

**Sole Source  
Written Determination**

**Agency Identification:** Horry-Georgetown Technical College #SS-0231

**Description of the agency need that this procurement fulfills:** *(See instructions on last page for guidance)*

The Surgical Technology program is required to provide structured laboratory training that includes mock surgical procedures and camera assistance skills as part of intraoperative case management competencies. Program curriculum and accreditation standards require students to demonstrate camera navigation, endoscopic visualization, and coordinated instrument-camera psychomotor skills during simulated minimally invasive procedures. Current enrollment growth and retention have exceeded the training capacity of the two existing stationary simulation systems, resulting in insufficient student access time to complete required lab competencies. Additional laparoscopic simulation systems are necessary to deliver required camera and minimally invasive mock surgery training and to maintain accreditation-aligned instructional standards.

**Describe the Market Based on Research Performed:** *(See instructions on last page for guidance)*

Market research was conducted on commercially available laparoscopic simulation and virtual reality surgical training systems used in surgical technology and surgical assistant education. Multiple general laparoscopic simulators exist; however, most platforms are designed for surgeon procedural training rather than surgical technologist camera navigation and intraoperative support role competencies. Available alternatives primarily focus on surgeon performance metrics and do not provide CST-role-specific curricula, camera angle variation training (0°, 30°, 45°), or structured camera navigation modules aligned with AST educational standards. The LapSim ST platform is uniquely designed specifically for Surgical Technology and Surgical Assistant training and includes CST-aligned curricula, camera navigation exercises, and anatomy landmark modules required for program outcomes. No authorized resellers or third-party distributors provide equivalent CST-specific simulation systems in the U.S. market.

**Sole Source Vendor Name:** Surgical Science North America, Inc.

**Based upon the following determination, Agency proposes to acquire the supplies, construction, information technology, and/or services described herein from the vendor named above per SC Code Ann § 11-35-1560 and SC Regulation 19-445.2105, Sole Source Procurement.**

**Description of supplies, construction, information technology, and/or services vendor will provide under the contract:** *(See instructions on last page for guidance.)*

Two LapSim ST Express virtual reality laparoscopic training systems including CST-aligned camera navigation and minimally invasive simulation modules, hardware interfaces for camera and instrument manipulation, curriculum-based training exercises, performance assessment metrics, installation, training, and service support. Systems provide structured simulation for camera assistance, spatial orientation, instrument coordination, and anatomy landmark recognition required for surgical technology mock surgery laboratory training.

**Explain why the described solution is the only solution that meets the agency's need and how no other identified solutions were sufficient.** *(See instructions on last page for guidance)*

Click or tap here to enter text. The Surgical Technology curriculum requires students to demonstrate camera assistance and endoscopic visualization competencies during simulated intraoperative procedures. These competencies include camera angle manipulation, spatial

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orientation, anatomical landmark identification, and coordinated camera-instrument psychomotor skills as defined in AST Core Curriculum standards and CST role position statements. The LapSim ST system is the only commercially available simulation platform specifically designed for Surgical Technology and Surgical Assistant training with CST-aligned camera navigation curricula and assessment modules. Manufacturer confirmation states the LapSim ST platform is exclusively produced and distributed by Surgical Science and that no equivalent competing CST-specific system exists in the U.S. market. General laparoscopic simulators evaluated do not provide CST-role-specific curricula, required camera training modules, or AST-aligned competency frameworks. Therefore, no other identified solution satisfies the program's accreditation-driven instructional requirements.

To ensure continuity of curriculum delivery and instructional consistency, any additional equipment must be identical to the simulation platform currently in use.

*Note: Determination is not complete without required signatures and dates*

**Required Signatures:**

Prepared by: 

Date: 3/30/2026

Printed Name: Erin Ivey

Title: Program Director

Approved by: 

4 2 2026

Approval Date: 8 / /

Printed Name: Enter Authorized Approver Name

Title: Enter Authorized Approver Title

*The last page contains instructions and is not required to be retained.*



**REQUEST FOR MAJOR EQUIPMENT  
OR SERVICE OVER \$25,000**

If State Contract is not available, then:

- \$25,000 - \$50,000 – Must Be Advertised for Quotes
- Greater than \$50,000 – Requires an Advertised bid (IFB) or request for proposal (RFP). Contact Procurement.

