

Date: November 16, 2009

REQUEST FOR PROPOSAL

ITEM: Design/Build Services for Detroit Receiving Hospital
Sleep Suite Remodeling: Suite 5V

CONTRACT PERIOD: To Be Determined

FIRM PRICING PERIOD: Project Duration

The Detroit Medical Center, hereinafter referred to as ("DMC"), represented by its Contract Administration Department acting on behalf of Hospital, hereby invites you to submit a formal proposal to provide goods and/or services for Renovations at Harper Hospital.

The Request for Proposal is a five-part package consisting of the following:

- A. The General Cover letter
- B. Standard Terms and Conditions
- C. Vendor Letter of Intent
- D. Proposal Invitation Quote Sheets
- E. Attachment(s)

In consideration of the premises and the mutual covenants and promises contained herein, the following terms and conditions shall apply, and remain in full force and effect unless duly modified in writing and found acceptable to the DMC.

The completed proposals are to be returned to DMC Contract Administration offices located at 3663 Woodward, Suite 200, Detroit MI 48201, no later than **Wednesday November 25, 2009, at 3:00 P.M. EDT**, to be formally considered. If you have any questions or concerns regarding the attached, please do not hesitate to call me at (313) 578-2662.

Sincerely,

Edward Wagner
Manager
DMC Procurement

The Detroit Medical Center
STANDARD TERMS AND CONDITIONS

1. Incorporation Into Agreements. These DMC Standard Terms and Conditions (the “Standard Terms”) are attached to and incorporated by reference into the agreement and/or are incorporated into any arrangement (any arrangement or agreement between the DMC and Vendor is referenced herein as an “agreement”) entered into between the recipient of these Standard Terms (the “Vendor”) and The Detroit Medical Center, or its subsidiaries and affiliates (“DMC”). Vendor is hereby notified that by performing services for the DMC, Vendor accepts and is bound by the Standard Terms, compliance with which is an express condition of the obligation of the DMC to pay Vendor or otherwise perform under any agreement with Vendor. The Standard Terms are supplemental to any agreement between Vendor and the DMC, and to the extent of any inconsistency or express conflict, the Standard Terms control. The Standard Terms shall apply without regard to the manner in which the Vendor or the DMC is identified in any agreement between the parties.
2. New Participants. Any new participants joining the DMC after initiation of this contract shall automatically be accorded the rights of this contract.
3. Vendor Selection. The DMC reserves the right to reject any and all proposals and to waive any or all formalities in connection with bidding and selection of a Vendor.
4. Pricing. All prices and discounts are to be quoted firm against increase for the above period, on a F.O.B. hospital (delivered) basis. Any industry price decreases during the term of this contract are to be passed along to participating hospitals immediately. If, at any time during the contract period, the vendor quotes a member institution a lower price, that price automatically becomes the contract price.
5. Contract Award. The DMC reserves the right to award this contract in whole or in part, subject to paragraphs 3 and 12 of these Terms and Conditions. In case of a low tied proposal, the contract will be awarded according to established policy.
6. Contract Term. Submission of a quotation is construed as willingness on your part to enter into a proposal contract with the DMC for this business.
7. Billing. The vendor agrees herewith to invoice the DMC Accounts Payable Dept., at P.O. Box 02789, Detroit Michigan 48202. In addition, the vendor agrees to submit quarterly recaps, indicating the per-line, per-item usage, both in dollars and volume per hospital, of all business transacted under this contract, to the DMC.
8. OSHA Standards. Vendor warrants that the product sold or service rendered conforms to the OSHA Standards and/or regulations promulgated by the U.S. Department of Labor under the Occupational Safety and Health Act of 1970 (29 U.S.C. 651, 91-596). Products sold by the Vendor which do not conform to the OSHA Standards and/or regulations must be replaced or corrected by the seller at the Vendor’s expense or by the buyer at the Vendor’s expense in the event the Vendor fails to make the appropriate replacement or correction within a reasonable amount of time.
9. Civil Rights Act. The Vendor agrees that he is in full compliance with Title VII of the Civil Rights Act of 1964 (as amended); the Equal Pay Act of 1963 (Section 6, 7, and 12 of the Fair Labor Standards Act); the Age Discrimination in Employment Act of 1967; Executive Orders 11246 (where applicable); and such other State or Federal laws defining and prohibiting certain discriminatory employment practices as the same may be applicable to the Vendor.

