as well as shared learnings from any external resources with successful medication practices demonstrated in reducing medication errors and adverse drug events.

B. VISION

To be the health care system of choice in Contra Costa County where partnerships with patients and employees exist to promote individuals and community wellness.

C. MISSION

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW

CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

The mission of Contra Costa Health Services is to care for and improve the health of all people in Contra Costa County with special attention to those who are most vulnerable to health problems.

- We provide high quality services with respect and responsiveness to all.
- We are an integrated system of health care services, community health improvement and environmental protection.
- We anticipate community health needs and change to meet those needs.
- We work in partnership with our patients, cities and diverse communities, as well as other health, education and human service agents.
- We encourage creative, ethical and tenacious leadership to implement effective health policies and programs.
- We have a department-wide goal to reduce health care disparities and health disparities by addressing issues of diversity and linguistic and cultural competence

D. VALUES

Respect, Safety, Learning, Honesty, Excellence, Functional, Communication, Stewardship, Creativity, and Compassion.

E. STRATEGIC DIRECTIVES

CCRMC and Clinics use a system-wide approach to identify high risk and problem prone patient care processes, redesign unsafe care processes, implement best practices, and adopt successful practices from other organizations that will improve and ensure patient safety. Our goal is to increase the safety of patients receiving medications at CCRMC and Clinics.

II. OVERVIEW OF CCRMC's MERP

A. SCOPE OF THE MEDICATION ERROR REDUCTION PLAN

1. Ensuring provision of pharmaceutical services meet the patient's therapeutic goal by improving safe medication use processes that optimize therapeutic outcomes
2. Ensuring the safe administration of medications according to physician's orders
3. Ensuring compliance with regulatory requirements related to medication safety and security throughout the hospital

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

4. Reviewing, analyzing, and trending medication errors and adverse drug events (i.e., Adverse Drug Reactions as well as medication errors), and identifying processes and practices which require improvement
5. Implementing evidence-based practices in medication administration, medication safety and security, and improved technologies and pharmaceuticals

B. GOAL AND OBJECTIVE

Our objective is to increase effectiveness in the implementation of evidence-based medication practices shown to reduce preventable adverse medication events. Medication safety will be improved through compliance with medication error reduction standards and safety practice implementation required by CMS, CDPH, FDA, Board of Pharmacy, TJC and its National Patient Safety Goals.

- Development and revision of policies and procedures and protocols to minimize Adverse Drug Events (ADE) will be based on review of facility reported adverse drug events, medication use evaluation, chart reviews, observed medication passes, accepted professional principles, incorporation of Federal & State laws and regulations, TJC medication management standards and National Patient Safety Goals, as well as its Sentinel Event Reports, other external alerts and/or recommendations from national associations including but not limited to the Institute For Safe Medication Practices (ISMP), National Coordination Council for Medication Error Reporting and Prevention (NCCMERP), Institute of Healthcare Improvement (IHI), other governmental agencies such as FDA Medwatch program, as well as clinical practice guidelines and standards of practice from nationally recognized professional organizations (e.g., American Pharmaceutical Association (APhA), American Society of Healthcare Systems Pharmacists (ASHP), California Society of Healthcare Pharmacists (CSHP), etc.

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW

CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

Our processes include but are not limited to the following:

1. Identify the causes of preventable Adverse Drug Events (ADE)
2. Identify the causes of preventable Rescue medications
3. Implement selected short-term changes, as well as
4. Identify, evaluate and implement long-term strategies that require operational and capital expenditures that will ensure safe medication processes and systems with or without technology.

C. ACTION PLANS AND INITIATIVES

See Medication Safety documents for updated medication safety QA/PI projects, demonstrating numerous medication safety goals, initiatives, and medication related best practices. Our priority is to achieve continual implementation of safe medication practices to substantially reduce medication errors and/or proactively prevent adverse events by addressing issues, actual or potential risk points or deficiencies associated with CDPH MERP elements.

III. ORGANIZATIONAL RESPONSIBILITY AND ACCOUNTABILITIES

(DHS-CDPH guiding principle #1-Establish an organized quality system that addresses the issue of a facility wide reduction of medication errors)

1. CCRMC has an ongoing approved and leadership-supported Medication Error Reporting Program with policies and procedures which clearly establish organizational structure in providing the leadership and quality system in advancing patient safety, risk management, and error reduction. Approved policies and procedures establishing our medication management and quality system are continually addressing issues in improving and refining processes, based on what went wrong, to design corrective actions for implementation and prevent re-occurrence.
2. Under the oversight of the PCP&E, a multidisciplinary Medication Safety Committee was formed in 2001. The Medication Safety Committee (MSC), run by the Department of Pharmacy (SEE

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

Addendum I), has oversight on all medication management processes, system wide. MSC is a subcommittee of the Patient Care Policy and Evaluation Committee (PCP&E) and reports to several medical staff committees i.e., PCP&E (i.e, P&T), PS&PIC, and MEC on a monthly basis. MSC oversees/addresses ALL medication errors and meets on a multidisciplinary note, every month, to discuss in detail all medication errors that occurred during that month. Medication errors are trended using NCCMERP ratings and through ongoing data aggregation analysis and preventative action design. In addition, at CCRMC, Pharmacy Dept trends near misses as well as harm index (see SBARs in MERP binder or electronic MERP document).

3. The MERP plan for the upcoming year is drafted annually submitted to executive members of this organization as well as medical staff committees (PCP&E, PS&PIC, and MEC) once MSC endorses it.
4. This committee is Chaired by the Director of Pharmacy Dept. The quality of different services in ensuring compliance with all MERP elements and established hospital policies is assessed and monitored via data collection. (See Annual Medication Error Reports in the MERP binder).
5. MSC has oversight on all medication related processes and generates many reports, including but not limited to Medication Errors, Rescue Meds, CSPs (Compounding Sterile Products), Clinical Monitors, Overrides, ADRs, ISMP reports, etc.
6. Medication error reports and adverse drug reaction reports with executive summary and pertinent data feedback relative to the user/user department are sent/referred to relevant medical staff, nursing unit/departments. Action response is requested from unit management/department head before SERS is closed.
7. Feedbacks on medication safety initiatives are reported to the Medical staff as well as Nursing staff through leadership of these departments.

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

8. A summary of all MSC agenda items are reported to PCP&E, PS&PIC as well as MEC. The Director of Pharmacy Department is a member of all these committees and presents the report on all pertinent information on a monthly basis to the aforementioned committees.
9. Implementation of our MERP is integrated into the facility-wide quality assurance/performance program.
10. Ongoing educational efforts are in place to heighten the awareness of medication safety to our patients.

IV. REPORTING SYSTEMS AND MONITORING

(DHS-CDPH guiding principles #2-Develop effective reporting mechanisms to ensure medication related errors are reviewed)

Reduction of medication errors and adverse reactions can be achieved by effective reporting systems that proactively identify causative factors and are used to implement corrective actions to reduce or prevent reoccurrences. To facilitate reporting, CCRMC adopted a medication error definition that is broad enough in scope to capture actual, potential, or “near miss” events and an adverse drug reaction (ADR) definition to capture suspected as well as actual ADRs.

CCRMC conducts proactive identification of adverse drug events or unsafe care processes including concurrent and retrospective review of patient’s clinical records, monitoring of targeted high-risk drugs with pertinent lab results, observing medication passes, conducting drug use evaluation and drug regimen review for high-risk patients for drug and or dosage adjustment to prevent potential adverse drug events, as well as performing other QA/PI initiatives.

At CCRMC the Pharmacy Department believes in transparency and uses our event reporting system (SERS) to place in all near misses as well as discrepancies. Pharmacy Department

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW

CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

believes that SERS is a means of trending and alerting healthcare members of the ongoing challenges in the system. In addition, Pharmacy Department uses analyzed data as a means of identifying QA and PI projects. See Medication Safety documents for examples of system enhancement projects using this methodology by the Pharmacy Department.

Pharmacy Department is the biggest contributor to SERS entry in the organization. All relevant data from our monitors and reports are entered into this system on a concurrent and retrospective basis. Through subsequent follow up with Nursing, Medical Staff, and Quality departments, we have been able to overcome many medication safety challenges in the past few years.

- A. CCRMC has a voluntary, non-punitive reporting system to monitor and report Adverse Drug Events (ADE) via a long-standing effective medication error reporting as well as an Adverse Drug Reaction program (ADR) with data collection, aggregation, analysis, and special emphasis on designing and implementation of preventative actions on an ongoing basis.
- B. Medication events, actual, potential, or near misses are reviewed and trended to evaluate changes in our systems that could improve patient safety. Evaluation and implementation of medication safety initiatives follow our continuous quality improvement process using the PDSA (Plan-Do-Study-Act) model, the Rapid Cycle Improvement techniques, the Failure Mode and Effect Analysis (FMEA), and the Root Cause Analysis (RCA) model for sentinel event or “near misses” in conjunction with our Quality department / Risk management & Patient Safety Officer.

V. PROCESS-MERP IMPLEMENTATION ASSESSMENT

A. ASSESSMENT

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW

CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

(DHS-CDPH guiding principle #3- Establish a baseline assessment and then, at a minimum annually review the effectiveness of the plan to reduce medication-related errors)

Baseline assessment of medication related problems and annual review of the effectiveness of the plan are performed using an objective based critical review. If the plan is not effective in reducing medication errors, MERP will be revised to redesign actions to achieve goals.

B. CDPH REQUIREMENT IN ASSESSING EFFECTIVENESS OF MERP IMPLEMENTATION:

Evaluate, assess, and include a method to address each of the procedures and systems listed under 1339, H&S, subdivision (d) to identify weaknesses or deficiencies that could contribute to errors in the administration of medications. CDPH categorized and focused on evaluating twelve elements on MERP implementation for ongoing improvement.

At CCRMC we use our medication error reports to trend challenging elements. Medication errors are reviewed periodically (i.e., monthly and annually).

The following year's plan is drafted after meticulous review of all Medication Errors, analyzing the cumulative data using monthly, quarterly, and annual Med Error patterns. Subsequently thereafter, plans are implemented to reduce the likelihood of the errors in those certain areas.

Pharmacy Dept uses the Run Chart methodology to graph each MERP element to assess the effectiveness of the instituted plans and whether those plans were adequate in reducing medication errors over time.

Run Charts are cumulative; using Median Line, we can detect any trends, shifts, or astronomical data points. We also insert annotations on the aforementioned run charts to be able to describe the cause and effects concerning any peaks or trough vs any observed isolated incidents.

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW

CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

Pharmacy Dept works very well with ALL departments (Nursing, medical staff, or ancillary departments) in conjunction with Quality Managers and the Professional Development Department (PDD) to apply corrective actions. Success is measured by following SERS in the affected areas to see if the action plan was proven effective or not and reflected on the run charts as cited above.

Education and Information dissemination

1. CCRMC disseminates information to hospital leadership, physicians, nurses, pharmacists, and quality managers. The following activities are currently underway to increase awareness of patient safety:
 - a. Data feedback to physicians by Pharmacy Department's leadership on medication errors, adverse drug reaction reporting and medication use quality assurance and use audits.
 - b. Data feedback to nursing by Pharmacy Department's leadership on medication errors, rescue meds, adverse reactions, and quality audits.

At CCRMC we have actively received and used new information and notices related to:

- Medication errors
- Processes for avoiding errors
- Recalls
- Problem prone medications and
- Resources related to adverse events associated to medications.

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW

CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

A monthly memo is generated by the Pharmacy Department with all the PCP&E updates. In addition, a memo is generated and sent to the Medical Staff president regarding “Preventable ADRs as well as Preventable Rescue Meds as a learning and educational opportunity.

Technology Strategies

(DHS-CDPH guiding principle #4-Technology implementation shall be part of the plan)

Technology will be used whenever possible to improve effectiveness and efficiency in the medication use processes to make errors difficult to commit and to promote a culture of safety and quality in the workplace. Listed below are technological applications completed at CCRMC.

Technology action plan:

1. Automated Dispensing Cabinets (i.e, Omnicell)
 - Continue using the alerts, reports, and paging system available by the Omnicell software
2. Provide ongoing support to maintain quick access and availability to medical information or current IV administration guidelines, online:
 - Micromedex-available to all staff
 - Lexicomp- available to all staff
3. Expanding reporting capabilities of EPIC (our EHR) to generate more and more meaningful reports in form of system lists, workbench reports, or crystal reports.
4. Usage EHR, i.e, ordersets, Best Practice Alerts (BPA’s), First Data Bank (FDB) warnings (i.e., concerning allergy, Drug-Drug Interaction, high dose, etc...) enables us to ensure safe medication practices at CCRMC.
5. Utilizing different software and technologies to extract data and trend values

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

6. VigiLanz (A data mining system)

- VigiLanz is programmed to include many monitors. It filters the data and reports all monitors that need to be addressed by the pharmacists on a daily basis
- Bayesian software for vancomycin dosing

7. SERS (Safety Event Reporting System)

- Electronic event reporting system with the built in reporting mechanism

8. Smart pumps

- Smart pumps have been programmed to match our EHR rates of administration for all formulary drugs. The use of basic infusion is monitored and use of guardrail is encouraged. Data is trended using its report functionality. Rounds are made by Pharmacy and Nursing to assure compliance with set safety parameters.

9. Kitcheck®

- Kit check® uses the RFID technology. Pharmacy Dept uses this technology to improve the efficiency of monitoring the expired medications in variety of kits and carts.
- Kit Check® technology was instituted in Anesthesia Workstations to better manage the inventory of the trays.

10. EHR (ccLink)

- Barcoding technology
 - Introduced globally as BCMA
 - Introduced departmentally in most areas of the Pharmacy dept

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

- Antimicrobial Stewardship (ASP) module

11. Central Temperature monitoring software

12. Controlled substance surveillance system

C. Literature review for ongoing review of the plan

(DHS-CDPH guiding principle #5- Review pertinent literature related to the reduction of medication related errors in the development and ongoing review of the plan.)

Pertinent literature related to the reduction of adverse drug events has been and will continue to be reviewed in the development and review of the plan. The ultimate goal is to deliver safe medication practices at CCRMC and Clinics.

Literature for ongoing learning and sharing are readily obtained from any of our resources at CCRMC. We have a very generous library of resources made available to staff, electronically. A few examples would be Micromedex, Up-To-Date, and many journals through our library. In addition to that, we benefit from nationally recognized entities and their publications such as ASHP, FDA Medwatch alerts, etc... (SEE Goal and Objective section above)

D. CCRMC participates in the following medication safety collaborative for learning from errors and sharing of best practices:

- East Bay Society of CSHP (California Society of Healthcare Pharmacists): Collaboration of all East Bay Pharmacy Leadership
- South Bay Society of CSHP (California society of Healthcare Pharmacists): Collaboration of all South Bay Pharmacy Leadership
- ARC-Gordon and Betty Moore foundation: Avoid Readmission Coalition. Pharmacy

Director has done a number of presentations for this organization and currently is the expert speaker/presenter for Avoid Readmission Campaign in the East Bay

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

- ISMP Canada: Pharmacy Director has been invited to ISMP in Canada to share the Medication Reconciliation Process at CCRMC as IHI model hospital

VI. MERP ELEMENTS OF THE PLAN TO MONITOR AND EVALUATE SAFE MEDICATION PRACTICES IN ERROR REDUCTION:

The main section of this report will be categorized by the twelve elements of medication practices: Prescribing, Dispensing, Distribution, Administration, Competency related to medication use, Product-labeling, Packaging and Nomenclature, Compounding, Prescription Order Communication, Monitoring, Use, and Transition of Care.

The annual MERP program assessment review and effectiveness evaluation in support of identifying plan weaknesses and deficiencies for change implementation and MERP program modification are highlighted in our Medication Safety documents.

Processes to Reduce Medication Errors:

Methodologies to reduce medication errors include on-going proactive surveillance and retrospective tools to identify the root causes of variation or deviation in medication management process and system performance. Examples of on-going proactive surveillance tools include the use of trigger tool to identify areas for improvement in clinical care and patient safety, the reviews of medication usage evaluations, and daily monitoring of Automated Dispensing Cabinets medication overrides.

Data from comprehensive review of reported medication events and on-going proactive and retrospective reviews of system performance will be utilized to determine and evaluate medication safety systems related to, but not limited to: prescribing, prescription order

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

communication, product labeling, packaging and nomenclature, compounding, dispensing, distribution, administration, education, monitoring, medication use and storage of medications.

Corrective actions are promptly initiated to address each of the eleven processes and systems once a significant trend or pattern has been identified through the on-going monitoring methodologies as described above. Corrective actions may include changes in systems, procedures, staff and management in-services, and revision in policies and procedures. Should the corrective actions as implemented prove to demonstrate a decrease or reduction in medication errors overtime, then the specific hospital policy and corresponding procedures will be revised and forwarded to the Medication Safety Committee (MSC) as well as the oversight committees (i.e, PCP&E, etc...) for review and approval.

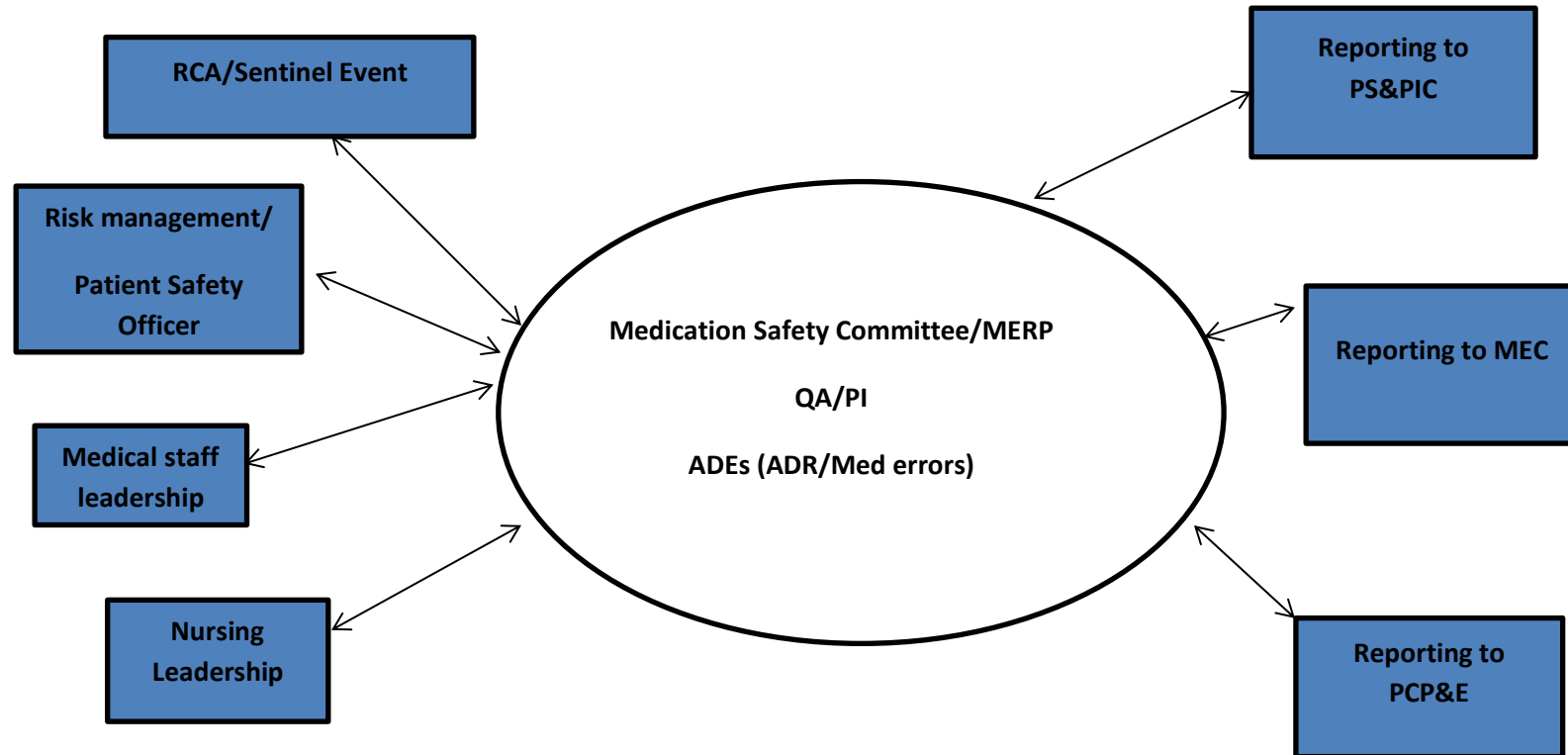
Annually, all the revised and changed procedures and systems will be reviewed and evaluated by the MSC as well as PCP&E to determine if the changes undertaken have been effective, or not; and whether the ongoing indicator should continue to be monitored for the forthcoming year. Frequency of monitoring for the specific indicator that has demonstrated a reduction in medication errors will also be revisited and determined by the Medication Safety Committee and approved by the PCP&E Committee.

VII. Effectiveness of the Plan:

The program has been effective in detecting medication errors and in developing corrective actions for the past year (see Medication Safety documents).

MEDICATION ERROR REDUCTION PLAN-ANNUAL MERP REVIEW
CONTRA COSTA REGIONAL MEDICAL CENTER (3/2024-3/2027 cycle)

Addendum I- Pharmacy Department's QA/PI collaborative structure



MERP PLAN FOR THE YEAR 2026

PRESCRIBING

- **New Processes:**
 - Pharmacy to work with ccLink IT, inpatient providers and nurses to optimize order sets using the new roundtable tool available in ccLink. Round table facilitates communication and collaboration between different disciplines.
- **Continue the following:**
 - Continue all Pharmacy Monitors in ccLink and Vigilanz®: DDI checks, clinical conditions, lab monitors and reviewing therapeutic appropriateness, etc. Monitors will be optimized as needed.
 - Continue all processes under the Antimicrobial Stewardship Program (ASP). Continue to promote and assess the use of the Empiric Antibiotic Order Set.
 - Continue reviewing all order sets on a multidisciplinary note in ccLink as opportunities for improvement are identified, and work on new order sets as needed with the multidisciplinary trio team.
 - Continue reviewing external resources (ex: ISMP newsletters and self-assessments, FDA alerts, etc.), to analyze current practice at CCRMC and improve processes according to the most recent guidelines and literature.
 - Continue to optimize insulin prescribing. Continue the physician oversight process and provide physician education when needed. Continue to optimize order sets and panels involving insulin to further prevent hypoglycemic events.
 - ADC access:
 - Continue to monitor and trend medication overrides and provide feedback to the end users.
 - Continue to monitor ADC access to ensure that unauthorized personnel (i.e. upon departure or termination of employment of nursing/anesthesiology/pharmacy staff, etc.) are removed from the system upon leaving to prevent unauthorized access to medications.
 - Continue to utilize the rescue medication report and ADR report as an educational tool for medical staff.
 - Pharmacy to continue monitoring and reporting any verbal orders not cosigned within 48 hours via SERS. Continue working with medical staff to ensure compliance.

MERP PLAN FOR THE YEAR 2026

PRESCRIPTION ORDER COMMUNICATION

- **New Processes:**
 - Continue to update order sets to ensure clear communication of prescription orders. In 2026, order sets to be worked on include (but not limited to) the ED laceration, IP alcohol withdrawal, Plasma exchange, ED MAT protocol.
 - Continue Pharmacy Transitions of Care Discharge Medication Reconciliation for patients with a primary diagnosis of Heart Failure which was initiated in Q4 2025; CCRMC pharmacy staff ensure that prescriptions are communicated appropriately to the retail pharmacy and are filled for the patient.
- **Continue the following:**
 - Continue reviewing all order sets on a multidisciplinary note in ccLink as opportunities for improvement are identified, and work on new order sets as needed with the multidisciplinary trio team.
 - Continue the Transitions of Care (TC) Program to 1) Minimize medication transcribing errors with effective communication with “High Risk” patients (as defined by CCRMC) and 2) Ensure medication understanding and adherence by educating patients.
 - Continue monitoring for duplications in therapy and optimize order sets/order panels as needed to ensure effective prescription order communication of PRN medications.
 - All chemotherapy treatment plans for infusion clinic to go through pharmacy for approval prior to build in ccLink.

MERP PLAN FOR THE YEAR 2026

PRODUCT LABELING, PACKAGING AND NOMENCLATURE

- **New Processes:**
 - Transition from the current unit dose labeler in pharmacy to a different labeling software (HCL go labels).
 - Zebra label printers installation project will be expanded to include replacement of current label printers in the inpatient pharmacy.
 - Upgrade medication barcode scanners throughout the hospital to read the barcodes printed on the Zebra printer labels.
- **Continue the following:**
 - In the face of drug shortages, appropriate assessment of products available in the market to be conducted and information relayed to the appropriate disciplines (pharmacy staff, nursing staff, medical staff, etc.). Appropriate changes to be made in the electronic health record to avoid transcribing errors, order set errors and medication order errors.
 - Pharmacy and nursing to continue assessing compliance with accurate labeling per nursing of IV solutions retrieved from Medline carts, along with MDVs expiration labeling.
 - Continue reviewing external resources to analyze current practice at CCRMC and improve processes according to the most recent guidelines and literature.
 - Continue Kit Check labeling and barcoding to optimize PAR levels of medications in anesthesia workstations in the OR and crash carts.
 - Continue barcoding upon dispensation and administration.
 - Continue monitoring MDV expiration labeling.
 - Continue purchasing smaller packaging of fentanyl and hydromorphone IV (fentanyl 50 mcg/1 ml, hydromorphone 0.2 mg/1 ml).

MERP PLAN FOR THE YEAR 2026

COMPOUNDING

- **New Processes:**
 - Continue to update the master formulas for medications at CCRMC with updated beyond-use dating based on USP 797 effective 11/1/23.
 - Explore switching from external lab ARL to Alta labs 797 for better reporting and a more streamlined process for sampling in the sterile compounding environment.
 - Continue to ensure compliance with all the recent revisions in the CA State Board of Pharmacy regulations surrounding compounding (CCR, Title 16, section 1735-1738) and make necessary changes in practice.
 - Continue to review the 2024 NIOSH list of hazardous drugs in healthcare settings and optimize pharmacy practices.
- **Continue the following:**
 - Continue to review and assess USP 797, 795 and 800 for adequate compliance per CCRMC policy in accordance with the CA State Board of Pharmacy.
 - Continue end-product testing using an external lab for the following: samples of purchased goods from compounding pharmacies, CCRMC compounded products, staff glove fingertip and media-fill test.
 - Continue monthly surface sampling in all sterile compounding environments as required by new/revised USP 797 effective 11/1/2023
 - Continue monitoring relative humidity in sterile compounding environments as required by new/revised USP 797 effective 11/1/23
 - Continued usage of barcoding technology in the inpatient and outpatient IV sterile compounding environments.
 - CCRMC master formula is reviewed and updated on a routine basis.
 - Continue auditing IV room medication compounding within the monthly Pharmacy Dispensing Audit by pharmacy.
 - Continue IV admixture training for nursing staff, and extensive IV competency training for pharmacists and technicians on an annual basis.
 - Continue practical evaluation of pharmacy staff competency for non-sterile compounding (USP 795)
 - Continue using non-sterile and sterile compounding e-learning modules for pharmacy staff to complete.
 - Continue extensive monitoring of compounding environments under the CA State Board of Pharmacy requirements for annual licensure including but not limited to utilizing internal and external resources.

MERP PLAN FOR THE YEAR 2026

DISPENSING

- **New Processes:**
 - Transition from the current unit dose labeler in pharmacy to a different labeling software (HCL go labels).
 - Barcode scan medications upon return to stock in pharmacy to reduce the risk of dispensing errors.
 - Explore creating a system to barcode scan medications before they are loaded into the Omnicell to reduce the risk of Omnicell fill errors by pharmacy (ex: wrong medication in bin)
 - Zebra label printers installation project will be expanded to include replacement of current label printers in the inpatient pharmacy.
 - Upgrade medication barcode scanners throughout the hospital to read the barcodes printed on the Zebra printer labels.
- **Continue the following:**
 - Continue monitoring all dispensing areas of Pharmacy Dept and utilization of barcode scanning through the department.
 - Continue monitoring the KPI report for pharmacy turn-around-time for order verification.
 - Continue reviewing external resources to analyze current practice at CCRMC and improve processes according to the most recent guidelines and literature.
 - Continue barcode scanning of medications dispensed (IV medications since inception of EPIC, PO cart fill and first dose medications initiated in 2018).
 - Continue all processes under the Antimicrobial Stewardship Program (ASP) to validate for appropriateness.
 - Continue "Dispense tracking" to better facilitate medication delivery to the unit for nurses.
 - Continue to purchase smaller packaging of fentanyl and hydromorphone IV (fentanyl 50 mcg/1 ml, hydromorphone 0.2 mg/1 ml)
 - As an enhancement to the safety and security of injectable controlled substance medications, pharmacy will continue to purchase medications packaged in the Pfizer Nexxjet syringe (more tamper evident, ready to administer), as available on the market.

MERP PLAN FOR THE YEAR 2026

DISTRIBUTION

- **New Processes:**
 - Pharmacy worked with IT to develop power BI reports to monitor anesthesia airway kit use, controlled substance diversion with other replacement drugs and opioid prescribing practices. These reports were built in 2025. Going forward in 2026, the pharmacy department will review the newly available reports and create a monitoring plan.
 - Barcode scan medications upon return to stock in pharmacy to reduce the risk of dispensing errors.
 - Explore creating a system to barcode scan medications before they are loaded into the Omnicell to reduce the risk of Omnicell fill errors by pharmacy (ex: wrong medication in bin)
- **Continue the following:**
 - Controlled Substances: continued monitoring of controlled substance transactions and documentation processes in the Nursing and Anesthesiology departments by Pharmacy department for quality assurance. Continue to use Bluesight's ControlCheck surveillance system. Continue to investigate Omnicell controlled substance null transactions on a regular basis.
 - Continue to monitor and trend medication overrides and provide feedback to the end users.
 - Continue detailed daily review of D50 usage via in-basket message to clinical pharmacy dept. (assess for appropriateness of events).
 - Continue Kit Check labeling and barcoding to ensure adequate PAR levels of medications in anesthesia workstations in the OR and crash carts.
 - Continue to monitor ADC access to ensure that unauthorized personnel (i.e. upon departure or termination of employment of nursing/anesthesiology/pharmacy staff, etc.) are removed from the system to prevent unauthorized access to medications.
 - Continue reviewing external resources to analyze current practice at CCRMC and improve processes according to the most recent guidelines and literature.
 - Pharmacy to continue assessing compliance with accurate expiration labeling of MDVs by nursing.
 - Ongoing pharmacy staff education to ensure accurate filling of Omnicell.
 - Continue "Dispense tracking" to better facilitate medication delivery to the unit for nurses.
 - Ongoing efforts for optimization of Omnicell medication stocking to minimize unit dose cart fill volume.
 - As an enhancement to the safety and security of injectable controlled substance medications, pharmacy will purchase medications packaged in the Pfizer Nexxjet syringe (more tamper evident, ready to administer), as available on the market.

MERP PLAN FOR THE YEAR 2026

ADMINISTRATION

- **New Processes:**
 - In 2025, CCRMC transitioned from using Alaris infusion pump to ICU Medical's infusion pumps. In 2026, CCRMC will implement interoperability for ICU Medical's Plum Duo pump with EPIC.
 - Monitor ICU Medical Pump compliance rates and QA metrics.
 - Explore possibility of transitioning to NRFit connectors to meet the ISO 80369-6 standard for neuraxial administration.
 - Explore implementing Anesthesia Medication Barcode Scanning
 - Upgrade medication barcode scanners throughout the hospital to read the barcodes printed on the Zebra printer labels.
- **Continue the following:**
 - Controlled Substances: continued monitoring of controlled substance transactions and documentation processes in the Nursing and Anesthesiology departments by Pharmacy department for quality assurance. Continue to use Bluesight's ControlCheck surveillance system.
 - Continue to monitor and trend medication overrides and provide feedback to the end users.
 - Continue reviewing external resources to analyze current practice at CCRMC and improve processes accordingly.
 - Continue to optimize nursing workflow in ccLink in relation to medication management based on routine review of medication errors and MSC feedback.
 - Continue to monitor barcoding compliance (both patient and medication) in the nursing environment to maintain the Leapfrog goal of greater than 95% compliance.
 - Continue "Dispense tracking" to better facilitate medication delivery to the unit for nurses.

MERP PLAN FOR THE YEAR 2026

MONITORING

- **New Processes:**
 - Monitor ICU Medical Pump compliance rates and QA metrics, including near miss medication errors.
 - Explore if Insulin infusion calculator in ccLink will be compatible with the titration protocols at CCRMC.
- **Continue the following:**
 - Continue all Pharmacy Monitors, including but not limited to DDI checks, clinical conditions, lab monitors and checking for therapeutic appropriateness via data mining software and various EPIC reports [i.e. crystal, dashboard, system lists]). Monitors will be optimized as needed.
 - Monitors in the inpatient setting: vancomycin, heparin infusion, insulin, psychiatric medications, etc.
 - Monitors in the ambulatory setting: Diabetes Care Management Clinic, ESA Clinic, Transitions in care services, Anticoagulation Clinic etc.
 - Continue reviewing external resources to analyze current practice at CCRMC and improve processes according to the most recent guidelines and literature.
 - Continue all processes under the Antimicrobial Stewardship Program (ASP).
 - Continue monitoring of ADEs (ADRs and medication errors) retrospectively to assess for appropriateness of medication use and monitoring.
 - Continue retrospective review of different systems, reports, and processes (ex: rescue medication report, medication error report, etc.) for appropriateness of medication use and monitoring from different disciplines (medical staff, nursing, pharmacy, etc.) and implement educational plans for medication monitoring as needed.
 - Continue the physician oversight process for all hypoglycemic events (BG < 50 mg/dl) for patients on insulin at CCRMC to ensure that appropriate actions are taken, and education provided when needed.
 - Continue collaborating with medical staff for different medication safety monitors.
 - Controlled Substances: continued monitoring controlled substance utilization. Continue to review and share data from Bluesight's ControlCheck program on a multidisciplinary note with leadership as deemed appropriate.
 - Continue to monitor and trend medication overrides and provide feedback to the end users.
 - Continue extensive monitoring of compounding environments under the CA State Board of Pharmacy requirements for annual licensure including but not limited to utilizing internal and external resources.

MERP PLAN FOR THE YEAR 2026

EDUCATION

- **New Processes:**
 - In 2025, CCRMC transitioned from using Alaris infusion pump to ICU Medical's infusion pumps. In 2026, CCRMC will implement interoperability for ICU Medical's Plum Duo pump with EPIC. Education to be incorporated during this transition for end users.
 - Education plan for nurses and pharmacists using the infusion center Omnicell (licensed ADDS).
 - Education to be provided to the Anesthesiologists upon launch of anesthesiology medication barcode scanning,
 - Education to be provided to the Anesthesiologists upon launch of conversion to NRFit connectors.
- **Continue the following:**
 - Continue all pharmacy monitors and educate appropriate staff as errors are identified.
 - Continue formal new pharmacist training and competency assessment for participation in the ASP program, DCM, and ESA Clinics, and all clinical processes upon hire.
 - Continue competency assessments for new pharmacists and pharmacy technicians during orientation.
 - Sterile and nonsterile competency training is completed by pharmacists and technicians
 - Continue ongoing continuing education for clinical pharmacists pertinent to practice.
 - Continue reviewing external resources to analyze current practice at CCRMC and improve processes accordingly by optimizing operations and educating staff.
 - Continue to in-service nursing staff as needed.
 - Malignant Hyperthermia: Conduct mock MH drills on a unit specific note and use results for staff education, in collaboration with the Professional Development Department.
 - IV competency training for nursing staff annually.
 - Continue the Transitions of Care (TC) Program and provide education to patients to promote safe medication use.
 - Continue retrospective review of different systems, reports and processes and educate staff as necessary (rescue medications, ADRs, etc.).
 - Continue pharmaceutical waste management compliance monitoring in the ambulatory and inpatient settings which includes a full report of any deficiencies found along with a plan of correction.
 - The Antimicrobial Stewardship committee to continue sharing education with the ED Chair and the Hospital Medicine Chair to distribute to medical staff based on stewardship trends.

MERP PLAN FOR THE YEAR 2026

USE

- **New Processes:**
 - Optimize processes upon data collection and use of ICU Medical's smart pumps.
 - Update all P&Ps based on the Board of Pharmacy's regulations governing nonsterile compounding, sterile compounding, hazardous drugs and radiopharmaceuticals (California Code of Regulations, Title 16, section 1735-1738).
- **Continue the following:**
 - Controlled Substances: continued monitoring of controlled substance transactions and documentation processes in the Nursing and Anesthesiology departments by Pharmacy department for quality assurance. Continue to use Bluesight's ControlCheck surveillance system.
 - Continue reviewing external resources to analyze current practice at CCRMC and improve processes accordingly by optimizing operations and educating staff.
 - Continue to analyze data extracted from numbers of monitors/clinical programs by pharmacy department and apply quality improvement strategies.

MERP PLAN FOR THE YEAR 2026

TECHNOLOGY

- **New Processes:**

- Continue to develop tracing and tracking medication movement through upgraded DSCSA software.
- Transition from the current unit dose labeler in pharmacy to a different labeling software (HCL go labels).
- Pharmacy to work with ccLink IT, inpatient providers and nurses to optimize order sets using the new roundtable tool available in ccLink. Round table facilitates communication and collaboration between different disciplines.
- Explore creating a system to barcode scan medications before they are loaded into the Omnicell to reduce the risk of Omnicell fill errors by pharmacy (ex: wrong medication in bin)
- Barcode scan medications upon return to stock in pharmacy to reduce the risk of dispensing errors.
- In 2025, CCRMC transitioned from using Alaris infusion pump to ICU Medical's infusion pumps. In 2026, CCRMC will implement interoperability for ICU Medical's Plum Duo pump with EPIC.
- Explore possibility of transitioning to NRFit connectors to meet the ISO 80369-6 standard for neuraxial administration.
- Explore implementing Anesthesia Medication Barcode Scanning
- Zebra label printers installation project will be expanded to include replacement of current label printers in the inpatient pharmacy.
- Upgrade medication barcode scanners throughout the hospital to read the barcodes printed on the Zebra printer labels.

- **Continue the following:**

- Continue on reviewing all order sets on a multidisciplinary note in ccLink as opportunities for improvement are identified, and work on new order sets as needed.
- Continue to improve and enhance technological tools (e.g., ccLink, smart pumps, etc.) as a result of medication error trending and analysis.
- Continue pharmacy monitors/programs with the utilization of technological tools such as system lists and dashboard reports via EPIC as well as data mining software (i.e. Vigilanz®).
- Continue monitoring of ADEs (ADRs and medication errors) retrospectively with utilization of technological tools.
- Continue "Dispense tracking" to better facilitate medication delivery to the unit for nurses.
- Continue AUC/MIC dosing/monitoring of vancomycin using a Bayesian software.
- Continue to utilize cameras in pharmacy and nursing medication areas to optimize visibility during investigation and consider software upgrades.
- Continue using ControlCheck for controlled substance monitoring.
- Continue using and optimizing pharmacy Power BI reports.

MERP PLAN FOR THE YEAR 2026

TRANSITIONS IN CARE

- **New Processes:**
 - Continue Pharmacy Transitions of Care Discharge Medication Reconciliation for patients with a primary diagnosis of Heart Failure which was initiated in Q4 2025; CCRMC pharmacy staff ensure that prescriptions are communicated appropriately to the retail pharmacy and are filled for the patient. Pharmacy department to collect feedback to optimize CHF management in an effort to reduce readmission rates.
- **Continue the following:**
 - Continue the Pharmacy Transitions of Care (TC) Program and monitor success rate and readmit rates.
 - Continue using “Dispense tracking,” to reduce missed doses due to patients transferring from one unit to the next. And continue to educate nurses during nursing orientation that medications must be transferred with patient from one unit to the next.



Origination 03/2014
 Last Approved N/A
 Effective Upon Approval
 Last Revised 03/2026
 Next Review 1 year after approval

Owner Shideh Atai:
 Director Of
 Pharmacy Svcs
 Area Pharmacy
 Applicability CCRMC, Health
 Centers &
 Detention

Policy for Medication Error Reduction Plan (MERP)

POLICY STATEMENT:

SB1875 requires an annual review of all Medication Error Reduction Plan (MERP) elements for efficacy. There are twelve different 'elements' to the medication management process that require monitoring: Prescribing, Prescription Order Communication, Product Labeling, Packaging, and Nomenclature, Compounding, Dispensing, Distribution, Administration of Medications, Monitoring, Education, Use, Technology, and Transitions in Care.

GUIDELINES:

Below is a breakdown, by element, of the monitors in place at CCRMC. This is a multidisciplinary process, with many departments involved/responsible for the monitor/audit/report.

A. Prescribing:

1. **Medication errors:** review and analysis of all medication errors involving prescribing
2. **Adverse Drug Events:** review and analysis of all reported adverse drug events
3. **Pharmacy interventions:** review and analysis of all reported pharmacist interventions with providers
4. **Antibiotic stewardship:** report on appropriate prescribing and monitoring of antibiotic therapy
5. **Fentanyl patch:** review of all fentanyl patch orders for appropriateness of therapy and monitor of provider prescribing process
6. **Rescue medications:** review of 100% of all doses of rescue medications administered to patients

7. **LASA review:** review of latest literature on LASA and report on all CCRMC medication errors involving look-alike-sound-alike errors

B. Prescription Order Communication:

1. **Medication errors:** review and analysis of all medication errors involving order communication

C. Product Labeling, Packaging, and Nomenclature:

1. **Medication errors:** review and analysis of all medication errors involving labeling, packaging, and nomenclature
2. **Internal pharmacy audit:** monthly audit of pharmacy-dispensed doses, looking for proper labeling, ingredients, cart fill check, etc
3. **LASA review:** review of latest literature on LASA and report on all CCRMC medication errors involving look-alike-sound-alike errors

D. Compounding:

1. **Medication errors:** review and analysis of all medication errors involving compounding
 - a. **Internal pharmacy audit:** monthly audit of pharmacy-dispensed doses, looking for proper labeling, ingredients, cart fill check, etc.
End-Product-Testing

E. Dispensing:

1. **Medication errors:** review and analysis of all medication errors involving dispensing
2. **Internal pharmacy audit:** monthly audit of pharmacy-dispensed doses, looking for proper labeling, ingredients, cart fill check, etc
3. **Turn-Around Time:** monitor of pharmacy TAT
4. **LASA review:** review of latest literature on LASA and report on all CCRMC medication errors involving look-alike-sound-alike errors
5. **Dispense tracking:** track medications dispensed from pharmacy to the nursing units

F. Distribution:

1. **Medication errors:** review and analysis of all medication errors involving distribution.
2. **Internal pharmacy audit:** monthly audit of pharmacy-dispensed doses, looking for proper labeling, ingredients, cart fill check, etc
3. **High risk/high alert:** review of latest literature on high-risk medications and report of all medication errors involving high risk medications
LASA review: review of latest literature on LASA and report on all CCRMC medication errors involving look-alike-sound-alike errors

G. Administration of medications:

1. **Medication errors:** review and analysis of all medication errors involving administration of medications
2. **Bar code report:** report on medications being administered without proper

barcoding.

3. **Override report:** monitor of medications removed from the automated dispensing machine using the override function
4. **LASA review:** review of latest literature on LASA and report on all CCRMC medication errors involving look-alike-sound-alike errors
5. **Smart pump reports:** report on use of smart pumps

H. **Monitoring:**

1. **Medication errors:** review and analysis of all medication errors involving monitoring of medications
2. **Antibiotic stewardship:** report on appropriate prescribing and monitoring of antibiotic therapy
 - a. **Pharmacist-managed Diabetes Care Management Clinic:** review and analysis of patient outcomes for pharmacist-managed diabetes patients vs provider-managed diabetes patients.
 - b. **Anticoagulation clinic**
 - c. **Erythropoietin stimulating agent clinic**
 - d. **Pharmacy interventions** (including but not limited to daily drug information, clinical monitors set via Datamining software as well as EHR)
 - e. **D50 Use Review**
 - f. **Medication overrides**
 - g. **Medication barcoding**
 - h. **Controlled substance discrepancies**
 - i. **Medication pass audit of the hospital units**
 - j. **Pharmacy practices internal audit**
 - k. **Review of Rescue medications**
 - l. **Adverse Drug Events:** review and analysis of all reported adverse drug events

I. **Education:**

1. **Medication errors:** review and analysis of all medication errors with regards to competency of staff
2. **Patient education on fentanyl patch:** review and monitor for documentation of patient education for all patients being discharged on fentanyl patch
3. Professional Development Department provides ongoing education for nursing staff
4. **Transitions of Care program by pharmacy department:** Conducted in compliance with Senate Bill no.1254.
5. **Anticoagulation clinic program run by Pharmacy Dept (Ambulatory care, Health centers)**

J. **Use:**

1. **Medication errors:** review and analysis of all medication errors related to medication use
2. **Antibiotic stewardship:** report on appropriate prescribing and monitoring of antibiotic therapy
3. **Fentanyl patch:** review of all fentanyl patch orders for appropriateness of therapy and monitor of provider prescribing process

K. **Technology:**

1. **Medication errors:** review and analysis of all medication errors related to technology
2. **ccLink:** reports on system changes made in response to system issues
3. **Smart pump reports:** report on use of smart pumps

L. **Transitions in Care:**

1. **Medication errors:** review and analysis of all medication errors related to transitions in care
2. **Transitions of Care program by pharmacy department:** Conducted in compliance with [Senate Bill SB no. 1254](#) and [AB no. 1503](#).

An annual report on the effectiveness of the plan, illustrated by the annual medication errors and metrics associated with each element is prepared and presented to the Medication Safety Committee, Patient Care Policy & Evaluations Committee and the Performance Improvement Committee, and the Medical Executive at the end of the MERP year. The plan is then modified, based on the findings, for the following year and adopted by the organization.

RELATED LINKS:

- A. [Annual MERP Review](#)
- B. [MERP Plan 2025](#)

REFERENCES:

- A. ~~TJC Standards LD.01.03.01, LD.03.01.01, LD.03.02.01, LD.03.05.01, LD.04.04.01, MM.06.01.01, MM.07.01.03, MM.08.01.01, PI.01.01.01, PI.02.01.01, PI.03.01.01~~ [TJC Standards MM17.01.01, NPG 14.02.01, NPG 14.03.01, 14.05.01](#)
- B. CMS CoP § 482.11(a), 482.12(b)(d)(f), 482.21(a)(b)(c)(d)(e), 482.23(c), 482.25(a)(b), 482.41(c), 482.42(b)
- C. California SB 1875
- D. [California SB 1254, California AB 1503](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [SP]	04/2026
	Shideh Ataii: Director Of Pharmacy Svcs	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination	06/2018	Owner	Shideh Atai: Director Of Pharmacy Svcs
Last Approved	N/A	Area	Pharmacy
Effective	Upon Approval	Applicability	CCRMC, Health Centers & Detention
Last Revised	03/2026		
Next Review	3 years after approval		

Policy for Mifepristone-RU486 (Mifeprex®)

POLICY STATEMENT:

Mifepristone (Mifeprex®) is indicated in pregnant females as part of a regimen containing misoprostol for medical termination of intrauterine pregnancy.

Mifepristone should be prescribed only by licensed providers who have read and understood the prescribing information. Mifepristone may be administered only in health center or hospital by the provider, able to assess the gestational age of an embryo and to assess risk of ectopic pregnancies and initiate ectopic diagnostics. Providers must also be able to provide surgical intervention, or to be able to make plans to provider care through others, in cases of incomplete abortion or severe bleeding and be able to assure patient access to medical facilities equipped to provide blood transfusions and resuscitation, if necessary.

GUIDELINES:

Mifepristone, in combination with misoprostol, is indicated for the medical termination of intrauterine pregnancy.

Refer to Prescribing Information and Medication Guide for complete safety information.

Prior to a provider using mifepristone in his/her practice, at least **ONE** provider at CCRMC must sign and return to Danco Laboratories the Prescriber's Agreement, indicating that they meet the qualifications and will observe the guidelines outlined below. However, the content of the FDA approved Prescriber's Agreement must be reviewed and acknowledged by ALL/ANY providers prescribing and administering this medication at CCRMC and health centers. This would replace the requirements for individual providers signing and returning the document to Danco Laboratories.

Danco Laboratories will not ship Mifepristone to CCRMC Pharmacy until a provider on the record has the "signed Prescriber Agreement" on file. The Pharmacy Department assumes the role of ordering and securely storing Mifepristone at CCRMC.

Mifepristone must be provided by a healthcare provider who prescribes and meets the following qualifications:

1. Ability to assess the duration of pregnancy accurately
2. Ability to assess for risk of ectopic pregnancies and initiate ectopic
3. Ability to provide surgical intervention, or to have made plans to provide such care through others, in cases of incomplete abortion or severe bleeding, and ability to assure patient access to medical facilities equipped to provide blood transfusions and resuscitation, if necessary.
4. Has read and understood the prescribing information of Mifepristone (Mifeprex®). The prescribing information is attached to this policy as a hyperlink and is also available by calling 1-877-4 Early Option (1-877-432-7596) or website: www.earlyoptionpill.com.

In addition to these qualifications, the provider must provide Mifepristone in a manner consistent with the following guidelines:

1. Review the patient agreement form with the patient and fully explain the risks of mifepristone treatment regimen. Answer any questions the patient may have prior to receiving mifepristone
2. Sign and obtain the patients signature on the patient agreement form
3. Provide the patient with a copy of the Patient Agreement Form and the medication guide
4. Place the signed Patient Agreement Form in the patients' medical record
5. Record the serial number from each package of mifepristone in each patient record
6. Report deaths to Danco laboratories identifying the patient by a non-identifiable patient reference and the serial number from each package of mifepristone

RELATED LINKS:

[Mifepristone REMS Summary Document](#)

[Mifepristone REMS full document](#)

[Mifepristone Patient Agreement Form](#)

[Mifeprex\(R\) Prescribing Information \(Danco\)](#)

[Mifepristone 200mg tablet Prescribing Information \(Generic\)](#)

[Mifeprex\(R\) Medication Guide \(Danco\)](#)

[Mifepristone 200mg tablet Medication Guide \(Generic\)](#)

REFERENCES:

- A. <https://www.accessdata.fda.gov/scripts/cder/remis/>

index.cfm?event=RemsDetails.page&REMS=390

B. [Information about Mifepristone for Medical Termination of Pregnancy Through Ten Weeks Gestation | FDA](#)

~~APPROVALS:~~

~~Patient Care Policy and Evaluation Committee: 5/2023~~

~~Medical Executive Committee:~~

~~Joint Conference Committee:~~

Attachments

[!\[\]\(830769b31eeeaca920791081939ff8ba_img.jpg\) Contra Costa Health Services Mifepristone MIFEPREX Provider Agreement](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [SP]	04/2026
	Shideh Ataii: Director Of Pharmacy Svcs	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 09/2007
 Last Approved N/A
 Effective Upon Approval
 Last Revised 03/2026
 Next Review 3 years after approval

Owner Shideh Atai:
 Director Of Pharmacy Svcs
 Area Pharmacy
 Applicability CCRMC, Health Centers & Detention

Policy for Record Retention and Management

POLICY STATEMENT:

To protect and safeguard "inactive" official Pharmacy Department records, and to ensure: (1) that records are retained for as long as necessary for retrieval and official use, (2) that as soon as the retention of particular records is no longer necessary, that such records are destroyed in an appropriate manner, and (3) that this process is carefully documented to account for and keep track of all records. Records (that no longer need to be retained) must be routinely destroyed or discarded in order to avoid the unnecessary cost of storing records longer than necessary. All pharmacy records shall be maintained for no less than the required retention period. Storage may be on-site in Pharmacy or off-site with the County-approved storage company/vendor. A Record Storage Log is maintained, listing the tracking number, box contents, department identification, and date for destruction. No less frequently than every 6 months, boxes beyond their storage date will be ordered to be destroyed. Destruction records will be obtained. The department will ensure that all inactive records are accounted for, that no records are lost or missing, and an investigation will be conducted to locate any temporarily missing records.

GUIDELINES:

A. The Director of Pharmacy or his/her designee:

1. Shall determine and document the length of time that pharmacy records must be retained, pursuant to all applicable Federal, State, governing agency, professional and/or Department requirements or guidelines.
2. Shall set a 'reasonable and practical' destruction date when there is no statutory authority.

3. Shall determine the actual retention period (beginning and ending dates) for each collection of actual records as they are transferred from active status to inactive status and are moved to a storage site.
- B. All storage boxes are to be marked and labeled with:
1. The department name (CCRMC Inpatient Pharmacy)
 2. The automatic retrieval/review/destruction date
 3. A bar-coded strip with box number (provided by storage vendor)
 4. A transmittal form is to be created for each pick-up by the storage company. The form will include:
 - a. Account name: **CCRMC**
 - b. Acct No: **719-6345**
 - c. Date form prepared
 - d. Department Name: **Inpatient Pharmacy**
 - e. Contact person: **Pharmacy Administrative Support (or designee)**
 - f. Phone number: **926-370-5250 x Ext 6**
 - g. Form prepared by preparer's name
 - h. Barcode number of each box
 - i. Description of contents of each box
 - j. Destroy date (MO/YR) for each box
- C. Pharmacy law requires prescriptions to be stored in the pharmacy for one year from dispensing unless a waiver for storage has been obtained. The CCRMC Inpatient Pharmacy has obtained a waiver. The waiver is on file with the self-assessment and inspections documents.
- D. See attached 'Record Retention Schedule' for destruction dates for all pharmacy document types.

RELATED LINKS:

[Access Transmittal Form](#)

REFERENCES:

- A. TJC Standards RC.01.05.01, RC.01.01.01
- B. CMS CoP § 482.11(a), 482.23(c), 482.24(c), 482.25(a)(b)
- C. 21 C.F.R. 291.505(d) (13) (ii), 803.18©, 1304.04(a, h), 1304.22
- D. 22 C.C.R. 70263(f), 71233(f), 66265.16, 70733, 70837, 70839(b), 71531, 71641, 71643(b), 72639(b), 73515, 73637(b), 77127, 79337
- E. 27 C.F.R. 22.164

- F. 29 C.F.R. 516.6
- G. B&PC Article 5. 4081 (a); 4083 (e); 4105 (c), (d), (e), (f); 4169(a)(5); 4333(a), 4427.65(c)(1), 1261.6(b)
- H. CCR Division 17, Title 16. Article 2. 1707(a)-(g); 1715(d); 1715.1(d); 1715.65(e)(2); 1718
- I. CCR Division 17, Title 16. Article 4.5. 1735.3
- J. CCR Division 17, Title 16. Article 7. 1751.1; 1751.4(f); 1751.6(c), 1751.6(e)(2)
- K. H&SC Division 10. Chapter 4. Article 1. Section 11159; 11162.1(c)(4)(A); 11179
- L. H&SC Division 10. Chapter 4. Article 5. 11205; 11209

APPROVALS:

Patient Care Policy and Evaluation Committee: 5/2023

Medical Executive Committee:

Joint Conference Committee:

Record Retention Schedule

Record	Years
Acquisition records of dangerous drugs & devices ¹	3
Alcohol reports	6
Automated Unit Dose System (AUDS) ³	
Transaction information records	3
Cash receipts	6
Compounded Drug Preparations Records ⁷ • Master formula document • Compounding log • Acquisition, storage, and destruction of chemicals, bulk drug substances, drug products, and components used in compounding	3
Correspondence	6
Corrective action plan to Board of Pharmacy ²	3
Continuing Education records	4
Controlled Substances	
• Chart order for patient in County of Licensed Hospital ¹¹	7
• delivery/receipt records and any discrepancy records ¹⁴	3

Record	Years
• dispensed/distribution ¹	3
• invoices ¹	3
• inventory ⁶	3
• inventory reconciliation records ⁵	3
• inventory reconciliation report ⁵	3
• prescription forms issued to prescribers record log ¹²	3
• prescriptions ¹	3
• purchases/sales records ¹³	3
Equipment, maintenance logs	3
operating manuals	life + 6
records	life + 6
Hazardous waste training records	Termination + 6
IRB/IRC records	7
Inspection records, monthly	3
Invoices ¹	3
Licenses, certificates	Exp date + 6
MedWatch reports, drugs or devices	6
Methadone maintenance, dispensing records	3
MSDS, printed copies	5
Order of correction from Board of Pharmacy ²	3
Packing slips	3 mos
Patient medication profiles	1
Personnel records	10
Prescriptions ¹	3
Purchase orders, receipts	3
Quality control reports	6
Recall, drug records	2

Record	Years
Receiving records of dangerous drugs & devices ¹	3
Returned goods credits	2
Self-Assessments for Board of Pharmacy ⁴	3
Shipment records of dangerous drugs & devices ¹	3
Sterility testing records	3
Thermometer charts	3
Timesheet copies	2
Transaction information for Drug Supply Chain Security Act (DSCSA)	6
Sterile Compounding Records ⁸	3
• Training and Competency Evaluations in policies & procedures¹⁰	Termination + 3 years
• Results of employee hand hygiene and garbing assessments¹⁰	Termination + 3 years
• Results of employee assessments of aseptic techniques, including media-fill tests and gloved fingertip testing¹⁰	Termination + 3 years
• Results of viable air and surface sampling	3
• Video smoke studies in all ISO 5 certified species	3
• Documents indicating daily documentation of room, refrigerator, freezer, and incubator temperatures	3
• Certification(s) of the sterile compounding environment(s)⁹	3
• Documents indicating daily documentation of air pressure differentials between all adjoining ISO rooms or areas, including those associated with compounding aseptic (containment) isolators, and air pressure differentials between all rooms or spaces with an immediate entry to ISO rooms or areas	3
• Other facility quality control records specific to pharmacy's policies and procedures (e.g., cleaning logs for facilities and equipment)	3
• Logs or other documentation of inspections for expired or recalled drug products	3

Record	Years
Preparation records, including the master formula document, the preparation compounding log, and records of end-product evaluation testing and results.	3

1. B&PC Article 5. 4081 (a); 4105 (c), (d), (e), (f); 4169(a)(5); 4333(a), CCR 1707(a)-(g), 11179
2. B&PC Article 5. 4083 (e)
3. B&PC 4427.65(c)(1), 1261.6(b)
4. CCR Division 17, Title 16. Article 2. 1715(d), 1715.1(d)
5. CCR Division 17, Title 16. Article 2. 1715.65(e)(2)
6. CCR Division 17, Title 16. Article 2. 1718
7. CCR Division 17, Title 16. Article 4.5. 1735.3
8. CCR Division 17, Title 16. Article 7. 1751.1
9. CCR Division 17, Title 16. Article 7. 1751.4(f)
10. CCR Division 17, Title 16. Article 7. 1751.6(c), 1751.6(e)(2)
11. H&SC Division 10. Chapter 4. Article 1. Section 11159
12. H&SC Division 10. Chapter 4. Article 1. Section 11162.1(c)(4)(A)
13. H&SC Division 10. Chapter 4. Article 5. 11205
14. H&SC Division 10. Chapter 4. Article 5. Article 5. 11209

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [SP]	04/2026
	Shideh Ataii: Director Of Pharmacy Svcs	03/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



Origination 10/1997
 Last Approved N/A
 Effective Upon Approval
 Last Revised 02/2026
 Next Review 3 years after approval

Owner Mariamay Torres:
 Nursing Program Manager
 Area Psychiatry
 Applicability CCRMC, Health Centers & Detention

Policy for Close Observation in Psychiatric Units

POLICY STATEMENT:

This policy covers close observation of patients in the psychiatric units: Psychiatric Emergency Services (PES) and Inpatient Psychiatry (4C and 4D). The psychiatric units are locked ligature resistant units. Close observation is close proximity continuous line of sight observation of patients who require this for safety. Close observation in the psychiatric units is ordered by the attending psychiatrist. The Charge Nurse/Lead is responsible for assigning close observation. Staff assigned to carry out close observation will follow the guidelines in this policy and the attachment. See [Guidelines for Close Observation Assignment in Psychiatric Units](#).

