



DEPARTMENT VETERANS AFFAIRS
Authorized Federal Supply Schedule Price List

Medical Equipment and Supplies
FSC Group 66, Part III, Cost Per Test: Clinical Analyzers
FSC classes 6630

Contract Number: **V797P-7152a**
Contract Period: 04/09/08 thru 04/08/13
Contractor's name, address and phone number:
Sebia, Inc.
400-1705 Corporate Drive
Norcross, GA 30093
(800) 835-6497
Contracting Fax – 678-807-2900
Reagent Order Fax – 678-405-3705

E-mail address: linda.rehnberg@sebia-usa.com
Business Size: Small

CUSTOMER INFORMATION

1. Special Item Number
605-6A
2. Maximum Order:
\$0.00 (None)
3. Minimum Order:
\$800.00 per month for gel technology
\$2500.00 per month for Capillary technology
4. Geographic coverage:
50 US states, including Washington DC, and Puerto Rico
5. Point(s) of production:
Norcross, Gwinnett, Georgia
Paris, France
6. Prices shown herein are net (discount deducted).
7. Quantity discounts:
Refer to Cost-per-test Matrices
8. Prompt payment terms:
None, Net 30 days
- 9a. Government commercial credit card is accepted:
Yes
- 9b. Discount for payment by Government commercial credit card:
None
10. Foreign items (list items by country of origin):
All items. Paris, France
- 11a. Time of delivery: Within 30 days ARO for instruments.
Within 2 business days ARO for reagents and consumables.
- 11b-d. Expedited delivery, overnight and 2-day delivery, and urgent requirements:
Orders received between 8:30 AM to 4:00 PM EST Monday through Thursday,
will be shipped via FedEx overnight service if available. Products will not be
shipped on Friday due to the perishable nature of the products unless

approved by Sebia Customer Service department. Emergency orders must be placed by 5:30 PM EST and approved by Sebia Customer Service department. For AM and/or Saturday delivery, the customer will pay the difference between standard and expedited delivery charges.

12. F.O.B. point(s)
Destination; 50 states and District of Columbia with Point of Exportation to Puerto Rico.
13. Ordering address:
Sebia, Inc.
400-1705 Corporate Drive
Norcross GA 30093
Contracting Fax – 678-807-2900
Reagent Order Fax – 678-405-3705
14. Payment address:
Sebia, Inc.
400-1705 Corporate Drive
Norcross GA 30093
15. Warranty provision:
Reagent Rental: 5-year warranty and any additional option year
Capital Purchase: 1 yr warranty
16. Export packing charges:
N/A
17. Terms and conditions of Government commercial credit card acceptance:
Accepted up to and over the micro-purchase threshold. A Sebia credit card authorization form must be completed by each facility prior to installation.
18. Terms and conditions of rental, maintenance and repair:
SERVICE: Sebia provides on-sight service during normal business hours M-F 8:00 AM to 5:00 PM excluding national company observed holidays. A 24-hour telephone hot-line support service is available 365 days per year via Sebia's toll free number for all service options. Service telephone response will occur *within* 4 hours of receipt of call at our home office in Norcross, Georgia, or the toll-free hotline. On-site presence will be within one (1) business day following the dispatch from Sebia, Inc. Part orders may be placed on company business days, M-F 8:30 AM to 5:30 PM Eastern Time, via our toll-free number, with delivery to most geographic locations within 24 hours. The Sebia hot-line support representative will schedule the required service and/or parts delivery.
Sebia will perform one (1) annual electrical and mechanical calibration procedure on each covered system during the term of this warranty period. Should a service required incident occur, Sebia will repair the instrumentation, inspect the instrument, perform an operation accuracy check on the system and review the maintenance logbook. Sebia will be responsible for all travel, parts, and labor costs.
Sebia will first attempt to resolve all service-related issues via telephone contact. If this action is not successful, Sebia at its discretion will dispatch a company certified representative for on-site inspection and repair.
Sebia may, alternatively, (at its discretion) ship a loaner instrument, at Sebia's expense, to arrive at the customer site within 24 hours in most geographic areas (48 hours to Alaska and Hawaii and point of exportation to Puerto

Rico). If a loaner instrument is provided, it will be the responsibility of the customer to install the loaner instrument and crate for return to Sebia, at Sebia's expense, the instrument requiring service. After repairs are completed, the customer's instrument will be returned, at Sebia's expense, and the customer will crate and return to Sebia the loaner instrument and accessories. Sebia will provide the customer with a copy of The Instrument Return Procedure, returned goods authorization number and a prepaid shipping label.

The customer is responsible for the cost of replacement for any company-deemed consumables for use on any part of the covered equipment. This will include, but not be limited to, printer cartridges, printer paper and capillaries. (Capillary replacement is Sebia's financial responsibility ONLY if it is determined that the replacement is necessary due to equipment failure and not operator fault. This is solely to the discretion of authorized Sebia personnel.)

Any and all replacements of components and/or instruments are at the complete discretion of the authorized Sebia personnel, during the term of this agreement.