Department Name: Surgical Technology

Requester Name: Erin Ivey

Department Head (up to \$1,000): Regina Brown

Academic Dean/Director (\$1,001 - \$2,500): Smartha Okoye

Vice President (over \$2,500): John Sted

President (over \$10,000): M. J. [Signature]

Cabinet Chair: [Signature]

**Vendor Information: (If new, attached W9)**

Name: Surgical Science North America H00301390

Address: 23500 Mercantile Rd. Suite F

City/State/Zip Beachwood, Ohio 44122

Phone Number/E-mail 1-800-918-1670 www.surgicalscience.com

QUANTITY	UNIT OF MEASURE	DESCRIPTION	UNIT COST	TOTAL
2	ea	LapSimST Express Virtual Reality Training Systems w/ Software	37181.50	74363.00
		Note: This price is for the platform bundle covering the two Express systems as quoted.		
1	lot	Software Module Add-Ons	39957.00	39957.00
2	ea	Extended Service Contracts	5750.00	11500.00
		<u>Becky Larson - Sales Rep. for new equip</u> <b>Be Sure to Include Shipping &amp; Tax</b>		125820.00

**PURPOSE OF REQUEST:** We currently have two stationary LapSim ST simulation systems in use. Due to increased program enrollment and improved student retention, these two units are no longer sufficient to meet current training demand. The addition of two LapSim ST Express models will provide adequate student access time to complete required simulation training modules and competency benchmarks necessary to meet accreditation standards.

The LapSim ST Express systems will also support recruitment events, program demonstrations, skills validation activities, and faculty training, while increasing scheduling flexibility and instructional capacity within the Surgical Technology program.

This purchase supports HGTC strategic goals for student success, workforce readiness, and technology-enhanced instruction by expanding simulation training capacity. Additional LapSim ST Express systems align with Surgical Technology program goals and outcomes by strengthening cognitive knowledge, psychomotor skills, and professional practice behaviors while ensuring students can meet competency and accreditation standards despite increased enrollment.

**STRATEGIC GOALS & OUTCOMES:**

**ACCOUNTING USE ONLY**

FOAPAL \$124,608.80 (114,320.00 + 10,288.80)

FOAPAL \$12,535 (11,500.00 + 1,035.00)

FOAPAL 26900-80001-7507-10-12051

FOAPAL 26900-80001-7560-10-12051

3-17-20  
[Signature]

Source of Funds: DEPT. \_\_\_\_\_ GRANT \_\_\_\_\_ INSTITUTIONAL \_\_\_\_\_ SEFAC \_\_\_\_\_

**Surgical Science North America**

23500 Mercantile Rd, Suite F  
Beachwood, Ohio 44122. USA

**Quote**

Quote #Q-26-T8H3T1  
Date: 31-March-26

To:  
Horry Georgetown Technical College  
Erin Ivey, CST  
erin.ivey@hgtc.edu

Expiration Date: 30-April-26

Quantity	Description	Unit Price	Line Total
2	LapSim ST Express	\$37,318.00	\$74,636.00
6	LapSim ST Platinum Service	\$5,500.00	\$33,000.00
2	LapSim ST Cholecystectomy module	\$4,500.00	\$9,000.00
2	LapSim ST VATS module	\$4,500.00	\$9,000.00
2	LapSim ST Basic Skills module	\$0.00	\$0.00
1	Shipping & Handling: Charges per system	\$0.00	\$0.00

**Subtotal** \$125,636.00 USD

**Order Total** \$125,636.00 USD

9% TAX 11,307.24  
\$ 136,943.24

Quotation prepared by: Becky Larson

becky.larson@surgicalscience.com

This is a quotation on the goods named, subject to the conditions noted below: All sales final, payment due upon receipt.

To accept this quotation, sign here and return:

\_\_\_\_\_

All prices are exclusive of any tariffs, duties, import taxes, or other governmental charges. If applicable at the time of import or delivery, these charges shall be the sole responsibility of the buyer

This offer is confidential and is meant for the customer and its staff only. The offer and any part thereof may not be shared or disclosed by any means to any third party, including, but not limited to, a competitor of Surgical Science.

All prices are exclusive of any tariffs, duties, import taxes, or other governmental charges. If applicable at the time of import or delivery, these charges shall be the sole responsibility of the buyer.

