

San Joaquin Valley College

Purchase Proposal



Approved: Yes No

Date: 8.10.16

PR Number: N/A

STANDARD: New supply and/or equipment purchases must be in alignment with SJVC’s Mission Statement and Strategic Plan. They must support the Institutional Learning Outcomes (ILOs), Program Learning Outcomes (PLOs), and show a positive correlation to career placement.

POLICY: The Proposal form is to be completed in full and submitted with support documentation to CurriculumImprovements@sjvc.edu *between 60- 90 days prior* to the department’s Program Review for peer review and institutional determination.

PROCESS: Complete and submit the Purchase Proposal to CurriculumImprovements@sjvc.edu. Attendees at the Program Review will vote on adoption of the proposal. If approved, the proposal is forwarded to Senior Management for their review.

TIMELINE: Program changes take a *minimum* of 120 days to implement. Please plan accordingly.

Curriculum Purchases

Policy: Curriculum purchases are defined as NEW items requested by faculty specific to student achievement of course and program outcomes and job placement.

Process: The *Purchase Proposal* is to be completed in full and submitted with supporting documentation to the Curriculum Technician. If the proposal involves a program on multiple campuses, stakeholders from those campuses will be asked to review the Proposal prior to final approval.

Examples: Patient simulators, virtual labs, durable medical equipment, HVAC training equipment

Instructional Purchases

Policy: Instructional purchases are defined as NEW items requested by faculty to support classroom instructional techniques. Instructional purchases are not specific to any one program.

Process: The *Purchase Proposal* is to be completed in full and submitted with supporting documentation to the Classroom Technology Specialist.

Examples: Laptops and laptop carts, Interactive whiteboards, Clicker response systems

Timeline: Allow at least 90 DAYS for purchase and installation after approval.

Item	Manikins (replacement) SimPad and Monitor (new items)
Total Cost (for all campuses included)	\$62,547.40
Is this request from Program Review? If so, please list the PR number	It is not from the most recent review of 8/2015. However, historically you will find it documented that VN students have very limited Pediatric patient care experiences. 10 years ago our students went to Valley Children Hospital (VCH) for clinical in

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	<p>Peds. VCH no longer accepts VN students from any program because they do not hire them and also because there is an overwhelming demand for Peds from many health care disciplines, i.e., RN, RT, Physical and Occupational Therapy, that the hospital needs to recruit and hire. Kaweah Delta in 2008 decided to not allow VN students in their Peds Dept in the hospital because of their low patient census and also because they were impacted by student RN's etc. like VCH.</p> <p>(As an FYI, Adventist Hospital in Hanford has never allowed VN students but we used their Selma Hospital for OB and medical surgical rotations BUT in 2014 because they do not hire VN's into the hospital they no longer allow us there).</p> <p style="text-align: center;">There is also limited/restricted clinical site hands on experience for OB. The OB units in hospitals do not hire LVNs. However the BVN and the NCLEX require this experience and knowledge. The need mannequins for infant/newborn and adult mannequin that simulates fetal heart tones has also been pointed out in previous Program Review sessions in the past. That is why these mannequins were purchased in the first place.</p> <p style="text-align: center;">The only Peds experience other than what is provided in the skills lab is very hit or miss at Tulare District Hospital due to their consistent low census and then some outpatient clinics at Kaweah Delta were only one student can attend at a time. The OB units also only allow 1 student at a time and if there isn't a patient on that day the student will not have the necessary experience.</p> <p style="text-align: center;">Even though the hospitals don't hire LVN's the Board of Vocational Nursing (BVN) requires clinical experience and the licensing exam (NCLEX) tests them on this content area.</p>
Person Requesting	Janine Spencer RN Program Director/Ann Zelaski LVN Program Director
Supervisor	Ben Almaguer/April Lafaire
Campus	Visalia
Date	5.26.2016
Software required:	NLN Medical- Surgical scenarios
IS notified:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Program	Registered Nursing / LVN Programs
Course(s)	RN 28, RN 10L, 24L, RN 35L, RN 45L & RN 46L

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SECTION 1: Measurement What metrics will be used to evaluate the effectiveness of the proposed changes? (Placement, licensure, certification, CLO/PLO achievement, course completion, etc.)

What is the current status and what is the expected target?

Metric	Current	Target	By When
<p>Currently Peds is a course that students overall have more difficulty with than the other courses. Utilizing ATi proctored assessment data we will be able to compare historical data with data collected once there is use of upgraded mannequins to determine improved outcomes. The use of mannequins will also meet the BVN requirement for a part of the Peds clinical time. It is also documented in the research of NCLEX failure that VN students who complete VN to RN bridge programs have the most difficulty in passing the peds portion of the licensing exam. There is no available data source for our specific program to measure if our students do better or worse, but in nursing education circles we know that this is a weak area and that there is a lack of clinical sites where hands on experiences helps to reinforce the theory. Having fully functioning mannequins would give our students this experience.</p>			

Section 2: Summary of Benefits

Explain the benefits of the proposed supply/equipment to the course and program or instructional techniques.

1. 2 manikins need to be replaced due to their inability to provide patient care simulation as they are in disrepair. A Laerdal representative refused to maintenance the manikins (a service included in our purchase of the equipment) until they were upgraded to a newer model. The requested items below (#2 and #3) will however work with the *old* manikin's technology.
2. Enhance the teaching effectiveness with the SimPad. This will allow wireless access and relevant functionality such as intuitive touch screen with Automatic and Manual Modes.
3. I am requesting a monitor so that the advanced medical surgical course can have the ability to teach cardiac monitoring skills to the students.

Section 3: Supporting Documentation

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Attach at least two forms of documentation from outside sources that support the need for the purchase. Supporting documentation includes but is not limited to: Advisory Board minutes or statements from members, statements from career service department, extern sites or employers, detailed recommendations from programmatic accreditation associations or new laws and/or legislation, research on current industry trends.

Supporting items are (attached):

- Janine states that “The [employer] surveys have indicated that an area of improvement for our students is critical thinking and clinical judgment”. (Exhibit A)
- Laerdal Bids (3) (Exhibit B)
- VN Program Director support and commentary (Exhibit C- see section 1 above)
- Clinical Mastery Rubric (Exhibit D)
- RN10L Final Check off (Exhibit E)

Section 4: Improvement of Student Achievement

4a. Explain how the proposed supply/equipment will increase student achievement.

