



*Embassy of the United States of America
Phnom Penh, Cambodia*

January 29, 2013

General Services Office
#1, Street 96,
Phnom Penh, Cambodia
Tel: 023 728 000
Fax: 023 728 400

Dear Prospective Offerors:

SUBJECT: Solicitation SCB600-13-Q-0005 – Request for Quotation for “the Provision of Pre-Employment Medical Examination for the U.S. Embassy in Phnom Penh.”

The U.S. Embassy Phnom Penh invites you to submit a quotation for “the Provision of Pre-Employment Medical Examination for the U.S. Embassy in Phnom Penh for a period of one year and four option years”. A detailed scope of work is in the enclosure.

Your quotation must be submitted in a sealed envelope marked " Quotation for the Provision of Pre-Employment Medical Examination for the U.S. Embassy in Phnom Penh" to the GSO-Procurement Section, # 1, Street 96, Phnom Penh, CAMBODIA or be sent by email to PhnomPenhProcurement@state.gov on or before **4:00 PM on February 12, 2013**. No quotation will be accepted after this time.

In order for a quotation to be considered, you must also complete and submit the following:

1. SF-18
2. Priced quotation and the clinic’s profile.

Late quotations will not be accepted and evaluation method is the lowest price, technically acceptable (LPTA) method.

Direct any questions regarding this solicitation to PhnomPenhProcurement@state.gov during regular business hours.

Sincerely,
Dianne Syrvalin
Contracting Officer

REQUEST FOR QUOTATIONS <i>(THIS IS NOT AN ORDER)</i>		THIS RFQ [] IS [x] IS NOT A SMALL BUSINESS- SMALL PURCHASE SET-ASIDE (52.219-4)			PAGE 2	OF 1	PAGES 5
1. REQUEST NO. SCB60013Q0005	2. DATE ISSUED January 29, 2013	3. REQUISITION/PURCHASE REQUEST NO.	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING			
5A. ISSUED BY U.S. Embassy Phnom Penh # 1, St. 96, Sangkat Wat Phnom, Phnom Penh				6. DELIVER BY (Date) 1 week after issuing order			
5B. FOR INFORMATION CALL: (Name and telephone no.) (No collect calls)				7. DELIVERY			
NAME Dianne Syrvalin phnompenhprocurement@state.gov		TELEPHONE NUMBER AREA CODE 023 728 000		<input checked="" type="checkbox"/> FOB DESTINATION OTHER (See Schedule)			
8. TO:				9. DESTINATION			
a. NAME	b. COMPANY			a. NAME OF CONSIGNEE U.S Embassy Phnom Penh			
c. STREET ADDRESS				b. STREET ADDRESS # 1, St. 96, Wat Phnom			
d. CITY		e. STATE	f. ZIP CODE	c. CITY Phnom Penh, Cambodia			
				d. STATE	e. ZIP CODE		
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5A ON OR BEFORE CLOSE OF BUSINESS (Date) February 12, 2013		IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5A. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter					
11. SCHEDULE (Include applicable Federal, State and local taxes)							
ITEM NO. (a)	SUPPLIES/SERVICES (b)		QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	
1	See attached						
12 DISCOUNT FOR PROMPT PAYMENT		a. 10 CALENDAR DAYS %	b. 20 CALENDAR DAYS %	c. 30 CALENDAR DAYS %	d. CALENDAR DAYS NUMBE R		
					%		
NOTE: Additional provisions and representations [X] are [] are not attached.							
13 NAME AND ADDRESS OF QUOTER			14 SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15 DATE OF QUOTATION		
a. NAME OF QUOTER							
b. STREET ADDRESS			16. SIGNER				
c. COUNTY			a. NAME (Type or print) Dianne Syrvalin		b. TELEPHONE		
d. CITY	e. STATE	f. ZIP CODE	c. TITLE (Type or print) Contracting Officer		AREA CODE		
						NUMBER	

**Scope of Requirement
Pre-Employment Medical Examination
For Locally Employed Staff and Official Residence Employee**

I- Pricing Schedule

This RFQ includes option(s) as addressed in the schedule and applicable FAR provisions/clauses. Separate pricing is requested for the base period and each option period. Please provide quotation for the following scope of work and estimated requirements:

Period	Locally Employed Staff			Official Residence Employee			Grand Total
	Estimated Number	Price per Person	Sub-Total	Estimated Number	Price per Person	Sub-Total	
Base Year (Feb 20, 2013 – Feb 19, 2014)	60			3			
Option Year 1	66			3			
Option Year 2	73			3			
Option Year 3	80			3			
Option Year 4	88			3			
Grand Total for Base Year and 4 Option Years							

Note: Locally employed staff requires only Medical Examination, and Official Residence Employee requires both medical examination and Laboratory and Other Test Findings.