10. Non-Discrimination. The Vendor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, disability or veteran status. The Vendor will take affirmative action to ensure that applicants are employed and that employees are treated during employment without regard to their race, color, religion, sex, national origin, disability or veteran status. Reference E.O. 11256 as amended.
11. Omnibus Reconciliation Act. Vendor must comply with Section 952 of the Omnibus Reconciliation Act of 1980 (P.L. 96-499) which provides for access to the books and records of sub-Vendors of Medicare providers by the Secretary of Health and Human Services (HHS) and the Comptroller General when requested by said parties.
12. Commitment to Agreement. This proposal is solicited for all listed hospitals only, and the hospitals herein listed have committed themselves in advance to purchase under this contract, provided that the quality continues to be equal to or better than that presently being enjoyed.
13. Award Process. Any contract award will be made within thirty (30) days of the due date as specified herein or by the contract date whichever comes first.
14. Effective Date. The effective date of any contract, resulting from this proposal, shall be within thirty (30) days of award date, or date of mutual agreement.
15. Proposal Amendment. No proposal shall be altered, amended or withdrawn, after the opening date, unless the acceptance date of the proposal has expired. Negligence on the part of the vendor in preparing the proposal confers no right for the withdrawal of the proposal after it has been opened. In case of error in the extension of prices on the proposal, the unit price will govern.
16. Award Notification. The successful Vendor will be notified of both the date the contract is awarded and the effective date of the contract.
17. Compliance with Laws & DMC Policy. Each party is responsible for compliance with all laws, including but not limited to anti-discrimination laws, which may be applicable to its respective activities and responsibilities under this Agreement. Vendor agrees to comply with all DMC policies as they may be modified from time to time.
18. Environmental Management System. DMC has established an Environmental Management System, which is committed to continuous improvement, prevention of pollution and compliance with relevant environmental regulation and requirements. Any CONTRACTOR or SUB-CONTRACTOR performing services on-site must provide a list of all materials or products that would significantly affect the environment, along with a copy of applicable licenses and/or permits, as well as specific handling and disposal instructions. In addition, a copy of the specific tool/program used to train your staff in proper handling of these materials must be provided to the Environment of Care Office at that location. Vendor agrees to comply with terms and policies stated in the attached DMC Environmental Statement.
19. Assignment or Subcontract. Vendor may not assign or subcontract any part of its duties, obligations, or rights without the prior written consent of the DMC.
20. Authority to Sign. Vendor representative signing any agreement or other document has the authority to sign and bind Vendor.

21. Confidentiality. Vendor agrees to maintain and keep confidential any and all information derived from its relationship with the DMC, and the information will not, without the prior written consent of the DMC, be disclosed by Vendor, its officers, directors, partners, employees, affiliates, agents or representatives, in any manner whatsoever. This provision survives the expiration or sooner termination of any agreement
22. Entire Agreement. The agreement, the Standard Terms, and any exhibits properly incorporated from time to time are the complete agreement between the parties and may be modified only by a written instrument executed by the parties. The agreement supersedes and renders void any prior agreements between the parties relating to its subject matter.
23. Choice of Law. The agreement will be governed by and construed in accordance with the laws of the State of Michigan.
24. Medicare Access to Books and Records. If the Secretary of Health and Human Services or the Comptroller General of the United States or their representatives determines this agreement is a contract described in Section 1861(v)(1) of the Social Security Act, 42, U.S.C. Section 1395x(v)(1)(I) as amended from time to time, until the expiration of four years after the furnishing of services under this Agreement, upon the request of the Secretary or Comptroller General or their duly authorized representatives, Vendor will make available to the organization requesting the materials and to the DMC such books, documents, and records as are necessary to certify the nature and extent of compensation paid by Vendor pursuant to this Agreement. Vendor will notify the DMC of such request within ten (10) business days, and will promptly provide to the DMC copies of all documents provided to the requestor.
25. Federal Law Compliance. The DMC currently may be, and in the future may become, subject to the Executive Order Program of the Office of Federal Contract Compliance applicable to employers that receive federal grants or perform services or provide goods and services pursuant to federal contracts. To the extent applicable, Vendor shall (and shall cause any authorized sub-Vendors to) comply with the nondiscrimination and affirmative action requirements of applicable law and of the requirements of the Executive Order Program.
26. Minority and Women Owned Business. The DMC is committed to supporting minority and women owned businesses. Vendor, if minority or women owned, will provide to the DMC a copy of Vendor's certification from the Michigan Minority Business Development Council (MMBDC), Majority Business Initiative (MBI) or other authoritative agency. If Vendor is not minority or women owned, Vendor agrees to provide a listing to the DMC of all subVendors providing services to the DMC who are minority or women owned for which the subcontractor will be performing services for the DMC. The Detroit Medical Center has pledged to increase business opportunities for local minority and women-owned businesses. As part of the proposal submission, the successful vendor will identify actions and strategies it will utilize to ensure substantial and meaningful minority business participation in your proposal to the DMC. We are requiring your proposal submittal to evaluate strategies for the work performed on our behalf and to identify opportunities for alliances with local minority and women-owned businesses. If your firm has successfully implemented a supplier diversity program with other clients, the DMC is interested in your firm's contributions and having you share with the DMC your experience and knowledge.

