



## AGENDA ITEM

### Consent Agenda

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**REPORT TO:** Work Session (09/08/26)

**REPORT TO:** Voting Meeting (09/10/26)

**ITEM NO:** 578/2026

**SUBJECT:** Approve the sole source purchase of two (2) Lucas Chest Compression Systems and two (2) Stryker Ambulance Stretchers for Fire Rescue to Stryker Medical of Chicago, IL, in the amount of \$114,006.04.

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#### Meetings:

**Work Session Date:** 09/08/26

**Voting Meeting Date:** 09/10/26

#### Executive Summary:

**Presenter:** CJS

**Recommendation:**  
Approve.

#### Purpose of Request:

Approve the sole source purchase of two (2) Lucas Chest Compression Systems and two (2) Stryker Ambulance Stretchers for Fire Rescue to Stryker Medical of Chicago, IL, in the amount of \$114,006.04.

#### History:

To maintain continuity, the department standardized to the Lucas compression system by Stryker for mechanical CPR devices. The department currently has 21 units in service. All employees are trained on this unit. This also allows for more efficient inventory as the department does not have to stock multiple brands of supplies needed.

#### Facts and Issues:

Fire Rescue is replacing this equipment, two (2) LUCAS devices and two (2) Stryker Stretchers. This will allow Hall County Fire Rescue to continue providing the safest and optimal care possible. These devices will be replacing other units that have met their service expectancy.

#### Options:

##### Equipment:

Two (2) LUCAS devices, LUCAS 3, v3.1 Chest Compression System, Includes Hard Shell Case, Slim Back Plate, (2) Patient Straps, (1) Stabilization Strap, (2) Suction Cups, (1) Rechargeable Battery and Instructions for use With Each Device

Two (2) Stryker Stretchers, 6507 POWER PRO 2, HIGH CONFIG

**Funding Requested**

\$ 114,006.04

**Are funds within current budget?**

Yes

**Source of Funds**

Capital Projects Fund

**Does the action involve a Resolution, Ordinance, Contract, Agreement, etc.?**

Yes

**Has it been reviewed by the County Attorney?**

Yes

**Is there a deadline for this item?**

**Approvals:**

|               |                |                 |                       |
|---------------|----------------|-----------------|-----------------------|
| <b>Buyer</b>  | <b>submit</b>  | <b>approve</b>  | <b>Purchasing</b>     |
| JD            | JS             | JS              | AY                    |
| <b>Budget</b> | <b>Finance</b> | <b>Attorney</b> | <b>Administration</b> |
| JM            | TS             | JL              | CR                    |
| <b>Clerk</b>  |                |                 |                       |
| JR            |                |                 |                       |

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**Attachments:**

Financial Supplement

Stryker Quote 11340396

Hall County Power Pro 2 Stretcher Justification

Hall County LUCAS Device Justification

Sole Source - LUCAS Device

Sole Source - Power Pro 2



**HALL COUNTY BOARD OF COMMISSIONERS  
FINANCIAL SUPPLEMENT REPORT**

**AGENDA ITEM 578/2026**

**Funds Requested:** \$ 114,006.04

**Request Budgeted:** Yes

**Proposed Source of Funding:**

**Budget Transfer Requested:**

Capital Projects Fund

No

**Funding Source Items:**

| Fiscal Year | Fund                         | Division | Account                   | Amount       |
|-------------|------------------------------|----------|---------------------------|--------------|
| 2027        | 350-CAPITAL<br>PROJECTS FUND | 3630-EMS | 542500-OTHER<br>EQUIPMENT | \$114,006.04 |

**Budget Transfer Items:**

**Additional Information/Comments:**

**Contact for Questions:** BM

**Phone:** 678-343-0636