

**BUSINESS PUBLICATION CIRCULATION STATEMENT  
FOR THE 6 MONTH PERIOD ENDED JUNE 2011  
(Including Supplementary Data)**

No attempt has been made to rank the information contained in this report in order of importance, since BPA Worldwide believes this is a judgment, which must be made by the user of the report.

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# HEALTHCARE PURCHASING NEWS

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**FIELD SERVED**

HEALTHCARE PURCHASING NEWS serves healthcare professionals who are responsible for the procurement and evaluation of products or services in hospitals, healthcare group purchasing organizations or alliance, multi-hospital system corporate headquarters, government purchasing organizations, HMOs, PPOs, surgi-centers, ambulatory care centers, long-term and home health care, insurance/accounting/investment/3rd party administrators, and integrated networks, distributors and manufacturers, and others allied to the field.

**DEFINITION OF RECIPIENT QUALIFICATION**

Qualified recipients are administrators, VPs of materials management, directors of materials management, material managers, VPs of support services, value analysis coordinators, OR materials managers, assistant materials managers, other materials management personnel, chief executive officers, chief financial officers, chief operating officers, hospital administrators, chief purchasing directors, purchasing managers, buyers, purchasing agents, contract directors/managers, other purchasing personnel, central service directors, central service supervisors, central service managers, other central service personnel, infection control practitioners, infection prevention directors, infection prevention supervisors, OR directors, OR managers, OR supervisors, surgical services directors, surgical services managers, surgical services supervisors, other OR personnel involved in purchasing, head nurses/directors of nursing, nursing/practitioners, medical directors, professional department heads, consultants involved with purchasing, clinical educators and evaluation/standardization and safety committee members, and Other titled and non-titled personnel.

**PURPOSE**

Including herein in an analysis of the recipients who indicated which products/services their organization recommends, buys or specifies.

AVERAGE NON-QUALIFIED CIRCULATION	
NON-QUALIFIED Not Included Elsewhere	Copies
Other Paid Circulation _____	33
Advertiser and Agency _____	1,766
Rotated or Occasional _____	-
Allocated for Trade Shows and Conventions _____	228
Digital _____	-
All Other _____	1,677
<b>TOTAL</b>	<b>3,704</b>

1. AVERAGE QUALIFIED CIRCULATION BREAKOUT FOR PERIOD						
QUALIFIED CIRCULATION	Total Qualified		Qualified Non-Paid		Qualified Paid	
	Copies	Percent	Copies	Percent	Copies	Percent
Individual _____	33,175	100.0	33,175	100.0	-	-
Sponsored Individually Addressed _____	-	-	-	-	-	-
Membership Benefit _____	-	-	-	-	-	-
Multi-Copy Same Addressee _____	-	-	-	-	-	-
Single Copy Sales _____	-	-	-	-	-	-
<b>TOTAL QUALIFIED CIRCULATION</b>	<b>33,175</b>	<b>100.0</b>	<b>33,175</b>	<b>100.0</b>	<b>-</b>	<b>-</b>

2. QUALIFIED CIRCULATION BY ISSUES FOR PERIOD			
2011 Issue	Number Removed	Number Added	Total Qualified
January _____	58	58	33,175
February _____	34	34	33,175
March _____	69	69	33,175
April _____	104	104	33,175
May _____	4,117	4,117	33,175
June _____	-	-	33,175
<b>TOTAL</b>	<b>4,382</b>	<b>4,382</b>	

**3a. BUSINESS/OCCUPATION BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2011**

This issue is equal to the average of the other 5 issues reported in Paragraph two.