27. Stark/Fraud & Abuse. To evidence compliance with federal laws prohibiting payments for referrals, including the Stark Law, Medicare and Medicaid Anti-Fraud and Abuse laws and HIPAA, Vendor represents and warrants that any financial relationship (as defined in the Stark Law, Fraud and Abuse laws and related regulations) between a physician and Vendor, currently and during the term of this Agreement, conforms now or will conform from its inception with an exception under the Stark Law and a safe harbor under the Fraud and Abuse laws. No payments hereunder shall be for referrals of patients and no provision of this Agreement shall require or is intended to be construed to require that Vendor or physicians under the control of Vendor shall make referrals of patients to the DMC. Vendor shall permit the DMC, upon reasonable notice and during reasonable business hours, to review, audit and copy any books, documents or records necessary or appropriate to evaluate the performance of Vendor, the amounts properly paid by or to the DMC, and compliance with law and the terms of the Agreement, including the Standard Terms. The DMC shall not divulge to third parties the information reviewed in such audit, except as required by law or as necessary or appropriate to protect the interests of the DMC.
28. Not Excluded From Medicare. Vendor certifies that neither Vendor nor those individuals or entities which own or control Vendor have been excluded or otherwise prohibited from participating in, or providing goods or services for which reimbursement might be obtained from, Medicare or Medicaid.
29. Conflicts of Interest. Vendor shall refrain at all times from any action which could reasonably be construed to constitute self-dealing, a conflict of interest, or which would be in competition with the DMC's proprietary or business interests, and Vendor agrees to abide by the conflict of interest policies applicable to independent Vendors of the DMC.
30. Ownership of Intellectual Property. All reports and other data (including without limitation, written, printed, graphic, video and audio material contained in any computer data base or computer readable form) (hereinafter "Works of Authorship") developed during the term of this Agreement are the property of the DMC. Works of Authorship created during the term of this Agreement are "Works for Hire", as that term is defined in copyright law. The DMC shall own all rights to any inventions, discoveries, new uses, advances on the state of art, protocols, ideas, products or other protectable rights arising from any activities within the scope of this Agreement (hereinafter "Inventions"). Vendor shall (and cause its subVendors and employees to) execute all documents, provide all information, and otherwise take all actions requested by the DMC, including, without limitation, assignments of rights Vendor may have in such works, to secure for the DMC the ownership rights and available legal protections for all Works of Authorship or Inventions. Vendor expressly disclaims any droit moral rights in Works of Authorship or Inventions related to the performance of services under this Agreement.
31. No Solicitation. During the term of this Agreement and for a period of six (6) months after termination or expiration, Vendor shall not solicit or employ any employees of the DMC or a DMC subsidiary without the express written permission of an officer of the DMC.
32. Waivers. No part of this Agreement may be waived except by the written agreement of the parties. Forbearance in any form from demanding performance is not a waiver of performance. Until complete performance under this Agreement, the party owed performance may invoke any remedy under this Agreement or under law, despite its past forbearance.
33. Term, Termination, and Non-Renewal. The term of the mutual obligations of the DMC and Vendor under the Agreement and the Standard Terms is from the date of the Agreement. The Agreement between Vendor and the DMC may be terminated, at any time, without cause, by the DMC upon thirty (30) days written notice to vendor. In no event shall the Agreement renew for any additional term; provided, that services provided by Vendor and accepted by the DMC after the term of the Agreement has expired shall be deemed performed on a month-to-month extension basis. All such services shall be provided in compliance with the Standard Terms.

34. Indemnification. Vendor shall indemnify, defend, save and hold harmless the DMC and its officers, directors, trustees, members, affiliates, subsidiaries, employees, separate vendors and agents free from and against any and all loss, liability, penalties, lawsuits, damages, costs and expenses (including reasonable attorney's fees), actions, causes of action, claims or judgements which result from or are caused by the negligent actions, errors or omissions of Vendor, any of its sub vendors or suppliers or any employee or agent of vendor or any sub vendor or supplier of vendor while providing services under this Agreement.
35. Taxes. DMC shall not be responsible for the payment (directly or by reimbursement of Vendor) of any taxes imposed on Vendor, including, without limitation, sales and use tax and personal property tax, resulting from this Agreement or any performance under this Agreement.

Retain one copy of the completed quotation for your records and submit three completed copies, with the outside envelope or cover clearly marked:

DESIGN/BUILD SERVICE FOR;
Detroit Receiving Hospital: Sleep Suite Remodeling- Suite 5V

DETROIT MEDICAL CENTER
ATTN: Edward Wagner, Contract Administrator
3663 Woodward Avenue, Suite #200, Workstation #2-772
Detroit, Mi. 48201

It is the sole responsibility of the vendor to ensure that proposals are received at the time and place specified herein; any assumption as to the dependability and/or reliability of services such as UPS or the U.S. Postal, are made the vendor's own risk. If you have any questions or require further information, contact, Contract Administrator, Detroit Medical Center, Materials Resource Management at 313-578-2662.

