

The Procurement Division of Knox County, Tennessee will receive sealed proposals for the provision of **Toxicology Services** as specified herein. Proposals must be received by **2:00 p.m. on December 9, 2019**. Late proposals will neither be considered nor returned.

Deliver Proposals To:

**Proposal Number 2914
Knox County Procurement Division
Suite 100
1000 North Central Street
Knoxville, Tennessee 37917**

The Proposal Envelope must show the Proposal Number, Proposal Name & Proposal Closing Date.

SECTION I PROPOSAL PREPARATION AND SUBMISSION

- 1.1 ADDITIONAL INFORMATION:** Knox County wants requests for additional information routed to Heather Whitehead, CPPB, at 865.215.5751. Questions may be faxed to 865.215.5778 or emailed to heather.whitehead@knoxcounty.org. Information about the Knox County Procurement Division and current solicitations may be obtained on the Internet at www.knoxcounty.org/procurement.
- 1.2 ACCEPTANCE:** Vendors shall hold their price firm and subject to acceptance by Knox County for a period of ninety (90) business days from the date of the proposal closing, unless otherwise indicated in their proposal.
- 1.3 ALTERNATIVE PROPOSALS:** Knox County will not accept alternate proposals (those not equal to specifications) unless authorized by the Request for Proposals.
- 1.4 AUDIT HOTLINE:** Knox County has established an Audit Hotline to report potential fraud and waste. To report potential fraud, waste or abuse, please call 1.866.858.4443 (toll-free). You can also file a report online by accessing <http://www.knoxcounty.org/hotline/index.php>.
- Vendors are hereby cautioned that this Audit Hotline does not replace the Award Protest Procedures found in Section VI, Item M of the Knox County Procurement Regulations.**
- 1.5 AWARD:** Award will be made to the most responsive, responsible proposer(s) meeting specifications and presenting the product(s) and/or service(s) that is in the best interest of Knox County. Knox County reserves the right to award this proposal on an all-or-none basis, schedule basis or by multiple award. Knox County reserves the right to not award this proposal. Award will be made in accordance with the evaluation criteria specified herein.
- 1.6 BUSINESS OUTREACH PROGRAM:** Knox County has established a Business Outreach Program which has the responsibility of increasing opportunity for small, minority and women owned businesses. This is being accomplished through community education programs, policy edification, active recruitment of interested businesses and process re-engineering.

Knox County is committed to ensuring full and equitable participation for all disadvantaged businesses. Knox County welcomes submittals from those disadvantaged businesses that have an interest in providing goods and/or services listed herein. In addition, Knox County strongly encourages the inclusion of disadvantaged businesses by non-disadvantaged Contractors who wish to partner or subcontract portions of this agreement in order to accomplish the successful delivery of goods and/or services. If you are a disadvantaged business and would like additional information about our Business Outreach Program, please contact:

Diane Woods, Business Outreach Administrator
Knox County Procurement
Telephone: 865.215.5760
Fax: 865.215.5778
Email: diane.woods@knoxcounty.org

- 1.7 **CONFLICT OF INTEREST:** Vendors must have read and comply with the “Non-Conflict of Interest” statement provided in the vendor registration process prior to the closing of this solicitation. Knox County’s Non-Conflict of Interest Policy is available for review at https://www.knoxcounty.org/purchasing/conflict_policy.php.
- 1.8 **COOPERATIVE PURCHASING:** Proposers must indicate whether or not it is permissible for other governments in Tennessee to purchase these items or services at the same price. Indicate any additional delivery charges or minimum orders for purchases by other entities as applicable.
- 1.9 **COPIES:** Knox County requires that proposals be submitted as one (1) marked as original and four (4) exact copies. **Proposers must submit with their written response an exact electronic version of their proposal in a single file on a CD-ROM or flash drive format.**
- 1.10 **DECLARATIVE STATEMENTS:** Any statement or words (e.g.: must, shall, will) are declarative statements and the vendor must comply with the condition. Failure to comply with any such condition may result in the proposal being considered non-responsive and disqualified.
- 1.11 **ELECTRONIC TRANSMISSION OF PROPOSALS:** Knox County’s Procurement Division will not accept electronically transmitted proposals. Facsimile and email submission is strictly prohibited. Due to the nature of the information requested, all submissions shall be in written format.
- 1.12 **HOW TO DO BUSINESS:** Knox County utilizes a web-based Procurement software system, “Knox Procurement On-Line.” The system provides our clients (vendors, county departments and the citizens of Knox County) with a more enhanced and end-user friendly means of accessing our services. The system allows for on-line vendor registration and maintenance, electronic receipt of Purchase Orders, on-line retrieval and submittal of quotes for our vendor-clients and on-line requisitioning and receiving for our county departments.
- In order for the County to maximize its investment and minimize the cost associated with office operations we need your help. When doing business with Knox County we are urging you to please go to our website at www.knoxcounty.org/procurement, register as a vendor in our on-line procurement system, “Knox Procurement On-Line,” if you have not done so and whenever possible to conduct your business with the County through this site. If you have any questions please contact the Procurement Division Representative listed in Section 1.1 of this document.
- 1.13 **INCURRED COSTS:** Knox County will not be responsible for any costs incurred by the proposer in the preparation of their proposal.
- 1.14 **MULTIPLE PROPOSALS:** Knox County will consider multiple proposals that meet specifications.
- 1.15 **NON-COLLUSION:** Proposers, by submitting a signed proposal, certify that the accompanying proposal is not the result of, or affected by, any unlawful act of collusion with any other person or company engaged in the same line of business or commerce, or any other fraudulent act punishable under Tennessee or United States law.
- 1.16 **PAYMENT METHOD:** Knox County utilizes two (2) methods of placing order for products and/or services. The first is the use of Purchase Orders. These Purchase Orders will be issued from the Knox County Procurement Division via the method selected by the vendor during registration. The Purchase Order will detail the quantity, specific item(s) and the contracted price for each item.
- The second method is the use of the Knox County Credit Card (VISA). Orders placed with the card will list the same information as the Purchase Order. Vendors will be given the card information and approval to process the transaction by the requesting department. Vendors must indicate in their proposal response if the vendor will accept Knox County’s Credit Card (VISA) as a form of payment. Proposers are prohibited to charge Knox County any type of merchant fee from their financial institution to accept this type of payment.
- 1.17 **POSSESSION OF WEAPONS:** All vendors, their employees and their agents are prohibited from possessing any weapons on Knox County property without prior written consent from the County. In the case of a vendor whose Contract requires possession of firearms or other weapons to successfully complete their Contract, vendor must provide personnel who are bonded to bear said weaponry.
- 1.18 **PROCESSING TIME FOR PAYMENT:** Vendors are advised that a minimum of thirty (30) days is required to process invoices for payment.

- 1.19 PROOF OF FINANCIAL AND BUSINESS CAPABILITY:** Vendors must, upon request, furnish satisfactory evidence of their ability to furnish products or services in accordance with the terms and conditions of these specifications. Knox County will make the final determination as to the vendor's ability.
- 1.20 PROPOSAL DELIVERY:** Knox County requires proposers, when hand delivering proposals, to time and date stamp the envelope before depositing it in the bid box. Knox County will not be responsible for any lost or misdirected mail sent by common carrier, nor will Knox County be responsible for proposals delivered to addresses other than the delivery address specified at the top of this solicitation. The time clock in the Procurement Division shall serve as the official record of time.
- Solicitations must be in a sealed envelope/box prior to entering the Procurement Division office. Procurement Division personnel are not allowed to see the submittal nor assist in placing documents in an envelope/box.**
- Additionally, the Procurement Division is not responsible for providing materials (e.g. envelopes, boxes, tape) for submittals.**
- 1.21 RECYCLING:** Knox County, in its continuing efforts to lessen the amount of landfill waste and to further recycling efforts, requests that proposals being submitted on paper shall:
- Be submitted on recycled paper;
 - Not include pages of unnecessary advertising;
 - Be made on both sides of each sheet of paper.
- 1.22 RESTRICTIVE OR AMBIGUOUS SPECIFICATIONS:** It is the responsibility of the prospective proposer to review the entire Request for Proposals (RFP) packet and to notify the Procurement Division if the specifications are formulated in a manner that would unnecessarily restrict competition. Any such protest or question regarding the specifications or proposing procedures must be received in the Procurement Division by **4:30 p.m. local time on November 25, 2019**. These requirements also apply to specifications that are ambiguous.
- 1.23 SIGNING OF PROPOSALS:** In order to be considered, all proposals must be signed. Please sign the original in blue ink. By signing the proposal document, the vendor acknowledges and accepts the terms and conditions stated in the proposal document.
- 1.24 TAXES:** Knox County purchases are not subject to taxation. Tax exemption certificates will be provided upon request.
- 1.25 TITLE VI OF THE 1964 CIVIL RIGHTS ACT AND TITLE IX OF THE EDUCATIONAL AMENDMENT OF 1972:** "Nondiscrimination in Federally Assisted Programs"—"No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." 42 U.S.C. Section 2000. It is the policy of Knox County Government that all its services and activities be administered in conformance with the requirements of Title VI and Title IX.
- 1.26 USE OF PROPOSAL FORMS:** Vendors must complete the proposal forms contained in the proposal package. Failure to complete the proposal forms may result in proposal rejection.
- 1.27 VENDOR DEFAULT:** Knox County reserves the right, in case of vendor default, to procure the articles or services from other sources and hold the defaulting vendor responsible for any excess costs occasioned thereby. Should vendor default be due to a failure to perform or because of a request for a price increase, Knox County reserves the right to remove the vendor from the County's bidder's list for twenty-four (24) months.
- 1.28 VENDOR REGISTRATION:** Prior to the closing of this proposal, **ALL PROPOSERS** must be registered with the Procurement Division. Please register on-line at our website at www.knoxcounty.org/procurement and click on "Online Vendor Registration." Vendors must be registered with the Procurement Division *prior* to submitting their proposal. Knox County shall not be responsible for technical difficulties experienced by vendors trying to register electronically less than twenty-four (24) hours prior to the proposal closing time.
- 1.29 WAIVING OF INFORMALITIES:** Knox County reserves the right to waive minor informalities or technicalities when it is in the best interest of Knox County.