BUSINESS AND INDUSTRY	TOTAL QUALIFIED	PERCENT OF TOTAL	VPs, Directors and Managers of Material, VPs of Support Services, Assistant Materials Mgr., Other Material Mgmt. Personnel, Contracts-Director, Manager, Supervisor; Value Analysis Coordinator A.	Chief Purchasing Directors, Purchasing Managers; Buyers, Purchasing Agents and Other Purchasing Personnel B.	CEO, CFO, COO, Hospital Administrator C.	Infection Control Practitioners, Infection Control Directors/ Supervisors D.	OR Directors/Managers/ Supervisors; Surgical Services Directors/Managers/ Supervisors; OR Material Manager; Other OR Personnel Involved in Purchasing E.	Central Service Directors/ Supervisors/ Managers; Other Central Service Personnel (Tech, Coord) F.	Head Nurse/ Director of Nursing; Medical Director; Professional Department Head; Evaluation/ Standardization & Safety Committee Member; Clinical Educator; Nursing/ Practitioner G.	Consultant; Other H.
1. Stand Alone Hospitals (for profit, non-profit, government)	19,914	60.0	4,780	2,115	2,215	3,979	2,635	2,252	1,883	55
2. Integrated Networks (mult. Hospitals/alternate sites) _	5,622	17.0	1,636	758	548	738	689	685	509	59
3. Hospital Group Purchasing Organization or Alliance_	2,268	6.8	611	339	182	310	294	237	208	87
4. Multi-Hospital System Corp Headquarters _____	2,451	7.4	643	319	215	418	334	261	242	19
5. Government Purchasing Agency _____	413	1.2	122	101	28	24	41	36	50	11
6. Surgi-centers/Ambulatory Care Centers _____	543	1.6	112	84	45	44	95	96	64	3
7. Long Term Care _____	994	3.0	174	249	81	116	67	144	158	5
8. Home Health Care _____	161	0.5	40	31	27	7	16	17	22	1
9. HMO/PPO _____	65	0.2	19	8	6	4	9	10	5	4
10. Insurance/Accounting/Investment/3rd Party Administrator _____	127	0.4	25	5	24	3	5	10	20	35
11. Distributor _____	325	1.0	77	36	88	3	7	14	48	52
12. Manufacturer _____	292	0.9	80	14	64	6	12	12	75	29
13. Other _____	-	-	-	-	-	-	-	-	-	-
<b>TOTAL QUALIFIED CIRCULATION</b>	<b>33,175</b>	<b>100.0</b>	<b>8,319</b>	<b>4,059</b>	<b>3,523</b>	<b>5,652</b>	<b>4,204</b>	<b>3,774</b>	<b>3,284</b>	<b>360</b>
<b>PERCENT</b>	<b>100.0</b>		<b>25.1</b>	<b>12.2</b>	<b>10.6</b>	<b>17.0</b>	<b>12.7</b>	<b>11.4</b>	<b>9.9</b>	<b>1.1</b>

NUMBER OF BEDS	TOTAL QUALIFIED	PERCENT OF TOTAL	NUMBER OF BEDS								NOT CLASSIFIED BY NUMBER OF BEDS (I)
			500 OR MORE BEDS (A)	400 - 499 BEDS (B)	300 - 399 BEDS (C)	200 - 299 BEDS (D)	100 - 199 BEDS (E)	50 - 99 BEDS (F)	26 - 49 BEDS (G)	0-25 BEDS (H)	
1. Stand Alone Hospitals (for profit, non-profit, government) _____	19,914	60.0	2,042	1,115	1,813	2,622	4,002	3,277	2,333	1,966	744
2. Integrated Networks (mult. Hospitals /alternate sites) _____	5,622	17.0	1,724	439	604	712	844	525	343	286	145
3. Hospital Group Purchasing Organization or Alliance_	2,268	6.8	474	151	189	265	389	260	170	256	114
4. Multi-Hospital System Corp Headquarters _____	2,451	7.4	654	182	237	341	450	311	158	111	7
5. Government Purchasing Agency _____	413	1.2	98	15	20	46	51	25	19	55	84
6. Surgi-centers/ Ambulatory Care Centers _____	543	1.6	31	9	26	29	51	50	54	275	18
7. Long Term Care _____	994	3.0	136	47	58	111	316	161	107	40	18
8. Home Health Care _____	161	0.5	16	3	9	11	36	19	26	33	8
9. HMO/PPO; Insurance/Accounting/ Investment/ 3rd Party Administrator; Distributor; Manufacturer; Other _____	809	2.4	-	-	-	-	-	-	-	-	809
<b>TOTAL QUALIFIED CIRCULATION</b>	<b>33,175</b>	<b>100.0</b>	<b>5,175</b>	<b>1,961</b>	<b>2,956</b>	<b>4,137</b>	<b>6,139</b>	<b>4,628</b>	<b>3,210</b>	<b>3,022</b>	<b>1,947</b>

**SUPPLEMENTARY DATA OF PRODUCTS, SERVICES SPECIFIED, RECOMMENDED, OR BOUGHT**

This is an analysis of 28,487 or 86.0% recipients who responded to the categories below. Which of the following products/services do you recommend, specify or purchase? See questionnaire used to elicit these data on the back of this report. Since any one respondent may have checked more than one response, the totals for each of these (i.e.: products and services) should not be added together as the total may exceed the total circulation. These data are presented for statistical and marketing purposes.