PARTICIPATING INSTITUTIONS

Detroit Receiving Hospital
4201 St. Antoine
Detroit, Mi. 48201.

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VENDOR LETTER OF INTENT

Edward Wagner

DMC Materials Resource Management
The Detroit Medical Center
3663 Woodward Avenue -
Detroit, MI 48201

Dear Edward:

In response to your proposal invitation, dated November 16, 2009, we are please to submit the following pricing

For: **DESIGN/BUILD SERVICE FOR:**

Detroit Receiving Hospital- Sleep Suite Remodeling: Suite 5V

We understand that we must meet all Detroit Medical Center and Detroit Receiving Hospital requirements.

Prices and discounts for all items are quoted firm against for the term of this agreement.

We agree to adhere to the terms and conditions stated in the entire proposal invitation.

PAYMENT TERMS: _____

Authorized Signature

Complete Company Name

Title

Complete Company Address

Date

Telephone No.

Telephone No.

SEND ORDER TO: _____

SALES REPRESENTATIVE: _____

ADDRESS: _____

TELEPHONE NO. _____

Submit three copies; retain one for your records.

Be sure proposal is signed. Late or unsigned proposals are not in compliance with the Terms and Conditions and will not be considered.

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REQUEST FOR PROPOSAL FOR DESIGN/BUILD SERVICES FOR:
Design/Build Services for Detroit Receiving Hospital
Sleep Suite Remodeling: Suite 5V

BACKGROUND:

The Detroit Medical Center (DMC) is selecting qualified Design/Build teams to perform Working Drawings (based from the owner's schematic designs) and Construction in the Harper University Hospital. The Project area is empty and will be remodeled in one phase.

1. The project will be to perform A&E and Construction for the Fifth Floor in Suite 5V:
2. Sleep Suite light Remodeling and refurbishing of (5,625 S.F.)
3. The Suite is currently empty and ready for Remodeling. This project will include 8 Sleep Rooms (2 Shared with Exam Rooms) a Sleep Control Room and 4 Exam Rooms and support space.
4. Program schematic design drawings will be provided by the owner in Auto-Cad and E-Mailed to the selected contractor for their Architect.
4. Interior Color selection and furniture selection will be performed by DMC.

OBJECTIVE:

The objective of this project is to provide professional design and construction services as an integrated package, to result in the successful implementation of this project.

GENERAL SCOPE OF WORK:

- In general the services performed by the Design/Build Team shall include, but not be limited to: necessary conferences concerning all phases of the work; site inspections, field measurements, preparation of preliminary designs and layouts, including system furniture planning (based on Owners Standards), based on the requirements established and developed through consultation with the Owner; preliminary opinion of probable costs; preparation of scaled working drawings, and specifications, including detailed drawings where necessary and of all required coordination; writing of specifications; drafting of proposal forms; writing and issuing bulletins and punch lists; coordination with equipment suppliers, etc., as required to facilitate estimating during the project to assure that the project is maintained; review shop drawing during the construction period to determine if they represent the intent of the Construction Documents; maintenance of construction tracings and cad files to show the original as well as modified design of the project. The Architect/Engineer also will be required to furnish sketches and make field inspections in cases where the Construction Documents do not provide sufficient information to facilitate construction.
- Provide Construction Document for record drawings and submission to Authorities Having Jurisdiction for permitting.
- Provide Construction Administration to include shop drawing review, RFI clarifications, attendance at construction progress meetings, responses to the Detroit Building Department, and site construction observations.
- The Team will provide complete project management, superintendence and administrative support as required to completely deliver pre-construction and construction phase services associated with this project.
- Provide pre-construction cost estimating, scheduling, constructability review and value engineering services leading to the provision of a GMP within the available budget. **The GMP will be established at the completion of design development.** The GMP shall include a list of allowances, clarifications, assumptions and exclusions. Prepare itemized cost estimates as required until construction documents are finalized to validate that the scope of work and its estimate costs are within the allowances, clarifications, assumptions, and exclusions of the GMP. Note: There are many ways to develop the GMP. Bidders should describe these proposed/planned methods. Bidders are simply required to submit three bids for all work packages to the Project Engineer.
 - Prepare a CPM schedule using Microsoft Project in sufficient detail to define the entire project duration. Activities shall include all pre-construction phase efforts, the preparation of construction documents, submittals, bidding and punch-list activities.
- Assist the Owner in optimizing the value-engineering options as required to maintain a scope of work that is within the Owner's budget and schedule. At a minimum, this will be done by participating and attending weekly design review meetings, actively participating in review of constructability and material selection, and shall include cost and schedule impact analysis. Provide advice and value-engineering options regarding materials, methods, systems, schedules, labor and other conditions affecting construction and contracting.
- Provide project closeout document including CADD as-built drawings (AutoCAD) and specifications, O&M Manuals, RFI's, submittals, bulletins, shop drawings, field logs, warranties, and other project correspondence requested by the Owner.