GUIDELINES:

- A. Close observation in psychiatric units can be (#staff: #patients): 1:1 or 2:1 or 1:2 (for two patients in the same room on inpatient psychiatry units only).
- B. Guidelines for ordering close observation in psychiatric units:
 1. Patients with special precautions such as risk for fall, mobility, or inappropriate sexual behavior may be assigned close observation
 2. Patients with Precaution Risk Level 4 (Extremely High Risk) for Suicide, and/or Assault risk require close observation with 1:1 staffing or 2:1 staffing.
 3. Patients with Suicide or Assault Precaution Risk Level 3 (High Risk) may be assigned close observation if indicated based on assessment, but it is not required.
 4. All minors (ages 17 and younger) in the PES are continuously monitored by nursing staff (up to 54 minors in the same room). ~~Minors in different age groups (12 and under, 13-17) are separately monitored in different rooms.~~ This type of close

observation does not require a physician order.

5. Inpatient psychiatry units may implement 1:2 close observation in some situations such as when one patient has an ace bandage, and the other patient has a fall risk and both patients are sleeping in the same room.
- C. Nursing staff who carry out close observation may include RN, LVN, LPT, or C.N.A.
- D. To ensure adequate staffing: The Charge Nurse or Lead will notify the Nurse Program Manager and is advised to notify the Medical Center Supervisor when close observation is ordered or anticipated.
- E. Nursing staff assigned to carry out close observation will report to the Charge Nurse for assignment and carry out break and shift change hand-off reports according to standard nursing practice, with additional guidelines in the attachments to this policy. The staff member will remain with the patient at all times and frequently document the patient's behavior (approximately every 15 minutes).
- F. The need for close observation staffing will be reevaluated daily by members of the treatment team.
- G. Every effort will be made to discontinue the close observation order as soon as it is safely possible. The attending psychiatrist orders close observation and discontinues the order. This does not apply to minor patients in PES, who are always continuously monitored and do not require a physician's order for monitoring.

RELATED LINKS:

Related Policies (Search):

[Suicide Risk Screening, Evaluation, & Precautions in Psychiatric Units](#)

CCRMC Psychiatric Nursing Policy 600, 603 and 615 Attachment: Guidelines for Suicide, Elopement, and Assault Precautions

REFERENCES:

- A. California Code of Regulations, Title 22: Sections 70707, 70577, 71213, 71507.
- B. The Joint Commission ~~2023~~2026 Standards: EC 02.06.01, LD 04.03.01, PC 02.01.01, PC 02.01.19, PC 02.02.01.
- C. ~~The Joint Commission NPSG 2023: 15.01.01: Identify patient safety risks: Reduce the risk for suicide.~~[The Joint Commission \(TJC\) 2026 National Performance Goal \(NPG\) #8: The hospital reduces the risk for suicide](#)

APPROVALS:

Psychiatry Department: 10/2023

[, 02/2026](#)

Clinical Practice Committee: ~~7/2019, 10/2023~~

Patient Care Policy and Evaluation Committee: ~~8/2019, 11/2023~~

Medical Executive Committee: ~~11/2023~~

Joint Conference Committee: ~~11/2023~~

Attachments

[!\[\]\(feabb98897b440bc8695a03336a6e2df_img.jpg\) Guidelines for Close Observation Assignment in Psychiatric Units rev 02.26.26.docx](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive Committee	Sarah E. Mcneil	Pending
Patient Care Policy and Evaluation Committee	Vijay K. Bhandari [SP]	04/2026
Clinical Practice Committee	Ira-Beda Sabio: Director, Inpatient Nursing OP [LS]	03/2026
	Mariamay Torres: Nursing Program Manager	02/2026

Applicability

CCRMC, Health Centers & Detention

Standards

No standards are associated with this document



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 26-2259

Agenda Date: 5/26/2026

Agenda #:



cchealth.org

Administrative Update

**David Culberson, CEO
Contra Costa Regional Medical
Center and Clinics**

May 26, 2026

CCRMC Update March 2026

- Leadership Update
- Significant Capital Projects
- House Resolution 1 (HR 1) Planning
- Business Plan Development
- Seismic Project Update
- Additional Operations Updates

Contra Costa Regional Medical Center Leadership Update

- Congratulations to Shannon Abella for Appointment as Contra Costa Regional Medical Center Chief Quality Officer
- Current Recruitment for Chief Operating Officer in Process with Assistance from The Rokos Group

Significant Capital Projects

- Anesthesia Machines: Delivered in March 2026, Integration with EPIC Clinical System Complete
- Seismic Project: CCRMC Hospital and Food Service Building
- Nurse Call System: CCRMC Hospital: Currently Being Designed with Assistance from Public Works Capital Projects Department
- Parking Structure: CCRMC Martinez Campus: Parking Study Completed, Project on Hold Until Completion of Wastewater Storage Work and Identification of Source of Capital Funding
- Psychiatric Emergency Services (PES) Expansion Construction Drawings Complete, Project on Hold Until Funding Source Identified and to Assess Need for Additional Clinical Space Once BCHP Projects Are Completed

HR 1 Strategic Planning

- Evaluation of Current Inpatient and Ambulatory Care Volumes and Capacity
- Projection of Anticipated Changes to Volume and Revenue
- Estimation of Continued Medi-Cal Enrollment in CCHP
- Increased Linkage With CCHP For Inpatient and Ambulatory Services
- Development of Basic Health Care for Newly Uninsured

HR 1 Operations Planning

- The Coker Group Will Complete CCRMC Assessment by July 2026 of:
 - Ambulatory Services & Physician Enterprise
 - Pharmacy Services
 - Clinical Operations
 - Service Line Strategy
 - Labor & Workforce
 - IT
 - Supply Chain & Purchased Services
 - Revenue Cycle

CCRMC Business Plan Development

- Business Plan Product Plan Assessments In Process
- Assistance Provided by Tosan Boyo, Principal, Olusan
- Significant Focus Includes:
 - CCRMC-Based Referral Center
 - CCRMC-Based Transfer Center
 - Ambulatory Clinic Volumes
 - Clinical Service Line Gaps
 - Additional Capital Requirements
 - Throughput and Communication Improvement

CCRMC Business Plan Development

- Evaluation Includes
 - Service Line Scope
 - Current Workforce and Operating Model
 - Current Access and Capacity
 - Patient Retention
 - Quality and Reliability
 - Technology and Infrastructure
 - Short and Medium-Term Recommendations

Seismic Project Update

- Seismic Compliance is Three Projects:
 - Replacement of Food Services Building
 - Bracing of Sprinkler Lines in Hospital and Lab Buildings
 - Creation of 72-Hour Storage for Potable Water and Wastewater
- Ward E Will Be Demolished, Work Projected to Begin in Fall 2026
- Relocation of Staff From Ward E and Other Martinez Campus Departments to Begin July 2026
- Re-routing of Electrical and Other Infrastructure to Begin Immediately After Relocation of Employees

Additional Operations Update

- Physicians and Dentists of Contra Costa County (PDOCC) Agreement Completed
- California Nurses Association (CNA) Labor Agreement Negotiations Continue
- Additional Parking in Martinez Marina Has Been Completed with Shuttle Bus and Security Servicing New Lot



cchealth.org

Thank You



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2260

Agenda Date: 5/26/2026

Agenda #:



cchealth.org

Finance Report

David Lee, Deputy CFO
Contra Costa Health

May 26, 2026

Consolidated CCRMC FY25/26 Forecast (\$ in '000s)



Based on Year to Date: March 2026



CC - Hospital	FY 2025	FY 2026	FY 2026	VARIANCE (FORECAST vs PY ACTUAL)		VARIANCE (FORECAST vs BUDGET)	
	ACTUAL	FORECAST	BUDGET	(\$)	(%)	(\$)	(%)
Revenue							
Gross Revenue	\$ 863,007	\$ 876,777	\$ 777,004	\$ 13,770	2%	99,774	13%
Contractuals & Bad Debt	(469,079)	(477,407)	(368,148)	(8,328)	(2%)	(109,259)	30%
Net Revenue	393,928	399,370	408,855	5,441	1%	(9,486)	(2%)
Contractual & Bad Debt %	(54%)	(54%)	(47%)				
Net Patient Revenue %	46%	46%	53%				
Supplemental Revenue	340,014	297,822	299,951	(42,192)	(12%)	(2,130)	(1%)
Total Net Patient Revenue	733,942	697,191	708,807	(36,751)	(5%)	(11,615)	(2%)
Governmental Support & Realignment Revenue	34,700	33,525	33,009	(1,175)	(3%)	516	2%
Grants & Donations	7,050	4,819	4,860	(2,231)	(32%)	(41)	(1%)
Charges to Gen Fund Units	59,669	60,173	59,775	505	1%	398	1%
Other Revenue	4,807	1,933	3,509	(2,875)	(60%)	(1,577)	(45%)
Total Other Revenue	106,226	100,451	101,154	(5,775)	(5%)	(703)	(1%)
Total Operating Revenue (ex Subsidies)	840,168	797,642	809,961	(42,526)	(5%)	(12,319)	(2%)
Expenses							
Salaries, Wages, & Benefits	577,213	602,140	630,120	(24,927)	(4%)	27,980	4%
Professional Fees & Purchased Services	129,101	132,609	112,266	(3,508)	(3%)	(20,343)	(18%)
Supplies & Drugs	63,415	64,780	60,316	(1,365)	(2%)	(4,464)	(7%)
Other Expenses	98,276	105,293	93,487	(7,017)	(7%)	(11,806)	(13%)
Total Operating Expenses	868,005	904,823	896,189	(36,818)	(4%)	(8,634)	(1%)
Expenses as a % of Operating Revenue	102%	113%	111%				
EBIDA	(27,837)	(107,181)	(86,229)	(79,344)	(285%)	(20,952)	(24%)
EBIDA (%)	(2%)	(13%)	(11%)				
Subsidy (+)	124,461	119,000	119,000	(5,460)	(4%)	-	-
Net Income (incl. Subsidy)	96,624	11,820	32,772	(84,804)	(88%)	(20,952)	(64%)
Other (Income) / Expense Items							
Interest Expense	305	1,148	1,257	(843)	(277%)	109	9%
Interest Income	(10,561)	(10,100)	(7,900)	(461)	(4%)	2,200	28%
Depreciation Expense	3,698	3,865	167	(167)	(5%)	(3,698)	(2,218%)
Adjusted Net Income	103,182	16,907	39,248	(86,275)	(84%)	(22,341)	(57%)
Expenditure Transfers (-)	-	-	-	-	-	-	-
Capital Expenditures (-)	363	32,248	39,248	(31,885)	(8,781%)	-	-
Total Net Expenditures	\$ 102,819	\$ (15,341)	\$ (0)	\$ (118,160)	(115%)	\$ (15,341)	(100%)

Key Variance Drivers

- 1 Increase in net patient revenue driven by higher psych and outpatient volumes and favorable rate increases
- 2 Decreased in Non-recurring supplemental revenue (\$60M) from 2025 offset by final settlements (\$8M) and increases in Rate Range (\$8M) and GME (\$2M)
- 3 Unfavorable salaries & benefits driven by market and merit adjustments
- 4 Increase in software and occupancy costs
- 5 Reduced Subsidy driven by an early payment of debt in 2025 (2015 A/B Bonds)

Removal of Capital Assets from County Inventory

Purpose

- To clean-up capital equipment asset records
- Retire 333 capital equipment asset records (out of 2,833) from the county's inventory system
- 53 out of 280 of these items have a net book value (as of 5/26/26)
- Retire items with original total cost of \$6.8M (with \$6.6M accumulated depreciation) compared to total capital equipment original cost of \$81.8M
- Estimated net book value for record clean-up total \$0.2M compared to total capital equipment net book value of \$15.1M (as of 5/26/26)

Removal of Capital Assets from County Inventory

Background

- Assets are obsolete, fully depreciated, or no longer in service, but remain in inventory
- Majority of these assets are fully or nearly fully depreciated
- Missing or incomplete disposal documentation causes assets to remain in inventory

Removal of Capital Assets from County Inventory



Impact

- No cash impact
- Capital assets are overstated by net book value
- Increased audit risk due to misalignment between inventory and accounting records

Removal of Capital Assets from County Inventory

Action Plan

- Update and streamline procedures for custodians
- Implement annual training to re-enforce policies and procedures (PolicyStat ID 16733565 – Policy for Purchasing, Transfer, Salvage, and Annual Inventory of Capital Equipment – approved by JCC 11/14/24)
- Collaborate between finance, management, and Public Works to ensure procedures are followed



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 26-2261

Agenda Date: 5/26/2026

Agenda #:

Relief of Custody for Capital Assets Equipment Report by Dept/Org Estimated through May 26, 2026												
Dept	Cost Center	Asset #	Description	Useful Life	Date Acquired	Original Cost	PO #	Forms Status	Equipment Status	Cost Center Contact Person	Accumulated Depreciation to 05/26/26	Est. NBV as of 05/26/26
1450	6977	137828	GS TI Spectrum Prem Cart	3	07/14/17	\$ 14,243	08005	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	14242.53	\$ -
1450	6365	136728	URINALYSIS MACHINE-IRICELL 2000 PRO	10	07/24/15	\$ 97,650	56332	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 97,650.00	\$ -
1450	6383	136751	GYNNIE STRETCHER	10	04/11/16	\$ 6,450	2465	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,449.80	\$ -
1450	6410	136942	SONOSITE EDGE ULTRASOUND SYSTEM	10	12/29/15	\$ 62,590	01501	M-384 WITH TI INFORMATION	TRADED IN	Yolanda Larios	\$ 62,589.54	\$ -
1450	6307	136819	BLADDERSCAN BVI 9400	10	12/31/15	\$ 13,663	891	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Melinda Elliott	\$ 13,662.50	\$ -
1450	6308	136820	BLADDERSCAN BVI 9400	10	12/31/15	\$ 13,663	788	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 13,662.50	\$ -
0301	5702	116663	PHARMACY NIGHT CABINET	10	02/18/86	\$ 8,669	8907	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Jacqueline Kidd	\$ 8,669.46	\$ -
0450	5775	128856	MAGNA PURE LC INSTRUMENT VIROLOGY	10	12/31/02	\$ 76,534	41264	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 76,533.75	\$ -
0450	5775	130108	MOLECULAR LIGHT CYCLER	10	05/06/02	\$ 62,381	39575	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 62,381.25	\$ -
0450	5775	131403	STERILIZER-AUTOCLAVE#3870EP	10	01/19/05	\$ 13,067	7973	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 13,066.73	\$ -
0450	5775	134736	FREEZER CHEST REVCO ELITE	15	10/23/96	\$ 8,420	12563	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 8,419.61	\$ -
0450	5775	134737	BLOOD CULTURING INSTRUMENT	10	03/01/05	\$ 11,366	7974	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 11,366.25	\$ -
0450	5775	135861	GENETIC ANALYZER - AVANT 3130XL	10	09/07/11	\$ 151,782	37292	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 151,782.00	\$ -
0450	5775	138230	BIO THREAT FILMARRAY US CONFIGURATIO	10	09/11/13	\$ 40,715	47654	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 40,714.63	\$ -
0450	5869	135498	SCANNER - OPSCAN INSIGHT 4ES	10	06/15/12	\$ 10,739	42076	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Rachael Birch	\$ 10,739.20	\$ -
0451	0451	129398	BED-ELECTRIC	15	07/12/02	\$ 6,964	40523	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Jennifer Petruzzi	\$ 6,964.08	\$ -
0452	5879	136237	SERVER - IBM X3650 M4 RACK MOUNT	3	08/21/14	\$ 23,563	52197	NO FORM	NOT FOUND/DISPOSED	Travis Quesenberry	\$ 23,563.35	\$ -
0452	5887	131141	PLOTTER-HP DESIGN JET 800/820	10	06/27/06	\$ 19,295	13002	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Sandra Sosa-Morales	\$ 19,294.73	\$ -
0452	5887	134488	SCANNER-CS5510 GRAPHTECH FUL COLOR PR	3	11/08/11	\$ 12,084	38808	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Sandra Sosa-Morales	\$ 12,084.45	\$ -
0467	5954	130663	EMBOSSE - 275	10	11/05/01	\$ 7,066	37566	M-349 WITHOUT PW SIGNATURE	SURPLUSED	David Chong	\$ 7,066.03	\$ -
1450	6303	131254	DEFIBRILLATOR-HEARTSTART MRX MON	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Judy Rivera	\$ 8,787.36	\$ -
1450	6304	131632	DEFIBRILLATOR-HEARTSTART MRX MON	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Judy Rivera	\$ 8,787.36	\$ -
1450	6307	131630	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Melinda Elliott	\$ 8,787.36	\$ -
1450	6308	125830	BED-HILL ROM TOTAL CARE SYS Sp02RT	15	10/08/02	\$ 35,081	40246	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 35,081.47	\$ -
1450	6308	125831	BED-HILL ROM TOTAL CARE SYS Sp02RT	15	10/08/02	\$ 35,081	40246	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 35,081.46	\$ -
1450	6308	128607	BEDS/MANUAL	10	10/22/97	\$ 13,254	92704	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 13,254.14	\$ -
1450	6308	128609	BEDS/MANUAL	10	10/22/97	\$ 13,254	92704	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 13,254.14	\$ -
1450	6308	128610	BEDS/MANUAL	10	10/22/97	\$ 13,254	92704	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 13,254.14	\$ -
1450	6308	128762	VIRIDIA INFOCENTER 8 PATIENT CAP-MONITO	10	02/19/98	\$ 13,650	92701	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 13,650.42	\$ -
1450	6308	128827	MP5 TRANSPORT MONITORS-INTELLIVUE	10	09/11/96	\$ 8,430	12133	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 8,430.24	\$ -
1450	6308	131179	SPORT BED ROTATIONAL MODULE	15	06/03/04	\$ 11,285	5981	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 11,285.02	\$ -
1450	6308	131256	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 8,787.36	\$ -
1450	6308	133284	MONITOR-VIGILANCE II #VIG2	10	04/11/07	\$ 7,578	17896	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 7,577.50	\$ -
1450	6315	134739	NEWBORN HEARING SCREENER	10	02/01/08	\$ 17,941	20906	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 17,940.72	\$ -
1450	6325	131255	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	M-384 WITHOUT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 8,787.36	\$ -
1450	6329	131175	MONITOR -FETAL/MATERNAL	10	03/31/04	\$ 12,598	04794	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 12,597.97	\$ -
1450	6329	134146	MONITOR-GAS ID	10	02/19/09	\$ 9,135	26517	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 9,134.73	\$ -
1450	6329	134741	FETAL MONITORING SYSTEM	10	01/21/98	\$ 21,543	92701	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 21,542.59	\$ -
1450	6329	134939	MONITOR-GAS ID	10	02/19/09	\$ 9,135	26517	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 9,134.74	\$ -
1450	6329	000009-	LIGHTS HANAULEX #2004 DUO CORE	10	11/19/93	\$ 10,405	63339	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 10,404.67	\$ -
1450	6330	100082	LIGHT SOURCE CLK-3 #32610	10	06/30/80	\$ 8,161	0	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,160.96	\$ -
1450	6330	116871	LIGHT SOURCE ENDOSCOPY CLVU 20	10	05/13/91	\$ 8,025	28111	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,025.00	\$ -
1450	6330	118286	ELECTROSURGICAL UNIT	10	07/16/91	\$ 5,706	32395	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 5,705.61	\$ -
1450	6330	118289	ELECTROSURGICAL UNIT	10	07/16/91	\$ 5,706	32395	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 5,705.62	\$ -
1450	6330	118531	LAPAROFLATOR HIFLOW INSUFFLATO	10	02/19/92	\$ 5,164	40826	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 5,163.52	\$ -
1450	6330	118679	ELECTROHYDRAULIC LITHOTRIPTOR	10	08/03/92	\$ 9,038	46336	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,037.99	\$ -
1450	6330	119038	EXCALIBUR CAUTERY ESU 120V	10	12/30/93	\$ 6,059	64618	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 6,059.35	\$ -
1450	6330	119046	INSUFFLATOR DYO PNEUMATIC 15	10	02/03/94	\$ 7,019	64753	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 7,018.59	\$ -
1450	6330	121933	BRONCHOFIBERSCOPE	10	04/05/95	\$ 15,372	72941	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 15,371.50	\$ -
1450	6330	123397	ANESTHESIA ANALYZER UPGR MLTNX	10	08/05/94	\$ 11,381	68421	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,381.41	\$ -
1450	6330	123398	ANESTHESIA ANALYZER UPGR MLTNX	10	08/05/94	\$ 11,381	68421	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,381.41	\$ -
1450	6330	123400	ANESTHESIA ANALYZER UPGR MLTNX	10	08/05/94	\$ 11,381	68421	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,381.39	\$ -
1450	6330	123401	ANESTHESIA ANALYZER UPGR MLTNX	10	08/05/94	\$ 11,381	68421	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,381.40	\$ -
1450	6330	125744	TOURNIQUET SYSTEM-ZIMMER ATS 2000	10	10/14/97	\$ 11,840	92703	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,840.11	\$ -
1450	6330	125745	TOURNIQUET SYS ZIMMER ATS 2000	10	10/14/97	\$ 11,840	92703	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,840.11	\$ -
1450	6330	125772	STERIS SYSTEM 1	10	02/28/97	\$ 93,854	14195	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 93,854.06	\$ -
1450	6330	125823	TABLE SURGICAL SKYTRON	10	07/16/97	\$ 40,511	92702	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 40,510.63	\$ -
1450	6330	125824	TABLE SURGICAL SKYTRON	10	07/16/97	\$ 40,511	92702	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 40,510.63	\$ -
1450	6330	127229	ELECTROSURGICAL UNIT CON MED	10	10/16/97	\$ 7,946	92721	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 7,945.55	\$ -
1450	6330	127235	3-CHIP CAMERA SYSTEM W/STANDARD COU	10	12/29/97	\$ 15,740	18990	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 15,739.71	\$ -

Relief of Custody for Capital Assets Equipment Report by Dept/Org Estimated through May 26, 2026												
Dept	Cost Center	Asset #	Description	Useful Life	Date Acquired	Original Cost	PO #	Forms Status	Equipment Status	Cost Center Contact Person	Accumulated Depreciation to 05/26/26	Est. NBV as of 05/26/26
1450	6330	127236	3-CHIP CAMERA SYSTEMW/STANDARD COU	10	12/29/97	\$ 15,740	18990	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 15,739.71	\$ -
1450	6330	127246	TABLE ORTHOPEDIC/CHICK LONGREN	15	12/10/97	\$ 50,102	92786	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 50,101.51	\$ -
1450	6330	127247	TABLE SURGICAL/SKYTRON	15	11/26/97	\$ 40,511	92702	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 40,510.63	\$ -
1450	6330	127248	TABLE SURGICAL/SKYTRON	15	11/26/97	\$ 40,511	92702	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 40,510.63	\$ -
1450	6330	127249	TABLE SURGICAL/SKYTRON	15	11/26/97	\$ 40,511	92702	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 40,510.65	\$ -
1450	6330	127265	TOURNIQUET ATS 2000	10	01/01/90	\$ 26,989	92795	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 26,989.36	\$ -
1450	6330	127400	COLONOVideoscope	10	07/21/98	\$ 22,300	21210	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 22,299.50	\$ -
1450	6330	128612	LIGHTSOURCE/XENON 175WATTS	10	02/11/98	\$ 7,644	92796	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 7,643.92	\$ -
1450	6330	128756	COAGULATOR FOR ENDOSCOPY	10	01/23/01	\$ 21,321	35036	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 21,321.29	\$ -
1450	6330	129419	LIGHT SOURCE X6000 - XENON	10	07/25/03	\$ 5,854	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 5,853.94	\$ -
1450	6330	129420	CAMERA CONTROL UNIT -CCU	10	07/25/03	\$ 8,330	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,329.84	\$ -
1450	6330	129440	C-MOUNT HEAD COUPLER	10	07/25/03	\$ 9,168	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,168.23	\$ -
1450	6330	129441	C-MOUNT HEAD COUPLER	10	07/25/03	\$ 9,168	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,168.23	\$ -
1450	6330	129443	CAMERA C-MOUNT HEAD COUPLER	10	07/25/03	\$ 9,168	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,168.23	\$ -
1450	6330	129447	SCAPEL-HARMONIC-BUYOUT	15	01/01/90	\$ 16,613	13157	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 16,613.13	\$ -
1450	6330	130618	CAMERA-C-MOUNT HEAD COUPLER	10	07/25/03	\$ 9,168	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,168.23	\$ -
1450	6330	130619	CAMERA-C-MOUNT HEAD COUPLER	10	07/25/03	\$ 9,168	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,168.23	\$ -
1450	6330	130620	CAMERA-C-MOUNT HEAD COUPLER	10	07/25/03	\$ 9,168	2270	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,168.23	\$ -
1450	6330	130621	GASTROVIDEOSCOPE-GIF 160 VIDEO FLEX	15	05/05/03	\$ 22,733	1819	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 22,732.50	\$ -
1450	6330	130622	BRONCHOSCOPE-LIGHT SOURC CLV160	15	05/05/03	\$ 9,903	1819	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 9,903.25	\$ -
1450	6330	130623	BRONCHOSCOPE-VIDEO/PROCESSOR CV160	15	05/05/03	\$ 22,581	1819	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 22,580.95	\$ -
1450	6330	130624	BRONCHOSCOPE-PRINTER COLOR OEP3	15	05/05/03	\$ 6,464	1819	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 6,464.15	\$ -
1450	6330	130633	TOURNIQUET SYS ZIMMER ATS 2000	10	10/14/97	\$ 11,840	97203	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,840.12	\$ -
1450	6330	130664	SYS-SAFE TRANSPASOL FLUID WASTE	10	09/22/03	\$ 24,683	2822	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 24,682.95	\$ -
1450	6330	130665	GAMMA FINDER MODEL#G100	10	08/13/03	\$ 22,462	2879	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 22,461.88	\$ -
1450	6330	130715	PRINTER-SONY VIDEO UP-5600 MDU	10	02/12/98	\$ 6,500	92710	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 6,500.41	\$ -
1450	6330	130716	PRINTER-SONY VIDEO UP-5600 MDU	10	02/12/98	\$ 6,500	92710	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 6,500.41	\$ -
1450	6330	131177	PRINTER-SONY VIDEO UP-5600 MDU	10	02/12/98	\$ 6,500	92710	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 6,500.41	\$ -
1450	6330	131235	VIDEO COLONOSCOPE PCF160AL	10	09/08/05	\$ 20,453	11098	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 20,452.76	\$ -
1450	6330	131251	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,787.36	\$ -
1450	6330	135582	ENDOSCOPE-ULTRA-PRINTER	10	06/16/09	\$ 18,110	28635	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 18,110.44	\$ -
1450	6330	135584	ENDOSCOPE-ULTRA-PRINTER	10	06/16/09	\$ 18,110	28635	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 18,110.44	\$ -
1450	6330	135594	FORECETRAID ENERGY PLATFORM	10	09/08/09	\$ 30,238	29088	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 30,237.61	\$ -
1450	6330	135595	FORECETRIAD ENERGY PLATFORM	10	09/08/09	\$ 30,238	29088	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 30,237.62	\$ -
1450	6330	135602	ARTHROSCOPE SYSTEM	10	05/18/11	\$ 34,399	36403	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 34,398.97	\$ -
1450	6330	135603	ARTHROSCOPE SYSTEM	10	05/18/11	\$ 34,399	36403	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 34,398.97	\$ -
1450	6330	135612	LARYNGOSCOPE - COBALT SYSTEM	10	09/14/11	\$ 18,786	37782	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 18,786.43	\$ -
1450	6330	135873	VIDEO COLONOSCOPE EVIS EXERA II	10	03/25/11	\$ 41,853	35574	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 41,853.32	\$ -
1450	6330	135874	VIDEO COLONOSCOPE EVIS EXERA II	10	03/25/11	\$ 29,464	35574	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 29,463.81	\$ -
1450	6330	000009-Q	COLONOFIBERSCOPE	10	09/27/89	\$ 12,353	66854	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 12,352.50	\$ -
1450	6330	000009-Q	GASTRO FIBERSCOPE(MOD-GIFXQ20)	10	01/12/89	\$ 12,102	61062	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 12,101.60	\$ -
1450	6330	000009-Q	DRILL SYSTEM OSTEON	10	08/21/90	\$ 6,675	13063	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 6,674.79	\$ -
1450	6330	000009-Q	FIBERSCOPE INTUB. LF-1 W/ACCES	10	12/14/90	\$ 5,577	17379	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 5,577.00	\$ -
1450	6330	000009-Q	NEPHROSCOPE FLEX PERCUTANEOUS	10	06/04/91	\$ 8,357	29147	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,356.60	\$ -
1450	6330	000009-Q	SHAVAR ARTHROSCOPIC SURG SYSTM	10	07/08/92	\$ 8,428	47062	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,428.00	\$ -
1450	6330	000009-Q	FIBERSCOPE GASTROINTESTINAL	10	07/29/92	\$ 13,531	47965	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 13,531.25	\$ -
1450	6330	000009-Q	TEACHING ATTACHMENT KIT	5	07/01/92	\$ 5,207	47176	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 5,206.72	\$ -
1450	6330	000009-Q	TRANSPORT MON UTIL MODVIES	10	06/16/94	\$ 8,164	64266	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,164.23	\$ -
1450	6330	000009-Q	BRONCHOFIBERSCOPE	10	04/05/95	\$ 13,640	73527	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 13,639.50	\$ -
1450	6330	000009-Q	GASTROINTESTINAL FIBERSCOPE	10	05/31/95	\$ 11,908	74542	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,907.50	\$ -
1450	6330	000009-Q	COLONFIBERSCOPE CF IT20L	10	05/31/95	\$ 11,908	74542	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,907.50	\$ -
1450	6330	000009-Q	MONITOR - NEUROSIGN 100 NERVE MONIT	10	05/19/99	\$ 11,338	26778	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 11,338.42	\$ -
1450	6330	000009-Q	SIGMOIDOSCOPE/EVIS VIDEO	10	09/30/98	\$ 14,073	22211	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 14,072.50	\$ -
1450	6330	000009-Q	SIGMOIDOSCOPE/EVIS VIDEO	10	09/30/98	\$ 14,073	22211	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 14,072.50	\$ -
1450	6330	000009-Q	URETHEROPYELOSCOPE - FLEXIBLE	10	06/21/99	\$ 10,862	25780	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 10,861.59	\$ -
1450	6330	000009-Q	INTUBATION FIBERSCOPE	10	12/24/98	\$ 7,480	25175	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 7,479.81	\$ -
1450	6330	000009-Q	SIGMOIDOSCOPE/EVIS VIDEO	10	09/30/98	\$ 14,073	22211	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 14,072.50	\$ -
1450	6330	000009-Q	HAND PIECE-NEUROSURGRY FINE TIP	10	10/10/97	\$ 10,836	17529	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 10,836.00	\$ -
1450	6330	000009-Q	COLONOVideoscope WIDE IMAGE	15	01/01/90	\$ 22,300	27681	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 22,299.50	\$ -
1450	6330	000009-Q	HAND PIECE-NEUROSURGRY FINE TIP	10	10/10/97	\$ 10,836	17529	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 10,836.00	\$ -

Relief of Custody for Capital Assets Equipment Report by Dept/Org Estimated through May 26, 2026												
Dept	Cost Center	Asset #	Description	Useful Life	Date Acquired	Original Cost	PO #	Forms Status	Equipment Status	Cost Center Contact Person	Accumulated Depreciation to 05/26/26	Est. NBV as of 05/26/26
1450	6330	000009-0	SYSTEM - SINUS SHAVER SYSTEM	10	01/30/98	\$ 5,512	92787	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 5,512.09	\$ -
1450	6330	000009-0	CYSTOSCOPE - FLEXIBLE	10	02/11/98	\$ 6,604	92797	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 6,604.16	\$ -
1450	6330	000009-0	BONE CURETTE/WIREDRIVER	10	01/01/90	\$ 17,693	92795	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 17,692.84	\$ -
1450	6330	000009-0	ACTIVA STARTER PACKAGE/SURGICAL EQUI	10	08/18/99	\$ 20,042	28862	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 20,041.56	\$ -
1450	6330	000009-0	DUDDENSCOPE JF-104F	10	01/12/00	\$ 21,975	30464	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 21,974.75	\$ -
1450	6330	000009-0	SCAPEL GENERATOR	20	05/16/01	\$ 16,686	36114	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 16,686.06	\$ -
1450	6330	000009-0	VIDEO COLONOSCOPE	10	09/13/01	\$ 23,506	37578	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 23,506.21	\$ -
1450	6334	131252	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	NO FORM	RETIRED/DISPOSED	Gino Rogers	\$ 8,787.36	\$ -
1450	6340	124032	CURVED ARRAY	10	06/03/96	\$ 12,990	77121	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 12,990.00	\$ -
1450	6340	124044	SYSTEM-ULTRASOUND IMAGING MED	10	10/16/96	\$ 11,640	12937	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 11,640.08	\$ -
1450	6340	127022	MONITOR FETAL/BEDSIDE/NEONATLE	10	10/20/97	\$ 104,340	92701	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 104,340.22	\$ -
1450	6340	127023	MONITOR FETAL/BEDSIDE/NEONATAL	10	02/19/98	\$ 104,340	92701	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 104,340.22	\$ -
1450	6340	127024	MONITOR FETAL/BEDSIDE/NEONATAL	10	02/19/98	\$ 104,340	92701	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 104,340.22	\$ -
1450	6340	127025	MONITOR FETAL/BEDSIDE/NEONATAL	10	10/20/97	\$ 104,340	92701	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 104,340.22	\$ -
1450	6340	127026	MONITOR FETAL/BEDSIDE/NEONATAL	10	10/20/97	\$ 104,340	92701	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 104,340.23	\$ -
1450	6340	127027	MONITOR FETAL/BEDSIDE/NEONATAL	10	10/20/97	\$ 104,340	92701	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 104,340.23	\$ -
1450	6340	127055	BEDS/BIRTHING	10	10/22/97	\$ 16,004	92704	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 16,003.69	\$ -
1450	6340	127061	BEDS/BIRTHING	10	10/22/97	\$ 16,004	92704	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 16,003.69	\$ -
1450	6340	128224	SYSTEM - ULTRASOUND TRANSDUCER	10	06/04/99	\$ 11,726	27412	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 11,726.00	\$ -
1450	6340	128801	FETAL MONITORING SYSTEM	10	03/28/00	\$ 10,223	30470	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 10,222.63	\$ -
1450	6340	128817	SYSTEM - ULTRA SOUND	10	08/01/01	\$ 17,820	37185	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 17,820.00	\$ -
1450	6340	131248	DEFIBRILLATOR-HEARTSTART MRX MON	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 8,787.36	\$ -
1450	6340	134730	FETAL MONITOR HP 50XM	10	09/23/98	\$ 16,618	23235	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 16,618.43	\$ -
1450	6340	135510	HEARTSTART MRX MONITOR/DEFIB	10	09/30/10	\$ 12,253	33767	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 12,253.26	\$ -
1450	6340	135511	HEARTSTART MRX MONITOR/DEFIB	10	09/30/10	\$ 12,253	33767	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 12,253.26	\$ -
1450	6351	123389	STERILIZER STERRAD	10	01/16/97	\$ 93,831	79689	M-384 WITHOUT SIGNATURE	TRADED IN	Gino Rogers	\$ 93,831.30	\$ -
1450	6351	127255	STERILIZATION SYSTEM/STERRAD	10	12/16/97	\$ 104,283	79689	M-384 WITHOUT SIGNATURE	TRADED IN	Gino Rogers	\$ 104,283.00	\$ -
1450	6351	128619	DRYER/STERILE MOD #43	15	12/08/98	\$ 5,782	24955	M-384 WITHOUT SIGNATURE	TRADED IN	Gino Rogers	\$ 5,782.32	\$ -
1450	6351	130640	SYSTEM - STERILE PROCESSING STERIS	10	11/07/02	\$ 23,221	40650	M-384 WITHOUT SIGNATURE	TRADED IN	Gino Rogers	\$ 23,220.93	\$ -
1450	6351	134946	STERILIZER - STERIS P6500 SYSTEM 1E	10	03/15/12	\$ 24,046	35977	M-384 WITHOUT SIGNATURE	TRADED IN	Gino Rogers	\$ 24,046.38	\$ -
1450	6351	134947	STERILIZER - STERRAD NX	10	02/16/12	\$ 45,768	36290	M-384 WITHOUT SIGNATURE	TRADED IN	Gino Rogers	\$ 45,768.41	\$ -
1450	6351	135639	STERILIZER - STERIS P6500 SYSTEM 1E	10	03/21/12	\$ 12,534	36142	M-384 WITHOUT SIGNATURE	TRADED IN	Gino Rogers	\$ 12,534.24	\$ -
1450	6355	131219	RADIOLOGY EQUIP-AGFA SOLO CR 25.0	10	02/25/05	\$ 40,976	7602	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Angela Womble	\$ 40,975.91	\$ -
1450	6357	130686	SYSTEM-GE PROTEUX XR-4	10	05/08/01	\$ 96,849	31042	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Lea Mostella	\$ 96,849.00	\$ -
1450	6357	134117	ULTRASOUND LOGIQ 9	10	05/25/10	\$ 108,158	32258	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Lea Mostella	\$ 108,157.50	\$ -
1450	6357	134731	ICAD DIGITIZER - TOTAL LOOK MAMM	10	12/23/11	\$ 33,558	37725	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Lea Mostella	\$ 33,557.50	\$ -
1450	6364	133311	SYSTEM-TISSUE LABEL CASSETTE	10	07/23/07	\$ 17,114	18747	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Sam Farrell	\$ 17,113.90	\$ -
1450	6365	118595	CABINET PURIFIER	15	06/11/92	\$ 5,172	44306	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 5,172.04	\$ -
1450	6365	118683	CYTOCENTRIFUGE CYTOSPIN 3	10	07/01/92	\$ 5,507	46919	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 5,506.57	\$ -
1450	6365	128217	CELL WASHER/SORVALL	10	12/24/98	\$ 7,016	24614	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 7,016.14	\$ -
1450	6365	130679	MINI VIDAS - CULTURE TEST SWAB DIMER	10	08/12/03	\$ 16,400	2165	NO FORM	SURPLUSED	Sam Farrell	\$ 16,399.87	\$ -
1450	6365	131217	ANALYZER-BECKMAN W/PRINTER	10	07/12/05	\$ 33,573	9320	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 33,572.58	\$ -
1450	6365	131234	FREEZER-HORIZON SERIES	10	02/01/06	\$ 8,481	11673	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 8,480.52	\$ -
1450	6365	133941	CENTRIFUGE SYSTEM-ALLEGRA X-22	10	07/11/07	\$ 6,642	16371	NO FORM	SURPLUSED	Sam Farrell	\$ 6,642.20	\$ -
1450	6365	135542	SPERM ANALYZER SQA VSI GOLD SYS	10	02/10/11	\$ 21,404	35156	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 21,403.75	\$ -
1450	6365	135547	SLIDE MAKER - UNICEL DXH SMS	10	08/10/12	\$ 59,644	40784	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 59,644.32	\$ -
1450	6365	135548	HEMATOLOGY SYS - UNICEL DXH800	10	08/10/12	\$ 60,837	40784	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farrell	\$ 60,837.21	\$ -
1450	6373	130660	AIRTEC AUTO PROC-DENTAL EQ	10	12/18/02	\$ 5,007	40672	NO FORM	RETIRED/DISPOSED	Laura Cruz	\$ 5,006.56	\$ -
1450	6373	134748	CHAIR - MOUNTED DENTAL UNIT MODEL#2	10	08/05/02	\$ 6,215	40664	NO FORM	RETIRED/DISPOSED	Laura Cruz	\$ 6,215.49	\$ -
1450	6373	134750	CHAIR - MOUNTED DENTAL UNIT MODEL#2	10	08/05/02	\$ 6,215	40664	M-384 WITH TI INFORMATION	TRADED IN	Laura Cruz	\$ 6,215.49	\$ -
1450	6374	133286	SYSTEM-DENTAL CHAIR 300 8273	10	07/27/07	\$ 17,332	18187	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Yolanda Larios	\$ 17,331.89	\$ -
1450	6374	133287	SYSTEM-DENTAL CHAIR 300 8274	10	07/27/07	\$ 17,332	18187	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Yolanda Larios	\$ 17,331.89	\$ -
1450	6374	133288	SYSTEM-DENTAL CHAIR 8272	10	07/27/07	\$ 17,332	18187	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Yolanda Larios	\$ 17,331.88	\$ -
1450	6374	134458	DELIVERY SYSTEM - SP2000 MODEL 21	10	02/12/13	\$ 8,535	42389	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Yolanda Larios	\$ 8,535.36	\$ -
1450	6374	134459	CHAIR-PELTON CRA 3002	10	02/12/13	\$ 8,913	42389	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Yolanda Larios	\$ 8,913.35	\$ -
1450	6377	136273	MIDMARK POWER TABLE 630-010 BASE	10	12/12/14	\$ 12,808	53865	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 12,807.50	\$ -
1450	6377	136319	MOBILE DENTAL CART AMC-20-SELF CONTA	10	03/04/15	\$ 10,042	54870	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 10,041.68	\$ -
1450	6381	131638	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	TRADED IN	Ngosi Emenalom	\$ 8,787.36	\$ -
1450	6383	128644	MONITORS W/BATTERIES	10	05/01/00	\$ 14,411	30096	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 14,410.89	\$ -
1450	6383	128645	MONITORS W/BATTERIES	10	05/01/00	\$ 14,411	30096	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 14,410.89	\$ -

Relief of Custody for Capital Assets Equipment Report by Dept/Org Estimated through May 26, 2026												
Dept	Cost Center	Asset #	Description	Useful Life	Date Acquired	Original Cost	PO #	Forms Status	Equipment Status	Cost Center Contact Person	Accumulated Depreciation to 05/26/26	Est. NBV as of 05/26/26
1450	6383	130670	STRETCHER - ATLAS 660Z	10	12/03/03	\$ 11,245	2120	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 11,245.01	\$ -
1450	6383	130671	STRETCHER - GYNNIE OB/GYN	10	12/03/03	\$ 6,119	2120	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,119.16	\$ -
1450	6383	131250	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 8,787.36	\$ -
1450	6383	131257	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 8,787	12144	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 8,787.36	\$ -
1450	6383	133938	STRETCHER CHAIR	15	08/12/09	\$ 5,077	28628	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,076.90	\$ -
1450	6383	133943	STRETCHER CHAIR	15	08/12/09	\$ 5,077	28628	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,076.90	\$ -
1450	6383	133944	STRETCHER CHAIR	15	08/12/09	\$ 5,077	28628	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,076.91	\$ -
1450	6383	133946	STRETCHER-OB-GYN GYNNIE	15	08/12/09	\$ 6,001	28629	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,001.02	\$ -
1450	6383	133947	STRETCHER CHAIR	15	08/12/09	\$ 5,077	28628	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,076.90	\$ -
1450	6383	133948	STRETCHER CHAIR	15	06/25/10	\$ 5,077	28628	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,076.90	\$ -
1450	6383	134118	EKG MACH TC 70-CARDIOGRAPH PAGEWRIT	10	10/14/09	\$ 10,447	29988	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 10,447.03	\$ -
1450	6383	134135	STRETCHER CHAIR	10	02/01/10	\$ 5,262	30684	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,262.37	\$ -
1450	6383	134136	STRETCHER CHAIR	10	02/01/10	\$ 5,262	30684	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,262.37	\$ -
1450	6383	134138	STRETCHER M-SERIES BIG WHL	10	02/01/10	\$ 6,743	30684	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,743.40	\$ -
1450	6383	134139	STRETCHER M-SERIES BIG WHL	10	02/01/10	\$ 6,743	30684	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,743.40	\$ -
1450	6383	134140	STRETCHER M-SERIES BIG WHL	10	02/01/10	\$ 6,743	30684	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,743.40	\$ -
1450	6383	134141	STRETCHER-OB-GYN GYNNIE	15	02/01/10	\$ 5,790	30684	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,789.51	\$ -
1450	6383	135606	ULTRASOUND SYSTEM - M-TURBO	10	01/11/12	\$ 285,971	39356	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 285,970.90	\$ -
1450	6383	135613	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 7,108	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 7,108.11	\$ -
1450	6383	135614	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 6,679	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,679.44	\$ -
1450	6383	135615	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 6,679	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,679.44	\$ -
1450	6383	135616	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 6,679	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,679.44	\$ -
1450	6383	135618	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 6,679	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,679.44	\$ -
1450	6383	135619	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 6,679	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,679.44	\$ -
1450	6383	135620	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 7,108	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 7,108.11	\$ -
1450	6383	135627	STRETCHER CHAIR	10	02/01/10	\$ 5,262	30684	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,262.37	\$ -
1450	6383	135628	ULTRASOUND SYS SONOSITE	10	07/21/10	\$ 69,306	33461	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 69,306.18	\$ -
1450	6383	135804	GLIDESCOPE COBALT SYSTEM	10	04/15/11	\$ 18,962	36234	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 18,962.17	\$ -
1450	6383	135835	SERVER/DATA BASE-PHILIPS M3155 - U01 P	3	09/16/09	\$ 7,402	29343	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 7,401.59	\$ -
1450	6383	135836	MP5 PATIENT MONITOR - INTELLIVUE	3	09/16/09	\$ 8,244	29343	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 8,243.81	\$ -
1450	6383	135837	MP5 PATIENT MONITOR - INTELLIVUE	3	09/16/09	\$ 8,244	29343	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 8,243.82	\$ -
1450	6383	135838	MP5 PATIENT MONITOR - INTELLIVUE	3	09/16/09	\$ 8,244	29343	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 8,243.82	\$ -
1450	6383	135840	MP5 PATIENT MONITOR - INTELLIVUE	3	09/16/09	\$ 8,244	29343	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Akiko Tennison	\$ 8,243.82	\$ -
1450	6383	135844	COMPUTER SYSTEM M3154 - U01 PC	3	09/16/09	\$ 9,280	29343	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 9,279.97	\$ -
1450	6383	136187	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 7,108	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 7,108.11	\$ -
1450	6383	136188	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 6,679	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,679.44	\$ -
1450	6383	136189	CART-INFOLOGIX 08 ULTRA CPU	10	05/19/09	\$ 6,679	27286	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,679.44	\$ -
1450	6383	136191	MP2 PATIENT MONITOR - INTELLIVUE	3	09/16/09	\$ 10,720	29343	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 10,719.50	\$ -
1450	6383	137049	SERVER-INTELLIVUE MX700 PATIENT MONI	3	01/08/16	\$ 137,207	56630	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 137,207.45	\$ -
1450	6387	136009	DRAGER JAUNDICE METER	10	02/06/14	\$ 6,679	50504	M-384 WITH TI INFORMATION	TRADED IN	Laura Cruz	\$ 6,678.70	\$ -
1450	6387	136262	VISUCAM FUNDUS CAMERA	10	12/01/14	\$ 22,221	53729	M-384 WITH TI INFORMATION	TRADED IN	Laura Cruz	\$ 22,220.84	\$ -
1450	6388	112413	SONIC ENERGY CLEANER	10	01/25/85	\$ 10,325	62480	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 10,325.45	\$ -
1450	6388	128850	STERILIZER-MAGNA-CLAVE	10	07/25/01	\$ 12,420	36546	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 12,420.00	\$ -
1450	6388	128860	PHARMACY CALL BOARD	15	07/25/01	\$ 7,678	36513	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Lea Mostella	\$ 7,678.22	\$ -
1450	6388	128861	PHARMACY CALL BOARD	15	07/25/01	\$ 7,678	36513	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Lea Mostella	\$ 7,678.21	\$ -
1450	6388	135685	SIGMOIDOSCOPE-FLEX OSF V60	10	06/16/09	\$ 9,345	27704	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 9,345.25	\$ -
1450	6388	135686	SIGMOIDOSCOPE-FLEX OSF V60	10	06/16/09	\$ 11,071	27704	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 11,070.53	\$ -
1450	6388	135687	SIGMOIDOSCOPE-FLEX OSF V60	10	06/16/09	\$ 11,071	27704	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 11,070.52	\$ -
1450	6388	135688	VIDEO SIGMOIDOSCOPE OSF V60	10	07/23/09	\$ 9,345	27706	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 9,345.24	\$ -
1450	6388	135689	VIDEO SIGMOIDOSCOPE OSF V60	10	07/23/09	\$ 9,345	27706	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 9,345.25	\$ -
1450	6388	135691	VIDEO SIGMOIDOSCOPE OSF V60	10	07/23/09	\$ 9,345	27706	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 9,345.25	\$ -
1450	6388	135852	BLADDERSCAN BVI 9500	10	09/18/09	\$ 14,779	29993	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 14,778.77	\$ -
1450	6410	136268	TROPHON EPR STERILIZATION SYS W/PRIN	10	10/31/14	\$ 10,515	53475	NO FORM	RETIRED/DISPOSED	Leticia Gutierrez	\$ 10,514.95	\$ -
1450	6411	134115	ULTRASOUND LOGIQ 9	10	05/25/10	\$ 108,158	32258	NO FORM	RETIRED/DISPOSED	Leticia Gutierrez	\$ 108,157.50	\$ -
1450	6412	131201	DENTAL CHAIR-ELECTRIC/LIGHT	10	08/10/04	\$ 5,665	6467	NO FORM	RETIRED/DISPOSED	Leticia Gutierrez	\$ 5,664.72	\$ -
1450	6413	133305	X-RAY-INTRAORAL IXM2002	10	06/07/07	\$ 5,314	16977	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 5,314.20	\$ -
1450	6413	133756	ULTRA-CLAVE-DENTAL STERILIZER	10	03/16/09	\$ 5,048	27073	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 5,048.36	\$ -
1450	6413	134130	CABINET-96" LONG DIVIDER	10	12/03/08	\$ 9,807	24634	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 9,807.46	\$ -
1450	6413	134131	CABINET-CUSTOM STERI	10	12/03/08	\$ 13,334	24634	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 13,334.23	\$ -
1450	6413	134132	TREATMENT CTR W/HP CONTROL	10	12/03/08	\$ 8,426	24634	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 8,426.18	\$ -

**Relief of Custody for Capital Assets
Equipment Report by Dept/Org
Estimated through May 26, 2026**

Dept	Cost Center	Asset #	Description	Useful Life	Date Acquired	Original Cost	PO #	Forms Status	Equipment Status	Cost Center Contact Person	Accumulated Depreciation to 05/26/26	Est. NBV as of 05/26/26
1450	6413	134133	TREATMENT CTR W/HP CONTROL	10	12/03/08	\$ 8,426	24634	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 8,426.18	\$ -
1450	6413	134134	CABINET-SIDE CUSTOM MADE	10	12/03/08	\$ 6,107	24634	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 6,107.46	\$ -
1450	6413	136248	PROSENSOR X-RAY SENSOR SIZE 1	10	10/10/14	\$ 10,632	53549	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 10,631.92	\$ -
1450	6413	136249	PROSENSOR X-RAY SENSOR SIZE 2	10	10/10/14	\$ 12,476	53549	NO FORM	NOT FOUND/DISPOSED	Dave Duet	\$ 12,476.42	\$ -
1450	6501	136161	CONVECTION OVEN-DBL DECK	10	06/09/00	\$ 9,246	31925	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Dockham	\$ 9,246.18	\$ -
1450	6502	131216	ICE MAKER-HOSHIZAKI KML600	10	06/20/05	\$ 5,179	9777	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Dockham	\$ 5,178.51	\$ -
1450	6502	134772	ESPRESSO MACHINE - EGRO ONE-TOUCH	10	07/19/12	\$ 14,158	42935	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Dockham	\$ 14,158.05	\$ -
1450	6502	136663	BUFFET SALAD BARS - DUKE	10	01/02/13	\$ 19,926	42803	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Dockham	\$ 19,926.19	\$ -
1450	6502	136664	FREEZER-ELECTRA CS5	15	02/28/03	\$ 5,025	93986	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Dockham	\$ 5,024.69	\$ -
1450	6505	127412	Chair Totalift Transit Transport	10	07/31/98	\$ 7,431	23243	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 7,431.36	\$ -
1450	6505	127420	Chair Totalift Transit Transport	10	07/31/98	\$ 7,431	23243	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 7,431.37	\$ -
1450	6505	127421	Chair Totalift Transit Transport	10	07/31/98	\$ 7,431	23243	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 7,431.36	\$ -
1450	6505	129410	EZ Premier 800 LBS Stand w/ Scale	10	05/10/02	\$ 11,051	38902	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 11,050.61	\$ -
1450	6505	135567	Infovac Machine - M825999.S	10	05/03/13	\$ 30,851	44185	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 30,851.25	\$ -
1450	6505	135568	Infovac Machine - M825999.S	10	05/03/13	\$ 30,851	44185	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 30,851.25	\$ -
1450	6505	135569	Infovac Machine - M825999.S	10	05/03/13	\$ 30,851	44185	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 30,851.25	\$ -
1450	6505	135570	Infovac Machine - M825999.S	10	05/03/13	\$ 30,851	44185	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 30,851.25	\$ -
1450	6505	136057	Ultrasound - S Series Vascular Acc	10	04/25/14	\$ 24,408	50838	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 24,407.62	\$ -
1450	6514	124002	MOBILE SHELVING/JOURNALS/PERIO	10	10/04/95	\$ 25,000	76517	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Swandi Singh	\$ 25,000.00	\$ -
1450	6514	136177	SHELVING LIBRARY 2 RANGE METAL	15	06/30/75	\$ 8,517	20901	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Swandi Singh	\$ 8,516.54	\$ -
1450	6537	106762	OSCILLOSCOPE 465DM44 TEKTRONIX	10	06/30/83	\$ 6,124	33080	M-349 WITHOUT PW SIGNATURE	RETIRED/DISPOSED	Randy Hendrickson	\$ 6,124.24	\$ -
1450	6537	133269	TREADMILL SYS-TRACKMASTER	10	01/31/07	\$ 21,332	16010	M-349 WITHOUT PW SIGNATURE	RETIRED/DISPOSED	Randy Hendrickson	\$ 21,331.69	\$ -
1450	6537	135505	ULTRASOUND - IE33	10	02/22/12	\$ 99,367	39998	M-349 WITHOUT PW SIGNATURE	RETIRED/DISPOSED	Randy Hendrickson	\$ 99,366.80	\$ -
1450	6537	135506	ULTRASOUND - IE33	10	02/22/12	\$ 99,606	39998	M-349 WITHOUT PW SIGNATURE	RETIRED/DISPOSED	Randy Hendrickson	\$ 99,606.05	\$ -
1450	6537	135508	TRANSDUCER - IE33 TEE PROBE	10	12/03/12	\$ 30,585	43836	M-349 WITHOUT PW SIGNATURE	RETIRED/DISPOSED	Randy Hendrickson	\$ 30,584.61	\$ -
1450	6537	135509	TRANSDUCER - IE33 TEE PROBE	10	12/03/12	\$ 30,585	43836	M-349 WITHOUT PW SIGNATURE	RETIRED/DISPOSED	Randy Hendrickson	\$ 30,584.62	\$ -
1450	6537	127407	AUDIOMETER/CLINICAL IMPEDANCE	10	04/08/98	\$ 6,210	19446	NO FORM	NOT FOUND/DISPOSED	Randy Hendrickson	\$ 6,210.35	\$ -
1450	6537	130669	SYSTEM-ELECTROENCEPHALOGRAPH LAPTO	10	06/18/03	\$ 18,790	02022	NO FORM	NOT FOUND/DISPOSED	Randy Hendrickson	\$ 18,790.00	\$ -
1450	6537	130690	SYSTEM - ULTRASOUND EQUIP-BLADDER SC	10	06/18/03	\$ 12,434	02002	NO FORM	NOT FOUND/DISPOSED	Randy Hendrickson	\$ 12,434.22	\$ -
1450	6537	131239	SYS-ULTRASOUND LOGIQ BOOK X P DEMO	10	08/23/05	\$ 24,104	10005	NO FORM	NOT FOUND/DISPOSED	Randy Hendrickson	\$ 24,103.63	\$ -
1450	6537	134447	ELECTROSURGICAL SIGMOID X2 FORCE FXC	10	09/10/12	\$ 10,236	42191	NO FORM	NOT FOUND/DISPOSED	Randy Hendrickson	\$ 10,235.50	\$ -
1450	6537	134448	ELECTROSURGICAL SIGMOID X2 FORCE FXC	10	09/10/12	\$ 10,236	42191	NO FORM	NOT FOUND/DISPOSED	Randy Hendrickson	\$ 10,235.50	\$ -
1450	6537	135931	INFRARED COAGULATION-ANAL DYSPLASIA	10	08/12/13	\$ 10,406	47926	NO FORM	NOT FOUND/DISPOSED	Randy Hendrickson	\$ 10,406.33	\$ -
1450	6544	131196	System - Scan Converter	10	05/28/03	\$ 5,186	01555	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 5,186.22	\$ -
1450	6559	131253	DEFIBRILLATOR-HEARTSTART MRX MONITO	10	04/28/06	\$ 5,553	12144	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Celia Contrera	\$ 5,552.89	\$ -
1450	6559	134129	DEFIBRILLATOR-HEARTSTART	10	12/22/08	\$ 8,866	26142	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Celia Contrera	\$ 8,865.68	\$ -
2406	7406	133293	METI PEDIASIM-ECS BASE UNIT SYST 253k2	10	01/01/07	\$ 70,586	19776	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Patricia Weisinger	\$ 70,586.47	\$ -
2406	7406	133394	SYS-EMERGENCY SIMULATOR	10	01/01/06	\$ 65,405	14965	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Patricia Weisinger	\$ 65,405.44	\$ -
2406	7406	134098	BABY SIM BASE UNIT-BABY METI TRN 253K	10	01/01/10	\$ 56,111	31238	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Patricia Weisinger	\$ 56,110.80	\$ -
1450	6304	136818	BLADDERSCAN BVI 9400	10	12/31/15	\$ 13,663	00891	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Judy Rivera	\$ 13,662.51	\$ -
1450	6340	136884	TROPHON EPR DISINFECTION SYSTEM	10	05/31/16	\$ 7,363	03622	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Cita Richeson	\$ 7,356.76	\$ 6
1450	6410	136886	TROPHON EPR DISINFECTION SYSTEM	10	05/31/16	\$ 7,363	3622	NO FORM	RETIRED/DISPOSED	Leticia Gutierrez	\$ 7,356.76	\$ 6
1450	6412	137050	DRAGER JAUNDICE METER JM-105 NEMA 5-	10	06/22/16	\$ 6,543	2689	NO FORM	RETIRED/DISPOSED	Leticia Gutierrez	\$ 6,497.92	\$ 45
1450	6365	137543	HETTICH UNIVERSAL CENTRIFUGE HET320	10	10/31/16	\$ 5,051	5601	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 4,834.99	\$ 216
1450	6365	137544	HETTICH UNIVERSAL CENTRIFUGE HET320	10	10/31/16	\$ 5,051	5601	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 4,834.99	\$ 216
1450	6418	137287	NOMAD PRO2 DENTAL X-RAY SYSTEM 60KV	10	09/13/16	\$ 7,051	5297	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 6,842.33	\$ 209
1450	6365	137046	OSMOMETER MULTI SAMPLE TESTING UNIT	10	06/16/16	\$ 22,640	3569	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 22,522.23	\$ 118
1450	6330	137435	DUAL CHANNL URETERO SCOPE, STRA WA02	10	09/19/16	\$ 8,521	2491	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,255.31	\$ 266
1450	6330	137442	DUAL CHANNL URETERO SCOPE, STRA WA02	10	09/19/16	\$ 8,521	2491	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,255.31	\$ 266
1450	6383	137448	OB-GYN Gynnie Stretcher	10	12/13/16	\$ 6,450	4966	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 6,098.16	\$ 352
1450	6383	137346	HEART START MRx MONITOR/DEFIB	10	11/15/16	\$ 11,639	5703	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 11,093.88	\$ 545
1450	6418	137562	ARIBEX NOMAD PRO2 HANDHELD I/O X-RAY	10	05/26/17	\$ 7,528	7522	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 6,779.65	\$ 749
1450	6383	137970	TRANSDUCER - ICTX/8-5 MHZ	10	09/21/17	\$ 6,656	9187	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,778.43	\$ 877
1450	6977	137539	Curved Array Transducer	10	05/17/17	\$ 10,067	07090	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 9,090.86	\$ 976
1450	6977	137541	Endocavity Transducer	10	05/17/17	\$ 10,067	08005	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 9,090.86	\$ 976
1450	6383	136181	STRETCHER GYNNE OB-GYN	15	05/15/14	\$ 5,908	50937	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 4,741.57	\$ 1,167
1450	6418	138108	PLANMECA SIZE 2 PROSENSOR	10	12/27/17	\$ 7,228	9800	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 6,083.00	\$ 1,145
1450	6418	138109	PLANMECA SIZE 2 PROSENSOR	10	12/27/17	\$ 7,228	9800	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 6,083.01	\$ 1,145
1450	6383	136182	STRETCHER-PRIME 5TH WHEEL 26"	15	05/05/14	\$ 6,442	51671	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 5,182.11	\$ 1,260
0452	5875	139271	HSGP FY17 HAZMAT RADIATION PAGER	10	09/12/18	\$ 6,204	12328	NO FORM	NOT FOUND/DISPOSED	Travis Quesenberry	\$ 4,781.02	\$ 1,423