SECTION II OBLIGATIONS, RIGHTS AND REMEDIES

These terms and conditions shall be part of the Contract. Knox County reserves the right to negotiate other terms and conditions it deems appropriate and necessary under the circumstances to protect the public's trust.

- 2.1 ALTERATIONS OR AMENDMENTS:** No alterations, amendments, changes, modifications or additions to this Contract shall be binding on Knox County without the prior written approval of the County.
- 2.2 APPROPRIATION:** In the event no funds are appropriated by Knox County for the goods or services in any fiscal year, or insufficient funds exist to purchase the goods or services, then the Contract shall expire upon the expenditure of previously appropriated funds or the end of the current fiscal year, whichever occurs first, with no further obligations owed to or by either party.
- 2.3 ASSIGNMENT:** Contractor shall not assign or sub-contract this agreement, its obligations or rights hereunder to any party, company, partnership, incorporation or person without the prior written specific consent of Knox County.
- 2.4 BOOKS AND RECORDS:** Vendor shall maintain all books, documents, accounting records and other evidence pertaining to the goods and services provided under this Contract and make such materials available at its offices at all reasonable times during the Contract period and for three (3) years from the date of the final payment under this agreement for inspection by County or by any other governmental entity or agency participating in the funding of this agreement, or any authorized agents thereof; copies of said records to be furnished if requested. Such records shall not include those books, documents and accounting records that represent the Vendor's costs of manufacturing, acquiring or delivering the products and services governed by this agreement.
- 2.5 CHILD LABOR:** Contractor agrees that no products or services will be provided or performed under this Contract that have been manufactured or assembled by child labor.
- 2.6 COMPLIANCE WITH ALL LAWS:** Contractor is assumed to be familiar with and agrees to observe and comply with all Federal, State, and Local laws, statutes, ordinances, and regulations in any manner affecting the provision of goods and/or services, and all instructions and prohibitive orders issued regarding this work and shall obtain all necessary permits.
- 2.7 DEFAULT:** If Contractor fails to perform or comply with any provision of this Contract or the terms or conditions of any documents referenced and made a part hereof, Knox County may terminate this Contract, in whole or in part, and may consider such failure or noncompliance a breach of Contract. Knox County expressly retains all its rights and remedies provided by law in case of such breach, and no action by Knox County shall constitute a waiver of any such rights or remedies. In the event of termination for default, Knox County reserves the right to purchase its requirements elsewhere, with or without competitive solicitation.
- 2.8 GOVERNING LAW:** The laws of the State of Tennessee shall govern this Contract, and all obligations of the parties are performable in Knox County, Tennessee. The Chancery Court and/or the Circuit Court of Knox County, Tennessee, shall have exclusive and concurrent jurisdiction of any dispute which arises hereunder.
- 2.9 INCORPORATION:** All specifications, drawings, technical information, Request for Proposals, Proposal, Award and similar items referred to or attached or which are the basis for this Contract are deemed incorporated by reference as if set out fully herein.
- 2.10 INDEMNIFICATION—HOLD HARMLESS:** Contractor shall indemnify, defend, save and hold harmless Knox County, its officers, agents and employees from all suits, claims, actions or damages of any nature brought because of, arising out of, or due to breach of the agreement by Contractor, its subcontractors, suppliers, agents, or employees or due to any negligent act or occurrence or any omission or commission of Contractor, its subcontractors, suppliers, agents or employees.
- 2.11 INDEPENDENT CONTRACTOR:** Contractor shall acknowledge that it and its employees serve as independent contractors and that Knox County shall not be responsible for any payment, insurance or incurred liability.
- 2.12 INSPECTION AND ACCEPTANCE:** Warranty periods shall not commence until Knox County inspects and formally accepts the goods and/or services. The terms, conditions and timing of acceptance shall be determined by Knox County. Knox County reserves the right to reject any or all items or services not in conformance with applicable specifications, and Contractor assumes the costs associated with such nonconformance.

Acceptance of goods or services does not constitute a waiver of latent or hidden defects or defects not readily detectable by a reasonable person under the circumstances.

- 2.13 IRAN DIVESTMENT ACT:** By submission of this RFP response, each proposer and each person signing on behalf of any proposer certifies, and in the case of a joint response, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each proposer is not on the list created pursuant to Tennessee Code Annotated § 12-12-106.
- 2.14 LIMITATIONS OF LIABILITY:** In no event shall Knox County be liable for any indirect, incidental, consequential, special or exemplary damages or lost profits, even if Knox County has been advised of the possibility of such damages.
- 2.15 NON-DISCRIMINATION AND NON-CONFLICT STATEMENT:** Contractor agrees that no person on the grounds of handicap, age, race, color, religion, sex or national origin shall be excluded from participation in, or be denied benefits of, or be otherwise subjected to discrimination in the performance of this agreement or in the employment practices of vendor. Contractor shall upon request show proof of such non-discrimination and shall post in conspicuous places available to all employees and applicants notices of non-discrimination. Contractor covenants that it complies with the Fair Wage and Hour Laws, the National Labor Relations Act, and other Federal and State employment laws as applicable. Contractor covenants that it does not engage in any illegal employment practices.
- Contractor covenants that it has no public or private interest and shall not acquire directly or indirectly any interest that would conflict in any manner with the provision of its goods or performance of its services. Contractor warrants that no part of the total Contract amount provided herein shall be paid directly or indirectly to any officer or employee of Knox County as wages, compensation, or gifts in exchange for acting as officer, agent, employee, subcontractor or consultant to Contractor in connection with any goods provided or work contemplated or performed relative to the agreement.
- 2.16 ORDER OF PRECEDENCE:** In the event of inconsistent or conflicting provision of this Contract and referenced documents, the following descending order of precedence shall prevail: (1) Contract, (2) Request for Proposals, (3) Contractor's Response, (4) Award, (5) Special Terms and Conditions, (6) General Terms and Conditions, (7) Specifications, (8) Drawings.
- 2.17 REMEDIES:** Knox County shall have all rights and remedies afforded under the U.C.C. and Tennessee law in Contract and in tort, including but not limited to, rejection of goods, rescission, and right of set-off, refund, incidental, consequential and compensatory damages and reasonable attorney's fees.
- 2.18 RIGHT TO INSPECT:** Knox County reserves the right to make periodic inspections of the manner and means the service is performed or the goods are supplied and warehoused.
- 2.19 SEVERABILITY:** If any provision of this Contract is declared illegal, void or unenforceable, the remaining provisions shall not be affected but shall remain in force and in effect.
- 2.20 TAX COMPLIANCE:** Pursuant to Resolution R-07-1-903 passed by the Commission of Knox County, Tennessee, Contractor hereby acknowledges, by submission of its proposal or proposal and signature, it is current in its respective Federal, State, County, and City taxes of whatever kind or nature, and is not delinquent in any way. Delinquent status must be disclosed or risk debarment by the Knox County Procurement Division.
- 2.21 TERMINATION:** County may terminate this agreement with or without cause at anytime. In the event of termination by either party, fees due for services satisfactorily performed or goods accepted prior to the termination date shall be paid.

SECTION III SPECIAL TERMS AND CONDITIONS

- 3.1 INTENT:** The intent of this document is to set forth and convey to prospective proposers the general type, character and quality of Toxicology Services as desired by Knox County and the Knox County Regional Forensic Center. Award will be based on Best Value. Best Value means more than low cost. It includes the items listed in the evaluation criteria as well as: initial cost, customer service, and other factors detailed herein. It includes service quality, references provided and other factors detailed herein.

- 3.2 ACCEPTANCE:** Vendors are advised that the payment of an invoice does not necessarily constitute as an acceptance of services that are provided. Acceptance requires a specific written action by Knox County so stating.
- 3.3 ADDITIONS OR DELETIONS:** Knox County reserves the right to add services as the need arises or to delete services that have become obsolete in demand. If services are to be added, Knox County and the Contractor will arrive at a mutually agreed price. Any additions or deletions must be approved in writing by Knox County Procurement prior to any changes in service.
- 3.4 AGENCY CONTACTS:** The Contractor will be given a list of key personnel directly associated with the services to be performed for contact information. Only the Knox County Procurement Division will have the authority to make changes during the term of this agreement and in compliance with any resulting Contract.
- 3.5 AWARD LENGTH:** The length of this Contract will be three (3) years with the option to renew upon mutual consent of both parties. The term agreement may be renewed for an additional six (6) years, three (3) years at a time, for a possible total of nine (9) years. Knox County reserves the right to purchase these products and/or services from other sources if the need arises. Knox County reserves the right to revoke the award if a pattern of unavailability arises with the vendor.
- 3.6 CHANGES AFTER AWARD:** It is possible that after award, Knox County might change its needs or requirements. Knox County reserves the right to make such changes after consultation with the vendor. Should additional costs arise, Knox County reserves the right to consider accepting these charges provided the vendor can document the increased costs. Knox County also reserves the right to accept proposed service changes from the vendor if they will lower the cost to Knox County and/or provide improved service.
- 3.7 COMMUNICATIONS:** The successful execution of this contract will require extensive communication between all involved parties. While information may be transmitted via telephone, it should always be followed up with a fax transmission or email. It is essential that the Contractor have an efficient and properly working fax machine as well as email capabilities. The Contractor will be required to submit a list of individuals, along with direct phone numbers, cell phone numbers, fax numbers and email addresses for the agency's contacts. These individuals must be familiar with the Knox County Contract and have authority to make adjustments as requested by Knox County.
- 3.8 COMPLIANCE WITH ALL APPLICABLE REGULATIONS:** Vendor agrees and covenants that the company, its agents and employees will comply with all City, County, State and Federal codes, laws, rules and regulations applicable to the business to be conducted under this contract. If the vendor performs any work knowing it to be contrary to such laws, ordinances, rules and regulations, the vendor shall bear all costs arising from such work.
- 3.9 CONTRACT EXECUTION:** The award of this proposal may result in a Contract between Knox County and the successful Vendor(s). The Contract may require Knox County Commission approval. The successful Vendor(s) may be required to be present at the County Commission meeting(s) to answer questions relating to the service to be performed. Adequate notification will be given by Knox County Procurement Division if the awarded vendor(s) will need to attend meetings. There shall be no cost to Knox County for attendance of the Vendor(s).
- Knox County will draft the Contract. The Knox County Procurement Division will not accept any vendor's contract. If Master Agreements, Service Agreements, Terms and Conditions or other contract agreements are submitted they will not be accepted.
- 3.10 CONTACT PERSONNEL:** Essential to the success of this Contract is the development of a good working relationship between the Vendor and Knox County. It is imperative that the Knox County account be handled efficiently and professionally. Knox County should be assigned no more than two (2) Vendor contacts to handle billing inquiries and service related issues.
- In the event one or both contacts leave the Knox County account, the Vendor shall formally introduce the new contacts to Knox County personnel. These contacts must be knowledgeable of the County's account to avoid an interruption of service.
- 3.11 CONTRACTOR DUTIES:** At the Contractor's own expense, the Contractor shall:
- 3.11.1** Provide competent supervision;
 - 3.11.2** Provide competent personnel;

3.11.3 Take precautions necessary to protect persons or property against injury or damage and be responsible for any such damage or injury that occurs as a result of their fault or negligence.