SUPPLEMENTARY DATA OF PRODUCTS, SERVICES SPECIFIED, RECOMMENDED, OR BOUGHT	NUMBER	Percent
<b>INVENTORY CONTROL</b>		
100 Asset Management Products/Services _____	7,646	23.0
101 Bar Coding/RFID,RTLS & Labeling Systems _____	8,672	26.1
102 Cabinets _____	8,994	27.1
103 Carts _____	9,527	28.7
104 Computer Hardware _____	7,942	23.9
105 Contract Management Systems _____	7,091	21.4
106 File & Retrieval Systems _____	7,349	22.2
107 Forms _____	7,942	23.9
108 Handheld/Point-of-Use Products _____	7,174	21.6
109 Instrument Tracking Systems _____	7,596	22.9
110 Materials Management/Supply Chain Info Systems incl. ERP modules _____	8,150	24.6
111 Printers/Scanners/Copiers/Multi-function _____	7,022	21.2
112 Storage Systems _____	7,008	21.1
113 Other Inventory Control Products _____	4,774	14.4
<b>PATIENT CARE</b>		
200 Bariatric Specialty Equipment/ Supplies _____	9,666	29.1
201 Diagnostic Equipment _____	10,216	30.8
202 ID/Security/Alert Systems _____	8,734	26.3
203 IV Systems/Syringes _____	10,823	32.6
204 Linen _____	10,193	30.7
205 Patient Beds/Furniture _____	10,810	32.6
206 Patient Transport/Lift Products _____	10,921	32.9
207 Patient Warming/ Positioning Products _____	10,148	30.6
208 Respiratory Care & Monitoring _____	9,066	27.3
209 Scales _____	8,847	26.7
210 Temperature/Blood Pressure Monitors _____	10,217	30.8
211 Wound Management/Bandages/Wraps _____	10,175	30.7
212 Other Patient Care Products _____	3,821	11.5
<b>OPERATING ROOM</b>		
300 Cardiac Equipment & Supplies _____	9,326	28.1
301 Catheters/Needles _____	10,163	30.6
302 Critical Care _____	9,889	29.8
303 Custom Procedure Trays/Kits/Packs _____	10,318	31.1
304 Drapes _____	10,314	31.1
305 Endoscopy/Endoscopic Products _____	10,268	31.0
306 Gowns and Protective Wear _____	10,594	31.9
307 Instruments _____	11,630	35.1
308 Orthopedics _____	9,857	29.7
309 Scheduling Systems _____	7,949	24.0
310 Surgical Gloves _____	10,135	30.6
311 Surgical Lights, Lighting Systems _____	9,372	28.3
312 Tables and Stretchers _____	9,362	28.2
313 Wound Care/Hypothermia Products _____	9,364	28.2
314 Other OR Products _____	2,932	8.8
<b>INFECTION CONTROL</b>		
400 Air Purification Systems _____	10,051	30.3
401 Cleaning Equipment & Supplies _____	12,139	36.6
402 Disaster Preparedness Products _____	10,287	31.0
403 Disinfectants & Sterilants _____	12,206	36.8
404 ETO Monitoring Devices _____	10,274	31.0
405 Gloves _____	12,162	36.7
406 Hand Hygiene Products & Dispensers _____	11,417	34.4
407 Protective Wear _____	12,009	36.2
408 Sharps safety products _____	10,943	33.0
409 Sterilization Supplies & Equipment _____	11,564	34.9
410 Sterilization Wraps & Containers _____	11,132	33.6
411 Other Infection Control Products _____	4,592	13.8
<b>OTHER PURCHASING &amp; SERVICES</b>		
500 Business Equipment & Supplies _____	8,376	25.2
501 Communications Equipment _____	7,484	22.6
502 Environmental Services Products _____	8,297	25.0
503 Facility Equipment & Maintenance _____	7,772	23.4
504 Food & Dietary Supplements _____	5,740	17.3
505 Food Service Equipment _____	6,030	18.2
506 Imaging Supplies & Equipment _____	6,773	20.4
507 Laundry Supplies & Equipment _____	6,955	21.0
508 Shipping and Transportation _____	6,718	20.3
509 Waste Management _____	6,909	20.8