Relief of Custody for Capital Assets Equipment Report by Dept/Org Estimated through May 26, 2026												
Dept	Cost Center	Asset #	Description	Useful Life	Date Acquired	Original Cost	PO #	Forms Status	Equipment Status	Cost Center Contact Person	Accumulated Depreciation to 05/26/26	Est. NBV as of 05/26/26
1450	6977	137946	Transducer ICTXP/9-5 MHZ	10	09/06/17	\$ 12,234	09187	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 10,672.40	\$ 1,562
1450	6365	137945	OSMOMETER, SINGLE-SAMPLE	10	08/21/17	\$ 12,856	9124	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 11,271.29	\$ 1,585
1450	6977	137905	Power Table 630-010 Base	10	08/11/17	\$ 13,977	08826	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 12,292.17	\$ 1,685
1450	6308	138105	ULTRASOUND SYSTEM	10	12/27/17	\$ 11,555	9929	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 9,724.93	\$ 1,830
1450	6501	138398	ICE CREAM COOLER	10	01/14/19	\$ 8,854	13126	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Dockham	\$ 6,523.03	\$ 2,331
1450	6501	139156	PANASONIC SONIC STEAMER MICROWAVE C	10	09/28/20	\$ 5,593	20219	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Dockham	\$ 3,165.60	\$ 2,427
1450	6383	137899	STRETCHER-HILL-ROM MODEL P8000	15	07/31/17	\$ 6,036	07813	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Akiko Tennison	\$ 3,551.00	\$ 2,485
1450	6383	137900	STRETCHER-HILL-ROM MODEL P8000	15	07/31/17	\$ 6,036	07813	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Akiko Tennison	\$ 3,551.00	\$ 2,485
1450	6383	137901	STRETCHER-HILL-ROM MODEL P8000	15	07/31/17	\$ 6,036	07814	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Akiko Tennison	\$ 3,551.00	\$ 2,485
0450	5775	138596	GETINGE AUTOCLAVE/STERILIZER	10	12/27/18	\$ 9,467	13447	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Stephanie Trammell	\$ 7,021.09	\$ 2,446
1450	6383	137943	STRETCHER-OB-GYN GYNNIE	15	09/08/17	\$ 6,464	06807	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Akiko Tennison	\$ 3,756.95	\$ 2,707
1450	6383	137942	STRETCHER-OB-GYN GYNNIE	15	09/08/17	\$ 6,464	06807	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Akiko Tennison	\$ 3,756.95	\$ 2,707
1450	6365	138065	FREEZER-LAB 19.7 CU FT STAINLESS STEEL	15	02/16/18	\$ 6,255	9758	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 3,451.57	\$ 2,804
1450	6365	138066	FREEZER-LAB 19.7 CU FT STAINLESS STEEL	15	02/16/18	\$ 6,255	9758	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 3,451.57	\$ 2,804
1450	6977	137540	Z One Pro Sys - Refurb	10	05/17/17	\$ 27,528	07090	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 24,858.13	\$ 2,670
1450	6365	138394	APPLIANCE-PHARMACY REFRIGERATOR REF	15	02/13/19	\$ 5,556	13795	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 2,698.16	\$ 2,857
1450	6365	138395	APPLIANCE-PHARMACY REFRIGERATOR REF	15	02/13/19	\$ 5,556	13795	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Sam Farell	\$ 2,698.16	\$ 2,857
1450	6418	139844	INTRAORAL IMAGER-PROSENSOR HD	10	11/15/21	\$ 5,383	23232	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 2,437.61	\$ 2,945
1450	6418	139842	INTRAORAL IMAGER-PROSENSOR HD	10	11/15/21	\$ 5,383	23232	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 2,437.61	\$ 2,945
1450	6418	139843	INTRAORAL IMAGER-PROSENSOR HD	10	11/15/21	\$ 5,383	23232	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Rachael Birch	\$ 2,437.61	\$ 2,945
1450	6388	138510	BLADDERSCAN BVI 9400	10	08/17/18	\$ 14,281	12528	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Lea Mostella	\$ 11,107.88	\$ 3,173
0450	5841	139198	APPLIANCE-FOLLETT LAB REFRIGERATOR	15	10/21/20	\$ 5,296	18763	M-349 WITHOUT PW SIGNATURE	SURPLUSED	Rachael Birch	\$ 1,976.18	\$ 3,320
1450	6383	138110	ULTRASOUND SYSTEM	10	12/27/17	\$ 25,932	9970	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Akiko Tennison	\$ 21,825.49	\$ 4,106
1450	6977	137904	Ultrasound System – Z One Pro	10	07/31/17	\$ 61,433	08072	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 54,212.41	\$ 7,220
0450	5752	139284	TENT: 30x90	10	02/03/21	\$ 19,426	18763	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Gerald Tamayo	\$ 10,314.26	\$ 9,111
1450	6308	140855	TRANSDUCER-RP19XP/5-1 MHZ	10	03/06/24	\$ 12,347	29584	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 2,743.38	\$ 9,604
1450	6977	137827	GS TI Spectrum Prem Cart	10	07/14/17	\$ 14,243	08005	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 12,634.88	\$ 1,608
0450	5752	139287	TENT: 40x80	10	02/03/21	\$ 26,710	18763	M-384 WITH DEPT SIGNATURE	DAMAGED/DESTROYED	Gerald Tamayo	\$ 14,182.13	\$ 12,528
1450	6330	138773	WATER SOFTENER-CULLIGAN	20	08/09/19	\$ 25,253	15194	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,585.96	\$ 16,667
1450	6330	138772	WATER SOFTENER-CULLIGAN	20	08/09/19	\$ 25,253	15194	M-384 WITH DEPT SIGNATURE	RETIRED/DISPOSED	Gino Rogers	\$ 8,585.96	\$ 16,667
1450	6977	137825	GS TI Spectrum Prem Cart	10	07/14/17	\$ 14,243	08005	M-384 WITH DEPT SIGNATURE	LOST/STOLEN	Swandi Singh	\$ 12,634.89	\$ 1,608
1450	6308	140444	ULTRASOUND-SONOSITE SII	10	03/24/23	\$ 29,106	27298	NO FORM	NOT FOUND/DISPOSED	Grace Ma	\$ 9,242.06	\$ 19,864
0452	5875	140515	HAZMAT-SMITHS ELITE COMMAND PKG	10	06/28/23	\$ 67,371	26830	M-384 WITH DEPT SIGNATURE	NOT FOUND/DISPOSED	Travis Quesenberry	\$ 19,620.54	\$ 47,750
					Total Original Cost	\$ 6,810,499				Total	\$ 6,595,750	\$ 214,749
	Notes										Count with Zero NBV	280
		Forms Status									Count with NBV	53
		M-349 with signature – signed by both department custodian and Public Works									Total Count	333
		M-349 without signature – signed by department custodian only										
		M-384 with TI information – trade-in information completed by custodian										
		M-384 without signature – signed only by custodian										
		No Form										



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2262

Agenda Date: 5/26/2026

Agenda #:

Cost Center	Asset #	Description	Date Acquired	Yrs	End of Depr Date	Original Cost	Accumulated Depreciation to 05/26/26	Est. NBV as of 05/26/26
6514	136177	SHELVING LIBRARY 2 RANGE METAL	6/30/1975	15	6/30/1990	8,517	8,517	-
6364	92750	WALK-IN MORGUE COOLER	6/30/1978	15	6/30/1993	7,298	7,298	-
6330	134762	MICROSCOPE TYPE ZEISS	6/30/1979	15	6/30/1994	19,160	19,160	-
6330	100082	LIGHT SOURCE CLK-3 #32610	6/30/1980	10	6/30/1990	8,161	8,161	-
6384	105642	SLIT LAMP #900 HAAG-STREIT "F"	6/30/1982	15	6/30/1997	6,232	6,232	-
5278	136787	MIXER L800 HOBART 80 QT	6/30/1982	10	6/30/1992	9,403	9,403	-
6537	106762	OSCILLOSCOPE 465DM44 TEKTRONIX	6/30/1983	10	6/30/1993	6,124	6,124	-
6388	112413	SONIC ENERGY CLEANER	1/25/1985	10	1/25/1995	10,325	10,325	-
5702	116663	PHARMACY NIGHT CABINET	2/18/1986	10	2/18/1996	8,669	8,669	-
6330	000009-045	GASTRO FIBERSCOPE(MOD-GIFXQ20)	1/12/1989	10	1/12/1999	12,102	12,102	-
6330	134768	MICROSCOPE ZEISS/OPHTHAMOLOGY	2/22/1989	15	2/22/2004	44,438	44,438	-
6569	111645	READER PRINTER MODEL 7540	4/11/1989	10	4/11/1999	11,630	11,630	-
6330	000009-044	COLONOFIBERSCOPE	9/27/1989	10	9/27/1999	12,353	12,353	-
6355	116757	X-RAY MOBILE UNIT/AMX 4	12/1/1989	10	12/1/1999	35,578	35,578	-
6330	000009-087	WIRE DRV/END,DRILL,CNTRL,ATTA	1/1/1990	15	1/1/2005	8,047	8,047	-
6330	000009-089	MICROCHOICE CONTROLLER 100-120	1/1/1990	10	1/1/2000	10,047	10,047	-
6330	129447	SCAPEL-HARMONIC-BUYOUT	1/1/1990	15	1/1/2005	16,613	16,613	-
6330	000009-089	BONE CURETTE/WIREDRIVER	1/1/1990	10	1/1/2000	17,693	17,693	-
6380	125723	STERIS SYS PROCESSOR,TRAY,STN	1/1/1990	15	1/1/2005	19,077	19,077	-
6380	127422	STERIS SYS PROCESSOR,TRAY,STN	1/1/1990	15	1/1/2005	21,477	21,477	-
6330	000009-088	COLONOVideoscope WIDE IMAGE	1/1/1990	15	1/1/2005	22,300	22,300	-
6330	127265	TOURNIQUET ATS 2000	1/1/1990	10	1/1/2000	26,989	26,989	-
5775	112469	NUAIRE BIO SAFETY HOOD	4/16/1990	10	4/16/2000	8,851	8,851	-
6330	000009-055	DRILL SYSTEM OSTEON	8/21/1990	10	8/21/2000	6,675	6,675	-
6330	000009-056	FIBERSCOPE INTUB. LF-1 W/ACCES	12/14/1990	10	12/14/2000	5,577	5,577	-
6339	134752	AEROSOL TREATMENT CHAMBER	4/3/1991	10	4/3/2001	6,235	6,235	-
6388	116864	AEROSOL TREATMENT CHAMBER	4/3/1991	10	4/3/2001	6,235	6,235	-
6330	116871	LIGHT SOURCE ENDOSCOPY CLVU 20	5/13/1991	10	5/13/2001	8,025	8,025	-
6330	000009-062	NEPHROSCOPE FLEX PERCUTANEOUS	6/4/1991	10	6/4/2001	8,357	8,357	-
6384	116865	CHAMBER-AEROSOL TREATMENT 7-AT "A"	6/18/1991	10	6/18/2001	6,235	6,235	-
6330	118286	ELECTROSURGICAL UNIT	7/16/1991	10	7/16/2001	5,706	5,706	-
6330	118289	ELECTROSURGICAL UNIT	7/16/1991	10	7/16/2001	5,706	5,706	-
6330	118290	MICROSCOPE SYSTEM OPMI ZMS211	8/7/1991	15	8/7/2006	16,861	16,861	-
6330	118261	DRILL REAMER ORTHOPEDIC DRILL	9/3/1991	10	9/3/2001	5,034	5,034	-
6330	118531	LAPAROFLATOR HIFLOW INSUFFLATO	2/19/1992	10	2/19/2002	5,164	5,164	-
6365	118595	CABINET PURIFIER	6/11/1992	15	6/11/2007	5,172	5,172	-
6330	000009-073	TEACHING ATTACHMENT KIT	7/1/1992	5	7/1/1997	5,207	5,207	-
6365	118683	CYTOCENTRIFUGE CYTOSPIN 3	7/1/1992	10	7/1/2002	5,507	5,507	-
6505	118997	BED-DYNAMIC AIR SUPPT ADV-2000	7/8/1992	15	7/8/2007	6,708	6,708	-
6505	118998	BED-DYNAMIC AIR SUPPT ADV-2000	7/8/1992	15	7/8/2007	6,708	6,708	-
6330	000009-063	SHAVER ARTHROSCOPIC SURG SYSTM	7/8/1992	10	7/8/2002	8,428	8,428	-
6330	000009-063	FIBERSCOPE GASTROINTESTINAL	7/29/1992	10	7/29/2002	13,531	13,531	-
6330	118679	ELECTROHYDRAULIC LITHOTRIPTOR	8/3/1992	10	8/3/2002	9,038	9,038	-
6505	118940	BED/ADV 1000/W/BASIC FUNCTIONS	9/2/1992	15	9/2/2007	5,002	5,002	-
6505	118941	BED/ADV 1000/W/BASIC FUNCTIONS	9/2/1992	15	9/2/2007	5,002	5,002	-
6505	118942	BED/ADV 1000/W/BASIC FUNCTIONS	9/2/1992	15	9/2/2007	5,002	5,002	-
6505	118943	BED/ADV 1000/W/BASIC FUNCTIONS	9/2/1992	15	9/2/2007	5,002	5,002	-
6505	118944	BED/ADV 1000/W/BASIC FUNCTIONS	9/2/1992	15	9/2/2007	5,002	5,002	-
6505	118946	BED/ADV 1000/W/BASIC FUNCTIONS	9/2/1992	15	9/2/2007	5,002	5,002	-

6329	000009-081	LIGHTS HANAULEX #2004 DUO CORE	11/19/1993	10	11/19/2003	10,405	10,405	-
6330	119038	EXCALIBUR CAUTERY ESU 120V	12/30/1993	10	12/30/2003	6,059	6,059	-
6380	119028	HAAG-STEIT SLIT LAMP MB900	2/1/1994	10	2/1/2004	8,307	8,307	-
6330	119046	INSUFFLATOR DYO PNEUMATIC 15	2/3/1994	10	2/3/2004	7,019	7,019	-
6544	120660	WORKSTATION-ROOM 2 333 C ST.	3/18/1994	10	3/18/2004	5,403	5,403	-
6330	000009-079	TRANSPORT MON UTIL MODVIES	6/16/1994	10	6/16/2004	8,164	8,164	-
6330	123400	ANESTHESIA ANALYZER UPGR MLTNX	8/5/1994	10	8/5/2004	11,381	11,381	-
6330	123401	ANESTHESIA ANALYZER UPGR MLTNX	8/5/1994	10	8/5/2004	11,381	11,381	-
6330	123397	ANESTHESIA ANALYZER UPGR MLTNX	8/5/1994	10	8/5/2004	11,381	11,381	-
6330	123398	ANESTHESIA ANALYZER UPGR MLTNX	8/5/1994	10	8/5/2004	11,381	11,381	-
6388	112368	PHONE SYSTEM	9/10/1994	10	9/10/2004	448,852	448,852	-
6364	120642	MICROSCOPE LABOPHOT 2/LSB2S	10/25/1994	10	10/25/2004	6,818	6,818	-
6364	120649	MICROSCOPE LABOPHOT 2/L2F2A	10/25/1994	10	10/25/2004	15,829	15,829	-
6380	120659	CHAIR/TABLE RELIANCE MOD 7100	11/10/1994	10	11/10/2004	5,625	5,625	-
6555	121240	EMBROSSER W/AUTO FEED-ENCODER	1/25/1995	10	1/25/2005	11,184	11,184	-
6308	120644	MONITORING SYSTEM/HP 5800	2/24/1995	5	2/24/2000	105,309	105,309	-
6330	000009-080	BRONCHOFIBERSCOPE	4/5/1995	10	4/5/2005	13,640	13,640	-
6330	121933	BRONCHOFIBERSCOPE	4/5/1995	10	4/5/2005	15,372	15,372	-
6330	000009-080	GASTROINTESTINAL FIBERSCOPE	5/31/1995	10	5/31/2005	11,908	11,908	-
6330	000009-080	COLONFIBERSCOPE CF IT20L	5/31/1995	10	5/31/2005	11,908	11,908	-
6514	124002	MOBILE SHELVEING/JOURNALS/PERIO	10/4/1995	10	10/4/2005	25,000	25,000	-
6330	000009-081	DERMATOME/ZIMMER ELEC KIT	12/20/1995	10	12/20/2005	5,025	5,025	-
6330	000009-081	DRILL SYS ULTRAPOWER HI SPEED	12/20/1995	10	12/20/2005	23,465	23,465	-
6340	124032	CURVED ARRAY	6/3/1996	10	6/3/2006	12,990	12,990	-
6308	124034	TRANSPORT HP MONITORS/SUPPORT	9/11/1996	10	9/11/2006	8,430	8,430	-
6308	128827	MP5 TRANSPORT MONITORS-INTELLIVUE	9/11/1996	10	9/11/2006	8,430	8,430	-
6522		TRASH COMPACTOR/20 YARD	9/30/1996	10	9/30/2006	26,214	26,214	-
6340	124044	SYSTEM - ULTRASOUND IMAGING	10/16/1996	10	10/16/2006	11,640	11,640	-
5775	134736	FREEZER CHEST REVCO ELITE	10/23/1996	15	10/23/2011	8,420	8,420	-
5875	E-6814	RSPNSE UNIT HAZMAT 97 FRHTLINR	11/16/1996	4	11/16/2000	142,734	142,734	-
6380	119093	EEG SYSTEM CADWELL SIERRA	11/18/1996	10	11/18/2006	17,650	17,650	-
6501	130626	REFRIGERATOR TRAVLSEN 3 DOOR	1/11/1997	15	1/11/2012	8,884	8,884	-
6351	123389	STERALIZER STERRAD	1/16/1997	10	1/16/2007	93,831	93,831	-
6330	128634	ANESTHETIC GAS MODULE	1/21/1997	10	1/21/2007	8,471	8,471	-
6330	128637	ANESTHETIC GAS MODULE	1/21/1997	10	1/21/2007	8,471	8,471	-
6318	125724	MONITORING SYSTES/TCU	2/25/1997	10	2/25/2007	20,355	20,355	-
6318	125725	MONITORING SYSTES/TCU	2/25/1997	10	2/25/2007	20,355	20,355	-
6318	125726	MONITORING SYSTES/TCU	2/25/1997	10	2/25/2007	20,355	20,355	-
6318	125727	MONITORING SYSTES/TCU	2/25/1997	10	2/25/2007	20,355	20,355	-
6318	125728	MONITORING SYSTES/TCU	2/25/1997	10	2/25/2007	20,355	20,355	-
6330	125772	STERIS SYSTEM 1	2/28/1997	10	2/28/2007	93,854	93,854	-
6388	119006	TABL TRACTION UNIT TRITON HILO	3/31/1997	10	3/31/2007	6,317	6,317	-
6330	000009-087	DRILL-SERIES 4 REAMER W/O HOSE	4/21/1997	10	4/21/2007	5,256	5,256	-
6330	000009-087	DRILL-SERIES 4 TRAUMA W/O HOSE	4/21/1997	10	4/21/2007	5,365	5,365	-
6502	125819	REFRIGERATOR TRAULSEN	5/5/1997	15	5/5/2012	6,973	6,973	-
6330	125820	LITHOCLAST SYSTEM	6/10/1997	10	6/10/2007	37,900	37,900	-
6555	000009-052	PHONE EQUIP-595 CENTER	6/15/1997	9	6/15/2006	14,605	14,605	-
6540	000009-052	PHONE EQUIP-597 CENTER	6/15/1997	9	6/15/2006	54,990	54,990	-
6505	125765	BEDS-ZONNAIRES W/SCALES	6/25/1997	15	6/25/2012	12,021	12,021	-
6505	129405	BEDS-ZONNAIRES W/SCALES	6/25/1997	15	6/25/2012	12,021	12,021	-
6505	125763	BEDS-ZONEAIRE W/SCALE	7/16/1997	15	7/16/2012	12,398	12,398	-

6505	125764	BEDS-ZONEAIRE W/SCALE	7/16/1997	15	7/16/2012	12,398	12,398	-
6505	129444	BEDS-ZONEAIRE W/SCALE	7/16/1997	15	7/16/2012	12,398	12,398	-
6330	125823	TABLE SURGICAL SKYTRON	7/16/1997	10	7/16/2007	40,511	40,511	-
6330	125824	TABLE SURGICAL SKYTRON	7/16/1997	10	7/16/2007	40,511	40,511	-
6505	127009	BED-BARIKARE	8/18/1997	15	8/18/2012	31,068	31,068	-
6505	126978	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,646	6,646	-
6505	123987	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	123988	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	123989	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	123990	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	123991	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	123992	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126700	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126701	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126966	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126967	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126968	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126969	BED-ELECT ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126970	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126971	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126972	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126973	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126974	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126975	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126976	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126977	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126979	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126980	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126981	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126982	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126983	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126984	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126985	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126986	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126993	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126994	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126995	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126996	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126997	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126998	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	126999	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	127002	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	127003	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	127004	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6505	127005	BED-ELECTRIC ADV 1000/MATTRESS	9/23/1997	10	9/23/2007	6,647	6,647	-
6330	000009-086	HAND PIECE-NEUROSURGRY FINE TIP	10/10/1997	10	10/10/2007	10,836	10,836	-
6330	000009-088	HAND PIECE-NEUROSURGRY FINE TIP	10/10/1997	10	10/10/2007	10,836	10,836	-
6330	125744	TOURNIQUET SYSTEM-ZIMMER ATS 2000	10/14/1997	10	10/14/2007	11,840	11,840	-
6330	125745	TOURNIQUET SYS ZIMMER ATS 2000	10/14/1997	10	10/14/2007	11,840	11,840	-
6330	130633	TOURNIQUET SYS ZIMMER ATS 2000	10/14/1997	10	10/14/2007	11,840	11,840	-
6330	127229	ELECTROSURGICAL UNIT CON MED	10/16/1997	10	10/16/2007	7,946	7,946	-

6340	127022	MONITOR-FETAL/BEDSIDE/NEONATLE	10/20/1997	10	10/20/2007	104,340	104,340	-
6340	127025	MONITOR-FETAL/BEDSIDE/NEONATAL	10/20/1997	10	10/20/2007	104,340	104,340	-
6340	127026	MONITOR-FETAL/BEDSIDE/NEONATAL	10/20/1997	10	10/20/2007	104,340	104,340	-
6340	127027	MONITOR-FETAL/BEDSIDE/NEONATAL	10/20/1997	10	10/20/2007	104,340	104,340	-
6505	128602	BEDS/MANUAL	10/22/1997	10	10/22/2007	12,456	12,456	-
6505	128604	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6308	128607	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6308	128609	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6308	128610	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6505	128603	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6505	128605	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6505	128606	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6505	128608	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6505	128611	BEDS/MANUAL	10/22/1997	10	10/22/2007	13,254	13,254	-
6340	127055	BEDS/BIRTHING	10/22/1997	10	10/22/2007	16,004	16,004	-
6340	127061	BEDS/BIRTHING	10/22/1997	10	10/22/2007	16,004	16,004	-
6551	127431	TRASH PACKER UNIT MOD TA4500	10/29/1997	10	10/29/2007	10,597	10,597	-
6330	136294	TABLE SYSTEM UROLOGICAL/LIEBEL	11/7/1997	10	11/7/2007	254,162	254,162	-
6355	128774	SYSTEM-PROCESSOR KODAK M354-M	11/21/1997	10	11/21/2007	10,022	10,022	-
6355	128784	SYSTEM-MEDRAD MARK V PLUS INJECTOR	11/21/1997	10	11/21/2007	21,604	21,604	-
6355	127264	SYSTEM-MOBILE X-RAY GE AMX 4PLUS	11/21/1997	10	11/21/2007	44,718	44,718	-
6355	127033	SYSTEM-LEGACY R/F GE	11/21/1997	10	11/21/2007	392,515	392,515	-
6355	127034	SYSTEM-LEGACY R/F W/TOMOGRAPHY GE	11/21/1997	10	11/21/2007	479,579	479,579	-
6355	127035	SYSTEM-ADVANTX TC 40CM TILT C	11/21/1997	10	11/21/2007	697,856	697,856	-
6330	127247	TABLE SURGICAL/SKYTRON	11/26/1997	15	11/26/2012	40,511	40,511	-
6330	127248	TABLE SURGICAL/SKYTRON	11/26/1997	15	11/26/2012	40,511	40,511	-
6330	127249	TABLE SURGICAL/SKYTRON	11/26/1997	15	11/26/2012	40,511	40,511	-
6365	127270	MICROSCOPE/OLYMPUS PATHOLOGY	12/8/1997	10	12/8/2007	7,690	7,690	-
6330	127246	TABLE ORTHOPEDIC/CHICK LONGREN	12/10/1997	15	12/10/2012	50,102	50,102	-
6351	127255	STERILIZATION SYSTEM/STERRAD	12/16/1997	10	12/16/2007	104,283	104,283	-
6330	127235	3-CHIP CAMERA SYSTEM W/STANDARD	12/29/1997	10	12/29/2007	15,740	15,740	-
6330	127236	3-CHIP CAMERA SYSTEMW/STANDARD	12/29/1997	10	12/29/2007	15,740	15,740	-
5775	129404	CENTIFUGE-VIROLOGY-BIOFUGE	1/12/1998	10	1/12/2008	7,123	7,123	-
6340	127179	FETAL MONITORING SYSTEM	1/21/1998	10	1/21/2008	21,543	21,543	-
6329	134741	FETAL MONITORING SYSTEM	1/21/1998	10	1/21/2008	21,543	21,543	-
6340	127172	FETAL MONITORING SYSTEM	1/21/1998	10	1/21/2008	21,543	21,543	-
6340	134744	FETAL MONITORING SYSTEM	1/21/1998	10	1/21/2008	21,543	21,543	-
6330	000009-088	SYSTEM - SINUS SHAVER SYSTEM	1/30/1998	10	1/30/2008	5,512	5,512	-
6351	128258	SONIC CLEANER SEISMIC	1/30/1998	10	1/30/2008	29,085	29,085	-
6330	000009-089	CYSTOSCOPE - FLEXIBLE	2/11/1998	10	2/11/2008	6,604	6,604	-
6330	128813	LIGHTSOURCE/XENON 175WATTS	2/11/1998	10	2/11/2008	7,644	7,644	-
6330	128612	LIGHTSOURCE/XENON 175WATTS	2/11/1998	10	2/11/2008	7,644	7,644	-
6330	130715	PRINTER-SONY VIDEO UP-5600 MDU	2/12/1998	10	2/12/2008	6,500	6,500	-
6330	130716	PRINTER- SONY VIDEO UP-5600 MDU	2/12/1998	10	2/12/2008	6,500	6,500	-
6330	131177	PRINTER- SONY VIDEO UP-5600 MDU	2/12/1998	10	2/12/2008	6,500	6,500	-
6318	128761	VIRDIA INFO CENTER-MONITORING	2/19/1998	10	2/19/2008	6,138	6,138	-
6308	128762	VIRDIA INFOCNER 8 PATIENT CAP-	2/19/1998	10	2/19/2008	13,650	13,650	-
6340	127023	MONITOR-FETAL/BEDSIDE/NEONATAL	2/19/1998	10	2/19/2008	104,340	104,340	-
6340	127024	MONITOR-FETAL/BEDSIDE/NEONATAL	2/19/1998	10	2/19/2008	104,340	104,340	-
6330	128859	MICROSCOPE-LEICA	2/19/1998	10	2/19/2008	210,027	210,027	-
5700	128204	SYSTEM-RADIOGRAPHIC /MOBILE AMX I	2/27/1998	10	2/27/2008	21,921	21,921	-

6553	128643	SECURITY FLOOR SAFE	3/27/1998	10	3/27/2008	7,120	7,120	-
6537	127407	AUDIOMETER/CLINICAL IMPEDANCE	4/8/1998	10	4/8/2008	6,210	6,210	-
6384	127419	AUDIOMETER W/AMPLIFIERS "F"	5/20/1998	10	5/20/2008	7,455	7,455	-
6544	000009-090	PHONE - OCTEL VOICEMAIL	6/3/1998	10	6/3/2008	132,880	132,880	-
6330	000009-088	SYSTEM - OSTEOPOWER MODULAR	6/10/1998	10	6/10/2008	14,706	14,706	-
6373	128195	X-RAY/GENDEX MOBILE	7/20/1998	10	7/20/2008	5,548	5,548	-
6330	127400	COLONOVideoscope	7/21/1998	10	7/21/2008	22,300	22,300	-
6380	128205	AUDIOSCAN UNIT	7/31/1998	10	7/31/2008	6,531	6,531	-
6505	125718	CHAIR TOTALIFT TRANSF TRNSPORT	7/31/1998	10	7/31/2008	7,431	7,431	-
6505	127412	CHAIR TOTALIFT TRANSF TRNSPORT	7/31/1998	10	7/31/2008	7,431	7,431	-
6505	127421	CHAIR TOTALIFT TRANSF TRNSPORT	7/31/1998	10	7/31/2008	7,431	7,431	-
6505	127420	CHAIR TOTALIFT TRANSF TRNSPORT	7/31/1998	10	7/31/2008	7,431	7,431	-
6380	000009-083	CYSTOFIBERSCOPE-CENTRAL SUPPLY	8/5/1998	10	8/5/2008	6,387	6,387	-
6359	128779	CAPINTEC DOSE CALIBRATOR	8/27/1998	10	8/27/2008	8,910	8,910	-
6359	128778	PULMONEX II SYS/LUDLUM ITEMS	8/27/1998	10	8/27/2008	9,537	9,537	-
6359	128777	CAPINTEC CAPTUS 600-THYROID UPTAKE	8/27/1998	10	8/27/2008	21,229	21,229	-
6340	134730	FETAL MONITOR HP 50XM	9/23/1998	10	9/23/2008	16,618	16,618	-
6330	000009-083	SIGMOIDOSCOPE/EVIS VIDEO	9/30/1998	10	9/30/2008	14,073	14,073	-
6330	000009-083	SIGMOIDOSCOPE/EVIS VIDEO	9/30/1998	10	9/30/2008	14,073	14,073	-
6330	000009-086	SIGMOIDOSCOPE/EVIS VIDEO	9/30/1998	10	9/30/2008	14,073	14,073	-
6330	128186	ANESTHETIC GAS MODULES	10/23/1998	10	10/23/2008	5,999	5,999	-
6330	128188	ANESTHETIC GAS MODULES	10/23/1998	10	10/23/2008	5,999	5,999	-
6330	128193	ANESTHETIC GAS MODULES	10/23/1998	10	10/23/2008	6,040	6,040	-
6330	128191	MONITORING SYSTEM VIRIDIA 24	10/23/1998	10	10/23/2008	13,632	13,632	-
6330	128192	MONITORING SYSTEM VIRIDIA 24	10/23/1998	10	10/23/2008	13,632	13,632	-
5801	129429	ANALYZER PULMINARY FUNCTN SPIRO	10/30/1998	10	10/30/2008	6,615	6,615	-
6384	000009-088	LARYNGOFIBERSCOPE ENF-P4/RHINO	11/10/1998	10	11/10/2008	6,303	6,303	-
6388	000009-088	LARYNGOFIBERSCOPE ENF-P4/RHINO "F"	11/10/1998	10	11/10/2008	6,303	6,303	-
6351	128619	DRYER/STERILE MOD #43	12/8/1998	15	12/8/2013	5,782	5,782	-
6364	128621	CYTOLOGIC SLIDE PREP MACHINE	12/16/1998	10	12/16/2008	50,021	50,021	-
6365	128217	CELL WASHER/SORVALL	12/24/1998	10	12/24/2008	7,016	7,016	-
6330	000009-084	INTUBATION FIBERSCOPE	12/24/1998	10	12/24/2008	7,480	7,480	-
5875	128218	ANALYZER/JEROME 631-X	1/12/1999	10	1/12/2009	10,147	10,147	-
6414	128745	EMBOSSER/NORCOM	2/11/1999	10	2/11/2009	10,326	10,326	-
6505	128286	COMPUTER-DESKSIDE SYSTEM	3/10/1999	5	3/10/2004	40,510	40,510	-
6313	128227	VIDEO EQUIP-UC/D RESTRAINT ROOM	5/19/1999	10	5/19/2009	7,954	7,954	-
6330	000009-083	MONITOR - NEUROSIGN 100 NERVE	5/19/1999	10	5/19/2009	11,338	11,338	-
6340	128224	SYSTEM - ULTRASOUND TRANSDUCER EV7-	6/4/1999	10	6/4/2009	11,726	11,726	-
6364	128229	CRYOSTAT W/VACUTOME HM505E	6/14/1999	10	6/14/2009	39,990	39,990	-
6330	000009-084	URETHEROPYELOSCOPE - FLEXIBLE	6/21/1999	10	6/21/2009	10,862	10,862	-
6380	128234	COLPOSCOPE/TILT STAND	7/7/1999	10	7/7/2009	8,115	8,115	-
6357	128620	TABLE - ULTRASOUND + ACCESSORIES	7/23/1999	10	7/23/2009	8,728	8,728	-
6555	128295	SUPERIOR CNSLT-CALL CENTER	8/4/1999	5	8/4/2004	718,969	718,969	-
6555	128300	SYSTEM - RIMS MANAGED CARE SYSTEM	8/4/1999	5	8/4/2004	1,826,494	1,826,494	-
6388	128255	COLPOSCOPE HB401 AL/T TILT HD	8/12/1999	10	8/12/2009	6,441	6,441	-
6330	000009-089	ACTIVA STARTER PACKAGE/SURGICAL	8/18/1999	10	8/18/2009	20,042	20,042	-
6536	128236	CYCLOCKER - BIKE LOCKER	9/20/1999	15	9/20/2014	6,558	6,558	-
6384	128747	TABLE MIDMARK	1/7/2000	15	1/7/2015	8,675	8,675	-
6384	129406	TABLE MIDMARK "D"	1/7/2000	15	1/7/2015	8,675	8,675	-
6330	000009-089	DUDDENOSCOPE JF-104F	1/12/2000	10	1/12/2010	21,975	21,975	-
6544	128298	PROJECTOR 4 LAPTOP-MED STAFF/NOON	1/27/2000	10	1/27/2010	27,792	27,792	-

6374	128246	X-RAY UNIT - PANORAMIC EC	2/4/2000	10	2/4/2010	18,538	18,538	-
5775	135860	MICROSCOPE-OLYMPUS	3/8/2000	15	3/8/2015	16,002	16,002	-
6340	128801	FETAL MONITORING SYSTEM	3/28/2000	10	3/28/2010	10,223	10,223	-
6383	128644	MONITORS W/BATTERIES	5/1/2000	10	5/1/2010	14,411	14,411	-
6383	128645	MONITORS W/BATTERIES	5/1/2000	10	5/1/2010	14,411	14,411	-
6544	128771	WORKSTATION-ROOM 12 333 C ST.L	5/9/2000	10	5/9/2010	5,877	5,877	-
5278	129252	FREEZER-WALK-IN	5/31/2000	10	5/31/2010	20,065	20,065	-
6384	128748	CHAIR - POWER EXAM FFKO "F"	6/7/2000	15	6/7/2015	6,473	6,473	-
6501	136161	CONVECTION OVEN-DBL DECK	6/9/2000	10	6/9/2010	9,246	9,246	-
5775	128864	FREEZER-UPRIGHT	6/29/2000	10	6/29/2010	9,999	9,999	-
6551	E-9095	FORKLIFT-2001 NISSAN DATSUN	1/12/2001	15	1/12/2016	21,723	21,723	-
6330	128756	COAGULATOR FOR ENDOSCOPY	1/23/2001	10	1/23/2011	21,321	21,321	-
6555	128915	COMPUTER-IBM RS/6000 SERV	3/13/2001	5	3/13/2006	165,446	165,446	-
6555	135525	PHONE - VOICE MAIL SYSTEM	3/15/2001	10	3/15/2011	83,313	83,313	-
6501	128826	STEAMER CONVECTION	4/10/2001	10	4/10/2011	11,358	11,358	-
6364	128812	SYSTEM - MICROSCOPE	4/23/2001	15	4/23/2016	24,591	24,591	-
6522	E-9097	SCOOTER-2000 CUSHMAN	4/25/2001	4	4/25/2005	19,981	19,981	-
6357	130686	SYSTEM-GE PROTEUS XR-4	5/8/2001	10	5/8/2011	96,849	96,849	-
6357	128849	SYSTEM-GE ADVANTA LEGACY R/F	5/8/2001	10	5/8/2011	317,432	317,432	-
6330	000009-090	SCAPEL GENERATOR	5/16/2001	20	5/16/2021	16,686	16,686	-
6388	128861	PHARMACY CALL BOARD	7/25/2001	15	7/25/2016	7,678	7,678	-
6388	128860	PHARMACY CALL BOARD	7/25/2001	15	7/25/2016	7,678	7,678	-
6388	128850	STERILIZER-MAGNA-CLAVE	7/25/2001	10	7/25/2011	12,420	12,420	-
6375	128831	DENTAL X-RAY UNIT	7/25/2001	10	7/25/2011	23,587	23,587	-
6388	129413	AUDIOMETER CLINICAL	7/27/2001	10	7/27/2011	6,019	6,019	-
6388	129387	SPACE SAVER SHELVINGS	7/27/2001	10	7/27/2011	9,209	9,209	-
6388	129383	AUDIOMETRIC-CONOMYSPASAV	7/30/2001	10	7/30/2011	11,572	11,572	-
6340	128817	SYSTEM - ULTRA-SOUND	8/1/2001	10	8/1/2011	17,820	17,820	-
5775	129425	INCUBATOR	8/16/2001	10	8/16/2011	8,448	8,448	-
5775	129415	CENTRIFUGE-EPPENDORF	8/16/2001	10	8/16/2011	12,011	12,011	-
6388	129389	OPHTHALMIC -LAMP SLIT	8/22/2001	10	8/22/2011	7,674	7,674	-
6388	129390	OPHTHALMIC-LAMP SLIT	8/22/2001	10	8/22/2011	7,674	7,674	-
6388	128851	WASHER-DECONTAMINATION UN	8/22/2001	15	8/22/2016	157,465	157,465	-
6330	000009-090	VIDEO COLONOSCOPE	9/13/2001	10	9/13/2011	23,506	23,506	-
6555	128965	COMPUTER-IBM NETFINITY	9/13/2001	5	9/13/2006	109,604	109,604	-
5954	130663	EMBOSSER -275	11/5/2001	10	11/5/2011	7,066	7,066	-
6352	128822	SYSTEM - TRACEMASTER ECG MGMT SYS	11/21/2001	10	11/21/2011	121,324	121,324	-
5278	128854	OVEN/STEAMER COMBO	11/27/2001	10	11/27/2011	32,324	32,324	-
6356	129424	SYSTEM - SENOGRAPH DMR+MAMMOGRA	11/27/2001	10	11/27/2011	71,978	71,978	-
6388	129400	TABLE EXAM SPEC	12/18/2001	10	12/18/2011	5,573	5,573	-
6388	129399	TABLE EXAM SPEC	12/18/2001	10	12/18/2011	5,573	5,573	-
6388	129409	SCRUBBER - AUTO HEAVY DUTY	12/31/2001	8	12/31/2009	5,207	5,207	-
6388	128853	MICROSCOPE-PILO (ZEISS)	3/25/2002	10	3/25/2012	10,702	10,702	-
6340	128837	MONITOR - ANTEPARTUM FETAL	3/29/2002	10	3/29/2012	5,334	5,334	-
6340	128838	MONITOR- ANTEPARTUM FETAL	3/29/2002	10	3/29/2012	5,334	5,334	-
6340	128839	MONITOR - ANTEPARTUM FETAL	3/29/2002	10	3/29/2012	5,334	5,334	-
6340	128840	MONITOR - ANTEPARTUM FETAL	3/29/2002	10	3/29/2012	5,334	5,334	-
6340	128841	MONITOR - ANTEPARTUM FETAL	3/29/2002	10	3/29/2012	5,334	5,334	-
6340	128842	MONITOR - ANTEPARTUM FETAL	3/29/2002	10	3/29/2012	5,334	5,334	-
6340	128843	MONITOR - ANTEPARTUM FETAL	3/29/2002	10	3/29/2012	5,334	5,334	-
6340	128844	MONITOR - FETAL/MATERNAL	3/29/2002	10	3/29/2012	15,674	15,674	-

6355	129454	PHILIPS BV LIBRA 9" MOBILE C-ARM	4/25/2002	10	4/25/2012	90,540	90,540	-
5775	130108	MOLECULAR LIGHT CYCLER	5/6/2002	10	5/6/2012	62,381	62,381	-
6505	129410	EZ PREMIER 800LBS STAND W/SCALE	5/10/2002	10	5/10/2012	11,051	11,051	-
6388	129434	SCRUBBER-NOBLES 2001	6/11/2002	8	6/11/2010	5,127	5,127	-
6555	130332	CONTROLLER-7206 VXR	7/10/2002	10	7/10/2012	31,275	31,275	-
451	129398	BED-ELECTRIC	7/12/2002	15	7/12/2017	6,964	6,964	-
6373	130648	CHAIR - DENTAL SPIRIT 2000 ADJUSTABLE	8/5/2002	10	8/5/2012	6,215	6,215	-
6373	130646	CHAIR - DENTAL SPIRIT 2000 ADJUSTABLE	8/5/2002	10	8/5/2012	6,215	6,215	-
6373	130683	CHAIR - MOUNTED DENTAL UNIT	8/5/2002	10	8/5/2012	6,215	6,215	-
6373	134748	CHAIR - MOUNTED DENTAL UNIT	8/5/2002	10	8/5/2012	6,215	6,215	-
6373	134750	CHAIR - MOUNTED DENTAL UNIT	8/5/2002	10	8/5/2012	6,215	6,215	-
5775	129445	MICROSCOPE SYSTEM-BX45TF	8/19/2002	15	8/19/2017	6,999	6,999	-
5775	129427	MICROSCOPE SYSTEM-BX 51TF FA	8/19/2002	15	8/19/2017	17,659	17,659	-
6555	130335	COMPUTER PART- 1 PORT	8/21/2002	3	8/21/2005	11,366	11,366	-
6555	130638	COMPUTER-VAX 3100 MODEL	8/27/2002	3	8/27/2005	25,434	25,434	-
6555	130240	PHONE SYS-ASPECT CALLSERVER-	8/27/2002	10	8/27/2012	40,744	40,744	-
6364	128753	TISSUE PROCESSOR VIP5	8/27/2002	10	8/27/2012	42,807	42,807	-
6308	125831	BED-HILL ROM TOTAL CARE SYS Sp02RT	10/8/2002	15	10/8/2017	35,081	35,081	-
6308	125830	BED-HILL ROM TOTAL CARE SYS Sp02RT	10/8/2002	15	10/8/2017	35,081	35,081	-
6555	128973	SERVER - IBM E PSERIES	10/8/2002	3	10/8/2005	61,790	61,790	-
6555	128974	SERVER - IBM E PSERIES	10/8/2002	3	10/8/2005	61,790	61,790	-
6505	129426	SYSTEM-VISUAL NURSE CALL	10/29/2002	10	10/29/2012	20,433	20,433	-
6380	136042	SYSTEM - OTOACOUSTIC EMISSION	11/5/2002	10	11/5/2012	7,361	7,361	-
6380	130641	AUDIO BOOTH 402-A - AUDIOMASTER	11/5/2002	10	11/5/2012	10,609	10,609	-
6384	130652	PHOTO - DISRUPTER YAG LASER	11/5/2002	10	11/5/2012	28,499	28,499	-
6380	130651	PHOTO - COAGULATOR INTEGRA	11/5/2002	10	11/5/2012	39,324	39,324	-
6380	131182	CHAIR- HAUSTED APC W/STRAP	11/7/2002	10	11/7/2012	5,460	5,460	-
6380	131183	CHAIR-HAUSTED APC W/STRAP	11/7/2002	10	11/7/2012	5,460	5,460	-
6351	130640	SYSTEM - STERILE PROCESSING STERIS	11/7/2002	10	11/7/2012	23,221	23,221	-
6380	131185	TABLE - EXAM POWER W/TOP	12/4/2002	10	12/4/2012	5,559	5,559	-
6380	131186	TABLE - EXAM POWER W/TOP	12/4/2002	10	12/4/2012	5,559	5,559	-
6380	135559	TABLE - EXAM POWER W/TOP	12/4/2002	10	12/4/2012	5,559	5,559	-
6380	130655	LIFTER SLINGW/SCALE	12/4/2002	15	12/4/2017	8,612	8,612	-
6373	130660	AIRTEC AUTO PROC-DENTAL EQ	12/18/2002	10	12/18/2012	5,007	5,007	-
6373	130659	X-RAY -DENTAL EC PANOGRAPHIC.	12/18/2002	10	12/18/2012	22,003	22,003	-
6380	130644	LAMP - SLIT WITH BEAM	12/24/2002	10	12/24/2012	10,699	10,699	-
6380	130645	LAMP - SLIT WITH BEAM	12/24/2002	10	12/24/2012	10,699	10,699	-
6380	130656	REFRACTOR KERATOMETER	12/24/2002	10	12/24/2012	12,224	12,224	-
5775	128856	MAGNA PURE LC INSTRUMENT VIROLOGY	12/31/2002	10	12/31/2012	76,534	76,534	-
6364	130639	TABLE - AUTOPSY	1/2/2003	10	1/2/2013	18,518	18,518	-
6502	136664	FREEZER-ELECTRA CS5	2/28/2003	15	2/28/2018	5,025	5,025	-
6373	128772	SYSTEM - DENTAL VACUUM	3/11/2003	10	3/11/2013	9,046	9,046	-
6355	130628	SYSTEM - XR/A RADIOGRAPHIC	3/11/2003	10	3/11/2013	96,004	96,004	-
6355	130629	SYSTEM - XR/A RADIOGRAPHIC	3/11/2003	10	3/11/2013	96,004	96,004	-
6339	130625	SYSTEM - BRONCHOSCOPE VIDEO	4/30/2003	15	4/30/2018	17,537	17,537	-
6330	130624	BRONCHOSCOPE-PRINTER COLOR OEP3	5/5/2003	15	5/5/2018	6,464	6,464	-
6330	130622	BRONCHOSCOPE-LIGHT SOURC CLV160	5/5/2003	15	5/5/2018	9,903	9,903	-
6330	130623	BRONCHOSCOPE-VIDEO/PROCESSOR	5/5/2003	15	5/5/2018	22,581	22,581	-
6330	130621	GASTROVIDEOSCOPE-GIF 160 VIDEO FLEX	5/5/2003	15	5/5/2018	22,733	22,733	-
6544	131196	SYSTEM - SCAN CONVERTER	5/28/2003	10	5/28/2013	5,186	5,186	-
6308	130681	SYSTEM - PRISMA CVHH-DIALYSIS	6/10/2003	10	6/10/2013	25,980	25,980	-

6555	130734	ROUTER-10 GBIC PORTS	6/18/2003	3	6/18/2006	6,654	6,654	-
6555	130740	SWITCH-CISCO CATALYST 3550	6/18/2003	10	6/18/2013	6,654	6,654	-
6555	130737	ROUTER-10 GBIC PORTS	6/18/2003	3	6/18/2006	6,654	6,654	-
6555	130739	CONTROLLER-7204VXR BUNDLE	6/18/2003	3	6/18/2006	6,990	6,990	-
6555	130741	CONTROLLER-7204VXR BUNDLE	6/18/2003	3	6/18/2006	6,990	6,990	-
6555	130738	CONTROLLER-7204VXR BUNDLE	6/18/2003	3	6/18/2006	6,990	6,990	-
6537	130690	SYSTEM - ULTRASOUND EQUIP-BLADDER	6/18/2003	10	6/18/2013	12,434	12,434	-
6537	130669	SYSTEM-ELECTROENCEPHALOGRAPH	6/18/2003	10	6/18/2013	18,790	18,790	-
6555	130246	SERVER-IBM #866711AX X SERIES	7/14/2003	3	7/14/2006	16,454	16,454	-
6555	130247	SERVER - RACKMOUNT RS6000	7/18/2003	3	7/18/2006	23,977	23,977	-
6555	130257	AUTOLOADER - IBM ULTRIUM	7/23/2003	3	7/23/2006	8,712	8,712	-
6330	129419	LIGHT SOURCE X6000 - XENON	7/25/2003	10	7/25/2013	5,854	5,854	-
6330	129420	CAMERA CONTROL UNIT -CCU	7/25/2003	10	7/25/2013	8,330	8,330	-
6330	129440	C-MOUNT HEAD COUPLER	7/25/2003	10	7/25/2013	9,168	9,168	-
6330	129441	C-MOUNT HEAD COUPLER	7/25/2003	10	7/25/2013	9,168	9,168	-
6330	129443	CAMERA C-MOUNT HEAD COUPLER	7/25/2003	10	7/25/2013	9,168	9,168	-
6330	130618	CAMERA-C-MOUNT HEAD COUPLER	7/25/2003	10	7/25/2013	9,168	9,168	-
6330	130619	CAMERA-C-MOUNT HEAD COUPLER	7/25/2003	10	7/25/2013	9,168	9,168	-
6330	130620	CAMERA-C-MOUNT HEAD COUPLER	7/25/2003	10	7/25/2013	9,168	9,168	-
6334	130668	STRETCHER - EYE SURGERY	7/29/2003	10	7/29/2013	5,387	5,387	-
6373	130647	CHAIR - DENTAL SPIRIT 2000 ADJUSTABLE	8/5/2003	10	8/5/2013	6,215	6,215	-
6373	134749	CHAIR - MOUNTED DENTAL UNIT	8/5/2003	10	8/5/2013	6,215	6,215	-
6365	130679	MINI VIDAS - CULTURE TEST SWAB DIMER	8/12/2003	10	8/12/2013	16,400	16,400	-
6330	130665	GAMMA FINDER MODEL#G100	8/13/2003	10	8/13/2013	22,462	22,462	-
6555	130262	SERVER-IBM SERIES 225	9/10/2003	3	9/10/2006	9,356	9,356	-
6330	130664	SYS-SAFE TRANSPOSAL FLUID WASTE	9/22/2003	10	9/22/2013	24,683	24,683	-
6318	130682	MONITOR-TRANSPORT PATIENT OMNI-	9/25/2003	10	9/25/2013	5,918	5,918	-
6555	131064	PHONE SYSTEM--ASPECT CONTACT	9/25/2003	10	9/25/2013	11,651	11,651	-
6555	130267	ROUTER-CISCO ATM CES ADPTR	10/10/2003	10	10/10/2013	6,820	6,820	-
6555	130268	ROUTER-CISCO ATM CES ADPTR	10/10/2003	10	10/10/2013	6,820	6,820	-
6383	130671	STRETCHER - GYNNIE OB/GYN	12/3/2003	10	12/3/2013	6,119	6,119	-
6383	130670	STRETCHER - ATLAS 660Z	12/3/2003	10	12/3/2013	11,245	11,245	-
6380	130707	SYSTEM-WASHER/DISINFECTOR	12/31/2003	10	12/31/2013	24,378	24,378	-
5775	134734	SECURITY SYSTEM	2/4/2004	10	2/4/2014	21,226	21,226	-
6380	131181	SYS-PREVAUUM STERELIZER	2/25/2004	10	2/25/2014	24,316	24,316	-
6330	130704	EPIDURAL POSITIONING DEVICE	3/1/2004	10	3/1/2014	5,324	5,324	-
6555	130273	SERVER-IBM X SERIES 345 SUN	3/1/2004	3	3/1/2007	7,237	7,237	-
6555	130272	SERVER-IBM X SERIES 345	3/1/2004	3	3/1/2007	7,237	7,237	-
6501	130701	BRAISING PAN & CARRIER	3/23/2004	10	3/23/2014	8,489	8,489	-
6340	131192	BED-BIRTHING AFFINITY	3/23/2004	15	3/23/2019	17,523	17,523	-
6555	135709	SYSTEM-SINGLE SIGN ON BNX	3/25/2004	3	3/25/2007	179,735	179,735	-
6329	131175	MONITOR-FETAL/MATERNAL	3/31/2004	10	3/31/2014	12,598	12,598	-
6340	131176	MONITOR-FETAL/MATERNAL	3/31/2004	10	3/31/2014	12,598	12,598	-
6505	135566	BED-ADVANTA COMFORTLINE	4/30/2004	15	4/30/2019	6,110	6,110	-
6505	135563	BED-ADVANTA COMFORTLINE	4/30/2004	15	4/30/2019	6,111	6,111	-
6505	135564	BED-ADVANTA COMFORTLINE	4/30/2004	15	4/30/2019	6,111	6,111	-
6505	135565	BED-ADVANTA COMFORTLINE	4/30/2004	15	4/30/2019	6,111	6,111	-
6380	130703	SYS-ELECTROMYOGRAM (EMG)	5/19/2004	10	5/19/2014	15,555	15,555	-
6308	131179	SPORT BED ROTATIONAL MODULE	6/3/2004	15	6/3/2019	11,285	11,285	-
5775	130709	CENTRIFUGE - W/ROTOR	6/10/2004	10	6/10/2014	18,186	18,186	-
6380	131194	REFRACTOR/KERATOMETER	6/29/2004	10	6/29/2014	14,153	14,153	-

6555	131091	MONITOR-LCD LC-M3700 SHARP 37"	7/7/2004	10	7/7/2014	5,283	5,283	-
6555	131092	MONITOR-LCD LC-M3700 SHARP 37"	7/7/2004	10	7/7/2014	5,283	5,283	-
6555	131093	MONITOR-LCD LC-M3700 SHARP 37"	7/7/2004	10	7/7/2014	5,283	5,283	-
6555	131299	SWITCH-CISCO CATALYST 3550	7/9/2004	10	7/9/2014	6,955	6,955	-
6555	131295	SWITCH-CISCO CATALYST 3550	7/9/2004	10	7/9/2014	6,955	6,955	-
6555	131297	SWITCH-CISCO CATALYST 3550	7/9/2004	10	7/9/2014	6,955	6,955	-
6555	131298	SWITCH-CISCO CATALYST 3550	7/9/2004	10	7/9/2014	6,955	6,955	-
6555	131291	SWITCH-CISCO CATALYST 6500	7/9/2004	10	7/9/2014	30,017	30,017	-
6555	131292	SWITCH-CISCO CATALYST 6500	7/9/2004	10	7/9/2014	30,017	30,017	-
6555	130275	SERVER-HP PROILANT	7/13/2004	3	7/13/2007	6,582	6,582	-
6380	131193	ULTRASOUND-EYE SCANNER	7/15/2004	10	7/15/2014	7,312	7,312	-
6352	131195	SYST-TRANSDUCER UPGRADE	7/27/2004	10	7/27/2014	40,001	40,001	-
6330	131178	SYSTEM-5000 ELECTROSURGICAL	8/4/2004	10	8/4/2014	10,284	10,284	-
6412	131201	DENTAL CHAIR-ELECTRIC/LIGHT	8/10/2004	10	8/10/2014	5,665	5,665	-
6555	131061	SWITCH-10 GBIC MODULE SLOTS	8/10/2004	10	8/10/2014	8,500	8,500	-
6555	131059	SWITCH-10 GBIC MODULE SLOTS	8/11/2004	10	8/11/2014	8,500	8,500	-
6555	131058	SERVER-PROILANT M1350	8/17/2004	3	8/17/2007	5,670	5,670	-
6358	131198	SYSTEM-MRI SMARTSPEED	8/23/2004	10	8/23/2014	1,509,835	1,509,835	-
6555	131107	IMAGE VIEWING STATION/CCRM	10/19/2004	10	10/19/2014	15,910	15,910	-
6555	131109	IMAGE VIEWING STATION/CCRM	10/19/2004	10	10/19/2014	15,910	15,910	-
6555	131106	DIAGNOSTIC VIEWING STATION /CCRM	10/19/2004	10	10/19/2014	56,787	56,787	-
6555	131108	DIAGNOSTIC VIEWING	10/19/2004	10	10/19/2014	56,787	56,787	-
6555	131110	DIAGNOSTIC VIEWING STATION/CCRM	10/19/2004	10	10/19/2014	56,787	56,787	-
6555	131111	DIAGNOSTIC VIEWING STATION/CCRM	10/19/2004	10	10/19/2014	56,787	56,787	-
6555	131112	DIAGNOSTIC VIEWING STATION/CCRM	10/19/2004	10	10/19/2014	56,787	56,787	-
6555	131113	DIAGNOSTIC VIEWING	10/19/2004	10	10/19/2014	56,787	56,787	-
6555	131084	TAPE LIBRARY-L20 4TB CAPACITY	10/19/2004	10	10/19/2014	78,385	78,385	-
6555	131080	HARD DRIVE STORAGE ARRAY/PITTSBURG	10/19/2004	10	10/19/2014	146,036	146,036	-
6555	131075	SERVER-STRATUS FT 6600-DATA CENTER	10/19/2004	10	10/19/2014	339,144	339,144	-
6340	130711	DELIVERY LIGHT-CEILING MOUNTED	11/17/2004	10	11/17/2014	14,965	14,965	-
5875	E-6824	FREIGHTLINER-2005 HORTON	11/19/2004	6	11/19/2010	193,228	193,228	-
6555	131069	TAPE-LIBRARY IBM 4560 SLX	12/10/2004	10	12/10/2014	21,411	21,411	-
5875	131646	IDENTIFINDER-HAZARDOUS MAT	1/7/2005	10	1/7/2015	9,629	9,629	-
5775	131403	STERILIZER-AUTOClave#3870EP	1/19/2005	10	1/19/2015	13,067	13,067	-
5775	131407	SYSTEM-ILLUMINATOR/OLYMPUS	1/27/2005	10	1/27/2015	76,174	76,174	-
6345	131215	MOBILE ISOLATION CHAMBER	2/16/2005	15	2/16/2020	33,887	33,887	-
6345	131214	MOBILE ISOLATION CHAMBER	2/16/2005	15	2/16/2020	56,620	56,620	-
6522	131204	SYSTEM-SAKURA TISSUE EMBEDDER	2/23/2005	10	2/23/2015	9,091	9,091	-
6355	131221	RADIOLOGY EQUIP-VIDAR DIAGNOSTIC	2/25/2005	10	2/25/2015	14,221	14,221	-
6356	131226	RADIOLOGY EQUIP-VIDAR DIAGNOSTIC	2/25/2005	10	2/25/2015	14,221	14,221	-
6355	131219	RADIOLOGY EQUIP-AGFA SOLO CR 25.0	2/25/2005	10	2/25/2015	40,976	40,976	-
6355	131205	RADIOLOGY EQUIP-AGFA COMPACT	2/25/2005	10	2/25/2015	78,340	78,340	-
6355	131220	RADIOLOGY EQUIP-AGFA COMPACT	2/25/2005	10	2/25/2015	78,340	78,340	-
5775	134737	BLOOD CULTURING INSTRUMENT	3/1/2005	10	3/1/2015	11,366	11,366	-
6358	131197	MONITOR SYS-MAGNITUDE VITAL SIGNS	3/10/2005	10	3/10/2015	38,970	38,970	-
6352	131203	SYSTEM-ULTRADYNAMIC STRES	4/7/2005	10	4/7/2015	104,883	104,883	-
6555	131231	SERVER-DICOM	5/6/2005	10	5/6/2015	6,170	6,170	-
6365	131210	REFRIGERATOR-HELMER BLOOD BANK	5/31/2005	15	5/31/2020	10,271	10,271	-
6555	131134	SERVER-JAIL OMNI LINK SERVER	6/10/2005	3	6/10/2008	7,224	7,224	-
6502	131216	ICE MAKER-HOSHIZAKI KML600	6/20/2005	10	6/20/2015	5,179	5,179	-
6355	131222	PAXPORT DIGITAL-AGFA	6/28/2005	10	6/28/2015	5,413	5,413	-

