

**METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY
GENERAL FUND 4% RESERVE FUND
INFORMATION SHEET
(As Required By Ordinance 086-1534)**

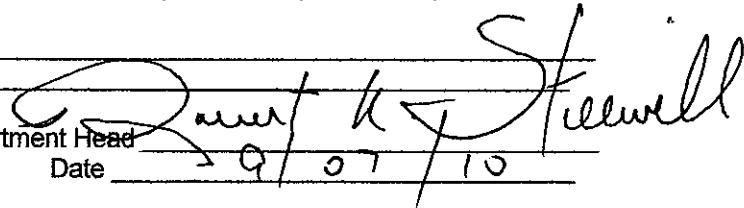
**General Hospital
1st Quarter – FY 2011
67201000**

Object Code	Item	Qty.	Estimated Cost	Replacement or New Equipment	Age of Equipment Replacing (In Years)	Estimated Life of Equipment (In Years)
507400	Ventilator	1	\$ 24,000	Replace	5	5
503850	3 Brewer Exam Table Access	3	3,700	Replace	5	5
503850	Cart Concealed Body Transport	1	3,200	Replace	5	5
507400	UPS Unit	1	10,000	Replace	5	5
507400	CO2 Laser Arm	1	5,900	Replace	5	5
503850	Oscillating Saw	1	3,200	Replace	5	5
503850	Cast Saw	1	1,000	Replace	5+	5+
503850	Splint Tray	1	1,100	Replace	5+	5+
507250	Ambulance Plaza Repairs	1	21,900	Replace	10+	10+
507400	Glidescope for ED	1	16,900	Replace	5+	5+
507400	TEE Probe (Refurbished)	1	12,500	Replace	5+	5+
503850	CR Cassettes	12	14,400	Replace	5+	5+
507400	Dedicated Echo Bed	1	10,000	Replace	5+	5+
503850	3 Sets Radiation Protection Apparel	3	3,000	Replace	5+	5+
503850	StatSpin Centrifuge	1	2,900	Replace	5+	5+
503850	Nuc Med Phantom	1	3,500	Replace	5+	5+
507400	Ultrasound for L & D	1	20,000	Replace	10+	10+
	TOTAL		\$ 157,200			

Is this expenditure federal or state reimbursable? Yes
 Can this equipment be used year around? Yes
 Has the price been verified by Division of Purchases? Yes
 Have you checked Public Property Division for usable surplus equipment? No
 Is equipment absolutely necessary at this time? Yes
 Will equipment reduce present cost? Yes
 Is equipment to extend services? Yes
 Is equipment to reduce manpower? No
 Will equipment require new manpower? No
 Will equipment increase productivity? Yes
 Will equipment promote public health? Yes
 Will equipment promote public safety? Yes

Have all previously adopted resolutions appropriating funds from the General Fund Reserve Fund (4% Fund) been complied with by expending said funds as required? No
 If not, do you expect to expend funds and the date expected for the expenditure? (June 2011) Yes

COMMENTS: _____


 Department Head _____
 Date 9/07/10