Upgrading the equipment in the skills lab will support improved student achievement in the following manner:

The proposed additional and modification of equipment for nursing skills lab will promote student learning by supporting the decision making process, critical thinking skills, abstract knowledge, technical skills and self-confidence with a safe and controlled environment.

There is the opportunity to make, detect and correct patient care error without adverse consequences.

The instructors can focus on the learner and not be distracted with patients.

Allows for deliberate practice in the development of clinical competence.

The development and enhancement of critical thinking skills will further support NCLEX success.

4b. Summarize how this purchase will assist student placement. Have any students been denied placement because of the College’s lack of this supply/equipment?

Clinical simulation supports stronger clinical abilities which do equate to enhanced abilities to secure employment. The ability of SJVC nursing students to make a positive impression in the clinical setting particularly during the Preceptorships does have a positive influence of their career opportunities.

Section 5: Alignment with Outcomes

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Curriculum Purchase	Instructional Purchase
<i>5a. Explain HOW the proposed supply/equipment aligns with and support the CLOs and/or PLOs. Please identify and list the specific SLOs.</i>	<i>5a. Explain HOW the proposed supply/equipment aligns with and supports the ILOs and/or Instructional Department outcomes for an instructional technique purchase.</i>
This purchase will support PLOs 1,2,3,5,6,7,8 & 9.	The simulation experience is supported in the following courses: RN 28, RN 10L, 24L, RN 35L, RN 45L, RN 46L, VN 32 and VN33
<i>5b. How are the CLOs and/or PLOs being currently taught and assessed without this purchase?</i>	<i>5b. What instructional techniques are currently being used without this supply/equipment?</i>
The PLOs are currently taught by using a toy doll with the instructor lecturing while demonstrating. The students then practice on the doll.	Lecture and demonstration - We do not currently have cardiac monitoring to provide adequate demonstration of cardiac arrhythmias.

Section 6: Implementation
<i>6a. What maintenance or upkeep is required for this supply/equipment (Batteries, Belts, etc.)?</i>
Laerdal maintains the equipment and there is a warranty.
<i>6b. Will this supply/equipment become outdated and need to be replaced? If so, approximately how long until it is outdated?</i>
As new technologies emerge and simulation is enhanced there would be potential need for replacement in the future.
<i>6c. Will faculty need to be trained on how to use this supply/equipment? If so, describe the training plan and skills assessment plan.</i>
Faculty training is included in this proposal

Section 7: Ordering Information
<i>Attach all of the following documentation:</i>
<ul style="list-style-type: none"> • Detailed equipment/supply specifications • List of possible vendors • Additional ordering information
Any additional info or comment:

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Section 8: Academic Leadership Input

A statement from the Academic Dean (Campus Director if submitted by the Academic Dean) documenting their knowledge and support of the proposed improvement is necessary to process the proposal (Separate Attachments or emails to the Curriculum Specialist are acceptable).

I support the purchase of the above noted items. It can be noted in employer surveys that students are lacking in clinical and critical thinking skills. The replacement and new purchased items will help students reach the next level of performance in said areas. Ben Almaguer

Section 9: Internal Research *(completed by AA staff)*

How many students are enrolled in this program on all campuses?

Is this item in use on another campus? If so, which campus(s)?

How will we measure return on investment?

Current census for RN Visalia: 89. Current census for LVN Visalia: 57. Impacting a total of 146 students.

This item will not be used in Ontario.

The ROI on investment will be shown via having functioning manikins for students' use allowing for the application of practiced skills. The new items will increase students understanding of skills and ability to critically think through a situation given the appropriate hands on experience. Increased measure will be shown in these two areas via higher employer evaluations of students. A. Austerman

Section 10: Senior Management Review

Proposal must be reviewed by Senior Management or authorized representative.

Review Date: Approved Disapproved

Comments:

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Exhibit A:

Esther Alcaraz

San Joaquin Valley College Registered Nursing Program

EMPLOYER EVALUATION

The San Joaquin Valley College Registered Nursing Program is conducting an employer follow-up evaluation of our RN graduates. As an employer of recent SJVC RN graduate, we would appreciate your input and candid response to the following questions. Please return in the self-addressed envelope. Thank you for your participation.

Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) Inpt Dialysis

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared				Not Prepared
	5	4	3	2	1
Clinical Judgment		✓			
Communication		✓			
Clinical Skills	✓				
Collaboration	✓				
Professional Role Accountability	✓				

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

5. Additional Comments:

Esther has been a fill-in charge nurse. Doing Great.

Please provide your name and position

Name *Patti Magee* Position *RN Clinical Supervisor*
 Facility *CRMC*

③ ✓

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*Verity
Esmenda*

San Joaquin Valley College Registered Nursing Program

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) Acute Rehab

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared				Not Prepared
	5	4	3	2	1
Clinical Judgment				X	
Communication			X		
Clinical Skills			X		
Collaboration			X		
Professional Role Accountability			X		

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

Critical thinking skills

5. Additional Comments:

Please provide your name and position

Name Amy Scroggs Position CNO

Facility HealthSouth Acute Rehab

✓

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Lorena Espinoza

San Joaquin Valley College Registered Nursing Program

EMPLOYER EVALUATION

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) _____

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared			Not Prepared	
	5	4	3	2	1
Clinical Judgment			X		
Communication		X			
Clinical Skills		X			
Collaboration		X			
Professional Role Accountability		X			

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

5. Additional Comments: _____

Please provide your name and position

Name Regina Hibberd Position Med Surg Director

Facility Delano Regional Medical Center

✓
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A. Gill

San Joaquin Valley College Registered Nursing Program

EMPLOYER EVALUATION

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) SNF

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared			Not Prepared	
	5	4	3	2	1
Clinical Judgment		X			
Communication			X		
Clinical Skills		X			
Collaboration			X		
Professional Role Accountability		X			

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

*Stronger clinical rotation experience in order to
hard, more clinical self assurance when starting
the job.*

5. Additional Comments: _____

Please provide your name and position

Name LISA McQuone Position Administrator

Facility CCCA - Highland

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Tiffani Holden

San Joaquin Valley College Registered Nursing Program

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) _____

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared				Not Prepared
	5	4	3	2	1
Clinical Judgment		4			
Communication		4			
Clinical Skills			3		
Collaboration			3		
Professional Role Accountability		4			

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

5. Additional Comments: _____

Please provide your name and position

Name A Castillo RN Position Clinical Manager ER

Facility BHH

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Z. Nazir

San Joaquin Valley College Registered Nursing Program

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify): SNF

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared			Not Prepared	
	5	4	3	2	1
Clinical Judgment			X		
Communication			X		
Clinical Skills			X		
Collaboration			X		
Professional Role Accountability			X		

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

Stronger clinical rotation experience in order to have more clinical self assurance when starting the job.