6355	131223	PAXPORT DIGITAL	6/28/2005	10	6/28/2015	5,413	5,413	-
6357	131637	PAXPORT DIGITAL-AGFA	6/28/2005	10	6/28/2015	5,413	5,413	-
6355	131236	SYSTEM-WORKSTATION	6/28/2005	10	6/28/2015	23,987	23,987	-
6555	131495	DEVICE-NETWORK MONITORING	6/30/2005	3	6/30/2008	6,159	6,159	-
6555	131492	DEVICE-ENTERPRISE SECURITY	6/30/2005	3	6/30/2008	14,235	14,235	-
6555	131240	SYSTEMS-PACS RHC BACKROOM	7/8/2005	10	7/8/2015	56,354	56,354	-
6365	131217	ANALYZER-BECKMAN W/PRINTER	7/12/2005	10	7/12/2015	33,573	33,573	-
6555	131088	SERVER-VMWARE W/AUTO LOADER	8/3/2005	3	8/3/2008	17,917	17,917	-
6537	131239	SYS-ULTRASOUND LOGIQ BOOK X P DEMO	8/23/2005	10	8/23/2015	24,104	24,104	-
6383	131238	SYS-ULTRASOUND LOGIQ BOOK XP	8/23/2005	10	8/23/2015	41,279	41,279	-
6330	131235	VIDEO COLONOSCOPE PCF160AL	9/8/2005	10	9/8/2015	20,453	20,453	-
6359	133289	INFINIA HAWKEYE SYSTEM	10/5/2005	10	10/5/2015	448,943	448,943	-
6356	131237	SYSTEM-ULTRASOUND LOGIC 9 DEMO	11/3/2005	10	11/3/2015	145,975	145,975	-
6380	131227	MICROSCOPE-CARL ZEISS R-#7	11/21/2005	15	11/21/2020	10,888	10,888	-
6555	131137	SERVER-HP DL385-DEC SYSTEM	12/9/2005	3	12/9/2008	14,063	14,063	-
6555	134093	BLADE AVAILABLE - BLD 6	12/13/2005	3	12/13/2008	5,390	5,390	-
7406	133394	SYS-EMERGENCY SIMULATOR	1/1/2006	10	1/1/2016	65,405	65,405	-
5775	131641	THERMAL CYCLER-PCR SYSTEM	1/13/2006	10	1/13/2016	5,432	5,432	-
5775	131639	THERMAL CYCLER-PCR SYSTEM	1/13/2006	10	1/13/2016	5,432	5,432	-
6308	131635	SYSTEM-MRI CONTINUUM DUAL IV PUMP	1/31/2006	10	1/31/2016	18,403	18,403	-
6555	135700	SYSTEM-SAN SOLUTION	1/31/2006	3	1/31/2009	181,161	181,161	-
6365	131234	FREEZER-HORIZON SERIES	2/1/2006	10	2/1/2016	8,481	8,481	-
5875	E-6868	TRUCK-2006 FORD F650	2/17/2006	4	2/17/2010	74,402	74,402	-
6555	135702	SYSTEM-SAN SOLUTION	2/17/2006	3	2/17/2009	126,441	126,441	-
6555	135699	SERVER - DELL 2850 WINDOWS SERVER	3/6/2006	3	3/6/2009	36,715	36,715	-
6555	131136	SYSTEM-IBM 550 2-WAY-KEANE MORDID	3/8/2006	3	3/8/2009	53,557	53,557	-
6339	134751	SYSTEM-EAGLE PULMONARY	3/28/2006	10	3/28/2016	27,880	27,880	-
6555	135701	SERVER-IBM OMNICELL	3/31/2006	3	3/31/2009	13,791	13,791	-
5875	134756	SYSTEM-HAZMAT ID	3/31/2006	10	3/31/2016	89,466	89,466	-
6555	131139	SWITCH-CISCO CATALYST 4948	4/11/2006	3	4/11/2009	10,142	10,142	-
6559	131253	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	5,553	5,553	-
6303	131254	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6304	131632	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6307	131630	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6308	131256	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6313	131247	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6318	131249	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6325	131255	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6330	131251	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6334	131252	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6340	131248	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6352	131631	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6381	131638	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6383	131250	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6383	131257	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6352	131633	DEFIBRILLATOR-HEARTSTART MRX	4/28/2006	10	4/28/2016	8,787	8,787	-
6555	135704	PHONE SYS-ASPECT TELECOMM	4/28/2006	10	4/28/2016	24,323	24,323	-
6555	131148	SAN ARRAY TRAY & DISC	6/15/2006	3	6/15/2009	26,352	26,352	-
6555	135705	IBM BLADE SERVER VMBLADE 12	6/19/2006	10	6/19/2016	9,186	9,186	-
6555	135706	IBM BLADE SERVER VMBLADE 11	6/19/2006	10	6/19/2016	9,186	9,186	-
6555	131145	SERVER-BLADECENTER HS20 VMWARE	6/23/2006	3	6/23/2009	6,304	6,304	-

5887	131141	PLOTTER-HP DESIGN JET 800/820	6/27/2006	10	6/27/2016	19,295	19,295	-
6330	133743	SYSTEM-ELECTROSURG 5000	10/6/2006	10	10/6/2016	12,609	12,609	-
6555	135707	SERVER-XSERIES 346	10/25/2006	10	10/25/2016	9,445	9,445	-
7406	133293	METI PEDIASIM-ECS BASE UNIT SYST 253k	1/1/2007	10	1/1/2017	70,586	70,586	-
6388	133922	CAMERA SYSTEM-SONY	1/25/2007	15	1/25/2022	21,716	21,716	-
6388	133924	CAMERA SYSTEM-SONY	1/25/2007	15	1/25/2022	21,716	21,716	-
6388	133921	CAMERA SYSTEM-SONY	1/25/2007	15	1/25/2022	21,716	21,716	-
6388	133923	CAMERA SYSTEM-SONY	1/25/2007	15	1/25/2022	21,716	21,716	-
5875	133281	THERMAL IMAGING CAMERA SYS	1/25/2007	15	1/25/2022	21,981	21,981	-
5875	133282	THERMAL IMAGING CAMERA SYS	1/25/2007	15	1/25/2022	21,981	21,981	-
6379	133306	TENOR LIFT-BARIATRIC	1/29/2007	10	1/29/2017	7,919	7,919	-
6352	133268	TREADMILL SYS-TRACKMASTER	1/31/2007	10	1/31/2017	21,332	21,332	-
6537	133269	TREADMILL SYS-TRACKMASTER	1/31/2007	10	1/31/2017	21,332	21,332	-
6330	133297	SYS-AMO SOVEREIGN (PHAC O	3/23/2007	10	3/23/2017	84,976	84,976	-
6308	133284	MONITOR-VIGILANCE II #VIG2	4/11/2007	10	4/11/2017	7,578	7,578	-
6505	133276	BED-HILL-ROM VERSACARE	5/31/2007	15	5/31/2022	6,458	6,458	-
6505	133271	BED-HILL-ROM VERSACARE	5/31/2007	15	5/31/2022	6,458	6,458	-
6505	133272	BED-HILL-ROM VERSACARE	5/31/2007	15	5/31/2022	6,458	6,458	-
6505	133273	BED-HILL-ROM VERSACARE	5/31/2007	15	5/31/2022	6,458	6,458	-
6505	133274	BED-HILL-ROM VERSACARE	5/31/2007	15	5/31/2022	6,458	6,458	-
6505	133275	BED-HILL-ROM VERSACARE	5/31/2007	15	5/31/2022	6,458	6,458	-
6413	133305	X-RAY-INTRAORAL IXM2002	6/7/2007	10	6/7/2017	5,314	5,314	-
5875	133283	MERCURY ANALYZER	6/15/2007	10	6/15/2017	9,028	9,028	-
6388	133303	MONITOR-ANTEPARTUM FETAL AVALON	6/21/2007	10	6/21/2017	8,518	8,518	-
6388	133304	MONITOR-ANTEPARTUM FETAL AVALON	6/21/2007	10	6/21/2017	8,518	8,518	-
6339	134758	SYSTEM-INFANT FLOW NCPAP	6/29/2007	10	6/29/2017	6,195	6,195	-
6365	133941	CENTRIFUGE SYSTEM-ALLEGRA X-22	7/11/2007	10	7/11/2017	6,642	6,642	-
6340	133933	SYSTEM-ULTRASOUND LOGIQ XP PRO	7/19/2007	10	7/19/2017	11,908	11,908	-
6380	133299	SYSTEM-ULTRASOUND LOGIQ AS	7/19/2007	10	7/19/2017	25,439	25,439	-
6364	133311	SYSTEM-TISSUE LABEL CASSETTE	7/23/2007	10	7/23/2017	17,114	17,114	-
6374	133288	SYSTEM-DENTAL CHAIR	7/27/2007	10	7/27/2017	17,332	17,332	-
6374	133286	SYSTEM-DENTAL CHAIR SPIRIT 300	7/27/2007	10	7/27/2017	17,332	17,332	-
6374	133287	SYSTEM-DENTAL CHAIR DELTON & CRANE	7/27/2007	10	7/27/2017	17,332	17,332	-
5775	133317	MICROSCOPE SYS-OLYMPUS BACTI	8/13/2007	15	8/13/2022	10,313	10,313	-
5775	133742	MICROSCOPE SYS-OLYMPUS MYCOLOGY	8/13/2007	15	8/13/2022	10,313	10,313	-
6555	E-4659	VAN-2007 FORD E150 CARGO	8/22/2007	4	8/22/2011	15,353	15,353	-
6357	133761	AGFA NX CR 85 SYSTEM	10/23/2007	10	10/23/2017	125,105	125,105	-
6555	131153	SERVER-MODEL 55A	11/28/2007	3	11/28/2010	47,168	47,168	-
6555	131154	SERVER-MODEL 55A	11/28/2007	3	11/28/2010	47,168	47,168	-
6380	135549	SYS-LARYNGOVideoscope	12/7/2007	10	12/7/2017	43,632	43,632	-
6380	133939	VIDEO PROCESSOR & LIGHT SOURCE CV-	1/11/2008	10	1/11/2018	6,411	6,411	-
6380	133934	VIDEO FLEXIBLE SIGMOIDOSCOPE #OSF V-	1/11/2008	10	1/11/2018	9,260	9,260	-
6380	133936	VIDEO FLEXIBLE SIGMOIDOSCOPE #OSF V-	1/11/2008	10	1/11/2018	9,260	9,260	-
6380	133937	VIDEO FLEXIBLE SIGMOIDOSCOPE #OSF V-	1/11/2008	10	1/11/2018	9,260	9,260	-
6330	133296	URETERO-RENO FIBERSCOPE	1/11/2008	10	1/11/2018	16,432	16,432	-
6330	133295	URETERO-RENO FIBERSCOPE	1/11/2008	10	1/11/2018	16,432	16,432	-
6555	133597	SERVER-HP DL 385G2	1/29/2008	3	1/29/2011	13,185	13,185	-
6315	134739	NEWBORN HEARING SCREENER	2/1/2008	10	2/1/2018	17,941	17,941	-
6352	133772	CARDIOGRAPH/CART EKG SYS	3/7/2008	10	3/7/2018	13,293	13,293	-
6555	131156	SCANNER-DESIGNJET 4500	3/19/2008	10	3/19/2018	17,255	17,255	-
6555	135708	SERVER-MEDITECH MAGIC OSAL	3/25/2008	5	3/25/2013	42,128	42,128	-

6364	133940	MICROM CRYOSTAT PKG HM550	3/27/2008	10	3/27/2018	28,601	28,601	-
5700	134583	SYSTEM-DENTAL CHAIR	4/10/2008	10	4/10/2018	16,849	16,849	-
6375	136668	DENTAL CHAIR-ASEP, NARO BACK	4/30/2008	10	4/30/2018	7,874	7,874	-
6555	131157	ANALYZER-FLUKE NETWORK DTX 1800-	5/21/2008	15	5/21/2023	8,893	8,893	-
6339	133773	VENTILATOR-MRI COMPATIBLE	5/21/2008	10	5/21/2018	13,848	13,848	-
6555	133598	HARD DISK ARRAY	5/21/2008	3	5/21/2011	17,600	17,600	-
6380	133763	OTV-SI A VIDEO SYTEM W/PUMP	6/25/2008	15	6/25/2023	7,008	7,008	-
6380	133764	CYF-V2 VIDEO CYSTOSCOPE NEPHRO	6/25/2008	15	6/25/2023	16,352	16,352	-
5875	134754	WEATHERPAK SYSTEM	7/1/2008	15	7/1/2023	14,960	14,960	-
5875	134938	WEATHERPAK SYSTEM	7/1/2008	15	7/1/2023	14,960	14,960	-
5278	136790	KITCHEN EQUIP-COMBINATION OVEN	7/7/2008	10	7/7/2018	35,412	35,412	-
6330	134429	SYSTEM-ELECTROSURGICAL	7/9/2008	10	7/9/2018	10,868	10,868	-
6555	133601	SCANNER-FUJITSU F1-5750C RMC MED	7/18/2008	10	7/18/2018	5,690	5,690	-
6555	133599	SCANNER-FUJITSU F1-5750C RMC MED	7/18/2008	10	7/18/2018	5,690	5,690	-
6555	134073	SERVER-IBM BLADE CTR 7995	8/19/2008	3	8/19/2011	5,290	5,290	-
6352	135526	ULTRASOUND-OEM REF SONOS	8/19/2008	10	8/19/2018	6,477	6,477	-
6555	133809	SERVER-IBM 3650 QICLINKWEB	8/19/2008	3	8/19/2011	7,401	7,401	-
6555	135710	EMBOSSER 275	8/27/2008	10	8/27/2018	11,612	11,612	-
6555	134079	SERVER-IBM TAPE LIB 3573	8/29/2008	3	8/29/2011	6,630	6,630	-
6329	133765	ANESTHESIA MACHINE-FABIUS	9/12/2008	10	9/12/2018	46,465	46,465	-
6329	133766	ANESTHESIA MACHINE-FABIUS	9/12/2008	10	9/12/2018	46,465	46,465	-
6335	133767	ANESTHESIA MACHINE-FABIUS OR1	9/12/2008	10	9/12/2018	46,465	46,465	-
6335	133768	ANESTHESIA MACHINE-FABIUS OR3	9/12/2008	10	9/12/2018	46,465	46,465	-
6335	133769	ANESTHESIA MACHINE-FABIUS OR2	9/12/2008	10	9/12/2018	46,465	46,465	-
6335	133770	ANESTHESIA MACHINE-FABIUS OR4	9/12/2008	10	9/12/2018	46,465	46,465	-
6335	133771	ANESTHESIA MACHINE-FABIUS CYSTO	9/12/2008	10	9/12/2018	46,465	46,465	-
6555	133792	SYS-AGFA DIAGNOSTIC IMAGING	11/3/2008	10	11/3/2018	49,950	49,950	-
6555	133806	FIBER CHANNEL SWITCH - BROCADE 5000	11/13/2008	10	11/13/2018	17,043	17,043	-
6555	133805	FIBER CHANNEL SWITCH - BROCADE 5000	11/13/2008	10	11/13/2018	17,043	17,043	-
6364	135528	MICROSCOPE SYS-NIKON ERGONOMIC	12/1/2008	15	12/1/2023	6,254	6,254	-
6413	134134	CABINET-SIDE CUSTOM MADE	12/3/2008	10	12/3/2018	6,107	6,107	-
6351	133762	ENF- GP FLEXIBLE RHINOLARYNGOSCOPE	12/3/2008	10	12/3/2018	6,436	6,436	-
6413	134132	TREATMENT CTR W/HP CONTROL	12/3/2008	10	12/3/2018	8,426	8,426	-
6413	134133	TREATMENT CTR W/HP CONTROL	12/3/2008	10	12/3/2018	8,426	8,426	-
6413	134130	CABINET-96" LONG DIVIDER	12/3/2008	10	12/3/2018	9,807	9,807	-
6413	134131	CABINET-CUSTOM STERI	12/3/2008	10	12/3/2018	13,334	13,334	-
6330	133314	ANALYZER-CTRACK AUTO SYS	12/16/2008	10	12/16/2018	25,331	25,331	-
6559	134129	DEFIBILLATOR-HEARTSTART	12/22/2008	10	12/22/2018	8,866	8,866	-
6555	135711	SERVER-EMC CX500 CLARION	12/29/2008	3	12/29/2011	13,173	13,173	-
6555	135712	SERVER-EMC CX500 CLARION	12/29/2008	3	12/29/2011	13,173	13,173	-
6380	135550	OPTALMIC SYS-ASCAN MACHINE	1/14/2009	10	1/14/2019	29,005	29,005	-
6540	133745	ACLS LEARNING MODULE (EMS)	1/27/2009	10	1/27/2019	5,651	5,651	-
6329	134146	MONITOR-GAS ID	2/19/2009	10	2/19/2019	9,135	9,135	-
6335	134428	MONITOR-GAS ID	2/19/2009	10	2/19/2019	9,135	9,135	-
6335	134763	MONITOR-GAS ID OR3	2/19/2009	10	2/19/2019	9,135	9,135	-
6335	134765	MONITOR-GAS ID	2/19/2009	10	2/19/2019	9,135	9,135	-
6335	134766	MONITOR-GAS ID OR1	2/19/2009	10	2/19/2019	9,135	9,135	-
6329	134939	MONITOR-GAS ID	2/19/2009	10	2/19/2019	9,135	9,135	-
6335	134430	MONITOR-GAS ID	2/19/2009	10	2/19/2019	9,135	9,135	-
6329	134431	MONITOR-PHYSIOLOGIC-HEART	2/19/2009	10	2/19/2019	16,570	16,570	-
6335	134426	MONITOR-PHYSIOLOGIC OR2	2/19/2009	10	2/19/2019	16,570	16,570	-

6335	134427	MONITOR-PHYSIOLOGIC OR1	2/19/2009	10	2/19/2019	16,570	16,570	-
6329	134433	MONITOR-PHYSIOLOGIC-HEART	2/19/2009	10	2/19/2019	16,570	16,570	-
6335	134764	MONITOR-PHYSIOLOGIC OR3	2/19/2009	10	2/19/2019	16,570	16,570	-
6335	134767	MONITOR-PHYSIOLOGIC CYSTO	2/19/2009	10	2/19/2019	16,570	16,570	-
6335	134145	MONITOR-PHYSIOLOGIC OR4	2/19/2009	10	2/19/2019	16,570	16,570	-
6339	133925	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6339	133927	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6339	133928	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6339	133929	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6339	133930	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6339	133931	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6339	133932	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6339	133926	VENTILATOR SYSTEM-PB-840	2/23/2009	10	2/23/2019	29,201	29,201	-
6375	133757	DENTAL UNITS PELTON/CRA SP2000	2/27/2009	10	2/27/2019	7,368	7,368	-
6375	133759	DENTAL UNITS PELTON/CRA SP2000	2/27/2009	10	2/27/2019	7,368	7,368	-
6375	133758	DENTAL CHAIR SYSTEM # 3004 ERGO	2/27/2009	10	2/27/2019	8,006	8,006	-
6375	133760	DENTAL CHAIR SYSTEM # 3004 ERGO	2/27/2009	10	2/27/2019	8,006	8,006	-
6330	134437	THERAPEUTIC GASTROSCOPE	3/10/2009	10	3/10/2019	38,793	38,793	-
6413	133756	ULTRACLAVE-DENTAL STERILIZER	3/16/2009	10	3/16/2019	5,048	5,048	-
5875	E-9137	2009 KAWASAKI MUEL 4 X 4-ATV	4/1/2009	4	4/1/2013	9,786	9,786	-
6330	133920	ELECTRO SURGICAL GENERATOR	4/13/2009	10	4/13/2019	13,972	13,972	-
5875	133974	ENTRY LINK VIDEO-WIRELESS SEARCH	4/16/2009	10	4/16/2019	19,262	19,262	-
5875	133975	ENTRY LINK VIDEO-WIRELESS SEARCH	4/16/2009	10	4/16/2019	19,262	19,262	-
6384	135635	OTV-SI OFFICE VID SYS W/OUT PUMP	5/12/2009	10	5/12/2019	7,008	7,008	-
6388	135684	OTV-SI OFFICE VID SYS W/OUT PUMP	5/12/2009	10	5/12/2019	7,008	7,008	-
6384	135633	VISERA CYSTO-NEPHRO VIDEOSCOPE	5/12/2009	10	5/12/2019	16,352	16,352	-
6388	135682	VISERA CYSTO-NEPHRO VIDEOSCOPE	5/12/2009	10	5/12/2019	17,006	17,006	-
6384	135634	VISERA CYSTO-NEPHRO VIDEOSCOPE	5/12/2009	10	5/12/2019	25,742	25,742	-
6388	135683	VISERA CYSTO-NEPHRO VIDEOSCOPE	5/12/2009	10	5/12/2019	26,396	26,396	-
6383	135614	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	6,679	6,679	-
6383	135615	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	6,679	6,679	-
6383	135616	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	6,679	6,679	-
6383	135618	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	6,679	6,679	-
6383	135619	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	6,679	6,679	-
6383	136188	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	6,679	6,679	-
6383	136189	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	6,679	6,679	-
6383	135613	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	7,108	7,108	-
6383	135620	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	7,108	7,108	-
6383	136187	CART-INFOLOGIX 08 ULTRA CPU	5/19/2009	10	5/19/2019	7,108	7,108	-
6555	135717	BROCADE SAN SWITCH	5/22/2009	10	5/22/2019	7,914	7,914	-
6555	135718	BROCADE SAN SWITCH	5/22/2009	10	5/22/2019	7,914	7,914	-
6340	133781	FETAL MONITOR-AVALON FM30	5/22/2009	10	5/22/2019	14,104	14,104	-
6340	133780	FETAL MONITOR-AVALON FM30	5/22/2009	10	5/22/2019	14,104	14,104	-
6340	133779	FETAL MONITOR-AVALON FM50	5/22/2009	10	5/22/2019	15,719	15,719	-
6340	133778	FETAL MONITOR-AVALON FM50	5/22/2009	10	5/22/2019	15,719	15,719	-
6355	135537	BREAST BIOPSY DRIVER/DEVICE	6/8/2009	10	6/8/2019	8,606	8,606	-
6340	133746	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-
6340	133748	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-
6340	133749	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-
6340	133750	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-
6340	133753	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-

6340	133754	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-
6340	133747	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-
6340	133752	BED-AFFINITY BIRTHING	6/12/2009	15	6/12/2024	16,936	16,936	-
6355	134434	CT SYS-LIGHTSPEED VCT GE MULTISLICE	6/12/2009	10	6/12/2019	1,361,792	1,361,792	-
6330	134421	ENDOSCOPE-VIEWING MONITOR	6/16/2009	10	6/16/2019	5,487	5,487	-
6330	134403	ENDOSCOPE-VIEWING MONITOR	6/16/2009	10	6/16/2019	5,487	5,487	-
6330	134404	ENDOSCOPE-VIEWING MONITOR	6/16/2009	10	6/16/2019	5,487	5,487	-
6330	135581	ENDOSCOPE-VIEWING MONITOR	6/16/2009	10	6/16/2019	5,487	5,487	-
6330	135587	ENDOSCOPE-HDTV SURGIAL DIS	6/16/2009	10	6/16/2019	6,146	6,146	-
6330	135580	ENDOSCOPE-HDTV SURGIAL DIS	6/16/2009	10	6/16/2019	6,146	6,146	-
6330	134405	ENDOSCOPE-PNEUMO SURE KIT	6/16/2009	10	6/16/2019	6,821	6,821	-
6330	134417	ENDOSCOPE-PNEUMO SURE KIT	6/16/2009	10	6/16/2019	6,821	6,821	-
6330	134422	ENDOSCOPE-PNEUMO SURE KIT	6/16/2009	10	6/16/2019	6,821	6,821	-
6330	135610	ENDOSCOPE-PNEUMO SURE KIT	6/16/2009	10	6/16/2019	6,821	6,821	-
6330	134402	ENDOSCOPE-LIGHT SOURCE	6/16/2009	10	6/16/2019	7,136	7,136	-
6330	134410	ENDOSCOPE-LIGHT SOURCE	6/16/2009	10	6/16/2019	7,136	7,136	-
6330	134424	ENDOSCOPE-LIGHT SOURCE	6/16/2009	10	6/16/2019	7,136	7,136	-
6330	135586	ENDOSCOPE-LIGHT SOURCE	6/16/2009	10	6/16/2019	7,136	7,136	-
6330	135576	LIGHT SOURCE CLV-S40 PRO 300W	6/16/2009	10	6/16/2019	7,992	7,992	-
6388	135685	SIGMOIDOSCOPE-FLEX OSF V60 OLYMPUS	6/16/2009	10	6/16/2019	9,345	9,345	-
6388	135687	SIGMOIDOSCOPE-FLEX OSF V60 OLYMPUS	6/16/2009	10	6/16/2019	11,071	11,071	-
6388	135686	SIGMOIDOSCOPE-FLEX OSF V60 OLYMPUS	6/16/2009	10	6/16/2019	11,071	11,071	-
6330	135592	ENDOSCOPE-CAMERA HEAD/COU	6/16/2009	10	6/16/2019	12,074	12,074	-
6330	135579	ENDOSCOPE-CAMERA HEAD/COU	6/16/2009	10	6/16/2019	12,074	12,074	-
6330	135588	ENDOSCOPE-CAMERA HEAD/COU	6/16/2009	10	6/16/2019	12,074	12,074	-
6330	135589	ENDOSCOPE-CAMERA HEAD/COU	6/16/2009	10	6/16/2019	12,074	12,074	-
6330	135590	ENDOSCOPE-CAMERA HEAD/COU	6/16/2009	10	6/16/2019	12,074	12,074	-
6330	135591	ENDOSCOPE-CAMERA HEAD/COU	6/16/2009	10	6/16/2019	12,074	12,074	-
6330	134401	ENDOSCOPE-CAMERA CTRL UNIT	6/16/2009	10	6/16/2019	12,077	12,077	-
6330	134406	ENDOSCOPE-CAMERA CTRL UNIT	6/16/2009	10	6/16/2019	12,077	12,077	-
6330	134423	ENDOSCOPE-CAMERA CTRL UNIT	6/16/2009	10	6/16/2019	12,077	12,077	-
6330	135611	ENDOSCOPE-CAMERA CTRL UNIT	6/16/2009	10	6/16/2019	12,077	12,077	-
6330	135577	URETERO-ENDOEYE FLEXIBLE	6/16/2009	10	6/16/2019	13,547	13,547	-
6330	135575	CAMERA - OTV - S7 PROH-HD-12E 1.2X	6/16/2009	10	6/16/2019	13,957	13,957	-
6330	135578	VISERSA PRO VIDEO PROCESSOR OTV - S7	6/16/2009	10	6/16/2019	14,913	14,913	-
6330	135582	ENDOSCOPE-ULTRA-PRINTER	6/16/2009	10	6/16/2019	18,110	18,110	-
6330	135583	ENDOSCOPE-ULTRA-PRINTER	6/16/2009	10	6/16/2019	18,110	18,110	-
6330	135584	ENDOSCOPE-ULTRA-PRINTER	6/16/2009	10	6/16/2019	18,110	18,110	-
6365	134126	REFRIGERATOR - WALK-IN MORGUE	7/1/2009	12	7/1/2021	11,258	11,258	-
6555	134084	SERVER-HP I2000 RIMMS REFURBISHED	7/15/2009	3	7/15/2012	7,696	7,696	-
6380	135551	ULTRASOUND-LOGIQ 200 PRO	7/17/2009	10	7/17/2019	25,248	25,248	-
6388	135690	VIDEO PROCESSOR LIGHT CV60	7/23/2009	10	7/23/2019	6,470	6,470	-
6540	133755	EMS TRAINING DEVICE-12-LEAD	7/23/2009	15	7/23/2024	7,804	7,804	-
6388	135688	VIDEO SIGMOIDOSCOPE OSF V60	7/23/2009	10	7/23/2019	9,345	9,345	-
6388	135689	VIDEO SIGMOIDOSCOPE OSF V60	7/23/2009	10	7/23/2019	9,345	9,345	-
6388	135691	VIDEO SIGMOIDOSCOPE OSF V60	7/23/2009	10	7/23/2019	9,345	9,345	-
6383	133938	STRETCHER CHAIR	8/12/2009	15	8/12/2024	5,077	5,077	-
6383	133943	STRETCHER CHAIR	8/12/2009	15	8/12/2024	5,077	5,077	-
6383	133947	STRETCHER CHAIR	8/12/2009	15	8/12/2024	5,077	5,077	-
6383	133944	STRETCHER CHAIR	8/12/2009	15	8/12/2024	5,077	5,077	-
6383	133945	STRETCHER-OB-GYN GYNNIE	8/12/2009	15	8/12/2024	6,001	6,001	-

6383	133946	STRETCHER-OB-GYN GYNNIE	8/12/2009	15	8/12/2024	6,001	6,001	-
6555	135720	CX DAE ATA EXP FLD	8/21/2009	3	8/21/2012	53,736	53,736	-
6555	135719	SERVER-IBM BLADE CTR HS22	8/25/2009	3	8/25/2012	6,850	6,850	-
6555	135714	FLOOR STRIPPER HA0284	8/31/2009	8	8/31/2017	8,511	8,511	-
6330	135594	FORECETRAID ENERGY PLATFORM	9/8/2009	10	9/8/2019	30,238	30,238	-
6330	135595	FORECETRIAD ENERGY PLATFORM	9/8/2009	10	9/8/2019	30,238	30,238	-
5879	134589	SERVER	9/14/2009	3	9/14/2012	19,068	19,068	-
6383	135835	SERVER/DATA BASE-PHILIPS M3155 - U01	9/16/2009	3	9/16/2012	7,402	7,402	-
6383	135836	MP5 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	8,244	8,244	-
6383	135837	MP5 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	8,244	8,244	-
6383	135838	MP5 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	8,244	8,244	-
6383	135839	MP5 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	8,244	8,244	-
6383	135840	MP5 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	8,244	8,244	-
6383	135844	COMPUTER SYSTEM M3154 - U01 PC	9/16/2009	3	9/16/2012	9,280	9,280	-
6383	136190	MP2 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	10,719	10,719	-
6383	135842	MP2 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	10,720	10,720	-
6383	136191	MP2 PATIENT MONITOR - INTELLIVUE	9/16/2009	3	9/16/2012	10,720	10,720	-
6388	135852	BLADDERSCAN BVM 9500	9/18/2009	10	9/18/2019	14,779	14,779	-
6352	134121	EKG MACH TC 70-CARDIOGRAPH	10/14/2009	10	10/14/2019	10,447	10,447	-
6352	134122	EKG MACH TC70-CARDIOGRAPH	10/14/2009	10	10/14/2019	10,447	10,447	-
6352	134760	EKG MACH TC 70-CARDIOGRAPH	10/14/2009	10	10/14/2019	10,447	10,447	-
6383	134118	EKG MACH TC 70-CARDIOGRAPH	10/14/2009	10	10/14/2019	10,447	10,447	-
6383	136192	EKG MACH TC 70-CARDIOGRAPH	10/14/2009	10	10/14/2019	10,447	10,447	-
6555	135721	AIR CURTAIN REFRIGERATOR	10/30/2009	15	10/30/2024	7,060	7,060	-
5875	E-8618	CARGO TRAILER-OIL SPILL RESP	12/1/2009	10	12/1/2019	25,000	25,000	-
6555	135722	PHONE SYSTEM-AVAYA	12/1/2009	10	12/1/2019	126,632	126,632	-
6555	135724	SECURE ACCESS 4500 BASE SYS	12/10/2009	6	12/10/2015	5,067	5,067	-
6555	135725	SECURE ACCESS 4500 BASE SYS	12/10/2009	6	12/10/2015	5,067	5,067	-
6555	135723	SERVER-E IBM X 3650M2	12/10/2009	3	12/10/2012	9,594	9,594	-
6555	135726	SERVER-E IBM X 3650M2	12/10/2009	3	12/10/2012	21,344	21,344	-
6555	135727	SERVER-E IBM X 3650M2	12/10/2009	3	12/10/2012	21,344	21,344	-
6555	135728	SERVER-E IBM X 3650M2	12/10/2009	3	12/10/2012	21,344	21,344	-
6555	135729	SERVER-E IBM X 3650M2	12/10/2009	3	12/10/2012	21,344	21,344	-
6330	134435	DUO DENO VIDEO SCOPE	12/14/2009	10	12/14/2019	24,103	24,103	-
7406	134098	BABY SIM BASE UNIT-BABY METI TRN 253K	1/1/2010	10	1/1/2020	56,111	56,111	-
6308	133784	TENOR LIFT W/SCALE MODEL KHA1010-US	1/25/2010	10	1/25/2020	9,419	9,419	-
6383	134135	STRETCHER CHAIR	2/1/2010	10	2/1/2020	5,262	5,262	-
6383	134136	STRETCHER CHAIR	2/1/2010	10	2/1/2020	5,262	5,262	-
6383	135627	STRETCHER CHAIR	2/1/2010	10	2/1/2020	5,262	5,262	-
6383	134141	STRETCHER-OB-GYN GYNNIE	2/1/2010	15	2/1/2025	5,790	5,790	-
6383	134138	STRETCHER M-SERIES BIG WHL	2/1/2010	10	2/1/2020	6,743	6,743	-
6383	134139	STRETCHER M-SERIES BIG WHL	2/1/2010	10	2/1/2020	6,743	6,743	-
6383	134140	STRETCHER M-SERIES BIG WHL	2/1/2010	10	2/1/2020	6,743	6,743	-
6377	134256	COVERS - 15'X50'X12' -RV	2/18/2010	20	2/18/2030	41,980	34,165	7,815
6380	135552	VISERA-CYSTO-NEPHRO VIDEO SCOPE	3/10/2010	10	3/10/2020	13,762	13,762	-
6330	134142	ENDOSCOPY CAMERA-GYRUS	4/7/2010	10	4/7/2020	16,606	16,606	-
6330	135596	WINGMAN SYSTEM SCOPE HOLDER	4/9/2010	10	4/9/2020	16,576	16,576	-
6340	134106	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6315	134099	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6315	134100	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6315	134105	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-

6340	134101	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6340	134102	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6340	134103	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6340	134104	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6340	134107	INFANT BED WARMER - GIRAFFE	4/27/2010	15	4/27/2025	17,588	17,588	-
6352	135503	ULTRASOUND-SONOS 750 TEE21369A	5/3/2010	10	5/3/2020	9,676	9,676	-
6555	135730	LCD PLAT PANEL CLINICAL DISPLAY	5/7/2010	10	5/7/2020	18,004	18,004	-
5278	E-3716	VAN-2010 FORD ESCAPE HYBRI	5/25/2010	7	5/25/2017	31,192	31,192	-
6355	134114	ULTRASOUND LOGIQ P6	5/25/2010	10	5/25/2020	56,253	56,253	-
6357	134117	ULTRASOUND LOGIQ 9	5/25/2010	10	5/25/2020	108,158	108,158	-
6411	134115	ULTRASOUND LOGIQ 9	5/25/2010	10	5/25/2020	108,158	108,158	-
6555	135713	NEXSAN STORAGE ARRAY	5/28/2010	10	5/28/2020	46,125	46,125	-
6555	134366	SWITCH-CISCO CATALYST 3750	6/8/2010	10	6/8/2020	7,444	7,444	-
6555	134367	SWITCH-CISCO CATALYST 3750 RMC CORE	6/8/2010	10	6/8/2020	11,508	11,508	-
6555	134369	SWITCH-CISCO CATALYST 3750 RMC CORE	6/8/2010	10	6/8/2020	11,508	11,508	-
6555	134368	SWITCH-CISCO CATALYST 3750 RMC CORE	6/8/2010	10	6/8/2020	11,508	11,508	-
6555	135731	SERVER-RACK MOUNTED	6/18/2010	3	6/18/2013	14,225	14,225	-
6555	134370	STORAGE TAPE-QUANTUM SCALAR I500	6/23/2010	3	6/23/2013	47,513	47,513	-
6383	133948	STRETCHER CHAIR	6/25/2010	15	6/25/2025	5,077	5,077	-
6555	135732	ROUTER-44X1962 BROCADE	6/25/2010	10	6/25/2020	23,996	23,996	-
5875	134588	AREA RAE SYSTEM T400 RDK	7/14/2010	3	7/14/2013	66,996	66,996	-
6383	135628	ULTRASOUND SYS SONOSITE	7/21/2010	10	7/21/2020	69,306	69,306	-
6555	135734	IP SWITCH	8/12/2010	10	8/12/2020	10,220	10,220	-
6384	135637	PAGEWRITER CARDIOGRAPH EKG	8/25/2010	10	8/25/2020	10,413	10,413	-
6384	135636	PAGEWRITER CARDIOGRAPH EKG	8/25/2010	10	8/25/2020	10,413	10,413	-
6386	135532	PAGEWRITER CARDIOGRAPH EKG	8/25/2010	10	8/25/2020	10,413	10,413	-
6388	135692	PAGEWRITER CARDIOGRAPH EKG	8/25/2010	10	8/25/2020	10,413	10,413	-
6388	135693	PAGEWRITER CARDIOGRAPH EKG	8/25/2010	10	8/25/2020	10,413	10,413	-
6390	136175	PAGEWRITER CARDIOGRAPH EKG	8/25/2010	10	8/25/2020	10,413	10,413	-
6410	136186	PAGEWRITER CARDIOGRAPH EKG	8/25/2010	10	8/25/2020	10,413	10,413	-
6979	135755	SERVER-IBM X3650 M3	9/1/2010	3	9/1/2013	7,884	7,884	-
6555	E-4310	VAN-2010 DODGE GRAND CARAVAN	9/1/2010	7	9/1/2017	19,527	19,527	-
6373	135531	CORE IMPACTION DRILL CONTROLLER	9/22/2010	10	9/22/2020	22,061	22,061	-
6365	134124	MICROBIOLOGY INCUBATOR NAPCO	9/28/2010	10	9/28/2020	6,027	6,027	-
6365	134123	MICROBIOLOGY INCUBATOR NAPCO	9/28/2010	10	9/28/2020	6,027	6,027	-
6340	135510	HEARTSTART MRX MONITOR/DEFIB	9/30/2010	10	9/30/2020	12,253	12,253	-
6340	135511	HEARTSTART MRX MONITOR/DEFIB	9/30/2010	10	9/30/2020	12,253	12,253	-
5875	134957	RAZOR- EX INST FILTER-BIO ID SYSTEM	9/30/2010	10	9/30/2020	42,061	42,061	-
6555	134391	COMPELLENT DISK TRAY 2 DISK ARRAY	10/12/2010	3	10/12/2013	5,838	5,838	-
6555	134392	COMPELLENT DISK TRAY 2 DISK ARRAY	10/12/2010	3	10/12/2013	5,838	5,838	-
6555	134386	COMPELLENT DISK TRAY 1 DISK ARRAY	10/12/2010	3	10/12/2013	10,131	10,131	-
6555	134387	COMPELLENT DISK TRAY 2 DISK ARRAY	10/12/2010	3	10/12/2013	10,131	10,131	-
6555	134388	COMPELLENT DISK TRAY 3 DISK ARRAY	10/12/2010	3	10/12/2013	11,934	11,934	-
6555	134393	COMPELLENT DISK TRAY 4 DISK ARRAY	10/12/2010	3	10/12/2013	12,331	12,331	-
6555	134394	COMPELLENT DISK TRAY 1 DISK ARRAY	10/12/2010	3	10/12/2013	12,331	12,331	-
6555	134395	COMPELLENT DISK TRAY 3 DISK ARRAY	10/12/2010	3	10/12/2013	12,331	12,331	-
6555	134396	COMPELLENT DISK TRAY 5 DISK ARRAY	10/12/2010	3	10/12/2013	12,331	12,331	-
6555	135736	SERVER-7379 ACI MACHINE TYPE	10/14/2010	5	10/14/2015	8,213	8,213	-
6555	135735	SERVER-7379 ACI MACHINE TYPE	10/14/2010	5	10/14/2015	8,213	8,213	-
6365	134125	BIOSAFETY CAB	10/18/2010	10	10/18/2020	7,477	7,477	-
6365	135541	STAT ANALYZER	11/8/2010	10	11/8/2020	7,024	7,024	-

6505	134108	BED-HILL-ROM VERSACARE	11/10/2010	15	11/10/2025	8,105	8,105	-
6505	134109	BED-HILL-ROM VERSACARE	11/10/2010	15	11/10/2025	8,105	8,105	-
6505	134110	BED-HILL-ROM VERSACARE	11/10/2010	15	11/10/2025	8,105	8,105	-
6505	134111	BED-HILL-ROM VERSACARE	11/10/2010	15	11/10/2025	8,105	8,105	-
6505	134113	BED-HILL-ROM VERSACARE	11/10/2010	15	11/10/2025	8,105	8,105	-
6505	134112	BED-HILL-ROM VERSACARE	11/10/2010	15	11/10/2025	8,105	8,105	-
6522	134127	MICROTOME HM 355	11/10/2010	10	11/10/2020	16,385	16,385	-
6380	135553	ULTRASOUND-SIEMENS ACUSON X300	11/23/2010	10	11/23/2020	32,086	32,086	-
6555	135737	SERVER-ONESIGN STANDBY APPLIANCE	12/3/2010	5	12/3/2015	5,540	5,540	-
6555	135738	SERVER-ONESIGN 550 APPLIANCE	12/3/2010	5	12/3/2015	5,540	5,540	-
6555	135753	SERVER-ONESIGN 550 APPLIANCE	12/3/2010	5	12/3/2015	5,540	5,540	-
6555	135744	SERVER-IBM SYSTEM X3690 X5	12/29/2010	5	12/29/2015	11,886	11,886	-
6555	134474	SERVER-7148AC1 IBMX3690	12/29/2010	3	12/29/2013	20,827	20,827	-
6555	134475	SERVER-7148AC1 IBMX3690	12/29/2010	3	12/29/2013	20,827	20,827	-
6555	135742	SERVER-IBM SYSTEM X3690 X5 ACI7944	1/11/2011	5	1/11/2016	5,294	5,294	-
6555	135743	SERVER-IBM SYSTEM X3690 X5 ACI7944	1/11/2011	5	1/11/2016	5,294	5,294	-
6555	135740	SERVER-IBM SYSTEM X3690 X5 ACI7944	1/11/2011	5	1/11/2016	5,981	5,981	-
6555	135745	SERVER-IBM SYSTEM X3690 X5 ACI7944	1/11/2011	5	1/11/2016	5,981	5,981	-
6555	135739	SERVER-IBM SYSTEM X3690 X5 ACI7945	1/11/2011	5	1/11/2016	9,133	9,133	-
6555	135741	SERVER-IBM SYSTEM X3690 X5 ACI7945	1/11/2011	5	1/11/2016	9,133	9,133	-
6555	135746	TAPE DRIVES TS3200 TIVOLI	1/25/2011	3	1/25/2014	39,989	39,989	-
6330	135599	ENDOEYE FLEXIBL EURETERO-RENO	2/1/2011	10	2/1/2021	22,397	22,397	-
6365	135542	SPERM ANALYZER-SQA-VSI GOLD SYS	2/10/2011	10	2/10/2021	21,404	21,404	-
6330	135598	VIDEO COLONOSCOPE-EVIS EXERA	2/10/2011	10	2/10/2021	37,920	37,920	-
5775	134168	BIO CABINET	3/3/2011	10	3/3/2021	7,774	7,774	-
6555	135747	WIRELESS NETWORK CCRM ARUBA	3/10/2011	5	3/10/2016	11,403	11,403	-
6555	135748	WIRELESS NETWORK CCRM ARUBA	3/10/2011	5	3/10/2016	11,403	11,403	-
6330	135871	OLYMPUS COLOR PRINTER	3/25/2011	10	3/25/2021	8,461	8,461	-
6330	135872	LIGHT SOURCE EVIS EXERA II	3/25/2011	10	3/25/2021	12,018	12,018	-
6330	135870	VIDEO PROCESSOR SYS EVIS EXERAII	3/25/2011	10	3/25/2021	21,151	21,151	-
6330	135874	VIDEO COLONOSCOPE EVIS EXERA II	3/25/2011	10	3/25/2021	29,464	29,464	-
6330	135600	VIDEO COLONOSCOPE EVIS EXERA II	3/25/2011	10	3/25/2021	33,870	33,870	-
6330	135873	VIDEO COLONOSCOPE EVIS EXERA II	3/25/2011	10	3/25/2021	41,853	41,853	-
6383	135804	GLIDESCOPE COBALT SYSTEM	4/15/2011	10	4/15/2021	18,962	18,962	-
5775	134693	CABINET- BIO CABINET 4' HOOD	5/4/2011	10	5/4/2021	7,774	7,774	-
6330	135602	ARTHROSCOPE SYSTEM	5/18/2011	10	5/18/2021	34,399	34,399	-
6330	135603	ARTHROSCOPE SYSTEM	5/18/2011	10	5/18/2021	34,399	34,399	-
5775	134692	FREEZER AUTO DEFROST ULT2330A	5/23/2011	15	5/23/2026	6,178	6,178	-
6377	E-6879	RV - MOBILE MEDICAL CLINIC	6/1/2011	10	6/1/2021	250,334	250,334	-
6555	135733	MEDITECH MAGIC SMP SERVER	6/16/2011	3	6/16/2014	48,880	48,880	-
6979	135758	JC616000 PY	7/12/2011	3	7/12/2014	2,065,093	2,065,093	-
6979	135760	SERVER-PRINT/RELAY	7/18/2011	5	7/18/2016	6,248	6,248	-
6555	134480	SCANNER-FUJITSU FI-6770	7/18/2011	10	7/18/2021	6,324	6,324	-
5875	134687	SPECTROMETER-XLS3 AHURA 1ST	7/19/2011	10	7/19/2021	54,125	54,125	-
6979	135759	CMPTR STRG - COMPELLANT UPGRADE	8/1/2011	3	8/1/2014	20,884	20,884	-
6555	134971	SERVER - IBM P770	8/11/2011	3	8/11/2014	89,413	89,413	-
6555	134970	SERVER - IBM P770	8/11/2011	3	8/11/2014	89,413	89,413	-
6330	135604	ELECTROSURGICAL SYSTEM 800	8/12/2011	10	8/12/2021	14,115	14,115	-
6550	135571	P-A MUSIC SYSTEM	8/23/2011	10	8/23/2021	13,249	13,249	-
5775	135861	GENETIC ANALYZER - AVANT 3130XL	9/7/2011	10	9/7/2021	151,782	151,782	-
6501	134771	RANGE - GAS, 34" - Model M48R	9/12/2011	15	9/12/2026	5,743	5,633	110

6979	134481	HARD DRIVE DUPLICATOR - 413063	9/12/2011	3	9/12/2014	5,639	5,639	-
6330	135612	LARYNGOSCOPE - COBALT SYSTEM	9/14/2011	10	9/14/2021	18,786	18,786	-
6979	135793	TELEPHONE SYSTEM - HIPATH 4000	9/14/2011	10	9/14/2021	411,565	411,565	-
6555	134484	INFOBLOX 1050 NETWORK SVC	9/28/2011	3	9/28/2014	12,474	12,474	-
6555	134485	INFOBLOX 1050 NETWORK SVC	9/28/2011	3	9/28/2014	12,474	12,474	-
6555	134486	INFOBLOX 1102 NETWORK NCCM	9/28/2011	3	9/28/2014	12,599	12,599	-
6380	135556	URODYNAMIC ANALYZER - GBS001	9/28/2011	10	9/28/2021	18,258	18,258	-
6355	135538	X-RAY SYSTEM - BV PULSERA	9/28/2011	10	9/28/2021	138,917	138,917	-
6979	135794	FIREWALL - ARUBA 6000	10/11/2011	6	10/11/2017	20,267	20,267	-
6979	135791	SERVER - NETSCALER MPX 10500	10/25/2011	3	10/25/2014	29,288	29,288	-
6979	135792	SERVER - NETSCALER MPX 10500	10/25/2011	3	10/25/2014	29,288	29,288	-
6979	135790	SERVER - NETSCALER MPX 10500	10/25/2011	3	10/25/2014	29,288	29,288	-
6330	135597	X-RAY - HYDRAVISION DR 80	10/31/2011	10	10/31/2021	292,844	292,844	-
6979	134150	AGFA IMPAX - EMCVN SAN STORAGE	11/1/2011	5	11/1/2016	122,904	122,904	-
5887	134488	SCANNER-CS510 GRAPHTECH FUL COLOR	11/8/2011	3	11/8/2014	12,084	12,084	-
6979	135830	NETWORK STORAGE - VMAX	11/23/2011	5	11/23/2016	80,196	80,196	-
6355	135539	X-RAY - PROTEUS XR/A	11/23/2011	10	11/23/2021	410,625	410,625	-
6380	135557	VIDEOSCOPE - CYF-V2	12/7/2011	15	12/7/2026	17,340	16,735	605
6330	135605	SURGICAL MICROSCOPE - OPMI LUMERA	12/7/2011	10	12/7/2021	61,424	61,424	-
6330	135593	NERVE INTEGRITY MNTR - RESPONSE 2.0	12/15/2011	10	12/15/2021	42,280	42,280	-
6388	134715	INDUSTRIAL COMPACTOR	12/20/2011	15	12/20/2026	34,510	33,224	1,286
6357	134731	ICAD DIGITIZER - TOTAL LOOK MAMMO	12/23/2011	10	12/23/2021	33,558	33,558	-
6357	134733	X-RAY - SENOGAPHE ESSENTIAL	12/23/2011	10	12/23/2021	281,607	281,607	-
6555	131105	ROUTER - CISCO AS5350	1/5/2012	10	1/5/2022	7,851	7,851	-
6979	135780	SERVER - NX ROLLOVER W MUSICA 2	1/5/2012	3	1/5/2015	10,589	10,589	-
6979	135781	SERVER - NX ROLLOVER W MUSICA 2	1/5/2012	3	1/5/2015	10,589	10,589	-
6979	135782	SERVER - NX ROLLOVER W MUSICA 2	1/5/2012	3	1/5/2015	10,589	10,589	-
6979	135779	SERVER - NX ROLLOVER W MUSICA 2	1/5/2012	3	1/5/2015	10,589	10,589	-
6555	135715	NETWORK SWITCH - CISCO 48 PORT	1/11/2012	10	1/11/2022	9,380	9,380	-
6555	135716	NETWORK SWITCH - CISCO 48 PORT	1/11/2012	10	1/11/2022	9,584	9,584	-
6555	135752	NETWORK SWITCH - CISCO 48 PORT	1/11/2012	10	1/11/2022	9,584	9,584	-
6979	135777	DATA CENTER - EMC CUSTOM CONFIG -	1/11/2012	3	1/11/2015	56,824	56,824	-
6979	135778	DATA CENTER - EMC CUSTOM CONFIG -	1/11/2012	3	1/11/2015	105,530	105,530	-
6383	135606	ULTRASOUND SYSTEM - M-TURBO	1/11/2012	10	1/11/2022	285,971	285,971	-
6330	134440	URETEROSCOPE	1/12/2012	10	1/12/2022	5,592	5,592	-
6330	134441	URETEROSCOPE	1/12/2012	10	1/12/2022	5,592	5,592	-
6330	135601	VIDEO GASTROSCOPE THERAPEUTIC	1/19/2012	10	1/19/2022	30,877	30,877	-
6339	135504	BRONCHOSCOPE - BF-160 EVIS EXERA	1/20/2012	10	1/20/2022	13,640	13,640	-
6555	134492	SERVER - CITRIX N10-C6508-UPG	1/31/2012	3	1/31/2015	33,816	33,816	-
6979	135754	SERVER - AGFA CV OPTIPLEX 755A	2/2/2012	3	2/2/2015	17,460	17,460	-
5278	138872	FOOD MIXER - HOBART HL800-1STD	2/13/2012	10	2/13/2022	22,259	22,259	-
6315	134753	INCUBATOR - EBASE ENG S-HUMID DR-	2/16/2012	10	2/16/2022	14,395	14,395	-
6315	134740	INCUBATOR - EBASE ENG S-HUMID DR-	2/16/2012	10	2/16/2022	14,395	14,395	-
6340	135514	INCUBATOR - EBASE ENG S-HUMID DR-	2/16/2012	10	2/16/2022	14,395	14,395	-
6351	134947	STERILIZER - STERRAD NX	2/16/2012	10	2/16/2022	45,768	45,768	-
6979		SERVER - IMPAX XERO - LINUX OS	2/22/2012	3	2/22/2015	4,213	4,213	-
6979		SERVER - IMPAX XERO - LINUX OS	2/22/2012	3	2/22/2015	4,213	4,213	-
6537	135505	ULTRASOUND - IE33	2/22/2012	10	2/22/2022	99,367	99,367	-
6537	135506	ULTRASOUND - IE33	2/22/2012	10	2/22/2022	99,606	99,606	-
6384	135640	STERILIZER - STERRAD NX	2/29/2012	10	2/28/2022	45,768	45,768	-
6380	135558	MINI-CAM FLUOROSCOPIC SYS	3/1/2012	10	3/1/2022	61,324	61,324	-

6330	135607	MINI-CAM FLUOROSCOPIC SYS	3/5/2012	10	3/5/2022	69,555	69,555	-
6979	135784	CD-DVD BURNER - MEDIAWRITER D35	3/7/2012	3	3/7/2015	17,093	17,093	-
6384	135638	STERILIZER - STERIS P6500 SYSTEM 1E	3/9/2012	10	3/9/2022	13,540	13,540	-
6388	135696	COLPOSCOPE - OPTIK1-01 MAG NON-	3/12/2012	10	3/12/2022	7,397	7,397	-
6388	135694	STERILIZER - STERIS P6500 SYSTEM 1E	3/15/2012	10	3/15/2022	9,077	9,077	-
6380	135554	STERILIZER - STERIS P6500 SYSTEM 1E	3/15/2012	10	3/15/2022	12,477	12,477	-
6351	134946	STERILIZER - STERIS P6500 SYSTEM 1E	3/15/2012	10	3/15/2022	24,046	24,046	-
6351	135639	STERILIZER - STERIS P6500 SYSTEM 1E	3/21/2012	10	3/21/2022	12,534	12,534	-
6979	134149	SERVER - AVAMAR GEN4 DR SYSTEM	3/23/2012	3	3/23/2015	332,828	332,828	-
6979	134148	SERVER - AVAMAR GEN 4 PRIMARY	3/23/2012	3	3/23/2015	608,925	608,925	-
6388	135697	LASER IMAGER - DRYVIEW 5850	3/27/2012	10	3/27/2022	19,816	19,816	-
6330	135608	SHOULDER POSITIONING SYSTEM	4/2/2012	10	4/2/2022	23,060	23,060	-
6380	135555	STERILIZER - STERRAD NX	4/12/2012	10	4/12/2022	45,768	45,768	-
6388	135695	STERILIZER - STERRAD NX	4/12/2012	10	4/12/2022	45,768	45,768	-
6979	135756	SWITCH - CATALYST 3750 12 SFP	4/23/2012	3	4/23/2015	8,123	8,123	-
6979	135757	SWITCH - CATALYST 3750 12 SFP	4/23/2012	3	4/23/2015	8,123	8,123	-
6979	135799	SERVER - NEED BREAKDOWN	5/8/2012	3	5/8/2015	407,456	407,456	-
6979		PROJECT MGT	5/11/2012	5	5/11/2017	1,453	1,453	-
6979		SOFTWARE - MS MBL WIN SRV STD 2008	5/11/2012	5	5/11/2017	10,170	10,170	-
6380	135560	COLPOSCOPE - LEISEGANG OPTIK MODEL	5/18/2012	15	5/18/2027	15,691	14,676	1,015
6340	135515	STRETCHER - OB/GYN MODEL P8050	5/25/2012	15	5/25/2027	6,699	6,257	442
6340	135516	STRETCHER - OB/GYN MODEL P8050	5/25/2012	15	5/25/2027	6,699	6,257	442
6340	135517	STRETCHER - OB/GYN MODEL P8050	5/25/2012	15	5/25/2027	6,699	6,257	442
6340	135520	STRETCHER - OB/GYN MODEL P8050	5/25/2012	15	5/25/2027	6,699	6,257	442
6340	135518	STRETCHER - OB/GYN MODEL P8050	5/25/2012	15	5/25/2027	6,699	6,257	442
6340	135519	STRETCHER - OB/GYN MODEL P8050	5/25/2012	15	5/25/2027	6,699	6,257	442
6979	135798	SERVER - ????	5/25/2012	3	5/25/2015	261,466	261,466	-
6979	135785	SERVER - CV APPLICATION SERVER	5/30/2012	3	5/30/2015	8,461	8,461	-
6365	135546	WIRELESS TEMP MONITORING SYS	5/30/2012	10	5/30/2022	18,094	18,094	-
6377	E-6878	RV - CUSTOM MOBILE MEDICAL CLINIC	6/1/2012	10	6/1/2022	250,334	250,334	-
6979	134153	SWITCH - CISCO ASR1001 SYSTEM DR	6/12/2012	3	6/12/2015	42,816	42,816	-
5700	135494	BED - ADVANTA2 SYSTEM	6/13/2012	15	6/13/2027	6,294	5,857	437
5700	135493	BED - ADVANTA2 SYSTEM	6/13/2012	15	6/13/2027	6,294	5,857	437
5869	135498	SCANNER - OPSCAN INSIGHT 4ES	6/15/2012	10	6/15/2022	10,739	10,739	-
6334	135499	SERVER - M3150 INFO CTR	6/29/2012	3	6/29/2015	5,267	5,267	-
6334	135500	SERVER - M3150 INFO CTR	6/29/2012	3	6/29/2015	5,267	5,267	-
6302	135853	MP5 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	7,865	7,865	-
6302	135854	MP5 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	7,865	7,865	-
6302	135855	MP5 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	7,865	7,865	-
6302	135857	MP5 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	7,865	7,865	-
6302	135858	MP5 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	7,865	7,865	-
6318	135896	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6308	135884	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6308	135886	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6308	135887	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6308	135888	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6308	135889	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6308	135890	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135891	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135892	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135893	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-