**3b. QUALIFICATION SOURCE BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2011**

QUALIFICATION SOURCE	Qualified Within			Total Qualified	Percent
	1 Year	2 Years	3 Years		
I. Direct Request: _____	<b>20,818</b>	<b>10,309</b>	<b>2,048</b>	<b>33,175</b>	<b>100.0</b>
II. Request from recipient's company: _____	-	-	-	-	-
III. Membership Benefit: _____	-	-	-	-	-
IV. Communication from recipient or recipient's company (other than request): _____	-	-	-	-	-
V. <b>TOTAL</b> - Sources other than above (listed alphabetically): _____	-	-	-	-	-
Association rosters and directories _____	-	-	-	-	-
Business directories _____	-	-	-	-	-
Manufacturer's, distributor's, and wholesaler's lists _____	-	-	-	-	-
Other sources _____	-	-	-	-	-
VI. Single Copy Sales: _____	-	-	-	-	-
<b>TOTAL QUALIFIED CIRCULATION</b>	<b>20,818</b>	<b>10,309</b>	<b>2,048</b>	<b>33,175</b>	<b>100.0</b>
<b>PERCENT</b>	<b>62.7</b>	<b>31.1</b>	<b>6.2</b>	<b>100.0</b>	

**3c. MAILING ADDRESS BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2011**

MAILING ADDRESS	Total Qualified	Percent
Individuals by name and title and/or function _____	33,175	100.0
Individuals by name only _____	-	-
Titles or functions only _____	-	-
Company names only _____	-	-
Multi-Copy Same Addressee copies _____	-	-
Single Copy Sales _____	-	-
<b>TOTAL QUALIFIED CIRCULATION</b>	<b>33,175</b>	<b>100.0</b>

**4. GEOGRAPHICAL BREAKOUT OF QUALIFIED CIRCULATION FOR ISSUE OF MAY 2011**

State	Total Qualified	Percent	State	Total Qualified	Percent
Maine _____	219		Kentucky _____	601	
New Hampshire _____	213		Tennessee _____	821	
Vermont _____	106		Alabama _____	563	
Massachusetts _____	678		Mississippi _____	529	
Rhode Island _____	110		<b>EAST SO. CENTRAL</b>	<b>2,514</b>	<b>7.6</b>
Connecticut _____	295		Arkansas _____	446	
<b>NEW ENGLAND</b>	<b>1,621</b>	<b>4.9</b>	Louisiana _____	712	
New York _____	1,735		Oklahoma _____	639	
New Jersey _____	690		Texas _____	2,394	
Pennsylvania _____	1,641		<b>WEST SO. CENTRAL</b>	<b>4,191</b>	<b>12.6</b>
<b>MIDDLE ATLANTIC</b>	<b>4,066</b>	<b>12.2</b>	Montana _____	304	
Ohio _____	1,427		Idaho _____	256	
Indiana _____	809		Wyoming _____	136	
Illinois _____	1,458		Colorado _____	526	
Michigan _____	904		New Mexico _____	154	
Wisconsin _____	726		Arizona _____	500	
<b>EAST NO. CENTRAL</b>	<b>5,324</b>	<b>16.0</b>	Utah _____	225	
Minnesota _____	657		Nevada _____	172	
Iowa _____	622		<b>MOUNTAIN</b>	<b>2,273</b>	<b>6.9</b>
Missouri _____	998		Alaska _____	56	
North Dakota _____	237		Washington _____	560	
South Dakota _____	252		Oregon _____	372	
Nebraska _____	558		California _____	2,084	
Kansas _____	775		Hawaii _____	40	
<b>WEST NO. CENTRAL</b>	<b>4,099</b>	<b>12.4</b>	<b>PACIFIC</b>	<b>3,112</b>	<b>9.4</b>
Delaware _____	104		<b>UNITED STATES</b>	<b>32,886</b>	<b>99.1</b>
Maryland _____	564		U.S. Territories _____	16	
Washington, DC _____	91		Canada _____	141	
Virginia _____	675		Mexico _____	-	
West Virginia _____	370		Other International _____	112	
North Carolina _____	964		APO/FPO _____	20	
South Carolina _____	434		<b>TOTAL QUALIFIED CIRCULATION</b>	<b>33,175</b>	<b>100.0</b>
Georgia _____	916				
Florida _____	1,568				
<b>SOUTH ATLANTIC</b>	<b>5,686</b>	<b>17.1</b>			

QUESTIONNAIRE USED BY PUBLICATION TO ELICIT SUPPLEMENTARY DATA:

# HEALTHCARE PURCHASING NEWS

People, Places, Processes &amp; Products that Influence the Supply Chain

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Co. Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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### 4 Fill in below only if your company requires home delivery (but company address must be filled in above)

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City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### 5 Please check the one category that best describes your title:

