

**MINUTES OF MEETING OF BOARD OF TRUSTEES AND BOARD OF
TRUSTEES EXECUTIVE COMMITTEE OF
TALLAHATCHIE GENERAL HOSPITAL**

October 25, 2022

On this date at the hour of 10:30 a.m., the Board of Trustees and Board of Trustees Executive Committee met in regular session in the multipurpose room of the James C. Kennedy Wellness Center with the following trustees and personnel, to wit:

David Hargett, Trustee District One
Ike Sayle, Trustee District Two
Gerry Speir, Trustee District Three
Morris Murphey, Trustee District Four
Willie Lockett, Trustee District Five
Jim Blackwood, Administrator
Joey Brunson, Chief Financial Officer
Buddy McRae, Chief Operating Officer
Rani Richard, Finance Department

Trustee Speir opened the meeting with prayer.

The minutes of the September 27, 2022 meeting were presented. A motion was made by Trustee Lockett to approve these minutes. The motion was seconded by Trustee Hargett with all Trustees voting "Aye" in favor of the motion.

Mr. Brunson gave the Board copies of the statistics for the providers showing their production in the hospital and the clinic for the month of September, 2022. The Board reviewed the statistics and questions were asked and answered.

Mr. Brunson presented the report of the Finance Committee for September, 2022 financials to the Board. Questions were asked and answered about the statements. A motion was made by Trustee Sayle to approve the report of the Finance Committee as presented for September, 2022. The motion was seconded by Trustee Hargett with all Trustees voting "Aye" in favor of the motion.

Mr. Blackwood circulated the Administrator's comments, a copy of which appears as Exhibit 1 hereto and is incorporated herein by reference. Questions were asked and answered concerning the Administrator's comments.

Mr. Blackwood reported that he had been in further contract negotiations with Dr. Kordsmeier within the guidelines as previously discussed with the Board. Mr. Blackwood discussed Dr. Kordsmeier's requests and advised that he would keep the Board apprised of negotiations.

Mr. Blackwood revisited the discussion about replacing the CT scanner. The current scanner is now over 12 years old, and replacement parts are no longer available. Mr. Blackwood reported that the head of our Radiology department, Chris Lowery, and reviewed the technology currently available on the market, and identified a unit appropriate for our needs. The selected unit is one manufactured by GE, which is available on state contract. The quote for the machine is attached to these minutes.

Mr. Blackwood reported that the old machine will be removed on December 4 and the new one installed around December 28, 2022. There will be three to four weeks of down time while the installation is taking place. During that time, we will evaluate any needed repairs to the flooring or walls before the new unit is installed. Mr. Blackwood also reported that he received quotes from GE and Kingsbridge financing to finance the CT scanner purchase. The better of the two quotes came from Kingsbridge. A copy of both the GE quote and the Kingsbridge quote are attached to these minutes. A motion was made by Trustee Murphey authorizing Mr. Blackwood to complete the purchase of the CT machine from GE and finance same through Kingsbridge. The motion was seconded by Trustee Hargett with all trustees voting "Aye" in favor of the motion.

Mr. Blackwood requested that the Board enter into executive session to discuss a pending legal action being pursued by Mitchell Monsour, in which Mr. Monsour recently named Sunflower Management Holding Company, LLC ("SMG") and Mr. Blackwood, individually. Trustee Sayle moved to enter executive session, which was seconded by Trustee Hargett, with all Trustees voting "Aye" in favor of the motion. After the discussion in executive session, a motion was made by Trustee Hargett to exit executive session, which was seconded by Trustee Murphey, with all Trustees voting "Aye" in favor of the motion. Mr. Sayle then moved that due to the absence of insurance covering SMG and Mr. Blackwood against the claims asserted by Mr. Monsour, TGH should provide indemnification to SMG and Mr. Blackwood for defense against the claims and for any liability, to the extent it becomes necessary in the future. The motion was seconded by Trustee Murphey, with all Trustees voting "Aye" in support of the motion.

Mr. McRae circulated the Quality Report and HCAHPS Report for September, 2022. Questions were asked and answered concerning the quality metrics for the month.

Mr. McRae next presented the Hospital Compliance Questionnaire for the FY 2022. After an explanation as to the certifications contained in this questionnaire, a motion was made by Trustee Murphey to approve this questionnaire and authorizing Trustee Speir and Mr. Blackwood to execute same. The motion was seconded by Trustee Sayle, with all Trustees voting "Aye" in favor of this motion. A copy of the Hospital Compliance Questionnaire is attached hereto as Exhibit 2.

Mr. McRae also presented the annual policy review for the Hospital, ECF and Clinics. A motion was made by Trustee Hargett to approve all policies. Trustee Murphey seconded the motion with all Trustees voting "Aye" in favor of approval of all policies.

Mr. Blackwood reported to the Board that the employees had met all of the 2022 incentives as approved by the Board with the exception of Department Expenses. Due to inflation and increased Covid spending which is outside our employees' control, Mr. Blackwood requested that the Board waive the incentive requirement as to Department Expenses. Also, Mr. Blackwood requested that the Board approve the same incentives for the 2023 Incentive Program and waive the Department Expenses category until such time as inflation and Covid expenses normalize. A motion was made by Trustee Sayle to approve both of Mr. Blackwood's requests. The motion was seconded by Trustee Hargett with all Trustees voting "Aye" in favor of the motion.

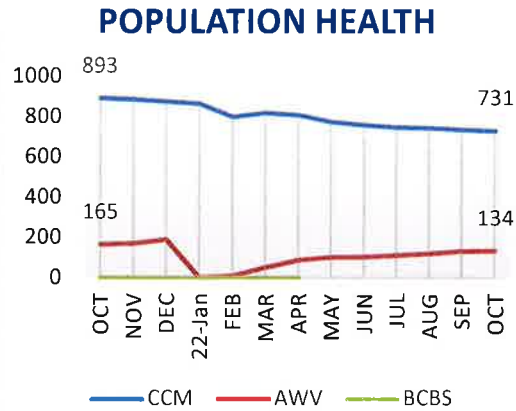
Mr. Blackwood stated that it was time to elect officers for Fiscal Year 2023. Trustee Murphey moved that the president and secretary stand for re-election for Fiscal Year 2023. The motion was seconded by Trustee Lockett, with all Trustees voting "Aye" in favor of the motion.

There being no further matters for discussion, the Board adjourned.

Administrator’s Comments – Meeting of October 25, 2022

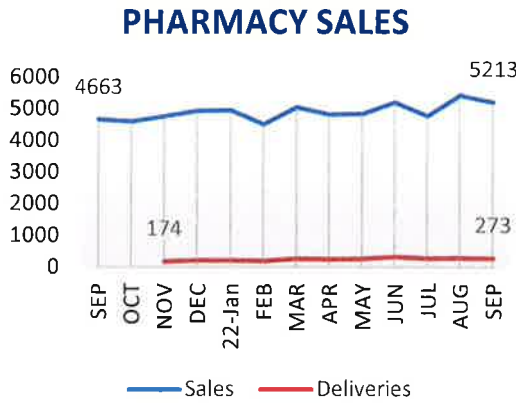
Nursing Home Census: We have 83 residents in the nursing home, up three from last month’s census of 80. We have 2 beds open on the general care side and 13 on the special care side.

ACO and Population Health Initiatives: We have 731 participants enrolled in our Chronic Care Management program, down from 738 last month. We have conducted 134 Medicare Annual Wellness Visits in 2022, up from 1321 last month.



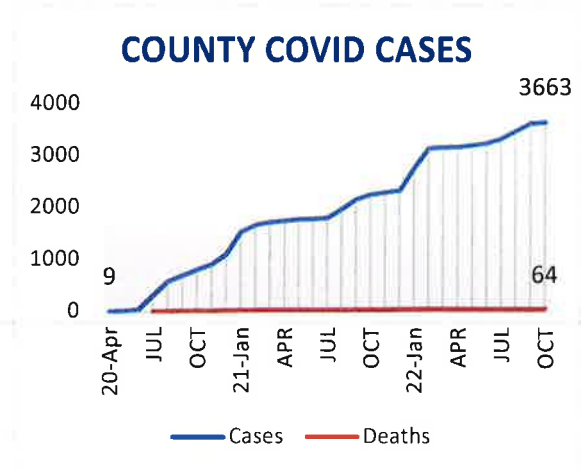
TGH Discount Pharmacy: We filled 5,213 prescriptions in September, down from 5,423 last month. September’s sales were 12% higher than September of last year. We made 273 deliveries in September, down slightly from the 286 deliveries made in August.

COVID-19: Tallahatchie County’s number of COVID-19 cases increased to 3,663 up from 3,640 last month. The county’s total number of fatalities increased from 63 to 64.



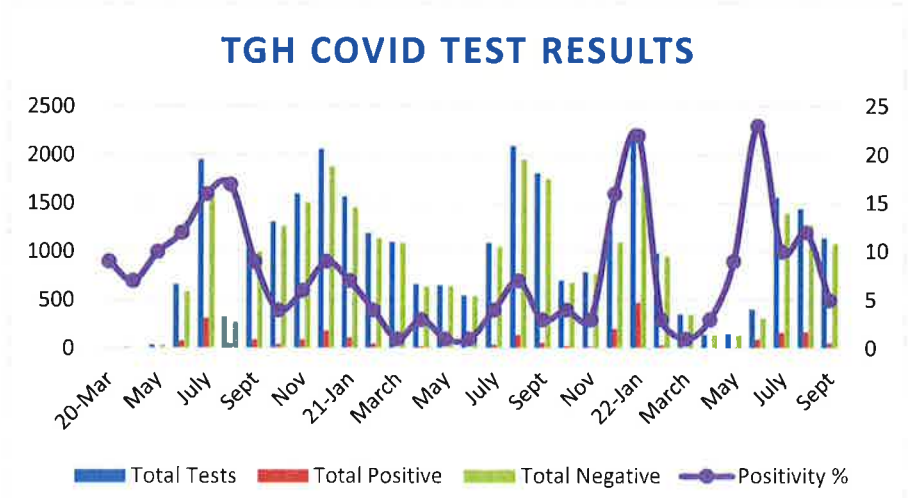
There has been no change over the last few months in terms of outbreaks among patients, ECF residents and staff. Positive cases remain sporadic, but persistent, mainly with mild symptoms and relatively quick recoveries.