5. Additional Comments: _____

Please provide your name and position

Name GLC Hyland Position Administrator

Facility LISA McQuone, Administrator

San Joaquin Valley College

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Alyssa See

San Joaquin Valley College Registered Nursing Program

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) long term care

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared				Not Prepared
	5	4	3	2	1
Clinical Judgment		X			
Communication		X			
Clinical Skills			X		
Collaboration		X			
Professional Role Accountability		X			

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

5. Additional Comments: _____

Please provide your name and position

Name Lorraine Sims Position DON

Facility Kaweah Manor

Alyssa See - 25

San Joaquin Valley College

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*Johanna
wheeler*

San Joaquin Valley College Registered Nursing Program

EMPLOYER EVALUATION

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) _____

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared				Not Prepared
	5	4	3	2	1
Clinical Judgment		4			
Communication		4			
Clinical Skills		4	3		
Collaboration		4			
Professional Role Accountability		4			

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

5. Additional Comments: _____

Please provide your name and position

Name A. Curbis RN Position CLINICAL MANAGER

Facility _____

San Joaquin Valley College

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Ravneet Kaur

San Joaquin Valley College Registered Nursing Program

EMPLOYER EVALUATION

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) Geriatric

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared			Not Prepared	
	5	4	3	2	1
Clinical Judgment			✓		
Communication			✓		
Clinical Skills			✓		
Collaboration			✓		
Professional Role Accountability		✓			

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

Please train them on Leadership.

5. Additional Comments: Please add training modules for multiple patients. In our environment a RN needs to be ready to handle 30 patients during a shift.

Please provide your name and position

Name Armando Torres Position DNS

Facility Golden Ivory Centers Hillcrest

San Joaquin Valley College

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Kristy Cash

San Joaquin Valley College Registered Nursing Program

EMPLOYER EVALUATION

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Please circle the appropriate response:

1. Nursing Unit Medical-Surgical OR ED ICU Maternal-Child
Other (specify) _____

2. Type of Agency: Acute Care Setting Ambulatory Care Setting

3. Please rate the preparation of the SJVC graduate in the following areas:

	Very Prepared				Not Prepared
	5	4	3	2	1
Clinical Judgment				✓	
Communication		✓			
Clinical Skills			✓	✓	
Collaboration					
Professional Role Accountability				✓	

4. Based on your experiences with graduates from SJVC, what suggestions do you have for improving the RN Program?

ON MY OPINION I THINK STUDENTS NEEDS MORE EXPOSURE AND HANDS ON PRACTICE IN A HOSPITAL SETTINGS, TO LEARN MORE BEDSIDE NURSING CARE.

5. Additional Comments: TALKING IN GENERAL, I DO UNDERSTAND THAT AS A NEWLY GRAD PERSON, IT TAKES A WHILE, PRACTICE AND CONFIDENCE TO BE GOOD NURSE PROFESSIONALLY AND CRITICALLY WISE.

Please provide your name and position

Name MARIA TERESA SAN PEDRO Position INT. DIRECTOR

Facility DAME

San Joaquin Valley College

Purchase Proposal

Exhibit B:



Laerdal Medical Corporation
167 Myers Corners Road
Wappingers Falls, NY 12590
Fax Order To: (800)227-1143
Phone Order To: 877-Laerdal
Tax ID: 13-2567752

TERRITORY MANAGER
Derek Thibodeau
(800) 648-1351x2252
derek.thibodeau@laerdal.com

INSIDE SALES REPRESENTATIVE
Alisa Powell
(877) 523-7325x4221
alisa.powell@laerdal.com

SALES SUPPORT SPECIALIST
Tara Lepino
(845) 297-7770x2231
tara.lepino@laerdal.com

DATE : Tuesday, July 12, 2016

ATTN: Ann Zelaski
Vocational Nursing Program
San Joaquin Valley College
8400 W Mineral King Ave
Visalia CA 93291-9283
(559) 651-2500x
ann.zelaski@sjvc.edu

QUOTE NUMBER : 1-3P8009
CUSTOMER NUMBER : 00104762
EXPIRATION DATE : 12/31/2016

SHIP TO:
San Joaquin Valley College
8400 W Mineral King Ave
Visalia CA 93291-9283

QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
1	232-05050	SimJunior Simulator Manikin Only Includes SimJunior Manikin, Blood Pressure Cuff, Consumables, Clothing, Carry Case, 1 Year Manufacturer's Warranty.	\$14,590.00	\$14,590.00	\$14,590.00
1	204-30001	SimPad PLUS System (US) Includes SimPad PLUS Remote Ctl, SimPad PLUS Link Box, AC Adapter, Battery, Headset & Microphone, Wrist Strap, Manikin Strap, Ethernet Cable, Protective Sleeve, and USB Cable. 204-50150 LLEAP for SimPad PLUS software license required for operation.	\$1,500.00	\$1,500.00	\$1,500.00
1	204-50150	LLEAP for SimPad PLUS Includes: License Key providing access to Manual Mode, Automatic Mode, and Log Viewer Application.	\$2,500.00	\$2,500.00	\$2,500.00
1	204-30001PP	SimPad PLUS Protection Plan Replacement SimPad remote in the event of non-warranty product failure (spills, immersion in water, breakage due to drops). The plan allows for 3 instances of free remote replacement during a 2 yr period and does not cover instances of theft/loss.	\$912.00	\$912.00	\$912.00
1	400-29301	Patient Monitor LLEAP Instructor	\$3,155.00	\$3,155.00	\$3,155.00
1	232-VPLUSP3	SimJunior Standard ValuePlus Platinum 3 Includes Installation, Extended Warranty through Year 3, Preventative Maintenance On-Site and Loaner Program.	\$10,610.00	\$10,610.00	\$10,610.00
1	232-EDSP100	Intro SimJr SimPad 1D 1 day educational session with a Laerdal Educational Representative at the customer site for up to 8 people.	\$2,375.00	\$2,375.00	\$2,375.00
1	SMS3972C	NLN St Set SJ Adv-Cap 5 Scenarios	\$1,000.00	\$1,000.00	\$1,000.00
ITEM TOTAL:					\$36,642.00
ESTIMATED TAX:					\$1,747.06
SHIPPING & HANDLING:					\$93.23
TOTAL:					\$38,482.29