II- General Requirement

1. The Medical Doctor must have good English proficiency (oral and written) to be able to complete physician reports and give clear and sound recommendations.
2. Appointed medical clinic/facility must be capable of providing the following services using its own facility/laboratory. Patients are not to be sent to other facilities for the required services as specified below.

A- Medical Examination (for LES and ORE)

VISION

Standard: At least 20/40 acuity (Snellen) in each eye with or without correction. At least 70 degrees peripheral in horizontal meridian measured in each eye. The use of corrective lenses should be noted on the Medical Examiner's Certificate.

HEARING

Standard: a) Must first perceive forced whispered voice \geq 5 ft., with or without hearing aid, or
b) average hearing loss in better ear \leq 40 dB

BLOOD PRESSURE/ PULSE RATE

Standard: Numerical readings must be recorded. Medical Examiner should take at least two readings to confirm BP.III. Driver

LABORATORY AND OTHER TEST FINDINGS

- Standard :
- Urinalysis is required. Protein, blood or sugar in the urine may be an indication for further testing to rule out any underlying medical problem.
 - Complete Blood Count
 - Serologic test for syphilis

CHEST X-RAY

NOTE: all chest films should be sent to the US Embassy Phnom Penh Medical Unit for review.

PHYSICAL EXAMINATION

BODY SYSTEM	CHECK FOR:
1. Height and Weight	
2. Eyes	Pupillary equality, reaction to light, accommodation, ocular motility, ocular muscle imbalance, extraocular movement, nystagmus, exophthalmos. Ask about retinopathy, cataracts, aphakia, glaucoma, macular degeneration and refer to a specialist if appropriate.
3. Ears	Scarring of tympanic membrane, occlusion of external canal, perforated eardrums.
4. Nose	Abnormal signs
5. Head and Neck	Abnormal signs
6. Mouth and Throat	Irremediable deformities likely to interfere with breathing or swallowing.
7. Heart	Murmurs, extra sounds, enlarged heart, pacemaker, implantable defibrillator.
8. Lungs and chest, not including breast examination	Abnormal chest wall expansion, abnormal respiratory rate, abnormal breath not sounds including wheezes or alveolar rales, impaired respiratory function, cyanosis. Abnormal findings on physical exam may require further testing such as pulmonary tests and/ or xray of chest.
9. Abdomen and Viscera	Enlarged liver, enlarged spleen, masses, bruits, hernia, significant abdominal wall muscle weakness.
10. Extremities- Limb impaired. Driver may be subject to SPE certificate if otherwise qualified.	Loss or impairment of leg, foot, toe, arm, hand, finger, Perceptible limp, deformities, atrophy, weakness, paralysis, clubbing, edema, Hypotonia. Insufficient grasp and prehension in upper limb to maintain steering wheel grip. Insufficient mobility and strength in lower limb to operate pedals properly.
11. Neurological	Impaired equilibrium, coordination or speech pattern; asymmetric deep tendon reflexes, sensory or positional abnormalities, abnormal patellar and Babinski's reflexes, ataxia.

B- LABORATORY AND OTHER TEST FINDINGS (required only for Official Residence Employee)

- Stool Exams X 3 for O & P
- BFAT or Schistosomiasis

III- Submission of Invoices and Payment

Payment will be made on monthly basis within 30 days upon receipt of invoice by Finance Office of U.S. Embassy Phnom Penh

Financial Management Office
1, St. 96, Sangkat Wat Phnom, Daun Penh
Phnom Penh, Cambodia
Email: PHPVoucher@state.gov

IV- FAR on Option Clauses

FAR 52.217-8 OPTION TO EXTEND SERVICES (NOV 1999)

The Government may require continued performance of any services within the limits and at the rates specified in the contract. The option provision may be exercised more than once, but the total extension of performance hereunder shall not exceed 6 months. The Contracting Officer may exercise the option by written notice to the Contractor within the performance period of the contract.

FAR 52.217-9 OPTION TO EXTEND THE TERM OF THE CONTRACT (MAR 2000)

(a) The Government may extend the term of this contract by written notice to the Contractor within the performance period of the contract or within 30 days after funds for the option year become available, whichever is later.

(b) If the Government exercises this option, the extended contract shall be considered to include this option clause.

(c) The total duration of this contract, including the exercise of any options under this clause, shall not exceed 5 Years.

FAR 52.252-2 Clauses Incorporated By Reference (FEB 1998)

This purchase order or BPA incorporates the following clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address:

<http://acquisition.gov/far/index.html>