ECF Courtyard: Work on the courtyard has been progressing relatively quickly, helped by the dry weather. We are still hopeful that we will be able to hold an opening event sometime this month to take advantage of cooler weather.



Hospital and Clinic

Improvements: We have almost completed repainting and cosmetic improvements in the front common areas of the hospital. We will next repaint doorframes, replace doors and install new artwork, furniture and signage. We have repainted and redone the flooring in the lobby of the Charleston Clinic, and new furniture and decorations have been ordered. We are now going to begin similar work in each one of the clinic's hallways, repainting them and replacing the flooring and ceilings. Lastly, each one of the patient exam rooms will be repainted and have new cabinets, flooring and ceilings installed. This work will be done in stages, both to prevent disruptions in clinic operations and to minimize the need for large expenditures of money and maintenance department labor.



Tutwiler

Clinic: I have been informed that the Foundation was able to complete the purchase of the property for the new Tutwiler Clinic building. I now understand that the Foundation has asked its architect to begin drawing plans for the building's construction.

New Provider Recruitment: At the board's direction, I continue to discuss terms of a possible employment package for Dr. Kordsmeier. We are currently trying to work out details related to his expected productivity, and also to his employee incentive package. I will provide the board with a brief update in person.

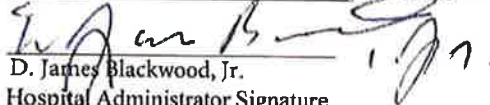
Legal Matters: None.


Tallahatchie General Hospital & Extended Care Facility

(Name of Hospital)

CERTIFICATION TO MISSISSIPPI COMMUNITY HOSPITAL COMPLIANCE QUESTIONNAIRE YEAR
ENDED SEPTEMBER 30, 20²²

We have reviewed all questions and responses as contained in the Hospital Compliance Questionnaire for Tallahatchie General Hospital & ECE, and to the best of our knowledge and belief, all responses are accurate.


D. James Blackwood, Jr.
Hospital Administrator Signature


Gerry Speir
Board President's Signature

October 25, 2022
Date

October 25, 2022
Date

Minutes Book Reference
Meeting of October 25, 2022 (Date)

(Minute book references are to be entered when questionnaire is accepted by Board.)

MISSISSIPPI COMMUNITY HOSPITAL COMPLIANCE QUESTIONNAIRE

1. Name and address of hospital:
Tallahatchie General Hospital & Extended Care Facility
141 Dr. T. T. Lewis Circle, Post Office Box 230
Charleston, Mississippi 38921
2. Names, addresses, and telephone numbers of officials (include Board Members, Administrator, Assistant Administrator, and Attorney). Attach sheet.
3. Period of time covered by this questionnaire:
From: October 1, 2021 To: September 30, 2022

Tallahatchie General Hospital & ECF

(Name of Hospital)

Compliance Questionnaire

YES NO N/A

GENERAL

1.	Have actions of the Board of Trustees followed the procedures of the open meetings act Section 25-41-3 and Section 25-41-7 on matters in executive session?	<u>x</u>	<u> </u>	<u> </u>
2.	Have actions of the Hospital Board been approved in its official minutes?	<u>x</u>	<u> </u>	<u> </u>
3.	Have the actions of the Hospital Board followed the exemptions set forth in Section 25-61-9, 25-61-11 and 25-61-12 regarding commercial and financial information of a proprietary nature, federal statutory law and records related to business development?	<u>x</u>	<u> </u>	<u> </u>
4.	Has each member of the board of trustees continued to meet the qualification of Section 41-13-29?	<u>x</u>	<u> </u>	<u> </u>
5.	Has the Hospital adopted a policy on officers or employees receiving compensation for outside employment in addition to receiving a salary for full-time hospital employment? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
6.	Has the Hospital Board of Trustees adopted a policy on recruiting and financially assisting physicians and other health care practitioners in locating in the service area of the Hospital? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
7.	Has the Hospital Board of Trustees cited statutory authority on charitable contributions which is reflected in its official minutes?	<u>x</u>	<u> </u>	<u> </u>
8.	Has the Hospital Board of Trustees adopted a policy on paying membership dues to organizations related to hospital business which is reflected in its official minutes? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
9.	Has the Hospital Board of Trustees adopted a policy that prohibits filling prescriptions for employees free of charge? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
10.	Has the Hospital Board of Trustees adopted a policy that prohibits its individual members from receiving compensation other than that allowed by statutory authority? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
11.	Has the Hospital Board of Trustees adopted a policy on insurance coverage for all employees? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>

Tallahatchie General Hospital & ECF

(Name of Hospital)

Compliance Questionnaire

		YES	NO	N/A
12.	Has the Hospital Board of Trustees adopted a policy on education benefits for all employees? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
13.	Has the Hospital Board of Trustees adopted a policy describing limitation on the use of Hospital personnel for non-hospital matters during normal work hours? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
14.	Has the Hospital Board of Trustees adopted a policy on the use of hospital telephones for personal use? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
15.	Has the Hospital Board of Trustees adopted procedural policy on disposal of surplus property? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
16.	Has the Hospital Board of Trustees adopted a policy on expenditures for public relations and advertising? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
17.	Has the Hospital Board of Trustees adopted a policy on payment of invoices within the period of time discounts are allowed? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
18.	Has the Hospital adopted a policy prohibiting payment of employee's bonuses or compensation in addition to established employee benefits, statutory incentive programs, and regular compensation? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
19.	Have the Hospital Board Members and officials been properly bonded in accordance with the population requirements under the provisions of Section 41-13-29? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
20.	Has the Hospital adopted a policy prohibiting making payroll advances to employees? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
21.	Has the Hospital adopted a policy prohibiting the purchase of alcoholic beverages with public funds other than for medical purposes? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
22.	Has the Hospital provided the required information in accordance with Section 27-104-155 to its owner for the creation of a transparent and accountable website?	<u>x</u>	<u> </u>	<u> </u>

Tallahatchie General Hospital & ECF

(Name of Hospital)

Compliance Questionnaire

	<u>YES</u>	<u>NO</u>	<u>N/A</u>
23. Does the Hospital allow public access to records under provisions of Section 25-61-5?	<u>x</u>	<u> </u>	<u> </u>
24. Has the Hospital Board of Trustees complied with the nepotism law? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>
25. Were payments to Hospital officers and employees as an expense allowance supported by proper documentation?	<u>x</u>	<u> </u>	<u> </u>
26. Are vehicles owned or leased by the Hospital properly marked as required by Section 25-1-87?	<u>x</u>	<u> </u>	<u> </u>
27. On or before the first Monday in September, has the Board of Trustees adopted, entered on its minutes, and filed with the owner or owners a proposed budget for ensuing fiscal year? (Section 41-13-47)	<u>x</u>	<u> </u>	<u> </u>
28. On or before the first Monday in March, has the Board of Trustees adopted, entered on its minutes, and filed with the owner or owners a full fiscal year report containing a complete and correct accounting of all funds received and expended for hospital purposes? (Section 41-13-47)	<u>x</u>	<u> </u>	<u> </u>
29. Has the Hospital avoided purchasing items from or entering into contracts with members of its Board of Trustees or businesses in which such members have a financial or ownership interest? (Section 25-4-105)	<u>x</u>	<u> </u>	<u> </u>
30. Has the Hospital avoided purchasing items from or entering into contracts with any hospital employees or a business in which they have an interest unless allowed under Section 25-4-105(4)?	<u>x</u>	<u> </u>	<u> </u>
31. Has the Hospital provided the required disclosures as required by a defined benefit retirement plan in accordance with Section 41-13-49 and 41-13-51?	<u>x</u>	<u> </u>	<u> </u>

TRAVEL

1. Has the Hospital complied with Sections 41-7-140, 41-13-29 and 41-13-35 regarding travel?	<u>x</u>	<u> </u>	<u> </u>
2. Has the Hospital adopted a policy on paying employees actual expenses for official travel while engaged in hospital business or in attending recognized educational or professional meetings? (Meeting of <u>1/1/2016</u>)	<u>x</u>	<u> </u>	<u> </u>

Tallahatchie General Hospital & ECF

(Name of Hospital)

Compliance Questionnaire

- | | | <u>YES</u> | <u>NO</u> | <u>N/A</u> |
|----|---|------------|---------------|---------------|
| 3. | Have the Hospital officers and employees used, as a minimum, the travel vouchers prescribed by the MS State Dep't of Finance & Administration for reimbursement of official travel? | <u>x</u> | <u> </u> | <u> </u> |
| 4. | Have the Hospital Board of Trustees adopted a policy requiring that paid receipts be attached to vouchers for travel reimbursement?
(Meeting of <u>1/1/2016</u>) | <u>x</u> | <u> </u> | <u> </u> |