OPTIONAL ITEMS:

QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
1	232-VPLUSP2	SimJunior Standard ValuePlus Platinum 2 Includes Installation, Extended Warranty through Year 2, Preventative Maintenance On-Site and Loaner Program.	\$7,220.00	\$7,220.00	\$7,220.00
1	232-VPLUSP5	SimJunior Standard ValuePlus Platinum 5 Includes Installation, Extended Warranty through Year 5.	\$17,595.00	\$17,595.00	\$17,595.00

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QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
1	232-43050	Preventative Maintenance On-Site and Loaner Program. SimJunior Standard Installation Customer	\$1,455.00	\$1,455.00	\$1,455.00
1	SMS3971C	NLN Ped Nursing-Cap 12 Scenarios Simulation in Nursing Education - Pediatric Scenarios (Cap) - Twelve (12) pediatric scenarios geared toward all types of undergraduate nursing programs.	\$2,850.00	\$2,850.00	\$2,850.00

There are various payment options; please see bottom of your quote for further clarification.
Appropriate Sales Tax will be added to invoice - Pricing and Availability are subject to change
Shipping/Handling costs will be added to invoice

Terms:

- . Net 30 Days for approved open accounts. CIA, Credit Cards accepted. Financing options now available - sample leasing payment terms follow.
- . For additional information, ask your Inside Sales Representative listed above.
- . Lease term 24 months: \$1,526.75*
- . Lease term 36 months: \$1,017.53*
- . Lease term 48 months: \$763.38*
- *Quoted payments do not include Interest, Taxes, Maintenance, or Insurance. Quotes are subject to credit approval and may change without notice.
- . One(1) year warranty on manufactured products and 90 day warranty on refurbished products
- . Two(2) year parts replacement warranty with technical assistance by phone on all Hill-Rom refurbished products
- . Delivery of product to a specific location within your building, if requested is at an additional charge and not included in this quote
- . Quotes that included training. Training must be booked and performed 1 year from installation. The training obligation expires one year from install
- . Shipping charges subject to change in the event Inside or Lift Gate Delivery is needed

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Laerdal Medical Corporation
 167 Myers Corners Road
 Wappingers Falls, NY 12590
 Fax Order To: (800)227-1143
 Phone Order To: 877-Laerdal
 Tax ID: 13-2587752

TERRITORY MANAGER

Derek Thibodeau
 (800) 648-1851x2252
 derek.thibodeau@laerdal.com

INSIDE SALES REPRESENTATIVE

Alisa Powell
 (877) 523-7325x4221
 alisa.powell@laerdal.com

SALES SUPPORT SPECIALIST

Tara LePino
 (845) 297-7770x2231
 tara.lepino@laerdal.com

DATE : Tuesday, July 19, 2016

ATTN: Ms. Janine Spencer
 Dean - RN program
 San Joaquin Valley College
 8400 W Mineral King Ave
 Visalia CA 93291-9283
 (559) 651-2500x
 janine.spencer@sjvc.edu

QUOTE NUMBER : 1-3PTV0Q

CUSTOMER NUMBER : 00104762

EXPIRATION DATE : 09/17/2016

SHIP TO:

San Joaquin Valley College
 8400 W Mineral King Ave
 Visalia CA 93291-9283

QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
1	215-99950	Identified SimStore content SMS7219C - Newborn Assessment - Big Baby for LLEAP SimBaby	\$300.00	\$300.00	\$300.00
1	215-99950	Identified SimStore content SMS7228C - Newborn Assessment - Discharge for LLEAP SimBaby	\$300.00	\$300.00	\$300.00
1	215-99950	Identified SimStore content SMS7225C - Newborn Assessment - Immediately after Delivery for LLEAP SimBaby	\$300.00	\$300.00	\$300.00
ITEM TOTAL:					\$900.00
ESTIMATED TAX:					\$0.00
SHIPPING & HANDLING:					\$0.00
TOTAL:					\$900.00

There are various payment options; please see bottom of your quote for further clarification.
 Appropriate Sales Tax will be added to invoice – Pricing and Availability are subject to change
 Shipping/Handling costs will be added to invoice

Terms:

- . Net 30 Days for approved open accounts; CIA; Credit Cards accepted. Financing options now available – sample leasing payment terms follow. For additional information, ask your Inside Sales Representative listed above.
- . One(1) year warranty on manufactured products and 90 day warranty on refurbished products
- . Two(2) year parts replacement warranty with technical assistance by phone on all Hill-Rom refurbished products
- . Delivery of product to a specific location within your building, if requested is at an additional charge and not included in this quote
- . Quotes that included training. Training must be booked and performed 1 year from installation. The training obligation expires one year from install
- . Shipping charges subject to change in the event Inside or Lift Gate Delivery is needed

San Joaquin Valley College

Purchase Proposal



Laerdal Medical Corporation
 167 Myers Corners Road
 Wappingers Falls, NY 12590
 Fax Order To: (800)227-1143
 Phone Order To: 877-Laerdal
 Tax ID: 13-2587752

TERRITORY MANAGER
 Derek Thibodeau
 (800) 848-1851x2252
 derek.thibodeau@laerdal.com

INSIDE SALES REPRESENTATIVE
 Alisa Powell
 (877) 523-7325x4221
 alisa.powell@laerdal.com

SALES SUPPORT SPECIALIST
 Tara Lepino
 (845) 297-7770x2231
 tara.lepino@laerdal.com

DATE : Monday, July 11, 2016

ATTN: Ms. Rajvir Ladhari

San Joaquin Valley College
 8344 W Mineral King Ave
 Visalia CA 93291-7977
 (559) 312-6662x
 rajvir.ladhari@sjvc.edu