\* Please refer to quotation, under separated cover, for MentorLearn Cloud. This will include descriptions, Software License Agreement, General Terms and Conditions, Cloud prices and special packages.

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## Flexible financing options

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Outside of the traditional purchase option, Surgical Science has the flexibility to offer a wide range of payment structures through our partner Blue Street Capital.

If you have any additional questions or want more information, please reach out directly to:

[BBarton@BlueStreetCapital.com](mailto:BBarton@BlueStreetCapital.com) or at (714) 316-1597.

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## About Surgical Science

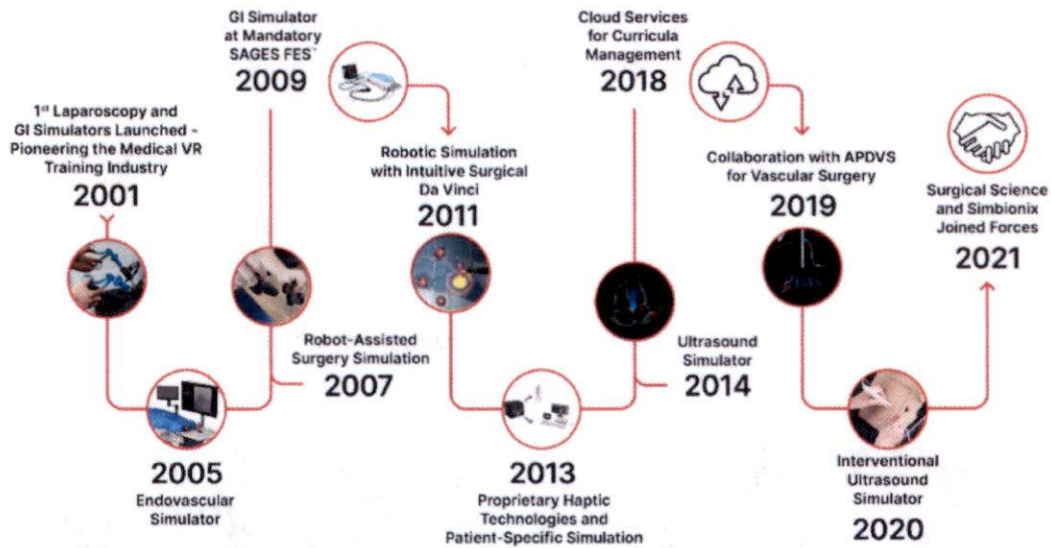
Our robust line of virtual reality medical simulators are designed to provide realistic hands-on training of critical skills and full procedures without patient risk for a variety of procedures including laparoscopy, endovascular, robotics, GI endoscopy, urology, ultrasound interventions, orthopedics and more. All our products are developed in collaboration with global medical experts who play an active role in simulation design, content definition, and product testing and validation.

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Cooperation with leading professional societies, credentialing boards and academic institutions around the world are all part of establishing simulation-based curricula and meeting certification requirements. In addition, our products have been validated in numerous scientific studies, the details for which can be found on our website at [www.surgicalscience.com](http://www.surgicalscience.com).



Below are just a few of the reasons why Surgical Science has become the partner of choice for the medical device industry and an approved vendor for governments and academic institutions around the world:



24/7 global customer support call center, remote access, and a dedicated support team



Global footprint with production in the US, Sweden, Israel, and a network of distributors and sales offices on all continents.

## MIS

Full spectrum of MIS simulators

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Pioneers in the development of innovative simulation applications such as patient-specific simulation through our Procedure Rehearsal Studio™;

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Endorsed by, collaborates with, and maintains ongoing relationships with multiple medical professional societies



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## SURGICAL SCIENCE GENERAL STANDARD TERMS AND CONDITIONS

Surgical Science North America | 23500 Mercantile Rd, Suite F | Beachwood, OH 44122  
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[OrdersNA@surgicalscience.com](mailto:OrdersNA@surgicalscience.com)

**General Provisions** The quotation together with these General Terms and Conditions (collectively, the "**Agreement**") governs (i) 484795the sale by Surgical Science of the products listed above (the "**Equipment**"), and (ii) the licensing by Surgical Science of the proprietary computer programs and related materials (collectively, the "**Software**") that are either included with the Equipment at the time of sale or provided separately to you (the "**Customer**"), as detailed in the quoted items section above. The Equipment and Software are provided to the Customer subject to the terms and conditions set forth in this Agreement. Customer has selected the Equipment and Software based solely on their specifications.