PURCHASING

- | | | | | |
|-----|---|----------|---------------|---------------|
| 1. | Has the Hospital refrained from purchasing personal items for employee use? | <u>x</u> | <u> </u> | <u> </u> |
| 2. | Has the Hospital adopted a policy prohibiting split purchases in order to avoid advertising for bids? | <u>x</u> | <u> </u> | <u> </u> |
| 3. | Has the Board adopted a policy requiring acknowledgment of receipt of good purchased? | <u>x</u> | <u> </u> | <u> </u> |
| 4. | Are at least two competitive written bids obtained for purchases of more than \$5,000 but not more than \$50,000? (Section 31-7-13) | <u>x</u> | <u> </u> | <u> </u> |
| 5. | Did the Board of Trustees follow proper procedures in advertising for purchases of more than \$50,000? (Section 31-7-13) | <u>x</u> | <u> </u> | <u> </u> |
| 6. | Did the Board of Trustees follow proper procedures for opening of bids? | <u>x</u> | <u> </u> | <u> </u> |
| 7. | Is a bid file maintained by Hospital personnel as required by Section 31-7-13? | <u>x</u> | <u> </u> | <u> </u> |
| 8. | Did the Board of Trustees justify on the minutes any purchases made other than lowest bid? (Section 31-7-13) | <u>x</u> | <u> </u> | <u> </u> |
| 9. | Did the Board of Trustees place on the minutes and justify all emergency purchases? (Section 31-7-13) | <u>x</u> | <u> </u> | <u> </u> |
| 10. | Has the Hospital generally complied with the Public Purchase Law? (Section 31-7-1, et al.) | <u>x</u> | <u> </u> | <u> </u> |

MISSISSIPPI COMMUNITY HOSPITAL COMPLIANCE QUESTIONNAIRE
BOARD MEMBERS, ADMINISTRATORS, ASSISTANT ADMINISTRATORS
FOR
TALLAHATCHIE GENERAL HOSPITAL & ECF

PERIOD OF TIME – OCTOBER 1, 2021 THROUGH SEPTEMBER 30, 2022

Gerry Speir, Chairman (District Three)
664 George Cossar Boulevard
Charleston, Mississippi 38921
662-647-8777

Isaac Sayle, Secretary (District Two)
14139 Highway 35 North
Charleston, Mississippi 38921
662-647-1425

David Hargett (District One)
1147 Hargett Drive
Charleston, Mississippi 38921
662-647-1609

Morris Murphey (District Four)
81 Tippo Creek Road
Charleston, Mississippi 38921
662-647-7029

Willie Lockett (District Five)
Post Office Box 512
Webb, Mississippi 38966
662-392-7966

Donald J. Blackwood, Jr., CEO
Post Office Box 230
Charleston, Mississippi 38921
601-842-2899

Buddy McRae, COO
Post Office Box 230
Charleston, Mississippi 38921
601-918-1293



September 23, 2022
 Quote Number: 2007878169.10
 Customer ID: 1-23JC9J
 Agreement Expiration Date: 09/30/2022

Tallahatchie General Hospital
 201 S Market St
 Charleston, MS 38921-2236

This Agreement (as defined below) is by and between the Customer and the GE Healthcare business (“GE Healthcare”), each as identified below for the sale and purchase of the Products and/or Services identified in this Quotation, together with any applicable schedules referred to herein (“Quotation”). “Agreement” is this Quotation and either: (i) the Governing Agreement identified below; or (ii) if no Governing Agreement is identified, the GE Healthcare Terms and Conditions and Warranties that apply to the Products and/or Services identified in this Quotation. In the event of conflict, the Quotation supersedes.

GE Healthcare can withdraw this Quotation at any time before Customer: (i) signs and returns this Quotation or (ii) provides evidence of Quotation acceptance satisfactory to GE Healthcare (“Quotation Acceptance”). On Quotation Acceptance, this Agreement is the complete and final agreement of the parties relating to the Products and/or Services identified in this Quotation. There is no reliance on any terms other than those expressly stated or incorporated by reference in this Agreement and, except as permitted in this Agreement, no attempt to modify will be binding unless agreed to in writing by the parties. Modifications may result in additional fees and cannot be made without GE Healthcare’s prior written consent.

Handwritten or electronic modifications on this Agreement (except an indication of the form of payment, Customer purchase order number and signatures on the signature blocks below) are void.

Governing Agreement:	Novation Vizient Supply LLC
Terms of Delivery	FOB Destination
Billing Terms	80% on Delivery / 20% on Acceptance
Payment Terms	45 Net
Total Quote Net Selling Price	\$385,109.20
Sales and Use Tax Exemption	Certificate on File

IMPORTANT CUSTOMER ACTIONS:

Please select your planned source of funds. Source of funds is assumed to be cash unless you choose another option. Once equipment has been shipped, source of funds changes cannot be allowed.

- Cash
- GE HFS Loan GE HFS Lease
- Other Financing Loan Other Financing Lease Provide Finance Company Name Kingsbridge Holdings, LLC

The parties have caused this Agreement to be executed by their authorized representative as of the last signature date below.

Tallahatchie General Hospital

Signature: _____

Print Name: _____

Title: _____

Date: _____

 Purchase Order Number, if applicable

GE Precision Healthcare LLC, a GE Healthcare business

Signature: Debbie Zuluaga

Title: Account Manager - VASO Mfr Rep

Date: September 23, 2022



September 23, 2022
 Quote Number: 2007878169.10
 Customer ID: 1-23JC9J
 Agreement Expiration Date: 09/30/2022

To Accept This Quotation

Please sign and return this quotation together with your Purchase Order to:

Name: Debbie Zuluaga
 Email debbie.zuluaga@ge.com
 Phone:
 Fax:

Name:
 Email:
 Phone:
 Fax:

Payment Instructions

Please remit payment for invoices associated with this quotation to:

GE Precision Healthcare LLC
P.O. Box 96483
Chicago, IL 60693

FEIN: 83-0849145

Tallahatchie General Hospital

Addresses:

Bill To: ~~KANAWHA COUNTY GENERAL HOSPITAL~~
~~HOSPITAL~~ KINGSBRIDGE
 HOLDINGS, LLC
Ship To: TALLAHATCHIE GENERAL HOSPITAL

TALLAHATCHIE GENERAL HOSPITAL, ACCOUNTS PAYABLE PO
 BOX 230 CHARLESTON MS, 38921

 201 S MARKET ST MS,38921-2236

To Accept This Quotation

- Please sign the quote and any included attachments (where requested).
- If requested, please indicate your form of payment.
- If you include a purchase order, please make sure it references the following information:
 - The correct Quote number and Version number above
 - The correct Remit To information as indicated in **“Payment Instructions”** above
 - Your correct SHIP TO and BILL TO site name and address
 - The correct Total Price as indicated above

Upon submission of a purchase order in response to this quotation, GE Healthcare requests the following to evidence agreement to contract terms: Signature page on quote filled out with signature and P.O. number **** OR**** Verbiage on the purchase order must state one of the following:

(i) Per the terms of Quotation # _____, (ii) Per the terms of GPO # _____; (iii) Per the terms of MPA# _____; or (iv) Per the terms of SAA # _____.

Include applicable quote/agreement number with the reference on the purchase order. In addition, Source of Funds (choice of Cash/Third Party Load or GE HFS Lease Loan or Third Party Lease through _____), must be indicated, which may be done on the Quote Signature Page (for signed quotes), or the Purchase Order (where quotes are not signed) or via a separate written source of funds statement (if provided by GE Healthcare).”



Catalog Item Details

Line	Qty.	Catalog	
1	1.00	S7881AT	Revolution Maxima ES

GE's Revolution Maxima is a new standard computed tomography, powered by artificial intelligence technology that delivers a streamed line workflow for better ease of use and operational efficiency. For better clinical performance, Revolution Maxima has Clarity Imaging Chain consists of Clarity Detector, DAS, PerformixTM40 Plus X-ray Tube and ASiR-VTM (Option) / ASiRTM reconstruction and delivers high resolution imaging to meet various customer needs in real clinical situations. Clarity Imaging Chain delivers higher spatial resolution, lower noise, or less-artifact.

Smart Flow

Improve productivity and patient experience by streamlining your workflow and access to information, Smart Flow technologies enable exam prescription from the patient's side, integrated injections, real-time reconstruction during the scan and access to advanced applications right on the console.

- Xstream Tablet is a multi-purpose user interface on gantry sides with 12.1-inch monitor and supports following features.
 - o Touch screen operation
 - o Patient and protocol selection
 - o Patient information display
 - o Motion axes display
 - o Related Protocol
 - o Emergency Patient
- Related Protocols helps to reduce complexity of protocol selection. Matches an order information transferred from RIS (Radiology Information System) with a user protocol and shows only necessary protocols.
- Volume helical digital tilt is an innovation in image reconstruction technology that allows clinicians to reconstruct tilted views without the need for physically tilting the scanner.
- With Image Check, up to 55 images are reconstructed and available per second. For trauma patients, when the extent of the injuries is unknown, you can prospectively prescribe up to 10 multiphase reconstructions and easily prioritize which one you need first.
- Scan a chest in as fast as two seconds with 175 mm/sec acquisition speed with VT1700V table to help shorten patient breath-holds while maintaining image quality.

Clarity Imaging Chain

Revolution Maxima Clarity Imaging Chain consists of Clarity Detector, DAS, Performix 40 Plus X-ray Tube and ASiR/ASiR-V reconstruction, to deliver high resolution imaging.

Clarity Imaging Chain provides the following:

- For better performance Volume CT, Clarity Imaging Chain provides enhancement of spatial resolution up to 20% compared with previous GE technology (20% improvement is compared to previous GE CT measured at 4% MTF with Edge kernel).
- Designed as analog cable free between ASIC and Photodiode reducing electronic noise.
- Designed for up to 90% less heat generation for easier thermal management which is important for consistent Image quality.
- Designed for less electronic noise for better low signal performance.
- Optimized collimator with ability to reduce scatter noise.
- Performix40* Plus X-ray tube provides less focus movement.
- A liquid bearing tube that has a capability of less-wear of Tube bearing and is enabled up to 0.35sec rotation speed option with a routine scan. Revolution Maxima allows users to utilize helical pitches up to 1.531 and 0.35sec rotation speed option that meets GE's image quality specifications for lower pitch acquisitions. This high pitch and 0.35sec rotation speed enable faster scan times which may allow for shorter breath holds, and may help to avoid sedation, simultaneously (or "as well as") reducing motion artifacts from patient and organ movement. As an example, using this higher pitch, a full-body trauma scan of 1000 mm can be acquired in as little as 6 seconds.