QUOTE NUMBER : 1-3ECJLY
CUSTOMER NUMBER : 00104762
EXPIRATION DATE : 09/09/2016

SHIP TO:
 San Joaquin Valley College
 10641 Church St
 Rancho Cucamonga CA 91730

QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
2	325-05050	Nursing Anne (SimPad Capable)	\$5,045.00	\$4,338.70	\$8,677.40
7	204-30001	SimPad PLUS System (US) Includes SimPad PLUS Remote Ctrl, SimPad PLUS Link Box, AC Adapter, Battery, Headset & Microphone, Wrist Strap, Mankin Strap, Ethernet Cable, Protective Sleeve, and USB Cable. 204-50150 LLEAP for SimPad PLUS software license required for operation.	\$1,500.00	\$1,290.00	\$9,030.00
7	204-50150	LLEAP for SimPad PLUS Includes: License Key providing access to Manual Mode, Automatic Mode, and Log Viewer Application.	\$2,500.00	\$2,150.00	\$15,050.00
7	400-29301	Patient Monitor LLEAP Instructor	\$3,155.00	\$2,997.25	\$20,980.75
5	200-30450	Mankin adapter (VitalSim manikin to Sim)	\$83.00	\$80.51	\$402.55
ITEM TOTAL:					\$54,140.70
ESTIMATED TAX:					\$4,369.96
SHIPPING & HANDLING:					\$483.88
TOTAL:					\$58,994.54

OPTIONAL ITEMS:

QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
1	SMS6566C	NLN V1 SimPad Cap 20 Scenarios The set contains 10 medical and 10 surgical scenarios developed for undergraduate nursing programs.	\$3,540.00	\$3,540.00	\$3,540.00
7	204-30001PP	SimPad PLUS Protection Plan Replacement SimPad remote in the event of non-warranty product failure (spills, immersion in water, breakage due to drops). The plan allows for 3 instances of free remote replacement during a 2 yr period and does not cover instances of theft/loss.	\$912.00	\$784.32	\$5,490.24

There are various payment options; please see bottom of your quote for further clarification.
 Appropriate Sales Tax will be added to invoice – Pricing and Availability are subject to change
 Shipping/Handling costs will be added to invoice

Terms:

- . Net 30 Days for approved open accounts; CIA; Credit Cards accepted. Financing options now available – sample leasing payment terms follow.
 For additional information, ask your Inside Sales Representative listed above.
- . Lease term 24 months: \$2,255.86*
- . Lease term 36 months: \$1,503.91*
- . Lease term 48 months: \$1,127.93*
- *Quoted payments do not include Interest, Taxes, Maintenance, or Insurance. Quotes are subject to credit approval and may change without notice.
- . One(1) year warranty on manufactured products and 90 day warranty on refurbished products
- . Two(2) year parts replacement warranty with technical assistance by phone on all Hill-Rom refurbished products
- . Delivery of product to a specific location within your building, if requested is at an additional charge and not included in this quote
- . Quotes that included training. Training must be booked and performed 1 year from installation. The training obligation expires one year from install
- . Shipping charges subject to change in the event Inside or Lift Gate Delivery is needed

San Joaquin Valley College

Purchase Proposal

Exhibit C:

Commentary from VN Program Director- see Section 1 above.

Exhibit D:

Criteria	Independently	Met	Not Met
Critical Thinking CLO 1 [Mastery]	3 points	2 points	1 point
Clinical Judgment CLO 4 [Mastery]	3 points	2 points	1 point
Communication CLO 3 [Mastery]	3 points	2 points	1 point
Collaboration CLO 2 [Mastery]	3 points	2 points	1 point
Overall Score	Level 3 11 or more	Level 2 7 or more	Level 1 0 or more

Exhibit E:

Criteria	Independently	Met	Not Met
	3 points	2 points	1 point
Complete Set of Vital Signs CLO 1 [Mastery]	Complete and accurate vital signs including: Respiratory rate, pulse, Blood pressure, and temperature.	Missed one step and or needed prompting	Unable to obtain vital signs
Complete RN 10 L Level Physical Assessment CLO 1 [Mastery]	3 points	2 points	1 point
	Complete head to toe physical assessment including all systems at an RN 10 L level.	Missed one step and or needed prompting	Unable to perform an RN 10 L Physical assessment
Obtain Blood Glucose Level CLO 2 and CLO 4 [Mastery]	3 points	2 points	1 point
	Followed physicians orders.	Missed one step and or needed prompting	Unable to perform glucose monitoring
Medication Pass CLO 2, CLO 3 and CLO 4 [Mastery]	3 points	2 points	1 point
	Followed physicians orders, verified order, and 5 rights for medication pass including verification with a second licensed nurse for Insulin coverage.	Missed one step and or needed prompting	Unable to complete a medication pass safely
Overall Score	Level 3 11 or more	Level 2 7 or more	Level 1 0 or more



Laerdal[®]
helping save lives

Laerdal Medical Corporation
167 Myers Corners Road
Wappingers Falls, NY 12590
Fax Order To: (800)227-1143
Phone Order To: 877-Laerdal
Tax ID: 13-2587752

TERRITORY MANAGER
Derek Thibodeau
(800) 648-1851x2252
derek.thibodeau@laerdal.com