CUSTOMER ACKNOWLEDGES THAT THE EQUIPMENT AND SOFTWARE MAY CONTAIN RECYCLED CONTENT INCLUDING COMPONENTS OR MATERIALS THAT ARE USED OR RECONDITIONED TO LIKE NEW PERFORMANCE AND FUNCTIONALITY. THE EXISTENCE OF RECYCLED CONTENT MAY BE DISCLOSED AS SUCH IN THIS AGREEMENT AND ON AN EQUIPMENT-SPECIFIC LABEL.

If either party believes that other matters beyond those covered in this document are part of the Agreement, the parties will (a) describe and acknowledge them within the quotation of the Agreement or (b) staple a copy or description of them to the Agreement and initial them before signing; otherwise, they are not included as part of the Agreement for the purchase of this Equipment and license of Software. After Customer signs the Agreement (or any Amendment to it), the Agreement will become a binding contract when and if it is executed by an officer or other authorized designee of Surgical Science. In the event of any inconsistency or conflict between the terms of this Agreement and any other document, attachment, or communication related to the sale of the Equipment or the license of the Software, the terms of this Agreement shall prevail and govern.

**Software License** Customer acknowledges and agrees that the Software shall be licensed to Customer pursuant to terms and conditions contained in a license presented electronically during installation of the Software (commonly referred to as a "click-through" license). Customer and Surgical Science agree that the terms and conditions of any click-through license contained in the Software are hereby incorporated by reference into the Agreement as if fully set forth herein. Customer agrees to be bound by the terms and conditions of any such click-through license contained in the Software, regardless of whether the Software generating such click-through license is installed by Customer's employee, Surgical Science or an independent contractor installing the Software for Customer's use. Surgical Science will provide a copy of the applicable click-through license to Customer upon request.

**Warranty** Equipment - Surgical Science or its Authorized Service Provider will promptly repair or replace the Equipment, if required, to ensure it is free of defects at the time of delivery and during the warranty period. For the purposes of this warranty, "**Authorized Service Provider**" means any third party expressly designated or approved in writing by Surgical Science to perform maintenance, repair, or support services on the Equipment. The Equipment is considered free from defects if, upon the passing of risk, it conforms to the specifications set forth in this Agreement, or as described in manuals, marketing materials, or other

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informational content provided by Surgical Science, including those available on its website at [www.surgicalscience.com](http://www.surgicalscience.com). Repairs required during the warranty period due to abnormal use or conditions, including but not limited to riots, floods, misuse, neglect, installation of software not provided by Surgical Science, use contrary to Surgical Science user manual, or servicing by anyone except Surgical Science or its Authorized Service Provider, are excluded from this warranty. If requested by Surgical Science, Customer shall return to Surgical Science, at Surgical Science' expense, any defective parts replaced under warranty, and title to such parts shall transfer to Surgical Science. The warranty period for the Equipment is one (1) year, unless otherwise stated in this Agreement, and shall start thirty (30) days after delivery to the Customer or upon installation, whichever occurs first. Warranty terms applicable to the Software are governed by the click-through license presented during installation.

- a. THE FOREGOING WARRANTIES ARE EXCLUSIVE AND IN LIEU OF ANY OTHER WARRANTIES, WHETHER EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSES, EACH OF WHICH IS HEREBY DISCLAIMED.

**Limitation of Liability** Surgical Science will not be responsible to Customer for any indirect, incidental, special, or consequential damages including but not limited to loss of profit, loss of data, or loss of employee time, regardless of the cause and even if advised of the possibility of such damages.

In no event shall the liability and/or obligations of Surgical Science under the Agreement, or arising out of the purchase, lease, license, or use of the Equipment by Customer or others, exceed the total purchase price paid for the Equipment.

Limitations of liability relating to the Software are governed by the click-through license presented during installation.

**Disclaimer** Surgical procedures must be performed only by licensed surgeons who have developed the necessary skills to carry out the tasks associated with each procedure and who have received specific training. Surgical Science's educational products are designed to support skills development in specific areas and are not intended to teach surgical procedures or replace formal medical education. Simulated training models may differ significantly from real life surgical conditions. Surgical Science makes no representation or warranties regarding the competency, training or licensing of any medical professionals.