3.12 **EVALUATION CRITERIA:** This proposal will be evaluated using the following criteria:

- Experience & Qualifications 45 Points
 - Includes References
- Methodology 20 Points
- Support & Training 10 Points
- Cost of Services 25 Points

3.13 **EVALUATION REVIEW:** Knox County reserves the right to use all pertinent information that might affect the County's judgment as to the appropriateness of an award to the best evaluated Vendor(s). This information may be appended to the proposal evaluation process results. Information on a service provider from reliable sources, and not within the service provider's proposal, may also be noted and made part of the evaluation file. Knox County shall have sole responsibility for determining a reliable source. Knox County reserves the right to conduct written and/or oral discussions/interviews after the proposal closing. The purpose of such discussions/interviews is to provide clarification and/or additional information to make an award that is in the best interest of Knox County.

3.14 **EXCEPTIONS TO SPECIFICATIONS:** Vendors taking exception to any part or section of these specifications shall indicate such exceptions on their submittal. A failure to indicate any exception(s) shall be interpreted as the Vendor's intent to fully comply with the specifications as written. Conditional or qualified offers are subject to rejection in whole or in part. Any exceptions shall be included in Tab X of the submittal. Do not strike through or in any other way alter the RFP. Exceptions listed within other sections of the submittal shall not be reviewed or considered.

3.15 **GRATUITIES AND KICKBACKS:** It shall be a breach of ethical standards for any person or company to offer, give, or agree to give any employee or former employee, or for any employee or former employee to solicit, demand, accept, or agree to accept from another person, a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparation of any part of a program requirement or a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing or in any other advisory capacity in any proceeding or application, request for ruling, determination, claim, or controversy or other particular matter, pertaining to any program requirement of a contract or subcontract or to any solicitation or proposal therefore. It shall be a breach of ethical standards for any payment, gratuity or offer of employment to be made by or on behalf of a subcontractor under a contract to the prime contractor or higher tier subcontractor or a person associated therewith, as an inducement for the award of a subcontract or order. Breach of the provisions of this paragraph is, in addition to a breach of this Contract, a breach of ethical standards which may result in civil or criminal sanction and/or debarment or suspension from being a contractor or subcontractor under Knox County contracts.

3.16 **IDENTIFICATION:** Employees of the Contractor must have proper photo identification displayed at all times while on property belonging to Knox County.

3.17 **INCLEMENT WEATHER:** During periods of inclement weather in Knox County, the Procurement Division will enact the following procedures in regard to solicitations and weather delays.

- If the Mayor closes the Administrative offices prior to the time set for solicitation opening of any business day, all solicitations due that same day will be moved to the next operational business day.
- Other weather issues shall be at the sole discretion of the Procurement Director or their designee.
- Knox County shall not be liable for any commercial carrier's decision regarding deliveries during inclement weather.

3.18 **INSURANCE:** The successful Vendor(s) must carry the insurance as indicated on the Insurance Checklist Attachment hereto. As proof of the Vendor's willingness to obtain and maintain the insurance, the Vendor must complete, sign and have its insurance agent sign the attachment and submit it with the proposal. Upon the Notification of Intent to Award, the successful vendor will be required to submit a Certificate of Insurance (COI) including any corresponding endorsement page(s) with the specified coverage and listing Knox County as an additional insured. It shall be the successful vendor's responsibility to keep a current COI and endorsement page(s) on file with Knox County Procurement for as long as the contract is in effect.

- 3.19 INTERPRETATION:** No oral interpretation will be made to any bidder regarding the meaning of specifications or the Scope of Work. All questions are to be submitted in writing via email and will be answered in the form of an addendum to the solicitation by the Knox County Procurement Division, if applicable.
- 3.20 INVOICE DETAIL:** Knox County is requesting invoices to show the following detail to help expedite review and payment. The Contractor(s) may be required to modify invoicing procedures to show the detail. All potential Contractors are hereby cautioned that Knox County will only pay from original invoices and not facsimiles or copies. Invoices which do not adhere to these details may be returned to the Contractor for correction.
- The invoice must show the amount due to the Contractor by Knox County;
 - The invoice must show a summary of completed work;
 - Invoices are to be original and uniquely pre-numbered;
 - Invoices which do not show this information are subject to rejection.
- 3.21 INVOICING PROCEDURES:** Knox County requests that invoices be easy to read and understand. Invoices are to be submitted monthly and be original and uniquely pre-numbered. Each participating agency to this Contract may be required to use different invoicing information and procedures. This information and procedures shall be provided to the contractor(s) prior to Contract execution. There shall be no additional charge for this information and these procedures to be included.
- Each invoice shall include a summary of service(s) provided and shall list the associated unit price. Supporting documentation shall be included with invoices as applicable. Invoices without this information will be returned to the Contractor for correction.
- Invoices shall be sent to the billing address indicated on the Purchase Order. Each department or division of Knox County is responsible for its own budget. Departments cannot charge or pay bills for another department. Therefore, it is critical that the successful Contractor's invoices specify the correct department. Do not credit payments to another department's account. Invoices must be submitted in triplicate and must match the corresponding Purchase Order number. Bidders are hereby notified that invoices may take up to thirty (30) days to process payment. There shall be no component billing. Mail invoices for the Knox County Regional Forensic Center to:
- Knox County Regional Forensic Center
Attention: Business Office Manager
2761 Sullins Street
Knoxville, TN 37919
- 3.22 INVOICE REVIEW:** Knox County shall review all invoices for adherence to the terms and conditions of the Contract. Variations from the Contract and Contract pricing are strictly prohibited. Any variance found on the invoice will result in rejection of that invoice. Rejected invoices will be returned to the Contractor(s) for correction. Repeated variations may result in termination.
- 3.23 MINIMUM QUALIFICATION EXPECTATIONS:**
- 3.23.1** Respondent must address all submittal requirements as defined under Section IV.
- 3.23.2** Respondent must have the experience and capabilities to carry out the work contemplated and equipment and personnel available for the work.
- 3.23.3** If the respondent has a permanent office in Knox County, respondent must have a current business license issued by Knox County. This requirement also applies to any of the Respondent's proposed sub-contractors or sub-consultants with a permanent office in Knox County.
- 3.23.4** A Knox County business license is not required of any Respondent or proposed sub-contractor or sub-consultant who does not have a permanent office in Knox County. For more information, contact the Knox County Clerk's office at (865) 215-2392.
- 3.24 NEGOTIATION:** Knox County may select a successful proposer on the basis of initial offers received without discussions. Therefore, each proposal shall contain the proposer's best terms from a cost or price and service standpoint. Knox County reserves the right to enter into Contract negotiations, including, but not limited to, rates and term, with the highest-rated proposer.

If Knox County and the selected proposer cannot negotiate a successful agreement, Knox County may terminate said negotiations and begin negotiations with the next highest-rated proposer. Knox County retains the right to negotiate with multiple proposers simultaneously. This process will continue until an agreement has been reached or all proposers have been rejected. No proposer shall have any rights against Knox County arising from such negotiations.

- 3.25 NEWS RELEASES BY VENDORS:** As a matter of policy, Knox County does not endorse the services of a Contractor. A Contractor will not make news releases concerning any resultant contract from this solicitation without the prior written approval of Knox County.
- 3.26 NO CONTACT POLICY:** After the date and time that the vendor receives this solicitation, any contact initiated by any proposer with any Knox County representative, other than the Procurement Division representative listed herein, concerning this Request for Proposals, is strictly prohibited. Any such unauthorized contact may cause the disqualification of the proposer from this procurement transaction.
- 3.27 OFFER WITHDRAWAL:** No proposal can be withdrawn after it is filed unless the proposer makes a request in writing to the Knox County Procurement Division prior to the time set for the closing of proposals or unless the County fails to accept within ninety (90) Business Days after the date fixed for the closing the RFP.
- 3.28 PRICING:** The proposer(s) warrants that the unit price stated shall remain firm for a period of thirty-six (36) months from the first day of the Contract period. If the Contractor's price is increased after the first contract period, Knox County must be given a written notice to consider. Such a request shall include as a minimum, (1) the cause for the adjustment; (2) the amount of the change requested with documentation to support the requested adjustment. Price increases will only be considered at the renewal period(s). If the price increase is rejected the contractor may:
- Continue with the existing prices;
 - Request a lower price increase;
 - Not accept the renewal offer.
- If a price increase is approved by Knox County, the approval notification will be done in writing and the Contractor will be notified of the new price schedule and effective date of increase. This documentation will become part of the proposal file. No approvals will be authorized verbally.
- 3.29 PROPOSAL EVALUATION:** In evaluation of submitted proposals, Knox County reserves the right to use any or all of the ideas from the proposals submitted without limitation and to accept any part or the entire successful proposal in selecting an operation which is judged to be in the best interest of Knox County. All material submitted becomes property of Knox County.
- 3.30 PROPOSAL FORMAT:** This solicitation is in the Request for Proposals (RFP) format. As the specified date and time, each proposer's name will be publicly read aloud. No further information will be given at that time. Evaluation of the proposals will proceed as expeditiously as possible and successful, as well as unsuccessful, notification will be given.
- 3.31 PROPOSER INTERVIEWS:** Knox County reserves the right to request proposers to demonstrate their capabilities from those displaying a thorough knowledge of the intent of this RFP. The purpose of these interviews is to gain additional insight into the capabilities and feature of the proposed services and to ask questions regarding aspect of the same. If requested, interviews will take place at the Knox County Procurement Division facility. All costs associated with attending interviews will be at the Proposer's expense.
- 3.32 PROPOSER OBLIGATION:** Proposers shall become fully acquainted with conditions relating to the scope of the work detailed in this RFP. Failure to become acquainted with the existing conditions shall in no way absolve the proposer of any obligations with respect to this RFP or the Contract.
- 3.33 PUBLIC RECORDS ACT:** Knox County is subject to the Tennessee Open Records Act 10-7-503 et seq. Proposers are cautioned that all documents submitted on behalf of this Request for Proposals shall be open to the public for viewing and inspection.
- 3.34 QUANTITIES:** Knox County does not guarantee any quantity of services will be utilized under this solicitation. Services will be utilized on an as needed basis.