NETWORKING/INTERFACING SERVICE SUPPORT: Given that most government laboratories use a similar LIS (standardized), Sebia will, in addition to providing each lab with interface manuals and up to \$3,000 in interface costs, offer up to four hours of LIS phone support for each individual government laboratory requiring LIS support. After the four hours of phone support, additional LIS phone support will be available for a government rate of \$200.00 per hour in 60 minute increments, minimum of (1) one hour. Any and all *on-site* support by Sebia factory authorized personnel, is subject to a labor and travel rate of \$350/hr, per person, in one hour increments, with a minimum charge of (2) two hours each and a maximum travel charge of eight (8) hours, portal-to-portal. If the Sebia equipment is found to be at fault for the initial issue, Sebia reserves the right to replace all said equipment at no additional charge to the customer.

LIABILITIES: Sebia assumes no liability for clinical interpretation and patient care from images generated by software systems included within Sebia systems. Adding any software programs, excluding interfacing, to the CPU/system and/or removing any software that has been previously loaded onto the CPU/system by Sebia requires written approval from Sebia, including but not limited to anti-virus or anti-spyware software.

Attaching or removing any peripheral devices requires approval from Sebia.

** Any violation of these guidelines will void the Sebia warranty and/or service agreement on the instrument affected. If service is required because of a lack of adherence to these guidelines, the customer will be charged at the current service rate for any required service on the system including parts, travel, labor and all other associated expenses. Sebia will not be responsible for any loss of data or downtime. A purchase order must be received by Sebia prior to a service engineer being dispatched for the service on the affected instrument.

EXCLUSIONS: Sebia shall not be responsible for any failure of the instrument arising from unauthorized modifications to the instrument; attachment of any device to the instrument without prior written

approval/technical input from Sebia; lack of regular maintenance as outlined in the Customer Maintenance Program; use of the equipment in a manner or for an application or function other than that for which it was intended. The following occurrences are outside the scope of this agreement:

- Electrical work external to the instrument or service of accessories, attachments or other devices not furnished by Sebia.
- Repair or damage resulting from misuse or external causes, including accident, misuse, theft, neglect, natural causes, transportation, failure or surge of electric power, air conditioning or humidity (misuse shall mean any practice or procedure prohibited by applicable specifications, the instrument operator's manual, or service by anyone other than designated Sebia personnel, which in Sebia's reasonable opinion leads to a malfunction or damage of the equipment).
- Replacement of damaged glassware (excluding capillaries).
- Movement of instrument without Sebia authorized personnel present, unless authorized via writing, by an authorized Sebia agent.
- Relocation of instrument to an alternate site. If the instrument is to be relocated the customer will give Sebia reasonable notice and, if deemed necessary by Sebia; a new service contract will be negotiated.
- In no event shall Sebia be liable for special, indirect or consequential damages.

Laboratory Accident/Error: All assay components are provided in kit format only. In the event of a laboratory accident or if the manufacturer's instructions which are provided in the assay package inserts are not followed resulting in component(s) that are damaged, replacement component(s) are available for purchase on an emergency basis with Sebia technical approval.

19. Terms and conditions of installation:
Tax exemption certificates must be received in the Sebia Norcross office from each facility prior to installation. A placement agreement must be reviewed and signed once the installation of the Sebia system has been completed. All requirements listed on Part IV Cost-per-reportable-result offer sheet, C. Technical Data sheet, line item 10, must be met.
20. Terms and conditions of repair parts:
Parts requested by the customer and deemed necessary by Sebia, will be shipped F.O.B. destination, to the customer's location within 24 hours (48 hours to Hawaii and Alaska and point of exportation to Puerto Rico). Sebia will cover all travel, parts and labor costs.
21. List of service and distribution points:
Nationwide
22. List of participating dealers:
N/A
23. Preventative maintenance:
Annual PM
24. Environmental attributes:
Non bio-hazardous reagents. Requires no special disposal.

- 25. DUNS number:
02-099-1787
- 26. CCR registration number: 1998G102714

RETURN GOODS AUTHORIZATION

Due to the perishable nature of the products, any discrepancies must be reported to the Sebia Norcross office (800-835-6497) within 5 working days. The Customer Service Representative will assign a Return Goods Authorization number and the proper paperwork will be faxed to the facility. Please follow the instructions on the Return Goods Authorization form.



Sebia Inc..
400-1705 Corporate Dr
Norcross, GA 30093
Telephone 770.446.3707 Toll Free 800.835.6497
Facsimile 770.446.8511

PARTS - RETURN GOODS AUTHORIZATION

RGa NUMBER: _____

Date:

RGa VALID FOR 7 DAYS
EXPIRES:

Customer:

City/State:

Attn:

Table with 5 columns: CATALOG NUMBER, QTY, DESCRIPTION, LOT/SERIAL NUMBER, REASON CODE

REASON:

PLEASE SHIP PRODUCT BACK AS FOLLOWS:

- VIA FEDEX GROUND SERVICE ACCT #273984488
TO THE ATTENTION OF RECEIVING
NOTE THE RGA # ON THE OUTSIDE OF THE BOX.
PRODUCT MUST BE PACKAGED SECURELY TO AVOID DAMAGE.

A. CUSTOMER TO COMPLETE

CUSTOMER SHIPPING LIABILITY: (Tulane University) AND ALL PARTIES involved in the return of the above specified goods assume complete responsibility for any product(s) that is received damaged or is rendered unusable if the shipping instructions are not adhered to.