PROJECT OVERVIEW:

1. The Design/Build Team is responsible for all components and phases of work required to result in a completed work product, including but not limited to:

FEES:

The fee proposal shall be formatted as follows (please complete VENDOR QUOTE SHEET)

A/E Services fee	\$
Pre-Construction Services	\$
On-Site project Management Staff	\$
General Conditions	\$
Cost of Work	TBD
Overhead and Profit	Percentage (%) of Construction

On-Site Management Staff is limited to the following:

- Project Manager
- Superintendent

General Conditions are limited to the following:

- Job-Site trailer
- Office supplies
- Copy and Fax Machine
- Reproduction cost
- Debris removal
- Construction clean-up and final cleaning
- Temporary utilities
- Computers
- Delivery/postage
- Emergency Repairs
- Travel and expenses
- Special equipment
- Safety and barricades
- Insurance
- Project signage
- Bonds
- Progress photos

Overhead & Profit

- Home office personnel/administration
- Job accounting, payroll, personnel, HR
- Procurement not performed by on-site personnel
- Profit Margin

PROJECT SCHEDULE:

The proposed schedule is as indicated below:

RFP Issue Date	November 16, 2009
Mandatory Pre-Bid Meeting	November 18, 2009 @ 11:00 A.M. EDT.
Bids Due	November 25, 2009 @ 3:00 P.M. EDT
Project Award	November 30, 2009
Start Work	Immediately Following Award
Construction Documents Start	November 30, 2009
Construction Documents Complete (A&E)	December 9, 2009
Construction Start	December 9, 2009
Construction Complete	January 8, 2009

The preliminary project documents will be available at the Pre-Bid Meeting. Please review the information and indicate with your proposal any potential problems you might foresee in meeting these deadlines. We are interested in your opinion on the length of the design and construction schedules. Obviously, if possible we would like to shorten the overall schedule.

MANDATORY PRE-BID MEETING:

A mandatory pre-bid meeting is scheduled for 11:00 A.M. EDT, November 18, 2009.

**The Meeting will be held at the D.R.H. on the 5th Floor Suite 5-V,
D.R.H. is located at 4201 St. Antoine, Detroit, Mi. 48201.**

A walk thru of the project area will follow. The meeting will be conducted by:

**Don Phillips R.A. - Manager Project Planning and Darla Breese-Senior Project Engineer,
DMC Facility Engineering and Construction Department.**

Don can be reached by phone @ (313) 966-2211 and e-mail: dphillips@dmc.org

Darla can be reached by phone @ (313) 966-9939 and e-mail: d@dmc.org.

QUALIFICATIONS:

In order to assure success, the Design/Build Team must show recent experience (within the last 2 years), with construction of a Medical Clinic or Hospital based Medical Clinic.

Please submit your qualifying statement indicating why your firm is suited to perform the work required to successfully complete this project. Please indicate your recent and relevant experience and describe in detail your understanding of the scope of work for these projects and how you propose to perform these services.

DESIGN TEAM:

Please provide a resume for all Project team members your firm will dedicate for this project. Include your firm's commitment to maintain this project team for the duration of these projects.

MEETING MINUTES:

The Design/Build Team will be required to provide Meeting Minutes for all project related meetings with the Owner/Owner Partner or its' representative in attendance. Where applicable the Owner may require written summaries of any related meeting where the Owner is not in attendance. Meeting minutes should be completed within one week of the meeting. The Design/Build Team will be responsible for the majority of the meeting minute distribution.

PROPOSAL SUBMITTAL:

All proposals must be submitted in triplicate and delivered in a sealed envelope marked:

**“REQUEST FOR PROPOSAL FOR DESIGN/BUILD SERVICES FOR:
Detroit Receiving Hospital: Sleep Suite Remodeling: Suite 5V”**

All proposals must be submitted no later than 3:00 P.M. EDT, on Wednesday, November 25th, 2009 to the following address:

Edward Wagner, Manager, DMC Procurement Department
Orchestra Place Building
3663 Woodward Ave, Suite #200, Workstation #2772
Detroit, Mi. 48201
Phone: (313) 578-2662
Fax: (313) 578-3954
E-mail: ewagner@dmc.org

ELECTRONIC PROPOSALS WILL NOT BE ACCEPTED AND NO PROPOSALS RECEIVED AFTER THE DUE DATE AND TIME WILL BE ACCEPTED.