6318	135894	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135895	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135897	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135898	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135900	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135901	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135902	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6318	135904	MP50 PATIENT MONITOR-INTELLIVUE	6/29/2012	10	6/29/2022	14,639	14,639	-
6979	135810	CONTROLLER - ARUBA 3200XM	6/30/2012	10	6/30/2022	5,407	5,407	-
6979	135814	CONTROLLER - ARUBA 3200XM	6/30/2012	10	6/30/2022	5,407	5,407	-
6979	135811	CONTROLLER - ARUBA 3200XM	6/30/2012	10	6/30/2022	5,407	5,407	-
6979	135808	CONTROLLER - ARUBA 3600	6/30/2012	10	6/30/2022	14,067	14,067	-
6365	135545	BINOCULAR - NIKON ECLIPSE 50i	7/1/2012	15	7/1/2027	6,136	5,690	446
6365	135544	BINOCULAR - NIKON ECLIPSE 50i	7/1/2012	15	7/1/2027	6,136	5,690	446
6364	135529	BINOCULAR - NIKON ECLIPSE 50i	7/1/2012	15	7/1/2027	7,509	6,963	546
6364	135543	MICROTOME HM 355	7/1/2012	10	7/1/2022	15,431	15,431	-
6330	135846	MP5 PATIENT MONITOR-INTELLIVUE-	7/2/2012	10	7/2/2022	8,184	8,184	-
6330	135845	MONITOR-INTELLIVUE MP5-PHILIPS	7/2/2012	10	7/2/2022	8,184	8,184	-
6330	135847	MONITOR-INTELLIVUE MP5-PHILIPS	7/2/2012	10	7/2/2022	8,184	8,184	-
6330	135848	MONITOR-INTELLIVUE MP5-PHILIPS	7/2/2012	10	7/2/2022	8,184	8,184	-
6330	135849	MONITOR-INTELLIVUE MP5-PHILIPS	7/2/2012	10	7/2/2022	8,184	8,184	-
6979	135783	MISC MEDICAL EQUIPMENT	7/11/2012	10	7/11/2022	22,659	22,659	-
6355	136193	ICAD MAMMO ADVANTAGE	7/11/2012	10	7/11/2022	33,558	33,558	-
6979	135786	MISC MEDICAL EQUIPMENT	7/11/2012	10	7/11/2022	61,722	61,722	-
6355	135540	MAMMOGRAPHY SYSTEM	7/11/2012	10	7/11/2022	344,053	344,053	-
6356	136194	ICAD MAMMO ADVANTAGE	7/12/2012	10	7/12/2022	33,558	33,558	-
6356	134460	DIGITAL MAMMOGRAPY SYSTEM (GE)	7/12/2012	10	7/12/2022	279,607	279,607	-
6979	135797	MISCELLANEOUS EQUIPMENT	7/18/2012	5	7/18/2017	41,726	41,726	-
6502	134772	ESPRESSO MACHINE - EGRO ONE-TOUCH	7/19/2012	10	7/19/2022	14,158	14,158	-
6555	134164	ASPECT SERVERS RACK-PITTSBURG	7/27/2012	3	7/27/2015	100,269	100,269	-
5700	135495	CARDIOGRAPH - PAGEWRITER TC70	7/30/2012	10	7/30/2022	10,724	10,724	-
5701	135497	CARDIOGRAPH - PAGEWRITER TC70	7/30/2012	10	7/30/2022	10,724	10,724	-
5701	135496	CARDIOGRAPH - PAGEWRITER TC70	7/30/2012	10	7/30/2022	10,724	10,724	-
6356	134182	DIGITAL RADIOGRAPH PROTEUS (GE)	7/30/2012	10	7/30/2022	259,817	259,817	-
6356	134171	DIGITAL RAD-FLUORO SYSTEM (GE)	7/30/2012	10	7/30/2022	464,543	464,543	-
6384	135649	PHLEBOTOMY STATION - MMIV-RS	8/10/2012	15	8/10/2027	5,811	5,346	465
6384	135647	PHLEBOTOMY STATION - MMIV-RS	8/10/2012	15	8/10/2027	5,811	5,346	465
6384	135648	PHLEBOTOMY STATION - MMIV-RS	8/10/2012	15	8/10/2027	5,811	5,346	465
6979	135812	NETWORK SWITCH - CATALYST 2960S	8/10/2012	10	8/10/2022	5,855	5,855	-
6979	135813	NETWORK SWITCH - CATALYST 2960S	8/10/2012	10	8/10/2022	5,855	5,855	-
6979	135815	NETWORK SWITCH - CATALYST 2960S	8/10/2012	10	8/10/2022	5,855	5,855	-
6979	135816	NETWORK SWITCH - CATALYST 2960S	8/10/2012	10	8/10/2022	5,855	5,855	-
6979	135817	NETWORK SWITCH - CATALYST 2960S	8/10/2012	10	8/10/2022	5,855	5,855	-
6555	135819	BROCADE ADX 1000 SWITCH LOAD	8/10/2012	10	8/10/2022	15,755	15,755	-
6555	135820	BROCADE ADX 1000 SWITCH LOAD	8/10/2012	10	8/10/2022	15,755	15,755	-
6365	135547	SLIDE MAKER - UNICEL DXH SMS	8/10/2012	10	8/10/2022	59,644	59,644	-
6365	135548	HEMATOLOGY SYS - UNICEL DXH800	8/10/2012	10	8/10/2022	60,837	60,837	-
6330	135609	ORTHOPEDIC TABLE - HANA	8/16/2012	10	8/16/2022	72,861	72,861	-
6384	135675	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435
6384	135680	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435
6384	135673	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435

6384	135674	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435
6384	135676	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435
6384	135677	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435
6384	135678	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435
6384	135679	STRETCHER CHAIR	8/28/2012	15	8/28/2027	5,227	4,791	435
6979	135796	SHELVE - SPACESAVER CASE TYPE	8/28/2012	15	8/28/2027	11,167	10,237	930
6384	135879	EMISSIONS SCREENER	8/31/2012	10	8/31/2022	5,929	5,929	-
6384	135646	ANALYZER - MID EAR GSI TYMPSTAR	8/31/2012	10	8/31/2022	8,027	8,027	-
6384	135877	AUDIOMETER W/SPEAKERS	8/31/2012	10	8/31/2022	8,831	8,831	-
6372	134467	PARALLEL BARS - 10' MOTORIZED	8/31/2012	10	8/31/2022	9,950	9,950	-
6979	135809	SERVER - INFOBLOX 1050-A	8/31/2012	3	8/31/2015	13,924	13,924	-
6384	135880	ATLAS CORNEAL TOPOGRAPHY SYSTEM	8/31/2012	10	8/31/2022	17,853	17,853	-
6384	135878	AUDIO BOOTH	8/31/2012	10	8/31/2022	17,891	17,891	-
6384	135881	HUMPHREY FIELD ANALYZER 750	8/31/2012	10	8/31/2022	26,501	26,501	-
6384	135668	VISUCAM FUNDUS CAMERA	8/31/2012	10	8/31/2022	27,908	27,908	-
6384	137959	OPTICAL COHERENCE BIOMETRY IOL	8/31/2012	10	8/31/2022	30,606	30,606	-
6384	135882	CORNEAL SYS SCANNER VISANTE OCT	8/31/2012	10	8/31/2022	51,952	51,952	-
6384	135667	TABLE SCREENER CIRRUUS FD OCT	8/31/2012	10	8/31/2022	75,070	75,070	-
6537	134447	ELECTROSURGICAL SIGMOID X2 FORCE	9/10/2012	10	9/10/2022	10,236	10,236	-
6537	134448	ELECTROSURGICAL SIGMOID X2 FORCE	9/10/2012	10	9/10/2022	10,236	10,236	-
6384	135650	FETAL MONITOR - AVALON FM30	9/18/2012	10	9/18/2022	15,194	15,194	-
6384	135651	FETAL MONITOR - AVALON FM30	9/18/2012	10	9/18/2022	15,194	15,194	-
6979		MISC MEDICAL EQUIPMENT	9/28/2012	10	9/28/2022	4,917	4,917	-
6555	134163	ASPECT SERVERS RACK-MARTINEZ	9/28/2012	10	9/28/2022	113,314	113,314	-
5880	134728	FLASH CAM - 880SX DGTL VNDLSM SYS	10/3/2012	15	10/3/2027	6,112	5,562	549
6979	135789	MISC MEDICAL EQUIPMENT	10/3/2012	10	10/3/2022	12,250	12,250	-
6384	135666	ULTRASOUND - QUANTEL COMPACT	10/5/2012	10	10/5/2022	13,729	13,729	-
6380	134457	OPHTHALMOLOGIC LASER SYSTEM-SELECTA	10/5/2012	10	10/5/2022	79,140	79,140	-
6355	136184	ULTRASOUND - LOGIQ E9 BT11	10/5/2012	10	10/5/2022	143,817	143,817	-
6979	135788	MISC MEDICAL EQUIPMENT	10/8/2012	10	10/8/2022	22,170	22,170	-
6979	135822	NETWORK SWITCH - BROCADE VDX6710	10/31/2012	10	10/31/2022	5,169	5,169	-
6979	135823	NETWORK SWITCH - BROCADE VDX6710	10/31/2012	10	10/31/2022	5,169	5,169	-
6979	135824	NETWORK SWITCH - BROCADE VDX6710	10/31/2012	10	10/31/2022	5,169	5,169	-
6355	135573	VIDEO IMAGING CHAIR - HAUSTED	10/31/2012	10	10/31/2022	7,390	7,390	-
6384	135681	COLPOSCOPE - LEISEGANG OPTIK 1	11/1/2012	10	11/1/2022	8,311	8,311	-
6384	135655	MISC MEDICAL EQUIP-NEED BREAKDOWN	11/1/2012	10	11/1/2022	90,899	90,899	-
6302	135869	TRANSDUCER-PLOX BIOPSY COMPATIBLE	11/9/2012	10	11/9/2022	8,465	8,465	-
6979	134156	SWITCH - CISCO-ME-3600X-24TS-M	11/19/2012	10	11/19/2022	6,380	6,380	-
6979	134157	SWITCH - CISCO-ME-3600X-24TS-M	11/19/2012	10	11/19/2022	6,380	6,380	-
6979	134158	SWITCH - CISCO-ME-3600X-24TS-M	11/19/2012	10	11/19/2022	6,380	6,380	-
6537	135508	TRANSDUCER - IE33 TEE PROBE	12/3/2012	10	12/3/2022	30,585	30,585	-
6537	135509	TRANSDUCER - IE33 TEE PROBE	12/3/2012	10	12/3/2022	30,585	30,585	-
6352	135507	POSITIONING TABLE - ECHO DUAL	12/6/2012	15	12/6/2027	6,209	5,579	631
6384	135663	SCRUBBER - 20" AUTO DELUXE CHARIOT	12/11/2012	8	12/11/2020	5,687	5,687	-
6384	135662	SCRUBBER - 20" AUTO W/ PAD	12/11/2012	8	12/11/2020	5,905	5,905	-
6384	135661	SCRUBBER - 20" COMPACT L-20	12/11/2012	8	12/11/2020	6,280	6,280	-
6501	135821	HEAT ON DEMAND ACTIVATOR 208 VOLT	12/12/2012	10	12/12/2022	8,071	8,071	-
6386	135533	CARDIOGRAPH-PAGEWRITER TC70 EKG	12/18/2012	10	12/18/2022	11,485	11,485	-
6384	134469	VIDEO SYSTEM - OTV-SI(A)	12/27/2012	10	12/27/2022	8,835	8,835	-
6502	136663	BUFFET SALAD BARS - DUKE	1/2/2013	10	1/2/2023	19,926	19,926	-
6384	135653	TEST EQUIPMENT - AUDX PRO II	1/8/2013	10	1/8/2023	7,408	7,408	-

6384	135645	DRYER/STERILE DRIER M43	1/8/2013	10	1/8/2023	9,855	9,855	-
6356	135641	MAMMOGRAPHY WORKSTATION (AGFA)	1/8/2013	10	1/8/2023	36,764	36,764	-
6384	135664	STERILIZER - MB0303 RELIANCE 333	1/16/2013	10	1/16/2023	33,220	33,220	-
6384	135665	STERILIZER - CHIMERON 16 PREVACUUM	1/16/2013	10	1/16/2023	51,418	51,418	-
6384	135657	MICROSCOPE-OPMI PICO I	1/23/2013	10	1/23/2023	6,766	6,766	-
6384	135659	MICROSCOPE-OPMI PICO I	1/23/2013	10	1/23/2023	6,766	6,766	-
6384	135656	OPHTAMOLGY-TILTABLE BINO F-170	1/23/2013	10	1/23/2023	8,119	8,119	-
6384	135658	OPHTAMOLGY-TILTABLE BINO F-170	1/23/2013	10	1/23/2023	8,119	8,119	-
6380	135562	CWI CELON LAB ENT SYSTEM	2/6/2013	10	2/6/2023	5,487	5,487	-
6384	135669	CHAIR - ARTICULATING EXAM FULL	2/11/2013	10	2/11/2023	6,080	6,080	-
6384	135670	CHAIR - ARTICULATING EXAM FULL	2/11/2013	10	2/11/2023	6,080	6,080	-
6384	135671	CHAIR - ARTICULATING EXAM FULL	2/11/2013	10	2/11/2023	6,080	6,080	-
6384	135672	CHAIR - ARTICULATING EXAM FULL	2/11/2013	10	2/11/2023	6,080	6,080	-
6384	135654	KERATOMETER - TOPCON KR-8900 AUTO	2/11/2013	10	2/11/2023	11,366	11,366	-
6374	134458	DELIVERY SYSTEM -SP2000 MODEL 2100	2/12/2013	10	2/12/2023	8,535	8,535	-
6374	134459	CHAIR - PELTON & CRA 3004 - NARO	2/12/2013	10	2/12/2023	8,913	8,913	-
6979	135827	MAIL CENTER (128 POCKETS) 15"D	2/21/2013	10	2/21/2023	7,602	7,602	-
6979		PROJECT MGMT	3/11/2013	3	3/11/2016	100	100	-
6979		CUSTOM SCRIPTING	3/11/2013	3	3/11/2016	1,600	1,600	-
6386	135534	TABLE-BARIATRIC BASE PWR - MIDMARK	3/15/2013	10	3/15/2023	6,083	6,083	-
6380	135561	TOPOGRAPHY SYSTEM - ATLAS CORNEAL	3/19/2013	10	3/19/2023	12,415	12,415	-
6979	135787	SERVER - EPIC SYSTEM IMPAX 6.5	3/27/2013	3	3/27/2016	278,078	278,078	-
5875	136792	JUNO CHEM WARFARE DETECTOR SYS	4/25/2013	10	4/25/2023	23,205	23,205	-
6979		PALO ALTO NETWORKS PA 3020	4/30/2013	6	4/30/2019	8,506	8,506	-
6979	134166	PALO ALTO NETWORKS PA 3020	4/30/2013	6	4/30/2019	8,506	8,506	-
6979	135828	PALO ALTO NETWORKS PA 3020	4/30/2013	6	4/30/2019	8,506	8,506	-
6505	135567	INFOVAC MACHINE - M8259999.S	5/3/2013	10	5/3/2023	30,851	30,851	-
6505	135568	INFOVAC MACHINE - M8259999.S	5/3/2013	10	5/3/2023	30,851	30,851	-
6505	135569	INFOVAC MACHINE - M8259999.S	5/3/2013	10	5/3/2023	30,851	30,851	-
6505	135570	INFOVAC MACHINE - M8259999.S	5/3/2013	10	5/3/2023	30,851	30,851	-
6340	135521	GLIDESCOPE COBALT SYSTEM 3-4	5/24/2013	10	5/24/2023	12,542	12,542	-
6383	135574	VERNTHON GLIDESCOPE COBALT SYSTEM	5/24/2013	10	5/24/2023	12,542	12,542	-
6339	134188	BLOOD GAS ANALYZER RP500	6/21/2013	10	6/21/2023	16,385	16,385	-
6339	134189	BLOOD GAS ANALYZER RP500	6/21/2013	10	6/21/2023	16,385	16,385	-
6555	134092	BLADE-ISS SERVER 22 BLD-5	7/1/2013	3	7/1/2016	5,390	5,390	-
6536	E-8221	MOWER - 48 INCH RIDING	7/1/2013	10	7/1/2023	8,245	8,245	-
6555	134090	BLADE-VM BLADE DR BLD3	7/1/2013	3	7/1/2016	8,631	8,631	-
6318	135899	MP5 PATIENT MONITOR-INTELLIVUE	7/1/2013	10	7/1/2023	9,433	9,433	-
6318	135903	MP5 PATIENT MONITOR-INTELLIVUE	7/1/2013	10	7/1/2023	9,433	9,433	-
6364	135831	TISSUE PROCESSOR ASP6025	7/1/2013	10	7/1/2023	76,110	76,110	-
6330	135800	ARTHOSCOPY CAMERA/COUPLER 1288HD	7/10/2013	15	7/10/2028	11,945	10,261	1,684
6330	135801	ARTHOSCOPY CAMERA/COUPLER 1288HD	7/10/2013	15	7/10/2028	11,945	10,261	1,684
6386	135805	PAGEWRITER TC70 EKG CARDIOGRAPH	7/11/2013	10	7/11/2023	11,631	11,631	-
6330	135985	GLIDESCOPE COBALT 1-2 KIT	7/16/2013	10	7/16/2023	6,367	6,367	-
6330	135502	FIBERSCOPE-TRACHEAL INTUBATION LF-	7/24/2013	10	7/24/2023	9,674	9,674	-
6330	135501	FIBERSCOPE-TRACHEAL INTUBATION LF-	7/24/2013	10	7/24/2023	11,160	11,160	-
5913	E-0821	CAR-2013 FORD FUSION HYBRID	8/1/2013	7	8/1/2020	28,130	28,130	-
6537	135931	INFRARED COAGULATION-ANAL	8/12/2013	10	8/12/2023	10,406	10,406	-
6412	135934	CARDIOGRAPH - PAGEWRITER TC70	8/23/2013	10	8/23/2023	11,726	11,726	-
6414	135933	CARDIOGRAPH - PAGEWRITER TC70	8/23/2013	10	8/23/2023	11,780	11,780	-
5775	138230	BIO THREAT FILMARRAY US	9/11/2013	10	9/11/2023	40,715	40,715	-

6352	136174	TRACKMASTER TREADMILL TM425	9/30/2013	10	9/30/2023	5,176	5,176	-
5722	E-1068	CAR-2014 FORD TAURUS FWD SE SEDAN	10/1/2013	7	10/1/2020	22,726	22,726	-
5722	E-1069	CAR-2014 FORD TAURUS FWD SE SEDAN	10/1/2013	7	10/1/2020	22,726	22,726	-
5722	E-1070	CAR-2014 FORD TAURUS FWD SE SEDAN	10/1/2013	7	10/1/2020	22,726	22,726	-
5913	E-1066	CAR-2014 FORD TAURUS FWD SE SEDAN	10/1/2013	7	10/1/2020	22,726	22,726	-
6330	136179	LAPAROSCOPE HD 5MM 30 DEGREE	10/16/2013	10	10/16/2023	5,057	5,057	-
6330	136180	LAPAROSCOPE HD 5MM 30 DEGREE	10/16/2013	10	10/16/2023	5,057	5,057	-
6386	136183	BARIATRIC EXAM TABLE MIDMARK	10/16/2013	15	10/16/2028	6,691	5,628	1,063
5724	E-1074	CAR - 2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
5724	E-1075	CAR - 2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
5724	E-1076	CAR - 2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
5724	E-1078	CAR - 2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
5724	E-1079	CAR - 2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
5735	E-1083	CAR-2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
5735	E-1084	CAR-2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
5957	E-1072	CAR - 2014 FORD TAURUS FWD SE SEDAN	11/1/2013	7	11/1/2020	22,726	22,726	-
6365	135982	FREEZER-25 CF ISOTEMP-LAB TYPE	12/4/2013	15	12/4/2028	5,757	4,791	966
6302	135978	MP5 PATIENT MONITOR-INTELLIVUE	12/4/2013	10	12/4/2023	8,520	8,520	-
6302	135979	MP5 PATIENT MONITOR-INTELLIVUE	12/4/2013	10	12/4/2023	8,520	8,520	-
6352	135981	STRESS TEST SYSTEM ST801	12/4/2013	10	12/4/2023	19,385	19,385	-
6308	135980	MICROSTREAM CO2 EXTENSION	12/27/2013	10	12/27/2023	5,525	5,525	-
6330	136002	MONITOR-OLYMPUS 26" FULL HD LCD	12/27/2013	10	12/27/2023	8,241	8,241	-
6417	135983	CARDIOGRAPH PAGERWRITER TC70 EKG	12/27/2013	10	12/27/2023	10,500	10,500	-
6537	135984	VITAL SIGNS SIMULATOR-SIMCUBE SC5	1/10/2014	10	1/10/2024	5,438	5,438	-
6555	134978	SERVER-IBM BLADE CENTER HX5	1/13/2014	3	1/13/2017	7,103	7,103	-
6555	134979	SERVER-IBM BLADE CENTER HX5	1/13/2014	3	1/13/2017	7,103	7,103	-
6380	136006	TRANSDUCER ICTX/8-5 MHZ	1/24/2014	10	1/24/2024	6,221	6,221	-
6417	136005	TRANSDUCER P21X/5-1 MHZ	1/24/2014	10	1/24/2024	8,416	8,416	-
6417	136007	TRANSDUCER L25X/13-6 MHZ	1/24/2014	10	1/24/2024	8,416	8,416	-
6417	136008	ULTRASOUND SYSTEM - M-TURBO	1/24/2014	10	1/24/2024	21,952	21,952	-
6387	136009	DRAGER JAUNDICE METER JM-103	2/6/2014	10	2/6/2024	6,679	6,679	-
6505	136057	ULTRASOUND-S SERIES VASCULAR	4/25/2014	10	4/25/2024	24,408	24,408	-
6383	136182	STRETCHER-PRIME 5TH WHEEL 26"	5/5/2014	15	5/5/2029	6,442	5,182	1,260
6383	136181	STRETCHER GYNNE OB-GYN	5/15/2014	15	5/15/2029	5,908	4,742	1,167
6555	136079	SWITCH-CISCO CATALYST 3750X 12 PORT	6/9/2014	10	6/9/2024	5,968	5,968	-
6555	136082	SWITCH-CISCO CATALYST 3750X 12 PORT	6/9/2014	10	6/9/2024	5,968	5,968	-
6555	136083	SWITCH-CISCO CATALYST 3750X 12 PORT	6/9/2014	10	6/9/2024	5,968	5,968	-
6979		SERVER-IBM HX5 X7560 BLADE CENTER	6/12/2014	3	6/12/2017	7,103	7,103	-
6979		SERVER-IBM HX5 X7560 BLADE CENTER	6/12/2014	3	6/12/2017	7,103	7,103	-
6979		CISCO VX CLINICAL ASSISTANT	6/16/2014	10	6/16/2024	27,767	27,767	-
6330	136238	OPERATIVE FLUID MGMT SYSTEM-	7/25/2014	10	7/25/2024	7,350	7,350	-
6330	136239	OPERATIVE FLUID MGMT SYSTEM-	7/25/2014	10	7/25/2024	7,350	7,350	-
6330	136240	HYSTERSCOPIE SYSTEM-TRUCLEAR	7/25/2014	10	7/25/2024	37,335	37,335	-
5773	E-4339	CARAVAN-2014 DODGE SE	8/1/2014	7	8/1/2021	52,850	52,850	-
5879	136237	SERVER - IBM X3650 M4 RACK MOUNT	8/21/2014	3	8/21/2017	23,563	23,563	-
6555	136200	SERVER - HP PROLIANT DL380P GEN8	8/27/2014	3	8/27/2017	9,421	9,421	-
6555	136199	SERVER - HP PROLIANT DL380P GEN8	8/27/2014	3	8/27/2017	9,421	9,421	-
6555	136243	SERVER-DSS/IBM P710 EPIC BACKUP RPTG	8/27/2014	3	8/27/2017	12,569	12,569	-
6555	136198	SERVER - DELL POWEREDGE R720XD	8/27/2014	3	8/27/2017	19,458	19,458	-
6979		PAINT MIXER-RED DEVIL SPEED DEMON 5	9/18/2014	15	9/18/2029	6,254	4,875	1,379
6330	136246	DRIVER 3 - CORDLESS	10/3/2014	10	10/3/2024	16,738	16,738	-

6330	136247	DRIVER 3 - CORDLESS	10/3/2014	10	10/3/2024	16,738	16,738	-
6413	136248	PROSENSOR X-RAY SENSOR SIZE 1	10/10/2014	10	10/10/2024	10,632	10,632	-
6413	136249	PROSENSOR X-RAY SENSOR SIZE 2	10/10/2014	10	10/10/2024	12,476	12,476	-
6377	136241	X-RAY SYSTEM NOMAD PRO 60KV	10/24/2014	10	10/24/2024	19,622	19,622	-
6380	136265	TROPHON EPR STERILIZATION SYS	10/31/2014	10	10/31/2024	10,515	10,515	-
6384	136266	TROPHON EPR STERILIZATION SYS	10/31/2014	10	10/31/2024	10,515	10,515	-
6384	136267	TROPHON EPR STERILIZATION SYS	10/31/2014	10	10/31/2024	10,515	10,515	-
6410	136268	TROPHON EPR STERILIZATION SYS	10/31/2014	10	10/31/2024	10,515	10,515	-
6384	136269	TROPHON EPR STERILIZATION SYS	10/31/2014	10	10/31/2024	10,515	10,515	-
6544	136253	WORKSTATION- HOSP RECEPTION AREA B	11/6/2014	10	11/6/2024	7,112	7,112	-
6544	136254	WORKSTATION- HOSP RECEPTION AREA A	11/6/2014	10	11/6/2024	11,014	11,014	-
6355	136270	LOGIC P6 BT11 LINEAR TRANSDUCER	11/26/2014	10	11/26/2024	6,087	6,087	-
6387	136262	VISUCAM FUNDUS CAMERA	12/1/2014	10	12/1/2024	22,221	22,221	-
6377	136273	MIDMARK POWER TABLE 630-010 BASE	12/12/2014	10	12/12/2024	12,808	12,808	-
6377	136274	MIDMARK POWERTABLE 630-022BASE	12/12/2014	10	12/12/2024	15,391	15,391	-
6365	136296	I-STAT ANALYZER	12/18/2014	10	12/18/2024	12,133	12,133	-
6365	136297	I-STAT ANALYZER	12/18/2014	10	12/18/2024	12,133	12,133	-
6365	136272	CHEMICAL ANALYZER-PICCOLO EXPRESS	12/18/2014	10	12/18/2024	14,722	14,722	-
6388	136298	EXAM TABLE - POWER BARIATRA	12/24/2014	10	12/24/2024	7,496	7,496	-
6388	136299	EXAM TABLE - POWER BARIATRA	12/24/2014	10	12/24/2024	7,496	7,496	-
5278	136369	L-BAR SEALER ARPAC L18 AUTOMATIC	12/24/2014	10	12/24/2024	15,651	15,651	-
5278	136370	VISION SHRINK TUNNEL	12/24/2014	10	12/24/2024	36,170	36,170	-
6388	136300	ZIESS OPMI PICO S100 MICROSCOPE	12/29/2014	15	12/29/2029	16,483	12,542	3,941
6340	136295	Z ONE PRO ULTRASOUND SYSTEM	1/7/2015	10	1/7/2025	69,603	69,603	-
6555	136271	PALO ALTO NETWORKS PA 3020	2/6/2015	6	2/6/2021	9,772	9,772	-
6555	136403	SERVER-DELL POWEREDGE R720XD	2/10/2015	3	2/10/2018	30,380	30,380	-
6555	136404	SERVER-DELL POWEREDGE R720XD	2/10/2015	3	2/10/2018	30,380	30,380	-
6555	136335	DEL POWER VAULT RMC-MD3420 HD	2/10/2015	3	2/10/2018	34,031	34,031	-
6340	136312	GIRAFFE BEDDED INFANT WARMER	2/12/2015	15	2/12/2030	20,381	15,341	5,040
6340	136313	GIRAFFE BEDDED INFANT WARMER	2/12/2015	15	2/12/2030	20,381	15,341	5,040
6340	136314	GIRAFFE BEDDED INFANT WARMER	2/12/2015	15	2/12/2030	20,381	15,341	5,040
6340	136315	GIRAFFE BEDDED INFANT WARMER	2/12/2015	15	2/12/2030	20,381	15,341	5,040
6340	136316	GIRAFFE BEDDED INFANT WARMER	2/12/2015	15	2/12/2030	20,381	15,341	5,040
6340	136317	GIRAFFE BEDDED INFANT WARMER	2/12/2015	15	2/12/2030	20,381	15,341	5,040
6340	136318	GIRAFFE BEDDED INFANT WARMER	2/12/2015	15	2/12/2030	20,381	15,341	5,040
6386	136321	TROPHON ERP STERILIZATION SYSTEM	2/17/2015	10	2/17/2025	9,648	9,648	-
6339	136311	CPAP TRANSPORT VENILATOR SYSTEM	2/19/2015	10	2/19/2025	9,369	9,369	-
6384	136320	DRAGER JAUNDICE METER	2/23/2015	10	2/23/2025	6,779	6,779	-
6330	136304	EZ SLIDE SURGICAL TABLE	2/25/2015	10	2/25/2025	47,462	47,462	-
6330	136305	EZ SLIDE SURGICAL TABLE	2/25/2015	10	2/25/2025	47,462	47,462	-
6330	136306	EZ SLIDE SURGICAL TABLE	2/25/2015	10	2/25/2025	47,462	47,462	-
6330	136307	EZ SLIDE SURGICAL TABLE	2/25/2015	10	2/25/2025	47,462	47,462	-
6330	136309	EZ SLIDE SURGICAL TABLE	2/25/2015	10	2/25/2025	47,462	47,462	-
6330	136308	ULTRA SLIDE SURGICAL TABLE	2/25/2015	10	2/25/2025	64,845	64,845	-
6330	136303	FREEZER-ULTRA LOW TEMP UNDER	2/27/2015	15	2/27/2030	9,290	6,967	2,323
6377	136319	MOBILE DENTAL CART AMC-20-SELF	3/4/2015	10	3/4/2025	10,042	10,042	-
6330	136310	SURGICAL MICROSCOPE SYSTEM	3/11/2015	15	3/11/2030	54,177	40,511	13,665
6377	136348	NOMAD PRO X-RAY SYSTEM	4/8/2015	10	4/8/2025	19,622	19,622	-
6555	136405	HD STORAGE DEVICE-STORINATOR 4.0	4/20/2015	5	4/20/2020	11,026	11,026	-
6555	136406	HD STORAGE DEVICE-STORINATOR 4.0	4/20/2015	5	4/20/2020	11,026	11,026	-
6555	136410	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-

6555	136411	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-
6555	136412	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-
6555	136413	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-
6555	136407	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-
6555	136408	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-
6555	136409	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-
6555	136414	SERVER-CISCO UCS B200 M4 BLADE	5/27/2015	3	5/27/2018	12,263	12,263	-
6536	136415	2U/IP SECURITY SYS SERVER-DUAL	5/29/2015	3	5/29/2018	6,113	6,113	-
6358	136401	MP5 INTELLIVUE PATIENT MONITOR	6/3/2015	10	6/3/2025	12,701	12,701	-
6555	136402	PRINTER-TALLYGENICOM 6805 LINE	6/10/2015	10	6/10/2025	5,729	5,729	-
6555	136465	SERVER-LENOVO X3650 M5 RACK MOUNT	6/12/2015	3	6/12/2018	26,939	26,939	-
6555	136466	SERVER-LENOVO X3650 M5 RACK MOUNT	6/12/2015	3	6/12/2018	26,939	26,939	-
6555	136467	SERVER-LENOVO X3650 M5 RACK MOUNT	6/12/2015	3	6/12/2018	26,939	26,939	-
6555	136468	SERVER-LENOVO X3650 M5 RACK MOUNT	6/12/2015	3	6/12/2018	26,939	26,939	-
6555	136629	ROUTER - CISCO ASR1002AX	6/16/2015	10	6/16/2025	47,198	47,198	-
6555	136630	ROUTER - CISCO ASR1002AX	6/16/2015	10	6/16/2025	47,198	47,198	-
6555	136631	ROUTER - CISCO ASR1002AX	6/16/2015	10	6/16/2025	47,198	47,198	-
6555	136627	PURE STORAGE FLASH ARRAY 23TB	6/18/2015	3	6/18/2018	144,165	144,165	-
6555	136628	PURE STORAGE FLASH ARRAY 23TB	6/18/2015	3	6/18/2018	144,165	144,165	-
6335	136710	TRACHEAL INTUBATION FIBERSCOPE	7/1/2015	15	7/1/2030	10,295	7,488	2,807
6555	136625	AVAMAR GAS M1200 STORAGE	7/10/2015	3	7/10/2018	9,866	9,866	-
6555	136624	AVAMAR GAS M1200 STORAGE	7/10/2015	3	7/10/2018	9,866	9,866	-
6555	136626	AVAMAR GAS FLD INST STORAGE	7/10/2015	3	7/10/2018	18,410	18,410	-
6555	136622	EMC SYSTEMS DD4200 SAS	7/10/2015	3	7/10/2018	118,397	118,397	-
6555	136623	EMC SYSTEMS DD4200 SAS	7/10/2015	3	7/10/2018	118,397	118,397	-
6555	136673	SWITCH-CISCO ME3600X ETHERNET	7/24/2015	10	7/24/2025	7,841	7,841	-
6555	136674	SWITCH-CISCO ME3600X ETHERNET	7/24/2015	10	7/24/2025	7,841	7,841	-
6555	136675	SWITCH-CISCO ME3600X ETHERNET	7/24/2015	10	7/24/2025	7,841	7,841	-
6365	136728	URINALYSIS MACHINE-IRICELL 2000 PRO	7/24/2015	10	7/24/2025	97,650	97,650	-
6555	136730	SERVER-LENOVO X3650 M5 RACK MOUNT	8/19/2015	3	8/19/2018	15,950	15,950	-
6555	136729	SERVER-LENOVO X3650 M5 RACK MOUNT	8/19/2015	3	8/19/2018	15,950	15,950	-
6377	136683	ROCKY 2 O-L AIR COMPRESSOR	8/21/2015	10	8/21/2025	5,108	5,108	-
6377	136684	ECO-VAC 2 USER 1X1HP 230V	8/21/2015	10	8/21/2025	6,445	6,445	-
6377	136685	DELIVIERY CART-P&C SP2000 FLEX	8/21/2015	10	8/21/2025	6,690	6,690	-
6377	136686	SPIRIT CHAIR-P&C SP3303 CHARCOAL	8/21/2015	10	8/21/2025	9,691	9,691	-
6555	136735	CISCO 1-PORT SHARED PORT ADAPTER	8/25/2015	3	8/25/2018	5,425	5,425	-
6555	136736	CISCO ASR1002X CIRCUIT BUNDLE	8/25/2015	3	8/25/2018	24,413	24,413	-
6308	136724	SPECIALTY HOSPITAL BEDS PRO 585	8/31/2015	15	8/31/2030	28,587	20,473	8,114
6308	136725	SPECIALTY HOSPITAL BEDS PRO 585	8/31/2015	15	8/31/2030	28,587	20,473	8,114
6308	136726	SPECIALTY HOSPITAL BEDS PRO 585	8/31/2015	15	8/31/2030	28,587	20,473	8,114
6308	136719	SPECIALTY HOSPITAL BEDS PRO 585	8/31/2015	15	8/31/2030	28,587	20,473	8,114
6308	136718	SPECIALTY HOSPITAL BEDS PRO 885	8/31/2015	15	8/31/2030	43,917	31,452	12,465
6308	136720	SPECIALTY HOSPITAL BEDS PRO 885	8/31/2015	15	8/31/2030	43,917	31,452	12,465
6308	136721	SPECIALTY HOSPITAL BEDS PRO 885	8/31/2015	15	8/31/2030	43,917	31,452	12,465
6308	136722	SPECIALTY HOSPITAL BEDS PRO 885	8/31/2015	15	8/31/2030	43,917	31,452	12,465
6308	136723	SPECIALTY HOSPITAL BEDS PRO 885	8/31/2015	15	8/31/2030	43,917	31,452	12,465
6505	136827	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136828	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136829	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136830	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136831	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495

6505	136832	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136833	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136823	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136824	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136825	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136826	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136834	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136835	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136836	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136837	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136838	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136839	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136840	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136841	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6505	136842	VERSACARE HOPITAL BEDS (MED/SURG)	9/1/2015	15	9/1/2030	8,785	6,290	2,495
6555	136731	SERVER-LENOVO X3650 M5 RACK MOUNT	9/30/2015	3	9/30/2018	17,122	17,122	-
6555	136732	SERVER-LENOVO X3650 M5 RACK MOUNT	9/30/2015	3	9/30/2018	17,122	17,122	-
5875	136793	IDENTI FINDER2 NGH	9/30/2015	10	9/30/2025	18,988	18,988	-
6388	136707	STERIS AMSCO 400 STERILIZER	10/23/2015	10	10/23/2025	53,725	53,725	-
6358	136706	EXPRESSION MRI PATIENT MONITOR	11/10/2015	10	11/10/2025	50,137	50,137	-
6536	136713	HAZARDOUS STORAE CONTAINER	12/8/2015	15	12/8/2030	15,611	10,898	4,713
6330	136999	TELE PACK X LED,CCE/LIGHT	12/16/2015	10	12/16/2025	16,919	16,919	-
6330	136997	TELE PACK X LED,CCE/LIGHT	12/16/2015	10	12/16/2025	16,919	16,919	-
6330	136998	TELE PACK X LED,CCE/LIGHT	12/16/2015	10	12/16/2025	16,919	16,919	-
6318	137048	MIRIDIUM 3860 MR INFUSION PUMP	12/29/2015	10	12/29/2025	40,423	40,423	-
6410	136942	SONOSITE EDGE ULTRASOUND SYSTEM	12/29/2015	10	12/29/2025	62,590	62,590	-
6377	137002	GENERATOR-CUMMINGS 12-KW DIESEL	12/31/2015	20	12/31/2035	12,583	6,548	6,035
6410	136822	ULTRASOUND TABLE ECONO 115V	12/31/2015	10	12/31/2025	6,920	6,920	-
6307	136819	BLADDERSCAN BVI 9400	12/31/2015	10	12/31/2025	13,663	13,663	-
6308	136820	BLADDERSCAN BVI 9400	12/31/2015	10	12/31/2025	13,663	13,663	-
6304	136818	BLADDERSCAN BVI 9400	12/31/2015	10	12/31/2025	13,663	13,663	-
6383	137049	SERVER-INTELLIVUE MX700 PATIENT	1/8/2016	3	1/8/2019	137,207	137,207	-
5879	137000	80" TOUCH SCREEN MONITOR	1/12/2016	10	1/12/2026	11,450	11,450	-
6355	137094	LI400-53 EDGE ULTRASOUND SYSTEM	1/14/2016	10	1/14/2026	47,761	47,761	-
6383	136821	X-PORTE ULTRASOUND KIOSK SYS	1/14/2016	10	1/14/2026	95,209	95,209	-
6334	137089	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137090	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137091	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137092	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137071	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137072	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137073	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137074	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137075	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137076	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137077	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137078	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137079	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137080	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137081	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137082	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-

6334	137083	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137084	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137085	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137086	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137087	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137088	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6334	137093	PATIENT MONITOR MX500 INTELLIVUE	1/27/2016	10	1/27/2026	17,233	17,233	-
6536	137095	BASE, EXAM TABLE 223 W/PWR BACK	1/29/2016	15	1/29/2031	5,315	3,660	1,655
6410		UNTRASOUND TABLE-LATE PAYMENT	2/3/2016	10	2/3/2026	104	104	-
6411	137096	MAMMOGRAPHY - SENOGRAPE	2/3/2016	10	2/3/2026	291,086	291,086	-
6378	136989	GYM EQUIP-SHUTTLE 2000-1 CLINICAL	2/29/2016	10	2/28/2026	6,462	6,462	-
6555	136992	SERVER-POWER EDGE R730XD	3/8/2016	3	3/8/2019	12,872	12,872	-
6555	136991	SERVER-EPIC CACHE	3/10/2016	3	3/10/2019	40,099	40,099	-
6304	137008	TELEMONITORING SYSTEM	3/14/2016	10	3/14/2026	157,556	157,556	-
6505	137010	DATABASE SERVER-MAIN MONITORING	3/14/2016	10	3/14/2026	228,468	228,468	-
6501	137119	HOOD-ACTIVATOR ADV	3/18/2016	10	3/18/2026	9,982	9,982	-
6410	137097	MIDMARK EXAM TABLES	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137098	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137099	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137100	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137101	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137102	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137103	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137104	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137105	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137106	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6410	137107	MIDMARK EXAM TABLE	3/23/2016	10	3/23/2026	7,725	7,725	-
6555	136757	LENOVO X3650 M5 RACK SERVER W/INT	3/23/2016	3	3/23/2019	13,085	13,085	-
6418	136943	NOMAD PRO2 DENTAL X-RAY SYSTEM	3/25/2016	10	3/25/2026	7,590	7,590	-
5891	138480	GAITKEEPER 1800 T & LITEGAI I 200P	3/29/2016	10	3/29/2026	14,116	14,116	-
5891	138481	GAITKEEPER 1800 T & LITEGAI I 200P	3/29/2016	10	3/29/2026	14,181	14,181	-
5891	140751	GAITKEEPER MINI & LITEGAI I 200P	3/29/2016	10	3/29/2026	14,181	14,181	-
6355	137009	ULTRASOUND MACHINE LOGIQ E9 XD	3/29/2016	10	3/29/2026	157,488	157,488	-
6388	136752	ZONE PRO ULTRASOUND SYSTEM	3/31/2016	10	3/31/2026	72,387	72,387	-
6330		E/C URF-V FLEX URETERORENO	4/8/2016	10	4/8/2026	(2,500)	(2,500)	-
6555	136760	CISCO CATALYST 3850 24 PORT SWITCH	4/8/2016	10	4/8/2026	6,675	6,675	-
6555	136759	CISCO CATALYST 3850 48 PORT SWITCH	4/8/2016	10	4/8/2026	10,093	10,093	-
6555	136758	CISCO 3925 VOICE BUNDLE - PHONE	4/8/2016	10	4/8/2026	11,012	11,012	-
6555	137108	GAMATRONICS 100KVA	4/8/2016	20	4/8/2036	31,601	16,017	15,584
6383	136751	GYNNIE STRETCHER	4/11/2016	10	4/11/2026	6,450	6,450	-
5954	138175	SERVER-DELL R530 SINGLE XEON	4/18/2016	3	4/18/2019	8,247	8,247	-
6575	136894	VIEWSONIC 70" INTERACTIVE DISPLAY	4/25/2016	10	4/25/2026	7,294	7,294	-
5891	138483	GAITKEEPER 1800 T & LITEGAI I 200P	4/25/2016	10	4/25/2026	14,125	14,125	-
6364	137118	LEICA RM2255 MICROTOME	5/2/2016	15	5/2/2031	20,690	13,892	6,798
6555	136996	SERVER-DELL POWER EDGE R730XD	5/2/2016	3	5/2/2019	13,861	13,861	-
6555	136995	INFOBLOX ND V800 NIGRID (VIRTUAL	5/4/2016	3	5/4/2019	6,489	6,489	-
6536	136990	WHEELCHAIR SHELTER STAND	5/4/2016	15	5/4/2031	9,811	6,583	3,227
6555	136993	INFOBLOX TRINZIC 1410 NSIGRID	5/4/2016	3	5/4/2019	12,808	12,808	-
6555	136994	INFOBLOX TRINZIC 1410 NSIGRID	5/4/2016	3	5/4/2019	12,808	12,808	-
6336	136883	OLYMPUS VIDEO COLONOSCOPE	5/4/2016	15	5/4/2031	36,399	24,426	11,974
5891	138484	GAITKEEPER 1800 T & LITEGAI I 200P	5/10/2016	10	5/10/2026	13,376	13,376	-

6555	136890	SERVER-LENOVO X3650 M5 RACK MOUNT	5/11/2016	3	5/11/2019	21,436	21,436	-
6555	136891	SERVER-LENOVO X3650 M5 RACK MOUNT	5/11/2016	3	5/11/2019	21,436	21,436	-
6555	136892	SERVER-LENOVO X3650 M5 RACK MOUNT	5/11/2016	3	5/11/2019	21,436	21,436	-
6555	136893	SERVER-LENOVO X3650 M5 RACK MOUNT	5/11/2016	3	5/11/2019	21,436	21,436	-
6501	136887	BOILERLESS STEAMER	5/16/2016	10	5/16/2026	16,723	16,723	-
6501	136888	BOILERLESS STEAMER	5/16/2016	10	5/16/2026	16,723	16,723	-
6330	136882	ULTRA FIN STIRRUPS - UP TO 800 LBS	5/23/2016	10	5/23/2026	8,277	8,277	-
6555	136889	RUBRIK R348 HYBRID CLOUD APPLIANCE	5/23/2016	5	5/23/2021	62,852	62,852	-
6343	137001	BLOOD BANK REFRIGERATOR REF25-BB	5/25/2016	10	5/25/2026	6,359	6,359	-
6555	136944	RUBRIK R348 HYBRID CLOUD APPLIANCE	5/27/2016	3	5/27/2019	62,852	62,852	-
6340	136884	TROPHON EPR DISINFECTION SYSTEM	5/31/2016	10	5/31/2026	7,363	7,357	6
6388	136885	TROPHON EPR DISINFECTION SYSTEM	5/31/2016	10	5/31/2026	7,363	7,357	6
6410	136886	TROPHON EPR DISINFECTION SYSTEM	5/31/2016	10	5/31/2026	7,363	7,357	6
5700	136872	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,355	8,348	7
5700	136873	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,355	8,348	7
5700	136874	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,355	8,348	7
5701	136875	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,432	8,425	7
5701	136876	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,432	8,425	7
5701	136877	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,432	8,425	7
5701	136878	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,432	8,425	7
5701	136879	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,432	8,425	7
5701	136880	EXAM TABLE - MIDMARK 223 W/PWR BCK	5/31/2016	10	5/31/2026	8,432	8,425	7
6410	137054	CISCO VOICE BUNDLE	6/14/2016	10	6/14/2026	159,776	159,032	744
6340	137043	TRANSDUCER-E9-3 ENDOCAVITARY	6/16/2016	10	6/16/2026	9,548	9,498	50
6365	137045	AUTOMATED PREVI COLOR GRAM V12	6/16/2016	10	6/16/2026	14,186	14,112	74
6365	137046	OSMOMETER MULTI SAMPLE TESTING	6/16/2016	10	6/16/2026	22,640	22,522	118
6544	137055	HIGH DENSITY FILES SPACESAVER SSI	6/20/2016	10	6/20/2026	21,592	21,455	136
6388	137051	DRAGER JAUNDICE METER JM-105 NEMA 5	6/22/2016	10	6/22/2026	6,543	6,498	45
6412	137050	DRAGER JAUNDICE METER JM-105 NEMA 5	6/22/2016	10	6/22/2026	6,543	6,498	45
6386	137052	DRAGER JAUNDICE METER JM-105 NEMA 5	6/22/2016	10	6/22/2026	6,543	6,498	45
6410	137053	DRAGER JAUNDICE METER JM-105 NEMA 5	6/22/2016	10	6/22/2026	6,543	6,498	45
6340	137040	DRAGER JAUNDICE METER JM-105 NEMA 5	6/22/2016	10	6/22/2026	6,543	6,498	45
6340	137041	DRAGER JAUNDICE METER JM-105 NEMA 5	6/22/2016	10	6/22/2026	6,543	6,498	45
6340	137042	DRAGER JAUNDICE METER JM-105 NEMA 5	6/22/2016	10	6/22/2026	6,543	6,498	45
6555	137056	CD800-PRINTER DUPLEX-LAMINATION	6/24/2016	10	6/24/2026	7,062	7,009	52
6355	137044	ULTRASOUND TABLE ULTRA PRO	6/28/2016	10	6/28/2026	7,747	7,681	66
5278	137940	AUTO BAG PS-125 PACESETTER BAGGER	6/30/2016	10	6/30/2026	10,501	10,406	95
6555	137062	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137063	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137064	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137065	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137066	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137067	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137057	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137058	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137059	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137060	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137061	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137070	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	22,641	22,641	-
6555	137068	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	23,440	23,440	-
6555	137069	SERVER-LENOVO X3650 M5 RACK MOUNT	7/1/2016	3	7/1/2019	23,440	23,440	-

6365	137047	KAPSAFE-MINI BENCHTOP RECAPPER	7/7/2016	10	7/7/2026	15,937	15,762	175
6377	137258	GENERATOR-EPS 20 KW	7/26/2016	20	7/26/2036	14,725	7,244	7,482
6390	137260	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137261	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137262	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137263	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137265	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137259	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137264	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137267	MIDMARK EXAM TABLE 223 W/POWER	7/28/2016	10	7/28/2026	5,530	5,437	92
6390	137266	MIDMARK BARIATRIC EXAM TABLE	7/28/2016	10	7/28/2026	8,890	8,741	149
6339	137248	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137250	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137251	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137252	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137253	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137254	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137255	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137256	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137249	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
6339	137257	V60 TRSPT DOM VENTILATOR-NON	8/4/2016	10	8/4/2026	13,633	13,379	254
5775	137247	HUNDERBOLT ELISA ANALYZER	8/8/2016	10	8/8/2026	43,400	42,544	856
6352	137427	EEG/SLEEP ACQ DESKTOP W/CAMERA	8/10/2016	10	8/10/2026	23,646	23,167	479
6330	137315	TRANSPORT PATIENT MONITORING SYS	8/15/2016	10	8/15/2026	26,600	26,024	576
6308	137314	ARTIC SUN 5000E TEMPERATURE	8/17/2016	10	8/17/2026	52,627	51,459	1,168
6377	137286	SONOSITE M-TURBO ULTRASOUND	9/9/2016	10	9/9/2026	19,624	19,065	559
5775	137450	7500 FAST DX INSTRUMENT	9/9/2016	3	9/9/2019	67,926	67,926	-
6418	137287	NOMAD PRO2 DENTAL X-RAY SYSTEM	9/13/2016	10	9/13/2026	7,051	6,842	209
6330	137439	VISERA ELITE XENON LIGHT SOURCE CLV-	9/19/2016	10	9/19/2026	5,132	4,972	160
6330	137435	DUAL CHANNL URETERO SCOPE, STRA	9/19/2016	10	9/19/2026	8,521	8,255	266
6330	137442	DUAL CHANNL URETERO SCOPE, STRA	9/19/2016	10	9/19/2026	8,521	8,255	266
6330	137438	VISERA ELITE VIDEO SYSTM CENTER OTV-	9/19/2016	10	9/19/2026	8,713	8,440	272
6330	137436	HD ULTRA LIGHT URETERO CAM CH-S190-	9/19/2016	10	9/19/2026	10,742	10,406	335
6330	137440	SLIM FLEX VIDEO URETERO SCOPE URF-	9/19/2016	10	9/19/2026	17,544	16,996	548
6330	137441	SLIM FLEX VIDEO URETERO SCOPE URF-	9/19/2016	10	9/19/2026	17,544	16,996	548
6330	137437	HD ULTRA LIGHT URETERO CAM CH-S190-	9/19/2016	10	9/19/2026	22,425	21,725	700
6365	137542	ORTHO VISION BLOOD ANALYZER	10/12/2016	10	10/12/2026	99,278	95,551	3,726
6536	137294	SECURITY MONITORING SYSTEM-DELL	10/28/2016	3	10/28/2019	5,216	5,216	-
6555	137295	EXTRAHOP EH6100 APPLIANCE	10/28/2016	3	10/28/2019	43,395	43,395	-
6365	137546	OC SENSOR DIANA ANALYZER (FOB)	10/28/2016	10	10/28/2026	65,450	62,706	2,744
6365	137543	HETTICH UNIVERSAL CENTRIFUGE	10/31/2016	10	10/31/2026	5,051	4,835	216
6365	137544	HETTICH UNIVERSAL CENTRIFUGE	10/31/2016	10	10/31/2026	5,051	4,835	216
6365	137547	HETTICH UNIVERSAL CENTRIFUGE	10/31/2016	10	10/31/2026	5,074	4,857	217
6536	137292	SECURITY MONITORING SYSTEM- DELL	10/31/2016	3	10/31/2019	5,968	5,968	-
6536	137293	SECURITY MONITORING SYSTEM- DELL	10/31/2016	3	10/31/2019	5,968	5,968	-
5875	137424	HAZMAT ID ELITE	11/10/2016	10	11/10/2026	64,883	61,932	2,951
6365	137545	ROTOFIX 32A CENTRIFUGE	11/15/2016	10	11/15/2026	6,080	5,795	285
6383	137346	HEART START MRx MONITOR/DEFIB	11/15/2016	10	11/15/2026	11,639	11,094	545
6555	137461	ROUTER - FATPIPE MPVPN	11/21/2016	10	11/21/2026	25,374	24,144	1,230
6555	137463	ROUTER - FATPIPE MPVPN	11/21/2016	10	11/21/2026	25,374	24,144	1,230
6555	137462	ROUTER - FATPIPE MPVPN	11/21/2016	10	11/21/2026	26,488	25,203	1,284

6304	137358	X-PORTE BEDSIDE ULTRASOUND	11/23/2016	10	11/23/2026	70,796	67,324	3,472
6383	137444	OB-GYN Gynnie Stretcher	12/13/2016	10	12/13/2026	6,450	6,098	352
6383	137447	OB-GYN Gynnie Stretcher	12/13/2016	10	12/13/2026	6,450	6,098	352
6383	137445	OB-GYN Gynnie Stretcher	12/13/2016	10	12/13/2026	6,450	6,098	352
6383	137446	OB-GYN Gynnie Stretcher	12/13/2016	10	12/13/2026	6,450	6,098	352
6383	137448	OB-GYN Gynnie Stretcher	12/13/2016	10	12/13/2026	6,450	6,098	352
6388	137303	AMSCO 2532 WASHER DISINFECTOR	12/13/2016	10	12/13/2026	63,255	59,807	3,449
6555	137404	CISCO 5108 CHASSIS	12/21/2016	3	12/21/2019	7,124	7,124	-
6555	137405	CISCO 5108 CHASSIS	12/21/2016	3	12/21/2019	7,124	7,124	-
6555	137406	CISCO 5108 CHASSIS	12/21/2016	3	12/21/2019	7,124	7,124	-
6555	137407	CISCO 5108 CHASSIS	12/21/2016	3	12/21/2019	7,124	7,124	-
6555	137408	CISCO USC 6248 FABRIC INTERCONNECTS	12/21/2016	3	12/21/2019	7,566	7,566	-
6555	137409	CISCO USC 6248 FABRIC INTERCONNECTS	12/21/2016	3	12/21/2019	7,566	7,566	-
6555	137411	CISCO USC 6248 FABRIC INTERCONNECTS	12/21/2016	3	12/21/2019	7,566	7,566	-
6555	137419	CISCO USC 6248 FABRIC INTERCONNECTS	12/21/2016	3	12/21/2019	7,566	7,566	-
6555	137396	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137397	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137398	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137399	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137400	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137401	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137402	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137410	CISCO UCS BLADE SERVER B200M4	12/21/2016	3	12/21/2019	9,902	9,902	-
6555	137304	GOOGLE APPL HOT B/U GSA-G100-500K-	12/21/2016	3	12/21/2019	23,870	23,870	-
6555	137305	GOOGLE APPLIANCE GSA-G100-500K-2Y-	12/21/2016	3	12/21/2019	39,060	39,060	-
6352	137443	EPIQ 5C ULTRASOUND SYSTEM -	12/21/2016	10	12/21/2026	146,954	138,620	8,334
6555	137420	GIGAMON SECURITY APPLIANCE	12/23/2016	3	12/23/2019	84,835	84,835	-
6365	137345	STREAM SCRUBBER GLASSWARE WASHER	1/23/2017	10	1/23/2027	8,907	8,321	586
6555	137362	RUBRIK R348 96TB APPLIANCES	1/23/2017	3	1/23/2020	77,196	77,196	-
6555	137363	RUBRIK R348 96TB APPLIANCES	1/23/2017	3	1/23/2020	77,196	77,196	-
6555	137364	RUBRIK R348 96TB APPLIANCES	1/23/2017	3	1/23/2020	77,196	77,196	-
6339	137344	PULMONARY FTN HDPFT 4000 N2	1/25/2017	10	1/25/2027	49,759	46,460	3,299
6384	137347	DRAGER SM-105 JAUNDICE METER	2/3/2017	10	2/3/2027	6,505	6,057	447
6505	137348	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137349	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137350	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137351	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137352	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137353	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137354	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137356	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137357	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6505	137355	BED-HOSPITAL PATIENT-HILL-ROM	2/3/2017	10	2/3/2027	8,971	8,354	617
6313	137340	SPIRIT SELECT INPATIENT PSYC BED-	2/3/2017	10	2/3/2027	11,420	10,635	785
6313	137341	SPIRIT SELECT INPATIENT PSYC BED-	2/3/2017	10	2/3/2027	11,421	10,635	785
6313	137342	SPIRIT SELECT INPATIENT PSYC BED-	2/3/2017	10	2/3/2027	11,421	10,635	785
6313	137343	SPIRIT SELECT INPATIENT PSYC BED-	2/3/2017	10	2/3/2027	11,421	10,635	785
6555	137361	PURE FLASH ARRAY M50	2/3/2017	3	2/3/2020	146,772	146,772	-
6555	137360	PURE FLASH ARRAY M50	2/3/2017	3	2/3/2020	146,772	146,772	-
6555	137359	PURE FLASH BLADE 61TB	2/3/2017	3	2/3/2020	163,104	163,104	-
6340	137464	GIRAFFE BEDDED INFANT WARMER	2/10/2017	15	2/10/2032	36,445	22,579	13,866