**Installation and service** Surgical Science will install the Equipment, provide on-site or remote training, of approximately 1 1/2 days and provide any maintenance services required to keep the Equipment in good operating condition during the warranty period, unless otherwise stated in the Agreement. Installation and maintenance services will be performed by Surgical Science or its Authorized Service Provider during normal business hours. Surgical Science and Customer will cooperate to meet any Customer security requirements while still ensuring unrestricted access to the Equipment. Customer shall provide necessary computer access for

installation and maintenance at no cost to Surgical Science. Surgical Science will accept responsibility for any damages caused by the negligence of its employees or Authorized Service Providers while on Customer's premises in the course of performing installation or maintenance.

**Title, risk of loss and delivery** Surgical Science shall ship the Equipment within 45-60 from approval of Customer's purchase order. If conditions arise that prevent compliance with the delivery schedules, Surgical Science shall not be liable for any damages or penalties resulting from the delay, or for failure to provide advance notice of such delay. However, Surgical Science will use all reasonable efforts to notify Customer of any anticipated delays. Delays will not be grounds for cancellation. Delivery shall be Ex Works (Incoterms 2020) on the actual shipping date, and title and the risk of loss transfer to Customer upon shipment. Freight and insurance will be invoiced unless otherwise specified in this Agreement.

**Payment** Unless otherwise stated in the Agreement, payment terms shall be net 30 days from the date of the invoice. The price of the Equipment and the Software is denominated in US Dollars and does not include any applicable sales tax, use tax duties, or other governmental fees, all which shall be the responsibility of the Customer. On overdue accounts, Customer shall pay interest at the rate of one and one-half percent (1.5%) per month or the highest rate permitted under applicable law, whichever is greater. If claiming exemption from sales or use taxes, the Customer shall provide Surgical Science with a valid tax exemption certificate, direct pay certificate or resale certificate, applicable to the 'Ship to' location.

**Patents and Intellectual Property** If any third party claims the Equipment or Software infringes their U.S., European Union or Japanese patent, copyright, trade secret or other proprietary right, Surgical Science will indemnify and hold Customer harmless from any resulting damages, judgments or settlements (including costs and reasonable attorney's fees), provided that Customer promptly notifies Surgical Science in writing of the claim and permits Surgical Science to assume control of the defense. If Surgical Science elects to take over the defense, it shall have the sole right to select counsel and to defend or settle the matter at its discretion. Surgical Science may, at its own expense, (i) substitute comparable non-infringing Equipment or Software, (ii) modify the Equipment or Software to make it non-infringing (provided it continues to meet the agreed specifications), or (iii) obtain for Customer the right to continue using the Equipment or Software. If none of the foregoing options is commercially reasonable and continued use is enjoined, Surgical Science may repurchase the Equipment or Software from Customer at the original purchase price, less a reasonable rental value based on Surgical Science's lowest standard lease or rental rate at the time of original delivery. This indemnification does not apply to claims arising from modifications made by parties other than Surgical Science or its authorized representatives, or from use in combination with other devices not supplied by Surgical Science. All intellectual property rights in and to the Equipment and Software, including but not limited to patents, copyrights, trademarks, and trade secrets, shall remain the sole and exclusive property of Surgical Science. Nothing in this

Agreement shall be construed as transferring any ownership rights to the Customer, except for the limited license rights expressly granted herein.

**Security interest in equipment & software** Customer grants Surgical Science a first priority security interest in all Equipment and Software delivered until payment in full for such Equipment and Software has been received by Surgical Science. Customer hereby grants Surgical Science the right to file such protective financing or similar statements to confirm and record Surgical Science' security interest in all Equipment and Software.

**Export compliance** Customer shall not export, re-export, transfer, or otherwise transmit, directly or indirectly, any Equipment or Software, or any technical data or information related thereto, except in full compliance with all applicable export control laws and regulations, including but not limited to those of the United States, the European Union, and any other relevant jurisdictions. These obligations shall survive the expiration or termination of this Agreement and shall remain binding on the Customer thereafter.