Key Features: Excellent Performance

- Silent design of Revolution Maxima gantry allows significant reduction of audible noise compared with previous GE technology.
- IQ Enhance (IQE) reconstruction reduces helical Artifact Index in thin slice helical scanning. This reduction in artifacts makes

it possible to scan at faster helical pitches.

- GE's protocol management is improved with the addition of a workflow improvement feature, which allows easy configuration of back to back Axial or helical scans of the same anatomy at two different X-ray energies (kVps). To further improve registration accuracy, patient immobilization may be utilized. The additionally acquired dual energy data can be post-processed on console or AW workstation using Add/Sub function to gain additional clinical information.
- Adaptive Enhance Level Adjustment (AELA) may improve visual spatial resolution while maintaining pixel noise standard deviation and artifact.
- ODM provides reduction of radiation dose via X-ray tube current modulation for superficial organs and tissues, such as breasts while maintaining diagnostic quality without decreasing productivity (as the result of not using externally applied shields). Because attenuation data from the Scan Projection Radiograph is used to determine the mA modulation for acquisitions using Automatic Exposure Control, it is understood that when using externally applied shields that these shields should not be put in place prior to acquiring the scan projection radiograph(s). Placement of externally applied shielding prior to obtaining the scan projection radiograph(s) may adversely affect the AEC performance.
- Revolution Maxima supports 1024 reconstruction matrix.
- AutomA/SmartmA modulates X-ray tube mA to account for specific patient anatomy – based upon data gathered from the scout image. The system predicts the optimal setting for the exam and adjusts mA to these settings.
- Dynamic Z-axis tracking provides automatic and continuous correction of the x-ray beam shape to block unused x-ray at the beginning and end of a helical scan to reduce unnecessary radiation.
- Direct MPR with Auto-Batch feature, affording automatic real-time direct reconstruction and transfer of fully corrected multi-planar images, also allows users to move from routine 2D review to prospective 3D image review of axial, sagittal, coronal, and oblique planes while enabling automated protocol-driven batch reformats to be created and networked to their desired reading location.
- Dose Check provides users with tools to help them manage CT dose in clinical practice and is based on the standard XR-25-2010 published by The Association of Electrical and Medical Imaging Equipment Manufacturers (NEMA).
- Dose Reporting: CTDIvol, DLP, Dose Efficiency displays during scan prescription and provides dose information. The CTDIvol, DLP, and Phantom size used to calculate dose is automatically saved once the user selects End Exam.
- DICOM Structured Dose Report generates a CT Dose Report, which can enable tracking of dose (CTDIvol and DLP) for the patient by the hospital radiation tracking system/RIS/HIS.

Scan mode: Helical

- Helical Scan Speeds: Full 360° rotational scans: 0.7, 0.8, 0.9, 1.0 second
- Helical Pitch (nominal): 0.516 to 1.531
- Selectable kV: 80, 100, 120, 140
- Selectable mA: 10 to 460mA at 120kV, 5mA increments
- Reconstruction Algorithms: Soft Tissue, Standard, Detail, Chest, Bone, Bone Plus, Lung, Ultra, Edge, Edge Plus, Soft# and Standard#.

Scan Mode: Axial & Cine

- Scan Speeds: 0.7, 0.8, 0.9, 1.0, and 2.0 second full scans (360° acquisition).
- Selectable kV: 80, 100, 120, 140
- Selectable mA: 10 to 460mA at 120kV, 5mA increments
- Reconstruction Algorithms: Soft Tissue, Standard, Detail, Chest, Bone, Bone Plus, Lung, Ultra, Edge, Edge Plus, Soft# and Standard#.

Image Quality

- 0.28mm high resolution

System Components:

- Gantry Advanced slip ring design continuously rotates the generator, Performix 40 Plus, Clarity detector and data acquisition system around the patient.
- Aperture: 70 cm
- Maximum SFOV: 50 cm
- Tilt: +/- 30 degree (Digital)
- Rotational Speeds: 360 degrees in 0.7, 0.8, 0.9, 1.0 seconds
- Multi-purpose Xtream Tablet
- Integrated start scan button with countdown timer to indicate when x-ray will turn on.

X-ray Tube: Performix 40 plus liquid metal bearing tube unit offers an optimized design for exams requiring a number of scans without tube cooling.



- Performix 40 Plus with 7.0MHU of storage provides increased helical performance with greater patient throughput
- Wide range of technique (10 mA to 460 mA at 120kV, in 5 ma increments) gives technologist and physician flexibility to tailor protocols to specific patient needs for optimizing patient dose.
- Heat storage capacity: 7.0MHU (Performix 40 Plus)
- Dual Focal Spots:
 - o Small Focal Spot: 0.7 (W) x 0.6 (L) Nominal Value; (IEC 60:193)
 - o Large Focal Spot: 0.9 (W) x 0.9 (L) Nominal Value; (IEC 60:193)

High Voltage Generator: High Frequency on-board generator allows for continuous operation during scan.

- kV: 80, 100, 120, 140
- Max Power (Hardware): 55kW; in-field upgradeable to 72kW
- mA: 10 to 460mA at 120kV, 5mA increments

Clarity Detector:

32ch based system

- 54,272 individual elements composed by 64 rows of 0.625mm thickness at isocenter. All data is acquired as thin slice at 1.25mm with the option of thicker slice from image reconstruction or processing.
- 32x 0.625mm or 32x 1.25mm scan mode.
- 98% absorption efficiency.
- 354 reconstructed slices (images) per rotation: under 32ch x 1.25mm, 1.375 helical pitch, 6 rotation, 266mm coverage, 0.1mm recon interval condition

Clarity DAS (Data Acquisition System): The Clarity DAS dramatically reduces noise and improves image performance.

- 2,460 Hz maximum sample rate.
- 861 - 1968 views per rotation.

Revolution Maxima operator Console:

- 2,000GB Disk (system, image, scan disks) stores up to 460,000 512*2images and 3520 scan rotations at 64 slice mode or up to 1,500 scan data files, or up to 300 exams.
- Reconstruction speed with Standard reconstruction: Up to 50 frames per second.

Warranty:

Revolution Maxima is designed to support GE Healthcare's liquid bearing X-ray tube technology. Posted advisory messages will be present in the event a 3rd party X-liquid bearing tube is used.

The published Company warranty in effect on the date of shipment shall apply. The Company reserves the right to make changes. General Electric Company reserves the right to make changes in specifications and features shown herein, or discontinue the product described at any time without notice or obligation.

Laser alignment devices contained within this product are appropriately labeled according to the requirements of the Center for Devices and Radiological Health.

Line	Qty.	Catalog	
2	1.00	B7881AY	VT1700V table

The VT1700V table enables volume scanning. Key features of this VT1700V table include easy patient access by lowering to <17 inches from the floor, 500lb weight capacity, up to 1700mm scannable range, 175 mm/sec travel time, real-time Z-axis position feedback between gantry and table.

Line	Qty.	Catalog	
3	1.00	B76122DA	Standard Cable Collector

System standard cable set

Line	Qty.	Catalog	
4	1.00	B7880MR	SmartMAR option

SmartMAR (Metal Artifact Reduction) software helps reduce photon starvation, beam hardening and streak artifacts caused by



high Z materials in the body, such as hip implants.

The clarity of SmartMAR images is addressing the challenges posed by metal artifacts, helping clinicians accurately contour targets and critical organs.

MAR offers:

Exceptional image quality.

SmartMAR is based on the latest in GE Healthcare smart technology, which uses a novel three-step, sinogram-based iterative algorithm.

Streamlined workflow.

SmartMAR requires only one scan, making the process of obtaining a corrected image fast and efficient.

Dose conscious.

SmartMAR requires only one acquisition.

Patient comfort.

The efficient, single-scan process helps to reduce patient time inside the scanner.

Versatility.

SmartMAR is designed to enhance clarity across a range of images including scans of hip implants, dental fillings, screws and other metal objects.

Line	Qty.	Catalog	
5	1.00	B78962CB	Xtream Integrated Injector Interface Kit - Class IV

Xtream Injector provides one handed synchronized start of the scan and injection from the CT Operators console or from the scan room providing consistent simultaneous start of contrast injection and scan acquisition protocols.

It utilizes the CiA Class 4 functionality which includes the following benefits:

Up to a 50% reduction in the number of user interface selections needed when compared to systems not utilizing the Xtream Injector. The 50% reduction comes from the fact that users select one button to start the scan acquisition and injection.

- Better control of contrast enhancement by synchronizing start time of the contrast injection and CT scan
- Improved workflow by enabling single-button start of both the injector and scanner from the scanner
- Injection parameter preview from the scanner console prior to beginning the scan
- Post-study review of injection results from the scanner console
- Automatic documentation of injection results in PACS

Line	Qty.	Catalog	
6	1.00	B75412DA	Injector Cable

Injector cable collection for Integrated Injector option.

Line	Qty.	Catalog	
7	1.00	B78552CA	CT Operator Console Desk

The Freedom workspace is an ergonomic working environment specifically designed for use with the GE Healthcare imaging systems. The sleek table design enables the efficient use of space while enhancing clinical workflow and technologist comfort.

The Freedom workspace provides a minimalist footprint to improve patient visibility and giving the user easier access to patients in the imaging suite.

It offers sit/stand and horizontal/vertical monitor flexibility. It can also help reduce noise and heat with remote location options of the console. The non-adjustable Freedom workspace version is 1300mm long x 895mm wide x 850mm height and weighs 55.8kg.

