



NEW HAVEN PUBLIC SCHOOLS

## COVER SHEET

**Cover Sheet is an Internal Document for Business Office Use**

### Please Type

Contractor full name: Connecticut Orthopaedic Specialists, P.C.

Doing Business As, if applicable: COS

Business Address: 2408 Whitney Avenue, Suite 140, Hamden, CT 06518

Business Phone: 203-407-3500

Business email: SBader@ct-ortho.com

Principal or Supervisor: Erik Patchkofsky

Agreement Effective Dates: From 08/01/22 To 06/30/23

Total amount: \$6,750.00

Funding Source & Acct # including location code: 190-40400-56694


Description of Service: This service provides on-site medical physician for our student-athletes during athletic games/events.

Submitted by: Erik Patchkofsky



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## Operations Memorandum

**To:** New Haven Board of Education Finance and Operations Committee  
**From:** Erik Patchkofsky, Athletic Director   
**Date:** June 24, 2022  
**Re:** 2022-2023 Connecticut Orthopaedic Specialists, P.C. Agreement

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Please **answer all questions** and have someone **ready to discuss** the details of each question during the Finance & Operations meeting or this proposal might not be advanced for consideration by the full Board of Education.

**Contractor Name:** Connecticut Orthopaedic Specialists

**Contractor Address:** 2408 Whitney Avenue, Suite 140, Hamden, CT 06518

**Is the contractor a Minority or Women Owned Small Business?** No

**Renewal or Award of Contract/Agreement?** Renewal

**Total Amount of Contract/Agreement and the Hourly or Service Rate:** \$6,750/\$450

**Contract or Agreement #:**

**Funding Source & Account #:** 190-40400-56694

### Key Questions:

1. **What specific service will the contractor provide:** To provide one physician to attend all New Haven High Schools Football Games and other specifically requested, agreed upon, athletic events.
2. **How was the contractor selected? Quotes? RFP? Sealed Bid or Sole Source? Please describe the selection process including other sources considered and the rationale for selecting this method of selection:** Sole Source. The contractor has specialized skills, experience and carefully chosen through an interview process.
3. **If the vendor is not the lowest bidder or a State contract please answer the following:**
  - a. **Please explain why the vendor was chosen?** COS will provide medical attention and medical evaluation for student-athletes during athletic games/events and end of the year evaluations.
  - b. **Who were the members of the selection committee?** PE, Health/Athletics/Floyd Little Athletic Center Dept. Supervisor, Middle School Athletic Director, Consultant and Business Manager.



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4. **If this is a renewal with a current vendor, has the vendor's performance been satisfactory under the existing contract or agreement?** Yes, Connecticut Orthopaedics Specialists, P.C. has been extremely effective in meeting the needs of our student athletes and very pleased with their work.
5. **If this Contract/Agreement is a Renewal has cost increased? If yes, by how much?** Yes, \$50 per game/athletic event.
6. **If this Contractor is New has cost for service increased from previous years? If yes, by how much?** N/A
7. **Is this a service existing staff could provide? Why or why not?** No, Medical Physician Services.