6418	137452	RAMVAC BADGER DRY VACUUM SYSTEM	2/13/2017	10	2/13/2027	5,758	5,346	412
6418	137451	AIRTECH NEO COMPRESSOR SYSTEM	2/13/2017	10	2/13/2027	6,152	5,712	440
6380	137429	ZEISS CIRRUS HD OCT 5000 W/ANGIO	2/22/2017	10	2/22/2027	86,356	79,968	6,388
6555	E-4346	VAN-2017 FORD TRANSIT VAN 3.5L	3/1/2017	7	3/1/2024	33,245	33,245	-
6536	137428	SECURITY SYS-DELLR330 SGL XEON	3/10/2017	3	3/10/2020	5,470	5,470	-
6374	137507	VACUUM SYSTEM-RAMVAC BADGER DRY	3/17/2017	10	3/17/2027	5,751	5,290	462
6374	137508	COMPRESSOR SYSTEM-AIRTECH NEO	3/17/2017	10	3/17/2027	6,146	5,652	493
6345	137505	POS PRESSURE RECIRCULATING ASEPTIC	3/17/2017	10	3/17/2027	18,403	16,926	1,477
6345	137504	POS PRESSURE RECIRCULATING ASEPTIC	3/17/2017	10	3/17/2027	20,027	18,420	1,608
6501	137506	DISH MACHINE-HOBART ENERGY FLIGHT	3/22/2017	10	3/22/2027	145,249	133,390	11,859
5875	137482	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137496	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137498	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137499	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137500	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137501	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137502	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137503	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137483	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137484	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137485	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137486	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137487	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137488	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137489	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137490	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137491	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137492	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137493	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137494	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137495	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
5875	137497	RADIO - MOTOROLA APX 8000 PORTABLE	3/28/2017	10	3/28/2027	9,061	8,306	755
6979	137509	TABLE-MEDIUM CONF ROOM CHARCOAL	4/3/2017	10	4/3/2027	5,152	4,714	438
6979	137510	TABLE-LARGE CONF ROOM WALNUT	4/3/2017	10	4/3/2027	13,129	12,014	1,115
6979	137524	SERVER-DELL R730XD DUAL XEON	4/13/2017	3	4/13/2020	13,424	13,424	-
6336	137521	ENDOSCOPY SYS EVIS EXERA III	4/13/2017	10	4/13/2027	186,820	170,441	16,379
6555	137519	FORKLIFT-2012 NISSAN TX40 3 WHEEL	4/28/2017	15	4/28/2032	21,264	12,875	8,389
6380	137523	ULTRASOUND SYSTEM-CADWELL SIERRA	5/8/2017	10	5/8/2027	19,074	17,271	1,803
6380	137522	ULTRASOUND SYSTEM-CADWELL SIERRA	5/8/2017	10	5/8/2027	19,074	17,271	1,803
6977	137539	CURVED ARRAY TRANSDUCER	5/17/2017	10	5/17/2027	10,067	9,091	976
6977	137541	ENDOCAVITY TRANSDUCER	5/17/2017	10	5/17/2027	10,067	9,091	976
6977	137540	Z ONE PRO SYS - REFURB	5/17/2017	10	5/17/2027	27,528	24,858	2,670
6340	137551	MX500 PATIENT MONITOR-INTELLIVUE	5/19/2017	10	5/19/2027	14,041	12,671	1,369
6340	137552	MX500 PATIENT MONITOR-INTELLIVUE	5/19/2017	10	5/19/2027	14,041	12,671	1,369
6340	137553	MX500 PATIENT MONITOR-INTELLIVUE	5/19/2017	10	5/19/2027	14,041	12,671	1,369
6418	137557	P&C 1585 L/R DENTAL DELIVERY SYSTEM	5/26/2017	10	5/26/2027	5,589	5,033	556
6418	137558	P&C 1585 L/R DENTAL DELIVERY SYSTEM	5/26/2017	10	5/26/2027	5,589	5,033	556
6418	137559	P&C 1585 L/R DENTAL DELIVERY SYSTEM	5/26/2017	10	5/26/2027	5,589	5,033	556
6418	137560	P&C 1585 L/R DENTAL DELIVERY SYSTEM	5/26/2017	10	5/26/2027	5,589	5,033	556
6418	137561	ARIBEX NOMAD PRO2 HANDHELD I/O X-	5/26/2017	10	5/26/2027	7,528	6,780	749
6418	137562	ARIBEX NOMAD PRO2 HANDHELD I/O X-	5/26/2017	10	5/26/2027	7,528	6,780	749

6418	137554	P&C 3303 PATIENT CHAIR - NARROW	5/26/2017	10	5/26/2027	10,135	9,127	1,008
6418	137555	P&C 3303 PATIENT CHAIR - NARROW	5/26/2017	10	5/26/2027	10,135	9,127	1,008
6418	137556	P&C 3303 PATIENT CHAIR - NARROW	5/26/2017	10	5/26/2027	10,135	9,127	1,008
6418	137564	P&C 3303 PATIENT CHAIR - NARROW	5/26/2017	10	5/26/2027	10,135	9,127	1,008
6555	137550	SERVER - NETSCALER MPX 5650	6/1/2017	3	6/1/2020	103,421	103,421	-
6555	137548	SWITCH-CISCO CATALYST 3850 24 PORT	6/12/2017	10	6/12/2027	11,228	10,059	1,169
6555	137549	SWITCH-CISCO CATALYST 3850 24 PORT	6/12/2017	10	6/12/2027	11,500	10,303	1,197
6555	137566	ROUTER-2951 VOICE BUNDLT	6/12/2017	10	6/12/2027	14,479	12,971	1,507
6555	137567	ROUTER-2951 VOICE BUNDLT	6/12/2017	10	6/12/2027	14,479	12,971	1,507
6330	137668	Flex Cysto Nephro Fiberscope	6/13/2017	10	6/13/2027	8,621	7,721	900
6336	137821	SET-COLONSCOPE EQUIPMENT	7/7/2017	10	7/7/2027	19,450	17,291	2,158
6336	137822	SET-COLONSCOPE EQUIPMENT	7/7/2017	10	7/7/2027	19,450	17,291	2,158
6340	137824	SET-EXAM EQUIPMENT	7/7/2017	10	7/7/2027	112,004	99,576	12,428
6977	137827	GS TI SPECTRUM PREM CART	7/14/2017	10	7/14/2027	14,243	12,635	1,608
6977	137828	GS TI SPECTRUM PREM CART	7/14/2017	10	7/14/2027	14,243	12,635	1,608
6330	137826	GS TI SPECTRUM PREM CART	7/14/2017	10	7/14/2027	14,243	12,635	1,608
6977	137825	GS TI SPECTRUM PREM CART	7/14/2017	10	7/14/2027	14,243	12,635	1,608
6351	137819	SET-AMSCO EQUIPMENT	7/14/2017	10	7/14/2027	122,460	108,637	13,823
6351	137820	SET-AMSCO EQUIPMENT	7/14/2017	10	7/14/2027	122,460	108,637	13,823
6340	137823	SET-FETAL MONITORING EQUIPMENT	7/17/2017	10	7/17/2027	398,650	353,324	45,326
5775	137657	MISEQ SYSTEM	7/18/2017	10	7/18/2027	109,643	97,146	12,496
6383	137900	STRETCHER-HILL-ROM MODEL P8000	7/31/2017	15	7/31/2032	6,036	3,551	2,485
6383	137901	STRETCHER-HILL-ROM MODEL P8000	7/31/2017	15	7/31/2032	6,036	3,551	2,485
6383	137899	STRETCHER-HILL-ROM MODEL P8000	7/31/2017	15	7/31/2032	6,036	3,551	2,485
5775	137895	FREEZER-THERMO TSU-80C	7/31/2017	15	7/31/2032	8,699	5,118	3,581
6414	137897	DRAGER JAUNDICE METER JM-105	7/31/2017	10	7/31/2027	6,471	5,710	761
6555	137906	SERVER-DELL R730XD DUAL XEON	7/31/2017	3	7/31/2020	12,082	12,082	-
6555	137907	SERVER-DELL R730XD DUAL XEON	7/31/2017	3	7/31/2020	12,082	12,082	-
6404	137896	TIMS 2000SP FLUOROSCOPY RECORDER-	7/31/2017	10	7/31/2027	40,821	36,023	4,798
6977	137904	ULTRASOUND SYSTEM-Z ONE PRO	7/31/2017	10	7/31/2027	61,433	54,212	7,220
6388	137902	DRAGER JAUNDICE METER JM-105	8/10/2017	10	8/10/2027	6,887	6,058	828
6390	137903	DRAGER JAUNDICE METER JM-105	8/10/2017	10	8/10/2027	6,887	6,058	828
6977	137905	POWER TABLE 630-010 BASE	8/11/2017	10	8/11/2027	13,977	12,292	1,685
6340	137898	INFANT BED WARMER - PANDA IRES	8/11/2017	15	8/11/2032	23,458	13,753	9,704
6365	137945	OSMOMETER, SINGLE-SAMPLE	8/21/2017	10	8/21/2027	12,856	11,271	1,585
6355	137944	E9-3 ENDOCAVITY TRANSDUCER	8/25/2017	10	8/25/2027	11,125	9,741	1,384
6418	E-6890	MOBILE DENTAL CLINIC-2016 DIESEL	9/1/2017	10	9/1/2027	294,923	257,674	37,249
6418	E-6891	MOBILE DENTAL CLINIC-2016 DIESEL	9/1/2017	10	9/1/2027	294,923	257,674	37,249
6977	137946	TRANSDUCER ICTXP/9-5 MHZ	9/6/2017	10	9/6/2027	12,234	10,672	1,562
6383	137943	STRETCHER-OB-GYN GYNNIE	9/8/2017	15	9/8/2032	6,464	3,757	2,707
6383	137942	STRETCHER-OB-GYN GYNNIE	9/8/2017	15	9/8/2032	6,464	3,757	2,707
6345	137969	POS PRESS RECIR STERILE ISO	9/19/2017	10	9/19/2027	16,727	14,532	2,195
6345	137967	NEG PRESS TOTL EXH STERILE ISO	9/19/2017	10	9/19/2027	25,329	22,005	3,324
6345	137968	NEG PRESS TOTL EXH STERILE ISO	9/19/2017	10	9/19/2027	25,329	22,005	3,324
6383	137970	TRANSDUCER - ICTX/8-5 MHZ	9/21/2017	10	9/21/2027	6,656	5,778	877
6388	137971	TRANSDUCER - C4-1	9/27/2017	10	9/27/2027	8,450	7,322	1,127
6555	137972	SERVER-LENOVO X3650	9/27/2017	3	9/27/2020	12,917	12,917	-
5875	138149	DUSTTRAK DRX MODEL 8534	10/2/2017	15	10/2/2032	12,039	6,944	5,095
6536	137982	CEILING CAVITY DUST CNTNMNT UNIT	10/23/2017	15	10/23/2032	13,345	7,646	5,699
6340	137980	BED-BIRTHING AFFINITY	10/23/2017	15	10/23/2032	18,464	10,579	7,885
6340	137981	BED-BIRTHING AFFINITY	10/23/2017	15	10/23/2032	18,464	10,579	7,885

6340	137979	BED-BIRTHING AFFINITY	10/23/2017	15	10/23/2032	18,464	10,579	7,885
6555	138012	NETWORK SWITCH-CISCO SAN FABRIC	10/25/2017	10	10/25/2027	6,430	5,523	907
6555	138019	NETWORK SWITCH-CISCO SAN FABRIC	10/25/2017	10	10/25/2027	6,430	5,523	907
6555	137984	NETWORK SWITCH-CISCO UCS CHASIS	10/25/2017	10	10/25/2027	9,431	8,100	1,331
6555	137990	NETWORK SWITCH-CISCO UCS CHASIS	10/25/2017	10	10/25/2027	9,431	8,100	1,331
6555	137989	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137991	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137993	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137998	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138006	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138008	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138013	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138014	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138015	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138016	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138017	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	138018	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137985	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137986	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137987	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137988	SERVER-CISCO BLADE B200M4	10/25/2017	3	10/25/2020	8,705	8,705	-
6555	137994	NETWORK SWITCH-CISCO UCS	10/25/2017	10	10/25/2027	11,849	10,177	1,672
6555	137995	NETWORK SWITCH-CISCO UCS	10/25/2017	10	10/25/2027	11,849	10,177	1,672
6555	137996	NETWORK SWITCH-CISCO N9K-C9336PQ	10/25/2017	10	10/25/2027	17,411	14,954	2,457
6555	138004	NETWORK SWITCH-CISCO N9K-C9336PQ	10/25/2017	10	10/25/2027	17,411	14,954	2,457
6555	137992	NETWORK SWITCH-CISCO 93180YC-EX	10/25/2017	10	10/25/2027	24,181	20,770	3,412
6555	137997	NETWORK SWITCH-CISCO 93180YC-EX	10/25/2017	10	10/25/2027	24,181	20,770	3,412
6555	137999	NETWORK SWITCH-CISCO 93180YC-EX	10/25/2017	10	10/25/2027	24,181	20,770	3,412
6555	138000	NETWORK SWITCH-CISCO 93180YC-EX	10/25/2017	10	10/25/2027	24,181	20,770	3,412
6555	138001	NETWORK SWITCH-CISCO 93180YC-EX	10/25/2017	10	10/25/2027	24,181	20,770	3,412
6555	138002	NETWORK SWITCH-CISCO 93180YC-EX	10/25/2017	10	10/25/2027	24,181	20,770	3,412
6555	138005	CISCO SAN FIBER MODULE-X9448	10/25/2017	3	10/25/2020	21,719	21,719	-
6555	138007	CISCO SAN FIBER MODULE-X9448	10/25/2017	3	10/25/2020	21,719	21,719	-
6555	138009	CISCO SAN FIBER MODULE-X9448	10/25/2017	3	10/25/2020	21,719	21,719	-
6555	138010	CISCO SAN FIBER MODULE-X9448	10/25/2017	3	10/25/2020	21,719	21,719	-
6555	138011	CISCO SAN FIBER MODULE-X9448	10/25/2017	3	10/25/2020	21,719	21,719	-
6555	138020	CISCO SAN FIBER MODULE-X9448	10/25/2017	3	10/25/2020	21,719	21,719	-
6555	138003	CISCO NETWORK APPLIANCE APIC3L2	10/25/2017	5	10/25/2022	23,231	23,231	-
6555	138022	SWITCH-CISCO CATALYST 3850 24 PORT	11/3/2017	10	11/3/2027	5,727	4,904	822
6555	138023	SWITCH-CISCO CATALYST 3850 24 PORT	11/3/2017	10	11/3/2027	5,727	4,904	822
6555	138024	SWITCH-CISCO CATALYST 3850 24 PORT	11/3/2017	10	11/3/2027	5,727	4,904	822
6555	138025	SWITCH-CISCO CATALYST 3850 24 PORT	11/3/2017	10	11/3/2027	5,727	4,905	822
6555	138021	CISCO 1-PORT SHARED PORT ADAPTER	11/3/2017	3	11/3/2020	5,467	5,467	-
6555	138030	CISCO 1-PORT SHARED PORT ADAPTER	11/3/2017	3	11/3/2020	5,467	5,467	-
6555	138026	SWITCH-CISCO CATALYST 3850 12 PORT	11/3/2017	10	11/3/2027	8,681	7,435	1,246
6555	138027	SWITCH-CISCO CATALYST 3850 12 PORT	11/3/2017	10	11/3/2027	8,681	7,435	1,246
6555	138028	CISCO 10GBASE XFP MODULE	11/3/2017	10	11/3/2027	8,747	7,491	1,256
6555	138029	CISCO 10GBASE XFP MODULE	11/3/2017	10	11/3/2027	8,747	7,491	1,256
6555	138031	CISCO 10GBASE XFP MODULE	11/3/2017	10	11/3/2027	8,747	7,491	1,256
6339	137978	PULMONARY FUNCTION SYSTEM	11/3/2017	10	11/3/2027	31,248	26,762	4,486
6555	137983	SWITCH-CISCO CATALYST 3850 24 PORT	11/9/2017	10	11/9/2027	5,763	4,926	837

6555	138054	CONTROLLER - ARUBA 7205	11/20/2017	10	11/20/2027	7,977	6,795	1,182
6313	138050	SPIRIT SELECT INPATIENT PSYC BED-	12/8/2017	10	12/8/2027	11,445	9,692	1,753
6313	138051	SPIRIT SELECT INPATIENT PSYC BED-	12/8/2017	10	12/8/2027	11,445	9,692	1,753
6380	138052	EXAM TABLE - MIDMARK 630 W/PWR BCK	12/12/2017	10	12/12/2027	13,901	11,757	2,144
6380	138053	EXAM TABLE - MIDMARK 630 W/PWR BCK	12/12/2017	10	12/12/2027	13,901	11,757	2,144
6418	138107	PLANMECA SIZE 2 PROSENSOR	12/27/2017	10	12/27/2027	7,228	6,083	1,145
6418	138108	PLANMECA SIZE 2 PROSENSOR	12/27/2017	10	12/27/2027	7,228	6,083	1,145
6418	138109	PLANMECA SIZE 2 PROSENSOR	12/27/2017	10	12/27/2027	7,228	6,083	1,145
6308	138105	ULTRASOUND SYSTEM	12/27/2017	10	12/27/2027	11,555	9,725	1,830
6383	138110	ULTRASOUND SYSTEM	12/27/2017	10	12/27/2027	25,932	21,825	4,106
6555	138113	ARUBA 7220 CONTROLLER	12/29/2017	3	12/29/2020	10,372	10,372	-
6555	138114	ARUBA 7220 CONTROLLER	12/29/2017	3	12/29/2020	10,372	10,372	-
6555	138111	ARUBA 7210 CONTROLLER	12/29/2017	3	12/29/2020	15,559	15,559	-
6555	138112	ARUBA 7210 CONTROLLER	12/29/2017	3	12/29/2020	15,559	15,559	-
6390	138106	ULTRASOUND SYSTEM	1/4/2018	10	1/4/2028	64,301	53,977	10,323
6388	138136	SERVER-DELL R330 SINGLE XEON	1/12/2018	3	1/12/2021	7,108	7,108	-
6555	138077	RUBRIK R348 96TB APPLIANCES	2/15/2018	3	2/15/2021	102,476	102,476	-
6555	138078	RUBRIK R348 96TB APPLIANCES	2/15/2018	3	2/15/2021	102,476	102,476	-
6365	138065	FREEZER-LAB 19.7 CU FT STAINLESS	2/16/2018	15	2/16/2033	6,255	3,452	2,804
6365	138066	FREEZER-LAB 19.7 CU FT STAINLESS	2/16/2018	15	2/16/2033	6,255	3,452	2,804
6555	138071	SERVER-UCS SP SELECT 5108	3/9/2018	3	3/9/2021	6,506	6,506	-
6555	138072	SERVER-B200M4	3/9/2018	3	3/9/2021	10,193	10,193	-
6555	138073	SERVER-B200M4	3/9/2018	3	3/9/2021	10,193	10,193	-
6555	138074	SERVER-B200M4	3/9/2018	3	3/9/2021	10,193	10,193	-
6555	138075	SERVER-B200M4 STANDALONE	3/9/2018	3	3/9/2021	10,193	10,193	-
6555	138076	SERVER-B200M4 STANDALONE	3/9/2018	3	3/9/2021	10,193	10,193	-
6555	138068	SERVER-LENOVO X3550 M5 SERVER	3/9/2018	3	3/9/2021	11,838	11,838	-
6555	138069	SERVER-LENOVO X3550 M5 SERVER	3/9/2018	3	3/9/2021	11,838	11,838	-
6555	138067	SERVER-LENOVO X3550 M5 SERVER	3/9/2018	3	3/9/2021	11,838	11,838	-
6345	138160	REFRIGERATOR-PHARMACY 24.6 CU FT	4/18/2018	15	4/18/2033	5,681	3,071	2,609
6388	138156	CHAIR-PROCEDURE 630 PWR	4/30/2018	10	4/30/2028	11,951	9,652	2,298
6388	138157	CHAIR-PROCEDURE 630 PWR	4/30/2018	10	4/30/2028	11,951	9,652	2,298
6388	138158	CHAIR-PROCEDURE 630 PWR	4/30/2018	10	4/30/2028	11,951	9,652	2,298
6388	138159	CHAIR-PROCEDURE 630 PWR	4/30/2018	10	4/30/2028	11,951	9,652	2,298
5891	138150	GALILEO VIBRATIONS PLATE S-25	5/10/2018	10	5/10/2028	6,665	5,365	1,300
5891	138151	GALILEO VIBRATIONS PLATE S-25	5/10/2018	10	5/10/2028	6,665	5,365	1,300
5891	138152	GALILEO VIBRATIONS PLATE S-25	5/10/2018	10	5/10/2028	6,665	5,365	1,300
5891	138153	GALILEO VIBRATIONS PLATE S-25	5/10/2018	10	5/10/2028	6,665	5,365	1,300
5891	138154	GALILEO VIBRATIONS PLATE S-25	5/10/2018	10	5/10/2028	6,665	5,365	1,300
6351	138228	ENDOSCOPE DRYING CABINET	5/14/2018	10	5/14/2028	11,797	9,482	2,314
6380	138227	RHINO LARYNGO FIBERSCOPE	5/21/2018	10	5/21/2028	7,693	6,169	1,524
5875	138216	HSGP2015-RADIO-MOTOROLA APX7500	5/25/2018	10	5/25/2028	7,515	6,018	1,497
5875	138213	HSGP2015-RADIO-MOTOROLA APX7500	5/25/2018	10	5/25/2028	7,515	6,018	1,497
5875	138214	HSGP2015-RADIO-MOTOROLA APX7500	5/25/2018	10	5/25/2028	7,515	6,018	1,497
5875	138215	HSGP2015-RADIO-MOTOROLA APX7500	5/25/2018	10	5/25/2028	7,515	6,018	1,497
5875	138217	HSGP2015-RADIO-MOTOROLA APX7500	5/25/2018	10	5/25/2028	7,515	6,018	1,497
6555	138223	FIREWALL-CISCO ASA5525 THREAT	5/29/2018	6	5/29/2024	5,754	5,754	-
6555	138222	FIREWALL-CISCO ASA5525 THREAT	5/29/2018	6	5/29/2024	5,754	5,754	-
5891	138220	WHEELCHAIR-ROVI X3 POWER	5/29/2018	10	5/29/2028	13,985	11,184	2,801
5891	138221	WHEELCHAIR-ROVI X3 POWER	5/29/2018	10	5/29/2028	13,985	11,184	2,801
6555	138224	FLASH ARRAY CHASSIS DATAPACK 20TB	5/29/2018	3	5/29/2021	71,628	71,628	-

6555	138225	FLASH ARRAY CHASSIS DATAPACK 20TB	5/29/2018	3	5/29/2021	71,628	71,628	-
6340	138226	GIRAFFE BEDDED INFANT WARMER	6/11/2018	15	6/11/2033	13,079	6,942	6,137
6387	138278	BLADDER SCAN BVI 9400	6/15/2018	10	6/15/2028	13,194	10,490	2,704
5933	138275	RANGE-WOLF GAS 60" RESTAURANT 6	6/19/2018	10	6/19/2028	5,904	4,688	1,216
6387	138279	INTERACOUSTICS AC40 CLINICAL	6/27/2018	10	6/27/2028	8,374	6,631	1,744
6365	138276	APPLIANCE-FOLLETT BLOOD BNK	6/29/2018	15	6/29/2033	6,149	3,244	2,905
6365	138277	APPLIANCE-FOLLETT BLOOD BNK	6/29/2018	15	6/29/2033	6,149	3,244	2,905
5278	138274	APPLIANCE-CLEVELAND CONVECTION	6/29/2018	10	6/29/2028	28,085	22,222	5,863
6979	138280	APPLIANCE-STEAMER CONVECTION GAS	7/9/2018	10	7/9/2028	17,761	14,004	3,757
5841	138273	APPLIANCE-FOLLETT LAB REFRIGERATOR	7/11/2018	15	7/11/2033	5,050	2,653	2,397
5841	138272	APPLIANCE-FOLLETT LAB REFRIGERATOR	7/11/2018	15	7/11/2033	5,050	2,653	2,397
5841	138271	APPLIANCE-FOLLETT LAB FREEZER	7/11/2018	15	7/11/2033	6,796	3,570	3,226
6555	138246	SERVER-LENOVO X3650 M5	7/17/2018	3	7/17/2021	13,841	13,841	-
5775	138245	APPLIANCE-THERMO SCI ULT FREEZER	7/30/2018	15	7/30/2033	10,621	5,542	5,079
6555	138247	PALO ALTO NETWORKS PA-3250	7/30/2018	10	7/30/2028	21,281	16,658	4,624
6555	138248	PALO ALTO NETWORKS PA-3250	7/30/2018	10	7/30/2028	21,281	16,658	4,624
6388	138510	BLADDERSCAN BVI 9400 STANDARD	8/17/2018	10	8/17/2028	14,281	11,108	3,173
6555	138356	DMC EZ-250P DOUBLE BURNER	9/6/2018	3	9/6/2021	8,480	8,480	-
6388	138346	CHAIR-PROCEDURE 630 PWR	9/6/2018	10	9/6/2028	12,230	9,446	2,784
6388	138345	CHAIR-PROCEDURE 630 PWR	9/6/2018	10	9/6/2028	12,230	9,446	2,784
6555	138355	DMC EZ-25P SINGLE BURNER	9/6/2018	3	9/6/2021	18,092	18,092	-
6555	138485	DMC EZ-250P SINGLE BURNER	9/6/2018	3	9/6/2021	18,092	18,092	-
5875	139268	HSGP FY17 HAZMAT RADIATION PAGER	9/12/2018	10	9/12/2028	5,280	4,069	1,211
5875	139269	HSGP FY17 HAZMAT RADIATION PAGER	9/12/2018	10	9/12/2028	5,280	4,069	1,211
5875	139270	HSGP FY17 HAZMAT RADIATION PAGER	9/12/2018	10	9/12/2028	5,280	4,069	1,211
5875	139272	HSGP FY17 HAZMAT RADIATION PAGER	9/12/2018	10	9/12/2028	5,280	4,069	1,211
5875	139267	HSGP FY17 HAZMAT RADIATION PAGER	9/12/2018	10	9/12/2028	5,280	4,069	1,211
5875	139271	HSGP FY17 HAZMAT RADIATION PAGER	9/12/2018	10	9/12/2028	6,204	4,781	1,423
6388	138344	FUJII TRANSDUCER P20402-11 C60XI	9/14/2018	10	9/14/2028	6,656	5,126	1,530
5849	138329	PROSEAL II PORTABLE HYGIENE UNIT	9/21/2018	10	9/21/2028	5,705	4,383	1,322
5849	138326	PROSEAL II PORTABLE HYGIENE UNIT	9/21/2018	10	9/21/2028	5,705	4,383	1,322
5849	138327	PROSEAL II PORTABLE HYGIENE UNIT	9/21/2018	10	9/21/2028	5,705	4,383	1,322
5849	138328	PROSEAL II PORTABLE HYGIENE UNIT	9/21/2018	10	9/21/2028	5,705	4,383	1,322
6555	138357	SIFORCE ONE FORENSIC WORKSTATION	10/1/2018	3	10/1/2021	6,348	6,348	-
5878	E-3657	SUV: 2018 FORD EDGE	10/1/2018	7	10/1/2025	34,054	34,054	-
5878	E-3658	SUV: 2018 FORD EDGE	10/1/2018	7	10/1/2025	34,054	34,054	-
6330	138331	GLIDESCOPE TI SPECTRUM	10/8/2018	10	10/8/2028	15,869	12,117	3,752
5775	138324	TORCH FILM ARRAY	10/29/2018	10	10/29/2028	24,469	18,543	5,926
5775	138325	TORCH FILM ARRAY	10/29/2018	10	10/29/2028	24,469	18,543	5,926
6330	138332	ULTRASOUND: X-PORT KIOSK WITH	10/29/2018	10	10/29/2028	98,169	74,393	23,776
6555	138347	CATALYST 9300 48-PORT POE	11/1/2018	10	11/1/2028	5,725	4,334	1,391
6555	138348	CATALYST 9300 48-PORT POE	11/1/2018	10	11/1/2028	5,725	4,334	1,391
6351	138334	ATLAS LOADING CAR 48"	11/7/2018	10	11/7/2028	10,608	8,013	2,595
6555	138349	SWITCH-CISCO CATALYST 3850 24 PORT	11/7/2018	10	11/7/2028	13,827	10,444	3,383
6555	138350	SWITCH-CISCO CATALYST 3850 24 PORT	11/7/2018	10	11/7/2028	13,827	10,444	3,383
6555	138351	SWITCH-CISCO CATALYST 3850 24 PORT	11/7/2018	10	11/7/2028	13,827	10,444	3,383
6555	138352	SWITCH-CISCO CATALYST 3850 24 PORT	11/7/2018	10	11/7/2028	13,827	10,444	3,383
6555	138353	SWITCH-CISCO CATALYST 3850 24 PORT	11/7/2018	10	11/7/2028	13,827	10,444	3,383
6555	138354	SWITCH-CISCO CATALYST 3850 24 PORT	11/7/2018	10	11/7/2028	13,827	10,444	3,383
6351	138335	STERIS RELIANCE ENDOSCOPE CABINET	11/15/2018	15	11/15/2033	8,721	4,379	4,342
6387	138343	SYSTEM-ZEISS HFA3	11/19/2018	10	11/19/2028	32,678	24,576	8,102

6330	138509	SYSTEM-STRYKER 8	11/19/2018	10	11/19/2028	149,290	112,274	37,016
6555	138511	SYSTEM-PURE STORAGE FLASH ARRAY	11/20/2018	3	11/20/2021	345,825	345,825	-
6330	138333	SYSTEM-GENESYS HTA CONTROL UNIT	11/26/2018	10	11/26/2028	15,407	11,557	3,850
5878	E-3643	SUV: 2018 FORD POLICE UTIL	12/1/2018	7	12/1/2025	33,495	33,495	-
5878	E-3644	SUV: 2018 FORD POLICE UTIL	12/1/2018	7	12/1/2025	33,495	33,495	-
5878	E-3645	SUV: 2018 FORD POLICE UTIL	12/1/2018	7	12/1/2025	33,495	33,495	-
6418	E-6892	2019 MOBILE HEALTHCARE CLINIC	12/1/2018	15	12/1/2033	275,113	137,330	137,783
6365	138391	CELLAVISION DM9600 ANALYZING	12/6/2018	10	12/6/2028	206,066	154,013	52,053
6380	138339	SYSTEM-STERIS STERILIZER GENERATOR	12/10/2018	10	12/10/2028	14,793	11,040	3,753
6349	138396	PAGEWRITER TC70 CARDIOGRAPH	12/18/2018	10	12/18/2028	9,786	7,282	2,504
6351	138336	SURGICAL LCD DISPLAY UPGRADE	12/20/2018	10	12/20/2028	6,275	4,666	1,609
6351	138337	SURGICAL LCD DISPLAY UPGRADE	12/20/2018	10	12/20/2028	6,275	4,666	1,609
6386	138342	SYSTEM-SONOSITE SII ULTRASOUND	12/20/2018	10	12/20/2028	30,604	22,756	7,848
6383	138340	SYSTEM-SONOSITE X-PORTE	12/20/2018	10	12/20/2028	54,364	40,423	13,941
5775	138596	GETINGE AUTOCLAVE/STERILIZER	12/27/2018	10	12/27/2028	9,467	7,021	2,446
6384	138341	SYSTEM-VERATHON BLADDERSCAN PRIME	12/31/2018	10	12/31/2028	13,414	9,934	3,480
6555	138330	SWITCH-CISCO ME 3400E	1/2/2019	10	1/2/2029	5,143	3,806	1,337
6555	138399	RUBRIK R348 96TB APPLIANCE	1/10/2019	3	1/10/2022	102,458	102,458	-
6555	138400	RUBRIK R348 96TB APPLIANCE	1/10/2019	3	1/10/2022	102,458	102,458	-
6501	138398	ICE CREAM COOLER	1/14/2019	10	1/14/2029	8,854	6,523	2,331
6555	138404	SWITCH-CISCO CATALYST 3850	1/29/2019	10	1/29/2029	6,687	4,899	1,788
6555	138405	SWITCH-CISCO CATALYST 3850	1/29/2019	10	1/29/2029	6,687	4,899	1,788
6555	138406	SWITCH-CISCO CATALYST 3850	1/29/2019	10	1/29/2029	6,687	4,899	1,788
6555	138407	SWITCH-CISCO CATALYST 3850	1/29/2019	10	1/29/2029	6,687	4,899	1,788
6555	138401	SWITCH-CISCO CATALYST 3850	1/29/2019	10	1/29/2029	6,687	4,899	1,788
6555	138402	SWITCH-CISCO CATALYST 3850	1/29/2019	10	1/29/2029	6,687	4,899	1,788
6555	138403	SWITCH-CISCO CATALYST 3850	1/29/2019	10	1/29/2029	6,687	4,899	1,788
6383	138397	LUCAS 3 CHEST COMPRESSION SYSTEM	1/31/2019	10	1/31/2029	15,136	11,080	4,055
6551	E-3813	VAN-2019 FORD TRANSIT CONNECT	2/1/2019	7	2/1/2026	27,758	27,758	-
6551	E-3814	VAN-2019 FORD TRANSIT CONNECT	2/1/2019	7	2/1/2026	27,758	27,758	-
6336	138389	OLYMPUS EVIS EXERA III COLONOSCOPE	2/6/2019	10	2/6/2029	38,602	28,195	10,407
6336	138390	OLYMPUS EVIS EXERA III GASTROSCOPE	2/6/2019	10	2/6/2029	66,661	48,690	17,971
6377	138338	PAGEWRITER TC70 CARDIOGRAPH	2/8/2019	10	2/8/2029	10,757	7,851	2,906
6555	138409	DELL EMC UNITY 400 HYBRID STORAGE	2/8/2019	3	2/8/2022	15,050	15,050	-
6555	138408	DELL EMC UNITY 400 HYBRID STORAGE	2/8/2019	3	2/8/2022	15,050	15,050	-
6365	138394	APPLIANCE-PHARMACY REFRIGERATOR	2/13/2019	15	2/13/2034	5,556	2,698	2,857
6365	138395	APPLIANCE-PHARMACY REFRIGERATOR	2/13/2019	15	2/13/2034	5,556	2,698	2,857
6345	138393	APPLIANCE-PHARMACY REFRIGERATOR	2/27/2019	15	2/27/2034	5,716	2,762	2,955
6351	138513	V-PRO MAX STERILIZATION SYSTEM	3/1/2019	10	3/1/2029	145,240	105,170	40,070
6351	138512	V-PRO MAX STERILIZATION SYSTEM	3/1/2019	10	3/1/2029	190,490	137,936	52,554
5278	138388	APPLIANCE-WALK IN FREEZER	3/8/2019	15	3/8/2034	51,696	24,890	26,807
6555	138412	SWITCH-CISCO CATALYST 3850	3/11/2019	10	3/11/2029	15,932	11,493	4,439
6555	138413	SWITCH-CISCO CATALYST 3850	3/11/2019	10	3/11/2029	15,932	11,493	4,439
6555	138410	19.2 TB SAS Datapack	3/11/2019	3	3/11/2022	47,916	47,916	-
6555	138411	19.2 TB SAS Datapack	3/11/2019	3	3/11/2022	47,916	47,916	-
6555	138444	SWITCH-CISCO ASR1001-X CHASSIS 8GB	4/25/2019	10	4/25/2029	10,245	7,264	2,981
6555	138445	SWITCH-CISCO ASR1001-X CHASSIS 8GB	4/25/2019	10	4/25/2029	10,245	7,264	2,981
6336	138439	VIDEO DUODENOSCOPE NBI	4/25/2019	10	4/25/2029	42,650	30,240	12,409
5700	138436	X-RAY-DENTAL PLANMECA PROX IO	5/1/2019	10	5/1/2029	5,217	3,690	1,526
6330	138437	URETEROSCOPE	5/10/2019	10	5/10/2029	8,201	5,781	2,420
6330	138438	URETEROSCOPE	5/10/2019	10	5/10/2029	8,201	5,781	2,420

6384	138443	TRANSDUCER ICTXP/9-5 MHZ	5/10/2019	10	5/10/2029	12,291	8,664	3,627
6355	138441	DIGITAL IMAGING PLATE	5/10/2019	10	5/10/2029	18,776	13,236	5,540
6355	138559	DIGITAL IMAGING PLATE	5/10/2019	10	5/10/2029	18,776	13,236	5,540
6355	138440	DIGITAL X-RAY SYSTEM	5/10/2019	10	5/10/2029	150,206	105,885	44,321
5278	138479	APPLIANCE-WALK IN COOLER	5/22/2019	15	5/22/2034	36,813	17,220	19,593
6555	138564	SERVER - DELL POWEREDGE R640	6/13/2019	3	6/13/2022	17,553	17,553	-
6555	138565	SERVER - DELL POWEREDGE R640	6/13/2019	3	6/13/2022	17,553	17,553	-
6555	138566	SERVER - DELL POWEREDGE R640	6/13/2019	3	6/13/2022	17,553	17,553	-
6555	138567	SERVER - DELL POWEREDGE R640	6/13/2019	3	6/13/2022	17,553	17,553	-
6555	138562	SERVER I-60 STORINATOR	6/17/2019	3	6/17/2022	15,769	15,769	-
6555	138563	SERVER I-60 STORINATOR	6/17/2019	3	6/17/2022	15,769	15,769	-
6555	138568	SERVER - LENOVO SR650	6/26/2019	3	6/26/2022	36,306	36,306	-
6555	138569	SERVER - LENOVO SR650	6/26/2019	3	6/26/2022	36,306	36,306	-
6555	138573	EXTRAHOP 6200 APPLIANCE	6/26/2019	6	6/26/2025	46,755	46,755	-
6555	138574	SERVER - IBM E950	6/26/2019	3	6/26/2022	136,168	136,168	-
6555	138575	SERVER - IBM E950	6/26/2019	3	6/26/2022	136,168	136,168	-
6555	138576	SERVER - IBM E950	6/26/2019	3	6/26/2022	136,168	136,168	-
6555	138577	SERVER - IBM E950	6/26/2019	3	6/26/2022	136,168	136,168	-
6355	138560	ULTRA SOUND SYSTEM	6/26/2019	3	6/26/2022	164,607	164,607	-
6555	138571	1X-1208PR 10GB NIC XenServer	6/28/2019	3	6/28/2022	12,767	12,767	-
6555	138572	1X-1208PR QLOGIC 16GB NIC-XenServer	6/28/2019	3	6/28/2022	12,767	12,767	-
6555	138570	1x-1208PR 10GB NIC-Xen Server	6/28/2019	3	6/28/2022	13,997	13,997	-
6555	138578	PURE STORAGE SHELF ARRAYS 11TB	6/28/2019	5	6/28/2024	63,611	63,611	-
6555	138579	PURE STORAGE SHELF ARRAYS 11 TB	6/28/2019	5	6/28/2024	63,611	63,611	-
6555	138602	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138603	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138604	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138605	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138606	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138607	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138608	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138609	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138610	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138611	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138612	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138613	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138614	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138615	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138616	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138617	USC B200 BLADE SERVER	7/17/2019	3	7/17/2022	14,162	14,162	-
6555	138597	CISCO CATALYST SWITCH	7/17/2019	3	7/17/2022	17,500	17,500	-
6555	138598	CISCO CATALYST SWITCH	7/17/2019	3	7/17/2022	17,500	17,500	-
6555	138599	CISCO CATALYST SWITCH	7/17/2019	3	7/17/2022	17,500	17,500	-
6555	138601	GIGAMON SWITCH CHASSIS	7/17/2019	3	7/17/2022	55,003	55,003	-
6399	138774	STRETCHER CHAIR- VIDEO FLUORO	8/7/2019	15	8/7/2034	12,046	5,465	6,581
6330	138773	WATER SOFTENER-CULLIGAN	8/9/2019	20	8/9/2039	25,253	8,586	16,667
6330	138772	WATER SOFTENER-CULLIGAN	8/9/2019	20	8/9/2039	25,253	8,586	16,667
6555	138781	PURESTORAGE SHELF (45TB STORAGE)	9/17/2019	5	9/17/2024	112,348	112,348	-
6555	138782	PURESTORAGE SHELF (45TB STORAGE)	9/17/2019	5	9/17/2024	112,348	112,348	-
6343	138822	APPLIANCE-PHARMACY REFRIGERATOR	10/29/2019	15	10/29/2034	6,388	2,801	3,586
6555	138823	CISCO FIBER SWITCH	10/29/2019	10	10/29/2029	123,035	80,934	42,102

6555	138824	CISCO FIBER SWITCH	10/29/2019	10	10/29/2029	123,035	80,934	42,102
5775	138821	FREEZER-ULTRA LOW TEMP 115V BX300	11/7/2019	15	11/7/2034	10,240	4,474	5,766
6377	E-4767	VAN-FORD MEDICAL TRANSIT VAN	12/1/2019	7	12/1/2026	77,385	71,721	5,664
6365	138844	CENTERIFUGE-BENCHTOP	12/2/2019	10	12/2/2029	5,339	3,462	1,877
5986	138852	STANDARD WEIGHT SCALE	12/12/2019	10	12/12/2029	6,001	3,875	2,126
6555	138856	CISCO CATALYST 3850 24 PORT	12/20/2019	10	12/20/2029	10,234	6,586	3,648
6555	138861	CISCO CATALYST 3850 24 PORT	12/20/2019	10	12/20/2029	10,234	6,586	3,648
6555	138857	CISCO CATALYST 3850 48 PORT	12/20/2019	10	12/20/2029	15,237	9,806	5,431
6555	138858	CISCO CATALYST 3850 48 PORT	12/20/2019	10	12/20/2029	15,237	9,806	5,431
6555	138859	CISCO CATALYST 3850 48 PORT	12/20/2019	10	12/20/2029	15,237	9,806	5,431
6555	138860	CISCO CATALYST 3850 48 PORT	12/20/2019	10	12/20/2029	15,237	9,806	5,431
6365	138855	THAWER, PLASMA DH4	1/2/2020	10	1/2/2030	5,462	3,496	1,966
6384	138862	IMAGING PROSENSOR	1/2/2020	10	1/2/2030	6,909	4,422	2,487
6384	138863	IMAGING PROSENSOR	1/2/2020	10	1/2/2030	6,909	4,422	2,487
5700	138853	BED- BEHAVIORAL HEALTH	1/3/2020	10	1/3/2030	9,326	5,966	3,360
5700	138854	BED- BEHAVIORAL HEALTH	1/3/2020	10	1/3/2030	9,326	5,966	3,360
6418	138936	PROSENSOR DENTAL X-RAY SENSOR SIZE	2/26/2020	10	2/26/2030	6,923	4,326	2,597
5775	138926	FREEZER CHEST	2/26/2020	15	2/26/2035	12,267	5,111	7,157
6375	138935	FILM DEVELOPER-AIR TECH A/T2000XR	2/26/2020	10	2/26/2030	9,516	5,947	3,569
5875	138930	HSGP 2017 MASS SPECTROMETER	2/26/2020	10	2/26/2030	78,190	48,864	29,327
5875	138931	HSGP 2017 HANDHELD RIID R440-GN	3/10/2020	10	3/10/2030	23,555	14,636	8,919
5875	138928	HSGP 2017 BACKPACK RIID	3/10/2020	10	3/10/2030	30,507	18,956	11,551
5875	138929	HSGP 2017 BACKPACK RIID	3/10/2020	10	3/10/2030	30,507	18,956	11,551
5775	138927	PLUGGO DECAPPER ASSEMBLY	3/11/2020	10	3/11/2030	8,791	5,460	3,331
6355	138933	MXRT-7600 BARCO CORONIS	4/8/2020	3	4/8/2023	39,612	39,612	-
6365	138937	SYSTEM-7500 FAST DX INSTRUMENT	5/8/2020	10	5/8/2030	67,857	41,068	26,790
6555	138954	SYSTEM-HPE MSL DRIVE/BACKUP TAPE	5/15/2020	3	5/15/2023	8,981	8,981	-
6359	138953	SYSTEM-CAPTUS 4000e THYROID UPTAKE	6/3/2020	10	6/3/2030	26,785	16,020	10,765
6339	138962	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,849	27,321	18,528
6339	138963	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,849	27,321	18,528
6339	138957	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6339	138958	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6339	138959	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6339	138960	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6339	138961	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6339	138964	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6339	138955	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6339	138956	SYSTEM-PURITAN BENNETT 980	6/11/2020	10	6/11/2030	45,850	27,321	18,528
6555	139071	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139072	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139074	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139075	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139076	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139077	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139078	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139079	SWITCH-CISCO CATALYST 9300 48 Port	6/29/2020	3	6/29/2023	5,036	5,036	-
6555	139073	SWITCH-CISCO CATALYST 9300 24 Port	6/29/2020	3	6/29/2023	7,808	7,808	-
5875	139524	UASI 2017 HANDHELD RIID R440-GN	7/1/2020	10	7/1/2030	31,247	18,448	12,798
6352	139070	CARIOGRAPH -PHILIPS HC	7/2/2020	10	7/2/2030	11,694	6,901	4,793
6330	139069	HELIXAR ELECTROSURGICAL GENERATOR	7/24/2020	10	7/24/2030	48,783	28,495	20,288
6505	139080	ZOLL R SERIES MONITOR DEFIBRILLATOR	7/28/2020	10	7/28/2030	21,006	12,247	8,759

6505	139081	ZOLL R SERIES MONITOR DEFIBRILLATOR	7/28/2020	10	7/28/2030	21,006	12,247	8,759
6505	139082	ZOLL R SERIES MONITOR DEFIBRILLATOR	7/28/2020	10	7/28/2030	21,006	12,247	8,759
6505	139083	ZOLL R SERIES MONITOR DEFIBRILLATOR	7/28/2020	10	7/28/2030	21,006	12,247	8,759
6505	139084	ZOLL R SERIES MONITOR DEFIBRILLATOR	7/28/2020	10	7/28/2030	21,006	12,247	8,759
6505	139085	ZOLL R SERIES MONITOR DEFIBRILLATOR	7/28/2020	10	7/28/2030	21,006	12,247	8,759
6505	139086	ZOLL R SERIES MONITOR DEFIBRILLATOR	7/28/2020	10	7/28/2030	21,006	12,247	8,759
6551	E-5999	TRUCK-2019 HINO H195 HYBRID BOX	8/1/2020	7	8/1/2027	95,213	79,152	16,061
6383	139165	GLIDESCOPE CORE	8/25/2020	10	8/25/2030	47,884	27,550	20,334
6352	139163	GE ULTRASOUND VS70	8/25/2020	10	8/25/2030	130,889	75,306	55,583
6555	139161	HPE MSL2024 TAPE DRIVE LIBRARY	8/31/2020	3	8/31/2023	8,975	8,975	-
6330	139164	DRAGER JAUNDICE METER JM-105	9/11/2020	10	9/11/2030	6,918	3,948	2,970
6384	139166	DRAGER JAUNDICE METER JM-105	9/11/2020	10	9/11/2030	6,918	3,948	2,970
6334	139167	SONOSITE ULTRASOUND	9/11/2020	10	9/11/2030	12,291	7,014	5,277
6555	139157	SERVER-SP B200 M5 UCS BLADE	9/18/2020	3	9/18/2023	13,026	13,026	-
6555	139158	SERVER-SP B200 M5 UCS BLADE	9/18/2020	3	9/18/2023	13,026	13,026	-
6555	139159	SERVER-SP B200 M5 UCS BLADE	9/18/2020	3	9/18/2023	13,026	13,026	-
6555	139160	SERVER-SP B200 M5 UCS BLADE	9/18/2020	3	9/18/2023	13,026	13,026	-
5775	139379	DNA EXTRACTION ROBOT-QIAGEN EZIXL	9/23/2020	10	9/23/2030	39,067	22,166	16,900
6501	139156	PANASONIC SONIC STEAMER MICROWAVE	9/28/2020	10	9/28/2030	5,593	3,166	2,427
5841	142076	LAB REFRIGERATOR-19.7 CU FT, RGHT	9/30/2020	15	9/30/2035	5,020	1,892	3,127
5841	142077	LAB REFRIGERATOR-19.7 CU FT, RGHT	9/30/2020	15	9/30/2035	5,020	1,892	3,127
6352	139162	GE ULTRASOUND VS70	9/30/2020	10	9/30/2030	119,092	67,344	51,748
6380	139195	VISERA ELITE HD MONITOR	10/13/2020	10	10/13/2030	9,464	5,318	4,146
6380	139194	VISERA ELITE XENON LIGHT	10/13/2020	10	10/13/2030	11,481	6,451	5,030
6380	139190	CAM HEAD EYEPiece	10/13/2020	10	10/13/2030	19,336	10,865	8,471
6380	139196	CAM HEAD EYEPiece	10/13/2020	10	10/13/2030	19,336	10,865	8,471
6380	139193	VISERA ELITE VIDEO SYSTEM CNTR	10/13/2020	10	10/13/2030	20,631	11,593	9,038
6380	139192	ENF-VH FLEXIBLE VIDEO RHINO LARYNGO	10/13/2020	10	10/13/2030	32,108	18,042	14,066
6380	139191	ENF-VH FLEXIBLE VIDEO RHINO LARYNGO	10/13/2020	10	10/13/2030	32,108	18,042	14,066
5841	139198	APPLIANCE-FOLLETT LAB REFRIGERATOR	10/21/2020	15	10/21/2035	5,296	1,976	3,320
5775	139197	APPLIANCE-FOLLETT LAB REFRIGERATOR	10/21/2020	15	10/21/2035	5,296	1,976	3,320
5775	139199	SYSTEM-GENEEXPERT XVI TESTING	10/21/2020	10	10/21/2030	173,923	97,349	76,574
5775	139189	CABINET-THERMO SCIENTIFIC 1300 A2	10/28/2020	10	10/28/2030	8,696	4,851	3,845
5775	139188	CABINET-THERMO SCIENTIFIC 1300 A2	10/28/2020	10	10/28/2030	13,491	7,526	5,966
6377	E-6893	RV-EAGLE MEDICAL CLINIC	11/1/2020	15	11/1/2035	382,246	141,867	240,379
6377	E-6894	RV-EAGLE MEDICAL CLINIC	11/1/2020	15	11/1/2035	382,246	141,867	240,379
6330	139525	HYSTEROSCOPE PLUS TRUCLEAR	11/18/2020	10	11/18/2030	8,018	4,426	3,592
6380	139276	TOPCON KR-800S AUTO KERATO	1/15/2021	10	1/15/2031	14,355	7,697	6,659
6330	139297	SYSTEM-TRANSDUCER X-PORTE	1/28/2021	10	1/28/2031	12,291	6,546	5,745
5775	139264	REFRIGERATOR-FOLLETT LAB	2/1/2021	15	2/1/2036	5,889	2,087	3,803
6911	E-8335	GENERATOR 2020 ALLMAND 21-00157	2/1/2021	10	2/1/2031	24,427	12,983	11,444
6911	E-8336	GENERATOR 2020 ALLMAND 21-00158	2/1/2021	10	2/1/2031	24,427	12,983	11,444
6911	E-8337	GENERATOR 2020 ALLMAND 21-00159	2/1/2021	10	2/1/2031	24,427	12,983	11,444
6911	E-8338	GENERATOR 2020 ALLMAND 21-00160	2/1/2021	10	2/1/2031	24,427	12,983	11,444
5752	139281	TENT: 20x40	2/3/2021	10	2/3/2031	7,285	3,868	3,417
5752	139282	TENT: 20x40	2/3/2021	10	2/3/2031	7,285	3,868	3,417
5752	139283	TENT: 20x40	2/3/2021	10	2/3/2031	7,285	3,868	3,417
5752	139284	TENT: 30x90	2/3/2021	10	2/3/2031	19,426	10,314	9,111
5752	139285	TENT: 40x80	2/3/2021	10	2/3/2031	26,710	14,182	12,528
5752	139286	TENT: 40x80	2/3/2021	10	2/3/2031	26,710	14,182	12,528
5752	139287	TENT: 40x80	2/3/2021	10	2/3/2031	26,710	14,182	12,528

5775	139263	FREEZER-19.7 CU FT CAPACITY	2/8/2021	15	2/8/2036	7,035	2,484	4,551
6356	139294	TRAILER-MOBILE OFFICE	2/9/2021	6	2/9/2027	69,113	60,971	8,142
6384	139277	UPRIGHT REFRIGERATOR	2/10/2021	15	2/10/2036	5,468	1,929	3,540
6355	139296	MULTI-PURPOSE STRETCHER-CHAIR	2/11/2021	10	2/11/2031	10,055	5,317	4,738
6555	139641	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139642	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139643	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139644	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139645	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139646	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139647	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139648	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139649	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139652	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139671	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139683	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139692	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139693	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139694	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139695	NEXUS 9300 WITH 48 PORTS	2/26/2021	5	2/26/2026	6,582	6,582	-
6555	139624	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139625	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139628	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139637	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139638	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139653	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139668	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139670	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139672	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139673	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139674	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139675	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139676	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139677	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139678	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139679	Cisco UCS Blade Server 8160	2/26/2021	5	2/26/2026	7,060	7,060	-
6555	139640	CISCO CATALYST9500 16PORT SWITCH	2/26/2021	5	2/26/2026	9,958	9,958	-
6555	139655	CISCO CATALYST9500 16PORT SWITCH	2/26/2021	5	2/26/2026	9,958	9,958	-
6555	139656	CISCO CATALYST9500 16PORT SWITCH	2/26/2021	5	2/26/2026	9,958	9,958	-
6555	139657	CISCO CATALYST9500 16PORT SWITCH	2/26/2021	5	2/26/2026	9,958	9,958	-
6555	139658	CISCO CATALYST9500 16PORT SWITCH	2/26/2021	5	2/26/2026	9,958	9,958	-
6555	139669	CISCO CATALYST9500 16PORT SWITCH	2/26/2021	5	2/26/2026	9,958	9,958	-
6555	139621	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139622	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139623	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139619	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139620	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139626	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139627	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139629	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139630	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-

6555	139631	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139632	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139633	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139634	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139635	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139636	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139639	Cisco UCS Blade Server B200-M5	2/26/2021	5	2/26/2026	14,604	14,604	-
6555	139681	NEXUS 9K ACI & NX-OS SPINE	2/26/2021	5	2/26/2026	14,818	14,818	-
6555	139682	NEXUS 9K ACI & NX-OS SPINE	2/26/2021	5	2/26/2026	14,818	14,818	-
6555	139684	NEXUS 9K ACI & NX-OS SPINE	2/26/2021	5	2/26/2026	16,107	16,107	-
6555	139685	NEXUS 9K ACI & NX-OS SPINE	2/26/2021	5	2/26/2026	16,107	16,107	-
6555	139686	NEXUS 93180YC-FX 8X 10G OPTICS	2/26/2021	5	2/26/2026	24,608	24,608	-
6555	139687	NEXUS 93180YC-FX 8X 10G OPTICS	2/26/2021	5	2/26/2026	24,608	24,608	-
6555	139688	NEXUS 93180YC-FX 8X 10G OPTICS	2/26/2021	5	2/26/2026	24,608	24,608	-
6555	139689	NEXUS 93180YC-FX 8X 10G OPTICS	2/26/2021	5	2/26/2026	24,608	24,608	-
6555	139690	NEXUS 93180YC-FX 8X 10G OPTICS	2/26/2021	5	2/26/2026	24,608	24,608	-
6555	139691	NEXUS 93180YC-FX 8X 10G OPTICS	2/26/2021	5	2/26/2026	24,608	24,608	-
6555	139665	RUBRIK R6412SAPPLIANCE4NODE144TB	2/26/2021	5	2/26/2026	30,199	30,199	-
6555	139666	RUBRIK R6412SAPPLIANCE4NODE144TB	2/26/2021	5	2/26/2026	30,199	30,199	-
6555	139660	RUBRIK R6412SAPPLIANCE4NODE144TB	2/26/2021	5	2/26/2026	30,199	30,199	-
6555	139661	RUBRIK R6412SAPPLIANCE4NODE144TB	2/26/2021	5	2/26/2026	30,199	30,199	-
6555	139662	RUBRIK R6412SAPPLIANCE4NODE144TB	2/26/2021	5	2/26/2026	30,199	30,199	-
6555	139663	RUBRIK R6412SAPPLIANCE4NODE144TB	2/26/2021	5	2/26/2026	30,199	30,199	-
6555	139664	RUBRIK R6412SAPPLIANCE4NODE144TB	2/26/2021	5	2/26/2026	30,199	30,199	-
6555	139680	APIC Cluster - 1200 Edge Ports	2/26/2021	5	2/26/2026	36,939	36,939	-
6555	139650	CISCO ASR1001-HX SYSTEM	2/26/2021	5	2/26/2026	42,504	42,504	-
6555	139651	CISCO ASR1001-HX SYSTEM	2/26/2021	5	2/26/2026	42,504	42,504	-
6555	139654	CISCO ASR1001-HX SYSTEM	2/26/2021	5	2/26/2026	42,504	42,504	-
6555	139667	CISCO ASR1001-HX SYSTEM	2/26/2021	5	2/26/2026	42,504	42,504	-
6555	139659	PURESTORAGE FLSHARAYX70R3FC256TB	2/26/2021	5	2/26/2026	565,302	565,302	-
5878	E-5674	TRUCK-2020 FORD F450 DIESEL DUALY	3/1/2021	7	3/1/2028	143,660	107,506	36,154
5775	139290	CLEAR DX INSTRUMENT	3/3/2021	10	3/3/2031	312,765	163,666	149,099
6301	139273	BLADDER SCANNER PRIME SYSTEM	3/11/2021	10	3/11/2031	12,331	6,425	5,905
6555	139292	PALO ALTO NETWORK 3250	3/19/2021	3	3/19/2024	20,096	20,096	-
6555	139291	PALO ALTO NETWORK 3250	3/19/2021	3	3/19/2024	20,096	20,096	-
5775	139293	MALDI BIOTYPER SIRIUS CA SYSTEM	3/19/2021	10	3/19/2031	196,050	101,731	94,319
6555	139279	PALO ALTO NETWORK 3250	3/25/2021	3	3/25/2024	20,096	20,096	-
6555	139278	PALO ALTO NETWORK 3250	3/25/2021	3	3/25/2024	20,096	20,096	-
6365	139275	SYSTEM-CELLAVISION DM9600	4/1/2021	10	4/1/2031	13,136	6,769	6,366
6313	139298	SERVER-PANASONIC NETWORK VIDEO	4/1/2021	3	4/1/2024	10,832	10,832	-
6365	139274	LAB FREEZER-19.7 CU FT	4/7/2021	15	4/7/2036	6,890	2,360	4,531
6555	139387	NETSCALER	4/16/2021	3	4/16/2024	34,257	34,257	-
6555	139388	NETSCALER	4/16/2021	3	4/16/2024	34,257	34,257	-
6555	139386	NETSCALER	4/16/2021	3	4/16/2024	34,257	34,257	-
6555	139389	NETSCALER	4/16/2021	3	4/16/2024	34,257	34,257	-
6357	139381	ECONO ULTRASOUND TABLE	4/21/2021	10	4/21/2031	7,911	4,034	3,878
6502	139385	OVEN-2 DECK CONVECTION, NAT GAS	4/21/2021	15	4/21/2036	17,469	5,938	11,531
6502	139384	FOOD WARMING UNIT	4/21/2021	10	4/21/2031	12,017	6,127	5,890
6355	139380	DIAGNOSTIC IMAGING MONITOR	4/26/2021	10	4/26/2031	25,755	13,096	12,659
5775	139521	APPLIANCE-THERMO SCI ULT FREEZER	4/28/2021	15	4/28/2036	13,366	4,526	8,840
6536	139390	SYMPHNY PLS ICE & WTR DISPENSER	4/30/2021	15	4/30/2036	7,693	2,602	5,091