Line	Qty.	Catalog	
8	1.00	B7660B	Chair

Chair for CT scanner

Line	Qty.	Catalog	
9	1.00	B77292CA	CT Service Cabinet

Service cabinet for system accessories storage

Line	Qty.	Catalog	
10	1.00	B76632DA	Anti-Seismic kit

Seismic kit for Gantry, Table and Console

Line	Qty.	Catalog	
11	1.00	B75352CA	Table Convenience kit

Table tray and IV pole

Line	Qty.	Catalog	
12	1.00	B7900LC	Low Dose CT Lung Screening Option with Indication For Use

This option provides lung screening reference protocols that are tailored to the CT system, patient size (small, average large), and the most current recommendations from a wide range of professional medical and governmental organizations. Now, qualified GE Healthcare CT scanners with this option are formally indicated for, and can be confidently used by physicians for low dose CT lung cancer screening of identified high-risk patient populations. These protocols deliver low dose, short scan times, and clear and sharp images for the detection of small lung nodules. Early detection from an annual lung screening with low dose CT in high-risk individuals can prevent a substantial number of lung cancer-related deaths.

All new GE 64-slice and greater CT scanners, and virtually all of the 16-slice CT scanners that GE Healthcare sells are qualified for this screening option. This solution is also available to thousands of qualified GE CT scanners currently in use, increasing access to the quality scanners that satisfy both patient and physician needs. The new protocols, do include the choice for the user to be able to utilize GE Healthcare's industry-leading technologies such as ASiRTM, ASiR-VTM and VeoTM that are designed to reduce image noise, which is undesirable for physicians looking for small nodules.

This option contains two documents. Lung Cancer Screening Option Reference Protocol Guide, and the Lung Cancer Screening Option User Manual / Technical Reference Manual

i) The following GE Healthcare CT scanners are qualified to receive the new low dose CT Lung Cancer Screening Option: LightSpeed 16, BrightSpeed Elite, LightSpeed Pro16, Optima CT540, Discovery CT590 RT, Optima CT580, Optima CT580 W, Optima CT590 RT, LightSpeed Xtra, LightSpeed RT16, LightSpeed VCT, LightSpeed VCT XT, LightSpeed VCT XTe, LightSpeed VCT Select, Optima CT660, Revolution EVO, Discovery CT750 HD, Revolution HD, Revolution CT, Revolution Frontier.

ii) Moyer V. Screening for Lung Cancer: U.S. Preventive Services Task Force Recommendation Statement. Ann Intern Med. 2014;160:330-338.

<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/lung-cancer-screening>

Line	Qty.	Catalog	
13	1.00	E8016AZ	CT Table Slicker with Cushion - 1700 Systems (2-pc Set)



FEATURES/BENEFITS

- Two-piece, sealed slicker cushion set has comfort pads enclosed inside the slicker cover and extender cover
- Durable, clear PVC plastic cover facilitates faster, more thorough cleanup of blood and fluids
- Increase system uptime by protecting table from spills and particulate contaminants
- Thermo-sealed seams and flaps prevent contaminate buildup in hard to clean areas

COMPATIBILITY

- VCT with GT 1700 Table, CT HD750

Line	Qty.	Catalog	
14	1.00	E8016BA	CT Footswitch Slicker - 2000 & 1700 Systems

The footswitch slicker for CT VCT 2000 and 1700 systems is made of durable, clear PVC plastic that protects the footswitch and facilitates faster, more thorough cleanup of contamination caused by blood and other body fluids. Cover is held securely in place with Velcro.

Line	Qty.	Catalog	
15	1.00	E4502BB	CT Main Disconnect and UPS Control 380-480V 50 60Hz 90A

NOTES:

- Customer is responsible for arranging for installation with a qualified party
 - ITEM IS NON-RETURNABLE AND NON-REFUNDABLE
- Main Disconnect Panel (MDP) UL 90A 400/480V 50/60Hz 3 phases for CT, PET and PETCT

The (Main Disconnect and UPS Control Panel serves as the main facility power disconnect source installed ahead of the CT system PDU. On systems where the optional partial system UPS is included in the system, the panel provides NEC mandated UPS emergency power-off control function via a UPS control cable included with the UPS. The optimized design PDB saves time, installation labor, and valuable mounting space by consolidating the main circuit breaker, control power source and required warning lights into a compact factory manufactured panel. The panel provides short circuit protection, overload protection and National Electrical Code and Canadian Electrical Code required emergency shutdown for the system. The 24-volt low voltage controls all power, using either the panel cover mounted EMERGENCY OFF push button or the remote EMERGENCY OFF push button included with each system. The PDB is painted to match the imaging system for a total coordinated system appearance. Available in a combination surface\semi-flush mounted enclosure. The system provides stock availability of otherwise special-order devices, saving time and installation costs.

Benefits

- The System Main Disconnect saves time, installation labor, and valuable mounting space by consolidating the main circuit breaker, the feeder overcurrent devices, magnetic contactors and UPS emergency power-off into one compact panel
- The system provides stock availability of otherwise special-order devices, saving time and installation costs
- Reduces installation time and cost by eliminating delays in obtaining individually enclosed components and by eliminating on site assembly
- UPS emergency power-off functions are included for future, partial system UPS addition.
- Disconnects system power on first loss of incoming power, preventing damage to system components
- Provides a standardized platform for UPS or other future GE engineered modifications or upgrades
- Main power disconnect operating handle can be padlocked in the OFF position for servicing safety and OSHA lock out/tag out
- The door has provisions for padlocking
- Enclosure door is interlocked with ON / OFF disconnect handle to prevent unauthorized access if disconnect is in the ON position

Features

- Optional partial system UPS provides clean uninterrupted power to the system computer, maintaining system integrity during power loss while also providing a solution to power quality problems
- UL, cUL listed, and CE labeled
- Supplied with low voltage, cover mounted Push to Stop, Twist to Restore pushbutton and long-life LED pilot lights
- Provides overcurrent and short circuit protection with GE GuardEON solid-state circuit breakers
- Suitable for use on systems with 25,000A of short circuit current. It is the installer's responsibility to verify that the available short circuit current is 25,000A or less for compliance to all electrical codes
- Emergency-off disconnects power to both the PDU and optional partial system UPS output, per National Electric Code



- Factory wired and tested
- All devices are selected for high reliability and long life
- Panel disconnect provides OSHA lockout / tag out provisions

Remote EPO

- This MDP comes with two normally closed contact blocks attached to the back of the emergency off push button.

Seismic Specifications

- This Panel has been certified by an independent California structural engineer in conformance with the shake testing requirements of ICC-AC 156. The California OSHPD number is OSP-0457-10.
- The seismic performance characteristics are as follows: $SDS(g) \leq 2.56$; $z/h \leq 1.0$; $I_p \leq 1.5$

Physical Characteristics

- Dimensions: Height x Width x Depth: 24 x 16 x 7 inches (610 x 407 x 178 mm)
- Handle depth: 2.75 inches (70 mm)
- Weight: 46 pounds (21 kg)

Components supplied with each panel

- The Main Disconnect and UPS Control Panel
- An Installation, Operations & Service Manual
- (2) sets of Emergency Power Off pushbuttons with 2NC on each EPO
- Drawings and Electrical Schematics

Line	Qty.	Catalog	
16	1.00	E4502KZ	Liebert GXT4 10kVA 208Y/120V 2-phase CT partial UPS

Line	Qty.	Catalog	
17	1.00	W0303CT	TIP CT Scanner 3 Training Program

This training program is designed for customers purchasing a GEHC CT system to include EVO-ES or Discovery RT. GEHC will work with the designated Customer contact to agree upon a reasonable training schedule for a pre-defined group of core technologists that will leverage blended content delivery and may include a combination of onsite days and virtual offerings, to include TiP Virtual Assist, the GEHC Answerline and available on-demand courses (“Virtual Inclusions”). This blended curriculum with multiple delivery platforms promotes learner retention and allows for an efficient and effective skill development.

This program may contain:

- Onsite training (generally 5 days)
- Virtual Inclusions may include:
 - Remote instructor-led training: Instructor leads a remote training session one-on-one or in a group, typically for 1 hour
 - Answerline Support-Access to GEHC experts for clinical, non-emergency applications assistance via phone or by using the iLinq button on the imaging console
 - Tip Virtual Assist-Direct interactive access to a GEHC expert for enhanced support.
 - On Demand courses-On healthcare learning system. Self-paced courses and webinars (CE and non-CE).

Training will be delivered at a mutually agreed upon time between the customer and GE Healthcare (excluding GE Healthcare holidays and weekends), are subject to availability and generally will not exceed 10 days. This training program has a term of twelve (12) months commencing on Acceptance, where all onsite training must be scheduled and completed within twelve (12) months of Acceptance and all Virtual Inclusions also expire at the end of such twelve (12) month period. Additional onsite days may be available for purchase separately.

All GEHC “Training” terms and conditions apply. Given the unique nature of this program, if this program is purchased as part of a purchase under a Governing Agreement, including any Master Purchase Agreement, Group Purchasing Organization Agreement, or Strategic Alliance Agreement, this program shall take precedence over any conflicting training deliverables set forth therein.

Line	Qty.	Catalog	
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18 1.00 R23053AC Standard Service License

GE Healthcare has reclassified its service tools, diagnostics and documentation into various classes (please refer to the Service Licensing Notification statement at the beginning of this Quotation). The Standard License provides access to service tools used to perform basic level service on the Equipment and is included at no charge for the warranty period.