Customer Signature Accepting Terms Liability _____ (Signature)
Date: _____ (Print Name)

B. SEBIA CUSTOMER SERVICE TO COMPLETE

Sebia Inc. Return Authorization _____ (Signature)
Date: _____ (Print Name)

C. SEBIA DISTRIBUTION SERVICE TO COMPLETE

Received By _____ Date Received _____
Tracking # _____

Condition of product upon receipt: _____

SEBIA INC. WILL NOT BE RESPONSIBLE FOR ANY PRODUCT (S) THAT IS DAMAGED IN SHIPPING OR RENDERED UNUSABLE IF THESE INSTRUCTIONS ARE NOT ADHERED TO.

Sebia Inc.
 400-1705 Corporate Dr.
 Norcross, GA 30093
 Telephone 770.446.3707 Toll Free 800.835.6497
 Facsimile 770.446.8511

KIT RETURN GOODS AUTHORIZATION

RGa NUMBER: _____

Date: _____ **Order #** _____

**RGa VALID FOR 7 DAYS
 EXPIRES:**

CUST ID:
Institution:
Address:
City/State/ZIP:
Attn:
Phone #:

CATALOG NUMBER	QTY	DESCRIPTION	LOT/SERIAL NUMBER	REASON CODE

REASON:

**RE: SHIPPING INSTRUCTIONS AND RETURN AUTHORIZATION FOR MEDICAL SUPPLIES.
 FOR YOUR IMMEDIATE ATTENTION - SIGNATURE REQUIRED-PLEASE FAX BACK.**

SHIPPING INSTRUCTIONS FOR RETURN OF PERISHABLE MEDICAL SUPPLIES:

- **VIA FEDEX NEXT DAY SERVICE ACCT #273984488**
- **TO THE ATTENTION OF RECEIVING**
- **NOTE THE RGA # ON THE OUTSIDE OF THE BOX.**
- **PRODUCT MUST BE PACKAGED SECURELY TO AVOID DAMAGE.**

CUSTOMER SHIPPING LIABILITY: AND ALL PARTIES involved in the return of the above specified goods assume complete responsibility for any product(s) that is received damaged or is rendered unusable if the shipping instructions are not adhered to. Credit will not be issued on product that is shipped incorrectly and damaged en route.

A. CUSTOMER TO COMPLETE

Customer Signature Accepting Terms Liability _____ (Signature)
Date: _____ (Print Name)

B. SEBIA CUSTOMER SERVICE TO COMPLETE

Sebia Inc. Return Authorization _____ (Signature)
Date: _____ Melissa Toodle(Print Name)

C. SEBIA DISTRIBUTION SERVICE TO COMPLETE

Received By _____ Date Received _____
 Tracking # _____

Condition of product upon receipt: _____

**SEBIA INC. WILL NOT BE RESPONSIBLE FOR ANY PRODUCT (S) THAT IS DAMAGED IN SHIPPING OR
 RENDERED UNUSABLE IF THESE INSTRUCTIONS ARE NOT ADHERED TO.**

If you have any difficulties receiving this transmission, please call us immediately

COST PER TEST PROGRAM GUIDELINES

1. The Cost Per Test contract includes instrumentation, computer interface (\$3,000.00 maximum), service, reagents, Sebia controls, Sebia consumables, training, shipping, installation, removal and 0.5% Industrial Funding Fee.
2. Sebia does not make calibrators and additional controls for the tests. There are no costs included for any products not produced by Sebia. This would include pipette tips, printer paper, ink cartridges, etc.
3. Sebia equipment does not have internal counting mechanisms. Reagents will be billed at time of shipment based on a cost per kit. (Cost per test x number of tests per kit).
4. Cost per test program includes reagent spaces on gel for running control but does not include cost of control materials not produced by Sebia. No calibrators are required for Sebia systems.
5. For each laboratory that decides to interface either the Hyrys 2 or the Phoresis Scanning System, Sebia will pay to up \$3,000.00 of the interfacing costs directly to the LIS company. It will be the responsibility of the individual laboratory to notify Sebia of the dates of implementation for interfacing so that a purchase order can be issued directly to the interfacing company. If the contract is cancelled within 36 months of the installation of the interfacing, the laboratory will be responsible for repaying Sebia the total amount due of the interfacing costs.
6. Once the Hyrys 2 or Phoresis Scanning System has been placed for use or has been interfaced by the individual laboratory, there will be \$5,000.00 retraining and refurbishment fee for swapping out the instrumentation for the other selection. The cost for interfacing of the second instrument will be the responsibility of the individual laboratory. Please review the brochures and discuss with the Sebia Product Specialist or Territory Manager to determine the needs of the laboratory.