- 3.35 REFERENCES:** The vendor must provide three (3) references relating to work of a similar scope completed within the last five (5) years. Include the name of the agency or institution, point of contact with both a telephone number and email address, and the nature and size of the Contract. Do not list Knox County Government or the Knox County Regional Forensic Center as a reference. References shall be submitted on Attachment B of this RFP.
- 3.36 REJECTION OF PROPOSALS:** Knox County reserves the right to reject any and all proposals received as a result of this request and to waive any informality, technical defect or clerical error in any proposal, as the interests of Knox County may require. Non-acceptance of any proposal will be devoid of any criticism of the proposal and of any implication that the proposal is deficient in any manner. Non-acceptance of any proposal shall be construed as meaning simply that the County does not deem the proposal acceptable or that another proposal was deemed more advantageous to Knox County for the particular services proposed.
- 3.37 REMOVAL OF CONTRACTOR'S EMPLOYEES:** Contractor agrees to utilize only experienced, responsible and capable people in the performance of the work. Knox County may require that the Contractor remove from the job covered by this Contract, including employees who endanger persons or property or whose continued employment under this Contract is inconsistent with the interest of Knox County.
- 3.38 SUBMIT QUESTIONS:** Prospective proposers may submit questions concerning this solicitation until **November 25, 2019 at 4:30 p.m. local time**. Submit questions as noted in Section 1.1.
- 3.39 TENNESSEE REGISTRATION:** The successful proposer must meet any applicable State of Tennessee registration requirements.

SECTION IV SCOPE OF SERVICES

The successful vendor will provide professional toxicology services for the Knox County Regional Forensic Center (RFC). Service must provide timely, relevant, and cost-effective forensic toxicology testing using state-of-the-art technology to conduct standard and customized testing for medical examiners and staff of the Knox County Regional Forensic Center. The successful vendor must provide expert consultation on the most complex cases. Knox County desires a turn-key solution per requested service listed with the proposed cost. Proposers may submit pricing based on the requirements listed here.

- 4.1 EXPERIENCE & QUALIFICATIONS:** The successful proposer must demonstrate the experience and qualifications necessary to successfully meet the requirements of the Knox County Regional Forensic Center. Experience and qualifications must include, but are not limited to:
- Extensive experience providing postmortem toxicology services to facilities in the State of Tennessee. This experience must include, but is not limited to: Regional Forensic Centers, Medical Examiner's Offices, State Bureaus of Investigation and Local Law Enforcement.
 - A minimum of five (5) D-ABFT certified toxicologists with varying areas of expertise such as New Psychoactive Substances, Pediatric, Environmental, Exposure and Postmortem.
- 4.2 METHODOLOGY:** The successful proposer must demonstrate that their organization's methodology will support the service requirements detailed herein.
- 4.3 SUPPORT & TRAINING:** The successful proposer must demonstrate that the support and training offered by their organization will support the service requirements detailed herein.
- 4.4 CONTRACTOR REQUIREMENTS:** The successful proposer will be responsible for providing professional toxicology services and results as follows:

CERTIFICATIONS: The successful proposer will be required to be licensed in the state of Tennessee and be compliant with all applicable Federal and State laws. The successful proposer will currently have and submit the following certifications and must maintain them through the life of the contract. All certifications/licenses must be provided in Tab VIII.

- College of American Pathologists (CAP)
- Clinical Laboratory Improvement Amendments (CLIA)
- American Board of Forensic Toxicology (ABFT)
- ANAB ISO-17025

Note: Any sub-contracting must be done only with prior approval of the Knox County Regional Forensic Center. Any sub-contractors utilized by the successful proposer must meet these qualifications. Verification of sub-contractor's credentials must be submitted upon request. Results of sub-contracted tests must meet the turn-around time detailed herein.

HOURS OF OPERATION: The successful vendor **MUST** be available during the standard hours of 8 a.m. to 6 p.m. Eastern Standard Time and operate seven (7) days a week (on call 24/7).

REQUISITIONING: Provide Knox County Regional Forensic Center (RFC) an electronic requisition process for requesting services and electronic delivery of results into the RFC's electronic database.

This process must meet data elements and requirements for efficiency, safety, and chain of custody compliance requirements for sending and receiving toxicology data. When a backup is required, Contractor must provide the RFC with a requisition form requesting, but not limited to, the following information:

- Account Information
 - Full name
 - Mailing address of agency
- Chain of Custody Information: Provide paperwork to ensure that chain of custody is maintained. At minimum, signatures of the person by whom the specimens were obtained or sent to at the laboratory, the investigator, the pathologist, the autopsy technician and submitting official are required.
- Test Request Information
 - Type of test(s) that is requested
- Subject Information
 - Subject's first and last name
 - Date of death
 - Agency case number
 - Sex
 - Age
- Specimens Information
 - Type of specimen
 - Date and time specimens were collected
 - A barcode sticker is to be affixed to each specimen container
 - Pathologist's name
 - Initials of autopsy technician filling specimen tube
 - Volume provided
 - Brief case history

HIPAA/HITECH COMPLIANCE: Compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-91 (HIPAA) and the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (the HITECH Act), as applicable.

SUPPLY KITS/SAMPLE COLLECTION: Provide supply kits that include all containers necessary for routine specimen collection. In addition to specimen containers, the kits contain all materials necessary for shipping and paperwork to ensure that a proper chain of custody is maintained. The contents of the supply kits, at a minimum, are outlined below:

Container(s):	Preservative:	Matrix:	Volume needed:
2 grey top glass tubes	Contains preservative	Blood	10 mL each
1 red top bottle	Contains preservative	Blood/Gastric	20 mL/10-20 grams
1 poly container	With or without preservative	Blood/Gastric	20 mL/10-20 grams
1 tube	With or without preservative	Urine/Bile	20 mL/20-30 mL
1 tube	With or without preservative	Vitreous Fluid	1 mL each
1 standard box seal			
1 biohazard bag (standard size)			
Shipping label for each case			

SAMPLE ANALYSIS: Provide the following methods necessary for sample analysis, in house. Screen by UPLC-TOF mass spectrometers and confirm all positives by a method listed below:

- ELISA (Automated) Dynex Technologies DSX
- Gas Chromatograph/Mass Spectrometers
- HPLC - UV
- HPLC – Fluorescence
- UPLC/MS/MS (Waters TQD's)
- UPLC/MS/MS (Waters Premier)
- UPLC-TOF mass spectrometers (Waters TOF)

The awarded contractor will be required to maintain current testing and accreditation standards for the most accurate results possible.

In situations with very low and limited volume, such as certain hospital admission blood samples and infant samples, the awarded Contractor must have additional reliable testing capabilities based on micro-consumption methodology.

Regarding specimens deemed low quality or low quantity, the Knox County Regional Forensic Center defines an acceptable level of low quality/inadequate/unsuitable cases as one percent (1%) or less. Cases in which testing is incomplete due to low quality specimens in excess of one percent (1%) may result in contract termination. In the event a sample is insufficient in quality or quantity, the Proposer must inform the RFC within five (5) calendar days of the insufficiency.

SPECIMEN PICKUP: Provide specimen pickup service through an overnight contract courier service. Pickup service must be included in the laboratory test fee at no additional charge to the Knox County Regional Forensic Center.

SPECIMEN HANDLING PROCEDURE/SECURITY: Provide strict security measures to guarantee the integrity of each sample. Each specimen must be bar coded to ensure traceability, and internal and external chains of custody are maintained for all samples. Lab access must be limited to authorized personnel.

Provide “Legal Chain-of-Custody” procedures that comply with State and Federal legislation and case law.

- Specimens must be received into the laboratory with documentation of the following:
 - Date, time, and manner of delivery
 - “Received By” information
 - Condition of package/container (intact and sealed, damaged, etc.)
- Following receipt, the specimens must be individually accessioned with documentation of the following:
 - Date and time of accessioning
 - Name of person administering the accession
 - Identification of each specimen and matching with client identification of specimen
 - Assignment of accession number (unique to the case and specimen)
- Following accessioning, the specimens are maintained in refrigerated temporary storage until final testing is completed. Following completion of testing, vendor must preserve specimens tested for two (2) years in homicide cases and one (1) year for other cases, or as requested by the Knox County Regional Forensic Center. If requested, specimens will be returned to the Knox County Regional Forensic Center at no charge. All specimens must be maintained in refrigerated temporary storage until final testing is completed. Samples will be stored appropriately to ensure against loss, contamination, or deleterious change. Files concerning the results of specimen analysis will be retained by the Laboratory for a minimum of seven (7) years from the date of issue.

RESULTS/REPORTING: The successful vendor will provide all case results within fourteen (14) calendar days of receipt of the specimen for ninety-five percent (95%) of all cases. This process includes accessioning, screening, confirmatory testing (if needed) and forensic review. Requests for retesting or additional testing will not be counted within the turnaround time of the initial request. Note that all standard turnaround result time on alcohol cases will be no more than five (5) calendar days. Reports must contain, at a minimum, the following information:

- Agency name, address and case number
- Name of subject
- Chain of custody information
- Case number

- Date specimens received and date of report
- Identification of all case specimens
- Identification of testing performed (test code and test name)
- Quantitative/Qualitative test results for all case specimens
- Reference ranges (therapeutic), if available, for all test results
- Signature of certifying toxicologist

Preliminary reporting must be available for most urgent cases and inquiries. Reports are to be sent via the RFC's preferred delivery method, which is the Regional Forensic Center's electronic case management system (MDILog). Alternatively, the RFC may request results to be sent via email, fax, or secure web portal. Vendor's secured web portal must be user friendly and allow clients to easily view reports through secure login. Reports must be uploaded in a manner that allows for searches by individual analyte.