Line	Qty.	Catalog	
19	1.00	E80141JA	MEDRAD Stellant FLEX CT Pedestal with Certegra Workstation NO Informatics - includes installation and one year warranty

- Dual injector head on pedestal with integral IV pole
- Syringe heat maintainer
- Certegra Workstation with USB drive
- DualFlow software
- ISI-ready software to accept ISI900G integrated injector option†
- Base control unit
- 22.8 m (75 ft) head extension cable
- 7.6m (25 ft) base to display cable
- Power cord
- Product information package
- Operations manuals
- Installation, customer's operational training at time of installation, and one year full on-site warranty in Bayer service countries

Injection Specifications Flow Rate (range & increments):

0.1–10 mL/sec in 0.1 mL Increments

Volume (range & increments):

1 mL to Syringe Capacity in 1 mL Increments

Programmable Pressure Limit (psi/kPa):

150 mL and 200 mL Syringe: Choice of 50/345, 100/689, 150/1034, 200/1379, 225/1551, 250/1724, 300/2068, 325/2241

Scan Reminders:

0–300 Seconds (5 minutes) in 1 Second Increments

Pause:

1–900 Seconds (15 minutes) in 1 Second Increments

Hold

Maximum HOLD Time is 20 Minutes

Syringes (Volume capacity)

150 mL or 200 mL Sterile Disposable Syringe

Maximum Number of Phases: 6

Total Quote Subtotal: \$410,109.20

Qty.	Credits and Adjustments	
1.00	Brightspeed Select (16) Trade-in	\$-25,000.00

Total Quote Net Selling Price: \$385,109.20

If applicable, for more information on this devices' operating system, please visit GE Healthcare's product security portal at: <https://securityupdate.gehealthcare.com/en/products>

Optional Items

Please initial the Catalogs you wish to purchase

Catalog Number	Qty.	Description	Net Price	Initial
B7880CE	1.00	64 Channel Detector Upgrade	\$89,600.00	_____

The 64 channel detector upgrade will provide 0.625 mm acquisition for the full 40 mm of detector coverage. This upgrade has the potential to help you reduce acquisition times and shorten patient breath-holds, and, when coupled with our cardiac acquisition options it enables 5 Beat™ cardiac.

Catalog Number	Qty.	Description	Net Price	Initial
B7880CM	1.00	ASiR-V Option	\$112,000.00	_____

ASiR-V is the newest technology in GE's family of industry leading iterative reconstruction techniques. ASiR-V allows healthcare providers to lower dose by up to 82% as compared to standard filtered back-projection (FBP) reconstruction at the same image quality1

ASiR-V may provide the following.

- ASiR-V reduces dose by up to 82% relative to FBP at the same image quality1
- ASiR-V improves low contrast detectability by 59% to 135% at the same dose+
- ASiR-V reduces image noise up to 91% at the same dose+
- ASiR-V improves spatial resolution up to 2X (107%) at same image noise+
- ASiR-V image reconstruction has the capability to reduce low signal artifact such as streak artifact compared to FBP+

Image quality as defined by low contrast detectability.

In clinical practice, the use of ASiR-V may reduce CT patient dose depending on the clinical task, patient size, anatomical location, and clinical practice. A consultation with a radiologist and a physicist should be made to determine the appropriate dose to obtain diagnostic image quality for the clinical task. Low Contrast Detectability (LCD), Image Noise, Spatial Resolution and Artifact were assessed using reference factory protocols comparing ASiR-V and FBP. The LCD measured in 0.625 mm slices and tested for both head and body modes using the MITA CT IQ Phantom (CCT183, The Phantom Laboratory), using model observer method.

Catalog Number	Qty.	Description	Net Price	Initial
S7881AN	1.00	SnapShot Imaging Package	\$28,000.00	_____

The Snapshot Imaging Package allows the user to acquire gated cardiac scans utilizing up to 0.35 second rotation speed for excellent cardiac exams. This package contains the following items necessary for CT Coronary Angiography on these systems.

- S7881AN Includes:
- B7881AG - Cardiac PKG for Maxima
 - B7850PL - SmartScore Pro OC
 - B7864KC - ECG Trace
 - B7864KD - Cardiac Enhance
 - B7660CJ - ECG Wave

B7710LS - Card IQ Snapshot
 B7880CK - 0.35sec rotation speed
 B79971JH - SmartScore 4.0
 B79821RE - CardIQ Xpress Reveal 2.0

The features associated with the Snapshot package are:

- Edge preserving cardiac filters which allows the user to reduce dose up to 30% with the 3 levels of filtration available
- ECG trace on the gantry and console allowing the user to display the live trace of the patients heart rate and display the actual location of the window of time when the image is being acquired.

Snapshot Imaging package can be used to acquire helical retrospective ECG Gated CT Images of the coronary arteries, cardiac anatomy and various other applications that require temporal resolution to reduce heart motion effects. The Snapshot imaging package includes the following hardware and software necessary to acquire cardiac studies with CT.

Snapshot imaging software for the operator console is designed to produce optimized cardiac images with minimum cardiac motion effects. Three different imaging acquisition techniques are available to the user

- Snapshot segment - single sector with temporal resolution of 175ms
- Snapshot Burst - dual sector with temporal resolution of 87ms
- Snapshot Burst Plus - 4 sector with temporal resolution of 43ms

Xtream 12" Gantry and Operator Console ECG Trace: The ECG trace provided by the Ivy monitor will be displayed on the CT gantry and operator's console with this option. Allowing the user to display the live trace of the patient's heart rate and display the actual location of the window of time when the images are being acquired. It will provide easy access to patient cardiac output status and assist in providing visual feedback for optimum acquisition start.

R-Peak Editor: The R-Peak Editor allows user to retrospectively modify trigger points identifying R-peaks on ECG trace as displayed on the console. The capability may improve successful cardiac acquisition rate by enabling users to perform the modification in the cases where there is irregular heartbeat or suboptimal triggers.

Cardiac Enhancement Filters are noise reduction filters, providing three new levels of image filtration while preserving of edge image detail coupled with patient dose reduction of up to 30%.

ECG Dose Modulation ECG gated dose modulation reduces patient dose by modulating x-ray technique during acquisition based on heart phase.

Calcium scoring acquisition and post processing software is included in this package.

The IVY Cardiac Monitor Kit does not come with this package and will need to be quoted separately.

Catalog Number	Qty.	Description	Net Price	Initial
B7864AC	1.00	VolumeShuttle for CT systems	\$33,600.00	_____

Volume Shuttle is a repetitive axial scan mode where the table shuttles back and

forth between two consecutive imaging locations (X-ray is off during table movement). Each location covers 40 mm in the Z-direction for a total of 80 mm of Z- coverage. The shuttle action repeats over a defined duration to enable evaluation of tissue changes over time.

Catalog Number	Qty.	Description	Net Price	Initial
B75402DA	1.00	Auto Positioning kit	\$34,589.20	_____

Auto Positioning is a solution that provides a stream lined workflow and delivers an outstanding customer experience. With a current traditional scanner, an operation for patient positioning requires some manual settings such as scan range determination, centering or landmark setting, and challenges are time-consuming and variation by operators. On the other hands, Auto positioning activates automatic table elevation motion to the centering height, and cradle motion to the scout start position, with one single click on the touchscreen. Moreover, it safeguards the positioning motion by checking possible collision of the patient body with the CT gantry. The AI technology realizes the auto scout scan range, anatomical reference detecting and centering by specifying the position and shape in three dimensions. This GE' unique technology provides better patient throughput, ease of use, consistent image quality, standardization, and less error.

Catalog Number	Qty.	Description	Net Price	Initial
B77121BK	1.00	VesselIQ Xpress & AutoBone Xpress	\$30,800.00	_____

VesselIQ Xpress provides an optimized non-invasive application to analyze vascular anatomy and pathology and aid in determining treatment plans from a set of CTA images.

There are new features introduced in the VolumeShare 7 release including:

Auto Abdominal Aorta Vessel tracking which is a completely automated protocol with autobone removal, auto vessel tracking and automatic labeling of the abdominal aorta vasculature.

Fast Tracking which provides automatic real time feedback for auto-detected centerlines to speed up vessel tracking.

New editing tools that allow for flexibility in editing based on the size of the vessel being edited.

This software supports the physician in:

Assessment of aneurysms with or without thrombus (false lumen) for size and volume measurements with the capability to track the size and volume over time, stenosis analysis, pre/post stent and surgical planning and directional vessel tortuosity visualization.

Automatic tools for the segmentation of bony structures in the brain and neck and other vascular areas for accurate identification of the vessels, single or double click vessel analysis.

Sizing the vessel, analyzing calcified and which is a completely automated protocol non-calcified plaque to determine the densities of plaque within a vessel, measure areas of abnormalities within a vessel (like stenosis, plaque, thrombus, dissection or leakage).

Semi-automated detection and segmentation of thrombus for subsequent measurements within the application.

Dedicated anatomy based protocols for improved workflow.

Compare a patient's previous exam to their current exam in order to measure and

track any changes over time of their vascular structures.
 After review of the exams, there are multiple ways to film, archive and capture information for future review.

System Requirements:
 AW VolumeShare 7 or AW Server 3.2 or VM Volume Viewer on console

Note: All software is Non-Transferable to other hardware and are Non-Returnable.

Catalog Number	Qty.	Description	Net Price	Initial
E8007RT	1.00	Ivy 7800 Cardiac Monitoring Kit	\$15,800.00	

The Model 7800 is Ivy Biomedical's fifth generation of cardiac trigger monitors intended primarily for use on patients in applications requiring precision R-wave synchronization. Incorporating a simple, easy-to-use touchscreen interface, the 7800 displays two simultaneous ECG vectors along with the patient's heart rate. The Trigger ECG vector (top waveform) can be selected from Leads I, II, III, or Auto Lead Select. The Second ECG vector (bottom waveform) can be selected from Leads I, II, III. If required, High and Low heart rate alarm limits can be adjusted to bracket the patient's heart rate so that a violation of these limits produces an audible and visual indication of the alarm.

