

CITY OF GRAND JUNCTION
SOLE SOURCE JUSTIFICATION FORM

Date: July 10, 2026 Requested By: Mark McIntire
 Department: Fire Division: EMS
 Vendor Name: EchoNous Net Cost Delivered: \$ 19,400

Provide G/L Account where funds are budgeted: 107-510-741-6100
 Project code, if applicable _____

SOLE SOURCE JUSTIFICATION

(INITIAL ALL ENTRIES THAT APPLY)

Material/Service Description: EchoNous Kosmos Ultrasound Probe and Associated Software.

1. MRM - Uniqueness: Is unique and unavailable from any other source due to proprietary rights, patents, copyrights, secret processes, or monopoly control;
2. _____ - Compatibility: There is a need for compatibility with existing equipment, technologies, or processes, and only a specific product or service can satisfy that need;
3. _____ - Urgency: Delay would lead to serious injury, death, or significant financial loss;
4. MRM - Expertise: The vendor has unique experience, expertise, or capabilities unavailable elsewhere;
5. _____ - Standardization: There is a need to standardize specific equipment or supplies to reduce training, inventory, or maintenance costs, and only one vendor can meet this need;
6. MRM - Written demonstration and justification is available which reasonably and practicably establishes that the selection of a sole source vendor is in the best interest of the City.

Attach Justification Memo and Pricing Documentation, then proceed with signatures below.
After Dept Head approval, forward to Purchasing.

Department Director Approval:

I recommend that competitive procurement be waived and that the service or material described herein be purchased as a sole source.

Signed: Signed by:
Peter J. Skeris
DSA9665CE8F7450, 7/13/2026
 Department Head Signature Date

Purchasing Approval:

Based on the above and attached documents, I have determined this to be a sole source with no other vendor practicably available.

Signed: DocuSigned by:
Jay Valentine
09BA36D53ED04B7..., 7/13/2026
 Purchasing Manager Signature Date

Final Authorization

City Manager Approval Required (\$25K to \$50K) yes / no

Signed: _____, _____
 City Manager Signature Date

City Council Approval Required (over \$50K) yes / no



Memorandum

To: Duane Hoff

From: Mark McIntire, EMS Chief

Date: July 10, 2026

Subject: Sole Source Justification for EchoNous Kosmos

With the implementation of the Community Paramedic Program, the Grand Junction Fire Department has identified the need for advanced point-of-care ultrasound equipment to support patient assessment and clinical decision-making in the field. The department intends to purchase two portable ultrasound systems for use by Community Paramedics during a variety of diagnostic assessments, including cardiac, pulmonary, abdominal, vascular, and musculoskeletal examinations.

Because this represents a new diagnostic capability for the department, a multidisciplinary evaluation committee was established to conduct a comprehensive review of available prehospital ultrasound systems. Demonstrations and hands-on evaluations were completed for the following manufacturers:

- EchoNous Kosmos
- Clarius
- Butterfly iQ3

Each system was evaluated using standardized criteria that included:

- Ease of use and workflow
- Image quality
- Software integration and data management
- Artificial intelligence (AI) guidance and clinical assistance
- Device durability and build quality
- Available education, training, and ongoing clinical support

Following the evaluation process, the committee unanimously recommended the EchoNous Kosmos system. Based on documented scoring and user feedback, the Kosmos consistently outperformed the competing products in the areas most critical to the department's operational needs, particularly image quality, AI-assisted guidance, workflow efficiency, and overall usability in the prehospital environment.

The evaluation determined that the competing systems did not provide the same combination of imaging performance, AI-assisted clinical guidance, ease of operation, and educational support required to meet the department's clinical objectives for the Community Paramedic Program.

In addition to meeting the department's operational requirements, selecting the EchoNous Kosmos platform will establish a standardized ultrasound platform for future department



Memorandum

purchases. Standardizing on a single manufacturer will reduce training requirements, simplify clinical protocols, improve provider competency, streamline technical support and maintenance, and reduce long-term lifecycle costs associated with operating multiple ultrasound platforms.

Based on the comprehensive evaluation process and the determination that the EchoNous Kosmos system is the only product that satisfies the department's operational and clinical requirements, the department respectfully requests approval to procure two EchoNous Kosmos ultrasound systems through a sole-source purchase.



Quote #: 1007894
 Payment Terms: Net 30
 Valid Until: 09/28/2026

Account: Grand Junction Fire
Contact: Mark McIntire
Ship To: 625 West Ute Avenue, Grand Junction, CO 81501, United States

Representative: Allie Barilla
Telephone: (720) 682-9541
Email: allie.barilla@echonous.com

QTY	PART #	DESCRIPTION	UNIT PRICE	TOTAL PRICE
2	P008051-009	KOSMOS, TORSO-ONE PROBE USB WITH 3 CLINICAL FEATURES: Torso-One Ultrasound only phased array probe with (TRIO (for educational use only), Auto EF, AI FAST) apps for connection with compatible Android or iOS tablet.	USD 6,200.00	USD 12,400.00
2	P008332-001	FEATURE LICENSE, IOS AUTO PRESET TORSO-ONE USB, SUBSCRIPTION TERM: PERPETUAL	USD 500.00	USD 1,000.00
2	P008423-001	PERPETUAL TERM, TORSO-ONE USB: AUTO BLADDER VOLUME PRESET: AI assisted auto bladder volume calculation.	USD 3,000.00	USD 6,000.00
1	P006599-004	KOSMOS ESSENTIALS BAG: Custom bag designed to fit the KOSMOS Platform display tablets, probes, and accessories. Suitable for hand carry or over the shoulder.	USD 0.00	USD 0.00
			Subtotal:	USD 19,400.00
			Freight:	USD 0.00
			Grand Total:	USD 19,400.00

Comments :

Unless otherwise agreed to in writing between Customer and EchoNous, Customer agrees to the listed terms, conditions, warranty schedule, software and license agreements available here, <https://echonous.com/terms-and-conditions/> and applicable to the products listed on this EchoNous Quote, and any subsequent purchase order(s).

IMPORTANT NOTICE: If you are purchasing products under a GPO, IHN or other specified Contract, the terms of such GPO/IHN or other Contract will govern, and not the EchoNous Terms & Conditions referenced above.

Any questions regarding terms and conditions can be sent to legal@echonous.com or your sales representative.

* Sales tax will be determined and charged at the applicable rates in effect in the customer's state on the date of shipment. Tax-exempt customers are requested to provide a certificate.

Remittance Information:

EchoNous, Inc.

Attn: Accounts Receivable

8310 154th Avenue NE, Suite 200

Redmond, WA 98052-6180 U.S.A.

Telephone: (844) 854-0800 | Fax: (425) 242-5553

Email: orders@echonous.com | Web: www.echonous.com