In cases in which the successful vendor is unable to meet the fourteen (14) calendar day results return requirement, the vendor must notify the RFC via email that the testing results will be late. Late case results in excess of five percent (5%) of all cases may result in contract termination.

SUPPORT/TRAINING: The successful proposer must:

- Communication:
 - Provide a response within sixty (60) minutes of request delivered via telephone, fax or email. All open tickets are to be closed within one (1) calendar day.
 - Provide a Business Development Manager/Project, Client Service Manager and Toxicologists who work cross functionally with the extended team to ensure that the Regional Forensic Center receives consistent quality and results needed. A toxicologist must be on-call 24/7 to answer specific case related questions for the Forensic Pathologists of the Knox County Regional Forensic Center.
 - The Knox County Regional Forensic Center prefers for routine communication to be conducted primarily via email. In instances where a phone call is necessitated, the phone call must be followed up with an email summarizing the conversation/resolution.
- Litigation:
 - Be located within one (1) day travel time to Knox County for quick support for cases that may require litigation.
 - Offer a Litigation Specialist that can assist in the needs concerning testimony (e.g. subpoenas, litigation packages, and scheduling testimony), by phone available to answer questions from 8 a.m. EST to 6 p.m. EST upon request of the Knox County Regional Forensic Center. Phone number must be toll-free.
 - Provide testimony via telephone, video conference, or in person if required by the court.
- Training: As needed or at the request of Knox County, Proposers must provide training related to types of toxicology tests, proper techniques for drawing/shipping specimens, and other topics related to toxicology testing services.
 - Proposers must have toxicologists and staff capable of creating and executing such education and training efforts.
 - The platform for delivery may be on-site at the Knox County Regional Forensic Center, via remote webinar or with the distribution of educational materials. Please note that where practicable, the preference would be for information regarding special procedures/processes, new or changing tests, etc. to be dispersed via informational pamphlets to minimize interference with the activities of the Knox County Regional Forensic Center.
 - Trainings must be provided at no additional cost to Knox County. Materials needed to facilitate the trainings must be included at no additional cost to Knox County.

SECTION V PROPOSAL FORMAT

Proposers are to use the following format for the preparation and submission of their proposals. Failure to follow this format may be just cause for rejection of proposals. Cost of preparation of proposals is the sole responsibility of the proposer.

PROPOSERS MUST HAVE THEIR BINDERS IN THE EXACT FORMAT LISTED BELOW.

TAB I PROPOSER INFORMATION

Company Name, Address, and Telephone/Fax numbers
Primary Contact Person's Name, Email Address and Telephone Number(s)
Proposers Vendor Number as assigned by Knox County
Tennessee Secretary of State Control Number
State of Tennessee Certificate of Authority (if entity is located outside of Tennessee)
Employer Identification Number (EIN)
Will you allow Cooperative Purchasing as detailed in Section 1.8?
Will you accept Electronic Commerce Cards as payments as detailed in Section 1.16?

TAB II SIGNED LETTER AUTHORIZING SUBMISSION OF THE PROPOSAL

Letter must be signed by the principal of the company. Please sign the original in blue ink.

TAB III ACKNOWLEDGEMENT OF ADDENDUM(S)

Proposers are to acknowledge receipt of any addendum(s) for this proposal.

TAB IV EXPERIENCE & QUALIFICATIONS

- Please provide a thorough background and description of the firm, including the number and location of facilities, along with hours of operation. Identify the number of years that the firm has been in business.
- Describe the experience of the firm in reference to three (3) similar contracts.
- Detail the firm's experience providing postmortem toxicology services to facilities in the State of Tennessee.
- For each of the following individuals, provide the following information: (a) title; (b) a complete description of the type of work the individual will perform and (c) a resume that includes a listing of current certifications/licenses held by that person and area(s) of expertise.
 - Litigation Specialist(s)
 - Each D-ABFT Certified Toxicologist

TAB V METHODOLOGY

- Describe the in-house sample analysis capabilities of your organization. List all available equipment/methods. Describe your organization's micro-consumption methodology.
- Describe your organization's security procedures regarding sample integrity and lab access.
- Provide the documented Specimen Handling Standard Operational. This must include all three (3) phases of the laboratory testing process: pre-analytical, analytical, and post-analytical. Explain how "Legal Chain-of-Custody" procedures comply with State/Federal legislation and case law.
- Detail how the Specimen Handling/Specimen Return Procedures align with the requirements outlined in Section IV.
- Describe the organization's sub-contracting practices and clearly identify send-out tests, if applicable.
- Provide your organization's current level of "unsuitable" samples and samples with incomplete testing due to "interference."

TAB VI SUPPORT

- Describe how the Business Development Manager/Project, Client Service Manager and Toxicologists will work cross functionally with the extended team to ensure that the Regional Forensic Center receives consistent quality and results.
- Provide a comprehensive overview of the administrative project team, identifying each person who will work to service an awarded contract. Include the following information about each person listed: (a) title; (b) a complete description of the type of work the individual will perform and (c) a resume that includes a listing of current certifications/licenses held by that person. Include, at a minimum, the following roles:

- Project Manager
 - Business Development Manager
 - Client Services Manager
- Describe how litigation consultation requests are handled by your organization. Please detail the consultation services offered by your organization, clearly noting any specific parameters associated with the consultation services. Describe how litigation consultation requests are handled by your organization.
 - Describe how the training offered will support the best possible testing outcomes. Provide an overview of training topics offered by your organization. Describe the training practice that will be utilized, including the platform(s) that may be employed. Provide an overview of how often routine trainings will likely be scheduled and how a request for training made by Knox County will be fulfilled.

TAB VII

PROPOSED COST

Provide the proposed cost for the service as described in Section IV (Scope of Services) using the attached Pricing Worksheet (Exhibit I). Proposed costs should be inclusive of all expenses, including transportation, shipping and ancillary out-of-pocket charges. There will be no reimbursement for any such charges. Provide cost in the following format:

- Schedule 1: Bundled Tests/Procedures:
Pricing must be provided for bundled tests. Clearly note any tests which are not included.
- Schedule 2: Per Test/Procedure
Itemized pricing must be provided per test/procedure.

As an extension to the toxicology services provided by the awarded Contractor(s), the RFC is requesting that consultation services be included at no additional cost. Travel costs must not exceed applicable per diem rates. If there are any additional charges for such service, please clearly note those charges. If applicable, identify if such charges would be hourly, daily, or billed as an event rate. Proposers must note any specific parameters associated with the consultation.

Knox County reserves the right to ascertain whether or not the bid prices submitted are realistic and within the competitive range for these products and this type of service. Knox County may also use three (3) pre-determined sample projects that are typical of the services that will be required of this Contract in order to evaluate pricing submitted.

NOTE: This tab shall only be included in the original document and the exact electronic version. This tab is to be submitted under separate cover from the other parts of the vendor's proposal. This tab will be reviewed after the other sections of the vendor's proposal have been reviewed and scored.

TAB VIII

CERTIFICATIONS/LICENSES

Provide copies of all Licenses required to perform the work specified in Section IV.

TAB IX

OTHER INFORMATION

Proposers may include any other information deemed pertinent to this solicitation.

TAB X

EXCEPTIONS

Please note any and all exceptions taken to any part this Request for Proposals. If none are taken, please clearly state so. Do not mark through or otherwise alter the language of this RFP in your response.

TAB XI

ATTACHMENTS

Pricing Worksheet (Exhibit I)
 Proposer Questionnaire (Attachment A)
 References (Attachment B)
 Insurance Checklist (Attachment C)
 Iran Divestment Act (Attachment D)
 Knox County Business Tax License for Organization (if applicable)
 Provide a sample toxicology report

Note: Failure to include requested information may result in the proposer being disqualified

**ATTACHMENT A
KNOX COUNTY PROCUREMENT DIVISION
PROPOSER QUESTIONNAIRE
REQUEST FOR PROPOSALS NUMBER 2914**

1. Does your organization meet the Hours of Operation requirement detailed in Section IV? ___ Yes ___ No

2. Does your organization meet the "in-house equipment" requirement detailed in Section IV? ___ Yes ___ No

List in-house equipment:

3. Will your organization meet the results reporting requirements detailed in Section IV? ___ Yes ___ No

4. Does the standard retention of your organization align with the requirements defined in Section IV? ___ Yes ___ No

5. Upon request, will your organization return specimens to the RFC free of charge? ___ Yes ___ No

6. Identify the requisition process utilized by your organization. Describe in detail how this process meets data elements and requirements for efficiency, safety and chain of custody compliance.

7. Identify the format in which reports will be delivered.

8. Describe your organization's web portal.

9. Describe the digital search feature of your organization's reporting system.

Please attach additional pages if necessary to fully address the questions above.

**ATTACHMENT B
KNOX COUNTY PROCUREMENT DIVISION
REFERENCES
REQUEST FOR PROPOSALS NUMBER 2914**

Vendor: _____

Proposers shall submit a list of three (3) projects of similar size which have been in service for at least one year. Each vendor is responsible for obtaining approval to submit and confirming the contact information provided for each reference. Knox County will not be responsible for gathering additional information for references that are incomplete or incorrect. References checks will be sent via email only. Reference Forms that cannot be delivered with the contact information listed, not returned prior to the deadline listed on the form, or not returned at all will be scored accordingly. Do not use the Regional Forensic Center or Knox County Government as a reference.