**Cost-Per-Test Pricing
Hydrasys LC Matrix**
Includes a Hydrasys LC and choice of Hyrys 2 or Phoresis

Assay	Product	Tests Per Kit	Tests Per Month			
			1-20	21-40	41-60	61+
7 Chol - HDL	4103	70	\$4.52	\$4.21	\$3.84	\$3.54
15 Chol - HDL	4123	150	\$2.47	\$2.30	\$2.10	\$1.93
30 Chol - HDL	4143	300	\$1.77	\$1.65	\$1.51	\$1.39
7 Lipo	4114	70	\$3.57	\$3.32	\$3.03	\$2.79
15 Lipo	4134	150	\$2.17	\$2.02	\$1.85	\$1.70
30 Lipo	4138	300	\$1.90	\$1.77	\$1.62	\$1.49
7 Hgb A1c	4107	70	\$4.57	\$4.26	\$3.88	\$3.58
15 Hgb A1c	4127	150	\$2.48	\$2.31	\$2.11	\$1.94
1 Immunofixation - Dynamic Mask	4301	10	\$22.39	\$21.37	\$20.10	\$19.04
2 Immunofixation - Dynamic Mask	4302	20	\$19.15	\$17.65	\$15.85	\$14.36
4 Immunofixation - Dynamic Mask	4304	40	\$16.97	\$15.68	\$14.16	\$12.87
9 Immunofixation - Dynamic Mask	4309	90	\$16.65	\$15.41	\$13.93	\$12.70
4 Immunofixation Maxi Kit - Dynamic Mask	4381	320	\$19.14	\$17.83	\$16.27	\$14.99
9 Immunofixation Maxi Kit - Dynamic Mask	4382	720	\$18.38	\$17.12	\$15.62	\$14.40
1 Bence Jones - Dynamic Mask	4321	10	\$20.27	\$19.27	\$18.02	\$16.96
2 Bence Jones - Dynamic Mask	4322	20	\$15.95	\$14.32	\$12.36	\$10.68
4 Bence Jones - Dynamic Mask	4324	40	\$13.61	\$12.26	\$10.63	\$9.25
6 IF Penta - Dynamic Mask	4341	60	\$10.53	\$9.61	\$8.51	\$7.58
12 IF Penta - Dynamic Mask	4342	120	\$8.36	\$7.64	\$6.79	\$6.07
12 IF Penta Maxi - Dynamic Mask	4384	960	\$10.77	\$10.03	\$9.15	\$8.44
3 CSF - Dynamic Mask	4350	30	\$26.73	\$24.91	\$22.73	\$20.95
6 CSF - Dynamic Mask	4351	60	\$23.12	\$21.54	\$19.65	\$18.11
3 CSF IEF - Dynamic Mask	4353	30	\$29.87	\$27.83	\$25.39	\$23.40
9 CSF IEF - Dynamic Mask	4355	90	\$25.86	\$24.09	\$21.99	\$20.27
1 Immunofixation - Standard Mask	4801	10	\$21.85	\$20.83	\$19.57	\$18.51
2 Immunofixation - Standard Mask	4802	20	\$18.61	\$17.11	\$15.32	\$13.83
4 Immunofixation - Standard Mask	4804	40	\$15.35	\$14.08	\$12.56	\$11.28
9 Immunofixation - Standard Mask	4809	90	\$17.82	\$16.57	\$15.07	\$13.85
1 Bence Jones - Standard Mask	4821	10	\$18.77	\$17.78	\$16.55	\$15.49
2 Bence Jones - Standard Mask	4822	20	\$14.44	\$12.83	\$10.89	\$9.21
4 Bence Jones - Standard Mask	4824	40	\$10.10	\$8.78	\$7.19	\$5.80
9 Bence Jones Maxi Kit - Standard Mask	4883	720	\$20.78	\$19.36	\$17.66	\$16.28
6 Penta - Standard Mask	4841	60	\$12.64	\$11.71	\$10.58	\$9.66
12 Penta - Standard Mask	4842	120	\$9.87	\$9.16	\$8.27	\$7.55
7 ISO - LDH	4110	70	\$4.64	\$4.32	\$3.95	\$3.64
15 ISO - LDH	4130	150	\$2.51	\$2.34	\$2.13	\$1.97
7 Hgb	4106	70	\$3.47	\$3.23	\$2.95	\$2.72
15 Hgb	4126	150	\$2.10	\$1.95	\$1.79	\$1.64
7 Acid Hgb	4108	70	\$3.61	\$3.37	\$3.07	\$2.82
15 Acid Hgb	4128	150	\$2.23	\$2.08	\$1.89	\$1.74
7 ISO - CK	4111	70	\$6.08	\$5.66	\$5.16	\$4.76
15 ISO - CK	4131	150	\$3.19	\$2.97	\$2.71	\$2.50
30 ISO - CK	4137	300	\$1.95	\$1.81	\$1.65	\$1.53
7 ISO-PAL	4112	30	\$12.59	\$11.01	\$10.23	\$9.44
15 ISO-PAL	4132	70	\$7.39	\$6.47	\$6.01	\$5.55

Tests per month	Product	Tests Per Kit	Tests Per Month			
			1-100	101-200	201-300	301+
7 Protein	4100	70	\$3.28	\$3.12	\$2.78	\$2.57
15 Protein	4120	150	\$2.13	\$2.02	\$1.93	\$1.84
30 Protein	4140	300	\$1.61	\$1.53	\$1.45	\$1.40
54 Protein Maxi	4260	4,320	\$1.12	\$1.07	\$1.02	\$0.98
7 Protein B1B2	4101	70	\$3.43	\$3.25	\$3.10	\$2.97
15 Protein B1B2	4121	150	\$2.28	\$2.17	\$2.06	\$1.98
30 Protein B1B2	4141	300	\$1.90	\$1.81	\$1.72	\$1.65
54 Pro B1B2 Maxi	4261	4,320	\$1.24	\$1.18	\$1.12	\$1.08
7 HR	4102	70	\$4.65	\$4.42	\$4.20	\$4.03
15 HR	4122	150	\$2.56	\$2.44	\$2.31	\$2.23