**Force majeure** Neither party shall be liable to the other for any delay or failure to perform its obligations under this Agreement due to causes beyond its reasonable control, including but not limited to acts of God, natural disasters (such as floods, earthquakes, or storms), war, terrorism, civil unrest, riots, insurrections, embargoes, labor strikes, pandemics, epidemics, governmental actions or restrictions, failure of suppliers or subcontractors, or inability to obtain materials, transportation, or utilities. The affected party shall promptly notify the other party in writing of the occurrence of such an event and shall use commercially reasonable efforts to resume performance as soon as practicable. The time for performance shall be extended for a period equal to the duration of the force majeure event.

**Severability** If any provision of this Agreement is held to be invalid, illegal, or unenforceable, the remaining provisions shall remain in full force and effect. In such case, the parties shall agree on a valid and enforceable substitute that most closely reflects the original intent and commercial purpose of the invalid provision.

**Dispute resolution** Customer and Surgical Science shall endeavor to resolve any controversy, claim, or dispute arising out of or relating to this Agreement through good faith negotiation. If the matter is not resolved within fifteen (15) days, it shall be escalated to senior management of both parties for further discussion. If unresolved after an additional fifteen (15) days, the dispute shall be referred to each party's legal counsel for final negotiation efforts. If the dispute remains unresolved after thirty (30) days from the initial notice, it shall be settled by arbitration administered by the American Arbitration Association under its Commercial Arbitration Rules. Judgment on the award rendered by the arbitrator(s) may be entered in any court of competent jurisdiction. The arbitration hearing shall take place at the AAA office located in Cleveland, Ohio.

**Other** (a) The Agreement shall be governed by and construed in accordance with the laws of the State of Ohio without regard to conflicts of laws provisions thereof. (b) Both Surgical Science and Customer will comply with all laws applicable to the Agreement. (c) All notices

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given under the Agreement will be effective when received in writing. Notices to the Customer and Surgical Science will be sent to the address provided in the Agreement. (d) Changes to the Agreement must be in writing and must be signed by both parties.

**Complete agreement** Customer acknowledges that it has read the Agreement, understands it, and agrees to be bound by its terms and conditions. Further, Customer represents and agrees that the Agreement and the click-through licenses contained in the Software set forth the complete and exclusive statement of the agreement including the governing terms and conditions between the parties, which shall prevail over and supersede all proposals, printed provisions on subordinate Customer documents including purchase orders, oral or written agreements, the Customer's general terms and conditions and all other communications between the parties relating to the subject matter of the Agreement.

**LABS SKILLS ASSESSMENT  
INTRAOPERATIVE CASE MANAGEMENT**

**Objectives:** The learner will demonstrate:

1. A mock surgical procedure utilizing the principles of asepsis in the first scrub role.
2. A mock surgical procedure utilizing the principles of asepsis in the second scrub role.

**Content:**

- I. First scrub role
  - A. Instrumentation<sup>2</sup>
    1. Selection
    2. Application
    3. Preparation
    4. Passing<sup>1</sup>
    5. Anticipation
    6. Point-of-use cleaning<sup>2,3</sup>
  - B. Sponge handling and tracking<sup>2</sup>
  - C. Sharps handling and safety<sup>2</sup>
    1. Scalpel
      - a) Loading and unloading
      - b) Passing
    2. Suture<sup>4</sup>
      - a) Loading and unloading
      - b) Passing right and left-handed
      - c) Suture needles
        - 1) Keith
        - 2) Free (thread, pass, reload)
        - 3) Swaged
      - d) Suture ligatures (ties)
        - 1) Dispensing reel
        - 2) Free hand
        - 3) Stick tie
        - 4) Tie on passer
      - e) Cutting
      - f) Tagging
    3. Hypodermic syringe and needle
      - a) Capping and uncapping
      - b) Passing the syringe
  - D. Supplies<sup>5</sup>
    1. Hemoclips
      - a) Loading and passing
    2. Staplers
      - a) Loading and passing

\*Refer to the following didactic sections of the core for specific information regarding content in this section:

1. *Surgical Incisions and Wound Exposure*
2. *Maintenance of the Sterile Field*
3. *Sterile Processing*
4. *Wound Management*
5. *Supplies*
6. *Specimen Care and Handling*
7. *Asepsis and Sterile Technique*
8. *Surgical Counts*
9. *Application of Dressings*

