TMDE ACQUISITION APPROVAL ANALYSIS DATA

For use of this form, see AR 750-43; the proponent agency is DCS, G-4.

1a. THRU	1b. TO	2. FROM
USAMMA MCMR-MMO-MN 693 NEIMAN STREET FORT DETRICK, MD 21702	PD, TEST, MEASUREMENT, AND DIAGNOSTIC EQUIPMENT ATTN: SFAE-C S S-JC-TM-TEMOD BLDG 3651 HUNTSVILLE, AL 35898-5400 MAILTO:REDS.TEMOD@CONUS.ARMY.MIL	PRIMARY HAND-RECIPT HOLDER MCMR-MMO-SMC 25600 S. CHRISMAN ROAD BLDG T-255 TRACY, CA 95304 MAILTO:KEITH.HUSSAR@AMEDD.ARMY.MIL

3. TMDE NOMENCLATURE	4. MODEL / PART NUMBER	5. UNIT COST
DOPPLER FLOW SYSTEM	1425A	$9,995.00

6. NSN	7. LIN	8. MANUFACTURER'S NAME	9. CAGE CODE
NONE ASSIGNED	NONE ASSIGNED	GAMMEX INC	0Y5N8

10. SYSTEM APPLICATION	11. RDD	12. AUTHORIZATION DOCUMENT
BLOOD FLOW SIMULATION AND RESOLUTION TARGETS FOR ULTRASOUND DOPPLER	20081230	W05J02

USER SUPPORTABILITY DATA

13. END ITEM MEASUREMENT REQUIREMENTS / TMDE SPECIFICATIONS

ULTRASOUND SYSTEM, PORTABLE-HOSPITAL

14. PUBLICATIONS

OPERATION/SERVICE MANUAL

15. USER MOS OR SKILL	16. LEVEL OF USE	17. MAINT MOS OR SKILL	18. LEVEL OF MAINT
68A	F, C, O	68A	D

19. DISTRIBUTION / QUANTITY	20. REMARKS
TRACY, CA / QTY: 2	2(EA) FOR TRACY, CA USED FOR SONOSITE 180 PLUS

21a. TYPED NAME AND TITLE	21b. PHONE NUMBER / E-MAIL
KEITH M. HUSSAR PRIMARY HAND RECIPT HOLDER	DSN:462-4557 COM: 209-839-4557 KEITH.HUSSAR@US.ARMY.MIL
21c. SIGNATURE	21d. DATE *(YYYYMMDD)*

USATA SUPPORTABILITY ANALYSIS

22. CALIBRATION AND REPAIR SUPPORTABILITY *(C&RS)*

ITEM ☐ IS ☐ IS NOT SUPPORTABLE BY THE ARMY'S C&RS PROGRAM

23. REMARKS

24a. TYPED NAME AND TITLE	24b. PHONE NUMBER / E-MAIL
24c. SIGNATURE	24d. DATE *(YYYYMMDD)*

Sample