*For each additional instrument, refer to 1 - 5 Year Additional Cost-Per-Test Pricing - Additional Instrument

Cost-Per-Test Pricing
Hydrasys Focusing Matrix
 Includes a Hydrasys Focusing and choice of either a Hyrys 2 or a Phoresis

Assay	Product	Tests Per Kit	Tests Per Month			
			1-20	21-40	41-60	61+
7 Chol - HDL	4103	70	\$4.65	\$4.33	\$3.96	\$3.65
15 Chol - HDL	4123	150	\$2.54	\$2.37	\$2.16	\$1.99
30 Chol - HDL	4143	300	\$1.83	\$1.70	\$1.55	\$1.43
7 Lipo	4114	70	\$3.67	\$3.42	\$3.12	\$2.88
15 Lipo	4134	150	\$2.24	\$2.08	\$1.91	\$1.75
30 Lipo	4138	300	\$1.96	\$1.82	\$1.66	\$1.54
7 Hgb A1c	4107	70	\$4.71	\$4.39	\$4.00	\$3.69
15 Hgb A1c	4127	150	\$2.55	\$2.38	\$2.17	\$2.00
1 Immunofixation - Dynamic Mask	4301	10	\$23.06	\$22.01	\$20.70	\$19.61
2 Immunofixation - Dynamic Mask	4302	20	\$19.72	\$18.18	\$16.33	\$14.79
4 Immunofixation - Dynamic Mask	4304	40	\$17.48	\$16.15	\$14.59	\$13.25
9 Immunofixation - Dynamic Mask	4309	90	\$17.15	\$15.87	\$14.35	\$13.08
4 Immunofixation Maxi Kit - Dynamic Mask	4381	320	\$19.71	\$18.36	\$16.75	\$15.44
9 Immunofixation Maxi Kit - Dynamic Mask	4382	720	\$18.93	\$17.64	\$16.09	\$14.83
1 Bence Jones - Dynamic Mask	4321	10	\$20.88	\$19.85	\$18.56	\$17.47
2 Bence Jones - Dynamic Mask	4322	20	\$16.43	\$14.75	\$12.73	\$11.01
4 Bence Jones - Dynamic Mask	4324	40	\$14.02	\$12.63	\$10.95	\$9.53
6 IF Penta - Dynamic Mask	4341	60	\$10.85	\$9.90	\$8.76	\$7.81
12 IF Penta - Dynamic Mask	4342	120	\$8.61	\$7.87	\$6.99	\$6.25
12 IF Penta Maxi - Dynamic Mask	4384	960	\$11.09	\$10.33	\$9.43	\$8.69
3 CSF - Dynamic Mask	4350	30	\$27.54	\$25.66	\$23.41	\$21.57
6 CSF - Dynamic Mask	4351	60	\$23.82	\$22.18	\$20.24	\$18.65
3 CSF IEF - Dynamic Mask	4353	30	\$30.76	\$28.66	\$26.15	\$24.10
9 CSF IEF - Dynamic Mask	4355	90	\$26.63	\$24.82	\$22.65	\$20.87
1 Immunofixation - Standard Mask	4801	10	\$22.51	\$21.46	\$20.15	\$19.06
2 Immunofixation - Standard Mask	4802	20	\$19.17	\$17.63	\$15.78	\$14.25
4 Immunofixation - Standard Mask	4804	40	\$15.81	\$14.50	\$12.93	\$11.62
9 Immunofixation - Standard Mask	4809	90	\$18.35	\$17.06	\$15.53	\$14.26
1 Bence Jones - Standard Mask	4821	10	\$19.33	\$18.32	\$17.04	\$15.95
2 Bence Jones - Standard Mask	4822	20	\$14.88	\$13.21	\$11.21	\$9.49
4 Bence Jones - Standard Mask	4824	40	\$10.40	\$9.04	\$7.40	\$5.98
9 Bence Jones Maxi Kit - Standard Mask	4883	720	\$21.40	\$19.94	\$18.19	\$16.76
6 Penta - Standard Mask	4841	60	\$13.02	\$12.06	\$10.90	\$9.95
12 Penta - Standard Mask	4842	120	\$10.17	\$9.43	\$8.52	\$7.78
7 ISO - LDH	4110	70	\$4.78	\$4.45	\$4.06	\$3.74
15 ISO - LDH	4130	150	\$2.58	\$2.41	\$2.19	\$2.02
7 Hgb	4106	70	\$3.57	\$3.33	\$3.04	\$2.80
15 Hgb	4126	150	\$2.16	\$2.01	\$1.84	\$1.69
7 Acid Hgb	4108	70	\$3.72	\$3.47	\$3.17	\$2.91
15 Acid Hgb	4128	150	\$2.29	\$2.14	\$1.95	\$1.80
7 ISO - CK	4111	70	\$6.26	\$5.83	\$5.32	\$4.90
15 ISO - CK	4131	150	\$3.29	\$3.06	\$2.80	\$2.58
30 ISO - CK	4137	300	\$2.00	\$1.87	\$1.70	\$1.57
7 ISO-PAL	4112	30	\$12.97	\$11.34	\$10.54	\$9.72
15 ISO-PAL	4132	70	\$7.61	\$6.66	\$6.19	\$5.72