- b) Applying skin staples
    - 3. Obtaining and counting additional
  - E. Medication and irrigation<sup>2</sup>
    - 1. Tracking
    - 2. Reporting
  - F. Specimen<sup>6</sup>
    - 1. Collection
    - 2. Verification
    - 3. Transfer
  - G. Movement within the sterile field<sup>7</sup>
    - 1. Passing non-sterile and sterile team members
  - H. Recognizing and correcting contamination<sup>2,7</sup>
  - I. Closing counts<sup>8</sup>
    - 1. Timing
    - 2. Sequence
    - 3. Incorrect count resolution
  - J. Dressings<sup>9</sup>
    - 1. Preparation
    - 2. Application
- II. Second scrub role
  - A. Cutting suture<sup>4</sup>
  - B. Providing camera assistance
  - C. Retracting<sup>1</sup>
  - D. Sponging<sup>1,2</sup>
  - E. Suctioning<sup>1,2</sup>

# Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Give form to the  
 requester. Do not  
 send to the IRS.

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<b>1</b>	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)  <p style="text-align: center;"><b>Simbionix USA Corporation</b></p>		
	<b>2</b>	Business name/disregarded entity name, if different from above.  <p style="text-align: center;"><b>dba Surgical Science North America</b></p>		
	<b>3a</b>	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____  <i>(Applies to accounts maintained outside the United States.)</i>	
	<b>3b</b>	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See Instructions . . . . . <input type="checkbox"/>		
	<b>5</b>	Address (number, street, and apt. or suite no.). See instructions. <b>23500 Mercantile Road, Suite F</b>	Requester's name and address (optional)	
	<b>6</b>	City, state, and ZIP code <b>Beachwood, OH 44122</b>		
	<b>7</b>	List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number										
or										
Employer identification number										
0	2		-	0	5	3	0	9	4	0

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

**Part II Certification**

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person	Date <b>12/4/2024</b>
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**What's New**

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

**Purpose of Form**

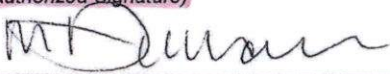
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

## OPEN TRADE REPRESENTATION

(S.C. Code Ann. §§ 11-35-5300)

The following representation, which is required by Section 11-35-5300(A), is a material inducement for the State to award a contract to you.

I, the official named below, certify I am duly authorized to execute this certification on behalf of the vendor identified below, and, as of the date of my signature, the vendor identified below is not currently engaged in the boycott of a person or an entity based in or doing business with a jurisdiction with whom South Carolina can enjoy open trade, as defined in SC Code Section 11-35-5300.

Vendor Name (Printed)	State Vendor No.
Simbionix USA Corporation DBA Surgical Science North America	7000382401
By (Authorized Signature)	Date Executed
	3/30/2026
Printed Name and Title of Person Signing	[Not used]
Megan Duman, Country Manager North America	



## AFFIDAVIT

I certify that we will comply with Section 44-107-10, ET Seg., relating to the South Carolina Drug-Free Workplace Act to provide a drug-free workplace. (Note: this clause applies to any resultant contract of \$50,000.00 or more). The State of South Carolina has amended Title 44, Code of Laws of South Carolina, 1976, relating to health, by adding chapter 107, so as to enact the Drug-Free Workplace Act. (See, Act no. 593, 1990 Acts and Joint Resolutions.)

Vendor: Simbronic USA Corporation DBA Surgical Science North America

23500 Mercantile Rd Suite F Beachwood OH 44122  
Street or P. O. Box City State Zip

Telephone: 216-270-2020 Fax N/A

Printed Name: Megan Duman Email megan.duman@surgicalscience.com

X Megan Duman Country Manager North America  
Signature Title

Date: 3/30/2026

F.E.I.N: 02-0530940 or S.S. # \_\_\_\_\_

**FAILURE TO FURNISH THIS AFFIDAVIT WILL RESULT IN THE DELAY OF  
PAYMENT/CONTRACT**

### **THIS PAGE MUST BE SIGNED & RETURNED**

Please return to: Horry Georgetown Technical College  
PO Box 261966  
Conway, SC 29528-6066  
Attn: Dianna Cecala, Procurement Manager