VENDOR QUOTE SHEET

THIS QUOTE SHEET MUST BE COMPLETED AS A PART OF YOUR SUBMITTAL

A/E SERVICES	\$ AMOUNT:
PRE-CONSTRUCTION SERVICES	\$ AMOUNT:
ON-SITE PROJECT MANAGEMENT STAFF	\$ AMOUNT:
GENERAL CONDITIONS:	\$ AMOUNT:
COST OF WORK	TBD
OVERHEAD & PROFIT	PERCENTAGE (%) OF CONSTRUCTION:

ATTACHMENT NUMBER 1

DETROIT MEDICAL CENTER/SUBSIDIARIES

BACKGROUND

The following data (Attachments 1 and 2) is intended to provide an overview regarding the extent and scope of The Detroit Medical Center, its facilities and subsidiaries. The Detroit Medical Center is comprised of eight hospitals with more than 2,000 licensed beds and is the leading affiliate of the Wayne State University School of Medicine. The DMC accounts for approximately 30% of the total inpatient days of the major hospitals in the Metro Detroit area. The main campus is located in downtown Detroit and consists of the following five hospitals:

Children's Hospital of Michigan

Founded in 1886, Children's Hospital of Michigan is the only freestanding hospital in the state dedicated to the treatment of children. With a staff of over 200 pediatricians, 125 pediatric specialists, 800 pediatric nurses and over one thousand pediatric-trained employees, more pediatricians are trained at Children's Hospital of Michigan than at any other hospital in the state.

From immunizations to baby sitting classes, car seat safety checks and other safety and prevention education, Children's Hospital of Michigan's commitment to children goes beyond the doors of our hospital and spans the entire state.

- In 2004, Children's Hospital of Michigan was the only hospital in Michigan to be recognized in pediatrics by *U.S. News & World Report* "American Best Hospitals."
- Children's Hospital of Michigan has more than 75,000 emergency room visits, and is a verified Level I pediatric trauma center. The hospital's specialty clinics treat over 140,000 outpatients each year, in specialties ranging from Genetics to Urology.
- Children's Hospital is also a designated Injury Free Coalition for Kids (IFCK) site, an organization that strives to reduce and prevent injuries to children in their neighborhoods.
- The Regional Poison Control Center is one of two in Michigan focused on poison prevention, education, triage and treatment.
- The Children's Pediatric Mobile Team and School Mobile Health Center travel to areas across Southeastern Michigan and provide on-site medical care to children and families.

Detroit Receiving Hospital and University Health Center

Detroit Receiving Hospital (DRH) was founded in 1915 as a city-owned hospital, dedicated to caring for everyone, regardless of ability to pay. In 1965, the hospital was renamed Detroit General, and maintained that mission. In 1980, Detroit General moved to its new, award-winning, 320-bed facility, and reclaimed the name Detroit Receiving Hospital. Today, Detroit Receiving Hospital, and the University Health Center, still focus on providing the best medical care, using the latest technology, regardless of the patient's ability to pay.

- DRH was the first American College of Surgeons verified Level I Trauma Center in Michigan, and one of the first in the nation. Focusing on adult medical care for emergency, trauma, and critically ill patients, the majority of DRH patients arrive through the emergency department (ED). DRH's ED treats more than 80,000 patients each year. The University Health Center clinics treat more than 250,000 patients annually, making it one of the busiest ambulatory facilities in the country.
- As a teaching institution, DRH is committed to physician education. Approximately 95% of the physicians on staff at the hospital also serve on the faculty of Wayne State University School of Medicine.
- DRH physician expertise includes emergency medicine, orthopaedic traumatology, neurosurgery, trauma surgery, and burn treatment, earning national and international recognition for the hospital. DRH was also the site of the first cranioplasty, using a pre-cast replica of missing bone to repair a skull.
- Detroit Receiving hosts the longest-running, annual trauma conference in the country, the Detroit Trauma Symposium, attracting physicians worldwide. The Symposium features the latest treatment and management techniques for the injured patient.
- Along with exceptional medical treatment, the facility itself earned an award from the American Institute of Architecture for design, and also houses an extensive hospital-based art collection, comprised of donations to DRH over a 30-year period. The collection features more than 900 pieces, estimated at more than \$3 million, one of the largest hospital-based collections in the nation.

Harper University Hospital

Harper University Hospital is one of the nation's premier health care centers providing exceptional care to patients from around the world. It offers award-winning services in a broad range of clinical areas, including neurology, neurosurgery, kidney transplant, cardiology, and bariatric surgery.

Affiliated with Wayne State University School of Medicine, Harper is staffed by leading experts, most of whom are teaching faculty with the university. These exceptional doctors are pioneers in medical research, creating breakthrough treatments that dramatically improve the health patients' lives.