Tests per month	Product	Tests Per Kit	Tests Per Month			
			1-100	101-200	201-300	301+
7 Protein	4100	70	\$3.37	\$3.21	\$2.87	\$2.64
15 Protein	4120	150	\$2.19	\$2.08	\$1.99	\$1.90
30 Protein	4140	300	\$1.66	\$1.58	\$1.50	\$1.44
54 Protein Maxi	4260	4,320	\$1.16	\$1.10	\$1.05	\$1.00
7 Protein B1B2	4101	70	\$3.53	\$3.35	\$3.19	\$3.06
15 Protein B1B2	4121	150	\$2.35	\$2.24	\$2.12	\$2.04
30 Protein B1B2	4141	300	\$1.96	\$1.86	\$1.77	\$1.70
54 Pro B1B2 Maxi	4261	4,320	\$1.28	\$1.21	\$1.16	\$1.11
7 HR	4102	70	\$4.79	\$4.55	\$4.32	\$4.15
15 HR	4122	150	\$2.64	\$2.51	\$2.38	\$2.29

*For each additional instrument, refer to 1 - 5 Year Additional Cost-Per-Test Pricing - Additional Instrument

1 - 5 Year Additional Cost-Per-Test Pricing
Additional Instrument - Hydrasys, Hydrasys Focusing, HydraPlus, Hyrrys 2 or Phoresis

Assay	Product Number	Tests Per Kit	Tests Per Month			
			1-20	21-40	41-60	61+
7 Chol - HDL	4103	70	\$0.88	\$0.81	\$0.75	\$0.69
15 Chol - HDL	4123	150	\$0.48	\$0.44	\$0.41	\$0.38
30 Chol - HDL	4143	300	\$0.35	\$0.33	\$0.30	\$0.28
7 Lipo	4114	70	\$0.69	\$0.65	\$0.59	\$0.54
15 Lipo	4134	150	\$0.45	\$0.42	\$0.39	\$0.36
30 Lipo	4138	300	\$0.38	\$0.35	\$0.32	\$0.30
7 Hgb A1c	4107	70	\$0.89	\$0.82	\$0.76	\$0.70
15 Hgb A1c	4127	150	\$0.49	\$0.45	\$0.41	\$0.38
1 Immunofixation - Dynamic Mask	4301	10	\$5.91	\$5.64	\$5.31	\$5.03
2 Immunofixation - Dynamic Mask	4302	20	\$4.32	\$4.03	\$3.68	\$3.39
4 Immunofixation - Dynamic Mask	4304	40	\$3.71	\$3.46	\$3.16	\$2.91
9 Immunofixation - Dynamic Mask	4309	90	\$3.52	\$3.28	\$3.00	\$2.76
4 Immunofixation Maxi Kit - Dynamic Mask	4381	320	\$3.71	\$3.46	\$3.16	\$2.91
9 Immunofixation Maxi Kit - Dynamic Mask	4382	720	\$3.52	\$3.28	\$3.00	\$2.76
1 Bence Jones - Dynamic Mask	4321	10	\$5.36	\$5.09	\$4.76	\$4.48
2 Bence Jones - Dynamic Mask	4322	20	\$4.83	\$4.50	\$4.12	\$3.79
4 Bence Jones - Dynamic Mask	4324	40	\$4.02	\$3.75	\$3.42	\$3.16
6 IF Penta - Dynamic Mask	4341	60	\$2.67	\$2.49	\$2.28	\$2.10
12 IF Penta - Dynamic Mask	4342	120	\$2.06	\$1.92	\$1.76	\$1.62
12 IF Penta Maxi - Dynamic Mask	4384	960	\$2.06	\$1.92	\$1.76	\$1.62
3 CSF - Dynamic Mask	4350	30	\$5.08	\$4.73	\$4.32	\$3.98
6 CSF - Dynamic Mask	4351	60	\$4.39	\$4.09	\$3.73	\$3.44
3 CSF IEF - Dynamic Mask	4353	30	\$5.23	\$4.88	\$4.45	\$4.10
9 CSF IEF - Dynamic Mask	4355	90	\$4.53	\$4.22	\$3.85	\$3.54
1 Immunofixation - Standard Mask	4801	10	\$5.91	\$5.64	\$5.31	\$5.03
2 Immunofixation - Standard Mask	4802	20	\$4.32	\$4.03	\$3.68	\$3.39
4 Immunofixation - Standard Mask	4804	40	\$3.71	\$3.46	\$3.16	\$2.91
9 Immunofixation - Standard Mask	4809	90	\$3.52	\$3.28	\$3.00	\$2.76
1 Bence Jones - Standard Mask	4821	10	\$5.36	\$5.09	\$4.76	\$4.48
2 Bence Jones - Standard Mask	4822	20	\$4.83	\$4.50	\$4.12	\$3.79
4 Bence Jones - Standard Mask	4824	40	\$4.02	\$3.75	\$3.42	\$3.16
9 Bence Jones Maxi Kit - Standard Mask	4883	720	\$3.52	\$3.28	\$3.00	\$2.76
6 Penta - Standard Mask	4841	60	\$2.67	\$2.49	\$2.28	\$2.10
12 Penta - Standard Mask	4842	120	\$2.06	\$1.92	\$1.76	\$1.62
7 ISO - LDH	4110	70	\$0.90	\$0.83	\$0.77	\$0.71
15 ISO - LDH	4130	150	\$0.49	\$0.45	\$0.42	\$0.39
7 Hgb	4106	70	\$0.67	\$0.63	\$0.58	\$0.53
15 Hgb	4126	150	\$0.42	\$0.38	\$0.35	\$0.33
7 Acid Hgb	4108	70	\$0.70	\$0.66	\$0.60	\$0.55
15 Acid Hgb	4128	150	\$0.44	\$0.40	\$0.37	\$0.35
7 ISO - CK	4111	70	\$1.16	\$1.09	\$0.99	\$0.91
15 ISO - CK	4131	150	\$0.62	\$0.58	\$0.53	\$0.49
30 ISO - CK	4137	300	\$0.39	\$0.36	\$0.33	\$0.31
7 ISO-PAL	4112	30	\$2.67	\$2.49	\$2.28	\$2.10
15 ISO-PAL	4132	70	\$2.06	\$1.92	\$1.76	\$1.62