- Impedance Measurement: Measures Impedance between the patient's skin and each individual ECG electrode
- Automatic operation: After patient cables are connected and the monitor is receiving an ECG signal, the monitor finds the peak of the R-wave and generates synchronization pulses
- Bright TFT active matrix 8.4 in. color touch screen LCD with a wide viewing angle and large heart rate characters enhance visibility of patient data
- Polarity lock helps reduce the number of false triggers when tall T waves or deep S waves occur
- Color trigger mark indicates timing of each trigger pulse with respect to the ECG
- System interlock function indicates proper connection with the imaging device
- Integrated USB Drive - allows user to store and retrieve ECG events for retrospective analysis
- Auto-notch selects the correct ECG notch filter. This reduces interference on the ECG signal

The Kit includes:

Cardiac Trigger Monitor; set of 4 RT lead wires - 30 in, low noise patient cable - lead, Ethernet Internet cables, ECG adult electrode (box of 40), cord-set hospital grade (12ft), NuPrep Gel, USB Memory Stick, Recorder Paper, Roll Stand for 7000 series and IPC cable.

Catalog Number	Qty.	Description	Net Price	Initial
E8004ME	1.00	Dual Shot Alpha 7 NCOM (Class 4) CT Injector - Ceiling Mount for Short Post (58 cm), for USA and Canada, no starter kit, including installation, operational training, 2 years warranty. Does not include the preventive maintenances.	\$32,716.80	

The Nemoto DUAL SHOT alpha7 injector with integrated NCOM option rounds out the GE Accessories family of products for your complete CT suite. The Nemoto DUAL SHOT alpha7 injector helps optimize contrast procedures and contrast usage as well as streamline clinical workflow. With its innovative design and intuitive operation, facilities, patients and clinicians alike benefit from

this exceptional injection system.

Innovation

- New design with only two components
- Body Weight protocol for optimized image quality in IV contrast management
- Advanced protocols with dilution (simultaneous saline and contrast), multi-phases, and saline flush
- Innovative syringe design provides the option of off-line filling of syringes
- SD memory card for protocol for quick and easy software updates
- Dual control of injection pressure to secure injection continuity

Ease of Use

- Intuitive anatomical protocol selection complements the GE CT scanner protocol setup
- Minimal button presses required to create protocols
- Real-time injection pressure graph
- Indicator of selected protocol name
- Thumbnail style display for visual protocol settings
- Easy syringe loading and unloading, one touch syringe adapter with snap lock
- Automatic Quick Purge button on head side
- Air Check button on console and head
- Adjustable quick return for easy syringe refill
- Timing bolus injection
- Needle placement test
- Home button for quick return to main menu
- Injection results screen of the last 100 injections, in a table or pressure graph format
- Low pressure warning
- Adjustable maximum pressure per protocol

DUAL SHOT alpha7 NCOM Class4 Injector with Integrated CT Communication

Designed to save time and increase CT scan throughput

Nemoto DUAL SHOT alpha7 CT injector is validated for use with GE's Enhanced Xtream Injector option on selected scanners - enabling CAN Class 4 functionality for seamless communication. The resulting injector and CT scanner integration benefits include:

- Reduced overall programming time
- Improved scanner and injector protocol matching through programming of the injector from the scanner console
- Better control over contrast injection procedure with a synchronized CT scan start time. A single button-press on the scanner starts both the injector and scanner
- Preview injection parameters before beginning the scan
- Complete post-study reviews of injection results at the scanner console
- Automatic documentation of the injection results in PACS

System Specifications

- Flow Rate Range
A-side and B-side (Contrast Media and saline): 0.1 ml/s – 10 ml/s (0.1 ml/s increments)
- Volume Range
A-side and B-side: 1 ml to syringe size (by 1 ml increment) 200 ml and 100 ml (with syringe adapter) disposable syringes
- Pressure Range
200 ml syringe: 10 – 300 psi (by 10 psi increment)
100 ml syringe: 10 – 300 psi (by 10 psi increment)
- Pressure Limit: 300 psi
- Forward/Reverse jog button: 3 speeds up to 8 ml/sec
- Phases: up to 5 phases
- Protocol Memory Capacity: up to 400 injection protocols
- Injection Delay Time: 0 – 300 sec (by 1 sec increment)
- Pause: 0 – 300 sec (by 1 sec increment)



September 23, 2022
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- Hold: Indefinite HOLD time
- Quick Return
- Air Check button on head and selectable on console
- Built-in Syringe Heater: 35°C +/-5°C
- Electrical Requirements: 100 - 240 VAC, 50/60 Hz
- Power Consumption: 160 VA max
- Dual Injector Head: 600 × 112 × 180 mm / 8.5 kg

Catalog Number	Qty.	Description	Net Price	Initial
E8004NG	1.00	Nemoto Mounting Plate for Ceiling Mount Injectors	\$520.00	_____

SPECIFICATIONS

- 40 x 70 cm (16 x 28 in.)
- Use with E8004NA, E8004NH, E8004NJ, E8004LA E8004LB, E8004LC

Ceiling Mounted Injectors

Trade-in Addendum to GE Healthcare Quotation

This Trade-In Addendum ("Addendum"), effective on September 23, 2022, between the GE Healthcare business identified on the Quotation and **Tallahatchie General Hospital** ("Customer"), is made a part of Quotation # **2007878169.10** ^ dated September 23, 2022 ("Quotation") and modifies it as follows:

A. Customer: (i) certifies that it has full legal title to the equipment and/or mobile vehicle ("mobile vehicles" are defined as any systems requiring a vehicle title) listed in Section E ("Trade-In Equipment"), free and clear of all liens and encumbrances; (ii) conveys title and, if applicable, registration and license documents to GE Healthcare effective on the date of removal or receipt of the Trade-In Equipment (mobile vehicles will not be removed from Customer site until GE Healthcare has received a clean title signed over to GE Healthcare); and (iii) affirms that the Trade-In Equipment has never been used on or to provide care to animals. If GE Healthcare removes the Trade-In Equipment, it will do so at its expense at a mutually agreed time. Trade-In Equipment shall be removed no later than thirty days following installation of Customer's new system, unless explicitly otherwise agreed to by the parties in writing.

Mobile vehicles must include the VIN# on this trade-in addendum: VIN# [insert Vin #]. Mobile vehicles must have a valid DOT sticker and be road worthy at the time GE Healthcare is to take possession of them in order for GE Healthcare to accept a mobile vehicle on trade-in. Any and all logos or hospital affiliation stickers must be removed (outside and inside) by Customer and Customer shall clean the mobile vehicle of all debris and medical supplies prior to removal of the mobile vehicle by GE Healthcare.

B. Customer is responsible for: (i) providing timely, unrestricted access to the Trade-In Equipment in a manner that affords GE Healthcare, or third-party purchaser of the Equipment through GE Healthcare, the ability to complete Equipment inspection and testing, and the ability to complete an operating system back-up prior to de-installation within the timeframe required by GE Healthcare or said third-party purchaser, failure of which to provide may result in termination of this Trade-in Addendum and related credits and/or payments; (ii) ensuring that the Trade-In Equipment and the site where it is located are clean and free of bodily fluids; (iii) informing GE Healthcare of site-related safety risks; (iv) properly managing, transporting and disposing of hazardous materials located on site in accordance with applicable legal requirements; (v) rigging, construction, demolition or facility reconditioning expenses, unless expressly stated otherwise in the Quotation; and (vi) risk of loss and damage to the Trade-In Equipment until safety risks are remediated and the Trade-In Equipment is removed or returned.

C. Prior to removal or return to GE Healthcare, Customer must: (i) remove all Protected Health Information as such term is defined in 45 C.F.R. § 160.103 ("PHI") from the Trade-In Equipment; and (ii) indemnify GE Healthcare for any loss resulting from PHI not removed. GE Healthcare has no obligation in connection with PHI not properly removed.

D. GE Healthcare may in its sole discretion reduce the trade-in amount or decline to purchase the Trade-In Equipment and adjust the total purchase price of the Quotation accordingly if: (i) the terms of this Addendum are not met; (ii) Customer fails to provide access to the Trade-In Equipment as required herein; or (iii) the Trade-In Equipment is missing components or is inoperable and/or non-functioning when removed or returned – Customer is required to confirm for GE Healthcare the operability of the Trade-In Equipment prior to the deinstallation of the Equipment. All other terms and conditions of the Quotation remain in full force and effect.

E. Trade-In Equipment:

Trade-In Equipment Mfr.	<u>Model & Description</u>	<u>Quantity</u>	System ID*	Trade-In Amount (\$)
	Brightspeed Select (16) Trade-in	1.00	662647BSCT	\$-25,000.00

This Addendum is executed when: (i) signed by the parties below; (ii) Customer receives this Addendum and signs the Quotation that references the Trade-In Equipment; or (iii) Customer receives this Addendum and issues a purchase order identifying either the terms of the Quotation (which includes a reference to the Trade-In Equipment) or the Governing Agreement identified on the Quotation as governing the order (PO# _____)†.

Tallahatchie General Hospital

GE Healthcare

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

^ A Quotation number must be provided on this document.

* In the event the Trade-In Equipment does not have a System ID, please record the serial number of each component that

comprises the Trade-In Equipment.

† If you are relying upon the purchase order to reflect acceptance of the terms contained herein, please update this document with the applicable PO number upon receipt of the PO. Failure to do so may result in delays surrounding deinstallation of the System(s).



September 23, 2022
Quote Number: 2007878169.10
Customer ID: 1-23JC9J
Agreement Expiration Date: 09/30/2022

GPO Agreement Reference Information

Customer:	Tallahatchie General Hospital
Contract Number:	Novation Vizient Supply LLC
Billing Terms:	80% on Delivery / 20% on Acceptance
Payment Terms:	45 Net
Shipping Terms	FOB DESTINATION

Offer subject to the Terms and Conditions of the applicable Group Purchasing Agreements currently in effect between GE Healthcare and Novation Vizient Supply LLC

If applicable, for more information on this devices' operating system, please visit GE Healthcare's product security portal at:
<https://securityupdate.gehealthcare.com/en/products>

This product offering is made per the terms and conditions of Vizient /GE Healthcare GPO Agreements as follows:

Imaging:

XR0882-MR, XR0702-Card./Vasc., XR0673-CT, XR0342-Mammo, XR0895-PET-CT, XR0362-Nuc Med, XR0715-R&F/RAD & XR0592-ICAR-EP/HEMO, XR0692-BMD

Ultrasound:

XR0431-Ultrasound

LCS:

CE2512 (Anesthesia), CE3033 (Monitoring), CE3333 (Infant Care), CE7621 (DCAR) and CE0351 (EP).