- Harper's Department of Neurological Surgery is internationally recognized for excellence in clinical skills, innovative research and advanced education in the neurosciences. It was the first to debut technologies such as the Gamma Knife in 1995 and Intraoperative Magnetic Resonance Imaging (iMRI) system in 2004 in Michigan.
- The hospital's neurologists are nationally recognized for their expertise in researching and treating neuromuscular diseases, multiple sclerosis, epilepsy and stroke.
- More than 60 percent of the cardiologists in Michigan received some or all of their training at Harper. It is home to some of Michigan's top cardiologists and its specialists take the most comprehensive approaches to cardiovascular disease, intended to achieve the highest-quality outcomes in the state. Harper's cardiologists are internationally recognized as the experts in electrophysiology and new techniques such as cryoplasty.
- The Transplant team recognizes the complex needs of transplant donors and recipients, both before and after surgery and is nationally-recognized for their medical expertise. Harper's program offers living and deceased donor transplantation.

Huron Valley-Sinai Hospital

Huron Valley-Sinai Hospital (HVSH) is western Oakland County's newest, only and fastest growing hospital founded in 1986. The hospital doubled in size in 1999 adding an even wider range of medical, surgical and diagnostic specialty care. In spring of 2004, a \$27 million expansion project was completed resulting in expanded surgical services, endoscopies, cardiopulmonary diagnostics, and a new home for the Krieger Center for geriatric care.

The hospital has earned the distinction of being among the top hospitals in the area and nation in customer satisfaction. Its staff continues to provide the warm, personalized care for which it is known and its affiliation with the Detroit Medical Center provides a depth of resources and expertise available at few community hospitals. Patients benefit from advanced medical technology, new treatments and expert staff – all close to home.

The hospital's spacious campus, adjacent to an orchard in Commerce, provides an unusually pleasant and tranquil environment. The hospital is designed to be accessible, comfortable with warm, appealing decor, gardens and works of art.

Hutzel Women's Hospital

Hutzel Women's Hospital is Michigan's first and only hospital for women. It is home of the National Institute of Health (NIH) perinatal branch and is one of the top teaching hospitals in Michigan in partnership with Wayne State University for obstetricians, gynecologists and maternal fetal medicine specialists. The NIH awarded WSU School of Medicine a #1 rank for Obstetrics and Gynecology for Extramural Awards to Medical School Departments.

Hutzel physicians are experts in women's medicine and provide care in the areas of high-risk pregnancy, infertility, menopause and research. Thousands of women over the past 136 years have turned to Hutzel – known as The Destination for Women's Care.

- Hutzel houses Michigan's only intensive care unit for expectant mothers with a state-of-the-art Neonatal Intensive Care Unit (NICU). The hospital is a national referral center for genetic testing and treatment of birth defects during pregnancy.
- Hutzel was the first hospital in Detroit to treat infertility more than 50 years ago and is still a leader with the latest treatments including: in vitro fertilization, artificial insemination, donor egg procedures and surgical therapies.
- From the latest urogynecological tests and procedures to minimally invasive and complex surgeries, the subspecialties at Hutzel work closely with referring physicians from around the state. Hutzel was the first to bring the Essure Method, a non-incision form of permanent contraception to Michigan.
- A joint effort of Hutzel and Children's Hospital of Michigan, the Maternal Fetal Diagnosis project uses advanced diagnostic tools and innovative therapies to identify and treat fetal abnormalities during and after pregnancy.

DMC Surgery Hospital

DMC Surgery Hospital is Michigan's only hospital focused exclusively on orthopaedic services. Offering modern facilities and patient amenities, it is staffed by an expert orthopaedic surgical team, many of whom have been listed as "America's Top Doctors."

A valuable affiliation with Wayne State University School of Medicine allows Michigan Orthopaedic Specialty Hospital to continue to be the state's premier training program for orthopaedic surgeons.

Full service facility offering:

- Physical Therapy and Occupational Therapy: Provided by Rehabilitation Institute of Michigan professionals, available to surgical patients before leaving the hospital.
- Intensive Care Unit: For patients that require special attention, the unit is remarkably equipped and expertly staffed.
- 24-7 Emergency Care: Quick and efficient emergency care center is available 24 hours a day, 7 days a week for the prompt treatment of minor emergencies from illnesses to injuries.
- Physician Research Resource: One of the finest full orthopaedic library services anywhere. On-staff librarians can quickly and conveniently find the answers to any and all of your orthopaedic questions by drawing from the latest publications on-site and online.

- On-site Diagnostic Services: Lab testing and radiology procedures including x-rays, CT Scan and ultrasound testing.

Rehabilitation Institute of Michigan

Rehabilitation Institute of Michigan is a national leader in the delivery of physical medicine and rehabilitation, and one of the country's largest freestanding, academic rehabilitation hospitals.

A comprehensive spectrum of both inpatient and outpatient services and programs are available for spinal cord injuries, brain injuries, stroke, cerebral palsy, musculoskeletal disorders, low back problems, amputations, sports injuries, work-related injuries and other medical conditions which require physical rehabilitation. In addition, Rehabilitation Institute of Michigan is one of 17 federally designated centers of excellence for the treatment of brain injuries in the United States.