INSIDE SALES REPRESENTATIVE

Alisa Powell
(877) 523-7325x4221
alisa.powell@laerdal.com

SALES SUPPORT SPECIALIST

Tara LePino
(845) 297-7770x2231
tara.lepino@laerdal.com

DATE : Wednesday, September 28, 2016

ATTN: Ms. Rajvir Ladhar

QUOTE NUMBER : 1-3ECJLY

CUSTOMER NUMBER : 00104762

EXPIRATION DATE : 11/27/2016

San Joaquin Valley College
8344 W Mineral King Ave

Visalia CA 93291-7977
(559) 312-6662x
rajvir.ladhar@sjvc.edu

QTY	PRODUCT	DESCRIPTION	LIST PRICE	UNIT PRICE	EXTENDED PRICE
3	325-05050	Nursing Anne (SimPad Capable)	\$5,045.00	\$4,338.70	\$13,016.10
7	204-30001	SimPad PLUS System (US) Includes SimPad PLUS Remote Ctrl, SimPad PLUS Link Box, AC Adapter, Battery, Headset & Microphone, Wrist Strap, Manikin Strap, Ethernet Cable, Protective Sleeve, and USB Cable. 204-50150 LLEAP for SimPad PLUS software license required for operation.	\$1,500.00	\$1,290.00	\$9,030.00
7	204-50150	LLEAP for SimPad PLUS Includes: License Key providing access to Manual Mode, Automatic Mode, and Log Viewer Application.	\$2,500.00	\$2,150.00	\$15,050.00
7	400-29301	All-In-One Panel PC Instructor - Patient Monitor	\$3,155.00	\$2,997.25	\$20,980.75
5	200-30450	Manikin adapter (VitalSim manikin to Sim	\$83.00	\$80.51	\$402.55
7	204-30001PP	SimPad PLUS Protection Plan Replacement SimPad remote in the event of non-warranty product failure (spills, immersion in water, breakage due to drops). The plan allows for 3 instances of free remote replacement during a 2 yr period and does not cover instances of theft/loss.	\$912.00	\$784.32	\$5,490.24
3	325-05050PMC	Nursing Anne PM Complete Includes 1 service (on site), full refurb/replacement of consumables, some bladders, pad sets, refurb of IV arm skin/veins, inspect compr/lbox, upgrade SW, cleaning, final inspection, documentation of findings/recommendations.	\$1,700.00	\$1,598.00	\$4,794.00
4	325-05050PMC	Nursing Anne PM Complete Includes 1 service (on site), full refurb/replacement of consumables, some bladders, pad sets, refurb of IV arm skin/veins, inspect compr/lbox, upgrade SW, cleaning, final inspection, documentation of findings/recommendations.	\$1,700.00	\$1,598.00	\$6,392.00
1	SMS6566C	NLN V1 SimPad Cap 20 Scenarios The set contains 10 medical and 10 surgical scenarios developed for undergraduate nursing programs.	\$3,540.00	\$3,540.00	\$3,540.00
1	215-99950	Identified SimStore content SMS7219C - Newborn Assessment - Big Baby for LLEAP SimBaby	\$300.00	\$300.00	\$300.00
1	215-99950	Identified SimStore content SMS7228C - Newborn Assessment - Discharge for LLEAP SimBaby	\$300.00	\$300.00	\$300.00
1	215-99950	Identified SimStore content SMS7225C - Newborn Assessment - Immediately after Delivery for LLEAP SimBaby	\$300.00	\$300.00	\$300.00

ITEM TOTAL: \$79,595.64
ESTIMATED TAX: \$4,716.19
SHIPPING & HANDLING: \$472.98
TOTAL: \$84,784.81

There are various payment options; please see bottom of your quote for further clarification.
Appropriate Sales Tax will be added to invoice – Pricing and Availability are subject to change
Shipping/Handling costs will be added to invoice

Terms:

. Net 30 Days for approved open accounts; CIA; Credit Cards accepted. Financing options now available – sample leasing payment terms follow.
For additional information, ask your Inside Sales Representative listed above.

Lease term 24 months:	\$3,316.48*
Lease term 36 months:	\$2,210.99*
Lease term 48 months:	\$1,658.24*

*Quoted payments do not include Interest, Taxes, Maintenance, or Insurance. Quotes are subject to credit approval and may change without notice.

- . One(1) year warranty on manufactured products and 90 day warranty on refurbished products
- . Two(2) year parts replacement warranty with technical assistance by phone on all Hill-Rom refurbished products
- . Delivery of product to a specific location within your building, if requested is at an additional charge and not included in this quote
- . Quotes that included training. Training must be booked and performed 1 year from installation. The training obligation expires one year from install

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95



3828 WEST CALDWELL VISALIA, CA 93277 (559) 734-9000

COMERICA
5200 N. PALM AVENUE, STE. 320
FRESNO, CA 93704

NO. 381152

90-3752/1211

PAY **EXACTLY 70,455 dols 95 cts**

DATE AMOUNT
11/1/2016 *****70,455.95*

COPY COPY COPY COPY

TO THE ORDER OF LAERDAL MEDICAL CORPORATION
Lockbox #4987
PO Box 8500
Philadelphia, PA 19178

VOID IF NOT CASHED IN 180 DAYS

NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95

Invoice no: 2016/2000097933



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RECEIVED
OCT 17 2016

Bill-to: 00104762

San Joaquin Valley College
5607 Avenida De Los Robles
Visalla, CA 93291

Ship-to: 02243084

SAN JOAQUIN VALLEY COLLEGE
8233 WEST HILLSDALE CT, STE 2
VISALIA CAMPUS-RAJVIR LADHAR
VISALIA, CA 93291

BY: _____

Invoice date: 10/07/2016
Payment due: 11/06/2016
Credit Terms: NET 30 DAYS
Attention:
Phone: 559 734 9000
Fax: 559 734 9044

OK NO

Delivery Terms: FOB
Ship via: Collect shipping billed to customer

Remark: ALISA POWELL FOR CUST
Purchase Order: 0105337
Salesorder no.: 2163250
BOL: 3PL1671186

Date 1/1/
P.O. # 105337 Rows 20-21
Batch # _____ Order date: 09/28/2016
RECEIPT # 120477 Ship date: 10/07/2016
USER I.D. _____

Ln	Item no.	UM	Inv Qty	Back Ord	Unit price	Disc%	Net price	Amount
3	204-50150 LLEAP for SimPad PLUS	EA	1	6	2,500.00	14.00	2,150.00	2,150.00
<i>This is a non-physical item</i>								

Net amount: 2,150.00

Order total without tax: 2,150.00
Tax amount: 177.38
Total USD: 2,327.38

Company address:
Laerdal Medical Corporation
187 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 764987

PHILADELPHIA, PA 19178-4987

Page 1 of 1

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381560

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
10/11/2016	2000098956		25.11	0.00	25.11
10/12/2016	2000099333		13,964.25	0.00	13,964.25
10/14/2016	2000100333		59.54	0.00	59.54
10/17/2016	2000100607	B8743	125.55	0.00	125.55
10/17/2016	2000100616		625.14	0.00	625.14
10/18/2016	2000101054		1,459.75	0.00	1,459.75
10/19/2016	2000101681		213.66	0.00	213.66
10/25/2016	2000103655		943.38	0.00	943.38
10/25/2016	2000103658		867.35	0.00	867.35
10/25/2016	2000103728		1,456.38	0.00	1,456.38
10/26/2016	2000104166		1,528.18	0.00	1,528.18
10/26/2016	2000104194		1,283.01	0.00	1,283.01