Name of Firm: _____
Contact Person: _____ Phone Number: _____
Email Address: _____
Nature of Contract: _____
Services Provided: _____
Dollar amount: \$ _____ (over life of contract)
Contract start date: _____ Contract end date: _____

Name of Firm: _____
Contact Person: _____ Phone Number: _____
Email Address: _____
Nature of Contract: _____
Services Provided: _____
Dollar amount: \$ _____ (over life of contract)
Contract start date: _____ Contract end date: _____

Name of Firm: _____
Contact Person: _____ Phone Number: _____
Email Address: _____
Nature of Contract: _____
Services Provided: _____
Dollar amount: \$ _____ (over life of contract)
Contract start date: _____ Contract end date: _____

ATTACHMENT C
KNOX COUNTY PROCUREMENT DIVISION
INSURANCE CHECKLIST
REQUEST FOR PROPOSALS NUMBER 2914

THE CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGES & ENDORSEMENTS WITH "YES" AND ITEMS 20 TO 24.

REQUIRED:	NUMBER	TYPE OF COVERAGE						COVERAGE LIMITS			
YES	1.	WORKERS COMPENSATION						STATUTORY LIMITS OF TENNESSEE			
YES	2.	EMPLOYERS LIABILITY						\$100,000 PER ACCIDENT \$100,000 PER DISEASE \$500,000 DISEASE POLICY LIMIT			
YES	3.	AUTOMOBILE LIABILITY <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">X</div> <div style="border: 1px solid black; padding: 2px;">ANY AUTO-SYMBOL (1)</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-left: 5px;"></div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>						COMBINE SINGLE LIMIT (Per-Accident)		\$1,000,000	
								BODY INJURY (Per-Person)			
								BODY INJURY (Per-Accident)			
								PROPERTY DAMAGE (Per-Accident)			
YES	4.	COMMERCIAL GENERAL LIABILITY						LIMITS			
		CLAIM MADE				X	OCC	EACH OCCURRENCE	\$ 1,000,000		
								FIRE LEGAL LIABILITY	\$ 100,000		
								MED EXP (Per person)	\$ 5,000		
		GEN'L AGGREGATE LIMITS APPLIES PER						PERSONAL & ADV INJURY		\$ 1,000,000	
		POLICY	X	PROJECT		LO		GENERAL AGGREGATE	\$ 2,000,000		
								PRODUCTS-COMPLETED OPERATIONS/AG GREGATE	\$ 2,000,000		
NO	5.	PREMISES/OPERATIONS						\$1,000,000 CSL BI/PD EACH OCCURRENCE \$2,000,000 ANNUAL AGGREGATE			
YES	6.	INDEPENDENT CONTRACTOR						\$1,000,000 CSL BI/PD EACH OCCURRENCE \$1,000,000 ANNUAL AGGREGATE			
NO	7.	CONTRACTUAL LIABILITY (MUST BE SHOWN ON CERTIFICATE)						\$1,000,000 CSL BI/PD EACH OCCURRENCE \$1,000,000 ANNUAL AGGREGATE			
NO	8.	XCU COVERAGE						NOT TO BE EXCLUDED			
YES	9.	UMBRELLA LIABILITY COVERAGE						\$1,000,000			
NO		PROFESSIONAL LIABILITY									
NO	10.	ARCHITECTS & ENGINEERS						\$1,000,000 PER OCCURRENCE/CLAIM			
NO		ASBESTOS & REMOVAL LIABILITY						\$2,000,000 PER OCCURRENCE/CLAIM			
YES		MEDICAL MALPRACTICE						\$1,000,000 PER OCCURRENCE/CLAIM			
YES		MEDICAL PROFESSIONAL LIABILITY						\$1,000,000 PER OCCURRENCE/CLAIM			
YES	11.	MISCELLANEOUS E & O						\$500,000 PER OCCURRENCE/CLAIM			
NO	12.	MOTOR CARRIER ACT ENDORSEMENT						\$1,000,000 BI/PD EACH OCCURRENCE UNINSURED MOTORIST (MCS-90)			
NO	13.	MOTOR CARGO INSURANCE									
NO	14.	GARAGE LIABILITY						\$1,000,000 BODILY INJURY, PROPERTY DAMAGE PER OCCURRENCE			
NO	15.	GARAGEKEEPER'S LIABILITY						\$500,000 COMPREHENSIVE \$500,000 COLLISION			
NO	16.	INLAND MARINE BAILEE'S INSURANCE						\$			
NO	17.	DISHONESTY BOND						\$			
NO	18.	BUILDERS RISK						PROVIDE COVERAGE IN THE FULL AMOUNT OF THE CONTRACT UNLESS PROVIDED BY OWNER.			
NO	19.	USL&H						FEDERAL STATUTORY LIMITS			

20. Carrier rating shall be Best's Rating of A-VII or better or its equivalent.

21. Notice of cancellation, non-renewable or material changes in coverage shall be provided to County at least 30 days prior to action. The words "Endeavor To" and "But Failure To" (to end of sentence) are to be eliminated from the notice of cancellation provision on standard accord certificates.

22. The County shall be named as an additional insured on all policies except Workers' Compensation and Auto. Endorsement Page(s) shall be submitted with each COI for the duration of the Contract term.

23. Certificate of Insurance shall show the RFP number and title.

24. Other insurance required _____.

Insurance Agent's Statement and certification: I have reviewed the above requirements with the Proposer named below and have advised the Proposer of required coverage.

Agency Name: _____ Authorizing Signature: _____

Proposer's Statement and Certification: If awarded the Contract, I will comply with the Contract insurance requirements.

Proposer's Name: _____ Authorizing Signature: _____

**ATTACHMENT D
KNOX COUNTY PROCUREMENT DIVISION
IRAN DIVESTMENT ACT
REQUEST FOR PROPOSALS NUMBER 2914**

By submission of a response to RFP #2914, each proposer and each person signing on behalf of any proposer certifies, and in the case of a joint response each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each proposer is not on the list created pursuant to Tennessee Code Annotated § 12-12-106.

Authorizing Signature: _____
(sign in blue ink)

Title: _____ Date: _____

**EXHIBIT I
KNOX COUNTY PROCUREMENT DIVISION
PRICING WORKSHEET
REQUEST FOR PROPOSALS NUMBER 2914**

Vendor: _____

Postmortem, Basic, Blood (Forensic)- Bundled			
Test Description	Method(s)	Specimen Requirements	Minimum Volume
Postmortem, Basic, Blood (Forensic)			
Alcohols and Acetone Confirmation, Blood (Forensic)			
Amphetamines Confirmation, Blood (Forensic)			
Barbiturates Confirmation, Blood (Forensic)			
Benzodiazepines Confirmation, Blood (Forensic)			
Buprenorphine and Metabolite - Free (Unconjugated) Confirmation, Blood (Forensic)			
Cannabinoids Confirmation, Blood (Forensic)			
Cocaine and Metabolites Confirmation, Blood (Forensic)			
Ethanol Re-Check - Post Mortem, Blood			
Fentanyl and Metabolite Confirmation, Blood (Forensic)			
Methadone and Metabolite Confirmation, Blood (Forensic)			
Opiates - Free (Unconjugated) Confirmation, Blood (Forensic)			
Phencyclidine Confirmation, Blood (Forensic)			
TOTAL FOR POSTMORTEM BASIC BLOOD PANEL		\$	

Vendor: _____

Designer Opioid Panel (Qualitative)				
Test Description	Synonyms	Method(s)	Specimen Requirements	Minimum Volume
2-Furanylfentanyl	Fu-F; Furanylfentanyl			
4-ANPP	Despropionyl fentanyl			
Acryl Fentanyl	Acryloylfentanyl			
Butyrylfentanyl	Butyrfentanyl			
Carfentanil	Carfentanyl; Wildnil®			
Cis-3-Methylfentanyl				
Cyclopropylfentanyl				
Isobutyrylfentanyl	Isobutyrfentanyl			
Meta-Methylmethoxyacetylfentanyl	3-Methylmethoxyacetylfentanyl			
Methoxyacetylfentanyl				
Ortho-Fluorofentanyl	2-Fluorofentanyl			
Para-Fluorobutyrylfentanyl	4F-butyryl fentanyl			
Para-Fluorofentanyl	4-Fluorofentanyl			
Para-Fluoroisobutyrylfentanyl	4F-Isobutyrylfentanyl; FIBF			
Para-Methylmethoxyacetylfentanyl	4-Methylmethoxyacetylfentanyl			
THF-F	Tetrahydrofuran fentanyl			
Trans-3-Methylfentanyl				
U-47700	U-4			
U-49900				
U-51754				
Valeryl Fentanyl	Pentylfentanyl			
TOTAL FOR DESIGNER OPIOID PANEL (URINE)			\$	
TOTAL FOR DESIGNER OPIOID PANEL (BLOOD)			\$	

Vendor: _____

Postmortem, Expanded, Blood (Forensic)- Bundled			
Test Description	Method(s)	Specimen Requirements	Minimum Volume
Postmortem, Expanded, Blood (Forensic)			
Acetaminophen Confirmation, Blood (Forensic)			
Acetyl Fentanyl Confirmation, Blood (Forensic)			
Alcohols and Acetone Confirmation, Blood (Forensic)			
Alfentanil and Sufentanil Confirmation, Blood (Forensic)			
Amphetamines Confirmation, Blood (Forensic)			
Aripiprazole Confirmation, Blood (Forensic)			
Atomoxetine Confirmation, Blood (Forensic)			
Barbiturates Confirmation, Blood (Forensic)			
Bath Salts Confirmation, Blood (Forensic)			
Benzodiazepines Confirmation, Blood (Forensic)			
Benzotropine Confirmation, Blood (Forensic)			
Bupivacaine Confirmation, Blood (Forensic)			
Bupropion and Metabolite Confirmation, Blood (Forensic)			
Buspirone Confirmation, Blood (Forensic)			
Cannabinoids Confirmation, Blood (Forensic)			
Carbamazepine and Metabolite Confirmation, Blood (Forensic)			
Carisoprodol and Metabolite Confirmation, Blood (Forensic)			
Chlorpheniramine Confirmation, Blood (Forensic)			
Citalopram Confirmation, Blood (Forensic)			
Clonidine Confirmation, Blood (Forensic)			
Clozapine and Metabolite Confirmation, Blood (Forensic)			
Cocaine and Metabolites Confirmation, Blood (Forensic)			
Cyclobenzaprine Confirmation, Blood (Forensic)			
Dextro/Levo Methorphan Confirmation, Blood (Forensic)			
Dextrorphan / Levorphanol Confirmation, Blood (Forensic)			
Dicyclomine Confirmation, Blood (Forensic)			
Diltiazem Confirmation, Blood (Forensic)			
Diphenhydramine Confirmation, Blood (Forensic)			