Fax: 843/349-5270  
Tel: 843/349-5207  
Email: Dianna.cecala@hgtc.edu

## Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give form to the  
requester. Do not  
send to the IRS.**

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

**1** Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

**Surgical Science North America Corporation**

**2** Business name/disregarded entity name, if different from above.

**3a** Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

- Individual/sole proprietor   
  C corporation   
  S corporation   
  Partnership   
  Trust/estate  
 LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) \_\_\_\_\_  
**Note:** Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.  
 Other (see instructions) \_\_\_\_\_

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_  
 Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) \_\_\_\_\_

**3b** If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions \_\_\_\_\_

*(Applies to accounts maintained outside the United States.)*

**5** Address (number, street, and apt. or suite no.). See instructions.

**23500 Mercantile Rd Suite F**

**6** City, state, and ZIP code

**Beachwood, Ohio 44122**

**7** List account number(s) here (optional)

Requester's name and address (optional)

Print or type. See Specific Instructions on page 3.

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Social security number**

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or

**Employer identification number**

0	2	-	0	5	3	0	9	4	0
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**Note:** If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

### Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign Here**

Signature of U.S. person

*[Handwritten Signature]*

Date

*3/16/2024*

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

# surgicalscience

This letter is to confirm that the LAPSIM® ST Training System is a sole-source product which is manufactured, sold, and distributed exclusively by Surgical Science Inc. No division of Surgical Science Inc. nor any other company makes a similar or competing product. This product must be purchased directly from Surgical Science Inc. and there are no agents or dealers authorized in the United States to represent this product. Surgical Science is the leading supplier of virtual reality simulators for medical training. Our training systems for laparoscopy and endoscopy are used by medical training centers and institutes worldwide for practice, validation and certification of students, surgeons, and medical doctors.

The LAPSIM® ST is exclusively designed for Surgical Technology & Surgical Assistant Training to include 5 port placement choices, camera that changes virtually from 0 – 30 – 45 Degrees, exercises to develop camera navigation, surgical anatomy, 9 optional full procedural modules, laparoscopic instrumentation for Surgical Technology & Surgical Assistant training, which makes it a sole-source item. The stations curricula are designed by a CSFA/CST educator specifically for the student surgical technologist/student surgical assistant to obtain a proficiency within the general and obstetrics-gynecological surgical specialties, with activities, for example, that teach anatomical identification, aligning with aspects of the AST Core Curriculum, 7th Edition and the 2015 AST Position Statement on the Role and Duties of the CST During Endoscopic Procedures.

Below find the aligning objectives.

- The learner will demonstrate accurate camera angles and orientation through manual manipulation (AST Position Statement, Role and Duties of the CST During Endoscopic Procedures, 2015)
- The learner will accurately distinguish between anatomical structures with precision and efficiency (7e, Anatomy and Physiology)
- The learner will demonstrate spatial awareness through recall to correctly resume camera position (AST Position Statement, Role and Duties of the CST During Endoscopic Procedures, 2015)
- The learner will be able to employ spatial awareness to manipulate the camera and an instrument with both left and right hands using coordination with efficiency
- The learner will apply spatial awareness and use coordination to demonstrate dexterity with both left and right hands
- The learner will correctly demonstrate the use of an endoscope as an operative instrument (7e, Instrumentation, p. 123)
- The learner will apply knowledge of endoscopic instrumentation in the general surgery minimally invasive specialty (7e, Instrumentation, p.123)
- The learner will show efficient and safe execution of advancing the endoscope and maintaining orientation and depth to provide optimal visualization (AST Position Statement, Role and Duties of the CST During Endoscopic Procedures, 2015)
- The learner will safely and efficiently reposition the endoscope throughout various exercises to enhance efficiency in maintaining optimal visualization (AST Position Statement, Role and Duties of the CST During Endoscopic Procedures, 2015)
- The learner will accurately comprehend and navigate the endoscope to emphasize key gynecological anatomy as prompted through medical terminology (7e, Anatomy and Physiology)

If you have any additional questions, feel free to reach out to me.

We look forward to providing exceptional products, knowledge and service to your students and staff.

Sincerely,

*Becky Larson*

Becky Larson  
Health Sciences Sales Manager  
612-358-5745  
[becky.larson@surgicalscience.com](mailto:becky.larson@surgicalscience.com)

**LAPSIM® ST**