6505	139391	PORTACOUNT MDL 8048 GENERATOR	5/11/2021	20	5/11/2041	15,001	3,783	11,218
6505	139392	PORTACOUNT MDL 8048 GENERATOR	5/11/2021	20	5/11/2041	15,001	3,783	11,218
6386	139383	TRANSDUCER RC60XI/5-2	5/11/2021	10	5/11/2031	7,902	3,986	3,916
6386	139382	SONOSITE SII ULTRASOUND SYSTEM	5/11/2021	10	5/11/2031	24,804	12,511	12,293
5701	139411	SERVER-WRX 2016 TOWER SQL	6/1/2021	3	6/1/2024	15,848	15,848	-
6340	139526	SONOSITE PX ULTRASOUND SYSTEM	7/8/2021	10	7/8/2031	74,235	36,263	37,972
6330	139534	VPAD-RF ELECTROSURGICAL ANALYZER	7/12/2021	10	7/12/2031	7,836	3,819	4,017
5833	139522	TENT-30x30	7/15/2021	10	7/15/2031	6,077	2,957	3,120
6356	139527	GE LOGIQ E10 R2 ULTRASOUND UNIT	7/15/2021	10	7/15/2031	145,623	70,857	74,766
6411	139533	GE LOGIQ E10 R2 ULTRASOUND UNIT	7/15/2021	10	7/15/2031	145,623	70,857	74,766
6357	139529	GE LOGIQ E10 R2 ULTRASOUND UNIT	7/15/2021	10	7/15/2031	147,245	71,646	75,599
5841	142075	INSTALERT VARIABLE MESSAGE SIGN	7/16/2021	10	7/16/2031	17,441	8,481	8,959
5841	142078	INSTALERT VARIABLE MESSAGE SIGN	7/16/2021	10	7/16/2031	17,441	8,481	8,959
6357	139528	IMAGING EQUIP-END OF LIFE	7/16/2021	10	7/16/2031	190,570	92,675	97,896
6365	139531	BINOCULAR - NIKON ERGO PKG	7/27/2021	15	7/27/2036	9,926	3,198	6,728
6365	139530	BINOCULAR - NIKON ERGO PKG	7/27/2021	15	7/27/2036	9,932	3,200	6,732
6365	139532	BINOCULAR - NIKON ERGO PKG	7/27/2021	15	7/27/2036	11,148	3,592	7,556
5775	139523	BIO-SAFETY CABINET	7/30/2021	15	7/30/2036	11,596	3,730	7,866
5734	139832	FORKLIFT-JOEY STOCK SELECTOR	8/25/2021	15	8/25/2036	25,272	8,009	17,264
6536	139859	BACKUP PWR-SLNT SENTRY SYS 2000	9/8/2021	20	9/8/2041	5,927	1,397	4,530
6536	139860	BACKUP PWR-SLNT SENTRY SYS 2000	9/8/2021	20	9/8/2041	5,927	1,397	4,530
6536	139861	BACKUP PWR-SLNT SENTRY SYS 2000	9/8/2021	20	9/8/2041	5,927	1,397	4,530
6536	139862	BACKUP PWR-SLNT SENTRY SYS 2000	9/8/2021	20	9/8/2041	5,927	1,397	4,530
6536	139856	BACKUP PWR-SLNT SENTRY SYS 2000	9/8/2021	20	9/8/2041	5,966	1,407	4,560
6536	139857	BACKUP PWR-SLNT SENTRY SYS 2000	9/8/2021	20	9/8/2041	5,966	1,407	4,560
6536	139858	BACKUP PWR-SLNT SENTRY SYS 2000	9/8/2021	20	9/8/2041	5,966	1,407	4,560
6388	139840	ERGOMETER ALL BODY	10/15/2021	10	10/15/2031	5,003	2,308	2,695
6501	139845	OVEN-2 DECK CONVECT NAT GAS	10/15/2021	15	10/15/2036	20,263	6,232	14,030
6555	139851	SERVER-POWEREDGE R640	10/15/2021	3	10/15/2024	7,536	7,536	-
6555	139852	SERVER-POWEREDGE R640	10/15/2021	3	10/15/2024	7,536	7,536	-
6365	139839	LIAISON XL ANALYZER	10/21/2021	10	10/21/2031	109,750	50,455	59,295
6418	139841	PROCEDURE TABLE-MIDMARK	11/3/2021	10	11/3/2031	18,407	8,397	10,010
6352	139836	ECHOBED CARDIAC IMAGING TBL	11/10/2021	10	11/10/2031	34,636	15,733	18,903
6418	139844	INTRAORAL IMAGER-PROSENSOR HD	11/15/2021	10	11/15/2031	5,383	2,438	2,945
6418	139842	INTRAORAL IMAGER-PROSENSOR HD	11/15/2021	10	11/15/2031	5,383	2,438	2,945
6418	139843	INTRAORAL IMAGER-PROSENSOR HD	11/15/2021	10	11/15/2031	5,383	2,438	2,945
6911	139864	TENT-10x60	12/1/2021	10	12/1/2031	6,544	2,935	3,609
6911	139863	TENT-40x40	12/1/2021	10	12/1/2031	15,215	6,824	8,391
6911	139865	TENT-40x40	12/1/2021	10	12/1/2031	15,215	6,824	8,391
5700	139833	SPIROMETER	12/10/2021	10	12/10/2031	5,460	2,435	3,025
6536	139846	DECONTAMINATION SYSTEM	12/10/2021	10	12/10/2031	32,627	14,553	18,075
6536	139847	DECONTAMINATION SYSTEM	12/10/2021	10	12/10/2031	33,959	15,147	18,812
6555	139853	SERVER-DELL POWEREDGE R640	12/14/2021	3	12/14/2024	11,167	11,167	-
6555	139854	SERVER-DELL POWEREDGE R640	12/14/2021	3	12/14/2024	11,167	11,167	-
6555	139855	SERVER-DELL POWEREDGE R640	12/14/2021	3	12/14/2024	11,167	11,167	-
6536	139848	SERVER-PANASONIC NVR	1/6/2022	3	1/6/2025	13,683	13,683	-
6352	139837	PHASED ARRAY PROBE 6S-D	2/1/2022	10	2/1/2032	7,957	3,433	4,523
6352	139838	PHASED ARRAY PROBE 12S-D	2/1/2022	10	2/1/2032	7,957	3,433	4,523
5761	139829	PORTACOUNT 8048 FIT TEST	2/1/2022	10	2/1/2032	15,992	6,901	9,091
5761	139830	PORTACOUNT 8048 FIT TEST	2/1/2022	10	2/1/2032	15,992	6,901	9,091
5775	139828	STERILIZER-AMSCO 110LS	2/11/2022	10	2/11/2032	41,821	17,932	23,890

5775	139827	STERILIZER-AMSCO 250LS	2/11/2022	10	2/11/2032	58,109	24,915	33,194
6544	139849	PORTACOUNT 8048 FIT TEST	2/17/2022	10	2/17/2032	15,824	6,759	9,065
6544	139850	PORTACOUNT 8048 FIT TEST	2/17/2022	10	2/17/2032	15,824	6,759	9,065
5700	139831	PORTACOUNT 8048 FIT TEST	2/17/2022	10	2/17/2032	15,968	6,820	9,148
6330	139835	SYSTEM-G6 INFRARED LASER	2/17/2022	10	2/17/2032	41,255	17,621	23,634
6330	139834	BAUCH & LOMB PHACO MACHINE	2/17/2022	10	2/17/2032	52,285	22,332	29,953
5752	139866	OAK 20 FT CONTAINER	3/3/2022	15	3/3/2037	11,045	3,117	7,928
5752	141251	OAK 20 FT CONTAINER	3/3/2022	15	3/3/2037	11,045	3,117	7,928
5752	141250	OAK 20 FT CONTAINER	3/3/2022	15	3/3/2037	11,045	3,117	7,928
5875	139897	HSGP 2019-AREARAE UNIT	3/29/2022	10	3/29/2032	12,319	5,127	7,192
5875	139894	HSGP 2019-AREARAE UNIT RDK 4/4	3/29/2022	10	3/29/2032	14,906	6,203	8,703
5875	139893	HSGP 2019-AREARAE UNIT RDK 3/4	3/29/2022	10	3/29/2032	14,906	6,203	8,703
5875	139895	HSGP 2019-AREARAE UNIT RDK 2/4	3/29/2022	10	3/29/2032	14,906	6,203	8,703
5875	139896	HSGP 2019-AREARAE UNIT RDK 1/4	3/29/2022	10	3/29/2032	14,906	6,203	8,703
5775	139888	STERILIZER-TUTTNAUER AUTOCLAVE	3/31/2022	10	3/31/2032	15,228	6,329	8,899
5775	139892	TAPESTATION SYSTEM	3/31/2022	10	3/31/2032	32,841	13,649	19,191
6559	139955	ADV TRAINING MANIKIN-ARES	4/1/2022	10	4/1/2032	29,657	12,318	17,339
5775	139890	FREEZER: LAB ULTRA LOW	4/12/2022	10	4/12/2032	24,183	9,971	14,212
5775	139891	FREEZER: LAB ULTRA LOW	4/12/2022	10	4/12/2032	24,183	9,971	14,212
6355	139900	RADIOLOGY DISPLAY- BARCO	4/15/2022	10	4/15/2032	10,413	4,285	6,128
6339	139898	BLOOD GAS ANALYZER RP500	4/15/2022	10	4/15/2032	11,524	4,742	6,782
6339	139899	BLOOD GAS ANALYZER RP500	4/15/2022	10	4/15/2032	11,524	4,742	6,782
6356	139901	WATER FILTRATION-REV OSMOSIS SYS	4/21/2022	20	4/21/2042	11,354	2,327	9,028
6365	139907	BIO SAFETY CABINET	4/21/2022	15	4/21/2037	9,996	2,731	7,265
5775	139889	GENIE II INSTRUMENT	4/21/2022	10	4/21/2032	13,231	5,423	7,808
6501	139914	KETTLE COOKER-STEAM TILTING	4/21/2022	15	4/21/2037	30,943	8,455	22,488
6555	139951	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139939	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139940	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139941	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139942	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139943	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139944	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139945	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139946	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139947	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139948	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139949	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139950	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139952	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139953	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6555	139954	SERVER-CISCO UCS BLADE B200 M5	4/27/2022	3	4/27/2025	14,739	14,739	-
6505	139918	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139919	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139920	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139921	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139922	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139923	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139924	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139925	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139926	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994

6505	139927	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139928	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139929	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139930	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139931	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139932	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139933	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139934	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139935	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139936	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139937	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139915	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139916	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6505	139917	DEFIBRILLATOR-ZOLL R SERIES ALS	5/2/2022	10	5/2/2032	18,536	7,541	10,994
6364	139906	HISTOCORE ARCADIA C	5/6/2022	10	5/6/2032	5,195	2,108	3,087
6364	139902	HISTOCORE ARCADIA H	5/6/2022	10	5/6/2032	20,782	8,432	12,350
6364	139905	HISTOCORE AUTOCUT	5/6/2022	10	5/6/2032	26,011	10,554	15,457
6364	139903	ST5020 AUTOMATIC STAINER	5/6/2022	10	5/6/2032	50,289	20,405	29,884
6364	139904	ASP6025 TISSUE PROCESSOR	5/6/2022	10	5/6/2032	97,109	39,402	57,707
6536	139957	CONTROL MODULE, REEL, & CAMERA	5/10/2022	10	5/10/2032	6,331	2,562	3,769
6522	139938	AUTO SCRUBBER-28" FOCUS II BOOST	5/10/2022	8	5/10/2030	10,345	5,233	5,112
6412	139909	EXAM TABLE-MIDMARK 225 UPHLSTRD	5/16/2022	10	5/16/2032	6,639	2,676	3,963
6412	139911	EXAM TABLE-MIDMARK 225 UPHLSTRD	5/16/2022	10	5/16/2032	6,639	2,676	3,963
6412	139912	EXAM TABLE-MIDMARK 225 UPHLSTRD	5/16/2022	10	5/16/2032	6,639	2,676	3,963
6412	139910	EXAM TABLE-MIDMARK 225 UPHLSTRD	5/16/2022	10	5/16/2032	6,639	2,676	3,963
5849	140063	PROSEAL II HYGIENE UNIT	5/31/2022	10	5/31/2032	7,194	2,870	4,324
5849	140064	PROSEAL II HYGIENE UNIT	5/31/2022	10	5/31/2032	7,194	2,870	4,324
6365	139908	COBAS 6800	5/31/2022	10	5/31/2032	384,125	153,229	230,896
6417	139913	DRAGER JAUNDICE METER JM-105	6/3/2022	10	6/3/2032	6,950	2,767	4,183
6377		REMISOL ADV LIAISON XL	6/8/2022	10	6/8/2032	7,500	2,975	4,525
6555	140082	SERVER-POWEREDGE R640-DMZ	6/30/2022	3	6/30/2025	8,297	8,297	-
6555	140083	SERVER-POWEREDGE R640-DMZ	6/30/2022	3	6/30/2025	8,297	8,297	-
6555	140084	SERVER-POWEREDGE R640	6/30/2022	3	6/30/2025	8,297	8,297	-
6555	140085	SERVER-POWEREDGE R640	6/30/2022	3	6/30/2025	8,297	8,297	-
6555	140086	SERVER-POWEREDGE R640	6/30/2022	3	6/30/2025	8,297	8,297	-
6555	140087	SERVER-POWEREDGE R640	6/30/2022	3	6/30/2025	8,297	8,297	-
6355	140071	XRAY-VIDAR DIAGNOSTIC PRO	7/11/2022	10	7/11/2032	10,649	4,128	6,521
6380	140072	SONOSITE ULTRASOUND SYSTEM	7/11/2022	10	7/11/2032	74,575	28,911	45,664
6355	140068	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6383	140073	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6384	140075	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6386	140076	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6387	140077	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6388	140078	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6410	140079	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
5701	140065	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6340	140066	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6340	140067	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6355	140069	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6355	140070	TROPHON2 ULTRASOUND DISINFECTOR	7/14/2022	10	7/14/2032	9,012	3,486	5,526
6555	140081	BADGEPASS IDENTITY SYSTEM	7/19/2022	10	7/19/2032	6,087	2,347	3,741

6501	140080	OVEN-DBL CONVECTION STEAMER	8/8/2022	10	8/8/2032	19,013	7,225	11,788
6330	140278	FREEZER-STIRLING ULTRA SU105UE	8/29/2022	15	8/29/2037	9,988	2,492	7,496
6555	140325	FIREWALL: PALO ALTO PA-3440	9/14/2022	6	9/14/2028	43,508	26,820	16,688
6555	140322	FIREWALL: PALO ALTO PA-3440	9/14/2022	6	9/14/2028	43,508	26,820	16,688
6555	140323	FIREWALL: PALO ALTO PA-3440	9/14/2022	6	9/14/2028	43,508	26,820	16,688
6555	140324	FIREWALL: PALO ALTO PA-3440	9/14/2022	6	9/14/2028	43,508	26,820	16,688
6555	140313	POWERSWITCH S5248-ON	9/21/2022	10	9/21/2032	13,975	5,142	8,833
6555	140314	POWERSWITCH S5248-ON	9/21/2022	10	9/21/2032	13,975	5,142	8,833
6330	140279	HYSTEROSCOPE: TRUCLEAR SYSTEM	9/21/2022	10	9/21/2032	19,696	7,247	12,449
6364	140286	CRYOSTAT LEICA CM1520	9/21/2022	10	9/21/2032	25,204	9,274	15,930
6555	140315	GOV-VXRAIL S570D H	9/21/2022	3	9/21/2025	16,096	16,096	-
6555	140317	GOV-VXRAIL S570D H	9/21/2022	3	9/21/2025	16,096	16,096	-
6555	140318	GOV-VXRAIL S570D H	9/21/2022	3	9/21/2025	16,096	16,096	-
6555	140319	GOV-VXRAIL S570D H	9/21/2022	3	9/21/2025	16,096	16,096	-
6555	140320	DELL EMC POWERSTORE 1000X	9/21/2022	5	9/21/2027	26,157	19,249	6,908
6555	140310	GOV-VXRAIL ES60D H/F	9/21/2022	3	9/21/2025	22,336	22,336	-
6555	140311	GOV-VXRAIL ES60D H/F	9/21/2022	3	9/21/2025	22,336	22,336	-
6555	140312	GOV-VXRAIL ES60D H/F	9/21/2022	3	9/21/2025	22,336	22,336	-
6555	140316	GOV-VXRAIL ES60D H/F	9/21/2022	3	9/21/2025	22,336	22,336	-
6555	140321	GOV-VXRAIL ES60D H/F	9/21/2022	3	9/21/2025	22,336	22,336	-
6501	140304	MICROWAVE: PANASONIC SONIC	10/6/2022	15	10/6/2037	5,021	1,218	3,803
6388	140290	ULTRASOUND: SONOSITE PX SYSTEM	10/11/2022	10	10/11/2032	74,235	26,908	47,328
6536	140447	NURSE CALL STATN TCHSCRN CONSL	10/27/2022	15	10/27/2037	9,579	2,287	7,292
6536	140448	NURSE CALL STATN TCHSCRN CONSL	10/27/2022	15	10/27/2037	9,579	2,287	7,292
6536	140445	NURSE CALL STATION MODULE, IV	10/31/2022	15	10/31/2037	5,438	1,294	4,143
6536	140446	NURSE CALL STATION MODULE, IV	10/31/2022	15	10/31/2037	5,438	1,294	4,143
6355	140284	ENERGY STORAGE BATTERY PACKD	11/8/2022	10	11/8/2032	6,077	2,156	3,921
5700	140271	SW BEHAVIORAL HEALTH BED	11/14/2022	15	11/14/2037	6,909	1,627	5,282
5700	140272	SW BEHAVIORAL HEALTH BED	11/14/2022	15	11/14/2037	6,909	1,627	5,282
6418	140294	XRAY-PROSENSOR SIZE 2	11/14/2022	10	11/14/2032	5,074	1,792	3,282
6418	140295	XRAY-PROSENSOR SIZE 2	11/14/2022	10	11/14/2032	5,074	1,792	3,282
6418	140296	XRAY-PROSENSOR SIZE 2	11/14/2022	10	11/14/2032	5,074	1,792	3,282
6536	140306	TENT: 30 X 40	11/21/2022	10	11/21/2032	12,911	4,535	8,376
6536	140305	TENT: 40 X 40	11/21/2022	10	11/21/2032	15,494	5,442	10,052
6418	140297	MOBILE DENTAL CART	11/23/2022	10	11/23/2032	13,927	4,884	9,043
6412	140293	DRAGER JAUNDICE METER	11/29/2022	10	11/29/2032	6,950	2,426	4,524
5278	E-5277	TRUCK-2022 FORD F150 4X4	12/1/2022	7	12/1/2029	74,314	36,997	37,317
6365	140287	PLATELET INCUBATOR-PC100 PRO I SER	12/12/2022	10	12/12/2032	8,737	3,018	5,718
6555	140326	FLASH ARRAY SHELF DATAPACK 22 TB	12/30/2022	3	12/30/2025	83,358	83,358	-
6336	140280	TONOMETER-TONO-PEN AVIA	1/6/2023	10	1/6/2033	8,628	2,922	5,706
6544	140309	PORTACOUNT MODEL 8048	1/17/2023	10	1/17/2033	17,814	5,979	11,835
6544	140308	PORTACOUNT MODEL 8048	1/17/2023	10	1/17/2033	17,814	5,979	11,835
6386	140289	HOYER POWER LIFT SCALE	1/27/2023	10	1/27/2033	5,227	1,740	3,487
5700	140727	X-RAY SENSOR-PLANMECA PROSENSOR 2	1/27/2023	10	1/27/2033	6,384	2,125	4,259
5700	140723	X-RAY SENSOR-PLANMECA PROSENSOR 2	1/27/2023	10	1/27/2033	6,384	2,125	4,259
5700	140724	X-RAY SENSOR-PLANMECA PROSENSOR 2	1/27/2023	10	1/27/2033	6,384	2,125	4,259
5700	140725	X-RAY SENSOR-PLANMECA PROSENSOR 2	1/27/2023	10	1/27/2033	6,384	2,125	4,259
5700	140730	X-RAY SYS-NOMAD PRO 2	1/27/2023	10	1/27/2033	6,916	2,302	4,614
5700	140726	X-RAY SYS-NOMAD PRO 2	1/27/2023	10	1/27/2033	6,916	2,302	4,614
5700	140728	X-RAY SYS-NOMAD PRO 2	1/27/2023	10	1/27/2033	6,916	2,302	4,614
5700	140729	X-RAY SYS-NOMAD PRO 2	1/27/2023	10	1/27/2033	6,916	2,302	4,614

5775	140275	TESTING SITE SYS-GENEXPERT IV	1/27/2023	10	1/27/2023	56,636	18,853	37,783
6380	140288	ELECTRIC HEATER WASHER/DISINFECTOR	2/13/2023	10	2/13/2023	26,303	8,633	17,670
6352	140283	DEFIBILLATOR SYS	2/13/2023	10	2/13/2023	33,550	11,012	22,538
6358	140285	INJECTOR SYS-MRXPERION	2/13/2023	10	2/13/2023	41,670	13,677	27,993
6351	140282	ELECTRIC HEATER WASHER/DISINFECTOR	2/13/2023	10	2/13/2023	58,932	19,343	39,589
6555	140327	SERVER-R6412S APPLIANCE	2/13/2023	3	2/13/2026	29,329	29,329	-
6555	140328	SERVER-R6412S APPLIANCE	2/13/2023	3	2/13/2026	29,329	29,329	-
6555	140329	SERVER-R6412S APPLIANCE	2/13/2023	3	2/13/2026	29,329	29,329	-
6555	140330	SERVER-R6412S APPLIANCE	2/13/2023	3	2/13/2026	29,329	29,329	-
6555	140331	SERVER-R6412S APPLIANCE	2/13/2023	3	2/13/2026	29,329	29,329	-
6555	140332	FLASH ARRAY PURE STORAGE	2/13/2023	5	2/13/2028	537,605	352,904	184,700
6418	140301	XRAY-PROSENSOR SIZE 0	2/24/2023	10	2/24/2033	5,323	1,731	3,592
6418	140302	XRAY-PROSENSOR SIZE 0	2/24/2023	10	2/24/2033	5,323	1,731	3,592
6418	140303	XRAY-PROSENSOR SIZE 0	2/24/2023	10	2/24/2033	5,323	1,731	3,592
6536	140307	NURSE CALL STATN TCHSCRN CONSL	3/1/2023	3	3/1/2026	9,579	9,579	-
6388	140291	TONOMETER-HANDHLD TONOPEN	3/3/2023	10	3/3/2033	5,129	1,658	3,471
6388	140292	TONOMETER-HANDHLD TONOPEN	3/3/2023	10	3/3/2033	5,129	1,658	3,471
5814	140273	GENEXPERT 6 CLR 12 MODULE	3/3/2023	10	3/3/2033	37,342	12,072	25,270
5814	140274	GENEXPERT 6 CLR 8 MODULE	3/3/2023	10	3/3/2033	37,342	12,072	25,270
6339	140281	VYNTUS ONE-PFT PC	3/8/2023	10	3/8/2033	49,850	16,048	33,803
6558	140450	ASPIRATOR-INVIA LIBERTY	3/24/2023	10	3/24/2033	10,974	3,485	7,489
6558	140451	ASPIRATOR-INVIA LIBERTY	3/24/2023	10	3/24/2033	10,974	3,485	7,489
6558	140449	ASPIRATOR-INVIA LIBERTY	3/24/2023	10	3/24/2033	10,974	3,485	7,489
6308	140444	ULTRASOUND-SONOSITE SII	3/24/2023	10	3/24/2033	29,106	9,242	19,864
6536	140516	WATER PURIFICATION PUMP SYS	5/1/2023	20	5/1/2043	28,704	4,408	24,296
6330	140732	PHOTOCOAGULATOR CONSOLE-INTEGRE	5/2/2023	10	5/2/2033	45,389	13,928	31,461
6308	140519	DEFIBRILLATOR-BASE DEPLOYMENT	5/3/2023	10	5/3/2033	9,500	2,912	6,588
6979	140563	SERVER-UCS-IOM-2304V2	5/4/2023	3	5/4/2026	5,579	5,579	-
6979	140564	SERVER-UCS-IOM-2304V2	5/4/2023	3	5/4/2026	5,579	5,579	-
6979	140566	SERVER-UCS-IOM-2304V2	5/4/2023	3	5/4/2026	5,579	5,579	-
6979	140571	SERVER-UCS-IOM-2304V2	5/4/2023	3	5/4/2026	5,579	5,579	-
6979	140548	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140549	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140550	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140551	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140552	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140553	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140554	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140555	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140556	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140557	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140559	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140560	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140561	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140562	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140565	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140567	SERVER-UCS-CPU-I6348	5/4/2023	3	5/4/2026	11,744	11,744	-
6979	140558	SERVER-UCS-FI-6332-16UP-U	5/4/2023	3	5/4/2026	25,960	25,960	-
6979	140568	SERVER-UCS-FI-6332-16UP-U	5/4/2023	3	5/4/2026	25,960	25,960	-
6979	140569	SERVER-UCS-FI-6332-16UP-U	5/4/2023	3	5/4/2026	25,960	25,960	-
6979	140570	SERVER-UCS-FI-6332-16UP-U	5/4/2023	3	5/4/2026	25,960	25,960	-

6979	140580	SECURITY APPLIANCE-PALO ALTO NET M-	5/17/2023	6	5/17/2029	44,646	22,527	22,119
6979	140524	SWITCH-CATALYST 9300 48-PORT	6/2/2023	10	6/2/2033	5,376	1,604	3,772
6979	140525	SWITCH-CATALYST 9300 48-PORT	6/2/2023	10	6/2/2033	5,376	1,604	3,772
6979	140522	SWITCH-CATALYST 9300 48-PORT	6/2/2023	10	6/2/2033	5,376	1,604	3,772
6979	140523	SWITCH-CATALYST 9300 48-PORT	6/2/2023	10	6/2/2033	5,376	1,604	3,772
6979	140546	SWITCH-CATALYST 8500 SERIES	6/2/2023	10	6/2/2033	18,841	5,621	13,220
6979	140547	SWITCH-CATALYST 8500 SERIES	6/2/2023	10	6/2/2033	18,841	5,621	13,220
6979	140526	SERVER-UCS-IOM-2304V2	6/2/2023	3	6/2/2026	6,492	6,457	36
6979	140529	SERVER-UCS-IOM-2304V2	6/2/2023	3	6/2/2026	6,492	6,457	36
6979	140531	SERVER-UCS-IOM-2304V2	6/2/2023	3	6/2/2026	6,492	6,457	36
6979	140534	SERVER-UCS-IOM-2304V2	6/2/2023	3	6/2/2026	6,492	6,457	36
6979	140527	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140528	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140530	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140532	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140533	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140544	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140535	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140536	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140537	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140538	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140539	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140540	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140541	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140542	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140543	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6979	140545	SERVER-UCS-CPU-18260	6/2/2023	3	6/2/2026	15,650	15,565	86
6383	142097	SONOSITE X-PORTE ULTRASOUND	6/12/2023	10	6/12/2033	96,404	28,499	67,906
5894	140731	STERILIZER-AMSCO 110LS	6/22/2023	10	6/22/2033	57,892	16,955	40,936
6330	140517	CROSSFLOW CONSOLE-STRYKER	6/26/2023	10	6/26/2033	13,220	3,857	9,362
6330	140518	CROSSFLOW CONSOLE-STRYKER	6/26/2023	10	6/26/2033	13,220	3,857	9,362
5875	140515	HAZMAT-SMITHS ELITE COMMAND PKG	6/28/2023	10	6/28/2033	67,371	19,621	47,750
5875	140514	HAZMAT-SMITHS ELITE COMMAND PKG	6/28/2023	10	6/28/2033	67,371	19,621	47,750
6304	141260	CENTRAL STATION	7/1/2023	10	7/1/2033	28,664	8,324	20,340
6979	140579	SERVER-POWEREDGE R640	7/11/2023	3	7/11/2026	17,782	17,051	731
6979	140572	SERVER-POWEREDGE R640	7/11/2023	3	7/11/2026	17,782	17,051	731
6979	140573	SERVER-POWEREDGE R640	7/11/2023	3	7/11/2026	20,323	19,487	835
6979	140574	SERVER-POWEREDGE R640	7/11/2023	3	7/11/2026	20,323	19,487	835
6979	140575	SERVER-POWEREDGE R750	7/11/2023	3	7/11/2026	23,286	22,329	957
6979	140576	SERVER-POWEREDGE R750	7/11/2023	3	7/11/2026	23,286	22,329	957
6979	140577	SERVER-POWEREDGE R750	7/11/2023	3	7/11/2026	23,286	22,329	957
6979	140578	SERVER-POWEREDGE R750	7/11/2023	3	7/11/2026	23,286	22,329	957
6375	140520	MOBILE DENTAL CART	7/12/2023	10	7/12/2033	14,894	4,280	10,613
6979	140581	DAE FIELD RACK-UNITY XT 3U 15X3.5	7/12/2023	5	7/12/2028	7,460	4,288	3,172
6979	140583	DAE FIELD RACK-UNITY XT 3U 15X3.5	7/12/2023	5	7/12/2028	7,460	4,288	3,172
6979	140584	DAE FIELD RACK-UNITY XT 3U 15X3.5	7/12/2023	5	7/12/2028	10,902	6,267	4,636
6979	140585	DAE FIELD RACK-UNITY XT 3U 15X3.5	7/12/2023	5	7/12/2028	10,902	6,267	4,636
6979	140582	DELL FIELD RACK-UNITY XT 480 DPE	7/12/2023	5	7/12/2028	39,019	22,428	16,591
6979	140586	DELL FIELD RACK-UNITY XT 480 DPE	7/12/2023	5	7/12/2028	39,019	22,428	16,591
6375	140521	DRY VACUUM SYS-TECH WEST	7/14/2023	10	7/14/2033	25,025	7,178	17,847
6365	140884	REFRIGERATOR-UPRIGHT PHARMACY	8/10/2023	15	8/10/2038	5,841	1,088	4,753

6365	140883	REFRIGERATOR-UPRIGHT PHARMACY	8/10/2023	15	8/10/2038	5,841	1,088	4,753
6399	140904	ENDOSCOPY-TIMS FEES USB	8/22/2023	10	8/22/2033	15,908	4,393	11,515
6505	140910	DRAEGER JAUNDICE METER JM-105	8/24/2023	10	8/24/2033	7,085	1,953	5,132
6505	140909	DRAEGER JAUNDICE METER JM-105	8/24/2023	10	8/24/2033	7,085	1,953	5,132
6387	140901	DRAEGER JAUNDICE METER JM-105	8/25/2023	10	8/25/2033	6,950	1,914	5,036
5933	140854	REFRIGERATOR-TRAULSEN 3 DOOR	9/27/2023	15	9/27/2038	21,634	3,841	17,793
6399	140905	NASOPHARYNGOSCOPE KIT	9/28/2023	10	9/28/2033	6,870	1,828	5,042
6399	140907	NASOPHARYNGOSCOPE KIT	9/28/2023	10	9/28/2033	6,870	1,828	5,042
6399	140906	TIM FEES XL BASIC KIT	9/28/2023	10	9/28/2033	13,740	3,655	10,085
5894	140846	FREEZER-VWR-MFP-30 CF	10/5/2023	15	10/5/2038	9,009	1,586	7,423
6555	140918	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140924	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140925	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140927	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140928	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140929	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140933	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140934	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140935	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140936	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140937	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140919	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140920	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140921	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140922	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140923	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140926	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140930	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140931	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6555	140932	SWITCH-CATALYST C9300L-48PF-4X	10/6/2023	10	10/6/2033	5,002	1,320	3,683
6501	140908	KITCHEN EQUIP-PLANETARY MIXER 60Q	10/17/2023	10	10/17/2033	13,900	3,625	10,274
6365	140882	PHOENIX M50 INSTRUMENT	10/17/2023	10	10/17/2033	37,314	9,732	27,582
6339	140874	VYNTUS ONE PULMONARY FUNCTION	10/18/2023	10	10/18/2033	75,542	19,682	55,860
6979	140963	VIDEO RECORDER: PANASONIC I-PRO	12/8/2023	10	12/8/2033	13,884	3,423	10,460
5822	140845	PORTACOUNT MODEL 8048	12/8/2023	10	12/8/2033	17,849	4,401	13,448
6359	140881	XELERIS V WORKSTATION	12/12/2023	10	12/12/2033	67,606	16,596	51,010
6340	140959	EPIDURAL POSITIONING DEVICE	12/19/2023	10	12/19/2033	5,645	1,375	4,270
6340	140958	EPIDURAL POSITIONING DEVICE	12/19/2023	10	12/19/2033	5,645	1,375	4,270
6356	140879	COMPLETE VIEW 2-STEP PLATFORM	12/27/2023	10	12/27/2033	5,440	1,313	4,127
6365	140957	HEMATEK 3000 SYSTEM SLIDE STAINER	1/9/2024	10	1/9/2034	8,020	1,907	6,113
6365	140885	DECAPPER-PLUGOO BENCHTOP	1/9/2024	10	1/9/2034	9,780	2,326	7,454
5775	140844	BD BACTEC FX40	1/12/2024	10	1/12/2034	18,658	4,422	14,236
5875	140847	CHEMPROX HANDHELD CHEMICAL	1/16/2024	10	1/16/2034	27,547	6,498	21,049
6365	140953	BD BRUKER MALDI SIRIUS SYSTEM	1/19/2024	10	1/19/2034	241,450	56,757	184,693
6365	140886	INCUBATOR-HETTCUBE 400	2/1/2024	10	2/1/2034	6,596	1,527	5,069
6365	140887	OSOMETER SINGLE-SAMPLE MODEL	2/1/2024	10	2/1/2034	36,926	8,549	28,377
6355	140878	X-RAY-COMPLETE VIEW 2-STEP PLATFORM	2/8/2024	10	2/8/2034	5,325	1,222	4,102
6357	140880	X-RAY-COMPLETE VIEW 2-STEP PLATFORM	2/8/2024	10	2/8/2034	5,350	1,228	4,122
6418	140955	DENTAL IMAGING SYS-NOMAD PRO2	2/8/2024	10	2/8/2034	7,182	1,649	5,533
6418	140956	DENTAL IMAGING SYS-NOMAD PRO2	2/8/2024	10	2/8/2034	7,182	1,649	5,533
6365	140888	AUTO CELL WASHING SYS-ULTRACW II	2/8/2024	10	2/8/2034	9,598	2,204	7,394

6979	140966	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	13,375	6,046	7,329
6979	140971	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	13,375	6,046	7,329
6979	140974	AVOCOR 55' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	13,571	6,135	7,436
6979	140972	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,253	6,443	7,810
6979	140967	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,254	6,444	7,810
6979	140969	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,254	6,444	7,810
6979	140970	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,254	6,444	7,810
6979	140978	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,254	6,444	7,810
6979	140973	AVOCOR 75' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,938	6,753	8,185
6979	140975	AVOCOR 75' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,938	6,753	8,185
6979	140965	AVOCOR 75' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	14,938	6,753	8,185
6979	140964	AVOCOR 65' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	15,817	7,150	8,667
6979	140976	AVOCOR 75' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	15,817	7,150	8,667
6979	140977	AVOCOR 75' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	15,817	7,150	8,667
6979	140968	AVOCOR 75' INTERACTIVE DISPLAY	2/21/2024	5	2/21/2029	16,161	7,305	8,855
6555	140939	SERVER-POWEREDGE R750	2/27/2024	3	2/27/2027	23,192	17,346	5,846
6555	140938	SERVER-POWEREDGE R750	2/27/2024	3	2/27/2027	23,192	17,346	5,846
6386	140900	REFRIGERATOR-FOLLETT UPRIGHT	3/6/2024	15	3/6/2039	6,626	981	5,645
5875	140852	THERMAL CAMERA-FLIR K65	3/6/2024	10	3/6/2034	8,373	1,860	6,512
5875	140853	THERMAL CAMERA-FLIR K65	3/6/2024	10	3/6/2034	8,373	1,860	6,512
5875	140848	THERMAL CAMERA-FLIR K65	3/6/2024	10	3/6/2034	8,373	1,860	6,512
6308	140855	TRANSDUCER-RP19XP/5-1 MHZ	3/6/2024	10	3/6/2034	12,347	2,743	9,604
6388	140903	AUTO REFRACTOR-KR-800S TOPCON	3/6/2024	10	3/6/2034	17,665	3,925	13,740
6380	140960	SONOSITE PX ULTRASOUND SYSTEM	3/6/2024	10	3/6/2034	74,367	16,524	57,843
6387	140961	SONOSITE PX ULTRASOUND SYSTEM	3/6/2024	10	3/6/2034	74,367	16,524	57,843
5875	140849	THERMAL CAMERA SYS-FLIR GX320 24"	3/6/2024	10	3/6/2034	119,723	26,601	93,121
6384	140896	REFRIGERATOR-FOLLETT UPRIGHT	3/12/2024	15	3/12/2039	6,417	944	5,474
6330	140864	CONNECTED OR CART, 120V	3/20/2024	10	3/20/2034	6,886	1,504	5,382
6330	140865	CONNECTED OR CART, 120V	3/20/2024	10	3/20/2034	6,886	1,504	5,382
6330	140872	CONNECTED OR CART, 120V	3/20/2024	10	3/20/2034	6,886	1,504	5,382
6330	140866	CONNECTED OR CART, 120V	3/20/2024	10	3/20/2034	6,886	1,504	5,382
6330	140868	PNEUMOCLEAR PLUS INSUFFLATOR	3/20/2024	10	3/20/2034	18,122	3,957	14,165
6330	140863	PNEUMOCLEAR PLUS INSUFFLATOR	3/20/2024	10	3/20/2034	18,122	3,957	14,165
6330	140869	PNEUMOCLEAR PLUS INSUFFLATOR	3/20/2024	10	3/20/2034	18,122	3,957	14,165
6330	140870	PNEUMOCLEAR PLUS INSUFFLATOR	3/20/2024	10	3/20/2034	18,122	3,957	14,165
6330	140867	VIDEO PROCESSOR/ILLUMINATOR (VPI)	3/20/2024	10	3/20/2034	73,753	16,105	57,649
6330	140861	STRYKER CORE 2	3/28/2024	10	3/28/2034	10,561	2,283	8,278
6330	140862	STRYKER CORE 2	3/28/2024	10	3/28/2034	10,561	2,283	8,278
6330	140860	STRYKER CORE 2	3/28/2024	10	3/28/2034	10,561	2,283	8,278
6370	140891	SOLARIS PLUS COMBO DYNTD719T	3/28/2024	10	3/28/2034	13,280	2,871	10,409
6330	140871	CAMERA SYSTEM (4)	3/28/2024	10	3/28/2034	1,184,976	256,150	928,826
6384	140897	ULTRASOUND TRANSDUCER IC10-3	4/10/2024	10	4/10/2034	9,855	2,095	7,760
6384	140898	ULTRASOUND TRANSDUCER C5-1	4/10/2024	10	4/10/2034	9,855	2,095	7,760
6384	140899	SONOSITE ST ULTRASOUND SYSTEM	4/10/2024	10	4/10/2034	31,437	6,684	24,754
5701	140842	SCOPE CLEANING MACH-PI DRIVE 2 PLUS	4/10/2024	10	4/10/2034	38,199	8,121	30,078
5701	140843	SCOPE CLEANING MACH-PI DRIVE 2 PLUS	4/10/2024	10	4/10/2034	38,199	8,121	30,078
6336	140873	ENDOSCOPE-ADVANTAGE PLUS	4/10/2024	10	4/10/2034	137,633	29,261	108,371
6418	140954	EXAM CHAIR	4/15/2024	10	4/15/2034	24,063	5,083	18,980
6336	141264	DUODENOVideoscope	4/15/2024	10	4/15/2034	64,528	13,630	50,898
6388	140902	TRANSDUCER-EXCH-E9-3	4/18/2024	10	4/18/2034	8,031	1,690	6,341
6351	140877	M43 STERILE DRIER 120V/60HZ	4/18/2024	10	4/18/2034	12,742	2,681	10,061

6339	140875	MRI: HAMILTON CONFIGURED	4/18/2024	10	4/18/2034	38,702	8,143	30,559
6340	140876	VEIN VISUALIZATION SYSTEM PLX	4/22/2024	10	4/22/2034	6,375	1,334	5,041
6365	140889	IBR125-GX REF BLOOD I.S 25CF	4/22/2024	10	4/22/2034	17,119	3,583	13,535
6365	140890	IBR125-GX REF BLOOD I.S 25CF	4/22/2024	10	4/22/2034	17,119	3,583	13,535
6373	140892	P1 DRIVE 2 PLUS MOTOR	4/22/2024	10	4/22/2034	32,699	6,844	25,855
6380	140895	EXAM TABLE	4/25/2024	10	4/25/2034	13,060	2,723	10,337
6330	140962	DUODENOVideoscope	5/6/2024	10	5/6/2034	64,528	13,259	51,269
6505	140911	BLADDERSCAN i10	5/13/2024	10	5/13/2034	12,371	2,518	9,853
6505	140912	BLADDERSCAN i10	5/13/2024	10	5/13/2034	12,371	2,518	9,853
6505	140913	BLADDERSCAN i10	5/13/2024	10	5/13/2034	12,371	2,518	9,853
6505	140914	BLADDERSCAN i10	5/13/2024	10	5/13/2034	12,371	2,518	9,853
6505	140915	BLADDERSCAN i10	5/13/2024	10	5/13/2034	12,371	2,518	9,853
6505	140916	BLADDERSCAN i10	5/13/2024	10	5/13/2034	12,371	2,518	9,853
6505	140917	BLADDERSCAN i10	5/13/2024	10	5/13/2034	12,371	2,518	9,853
6374	140893	PROSENSOR HD SYS SIZE 2 USB	5/21/2024	10	5/21/2034	7,094	1,428	5,665
6374	140894	PROSENSOR HD SYS SIZE 2 USB	5/21/2024	10	5/21/2034	7,094	1,428	5,665
6555	140943	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140940	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140941	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140942	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140944	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140945	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140946	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140947	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140948	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140949	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140950	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6555	140951	SERVER: DELL POWEREDGE R6625	5/21/2024	3	5/21/2027	31,154	20,912	10,243
6979	140989	AVOCOR 55" 2311 LOV LOS MED SML	5/24/2024	10	5/24/2034	12,477	2,502	9,975
6979	140980	AVOCOR 65" 2530 ARNOLD CIO	5/24/2024	10	5/24/2034	17,831	3,576	14,255
6979	140982	AVOCOR 65" 2120 DIAMOND #101	5/24/2024	10	5/24/2034	17,831	3,576	14,255
6979	140991	AVOCOR 65" 333 C SML RM B	5/24/2024	10	5/24/2034	17,831	3,576	14,255
6979	140992	AVOCOR 65" 333 C ELG FRONT	5/24/2024	10	5/24/2034	17,831	3,576	14,255
6979	140994	AVOCOR 65" 1220 MORELLO BRUNNER	5/24/2024	10	5/24/2034	17,831	3,576	14,255
6979	141000	AVOCOR 65" 2530 ARNOLD CARQUINEZ	5/24/2024	10	5/24/2034	17,831	3,576	14,255
6979	140986	AVOCOR XX 1220 MORELLO #101	5/24/2024	10	5/24/2034	19,003	3,811	15,192
6979	140997	AVOCOR 65" 2530 ARNOLD LAS TRAMP	5/24/2024	10	5/24/2034	19,003	3,811	15,192
6979	140979	AVOCOR 75" 2440 BISSO VENTI	5/24/2024	10	5/24/2034	21,445	4,301	17,144
6979	140984	AVOCOR 75" 333 C ELG INSIDE	5/24/2024	10	5/24/2034	21,445	4,301	17,144
6979	140985	AVOCOR 75" 333 C MSO	5/24/2024	10	5/24/2034	21,445	4,301	17,144
6979	140988	AVOCOR 75" 2500 BATES LASSEN	5/24/2024	10	5/24/2034	21,445	4,301	17,144
6979	140990	AVOCOR 75" 333 C CEO	5/24/2024	10	5/24/2034	21,445	4,301	17,144
6979	140998	AVOCOR 85" 1340 ARNOLD #200	5/24/2024	10	5/24/2034	25,770	5,168	20,602
6979	141003	AVOCOR 85" 2530 ARNOLD GOLD GATE	5/24/2024	10	5/24/2034	25,770	5,168	20,602
6979	140987	AVOCOR 85" 2120 DIAMOND #109	5/24/2024	10	5/24/2034	25,770	5,168	20,602
6979	140999	AVOCOR 85" 1340 ARNOLD #126	5/24/2024	10	5/24/2034	25,770	5,168	20,602
6979	141001	AVOCOR 85" 1220 MORELLO WALKER	5/24/2024	10	5/24/2034	25,770	5,168	20,602
6979	140983	AVOCOR 85" 2425 BISSO LAR 132A/B	5/24/2024	10	5/24/2034	29,801	5,977	23,825
6979	140996	AVOCOR 85" 2311 LOV LOS MED LAR	5/24/2024	10	5/24/2034	29,801	5,977	23,825
6979	141002	AVOCOR 105" NON INT 2380 BISSO	5/24/2024	10	5/24/2034	33,593	6,737	26,856
6979	140981	AVOCOR 105" INT 2380 BISSO	5/24/2024	10	5/24/2034	33,593	6,737	26,856

6979	140995	AVOCOR 105" INT 2380 BISSO	5/24/2024	10	5/24/2034	33,593	6,737	26,856
6979	140993	AVOCOR 85" 333 C 1ST FL RM	5/24/2024	10	5/24/2034	36,461	7,312	29,149
6380	140952	AMSCO 2532 WASHER DISINFECTOR	5/28/2024	10	5/28/2034	54,939	10,958	43,982
6330	140859	EYE SURGERY STRETCHER	5/31/2024	10	5/31/2034	8,131	1,615	6,516
6330	140857	EYE SURGERY STRETCHER	5/31/2024	10	5/31/2034	8,131	1,615	6,516
6330	140858	EYE SURGERY STRETCHER	5/31/2024	10	5/31/2034	8,131	1,615	6,516
5700	140839	PHONE BOOTH/CONCENTRATION SUITE	5/31/2024	10	5/31/2034	10,495	2,085	8,411
5700	140841	CORE 2	5/31/2024	3	5/31/2027	10,522	6,966	3,555
5700	140840	P1 DRIVE 2 PLUS MOTOR	5/31/2024	3	5/31/2027	27,681	18,328	9,354
6308	140856	SONOSITE LX ULTRASOUND SYSTEM	6/5/2024	10	6/5/2034	86,527	17,068	69,459
6375	141274	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,275	3,570	14,705
6375	141273	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,275	3,570	14,705
6375	141275	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,275	3,570	14,705
6374	141271	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,316	3,578	14,738
6374	141272	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,316	3,578	14,738
6374	141269	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,316	3,578	14,738
6374	141270	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,316	3,578	14,738
6373	141267	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,358	3,586	14,772
6373	141268	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,358	3,586	14,772
6373	141266	SERIES 5 DENTAL CHAIR 200W TRANS	6/12/2024	10	6/12/2034	18,358	3,586	14,772
5891	141255	CHAIR: RIFTON SMALL ACTIVITY HI-LO	6/19/2024	10	6/19/2034	5,203	1,006	4,197
5891	141256	CHAIR: RIFTON SMALL ACTIVITY HI-LO	6/19/2024	10	6/19/2034	5,301	1,025	4,276
5891	141257	CHAIR: RIFTON SMALL ACTIVITY HI-LO	6/19/2024	10	6/19/2034	5,351	1,035	4,316
5891	141253	CLINTON HI-LO MAT PLATFORM	6/19/2024	10	6/19/2034	6,199	1,199	5,000
6330	141261	SPD INSTRUMENT WASHER	6/20/2024	10	6/20/2034	129,209	24,957	104,252
6330	141262	SPD INSTRUMENT WASHER	6/20/2024	10	6/20/2034	129,209	24,957	104,252
6365	141265	REFRIGERATOR-FOLLETT UPRIGHT	6/27/2024	15	6/27/2039	7,050	899	6,151
5891	141259	CLINTON HI-LO MAT PLATFORM	7/2/2024	10	7/2/2034	5,198	987	4,211
5891	141254	CLINTON HI-LO MAT PLATFORM	7/2/2024	10	7/2/2034	6,147	1,167	4,980
5891	141252	SPO POWERED WHEELCHAIR	7/2/2024	10	7/2/2034	16,327	3,100	13,227
6330	141263	B&L ANTERIOR DELUX SYS	7/12/2024	10	7/12/2034	43,708	8,179	35,529
6388	141278	RITTER 224/225 EXAM TABLE	7/18/2024	10	7/18/2034	8,703	1,614	7,089
6388	141277	REFRIGERATOR-UPRIGHT INFINITY	7/22/2024	15	7/22/2039	6,555	806	5,749
6380	141276	TOPCON AUTO REFRACTOR 15097	7/22/2024	10	7/22/2034	17,745	3,272	14,473
6536	141283	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141284	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141285	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141286	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141279	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141280	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141281	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141282	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
6536	141287	EX5500 CONTROLLER	7/26/2024	10	7/26/2034	6,962	1,276	5,686
5891	141258	SPO WHEELCHAIR	7/29/2024	10	7/29/2034	21,915	3,999	17,916
6308	141600	GLIDESCOPE CORE 15 FHD	8/26/2024	10	8/26/2034	18,347	3,207	15,140
6544	141636	ULTRASOUND: H8054EA-VOLUSON	8/26/2024	10	8/26/2034	188,545	32,957	155,588
6544	141635	ULTRASOUND: H8054EA-VOLUSON	8/26/2024	10	8/26/2034	188,545	32,957	155,588
6522	141633	BATTERY BURNISHER NOBELS 20 INCH	9/4/2024	8	9/4/2032	9,926	2,138	7,788
6522	141634	BATTERY BURNISHER NOBELS 20 INCH	9/4/2024	8	9/4/2032	9,926	2,138	7,788
6380	141612	PANASONIC I-PRO NETWORK VIDEO	9/4/2024	10	9/4/2034	13,884	2,393	11,491
6414	141619	SONOSITE PX ULTRASOUND SYSTEM	9/4/2024	10	9/4/2034	68,605	11,823	56,782

6388	141617	REFRIGERATOR-UPRIGHT INFINITY	9/13/2024	15	9/13/2039	6,393	724	5,669
6356	141606	ULTRASOUND LOGIQ E10 R4	9/13/2024	10	9/13/2034	163,236	27,728	135,508
6555	141637	TRUENAS MINI STORAGE	9/18/2024	5	9/18/2029	9,769	3,292	6,477
5775	141597	MICROSCOPE: LEICA DM2000	10/2/2024	15	10/2/2039	17,563	1,928	15,635
6501	141620	CABINET: RANDELL FX-2UCB-290	10/11/2024	15	10/11/2039	13,651	1,476	12,175
6383	141615	GLIDESCOPE CORE 15 SYSTEM	10/23/2024	10	10/23/2034	18,714	2,974	15,740
6555	141688	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141689	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141683	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141684	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141685	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141686	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141687	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141690	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141691	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141692	DELL POWEREDGE R76	10/30/2024	3	10/30/2027	73,551	38,488	35,063
6555	141660	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141661	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141662	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141663	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141664	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141665	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141666	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141667	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141677	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141681	ZCISCO CATALYST 9300X SWITCH UPOE+	11/7/2024	10	11/7/2034	8,417	1,303	7,114
6555	141680	ZCISCO CATALYST 9300X SWITCH 48P	11/7/2024	10	11/7/2034	8,842	1,369	7,473
6555	141659	ZCISCO CATALYST 9300X SWITCH 48P	11/7/2024	10	11/7/2034	8,842	1,369	7,473
6555	141669	ZCISCO CATALYST 9300X SWITCH 48P	11/7/2024	10	11/7/2034	8,842	1,369	7,473
6555	141671	ZCISCO CATALYST 9300X SWITCH 48P	11/7/2024	10	11/7/2034	8,842	1,369	7,473
6555	141672	ZCISCO CATALYST 9300X SWITCH 48P	11/7/2024	10	11/7/2034	8,842	1,369	7,473
6555	141673	ZCISCO CATALYST 9300X SWITCH 48P	11/7/2024	10	11/7/2034	8,842	1,369	7,473
6555	141644	ZCISCO CATALYST 9500 NTWK SWITCH	11/7/2024	10	11/7/2034	14,443	2,236	12,207
6555	141654	ZCISCO CATALYST 9500 NTWK SWITCH	11/7/2024	10	11/7/2034	14,443	2,236	12,207
6555	141656	ZCISCO CATALYST 9500 NTWK SWITCH	11/7/2024	10	11/7/2034	14,443	2,236	12,207
6555	141658	ZCISCO CATALYST 9500 NTWK SWITCH	11/7/2024	10	11/7/2034	14,443	2,236	12,207
6555	141657	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141668	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141670	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141674	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141675	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141676	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141678	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141679	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141645	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141646	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141647	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141648	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141649	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141650	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141651	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282

6555	141652	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141653	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
6555	141655	ZCISCO CATALYST 9500 48P	11/7/2024	10	11/7/2034	15,715	2,433	13,282
5700	141592	PLANMECA PROONE 2D PLAN	11/7/2024	10	11/7/2034	24,666	3,818	20,848
6330	141601	PELLO MICRODEBRIDER HANDPIECE	12/2/2024	10	12/2/2034	8,782	1,299	7,483
6330	141602	PELLO MICRODEBRIDER HANDPIECE	12/2/2024	10	12/2/2034	8,782	1,299	7,483
6555	141638	PURE STORAGE FLASHARRAY X70R4	12/23/2024	5	12/23/2029	95,140	27,056	68,083
6555	141642	PURE STORAGE FLASHARRAY X70R4	12/23/2024	5	12/23/2029	95,140	27,056	68,083
6555	141639	PURE STG FLASHARRAY 110TB-6X18.3TB	12/23/2024	5	12/23/2029	158,968	45,208	113,760
6555	141643	PURE STG FLASHARRAY 110TB-6X18.3TB	12/23/2024	5	12/23/2029	158,968	45,208	113,760
6555	141640	PURE STG FLASHARRAY 219TB DFM	12/23/2024	5	12/23/2029	190,487	54,171	136,316
6555	141641	PURE STG FLASHARRAY 219TB DFM	12/23/2024	5	12/23/2029	190,487	54,171	136,316
6384	141616	AUDIOMETER: INTERACOUSTICS AC40 HY	1/8/2025	10	1/8/2035	13,581	1,872	11,709
6355	141605	TIMS 2000 SP (RADIOLOGY)	1/8/2025	10	1/8/2035	25,237	3,478	21,759
5875	141598	GRIFFIN G510 CHEMICAL IDENTIFIER	1/9/2025	10	1/9/2035	151,002	20,768	130,234
6501	141627	MEAL DELIVERY CART 16 TRAY	1/16/2025	10	1/16/2035	5,325	722	4,603
6501	141628	MEAL DELIVERY CART 16 TRAY	1/16/2025	10	1/16/2035	5,325	722	4,603
6501	141629	MEAL DELIVERY CART 16 TRAY	1/16/2025	10	1/16/2035	5,325	722	4,603
6501	141630	MEAL DELIVERY CART 16 TRAY	1/16/2025	10	1/16/2035	5,325	722	4,603
6501	141621	MEAL DELIVERY CART 16 TRAY	1/16/2025	10	1/16/2035	5,325	722	4,603
6501	141626	MEAL DELIVERY CART 16 TRAY	1/16/2025	10	1/16/2035	5,325	722	4,603
6501	141625	MEAL DELIVERY CART 24 TRAY	1/16/2025	10	1/16/2035	7,513	1,019	6,495
6501	141631	MEAL DELIVERY CART 24 TRAY	1/16/2025	10	1/16/2035	7,513	1,019	6,495
6501	141622	MEAL DELIVERY CART 24 TRAY	1/16/2025	10	1/16/2035	7,514	1,019	6,495
6501	141623	MEAL DELIVERY CART 24 TRAY	1/16/2025	10	1/16/2035	7,514	1,019	6,495
6501	141624	MEAL DELIVERY CART 24 TRAY	1/16/2025	10	1/16/2035	7,514	1,019	6,495
6555	141682	SERVER: APIC CLUSTER-LRG CONF	1/16/2025	3	1/16/2028	22,487	10,165	12,322
6388	141618	C6-2 CURVED ARRAY TRANSDUCER	1/28/2025	10	1/28/2035	10,324	1,366	8,958
5875	141599	ORTEC DETECTIVE X-N	2/19/2025	10	2/19/2035	189,225	23,899	165,326
6373	141608	PROSENSOR SIZE 2	3/4/2025	10	3/4/2035	6,872	843	6,029
6373	141609	PROSENSOR SIZE 2	3/4/2025	10	3/4/2035	6,872	843	6,029
6373	141610	PROSENSOR SIZE 1	3/4/2025	10	3/4/2035	6,872	843	6,029
6373	141611	PROSENSOR SIZE 1	3/4/2025	10	3/4/2035	6,872	843	6,029
5700	141593	OMNICELL XT AUTO DISPENSING CABINET	3/4/2025	15	3/4/2040	35,627	2,915	32,712
6373	141607	PROMAX S3 PANORAMIC	3/4/2025	10	3/4/2035	33,860	4,156	29,704
5702	141595	OMNICELL XT AUTO DISPENSING CABINET	3/4/2025	15	3/4/2040	89,328	7,309	82,018
6330	141604	VACUUM CURETTAGE SYSTEM VC-10	3/11/2025	10	3/11/2035	7,209	871	6,338
6330	141603	MEDGYN MVP-100 VACUUM PUMP	3/14/2025	10	3/14/2035	9,093	1,091	8,002
6380	141613	EXAM TABLE PWR225	3/17/2025	15	3/17/2040	6,930	551	6,380
6380	141614	EXAM TABLE PWR225	3/17/2025	15	3/17/2040	6,930	551	6,380
5701	141594	CABINET: OMNICELL XT MED 1-CELL	3/20/2025	10	3/20/2035	88,530	10,478	78,052
5702	141596	CABINET: MEDLINE CUSTOM	3/21/2025	10	3/21/2035	-	-	-
6330	142083	CABINET: MEDLINE CUSTOM	3/21/2025	10	3/21/2035	7,665	905	6,760
6501	141632	CABINET: HATCO FOOD WARMING	4/7/2025	10	4/7/2035	8,328	945	7,384
6555	141693	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141694	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141695	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141696	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141704	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141705	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141706	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756

6555	141707	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141708	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141697	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141698	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141699	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141700	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141701	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141702	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6555	141703	SERVER: DELL POWEREDGE R660	4/7/2025	3	4/7/2028	18,904	7,147	11,756
6501	141985	REFRIGERATOR: AIR CURTAIN	4/9/2025	15	4/9/2040	15,918	1,198	14,720
6501	141986	REFRIGERATOR: AIR CURTAIN	4/9/2025	15	4/9/2040	15,918	1,198	14,720
6330	141980	OEC ELITE DIGITAL MOBILE SUPER C-ARM	4/9/2025	10	4/9/2035	209,645	23,664	185,981
6330	141981	STRYKER ADAPTABLE ARM POSITIONING	4/15/2025	10	4/15/2035	25,547	2,842	22,705
6384	142100	MONITOR OEV-262H	4/23/2025	10	4/23/2035	8,647	943	7,704
6387	142115	MONITOR OEV-262H	4/23/2025	10	4/23/2035	8,686	947	7,739
6388	142119	MONITOR OEV-262H	4/23/2025	10	4/23/2035	8,686	947	7,739
6336	142085	PRINTER: OEP-6 HK OLYM	4/23/2025	10	4/23/2035	10,753	1,173	9,581
6384	142103	VIDEO SYSTEM CV-170	4/23/2025	10	4/23/2035	21,180	2,309	18,870
6388	142116	VIDEOSCOPE CYF-VH HD	4/23/2025	10	4/23/2035	21,903	2,388	19,515
6388	142117	VIDEOSCOPE CYF-VH HD	4/23/2025	10	4/23/2035	21,903	2,388	19,515
6387	142113	VIDEOSCOPE CYF-VH HD	4/23/2025	10	4/23/2035	21,941	2,392	19,548
6387	142112	VIDEOSCOPE CYF-VH HD	4/23/2025	10	4/23/2035	22,066	2,406	19,660
6384	142101	VIDEOSCOPE CYF-VH HD	4/23/2025	10	4/23/2035	22,921	2,499	20,422
6384	142102	VIDEOSCOPE CYF-VH HD	4/23/2025	10	4/23/2035	23,046	2,513	20,533
6388	142118	VIDEO SYSTEM CV-170	4/23/2025	10	4/23/2035	23,129	2,522	20,607
6387	142114	VIDEO SYSTEM CV-170	4/23/2025	10	4/23/2035	23,272	2,538	20,735
6384	141982	REFRIGERATOR: UPRIGHT INFINITY	4/25/2025	15	4/25/2040	5,497	398	5,099
5775	142071	ASI EVOLUTION AUTO SYPHILIS	4/30/2025	10	4/30/2035	42,453	4,548	37,905
6386	141983	EXAM TABLE	5/19/2025	15	5/19/2040	9,917	674	9,244
5894	142079	BIOSAFETY CABINET & BASE STAND	5/20/2025	15	5/20/2040	16,992	1,151	15,840
6536	141987	HUMIDIFIER: DRISTEEM STS200	5/21/2025	10	5/21/2035	42,654	4,324	38,330
6536	141988	HUMIDIFIER: DRISTEEM STS200	5/21/2025	10	5/21/2035	42,654	4,324	38,330
6410	141984	SONOSITE PX ULTRASOUND SYSTEM	5/21/2025	10	5/21/2035	52,079	5,279	46,799
6380	142096	ARGOS BIOMETER	6/10/2025	10	6/10/2035	50,211	4,815	45,396
6384	142098	MV CLARUS 500 INSTRUMENT	6/10/2025	10	6/10/2035	71,065	6,814	64,250
6384	142099	VS CLARUS500 1.1 WITH 110V TABLE	6/10/2025	10	6/10/2035	71,065	6,814	64,250
6387	142111	MV CLARUS 500 INSTRUMENT	6/10/2025	10	6/10/2035	71,065	6,814	64,250
5700	142065	PROMAX S3 PANORAMIC	6/18/2025	10	6/18/2035	34,670	3,249	31,422
5700	142066	PROMAX S3 PANORAMIC	6/18/2025	10	6/18/2035	34,670	3,249	31,422
6569	142134	HP LASERJET ENT M806X	6/30/2025	5	6/30/2030	6,651	1,203	5,449
6569	142135	HP LASERJET ENT M806X	6/30/2025	5	6/30/2030	6,651	1,203	5,449
5775	142073	PRAMANA M1BRO DESKTOP SCANNER	6/30/2025	10	6/30/2035	76,338	6,902	69,436
5701	142067	SERIES 5 DENTAL CHAIR 200W TRANS	7/2/2025	10	7/2/2035	22,808	2,050	20,758
5701	142070	SERIES 5 DENTAL CHAIR 200W TRANS	7/2/2025	10	7/2/2035	22,808	2,050	20,758
5700	142064	SERIES 5 DENTAL CHAIR 200W TRANS	7/2/2025	10	7/2/2035	22,808	2,050	20,758
5701	142068	SERIES 5 DENTAL CHAIR 200W TRANS	7/2/2025	10	7/2/2035	22,808	2,050	20,758
5701	142069	SERIES 5 DENTAL CHAIR 200W TRANS	7/2/2025	10	7/2/2035	22,808	2,050	20,758
6375	142095	PROMAX S3 PANORAMIC	7/2/2025	10	7/2/2035	61,071	5,488	55,583
6355	142089	BARCO COR C LED MONITOR	7/7/2025	10	7/7/2035	8,030	711	7,320
6355	142090	BARCO COR C LED MONITOR	7/7/2025	10	7/7/2035	8,030	711	7,320
6355	142091	BARCO COR C LED MONITOR	7/7/2025	10	7/7/2035	8,030	711	7,320

6355	142092	BARCO COR C LED MONITOR	7/7/2025	10	7/7/2035	8,030	711	7,320
6355	142086	BARCO NIO FUS LED MONITOR	7/7/2025	10	7/7/2035	22,948	2,031	20,918
6355	142087	BARCO NIO FUS LED MONITOR	7/7/2025	10	7/7/2035	22,948	2,031	20,918
6355	142093	BARCO NIO FUS LED MONITOR	7/7/2025	10	7/7/2035	22,948	2,031	20,918
6355	142088	BARCO NIO FUS LED MONITOR	7/7/2025	10	7/7/2035	22,948	2,031	20,918
6367	142094	UPRIGHT INFINITY SERIES	7/8/2025	15	7/8/2040	5,495	323	5,171
6555	142120	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142123	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142124	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142125	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142133	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142126	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142127	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142128	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142129	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142130	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142131	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142132	SWITCH: CISCO NEXUS 93180YC-FX3	7/8/2025	10	7/8/2035	10,797	952	9,844
6555	142121	SWITCH: CISCO NEXUS 93600CD-GX	7/8/2025	10	7/8/2035	18,034	1,591	16,443
6555	142122	SWITCH: CISCO NEXUS 93600CD-GX	7/8/2025	10	7/8/2035	18,034	1,591	16,443
6387	142110	REFRIGERATOR: UPRIGHT INFINITY	7/14/2025	15	7/14/2040	7,347	424	6,923
6384	142104	TRANSDUCER L23121 IC10-3	7/16/2025	10	7/16/2035	9,855	848	9,007
6384	142107	TRANSDUCER L23119 C5-1	7/16/2025	10	7/16/2035	9,855	848	9,007
6384	142108	TRANSDUCER L23121 IC10-3	7/16/2025	10	7/16/2035	9,855	848	9,007
6384	142109	TRANSDUCER L23119 C5-1	7/16/2025	10	7/16/2035	9,855	848	9,007
6384	142105	SONOSITE ULTRASOUND L31500 SYS	7/16/2025	10	7/16/2035	29,072	2,501	26,571
6384	142106	SONOSITE ULTRASOUND L31500 SYS	7/16/2025	10	7/16/2035	29,072	2,501	26,571
5775	142072	VIP ECO ULT FREEZER UPRIGHT	7/18/2025	15	7/18/2040	14,886	848	14,038
6330	142084	OLYMPUS ESG-410 GENERATOR SURGERY	7/21/2025	10	7/21/2035	24,224	2,051	22,173
5775	142074	MISEQ I100 PLUS SYSTEM	8/6/2025	10	8/6/2035	107,385	8,620	98,765
					Totals	81,823,497	66,717,379	15,106,119



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 26-2263

Agenda Date: 5/26/2026

Agenda #:



cchealth.org

Medical Staff Update

Sarah McNeil, MD
Medical Staff President
Contra Costa Regional Medical
Center and Clinics

May 26, 2026

Medical Staff updates

- Concerns About Cuts With HR1
 - Process for Enrolling Undocumented Patients
 - What is included in Basic Health Care
- Ask: Increased Staffing and Revitalizing Care Team Models



CONTRA COSTA COUNTY

1025 ESCOBAR STREET
MARTINEZ, CA 94553

Staff Report

File #: 26-2264

Agenda Date: 5/26/2026

Agenda #:



cchealth.org

Regulatory Update

**Shannon Abella, CEO
Contra Costa Regional Medical
Center and Clinics**

May 26, 2026

- 3/27 – Submission of Evidence of Standards Compliance for The Joint Commission (TJC) survey findings.
- 4/2 – TJC accreditation received
- 4/27 & 4/28 – California Department of Public Health (CDPH) Emergency Medical Treatment and Labor Act (EMTALA) Survey
- Follow-up from a self-reported incident
- 5/11 to 5/13 – CDPH annual mammography inspection
- 6/1 – CDPH Vaccines for Children site visit at West County Health Center



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2265

Agenda Date: 5/26/2026

Agenda #:



Origination: 06/08/2025	Owner: Gilbert Salinas
Last Approved: 8/19/2025	Lavonna Martin
Effective: 8/20/2025	Grant Colfax, MD
Last Revised: 11/10/25xxx	Area: Administration
Next Review: xxx	

129 A - POLICY FOR RESPONDING TO IMMIGRATION ENFORCEMENT ISSUES

SECTION I - FOUNDATION

POLICY STATEMENT:

Contra Costa Health (CCH) is committed to everyone in need of and who are eligible for our services, regardless of immigration status.