Vendor: _____

Postmortem, Expanded, Blood (Forensic)- Bundled			
Test Description	Method(s)	Specimen Requirements	Minimum Volume
Donepezil Confirmation, Blood (Forensic)			
Duloxetine Confirmation, Blood (Forensic)			
Eszopiclone/Zopiclone Confirmation, Blood (Forensic)			
Ethanol Re-Check - Post Mortem, Blood			
Fentanyl and Metabolite Confirmation, Blood (Forensic)			
Flecainide Confirmation, Blood (Forensic)			
Flunitrazepam and Metabolites Confirmation, Blood (Forensic)			
Fluphenazine Confirmation, Blood (Forensic)			
Fluvoxamine Confirmation, Blood (Forensic)			
GC Confirmation Set 1, Blood (Forensic)			
GC Confirmation Set 2, Blood (Forensic)			
Glimepiride Confirmation, Blood (Forensic)			
Glutethimide Confirmation, Blood (Forensic)			
Guaifenesin Confirmation, Blood (Forensic)			
Hallucinogens Panel 2 Confirmation (Qualitative), Blood (Forensic)			
Haloperidol Confirmation, Blood (Forensic)			
Hydroxyzine Confirmation, Blood (Forensic)			
Hypoglycemics Confirmation, Blood (Forensic)			
Iloperidone Confirmation, Blood (Forensic)			
Ipecac Use Markers Confirmation, Blood (Forensic)			
Ketamine and Metabolite Confirmation, Blood (Forensic)			
LSD Confirmation, Blood (Forensic)			
Lacosamide Confirmation, Blood (Forensic)			
Lamotrigine Confirmation, Blood (Forensic)			
Levetiracetam Confirmation, Blood (Forensic)			
Loxapine Confirmation, Blood (Forensic)			
MDMA / Methedrone Confirmation (Qualitative), Blood (Forensic)			
MDMA Confirmation, Blood (Forensic)			
Memantine Confirmation, Blood (Forensic)			

Vendor: _____

Postmortem, Expanded, Blood (Forensic)- Bundled			
Test Description	Method(s)	Specimen Requirements	Minimum Volume
Mescaline Confirmation, Blood (Forensic)			
Metaxalone Confirmation, Blood (Forensic)			
Methadone and Metabolite Confirmation, Blood (Forensic)			
Methaqualone Confirmation, Blood (Forensic)			
Methcathinone Confirmation (Qualitative), Blood (Forensic)			
Methocarbamol Confirmation, Blood (Forensic)			
Methylphenidate and Metabolite Confirmation, Blood (Forensic)			
Mexiletine Confirmation, Blood (Forensic)			
Mitragynine, Phenazepam Confirmation (Qualitative), Blood			
Naltrexone - Free (Unconjugated) Confirmation, Blood (Forensic)			
Nifedipine Confirmation, Blood (Forensic)			
Nonsteroidal Anti-Inflammatory Drug Panel Confirmation, Blood (Forensic)			
Olanzapine Confirmation, Blood (Forensic)			
Opiates - Free (Unconjugated) Confirmation, Blood (Forensic)			
Oxcarbazepine/Eslicarbazepine Acetate as Metabolite Confirmation, Blood (Forensic)			
PMA Confirmation (Qualitative), Blood (Forensic)			
Papaverine Confirmation, Blood (Forensic)			
Paroxetine Confirmation, Blood (Forensic)			
Perphenazine Confirmation, Blood (Forensic)			
Phencyclidine Confirmation, Blood (Forensic)			
Phensuximide Confirmation, Blood (Forensic)			
Phenyltoloxamine Confirmation, Blood (Forensic)			
Phenytoin Confirmation, Blood (Forensic)			
Piperazine Designer Drugs Confirmation, Blood (Forensic)			
Primidone, Phenobarbital and PEMA Confirmation, Blood (Forensic)			
Procainamide and NAPA Confirmation, Blood (Forensic)			
Prochlorperazine Confirmation, Blood (Forensic)			
Promazine Confirmation, Blood (Forensic)			

Vendor: _____

Postmortem, Expanded, Blood (Forensic)- Bundled			
Test Description	Method(s)	Specimen Requirements	Minimum Volume
Promethazine Confirmation, Blood (Forensic)			
Propoxyphene and Metabolite Confirmation, Blood (Forensic)			
Psilocin Confirmation (Qualitative), Blood (Forensic)			
Quetiapine Confirmation, Blood (Forensic)			
Quinidine Confirmation, Blood (Forensic)			
Ramelteon and Metabolite Confirmation, Blood (Forensic)			
Risperidone and Metabolite Confirmation, Blood (Forensic)			
Salicylate Confirmation, Blood (Forensic)			
Salvinorin B Confirmation, Blood (Forensic)			
Sertraline and Desmethylsertraline Confirmation, Blood (Forensic)			
Sibutramine and Metabolites Confirmation, Blood (Forensic)			
Sildenafil and Metabolite Confirmation, Blood (Forensic)			
Strychnine Confirmation, Blood (Forensic)			
Synthetic Opioids - Free (Unconjugated) Confirmation, Blood (Forensic)			
Tadalafil Confirmation, Blood (Forensic)			
Tapentadol - Free Confirmation, Blood (Forensic)			
Tetrahydrozoline Confirmation, Blood (Forensic)			
Theophylline Confirmation, Blood (Forensic)			
Thiothixene (Cis Isomer) Confirmation, Blood (Forensic)			
Ticlopidine Confirmation, Blood (Forensic)			
Tiletamine Confirmation, Blood (Forensic)			
Topiramate Confirmation, Blood (Forensic)			
Tramadol and Metabolite Confirmation, Blood (Forensic)			
Trifluoperazine Confirmation, Blood (Forensic)			
Trihexyphenidyl Confirmation, Blood (Forensic)			
Vardenafil and Metabolite Confirmation, Blood (Forensic)			
Venlafaxine and Metabolite Confirmation, Blood (Forensic)			
Xylazine Confirmation, Blood (Forensic)			

Vendor: _____

Postmortem, Expanded, Blood (Forensic)- Bundled			
Test Description	Method(s)	Specimen Requirements	Minimum Volume
Yohimbine Confirmation, Blood (Forensic)			
Zaleplon Confirmation, Blood (Forensic)			
Ziprasidone Confirmation, Blood (Forensic)			
Zolazepam Confirmation, Blood (Forensic)			
Zolpidem Confirmation, Blood (Forensic)			
Zonisamide Confirmation, Blood (Forensic)			
TOTAL PRICE FOR POSTMORTEM EXPANDED BLOOD PANEL		\$	

Individual Tests					
Code	Test Description	Method(s)	Specimen Requirements	Minimum Volume	Price
8052B	Postmortem, Expanded, Blood (Forensic)				\$
8051B	Postmortem, Basic, Blood (Forensic)				\$
50016B	Opiates - Free (Unconjugated) Confirmation, Blood				\$
52198B	Cannabinoids Confirmation, Blood				\$
1919FL	Electrolytes and Glucose Panel (Vitreous), Fluid (Forensic)				\$
52250B	Alcohols and Acetone Confirmation, Blood				\$
50012B	Benzodiazepines Confirmation, Blood				\$
52484B	Fentanyl and Acetyl Fentanyl Confirmation, Blood				\$
52485B	Amphetamines Confirmation, Blood				\$
52441B	Diphenhydramine Confirmation, Blood				\$
50014B	Cocaine and Metabolites Confirmation, Blood				\$
50010B	Amphetamines Confirmation, Blood				\$
52456B	Promethazine Confirmation, Blood				\$
52482B	Citalopram Confirmation, Blood				\$
52116B	Sertraline and Desmethylsertraline Confirmation, Blood				\$
8050U	Postmortem, Urine Screen Add-on (6-MAM Quantification only)				\$

Vendor: _____

Individual Tests					
Code	Test Description	Method(s)	Specimen Requirements	Minimum Volume	Price
50019U	Heroin Metabolite - Free (Unconjugated) Confirmation, Urine				\$
50015B	Methadone and Metabolite Confirmation, Blood				\$
9096B	Alcohol Screen, Blood (Forensic)				\$
52407B	Synthetic Opioids - Free (Unconjugated) Confirmation, Blood				\$
52295B	Trazodone and mCPP Confirmation, Blood				\$
1002B	Carbon Monoxide Exposure Biouptake Screen, Blood				\$
52168B	Amitriptyline and Metabolite Confirmation, Blood				\$
50000B	Acetaminophen Confirmation, Blood				\$
52287B	Fluoxetine and Metabolite Confirmation, Blood				\$
0170FL	Alcohol Panel, Fluid				\$
2143B	Gabapentin, Blood				\$
52167B	Buprenorphine and Metabolite - Free (Unconjugated) Confirmation, Blood				\$
52442B	Hydroxyzine Confirmation, Blood				\$
52445B	Cyclobenzaprine Confirmation, Blood				\$
5654B	Carbon Monoxide Exposure Biouptake Confirmation, Blood				\$
8052TI	Postmortem, Expanded, Tissue (Forensic)				\$
52012B	Bupropion and Metabolite Confirmation, Blood				\$
50011B	Barbiturates Confirmation, Blood				\$
52128B	Tramadol and Metabolite Confirmation, Blood				\$
52451B	D/L Methorphan, Dextrorphan & Levorphanol Confirmation, Blood				\$
52096B	Paroxetine Confirmation, Blood				\$
52036B	Duloxetine Confirmation, Blood				\$
52112B	Quetiapine Confirmation, Blood				\$
52132B	Venlafaxine and Metabolite Confirmation, Blood				\$
52060B	Levetiracetam Confirmation, Blood				\$
52496B	Loperamide and Metabolite Confirmation, Blood				\$
8665FL	6-Monoacetylmorphine - Free (Unconjugated), Fluid				\$
52139B	Zolpidem Confirmation, Blood				\$

52285B	Doxylamine Confirmation, Blood				\$
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Vendor: _____