The Institute's clinical capabilities are broad and diverse, and include psychiatry, rehabilitation nursing, physical therapy, occupational therapy, therapeutic recreation, neuropsychology, speech and language pathology, social work, electrodiagnostics, driver training, environmental evaluations and vocational counseling. These programs along with the Institute's educational services are aimed at helping persons with disabilities reach the highest level of functioning, independence and productivity.

- The Institute is licensed for 94-beds and treats more than 1,600 inpatients and conducts over 100,000 outpatient visits each year.
- RIM houses the Southeastern Michigan Traumatic Brain Injury System (SEMTBIS), one of 17 federally designated centers of excellence in the United States for the treatment of brain injuries.
- During the last five years, RIM has been awarded \$9.5 million in federal and private grants for rehabilitation research focusing on restoring function, improving quality of life and developing innovative therapeutic techniques.
- In addition to RIM's main hospital, there are 19 outpatient facilities located throughout southeastern Michigan.

The Institute houses a state-of-the-art Motion Analysis and Gait Laboratory. Research in the lab focuses on improving human performance on skills such as walking or stair climbing or improving sports related techniques through proper body mechanics.

Sinai-Grace Hospital

Sinai-Grace Hospital (SGH) was created in 1988 when two well-established community hospitals – Sinai and Grace – joined together to offer compassionate, high quality patient care. Its roots in the community stretch back to 1888.

SGH provides inpatient services in the basic care of medicine, including cardiology, emergency medicine, women and infant services (obstetrics and gynecology), geriatrics, surgery, psychiatry, radiation oncology, and physical medicine and rehabilitation. SGH also provides many subspecialties such as neurological, plastic and urological surgery. Other specialized services include acute renal dialysis, weight management and bariatrics; sleep disorder therapy, urology and movement disorders.

SGH is also dedicated to providing quality surgical care to patients requiring joint replacement surgery. Through its comprehensive Joint Replacement Center, the hospital offers the most technologically advanced techniques, including the minimally invasive knee replacement procedure performed by one of the nation's top orthopaedic surgeons.

SGH is one of the Detroit Medical Center's premier sites with approximately 404 beds, more than 660 physicians, 900 nurses and over 2,000 health care professionals and support staff.

**DMC Environmental Statement
(MUST BE COMPLETED AND RETURNED WITH PROPOSAL)**

In accordance with its mission, the Detroit Medical Center is dedicated to the health and safety of its patients, employees, customers, community and environment. Further the DMC is committed to continuous improvement, prevention of pollution and compliance with relevant environmental regulations and other requirements.

All contractors working at a DMC site are required to comply with the requirements of the EMS and the environmental policy. This Environmental briefing provides general details of the DMC Environmental Management System and statement.

Supplier/Contractor is financially responsible for on-site environmental remediation actions resulting from incidents involving their employees and subcontractors:

- Supplier/Contractor understands the importance of compliance with relevant environmental legislation and regulations, and the consequences of noncompliance.**
- All Suppliers/Contractors working at the site are required to comply with and ensure their employees and any Suppliers/Sub-Contractors or agents comply with the facility's Environmental Management System (EMS) and environmental statement.**
- All Suppliers/Contractors acknowledge receiving or were made aware of the DMC environmental statement, as well as applicable system procedures and work practices.**
- Suppliers/Contractors shall not discharge anything to drains and/or sewers without prior approval from the Site Safety Officer. Spills and other releases to the environment must be immediately reported to the Site Safety Officer.**
- Suppliers/Contractors shall provide adequate spill release prevention, as approved by the Site Safety Officer.**
- Suppliers/Contractors shall immediately notify the Site Safety Officer and Program Manager of any abnormal conditions found during excavation activities at the site.**
- Suppliers/Contractors shall properly label, store, and dispose of all their waste materials used on-site in accordance with site procedures and all legal requirements.**

- ❑ If site personnel are required to work with potentially hazardous materials brought on-site by a contractor, prior approval of the material by the Site Safety Officer is required.
- ❑ Suppliers/Contractors shall minimize the effects of noise, odor, light, fugitive dust emissions, and traffic movement on and/or adjacent to site property.
- ❑ Suppliers/Contractors shall obtain, prior to commencing work, all necessary environmental approvals or permits and present copies of such permits to the sites Program Manager.
- ❑ Suppliers/Contractors were informed of actions to be taken during an actual emergency situation.
- ❑ The Supplier/Contractor understands that the site may interrupt Supplier/Contractor activities that violate site policies and/or all legal requirements.

Supplier/Contractor is financially responsible for on-site environmental remediation actions resulting from incidents involving their employees and subcontractors. To minimize the risk of environmental accidents please review and initial the items contained in the Environmental Management Basics Table below:

Environmental Management Basics	Supplier/Contractor Initials
Supplier/Contractor understands the importance of compliance with relevant environmental legislation and regulations, and the consequences of noncompliance.	
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