Check: 381560 11/15/2016 LAERDAL MEDICAL CORPORATION Check Total: 22,551.30



3828 WEST CALDWELL VISALIA, CA 93277 (559) 734-9000

COMERICA
5200 N. PALM AVENUE, STE. 320
FRESNO, CA 93704

NO. 381560

90-3752/1211

PAY

EXACTLY 22,551 dols 30 cts

DATE AMOUNT
11/15/2016 *****22,551.30*

TO THE ORDER OF LAERDAL MEDICAL CORPORATION
Lockbox #4987
PO Box 8500
Philadelphia, PA 19178

COPY COPY COPY COPY

VOID IF NOT CASHED IN 180 DAYS

NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381560

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
10/11/2016	2000098956		25.11	0.00	25.11
10/12/2016	2000099333		13,964.25	0.00	13,964.25
10/14/2016	2000100333		59.54	0.00	59.54
10/17/2016	2000100607	B8743	125.55	0.00	125.55
10/17/2016	2000100616		625.14	0.00	625.14
10/18/2016	2000101054		1,459.75	0.00	1,459.75
10/19/2016	2000101681		213.66	0.00	213.66
10/25/2016	2000103655		943.38	0.00	943.38
10/25/2016	2000103658		867.35	0.00	867.35
10/25/2016	2000103728		1,456.38	0.00	1,456.38
10/26/2016	2000104166		1,528.18	0.00	1,528.18
10/26/2016	2000104194		1,283.01	0.00	1,283.01

Check: 381560 11/15/2016 LAERDAL MEDICAL CORPORATION Check Total: 22,551.30



Laerdal
helping save lives

Invoice no: 2016/2000099333

Bill-to: 00104762

San Joaquin Valley College
5607 Avenida De Los Robles
Visalia, CA 93291

RECEIVED
OCT 21 2016

BY: _____

Ship-to: 02243084

SAN JOAQUIN VALLEY COLLEGE
8233 WEST HILLSDALE CT, STE 2
VISALIA CAMPUS-RAJVIR LADHAR
VISALIA, CA 93291

Invoice date: 10/12/2016
Payment due: 11/11/2016
Credit Terms: NET 30 DAYS
Attention:
Phone: 559 734 9000
Fax: 559 734 9044

Delivery Terms: FOB
Ship via: Collect shipping billed to customer

Remark: ALISA POWELL FOR CUST
Purchase Order: 0105337
Salesorder no.: 2163250
BOL: 3PL1671186

Oh No

Order date: 09/28/2016
Ship date: 10/12/2016

Ln	Item no.	UM	Inv Qty	Back Ord	Unit price	Disc%	Net price	Amount
3	204-50150 LLEAP for SimPad PLUS	EA	6.00	0	2,500.00	14.00	2,150.00	12,900.00

This is a non-physical item

Date 10/12/2016

P.O. # 105337

BATCH # _____

RECEIPT # 170476

USER I.D. _____

Net amount: 12,900.00

PO 105337

Rows 17-18

Order total without tax: 12,900.00
Tax amount: 1,064.25
Total USD: 13,964.25

Company address:
Laerdal Medical Corporation
167 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 784987

PHILADELPHIA, PA 19178-4987

Page 1 of 1

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95



3828 WEST CALDWELL VISALIA, CA 93277 (559) 734-9000

COMERICA
5200 N. PALM AVENUE, STE. 320
FRESNO, CA 93704

NO. 381152

90-3752/1211

PAY **EXACTLY 70,455 dols 95 cts**

DATE: 11/1/2016 AMOUNT: *****70,455.95*

COPY COPY COPY COPY

TO THE ORDER OF LAERDAL MEDICAL CORPORATION
Lockbox #4987
PO Box 8500
Philadelphia, PA 19178

VOID IF NOT CASHED IN 180 DAYS

NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95



Laerdal
helping save lives

Invoice no: 2016/2000095889

Bill-to: 00104762

San Joaquin Valley College
5607 Avenida De Los Robles
Visalia, CA 93291

RECEIVED
OCT 11 2016

BY: _____

Ship-to: 02243084

SAN JOAQUIN VALLEY COLLEGE
8233 WEST HILLSDALE CT, STE 2
VISALIA CAMPUS-RAJVIR LADHAR
VISALIA, CA 93291

Invoice date: 09/30/2016
Payment due: 10/30/2016
Credit Terms: NET 30 DAYS
Attention:
Phone: 559 734 9000
Fax: 559 734 9044

Date 1/1

P.O. # 105337

BATCH # _____

RECEIPT # 170474

USER I.D. _____

Delivery Terms: FOB
Ship via: 7 Collect shipping billed to customer

Rows 8-10

Remark: ALISA POWELL FOR CUR
Purchase Order: 0105337
Salesorder no.: 2163250
BOL: 3PL1670168

Order date: 09/28/2016
Ship date: 09/30/2016

OK row

Ln	Item no.	UM	Inv Qty	Back Ord	Unit price	Disc%	Net price	Amount
9	SMS6566C Simulation in Nursing Education - Medical-Surgical Scenarios (Capital)	EA	1	0	3,540.00	0.00	3,540.00	3,540.00
10	215-99950 Identified SimStore Content	EA	1	0	300.00	0.00	300.00	300.00
11	215-99950 Identified SimStore Content	EA	1	0	300.00	0.00	300.00	300.00
12	215-99950 Identified SimStore Content	EA	1	0	300.00	0.00	300.00	300.00

Company address:
Laerdal Medical Corporation
167 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 784987

PHILADELPHIA, PA 19178-4987

Page 1 of 2



Laerdal

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Invoice no: 2016/2000095889

Bill-to: 00104762 San Joaquin Valley College

Net amount: 4,440.00

Order total without tax: 4,440.00

Tax amount: 0.00

Total USD: 4,440.00

Company address:
Laerdal Medical Corporation
167 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 784987

PHILADELPHIA, PA 19178-4987

Page 2 of 2

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95



3828 WEST CALDWELL VISALIA, CA 93277 (559) 734-9000

COMERICA
5200 N. PALM AVENUE, STE. 320
FRESNO, CA 93704

NO. 381152

90-3752/1211

PAY **EXACTLY 70,455 dols 95 cts**

DATE: 11/1/2016 AMOUNT: *****70,455.95*

TO THE ORDER OF LAERDAL MEDICAL CORPORATION
Lockbox #4987
PO Box 8500
Philadelphia, PA 19178