Tests per month	Product Number	Tests Per Kit	Tests Per Month			
			1-100	101-200	201-300	301+
7 Protein	4100	70	\$0.64	\$0.60	\$0.54	\$0.50
15 Protein	4120	150	\$0.42	\$0.39	\$0.36	\$0.33
30 Protein	4140	300	\$0.33	\$0.30	\$0.28	\$0.26
54 Protein Maxi	4260	4,320	\$0.21	\$0.21	\$0.19	\$0.17
7 Protein B1B2	4101	70	\$0.67	\$0.63	\$0.57	\$0.53
15 Protein B1B2	4121	150	\$0.45	\$0.41	\$0.38	\$0.35
30 Protein B1B2	4141	300	\$0.36	\$0.34	\$0.31	\$0.29
54 Pro B1B2 Maxi	4261	4,320	\$0.24	\$0.23	\$0.21	\$0.20
7 HR	4102	70	\$0.90	\$0.84	\$0.77	\$0.71
15 HR	4122	150	\$0.50	\$0.46	\$0.43	\$0.40

Year 1 - 5 Antisera Cost Per Test



Assay	Product Number	Yr	Type of IF Kit			
			Part 4301 - 1 IF	Part 4302 - 2 IF	Part 4304 - 4 IF	Part 4309 - 9 IF
IF Antisera Set - Dynamic Mask	4315	1-5	\$3.16	\$3.16	\$2.47	\$1.10
IF Antisera Set - Standard Mask	4815	1-5	\$3.38	\$3.38	\$3.38	\$2.08

Assay	Product Number	Yr	Type of Bence Jones Kit		
			Part 4321 - 1 Bence Jones	Part 4322 - 2 Bence Jones	Part 4324 - 4 Bence Jones
Bence Jones Antisera Kit - Dynamic Mask	4335K	1-5	\$8.92	\$8.92	\$6.97
Bence Jones Antisera Kit - Standard Mask	4835K	1-5	\$9.88	\$9.88	\$9.88

Assay	Product Number	Yr	Type of Penta Kit	
			Part 4341 - 6 Penta	Part 4342 - 12 Penta
Penta Antisera Kit - Dynamic Mask	4345	1-5	\$3.29	\$2.35
Penta Antisera Kit - Standard Mask	4845	1-5	\$2.20	\$2.20

Assay	Product Number	Yr	Type of CSF Kit			
			Part 4350 3 CSF	Part 4351 6 CSF	Part 4353 3 CSF IEF	Part 4355 9 CSF IEF
Anti IgG	4743	1-5	\$2.20	\$1.65	\$2.20	\$1.10

Number of Kits and Tests Per Antisera Kit

	Kit	Dynamic Mask		Standard Mask	
		# Kits	# Tests	# Kits	# Tests
IF Antisera	1 IF	12.5	125	4	40
	2 IF	6.25	125	2	40
	4 IF	4	160	1	1
	9 IF	4.1	360	0.75	65
Bence Jones Antisera	1 Bence Jones	12.5	125	4	40
	2 Bence Jones	6.25	125	2	40
	4 Bence Jones	4	160	1	40
Penta Antisera	6 Penta	2	120	1	60
	12 Penta	1.4	168	1	60
CSF Antisera (IgG)	3 CSF	3	90	N/A	N/A
	6 CSF	2	120	N/A	N/A
	3 CSF IEF	3	90	N/A	N/A
	9 CSF IEF	2	180	N/A	N/A

Capillarys Pricing
Includes a Capillarys (\$2,500 minimum monthly order)