Individual Tests					
Code	Test Description	Method(s)	Specimen Requirements	Minimum Volume	Price
52303B	Mirtazapine Confirmation, Blood				\$
8155B	Postmortem Designer Opioids Add-On, Blood				\$
52059B	Lamotrigine Confirmation, Blood				\$
52373B	Piperazine Designer Drugs Confirmation, Blood				\$
52483TI	Amphetamines Confirmation, Tissue				\$
52500B	Designer Opioids Confirmation, Blood				\$
52017B	Carisoprodol and Metabolite Confirmation, Blood				\$
52091B	Olanzapine Confirmation, Blood				\$
52250TI	Alcohols and Acetone Confirmation, Tissue				\$
52278B	Doxepin and Metabolite Confirmation, Blood				\$
52440B	Chlorpheniramine Confirmation, Blood				\$
52093B	Oxcarbazepine/Eslicarbazepine Acetate as Metabolite Confirmation, Blood				\$
52127B	Topiramate Confirmation, Blood				\$
8051TI	Postmortem, Basic, Tissue (Forensic)				\$
52497B	Naltrexone and Metabolite - Free (Unconjugated) Confirmation, Blood				\$
52034B	Donepezil Confirmation, Blood				\$
8052SP	Postmortem, Expanded, Serum/Plasma (Forensic)				\$
1487B	Methoxyacetyl fentanyl, cis/trans 3-Methylfentanyl, Cyclopropyl fentanyl (Quantitative Forensic Investigation), Blood				\$
50010TI	Amphetamines Confirmation, Tissue				\$
52105B	Phenytoin Confirmation, Blood				\$
52250FL	Alcohols and Acetone Confirmation, Fluid				\$
52416B	Aripiprazole Confirmation, Blood				\$
52447B	Diltiazem Confirmation, Blood				\$
52493B	Designer Benzodiazepines Confirmation, Blood				\$
52495B	Mitragynine Confirmation, Blood				\$
50013TI	Cannabinoids Confirmation, Tissue				\$
52425B	Tadalafil Confirmation, Blood				\$

52429B	Ziprasidone Confirmation, Blood				\$
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Vendor: _____

Individual Tests					
Code	Test Description	Method(s)	Specimen Requirements	Minimum Volume	Price
52435B	Clonidine Confirmation, Blood				\$
52436B	Risperidone and Metabolite Confirmation, Blood				\$
8051FL	Postmortem, Basic, Fluid (Forensic)				\$
2062B	Ethylene Glycol, Blood				\$
50010FL	Amphetamines Confirmation, Fluid				\$
52015B	Carbamazepine and Metabolite Confirmation, Blood				\$
8051SP	Postmortem, Basic, Serum/Plasma (Forensic)				\$
8063B	Postmortem, Basic to Expanded Upgrade, Blood (Forensic)				\$
0173B	Ethanol Re-Check - Post Mortem, Blood				\$
1009B	Carbon Monoxide Exposure, Blood				\$
50012SP	Benzodiazepines Confirmation, Serum/Plasma				\$
50016FL	Opiates - Free (Unconjugated) Confirmation, Fluid				\$
50016TI	Opiates - Total (Conjugated/Unconjugated) Confirmation, Tissue				\$
52038B	Eszopiclone/Zopiclone Confirmation, Blood				\$
52052B	Guaifenesin Confirmation, Blood				\$
52058B	Ketamine and Metabolite Confirmation, Blood				\$
52106B	Primidone and PEMA Confirmation, Blood				\$
52135B	Xylazine Confirmation, Blood				\$
52140B	Zonisamide Confirmation, Blood				\$
52167TI	Buprenorphine and Metabolite - Total (Conjugated/Unconjugated) Confirmation, Tissue				\$
52412B	MDMA / Methedrone Confirmation (Qualitative), Blood				\$
52484TI	Fentanyl and Acetyl Fentanyl Confirmation, Tissue				\$
2320B	Volatiles Panel, Blood				\$
3043B	Metoprolol, Blood				\$
3214B	Nitrous Oxide, Blood				\$
4351B	Tetrafluoroethane and Difluoroethane Panel Add-On, Blood				\$
50001B	Salicylate Confirmation, Blood				\$

50013FL	Cannabinoids Confirmation, Fluid				\$
52028B	Dicyclomine Confirmation, Blood				\$

Vendor: _____

Individual Tests					
Code	Test Description	Method(s)	Specimen Requirements	Minimum Volume	Price
52049B	Fluvoxamine Confirmation, Blood				\$
52053B	Haloperidol Confirmation, Blood				\$
52072B	Mescaline Confirmation, Blood				\$
52079B	Methylphenidate and Metabolite Confirmation, Blood				\$
52083B	Mexiletine Confirmation, Blood				\$
52144TI	Gabapentin Confirmation, Tissue				\$
52245B	Brompheniramine Confirmation, Blood				\$
52381B	Mitragynine, Phenazepam Confirmation (Qualitative), Blood				\$
52407SP	Synthetic Opioids - Free (Unconjugated) Confirmation, Serum/Plasma				\$
52420B	Lacosamide Confirmation, Blood				\$
52421B	Memantine Confirmation, Blood				\$
52434B	MDMA Confirmation, Blood				\$
52443B	Benzotropine Confirmation, Blood				\$
8052FL	Postmortem, Expanded, Fluid (Forensic)				\$
0570B	Designer Benzodiazepines, Blood (Forensic)				\$
1006B	Carbon Monoxide - Iron Ratio Profile, Blood				\$
1021B	Substituted Cathinone Panel, Blood				\$
1480B	Designer Opioids, Blood				\$
2481B	Ketone Panel, Blood				\$
2481U	Ketone Panel, Urine				\$
2693B	Metals/Metalloids Acute Poisoning Panel, Blood				\$
2693H	Metals/Metalloids Acute Poisoning Panel, Hair				\$
2740B	Metformin, Blood				\$
4757B	Valproic Acid, Blood				\$
50000U	Acetaminophen Confirmation, Urine				\$
50011SP	Barbiturates Confirmation, Serum/Plasma				\$
50011TI	Barbiturates Confirmation, Tissue				\$

50012TI	Benzodiazepines Confirmation, Tissue				\$
50012U	Benzodiazepines Confirmation, Urine				\$

Vendor: _____

Individual Tests					
Code	Test Description	Method(s)	Specimen Requirements	Minimum Volume	Price
50013B	Cannabinoids Confirmation, Blood				\$
50014SP	Cocaine and Metabolites Confirmation, Serum/Plasma				\$
50014TI	Cocaine and Metabolites Confirmation, Tissue				\$
50016SP	Opiates - Free (Unconjugated) Confirmation, Serum/Plasma				\$
50016U	Opiates - Free (Unconjugated) Confirmation, Urine				\$
51866B	GC/MS Confirmation (Qualitative), Blood				\$
52007B	Atomoxetine Confirmation, Blood				\$
52011B	Bupivacaine Confirmation, Blood				\$
52021FL	Citalopram Confirmation, Fluid				\$
52021TI	Citalopram Confirmation, Tissue				\$
52023B	Clozapine and Metabolite Confirmation, Blood				\$
52047B	Flecainide Confirmation, Blood				\$
52052TI	Guaifenesin Confirmation, Tissue				\$
52058SP	Ketamine and Metabolite Confirmation, Serum/Plasma				\$
52061B	Dextrophan / Levorphanol Confirmation, Blood				\$
52064B	Loxapine Confirmation, Blood				\$
52068B	Meperidine and Metabolite Confirmation, Blood				\$
52076B	Methocarbamol Confirmation, Blood				\$
52076TI	Methocarbamol Confirmation, Tissue				\$
52088B	Nifedipine Confirmation, Blood				\$
52136B	Yohimbine Confirmation, Blood				\$
52144FL	Gabapentin Confirmation, Fluid				\$
52148B	Quinidine Confirmation, Blood				\$
52167FL	Buprenorphine and Metabolite - Free (Unconjugated) Confirmation, Fluid				\$
52167SP	Buprenorphine and Metabolite - Free (Unconjugated) Confirmation, Serum/Plasma				\$
52168FL	Amitriptyline and Metabolite Confirmation, Fluid				\$
52168TI	Amitriptyline and Metabolite Confirmation, Tissue				\$

52250SP	Alcohols and Acetone Confirmation, Serum/Plasma				\$
52276B	Imipramine and Metabolite Confirmation, Blood				\$

Vendor: _____

Individual Tests					
Code	Test Description	Method(s)	Specimen Requirements	Minimum Volume	Price
52287U	Fluoxetine and Metabolite Confirmation, Urine				\$
52289B	Orphenadrine Confirmation, Blood				\$
52295FL	Trazodone and mCPP Confirmation, Fluid				\$
52298B	Verapamil Confirmation, Blood				\$
52373FL	Piperazine Designer Drugs Confirmation, Fluid				\$
52415B	Trihexyphenidyl Confirmation, Blood				\$
52423B	Perphenazine Confirmation, Blood				\$
52434SP	MDMA Confirmation, Serum/Plasma				\$
52437B	Sildenafil and Metabolite Confirmation, Blood				\$
52441FL	Diphenhydramine Confirmation, Fluid				\$
52441TI	Diphenhydramine Confirmation, Tissue				\$
52441U	Diphenhydramine Confirmation, Urine				\$
52442FL	Hydroxyzine Confirmation, Fluid				\$
52444B	Buspirone Confirmation, Blood				\$
52484FL	Fentanyl and Acetyl Fentanyl Confirmation, Fluid				\$
52485SP	Amphetamines Confirmation, Serum/Plasma				\$
52485U	Amphetamines Confirmation, Urine				\$
52488B	Designer Opioids Confirmation (2019 Scope), Blood				\$
52499B	Suvorexant Confirmation, Blood				\$
7601SP	Testosterone, Free and Total, Serum/Plasma				\$
7634SP	Estradiol (E2), Serum/Plasma				\$
8052U	Postmortem, Expanded, Urine (Forensic)				\$
8062B	Postmortem, Expanded w/o Alcohol, Blood (Forensic)				\$
8098B	Drug Screen (GC/MS), Blood				\$
8673B	Morphine - Free and Total, Blood				\$
8722SP	Methadone and Metabolite, Serum/Plasma				\$