The purpose of this policy is to provide guidance to CCH staff when responding to immigration enforcement activities. This includes guidance in monitoring and receiving visitors, addressing immigration officer presence at CCH facilities, notifying minor patients' parents or guardians of immigration enforcement actions, and information sharing.

Unless required by state or federal law, CCH staff shall not allow any person to access the nonpublic areas of a CCH facility for immigration enforcement, unless the person has a valid judicial warrant or court order that specifically grants access to the nonpublic areas of the facility.

SCOPE:

This policy applies to all CCH operated facilities including Contra Costa Regional Medical Center, Health Centers, Behavioral Health Clinics, including substance use treatment programs, Public Health Clinics, Homeless emergency and medical respite shelters and permanent supportive housing programs. This policy applies to all employees, medical staff, clinical residents, contractors, and volunteers.

CCH has onsite administrators at each facility to manage potential immigration enforcement issues. The role of these administrators is to ensure staff members and contractors are appropriately dealing with immigration enforcement inquiries and requests and are complying with internal procedures. Onsite administrators in need of guidance may contact the Chief Equity Officer in the Office of the Director at Gilbert.Salinas@cchealth.org. All CCH reception and frontline staff should have the name and contact information for their direct supervisor, who is available for each shift, and the contact information for the Sheriff's Office. (See Attachment A for contact info for the Sheriff.)Health Services Security Unit (HSSU).

DEFINITIONS:

Immigration Enforcement Officer. Although U.S. Immigration and Customs Enforcement (ICE) and U.S. Customs and Border Protection (CBP) are the federal agencies with primary responsibility for federal immigration enforcement, there are instances in which other agencies may also attempt to enforce immigration laws. **While the policy references immigration officers, the policy pertains to any law enforcement officer or agency attempting to enforce immigration laws.** While immigration officers typically wear uniforms, staff should be aware that an immigration officer may also appear in civilian clothing.

Public Area. An area of a CCH facility that is generally accessible to the public without restrictions, such as parking lots, lobbies, waiting rooms, and common corridors. Immigration enforcement officers may enter public areas of CCH facilities without a warrant or consent.

Non-Public Area. Any area of a CCH facility that is not generally accessible to the public without restrictions. Non-public areas include treatment rooms, clinical spaces, private consultation areas, and any other locations where patients receive care. Such areas must be clearly designated through mapping, signage, key-entry systems, written policy, or a combination of these methods.

Direct Supervisor. The shift-level supervisor present at each CCH facility every shift. The direct supervisor is the first point of escalation from frontline staff and is responsible for managing all immediate, on-the-ground interaction, gathering officer information, and notifying the onsite administrator.

Onsite Administrator. The facility-level administrator responsible for managing immigration enforcement issues across the facility. Only onsite administrators have the authority to validate court orders or warrants, authorize immigration officer access to non-public areas, and consult with the County Counsel's Office.

PART II - GUIDELINES:

Section 1: MONITORING AND RECEIVING VISITORS AT CCH FACILITIES

Audience: Frontline Staff and Reception. Read this section first. Your role is to notify your supervisor and refer the officer. Steps beyond notification are managed by your direct supervisor.

A. PUBLIC AREAS

Immigration officers may enter public areas of CCH facilities without a warrant or consent and may question any person present (with that person's consent). CCH staff should not interfere with immigration officer activity in a public area of a facility, ~~though CCH.~~ Staff should ~~alert~~ immediately notify their ~~on-site administrator and~~ direct supervisor and HSSU. If the direct supervisor is not available, staff should contact the onsite administrator ~~of the presence of immigration officers in the facility and~~ directly. Staff should document the activity if feasible. This documentation may be in the form of an email addressed to the direct supervisor. ~~Healthcare facilities~~

B. NON-PUBLIC AREAS

CCH must also maintain clear internal procedures for monitoring visitors, recording who enters the facility, and ensuring that access to different areas ~~are~~ is properly managed.

No visitor, including immigration enforcement officers, shall enter or remain in non-public areas of a CCH facility without having registered with the facility, in accordance with the facility's rules and regulations regarding visitors.

Frontline and Reception Staff Responsibilities: Frontline and reception area staff should neither confirm nor deny the presence of a patient to an immigration officer. Staff shall refer the officer to the direct supervisor, immediately notify the direct supervisor as would be required for any unexpected or unscheduled outside visitor coming into the facility, and notify the HSSU.

When referring an officer to a supervisor, frontline staff may use the following language: "I am not authorized to provide access or information. I am contacting my direct supervisor now. Please wait here." Staff should not answer additional questions or engage further until their direct supervisor arrives.

Direct Supervisor and Onsite Administrator Responsibilities and Coordination: Upon arrival, the direct supervisor assumes management of all communication with the immigration officer and gathers the officer's information. The direct supervisor then notifies the onsite administrator, who responds to the location.

Once the onsite administrator arrives, the two coordinate: the direct supervisor continues managing the officer's physical presence while the onsite administrator exercises sole authority to validate all warrant and court orders, authorize or deny access to non-public areas, and consult with the County Counsel's Office.

~~Non-public areas include treatment rooms, clinical spaces, private consultation areas, and any other locations where patients receive care. Such areas must be clearly designated through mapping, signage, key entry systems, written policy, or a combination of these methods.~~ If there are no exigent circumstances necessitating immediate action (such as urgent national security or public safety threat), and if the visitor does not possess a judicial warrant or court order that provides a basis for the visit, the visitor must provide the following information to the direct supervisor: The direct supervisor should attempt to obtain this information even if the visitor or officer presents a court order.

- Name, address, occupation.
- Age, if less than 21 years.
- Purpose in entering the healthcare facility.
- Proof of identity.

C. STAFF LIMITATIONS

CCH staff should not:

- Act as interpreters for immigration officers.
- Hide patients or escort patients or others out of the facility to avoid contact with immigration officers or otherwise assist a person in evading immigration officers.
- Provide any false or misleading information to immigration officers.
- Provide patients or others with legal advice.

- Obstruct or interfere with immigration officers.

~~(THE DIRECT SUPERVISOR SHOULD ATTEMPT TO OBTAIN THIS INFORMATION EVEN IF THE VISITOR OR OFFICER PRESENTS A COURT ORDER.)~~

~~FRONTLINE AND RECEPTION AREA STAFF SHOULD NEITHER CONFIRM NOR DENY THE PRESENCE OF A PATIENT TO AN IMMIGRATION OFFICER, SHOULD REFER THE OFFICER TO THEIR ON-SITE ADMINISTRATOR AND DIRECT SUPERVISOR, AND PROCEED AS SET FORTH IN SECTION (A). CCH STAFF SHALL REPORT ENTRY BY IMMIGRATION ENFORCEMENT OFFICERS TO THEIR DIRECT SUPERVISOR, AS WOULD BE REQUIRED FOR ANY UNEXPECTED OR UNSCHEDULED OUTSIDE VISITOR COMING INTO THE FACILITY.~~

- Assist or participate in immigration officer's searches and/or questioning.

When an immigration enforcement officer's presence requires a response beyond initial notification and referral, staff should proceed to Section 2 for the full interaction protocol.

SECTION 2 - RESPONDING TO IMMIGRATION ~~LAW~~ ENFORCEMENT PRESENCE AT CCH FACILITIES **CCH**

Audience: Steps 1–3 are for all staff ~~shall immediately notify their direct supervisor~~. Beginning with Step 4, the direct supervisor assumes responsibility for managing the immediate interaction, gathering officer information. The onsite administrator assumes exclusive authority over warrant and court order validation, non-public areas authorization, and County Counsel consultation. Both roles coordinate throughout the remainder of the interaction as described in Step 4.

Escalation Chain: Frontline Staff → Direct Supervisor → Onsite Administrator → County Counsel.

Upon observing any request ~~(immigration enforcement activity or receiving any request — including subpoenas, complaints, warrants, or court orders)~~ — staff shall take the following steps immediately:

- **Frontline staff:** Notify their direct supervisor and the Health Services Security Unit (HSSU).
- **Direct supervisor:** Notify the onsite administrator upon being contacted by an immigration enforcement officer to access a non-public area of a CCH facility or a patient, including to obtain information about a patient or a patient's family, or any request for the review of CCH documents. Please notify the Sheriff's office onsite security representative also frontline staff.
- **If the direct supervisor is unavailable:** Frontline staff shall contact the onsite administrator directly.

A.D. INTERACTION PROTOCOL

CCH staff shall take the following steps in response to an ~~officer present at a CCH facility for immigration enforcement purposes~~: officer's presence at a CCH facility.

1. Always remain calm and professional.

2. Advise the officer that before proceeding with the officer's request, CCH staff must first notify and receive directions from their direct supervisor.
3. Immediately contact ~~their on-site administrator and the~~ direct supervisor for assistance. Decline to answer questions and wait for ~~their~~the direct supervisor ~~or the onsite manager~~ to arrive. Staff should provide their name and title to the officer if requested.
4. ~~If possible, The direct supervisor should handle all steps that follow. If assumes full responsibility from this point forward and shall notify the onsite administrator. The direct supervisor at the site manages all communication with the officer and gathers the officer's information. If the direct supervisor is not available, staff should contact~~unavailable, the onsite manager. administrator shall complete all remaining steps. The onsite administrator responds to the location and exercises sole authority to validate warrants and court orders, authorize or deny immigration officer access to non-public areas, and consult with the County Counsel's Office.
5. Verify that the officer is an immigration enforcement officer (or another federal officer). Ask to see, and make a copy of or note, the officer's credentials (name, office, address, agency, and badge number). ~~Also ask for); and copy or note~~ the name and telephone number of the officer's supervisor.
6. Ask the officer to explain the purpose of the officer's visit and note the response.
7. Ask the officer to produce any documentation that authorizes CCH facility access.
8. Make copies of all documents provided by the officer. The direct supervisor may ask another staff member to copy the information. The ~~direct supervisor should~~onsite administrator shall assess the document and the circumstances, and shall consult with the County Counsel's Office ~~as needed.~~
See B. Documentation Categories and Response Protocol.
9. If the circumstances warrant, advise the officer that the facility is not obstructing the officer's progress.
10. State that CCH does not consent to entry to non-public areas of the facility. For law enforcement to access a ~~private/restricted~~non-public area within the facility, a valid judicial warrant is required absent exigent circumstances or consent. If an officer is in a public area or designated waiting room, the officer may remain in the area during normal clinic and hospital business hours.
11. Without expressing consent, respond according to the requirements of the officer's documentation. ~~(See Section (B), below, regarding. Documentation Categories and the appropriate response. Response Protocol)~~ Ask the officer to wait while the documents are reviewed.
12. Document the officer's actions in as much detail as possible without interfering with the officer's movements.
13. If the officer orders staff to provide immediate access to a non-public area of the facility, CCH staff should comply with the officer's order. CCH staff should not attempt to physically interfere with the officer, even if the officer appears to be acting without consent or appears to be exceeding the purported authority given by a warrant or other document. CCH staff may say, *"I do not consent and am not authorized to grant consent to any non-public area of the facility. You are required to wait in a designated waiting area or outside of the building (if no waiting area is available.) I will contact the appropriate hospital official. But because I have no other choice at this time, I will not interfere with your order"*. If an officer enters a non-public area without authority, CCH personnel shall document the officer's actions.
14. If the officer enters a non-public area of the facility, the direct supervisor should always accompany the officer while the officer is in the non-public area. If feasible, the direct supervisor

should record the activities of the officer. The officer should be directed away from patients and confidential areas.

15. If an immigration enforcement officer removes a patient or another individual, the direct supervisor may ask the officer where the individual is being taken and –must request information related to continuity of care if the removed person is a patient.
16. If an immigration enforcement officer seizes records or other items, the direct supervisor should document which items are taken and request that the officer provide a receipt.
17. The direct supervisor should complete an incident report that includes the information gathered as described above and the officer’s statements and actions.

B.E. DOCUMENTATION CATEGORIES AND RESPONSE PROTOCOL

An immigration officer may present any of the following documents: This section is divided into two parts: universal provisions that apply to every document type, followed by document-specific definitions and response obligations. CCH staff must apply the universal provisions in all cases, then consult the document-specific entries for any additional obligations specific to the document presented.

1. Universal Response Provisions: Applicable to All Document Types

Regardless of the type of document presented by an immigration enforcement officer, the following obligations apply in every instance. CCH staff must apply these provisions before consulting the document-specific response guidance below.

1. **Notify and Pause.** Inform the officer that CCH cannot respond to the document until it has been reviewed by the onsite administrator and, where needed, the County Counsel’s Office. Ask the officer to wait.
2. **Deny Non-Public Area Access.** Verbally deny the officer access to any non-public area of the facility pending review of the document. If possible, this denial must be witnessed by at least one other CCH staff member. The denial must be documented in writing and acknowledged by the witnessing staff member.
3. **Protect Patient and Facility Information.** Do not provide any patient, client, or facility information or documentation to the officer unless and until a legal review has confirmed a legal obligation to disclose. Immigration status and place of birth are protected medical information under California law.
4. **Comply Under Direct Order — Without Consenting.** If an officer orders immediate access to a non-public area despite a verbal denial, CCH staff shall comply — but must not physically interfere, and not express consent, even if the officer appears to be acting without consent or appears to be exceeding the purported authority given by the document. Staff shall state aloud: “I do not consent and am not authorized to grant consent to any non-public area of this facility. You are required to wait in a designated waiting area or outside of the building if no waiting area is available. I will contact the appropriate facility official. But because I have no other choice at this time, I will not interfere with your order.” Staff must document the officer’s actions immediately.
5. **Document.** Record the officer’s credentials, actions, statements made, and documents produced. The direct supervisor must complete a full incident report upon conclusion of the interaction. See Section 2(A), Steps 5 through 17.

2. Document-Specific Response Protocol

The following entries identify each document type, its issuing authority, the legal authority it carries, and the additional response obligations specific to that document type. Universal Response Provisions 1 through 5 from Section 2(B)(1) apply in all cases and are not repeated here.

1. Federal Judicial Warrant (see Attachment B: Exhibits A.1 and A.2)

A federal judicial warrant (either a search-and-seizure warrant or an arrest warrant; ~~see Exhibits A.1 and A.2~~) ~~is~~ is a judicial warrant ~~is~~ issued by a “U.S. District Judge” or “U.S. Magistrate Judge” from “U.S. District Court”. A judicial warrant is a court order that authorizes the search of property, seizure of property, or arrest based on probable cause.

A judicial warrant should specify an address, time for execution, the place or person to be searched for, and any items to be seized, all described with specificity. To be valid the warrant must be signed by a judge or magistrate judge ~~to be valid~~. Prompt compliance usually is required, but where feasible, the ~~on-site~~ onsite administrator ~~and direct supervisor~~ should notify and consult with the County Counsel’s Office before responding.

If the officer has a valid judicial warrant, the ~~on-site~~ onsite administrator ~~and direct supervisor~~ ~~should pay close attention~~ shall review its scope and verbally object if officers go beyond the scope of their authority to search or seize objects as specified in the warrant (e.g., if the warrant allows a search of the emergency room, officers may not use the warrant to search private patient examination rooms). ~~If possible, this verbal objection should be witnessed by at least one other staff member. The objection should be documented in writing and acknowledged by the staff members. If the officer orders staff to provide immediate access to a non-public area of the facility, CCH staff should comply with the officer’s order. CCH staff should not attempt to physically interfere with the officer, even if the officer appears to be acting without consent or appears to be exceeding the purported authority given by a warrant or other document.~~

1.2. ~~An~~ ICE Administrative “Warrant” (see Exhibits B.1 and B.2):

An administrative warrant is issued by the “Department of Homeland Security”, an “Immigration Judge”, or an “Immigration Officer”. An administrative warrant does not give officers the authority to enter non-public areas or seize records.

~~IF THE DIRECT SUPERVISOR HAS NOT YET ARRIVED, INFORM THE OFFICER THAT CCH CANNOT RESPOND TO THE WARRANT UNTIL IT HAS BEEN REVIEWED BY THE ON-SITE ADMINISTRATOR DIRECT SUPERVISOR. PROVIDE A COPY OF THE WARRANT TO THE DIRECT SUPERVISOR AS SOON AS POSSIBLE. STAFF SHOULD NOT GIVE ICE ANY INFORMATION OR ALLOW ICE TO ENTER ANY NON-PUBLIC AREAS OF THE FACILITY. IF ICE REQUESTS OR ATTEMPTS TO ACCESS A NON-PUBLIC AREA, STAFF SHOULD VERBALLY DENY ICE ACCESS TO ANY NON-PUBLIC AREA OF THE FACILITY AND IF POSSIBLE, HAVE THIS DENIAL WITNESSED BY AT LEAST ONE OTHER STAFF MEMBER. THE DENIAL SHOULD BE DOCUMENTED IN WRITING AND ACKNOWLEDGED BY THE STAFF MEMBERS. IF THE OFFICER ORDERS STAFF TO PROVIDE IMMEDIATE ACCESS TO A NON-PUBLIC AREA OF THE FACILITY, CCH STAFF SHOULD COMPLY WITH THE OFFICER'S ORDER. CCH STAFF SHOULD NOT ATTEMPT TO PHYSICALLY INTERFERE WITH THE OFFICER, EVEN IF THE OFFICER APPEARS TO BE ACTING WITHOUT CONSENT OR APPEARS TO BE EXCEEDING THE PURPORTED AUTHORITY GIVEN BY A WARRANT OR OTHER DOCUMENT. AN ADMINISTRATIVE WARRANT DOES NOT GIVE OFFICERS THE AUTHORITY TO ENTER PRIVATE AREAS OR SEIZE RECORDS.~~
~~A subpoena for production of documents or other evidence~~

Upon receiving an ICE Administrative Warrant, the direct supervisor shall immediately refer the document to the onsite administrator. The onsite administrator shall consult with the County Counsel's Office. All Universal Response Provisions in Section 2(B)(1) apply.

3. Subpoena (see Exhibits C.1 and C.2):--)

This is a document requesting production of documents or other evidence. Immediate compliance is not required. CCH staff should not provide documents on the spot and should not consent to an officer search. Inform the officer that CCH cannot respond to the subpoena until it has been reviewed by an area supervisor and legal counsel. ~~Staff should handle the subpoena pursuant to existing subpoena protocols. Staff is not required to give ICE any information or allow ICE to enter any non-public areas of the facility. If ICE requests or attempts to access a non-public area, Staff should verbally deny ICE access to any non-public area of the facility and if possible, have this denial witnessed by at least one other staff member. The denial should be documented in writing and acknowledged by the staff members. The direct supervisor should contact the onsite Administrator and the Office of the County Counsel for assistance as soon as possible following receipt of the subpoena.~~ Staff should handle the subpoena pursuant to existing subpoena protocols.

~~A~~

Staff are not required to give immigration enforcement officers any information or allow immigration enforcement officers to enter any non-public areas of the facility. In addition to the document-specific obligations above, all Universal Response Provisions in Section 2(B)(1) apply.

4. Notice to Appear (see Exhibit D):--)

This is a document notifying a person of removal proceedings. This document is not directed at CCH. ~~CCH~~ Staff should not deliver or facilitate service of this document to the person named in the document.

~~CCH staff should not provide access to non-public areas to search. CCH Staff should not give ICE any information. If ICE requests or attempts to access a non-public area, Staff should verbally deny ICE access to any non-public area of the facility and if possible, have this denial witnessed~~

by at least one other staff member. The denial should be documented in writing and acknowledged by the staff members. The direct supervisor should notify the onsite administrator of immigration enforcement officers any notice to appear information or allow immigration enforcement officers to enter any non-public areas of the facility. In addition to the document-specific obligations above, all Universal Response Provisions in Section 2(B)(1) apply.

- ~~1. A **COURT ORDER**: STAFF SHOULD PROVIDE THE COURT ORDER TO THEIR DIRECT SUPERVISOR. IF ICE REQUESTS OR ATTEMPTS TO ACCESS A NON-PUBLIC AREA, STAFF SHOULD VERBALLY DENY ICE ACCESS TO ANY NON-PUBLIC AREA OF THE FACILITY AND IF POSSIBLE, HAVE THIS DENIAL WITNESSED BY AT LEAST ONE OTHER STAFF MEMBER. THE DENIAL SHOULD BE DOCUMENTED IN WRITING AND ACKNOWLEDGED BY THE STAFF MEMBERS. THE DIRECT SUPERVISOR SHOULD NOTIFY THE ONSITE ADMINISTRATOR WHO WILL CONSULT WITH THE COUNTY COUNSEL'S OFFICE REGARDING HANDLING OF THE ORDER.~~

Staff should

5. A court order

Upon receiving a court order, the direct supervisor shall immediately refer it to the onsite administrator. Only the onsite administrator may review the specifications of ~~any~~ a court order to ensure that determine whether it grants access to the particular paces that the officer wishes to enter at the time of execution, specific spaces or grants access to a specific person-, and whether CCH is required to comply. The onsite administrator shall consult with the County Counsel's Office before permitting any access based on a court order. All Universal Response Provisions in Section 2(B)(1) apply.

C.F. RESPONDING TO IMMIGRATION ENFORCEMENT ~~PRESENT~~ PRESENCE OUT IN THE FIELD

~~A. Interaction Protocol~~

- ~~1. **Handling when staff meet with a client in their home and immigration enforcement officers arrive at the client's home.**~~

Audience: All Field Staff — staff working outside CCH facilities in any capacity — visiting clients in their homes, meeting clients in public spaces, attending community events, or transporting clients in county vehicles. Staff should prioritize their personal safety in all field situations. The following guidance covers each scenario.

Notification Requirement: In all field situations, staff should notify their direct supervisor as soon as it is safe to do so during an active encounter and shall report and document the full incident to their direct supervisor when the interaction concludes.

1. Client's Home

- During any interaction, staff should ensure that their actions are consistent with the purpose of the client visit and do not exceed the scope of their employment.
- Staff should not hide a client or assist the client in evading an officer.
- Staff should not engage with immigration officers. If an officer asks a question, the staff member may state, "I am not authorized to answer any questions."

- Staff may leave if they choose to do so. Staff may also observe the interaction if they are not interfering with officers' actions and it is safe to do so. Staff should prioritize their personal safety.
- If immigration officers ask staff to move or leave, staff should do so.
- If the client is detained, staff may ask the immigration officers where the client is being taken.
- ~~When the interaction concludes, staff should report the incident to their direct supervisor.~~

~~Handling when staff meet with a client in a public space, such as a~~

~~1.2. Public Space (e.g. coffee shop or park, and immigration officers approach the client.)~~

- Staff should conduct themselves as noted above.
- If the meeting is at a business location and staff of the business direct people to leave, staff should exit the building.

~~2. Handling when immigration officers are present at a community event at which staff are in attendance (like a health fair).~~

3. Community Event (e.g. health fair)

- If the event is at a county facility, staff should proceed as stated in this policy under Responding to Immigration Law Enforcement Presence at CCH Facilities: (Section 2.B).
- Otherwise, staff should conduct themselves as noted above.
- If event or facility staff direct people to leave, staff should leave the area.

~~2.4. Handling when immigration officers approach a county vehicle in which staff is~~County Vehicle (e.g. transporting a client.)

~~As with any interaction with law enforcement:~~

- If staff believe that law enforcement is attempting to pull them over, staff should pull over and stop in a safe place, turn off the vehicle, and put their hands on the steering wheel.
- If the officer approaches the vehicle, staff may ask the officer which agency they work for.
- If asked, staff should show their driver's license, registration, and proof of insurance to the officer ~~(through a partially opened window).~~
- If the officer asks to search for the vehicle, staff may refuse consent to search. However, if the officer states they have the authority to search, staff should state they are not consenting to a search but otherwise follow the officer's directions.
- Staff may ask if they are free to leave.
- Otherwise, staff should conduct themselves as noted above.

SECTION 3: PARENTAL NOTIFICATION OF IMMIGRATION ~~LAW~~ ENFORCEMENT ACTIONS

~~CCH staff must receive~~

Consent required. The direct supervisor shall ensure that CCH receives consent from a minor patient's parent or guardian (provided the child is not legally regarded as their own personal representative of their medical records) before a minor patient can be interviewed or searched by any officer seeking to enforce civil immigration laws at a CCH facility, unless the officer presents a valid, effective warrant signed by a

judge, or presents a valid, effective court order. (See Documentation Categories and Response Protocol.)

CCH staff Immediate notification. The direct supervisor shall immediately notify the minor patient's parent, guardian, or the foster parent and social worker of a dependent child if a law enforcement officer requests or gains access to a patient for immigration enforcement purposes, unless such access followed a judicial warrant that restricts the disclosure of the information to the parent or guardian.

No parent or guardian present. In the absence of a parent or guardian, CCH staff the direct supervisor shall not permit access to the minor by any immigration enforcement officer until the parent or guardian is present. The facility shall assign a staff member to accompany the minor until the parent or guardian arrives at the facility.

REQUESTS FOR SECTION 4. PATIENT/CLIENT INFORMATION AND INFORMATION SHARING/PRIVACY

Patient privacy rights. California and federal laws and regulations give all patients or clients, regardless of immigration status, the right to keep their medical records private in most circumstances. CCH Health Information Management (HIM) will not release information to third parties for immigration enforcement purposes, except as required by law or court order. Immigration status and place of birth information is protected medical information under state law.

Limiting data collection. CCH staff should limit collecting information about immigration status, citizenship, and national origin to only what is necessary and required by law. CCH staff should avoid including this information in medical and billing records, limit collection to the individual seeking care, not their family members, and promptly respond to requests to remove such information from medical records, as permitted by law.

Health Information Management (HIM) Staff. HIM staff manage health information and records requests. HIM staff are not onsite administrators and do not have authority to validate warrants or authorize facility access. Any document received by HIM staff for immigration enforcement purposes shall be referred immediately to the direct supervisor for handling in accordance with this policy.

Verification requirements. In connection with any information request issued for immigration enforcement purposes, CCH HIM staff should document and verify the following information:

- The specific agency the requester is from.
- The form of the request (e.g., subpoena, court order, etc.).
- Whether the requester is a law enforcement agency.
- The specific types of protected health information the requester seeks.
- The reason the requester wants the information, including any legal authority claimed.
- Whether the request requires patient notification and if so, whether the requester provided proof of notification.

Document review. CCH staff who receive a document labeled “subpoena,” “warrant,” or “order,” should contact their direct supervisor. The direct supervisor shall refer the document to the onsite administrator to determine if the document has been issued by a court or judicial officer, and whether the

request for PHI is narrowly tailored as required by HIPAA. Requests received by mail or by email should be directed to the direct supervisor for initial handling.

~~The direct supervisor should notify the Chief Equity Officer, who~~ **Escalation.** ~~The onsite administrator~~ will consult with the County Counsel's Office to help determine when and to what extent CCH is required to comply with requests that seek immigration-related information or are for, or appear to be for, immigration enforcement purposes.

Required disclosure. If CCH is required to make a disclosure of patient information to immigration enforcement authorities without the patient's authorization in compliance with a court order, subpoena, or judicial warrant, CCH HIM staff should document the disclosure in compliance with all existing CCH policies and procedures for such disclosures. Such documentation should include information that supported the decision to disclose the information. Disclosures to law enforcement are subject to the accounting-of-disclosures requirement under the HIPAA Privacy Rule.

SECTION 5: ADDITIONAL PROVISIONS

Patient privacy notices. CCH staff should ensure that patients have access to information about their privacy rights and inform them that their healthcare information is protected by federal and state laws by providing patients with the Notice of Privacy Practices pursuant to current CCH policy.

Plain view awareness. CCH staff should be cognizant of information that is in open view of the public, such as files and computer screens. Even without a warrant, immigration officers may examine anything in plain view, including conversation in private areas that can be heard from public areas. CCH staff should lock their computer screens when not in use.

~~ONLY ONSITE ADMINISTRATORS HAVE THE AUTHORITY TO VALIDATE COURT ORDERS OR WARRANTS AND PERMIT IMMIGRATION OFFICER ENTRY INTO NON-PUBLIC AREAS. IF THE OFFICER ORDERS STAFF TO PROVIDE IMMEDIATE ACCESS TO A NON-PUBLIC AREA OF THE FACILITY, CCH STAFF SHOULD COMPLY WITH THE OFFICER'S ORDER. CCH STAFF SHOULD NOT ATTEMPT TO PHYSICALLY INTERFERE WITH THE OFFICER, EVEN IF THE OFFICER APPEARS TO BE ACTING WITHOUT CONSENT OR APPEARS TO BE EXCEEDING THE PURPORTED AUTHORITY GIVEN BY A WARRANT OR OTHER DOCUMENT.~~

Continuity of care. With patient consent, staff may contact the patient's emergency contact to provide updates regarding their medical condition.

Staff Awareness and Training: All public-facing staff, direct supervisors, and onsite administrators should be familiar with the provisions of this policy. It is the responsibility of the onsite administrators to ensure that all public-facing staff, including temporary staff, have read this policy and have been provided with training.

~~CCH staff should not:~~

- ~~• Act as interpreters for immigration officers.~~
- ~~• Hide patients or escort patients or others out of the facility to avoid contact with immigration officers or otherwise assist a person in evading immigration officers.~~
- ~~• Provide any false or misleading information to immigration officers.~~
- ~~• Provide patients or others with legal advice.~~
- ~~• Obstruct or interfere with immigration officers.~~

RELATED LINKS:

[Attachment B](#): Judicial and Administrative Warrant Samples

[Notice of Privacy Practices](#)

REFERENCES:

[Inmate-Patient Policy](#)

APPROVALS:

Joint Conference Committee:

Health Services Director: Grant Colfax, MD

Chief Equity Officer: Gilbert Salinas

Date Approved: 11/10/25



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2271

Agenda Date: 5/26/2026

Agenda #:

CCRMC Clinical Staff Protocol: Care for Patients in ICE Custody

Purpose: This document contains operational, clinical, and logistical guidance developed specifically by CCRMC clinical staff for ICE encounters, supplementing existing policies.

Initial Contact — Protocol-Specific Guidance

- ICE likely to bring detainee-patient into ER via Ambulance Bay.
- ED Charge RN to radio that ICE present and call:
 - Med Center Supervisor (MCS)
 - Medical Officer of the Day (MOD)
 - MCS/MOD will inform Admin
- If ICE agents are not cooperative with providing identification, call Hospital Deputy Phone for assistance. Hospital Deputy on call will escalate to Chief Garibay.
- Warrant validity criteria specific to this Protocol — a valid judicial warrant to enter non-public areas must contain all of the following: correct patient name, location, issued by a US District Court, labeled as a “search and seizure warrant”, signed by a judge within the last 14 days.
- See examples and info re warrants by CCHS (internal SharePoint link) and ACLU Maine (external resource link).

Clinical Care — Protocol-Specific Guidance

- Staff may, with patient consent, offer resources and connect patients with Rapid Response Networks for Legal Representation (Stand Together Contra Costa: 925-900-5151; region-specific numbers listed below). Note: Staff may not advise on legal strategy.
- When contacting a Rapid Response Hotline on a patient's behalf, staff should provide the following: date of birth, country of origin, A#, detention date, and detention center.

Documentation — Protocol-Specific Guidance

- For patients brought in with suspicious injuries: Document all suspicious injuries per routine protocol. Take photos with measurements. Document patient account of injuries in the chart as well as the agent-reported account of injuries.

If the Patient Consents — Protocol-Specific Guidance

Coordination of Care and Disposition Planning — Protocol-Specific Guidance

- Clinical Coordination – Care team should ask the ICE agent the following specific questions:

- “Who should I coordinate with regarding this patient’s medical needs and discharge?”
- “Where will this patient be detained?”
- Determine whether the detention facility has on-site medical staff, capacity to dispense medications, and transportation for follow-up care, if applicable.
- If discharge is appropriate: encourage consultants to see the patient prior to discharge if possible. Ensure prescriptions can be filled or medications are provided prior to discharge to the extent possible. Schedule all required follow-up appointments and document discharge coordination efforts and any limitations encountered.
- Admission: If detainee-patient is being admitted, notify MCS/MOD. Attempt to give a private room when clinically appropriate.

Debrief — Protocol-Specific Guidance

Clinical and Nursing leadership will meet with involved staff to debrief after any encounter involving patients in ICE custody and will provide ongoing support, resources, and space to process the experience. All visits by ICE will be reviewed by Admin, which will conduct a formal debrief and ensure that follow-up support needs are addressed.

Important Phone Numbers

The following contact directory is unique to the ICE Protocol and does not appear in either policy:

- Hospital Deputy Phone:
 - Chief Garibay:
 - Sgt Parish:
 - Sgt Ones:
- Med Center Supervisor (MCS):
- Medical Officer of the Day (MOD):
 - Director of Inpatient Nursing Ops:
 - Hospital Medical Director:
 - Risk Management:
- County Counsel:

Rapid Response Network — Legal Representation Contact Directory

The following legal resource directory is unique to the ICE Protocol:

Rapid Response Network Contra Costa County for Legal Representation:

Stand Together Contra Costa County: (925) 900-5151

East County:

Richmond (West Co):

Central County:

Rapid Response Networks for Legal Representation – Other Counties:

- San Francisco Rapid Response Network: 415-200-1548
- Alameda County Rapid Response Network/ACILEP: 510-241-4011 (M-F, 6 a.m. – 6 p.m.)
- Marin Rapid Response Network: 415-991-4545
- West Marin Rapid Response Network: 415-755-3622
- Contra Costa County Rapid Response Network: 925-900-5151
- San Mateo County Rapid Response Network: 203-666-4472
- Santa Clara County Rapid Response Network: 408-290-1144



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2266

Agenda Date: 5/26/2026

Agenda #:

Owner: David Culberson , CEO Contra Costa Regional Medical Center and Health Centers. Approved

INMATE-PATIENT POLICY

PURPOSE STATEMENT: Delineation of the roles and responsibilities of law enforcement and CCRMC and Health Centers ensures that the appropriate safety and security measures are implemented when an Inmate-Patient is seen at or admitted to a Contra Costa Health Services facility.

POLICY STATEMENT:

Contra Costa Health provides compassionate, high-quality care to all patients, without distinction or exclusion based on incarceration status. Inmate-Patients are afforded the same rights as patients who are not in custody of a Law Enforcement Agency, except for rights curtailed for the safety and security of the Inmate-Patient, other patients, the staff, and the public.

An Inmate-Patient is a patient who is in Law Enforcement Agency (LEA) custody, including, local, state, tribal, and federal agencies. The LEA that brings an Inmate-Patient to CCRMC or Health Centers retains complete responsibility for the security, supervision, and custody of the Inmate-Patient for the duration of their medical visit or hospital stay.

The Health Services Security Unit (HSSU) is not responsible for the security, supervision or custody of the Inmate-Patient, including Inmate-Patients in the custody of the Contra Costa County Office of the Sheriff.

To ensure the safety and security of other patients, the Inmate-Patient, staff, and the public, CCRMC and Health Centers staff shall cooperate with non-medical directives given by the LEA. If, in a staff member's opinion, a law enforcement directive will cause or may cause or contribute to a negative medical outcome, or there are other concerns, such as a conflict with hospital policy, the staff member shall promptly escalate this concern to the direct supervisor.

DEFINITIONS:

“In custody” means in the custody of a Law Enforcement Agency.

“Inmate-Patient” means a patient who is in the custody of a Law Enforcement Agency.

“Law Enforcement Agency” or “LEA” means any local, state, tribal, or federal law enforcement agency.

“Responsible Officer” means the Law Enforcement Agency representative on site with direct responsibility for the custody and supervision of an Inmate-Patient.

“Officer” means a peace officer, which includes police officers, LEA agents, and Sheriff’s Deputies.

“Staff” means the staff of CCRMC and Health Centers.

GUIDELINES:

I. General Guidelines for Hospital

A. Law Enforcement Agencies shall be notified of the following CCRMC and Health Centers policies. Staff may provide a copy of this policy to the Responsible Officer. Staff will report incidents of significant non-adherence to their supervisor.

1. Designated Point of Contact: If an officer presents a warrant or court order, staff should contact their direct supervisor. The direct supervisor should contact the onsite administrator. Only onsite administrators have authority to validate court orders or warrants. Onsite administrators should notify and consult with the County Counsel’s Office before responding.
2. LEA Check-In. Officers are required to register and/or check-in with designed staff upon arrival to CCRMC or a Health Center.
3. LEA Verification. If an officer brings an Inmate-Patient to CCRMC or a Health Center for a medical visit or hospital admission, staff should take steps to verify the LEA with which the officer is affiliated and request that the officer show identification or credentials (name, agency, badge number, and supervisor’s name and telephone number).
4. Documentation: All interactions with LEA shall be documented. Concerns should be escalated immediately to the onsite administrator and County Counsel’s Office.
5. Recording/Body Cameras. Body worn camera use is at the Officer’s discretion, however, staff may request the Officer turn off or adjust the position of the camera to safeguard the privacy of other patients and to attempt to minimize active recording in patient care areas.
6. Restraints Applied by LEA.
 - a. Nursing staff will check all restraints for adequate circulation and proper fit (skin breaks/tightness) and may pad the restraints if necessary.
 - b. If a physician or nurse determines that restraints are interfering with life-saving treatment, an emergency procedure, or necessary medical monitoring (like an MRI or limb checks), the officer must remove or adjust the restraints upon the staff’s request.
 - c. The use of restraints on pregnant inmate-patients requires adherence to Penal Code § 3407 as below:
 - I) Prohibited Restraints (Section 3407(a)) - Leg restraints, waist chains, or handcuffing behind the body shall not be

used on known pregnant Inmate-Patients, or while in recovery after delivery. Pregnant Inmate-Patients must only be handcuffed with their hands in front of their bodies to prevent falls and allow them to protect their abdomen if they lose their balance.

- II) Labor, Delivery, and Recovery (Section 3407(b)) - A pregnant Inmate-Patient in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the Inmate-Patient, the staff, or the public using the least restrictive restraints possible.
- III) Medical Override Authority (Section 3407(c)) - Restraints shall be removed when the medical staff who is currently responsible for the medical care of a pregnant inmate during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of restraints is medically necessary.

- 7. Inmate-Patient Searches. The Responsible Officer conducts all searches of the Inmate-Patient, their bed, and their immediate surroundings. Staff do not assist or participate in LEA searches and/or questioning.

B. Privacy and Confidentiality.

CCRMC and Health Centers staff shall follow all established policies and procedures with regard to the disclosure of health information and informed consent. Requests made by an Officer for the immediate release of an Inmate-Patient's health information should be promptly escalated. Staff should take reasonable steps to protect patient privacy, including limiting the officer's presence during care when possible. Staff should communicate with the Responsible Officer regarding measures to preserve patient privacy under the circumstances, which might include the officer exiting the room during active treatment, the officer moving out of earshot, using screens or curtains, and communicating with the Inmate-Patient using a hushed voice or in writing. If warranted, Staff may request contact information for the Responsible Officer's supervisor and discuss these issues with the supervisor.

- C. Use of Medical Equipment. LEA do not use CCRMC and Health Centers' medical equipment with the exception of wheelchairs, crutches, walkers, and other mobility aids as approved by the Charge Nurse.
- D. Visits to Inmate-Patients. All visits to Inmate-Patients are subject to advance approval by the Responsible Officer. Staff will notify the Responsible Officer when a visitor arrives to check in for a visit. Staff may not direct visitors to the Inmate-Patient's location without the express permission of the Responsible Officer. Staff shall contact HSSU if an unauthorized visitor refuses to leave the premises, attempts entry despite the visit denial, or otherwise fails to abide by CCRMC rules. Staff are strictly prohibited from accepting cash, personal effects, gifts or another item from the visitor which are intended for the Inmate-Patient. Staff shall notify the Responsible Officer if a request to do so is made. Visitors to

Inmate-Patients are required to abide by all regular CCRMC visiting rules, such as displaying their visitor pass and observing CCRMC's visiting hours. Inmate-Patient Attorney Contacts. It is the policy of CCRMC and the Health Centers to allow an Inmate-Patient to have contact with an attorney, at the request of the Inmate-Patient. The form of contact, such as in person or by telephone, is to be coordinated with the Responsible Officer. If the Responsible Officer refuses to permit any form of contact with an attorney, Staff should request contact information for the officer's supervisor and discuss the issue with the supervisor.

E. Telephone Privileges.

1. Upon admission, the telephone will be removed from the Inmate-Patient's bedside and provided to the Responsible Officer if requested. Telephone privileges are at the discretion of the Responsible Officer.
2. Outgoing Inmate-Patient telephone calls, when allowed by the Responsible Officer, will be via collect only.
3. Notwithstanding any other provision of this policy, if the disclosure complies with privacy law and policy, staff are expressly permitted to communicate with any person, including the Inmate-Patient's family members or friends, regarding the Inmate-Patient's medical history, condition, care, and treatment. In no event should Staff communicate non-medical information to the person, such as release date, release time, room number, or other information, the release of which may pose safety or security concerns in the opinion of the Responsible Officer.

F. Mail Privileges.

1. Incoming mail addressed to an Inmate-Patient shall be given to the Responsible Officer.
2. Staff are prohibited from mailing any items on behalf of an Inmate-Patient. Staff shall report any requests made by the Inmate-Patient to the Responsible Officer.

G. Communication

1. "No unauthorized communication" shall be posted on the Inmate-Patient's door.

H. Meal Service/Dietary. Nursing Staff shall notify Nutrition Services of Inmate-Patient admissions for a safety tray.

I. Special Precautions and Considerations:

1. Use of Bathroom or Shower: The LEA or Responsible Officer will take special security precautions when Inmate-Patient needs to ambulate or use the bathroom or shower. Nursing staff will communicate with the Responsible Officer for receiving directions regarding walks and bathroom use.
2. Discharge Information. Staff are prohibited from disclosing the discharge date in the presence of the Inmate-Patient until immediately prior to discharge. Staff shall inform the Responsible Officer and receive permission prior to informing the Inmate-Patient.

J. Responding to Unusual Clinical Events or Emergencies:

1. Code Blue (Life threatening): If Code Blue is called for an Inmate-Patient, the Responsible Officer will remove all law enforcement applied restraints

and stand aside. If the Code Blue is for a patient in the same room, the Deputy/Officer will stand aside, while staying as close to the door as possible.

2. Code Red (fire): In the event of an evacuation, the Responsible Officer will remain with the Inmate-Patient until the Code Red ends.
3. Disaster: In the event of a natural or man-made disaster, the Responsible Officer shall remain with the Inmate-Patient and shall receive instructions from the HSSU Chief or their designee.

II. General Guidelines for Health Centers:

- A. When possible, Inmate-Patient should not wait to be seen in the general patient waiting areas. If another, more private area is available, staff will escort the Inmate-Patient and officer to the designated area. At the Martinez Health Center, four “sub-waiting rooms” are designated for this purpose: 1S, 2S, 3S, 3N.
- B. Staff will expedite Inmate-Patients to be seen as soon as possible after arrival to minimize their time in the health center.
- C. If a surgery is scheduled, the Inmate-Patient is requested to sign the relevant paperwork. For security reasons the Inmate-Patient is not informed of the surgery date. Relevant paperwork (including the procedure date) is placed in a sealed envelope and handed to the Responsible Officer.
- D. If a return appointment is required, the Patient-Inmate will not be informed of the appointment date and time for security reasons. Relevant paperwork is placed in a sealed envelope and handed to the Responsible Officer.

REFERENCES:

TJC Standard PC 02.01.01 The Hospital provides the patient with care, treatment, and service according to his or her individualized care plan.

Policy for Obtaining Consent to Photograph, Interview, Publish or Videotape (PolicyStat ID 16706893)

Policy for Partners in Care Visitation (PolicyStat ID 17417369)

Policy 129A- Responding to Immigration Enforcement Issues

Cal. Penal Code § 3407

APPROVALS:

David Culberson, CEO, Contra Costa Regional Medical Center and Health Centers.

Dr. Grant Colfax, CEO and Director Health Services.



CONTRA COSTA COUNTY

Staff Report

1025 ESCOBAR STREET
MARTINEZ, CA 94553

File #: 26-2267

Agenda Date: 5/26/2026

Agenda #:

CCRMC and CCHP ACROYNMS

Acronym	Corresponding Terms
AAP	American Academy of Pediatrics
ABD	Adverse Benefit Determination
ACE	Adverse Childhood Experience
ACIP	Advisory Committee on Immunization Practices
ACOG	American College of Obstetrician and Gynecologists
ADA	Americans with Disabilities Act of 1990
ADHC	Adult Day Health Care
ADO	Alternate Dispute Officer
ADT	Admission, Discharge, and Transfer
AFS	Alternative Format Selection
AIDS	Acquired Immune Deficiency Syndrome
APL	All Plan Letter
API	Application Programming Interface
APS	Asthma Preventive Service
AR	Authorized Representative
ASAM	American Society of Addiction Medicine
ASD	Autism Spectrum Disorder
BHD	Behavioral Health Department
BHS	Behavioral Health System
BHT	Behavioral Health Treatment
C&L	Cultural & Linguistic
CAP	Corrective Action Plan
CalAIM	California Advancing and Innovating Medi-Cal
CBAS	Community Based Adult Services
CB-CME	Community-Based Care Management Entities
CBO	Community-Based Organization
CCBH	Contra Costa Behavioral Health
CCHP	Contra Costa Health Plan
CCM	Complex Care Management
CCR	California Code of Regulations
CCRMC	Contra Costa Regional Medical Center

CCS	California Children's Services
CDPH	California Department of Public Health
CFR	Code of Federal Regulations
CHA	Community Health Assessment
CHHS/Cal HHS	California Health and Human Services Agency
CHIP	Community Health Implementation Plan
CHW	Community Health Worker
CLIA	Clinical Laboratory Improvement Act
CLPPB	Childhood Lead Poisoning Prevention Branch

CMP	Care Management Plan
CMS	The Centers for Medicare & Medicaid Services
CNM	Certified Nurse Midwife
COBA	Coordination of Benefits Agreement
COHS	County Organized Health Systems
CPN	Community Psychiatric Nurse
CPSP	Comprehensive Perinatal Services Program
CPT	Current Procedural Terminology
CQA	Clinical Quality Auditing
CQI	Continuous Quality Improvement
CRC	Caregiver Resource Center
CRM	Customer Relations Management
CSHCN	Children with Special Health Care Needs
CSS	Community Support Services
DDS	Department of Developmental Services
DF	Disclosure Form
DHCS	Department of Health Care Services
DHHS	Department of Health and Human Services
DMC	Drug Medi-Cal
DMC-ODS	Drug Medi-Cal Organized Delivery System
DME	Durable Medical Equipment
DMFEA	Division of Medi-Cal Fraud and Elder Abuse (Office of the Attorney General)
DMHC	Department of Managed Health Care
DOJ	Department of Justice

DOT	Direct Observed Therapy
D-SNP	Dual-Eligible Special Needs Plan
DUR	Drug Use Review
DVBE	Disabled Veteran Business Enterprises
ECM	Enhanced Care Management
ED	Emergency Department
EDI	Electronic Data Interchange
EMT	Emergency Medical Transportation
EOC	Explanation of Coverage
EPSDT	Early and Periodic Screening, Diagnostic and Treatment
EQR	External Quality Review
EQRO	External Quality Review Organization
ERS CBAS	Emergency Remote Services
ESRP	End Stage Renal Disease
FBC	Freestanding Birthing Centers
FDA	Food and Drug Administration
FFP	Federal Financial Participation
FFS	Fee-For-Service
FQHC	Federally Qualified Health Center
FSR	Facility Site Review

FTE	Full Time Equivalent
FWA	Fraud, Waste and Abuse
GAAP	Generally Accepted Accounting Principles
GC	Government Code (California)
H&S	Health and Safety Code
HCAI	Department of Health Care Access and Information (open data source) formerly Office of Statewide health Planning and Development (OSHPD)
HCBS	Home and Community-Based Services
HCO	Health Care Options
HEDIS®	Healthcare Effectiveness Data and Information Set
HEQ/HEQMS	Health Equity and Quality Measure Set
HHS	Human Health Services
HIE	Health Information Exchange

HIPAA	The Health Insurance Portability and Accountability Act of 1996
HIV	Human Immunodeficiency Virus
HMO	Health Maintenance Organization
HPA	Health Plan Accreditation
HRGi	Insurance company providing cost containment solutions for healthcare
ICD-10	International Classification of Diseases, Tenth Revision
ICF/DD	Intermediate Care Facility Developmentally Disabled
ICF/DD-H	Intermediate Care Facility/Developmentally Disabled Habilitative
ICF/DD-N	Intermediate Care Facility/Developmentally Disabled Nursing
IEP	Individualized Education Plan
IFSP	Individualized Family Service Plan
IHA	Initial Health Appointment
IHCP	Indian Health Care Provider
IHI	Initial Healthcare Improvement
IHS	Indian Health Service
IHSP	Individualized Health and Support Plan
IHSS	In-Home Supportive Services
IMD	Institution for Mental Diseases
IMR	Independent Medical Review
IPA	Independent Physician/Provider Associations
IPC	Individual Plan of Care
IT	Information Technology
JC	Joint Commission
JCC	Joint Conference Committee
JI	Justice Involved
KKA	Knox-Keene Health Care Service Plan Act of 1975
LAT	Language Assistance Timeline
LEA	Local Education Agency
LEP	Limited English Proficiency
LGA	Local Government Agency
LHD	Local Health Department

LM	Licensed Midwife
LOB	Line of Business

LTC	Long-Term Care
LTSS	Long-Term Services and Support
MAT	Medications for Addiction Treatment (or Medication-Assisted Treatment)
MCH	Maternal and Child Health
MCAS	Managed Care Accountability Set
MCO	Managed Care Organization
MCP	Managed Care Plan
MEDS	Medi-Cal Eligibility Data System
MFTP	Money Follows the Person
MHP	Mental Health Plan (Contra Costa County
MIS	Management and Information System
MLR	Medical Loss Ratio
MMA	Medicare Modernization Act
MOC	Model of Care
MOU	Memorandum of Understanding
MPL	Minimum Performance Level
MRR	Medical Record Review
MSSP	Multipurpose Senior Service Program
NABD	Notice of Adverse Benefit Determination
NAR	Notice of Appeal Resolution
NCQA	National Committee for Quality Assurance
NDC	National Drug Code
NDN	Nondiscrimination Notice
NEMT	Non-Emergency Medical Transportation
NISTSP	National Institute of Standards and Technology Special Publication
NMT	Non-Medical Transportation
NOA	Notice of Action
NP	Nurse Practitioner
NPI	National Provider Identifier
NQTL	Non-Quantitative Treatment Limitation
NSMHS	Non-Specialty Mental Health Service
OHC	Other Health Coverage
OIG	Office of the Inspector General
P&P	Policies and Procedures
PACE	Program for All-Inclusive Care for the Elderly

PCC	Public Contract Code (California)
PCP	Primary Care Provider
PH	Public Health
PHI	Protected Health Information
PHM	Population Health Management
PHMS	Population Health Management Strategy
PI	Personal Information

PIA	Prison Industry Authority
PIP	Performance Improvement Project
PIR	Privacy Incident Reporting
PIU	Program Integrity Unit
PIW	Performance Improvement Workgroups
PL	Policy Letter
PMC	Policy Management Committee
PMP	Policy Management Program
PMPM	Per Member Per Month
PMO	Project Management Office
PNA	Population Needs Assessment
PNT	Provider Network Training
POCT	Point-of-Care Glucose Training
PPC	Provider-Preventable Condition
PPR	Post-Payment Recovery
PPS	Prospective Payment System
PQI	Potential Quality Issue
PSCI	Personal, Sensitive, and/or Confidential Information
QAS	Qualified Autism Services
QI	Quality Improvement
QIHEC	Quality Improvement and Health Equity Committee
QIHETP	Quality Improvement and Health Equity Transformation Program
QOC	Quality of Care
QSO	Qualified Service Organization
QTL	Quantitative Treatment Limitation
RC	Regional Center

RDT	Rate Development Template
RHC	Rural Health Clinic
RPD	Restricted Provider Database
RSS	Risk Stratification and Segmentation
SBC	Summary of Benefits and Coverage
SBIRT	Screening, Brief Intervention, and Referral to Treatment
SDOH	Social Drivers of Health
SED	Serious Emotional Disturbance
SFTP	Secure File Transfer Protocol
SIS	Satisfactory Immigration Status (see UIS)
SMAC	State Medical Agency Contracts
SMHS	Specialty Mental Health Services
SMI	Serious Mental Illness
SNF	Skilled Nursing Facility
SPD	Senior and Person with Disability
STC	Special Terms and Conditions
STD	Sexually Transmitted Disease
SUD	Substance Use Disorder

TAR	Treatment Authorization Request
TB	Tuberculosis
TCC	Telephone Consultation Clinic
TCM	Targeted Case Management
TDD	Telecommunication Devices for the Deaf
TNE	Tangible Net Equity
TPTL	Third Party Tort Liability
TTY	Telephone Typewriters
UIS	Unsatisfactory Immigration Status (see SIS)
UM	Utilization Management
USC	United States Code
USPSTF	United States Preventive Services Task Force
VFC	Vaccines for Children
W&I	Welfare and Institutions Code
WCM	Whole Child Model

WIC	Women, Infants and Children Supplemental Nutrition Program