Year 1 - 5 Cost-Per-Test Pricing

Assay	Product Number	Tests Per Kit	Tests Per Month			
			1-20	21-40	41-60	61+
Protein 6	2003	720	\$3.96	\$3.89	\$3.77	\$3.66
IT	2100	60	\$21.32	\$20.76	\$19.92	\$19.12
IT Buffer	2043	50	\$7.00	\$7.00	\$7.00	\$7.00
IT Wash (Consumable)	2052	200	\$0.00	\$0.00	\$0.00	\$0.00
CDT	2008	245	\$15.90	\$15.58	\$15.11	\$14.66

Assay	Product Number	Tests Per Kit	Tests Per Month			
			20-40	40-60	60-80	81+
Hemoglobin	2007	625	\$7.00	\$6.20	\$5.30	\$4.50

**Cost-Per-Test Pricing
Bulk Antisera**

Assay	Product Number	Tests Per Kit	Yr	Tests Per Month			
				1-20	21-40	41-60	61 +
Anti Kappa Free Light Chains - Dynamic Mask	4370	80	1-5	\$3.00	\$3.00	\$3.00	\$3.00
Anti Lambda Free Light Chains - Dynamic Mask	4371	80	1-5	\$3.00	\$3.00	\$3.00	\$3.00
Anti Kappa Free Light Chains - Standard Mask	4610	40	1-5	\$4.37	\$4.37	\$4.37	\$4.37
Anti Lambda Free Light Chains - Standard Mask	4611	40	1-5	\$4.37	\$4.37	\$4.37	\$4.37
Anti IgD - Standard Mask	4613	40	1-5	\$3.25	\$3.25	\$3.25	\$3.25
Anti IgE - Standard Mask	4614	40	1-5	\$3.25	\$3.25	\$3.25	\$3.25

CONSUMABLES SUPPLIES IDENTIFICATION SHEET

VENDOR NAME: SEBIA, INC.

ANALYZER TYPE: CLINICAL IMMUNOCHEMISTRY ANALYZER

BRAND NAME: HYDRASYS LC, HYDRASYS FOCUSING, HYRYS 2 HIT OR PHORESIS

MODEL NUMBER: 1211, 1212, 1015 OR PHORESIS RESPECTIVELY

CONSUMABLES				
Test Assay	Reagent Group	Destain Per Test	Wash Per Test	Control (level 1&2) Per Kit
Chol - HDL	7	10uL	N/A	200 uL
	15	4 uL		200 uL
	30	2 uL		200 uL
Lipo + Lp(a)	7	10 uL	N/A	200 uL
	15	4 uL		200 uL
	30	2 uL		200 uL
Hemoglobin A1c	7	10 uL	N/A	200 uL
	15	4 uL		200 uL
Immunofixation**	2	12.5 uL	200 uL	N/A
	4	25 uL	100 uL	
	9	50 uL	50 uL	
	4 Maxi	25 uL	100 uL	
	9 Maxi	50 uL	50 uL	
Bence Jones**	2	12.5 uL	200 uL	N/A
	4	25 uL	100 uL	
IF Penta**	6	2.25 uL	18 uL	N/A
	12	4.5 uL	36 uL	
	12 Maxi	4.5 uL	36 uL	
ISO - LDH	7	N/A	N/A	200 uL
	15			200 uL
CSF*	3	N/A	N/A	150 uL
	6	N/A	N/A	150 uL
CSF-IEF*	3	20 uL	N/A	100 uL
	9	7 uL	N/A	100 uL
Hemoglobin	7	10 uL	N/A	200 uL
	15	4 uL		200 uL
Acid Hemoglobin	7	10 uL	N/A	200 uL
	15	4 uL		200 uL
ISO - CK	7	10 uL	N/A	200 uL
	15	4 uL		200 uL
	30	2 uL		200 uL
Protein	7	10 uL	N/A	200 uL
	15	4 uL		200 uL
	30	2 uL		200 uL
	54 Maxi	1 uL		200 uL
Protein B1 + B2	7	10 uL	N/A	200 uL
	15	4 uL		200 uL
	30	2 uL		200 uL
	54 Maxi	1 uL		200 uL
High Resolution	7	4 uL	N/A	200 uL
	15	2 uL		200 uL

* One Positive Control available

**Sebia reagents that do not require controls per CLIA regulations.

CONSUMABLES SUPPLIES IDENTIFICATION SHEET

VENDOR NAME: SEBIA, INC.

ANALYZER TYPE: CLINICAL IMMUNOCHEMISTRY ANALYZER

BRAND NAME: Capillarys 2

MODEL NUMBER: 1222

CONSUMABLES										
Test Assay	Part #	Capillarys Wash	Capiclean	CDT Cleaning Sol	Control Part number	Annual Control use dependent upon runs per week (boxes)				
						1	2	3	4	5
Protein 6 IT	2003	Included in Kit	4 kits per year regardless of test menu	N/A	4785	3	7	10	14	17
	2100	N/A			4787	3	7	10	14	17
IT Buffer	2043	1x70 ml bottle per 100 tests		N/A	N/A	N/A	N/A	N/A	N/A	N/A
Hemoglobin	2007	Included in Kit		N/A	4778*	1	2	2	2	3
					4779	3	6	9	12	14
CDT	2008	N/A		2 kits annually	4792	2	4	6	8	10
					4795	3	7	10	14	17
					4796	52	104	156	208	260
					4797	2	4	6	9	11

*Dedicated system - Non dedicated systems require twice as much