Vizient: Please login to the Vizient Marketplace Website. If you require assistance or are experiencing issues, please contact Vizient for support: Email: Connect@VizientInc.com and Phone: 866-600-0618.

Jim Blackwood

From: Jim Blackwood
Sent: Thursday, September 29, 2022 2:02 PM
To: Joey Brunson; Drew Weissinger
Subject: Fwd: CT Quote
Attachments: image001.jpg; IPA ImageFirst Hartford eq quote 244k.pdf

FYI

Begin forwarded message:

From: Dave Stuart <dstuart@kingsbridgeholdings.com>
Date: September 29, 2022 at 1:33:04 PM CDT
To: Jim Blackwood <jblackwood@mytgh.com>
Cc: Drew Weissinger <dweissinger@mytgh.com>, Joey Brunson <jbrunson@mytgh.com>
Subject: RE: CT Quote

Jim,

Since we already have a Masterlease in place, this transaction would only be an additional schedule added onto the MLA i.e. minimal documentation to sign. I'll still need your financial statements so I can pound on my credit folks as we discuss this transaction. I also need to know when the CT is being delivered, thus it will help me internally also. Take a look below and let me know your thoughts:

Equipment: GE CT Revolution Maxima ES Scanner per the GE quote attached
Eq. Cost: \$385,109.20
Term/Rate: 60 months at \$6,371.00 per month
End of Term: TGH has the option to 1) extend the lease at a mutually agreeable term/rate, or 2) purchase the CT at an agreeable rate based on the Fair Market Value at the time, or 3) return the equipment to Kingsbridge
\$1.00 Option: If the hospital wishes to own the scanner for \$1 at the end of the initial 60 month term, please use a monthly payment of \$7,494.00.

Thanks again for working with me on this exciting project and I look forward to getting it completed.

David L. Stuart
National Accounts Manager
dstuart@kingsbridgeholdings.com
www.kingsbridgeholdings.com
PH: 407.619.2250

From: Jim Blackwood <jblackwood@mytgh.com>
Sent: Tuesday, September 27, 2022 2:56 PM
To: Dave Stuart <dstuart@kingsbridgeholdings.com>
Cc: Drew Weissinger <dweissinger@mytgh.com>; Joey Brunson <jbrunson@mytgh.com>
Subject: CT Quote

[External Email]

Hey Dave. At long last, I finally have all the necessary info for Kingsbridge to submit a quote on the new CT scanner. Attached is the quote from GE. We would like to explore our options with Kingsbridge to finance this equipment over 60 months with both a \$1 buyout and a fair market value buyout option. Also, we would like to include an annual service contract in the financing agreement. The service contract is \$56,075 per year.

I've attached the relevant quotes in case I have omitted anything. Thank you for agreeing to work this up for us.

Best,

Jim

D. James (Jim) Blackwood, Jr.
Administrator
Tallahatchie General Hospital
201 South Market Street
P.O. Box 230
Charleston, MS 38921
(T) 662-647-5535
(F) 662-647-3300

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September 23, 2022

Tallahatchie General Hospital
201 S Market St
Charleston, MS 38921-2236

GE Healthcare Financial Services, a component of GE HFS, LLC ("GEHFS"), is pleased to submit the following proposal:

Contract Description:	Capital lease of equipment, with a \$1 Purchase Option.
Proposed Lessor:	GE HFS, LLC, or one or more of its affiliates and/or assigns.
Proposed Lessee:	Tallahatchie General Hospital
Equipment Description:	(1) GE Revolution Maxima CT
Equipment Cost:	\$410,109.20 <i>(Total Quote Net Selling Price of \$385,109.20 + Trade-in of \$25,000.00)</i>
Term and Rental Payment Amount:	60 payments at \$8,086.34, monthly in arrears, plus applicable taxes.
Lease Rate on Net Equipment Cost:	6.82% Note: The lease rate and rental payment amounts have been calculated based on the Swap Rate (as defined below) and an assumption that, at the time of funding, the Swap Rate will be 3.86%. GEHFS reserves the right to adjust the lease rate and rental payment amounts if this is not the case, and/or if the lease commences after December 31, 2022, and/or for other changes in market conditions as determined by GEHFS in its sole discretion. As used herein, "Swap Rate" means the interest rate for swaps that most closely approximates the initial term of the lease as published by the Intercontinental Exchange (NYSE: ICE) in its Ice Benchmark Administration Report entitled "ICE Swap Rate Historical Rates" currently available online at https://www.theice.com/marketdata/reports/180 and determined by GEHFS by clicking on the USD Rates 1100 in the Series/Run drop down box for the Report Date selected by GEHFS, or as published by such other nationally recognized reporting source or publication as GEHFS may specify.
End of Lease Options:	At end of Lease, upon Proposed Lessee's satisfaction in full of all obligations to GEHFS under the Lease, Proposed Lessee shall, at its option, either purchase all (but not less than all) of the Equipment for \$1.00, plus applicable taxes, renew the lease or return the Equipment to GEHFS.
Advance Rent:	No advance rent due with signed contract. In no event shall any advance rent or advance charge or any other rent payments be refunded to Proposed Lessee. The Advance Rent will be applied as described in the lease.
Documentation Fee:	A documentation fee of \$250.00 will be charged to Proposed Lessee to cover document preparation, document transmittal, credit write-ups, lien searches and lien filing fees. The documentation fee is due upon Proposed Lessee's acceptance of this proposal and is non-refundable. This fee is based on execution of our standard documents substantially in the form submitted by us. In the event significant revisions are made to our documents at your request or at the request of your legal counsel or your landlord or mortgagee or their counsel, the documentation fee will be adjusted accordingly to cover our additional costs and expenses.
Interim Rent:	If the lease commencement date is not the 1 st or 15 th of any calendar month (a "Payment Date"), interim rent may be assessed for the period between the lease commencement date and the Payment Date.
Required Credit Information:	<ol style="list-style-type: none"> 1. Two years fiscal year end audited/unaudited financial statements and comparative interim statements; or tax returns and business plan. 2. Such additional information as may be required.
Proposal Expiration:	This proposal and all of its terms shall expire on October 23, 2022 if GEHFS has not received Proposed Lessee's signed acceptance hereof by such date. Subject to the preceding sentence, this proposal and all of its terms shall expire on November 23, 2022 if the lease has not commenced by such date.

The summary of proposed terms and conditions set forth in this proposal is not intended to be all-inclusive. Any terms and conditions that are not specifically addressed herein would be subject to future negotiations. Moreover, by signing the proposal, the parties acknowledge that, except for the provisions concerning confidentiality set forth herein: (i) this proposal is not a binding commitment on the part of any person to Quasi 080125

provide or arrange for financing on the terms and conditions set forth herein or otherwise; (ii) any such commitment on the part of GEHFS would be in a separate written instrument signed by GEHFS following satisfactory completion of GEHFS' due diligence, internal review and approval process (which approvals have not yet been sought or obtained); (iii) this proposal supersedes any and all discussions and understandings, written or oral between or among GEHFS and any other person as to the subject matter hereof; and (iv) GEHFS may, at any level of its approval process, decline any further consideration of the proposed financing and terminate its credit review process. Proposed Lessee hereby acknowledges and agrees that GEHFS reserves the right to syndicate (via a referral, an assignment or a participation) all or a portion of the proposed leasing/financing transaction to one or more banks, leasing or finance companies or financial institutions (a "Financing Party"). In the event GEHFS elects to so syndicate all or a portion of the proposed leasing/financing transaction (whether before or after any credit approval of the proposed leasing/financing transaction by GEHFS) and is unable to affect such syndication on terms satisfactory to Proposed Lessee and/or GEHFS, GEHFS may, in its discretion, decline to enter into, and/or decline any further consideration of, the proposed financing. Proposed Lessee hereby further acknowledges and agrees that, in connection with any such syndication, GEHFS may make available to one or more Financing Parties any and all information provided by or on behalf of Proposed Lessee to GEHFS (including, without limitation, any third party credit report(s) provided to or obtained by GEHFS).

Except as required by law, neither this proposal nor its contents will be disclosed publicly or privately except to those individuals who are your officers, employees or advisors who have a need to know as a result of being involved in the proposed leasing/financing transaction and then only on the condition that such matters may not be further disclosed. Nothing herein is to be construed as constituting tax, accounting or legal advice by GEHFS to any person.

To the extent permitted by applicable law, you hereby authorize GEHFS to file in any jurisdiction as GEHFS deems necessary any initial Uniform Commercial Code financing statements that identify the Equipment or any other assets subject to the proposed financing described herein. If for any reason the proposed leasing/financing transaction is not approved, upon your satisfaction in full of all obligations to GEHFS, GEHFS will cause the termination of such financing statements. You acknowledge and agree that the execution of this proposal and the filing by GEHFS of such financing statements in no way obligates GEHFS to provide the financing described herein. By signing below, you hereby consent to and authorize GEHFS to perform all background, credit, judgment, lien and other checks and searches as GEHFS deems appropriate in its sole credit judgment.

We look forward to your early review and response. If there are any questions, we would appreciate the opportunity to discuss this proposal in more detail at your earliest convenience. Please do not hesitate to contact me directly at (404) 697-7319.

Sincerely yours,

Mike Ambrose
GE Healthcare
Healthcare Financial Services,
a component of GE HFS, LLC

Acknowledged and Accepted:

(Legal Name)

By: _____

Title: _____

Date: _____

Fed. ID #: _____

REPORTS AND COMMENTS
FOR UPCOMING BOARD MEETING
SCHEDULED FOR NOVEMBER 22, 2022