COPY COPY COPY COPY

VOID IF NOT CASHED IN 180 DAYS

NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95



Laerdal
helping save lives

Invoice no: 2016/2000095475

Bill-to: 00104762

San Joaquin Valley College
5607 Avenida De Los Robles
Visalia, CA 93291

RECEIVED
OCT 11 2016

BY: _____

Ship-to: 02243084

SAN JOAQUIN VALLEY COLLEGE
8233 WEST HILLSDALE CT, STE 2
VISALIA CAMPUS-RAJVIR LADHAR
VISALIA, CA 93291

Invoice date: 09/29/2016
Payment due: 10/29/2016
Credit Terms: NET 30 DAYS
Attention:
Phone: 559 734 9000
Fax: 559 734 9044

Date 10/11/2016
P.O. # 105337
BATCH # _____
RECEIPT # 170473
USER ID. _____

Rows 1-6

Delivery Terms: FOB
Ship via: Collect shipping billed to customer

Remark: ALISA POWELL FOR CUST
Purchase Order: 0105337
Salesorder no.: 2163250
BOL: 3PL1670168

Order date: 09/28/2016
Ship date: 09/29/2016

OK ✓
How

Ln	Item no	UM	Inv Qty	Back Ord	Unit price	Disc%	Net price	Amount
1	325-05050 Nursing Anne (SimPad Capable)	EA	3	0	5,045.00	14.00	4,338.70	13,016.10
	Lot/serial no.:		1 X 325UMS3316005		1 X 325UMS3416002		1 X 325UMS3416003	
4	400-29301 All-In-One Panel PC (US) Instructor - Patient Monitor	EA	7	0	3,155.00	5.00	2,997.25	20,980.75
5	200-30450 Manikin adapter VitalSim manikin to Simpad	EA	5	0	83.00	3.00	80.51	402.55
7	325-05050PMC Nursing Anne Prev Maint Customer Site <i>This is a non-physical item</i>	EA	3	0	1,700.00	6.00	1,598.00	4,794.00
8	325-05050PMC Nursing Anne Prev Maint Customer Site <i>This is a non-physical item</i>	EA	4	0	1,700.00	6.00	1,598.00	6,392.00

Company address:
Laerdal Medical Corporation
167 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 784987

PHILADELPHIA, PA 19178-4987

Page 1 of 2



Laerdal

helping save lives

Invoice no: 2016/2000095475

Bill-to: 00104762 San Joaquin Valley College

Net amount: 45,585.40

Order total without tax:	<u>45,585.40</u>
Tax amount:	<u>2,837.95</u>
Total USD:	<u>48,423.35</u>

Company address:
Laerdal Medical Corporation
167 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 784987

PHILADELPHIA, PA 19178-4987
Page 2 of 2

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95



3828 WEST CALDWELL VISALIA, CA 93277 (559) 734-9000

COMERICA
5200 N. PALM AVENUE, STE. 320
FRESNO, CA 93704

NO. 381152

90-3752/1211

PAY **EXACTLY 70,455 doIs 95 cts**

DATE AMOUNT
11/1/2016 *****70,455.95*

TO THE ORDER OF LAERDAL MEDICAL CORPORATION
Lockbox #4987
PO Box 8500
Philadelphia, PA 19178

COPY COPY COPY COPY

VOID IF NOT CASHED IN 180 DAYS

NON-NEGOTIABLE NON-NEGOTIABLE NON-NEGOTIABLE

SAN JOAQUIN VALLEY COLLEGE INC. Visalia, California 93277

NO. 381152

Date	Invoice Number	Comment	Amount	Discount Amount	Net Amount
9/29/2016	2000095475		48,423.35	0.00	48,423.35
9/30/2016	2000095889		4,440.00	0.00	4,440.00
10/4/2016	2000096667		15,265.22	0.00	15,265.22
10/7/2016	2000097933		2,327.38	0.00	2,327.38

Check: 381152 11/1/2016 LAERDAL MEDICAL CORPORATION Check Total: 70,455.95



Laerdal
helping save lives

Invoice no: 2016/2000096667

Bill-to: 00104762

San Joaquin Valley College
5607 Avenida De Los Robles
Visalia, CA 93291

RECEIVED
OCT 14 2016

BY: _____

Ship-to: 02243084

SAN JOAQUIN VALLEY COLLEGE
8233 WEST HILLSDALE CT, STE 2
VISALIA CAMPUS-RAJVIR LADHAR
VISALIA, CA 93291

Invoice date: 10/04/2016
Payment due: 11/03/2016
Credit Terms: NET 30 DAYS
Attention:
Phone: 559 734 9000
Fax: 559 734 9044

Date 10/11/16
P.O. # 105337
BATCH # _____
RECEIPT # 120475
USER I.D. _____

Delivery Terms: FOB
Ship via: Collect shipping billed to customer

Remark: ALISA POWELL FOR CUST
Purchase Order: 0105337
Salesorder no.: 2163250
BOL: 3PL1671186

Order date: 09/28/2016
Ship date: 10/04/2016

Oh good

Ln	Item no.	UM	Iny Qty	Back Ord	Unit price	Disc%	Net price	Amount
2	204-30001 SimPad PLUS System (US)	EA	7	0	1,500.00	14.00	1,290.00	9,030.00
	Lot/serial no.:							
			1 X TSBG07016019		1 X TSBG07016041		1 X TSBG07016103	
			1 X TSBG07016118		1 X TSBG07016131		1 X TSBG07016146	
			1 X TSBG07016150					
6	204-30001PP SimPad PLUS Protection Plan	EA	7	0	912.00	14.00	784.32	5,490.24
	<i>This is a non-physical item</i>							

PO 105337 Rows 13-13

Company address:
Laerdal Medical Corporation
167 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 784967

PHILADELPHIA, PA 19178-4987

Page 1 of 2



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helping save lives

Invoice no: 2016/2000096667

Bill-to: 00104762 San Joaquin Valley College

Net amount: 14,520.24

Order total without tax:	<u>14,520.24</u>
Tax amount:	<u>744.98</u>
Total USD:	<u>15,265.22</u>

Company address:
Laerdal Medical Corporation
167 Myers Corners Rd
Wappingers Falls, NY 12590

Phone: (800) 431-1055
Fax: (800) 227-1143

E-mail: customerservice@laerdal.com
Web page: www.Laerdal.com

Remittance Address:
LAERDAL MEDICAL CORPORATION
LOCKBOX 784987

PHILADELPHIA, PA 19178-4987
Page 2 of 2