- |   |   |
|---|---|
| <input type="checkbox"/> 1 VP/Director/Manager of Material                        | <input type="checkbox"/> 11 Other OR Personnel                                      |
| <input type="checkbox"/> 2 Asst Material Mgr/<br>Other Material Mgmt Personnel    | <input type="checkbox"/> 12 VP Support Services                                     |
| <input type="checkbox"/> 3 Chief Purchasing Director/<br>Purchasing Manager       | <input type="checkbox"/> 13 Hospital Administrator                                  |
| <input type="checkbox"/> 4 Buyer/Purchasing Agent/<br>Other Purchasing Personnel  | <input type="checkbox"/> 14 CEO, CFO, COO   |
| <input type="checkbox"/> 5 Central Service Director/<br>Supervisor/Manager        | <input type="checkbox"/> 15 Head Nurse/Director of Nursing                          |
| <input type="checkbox"/> 6 Other Central Service Personnel<br>(Tech, Coord)       | <input type="checkbox"/> 16 Medical Director  |
| <input type="checkbox"/> 7 Infection Control Practitioner/<br>Director/Supervisor | <input type="checkbox"/> 17 Nursing/Practitioner                                    |
| <input type="checkbox"/> 8 OR Director/Manager/Supervisor                         | <input type="checkbox"/> 18 Consultant  |
| <input type="checkbox"/> 9 Surgical Services Director/<br>Manager/Supervisor      | <input type="checkbox"/> 19 Value Analysis Coordinator                              |
| <input type="checkbox"/> 10 OR Material Manager                                   | <input type="checkbox"/> 20 Professional Department Head                            |
|   | <input type="checkbox"/> 21 Evaluation/Standardization<br>& Safety Committee Member |
|   | <input type="checkbox"/> 22 Contracts Director/Manager/<br>Supervisor               |
|   | <input type="checkbox"/> 23 Clinical Educator                                       |
|   | <input type="checkbox"/> 24 Other (please specify) _____                            |

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[www.hponline.com](http://www.hponline.com)

### 6 Please indicate type of Facility/Service/Firm: (please check only one)

- |   |   |
|---|---|
| <input type="checkbox"/> 1 Stand Alone Hospital<br>(for-profit, non-profit, gov't)      | <input type="checkbox"/> 7 Long-Term Care   |
| <input type="checkbox"/> 2 Integrated Network<br>(multiple hospitals & alternate sites) | <input type="checkbox"/> 8 Home Health Care   |
| <input type="checkbox"/> 3 Hospital Group Purchasing<br>Organization or Alliance        | <input type="checkbox"/> 9 HMO/PPO  |
| <input type="checkbox"/> 4 Multi-Hospital System Corp<br>Headquarters                   | <input type="checkbox"/> 10 Insurance/Accounting/Investment/<br>3rd Party Administrator |
| <input type="checkbox"/> 5 Government Purchasing Agencies                               | <input type="checkbox"/> 11 Distributor   |
| <input type="checkbox"/> 6 Surgi-Center/Ambulatory Care Center                          | <input type="checkbox"/> 12 Manufacturer  |
|   | <input type="checkbox"/> 13 Other (please specify) _____                                |

### 7 Number of Beds in your organization: (check one)

- |                                     |                                    |                                    |                                  |
|-------------------------------------|------------------------------------|------------------------------------|----------------------------------|
| <input type="checkbox"/> a 500-over | <input type="checkbox"/> c 300-399 | <input type="checkbox"/> e 100-199 | <input type="checkbox"/> g 26-49 |
| <input type="checkbox"/> b 400-499  | <input type="checkbox"/> d 200-299 | <input type="checkbox"/> f 50-99   | <input type="checkbox"/> h 0-25  |

### 8 Please check all areas for which you have purchasing involvement:

- |  |  |
|--|--|
| <input type="checkbox"/> 1 Operating Room Products<br>& Equipment  | <input type="checkbox"/> 3 Infection Control Products<br>& Equipment       |
| <input type="checkbox"/> 2 Central Service Products<br>& Equipment | <input type="checkbox"/> 4 Monitoring & Diagnostic Equipment<br>& Supplies |

### 9 Are you a member of a product evaluation committee? Yes No

### 10 Which of the following products/services do you recommend, specify, or buy? (check all that apply)

- |  |   |
|--|---|
| <b>INVENTORY CONTROL</b>   | <input type="checkbox"/> 305 Endoscopy/Endoscopic Products      |
| <input type="checkbox"/> 100 Asset Management Products/Services                                  | <input type="checkbox"/> 306 Gowns and Protective Wear          |
| <input type="checkbox"/> 101 Bar Coding/RFID, RTLS & Labeling Systems                            | <input type="checkbox"/> 307 Instruments                        |
| <input type="checkbox"/> 102 Cabinets  | <input type="checkbox"/> 308 Orthopedics                        |
| <input type="checkbox"/> 103 Carts   | <input type="checkbox"/> 309 Scheduling Systems                 |
| <input type="checkbox"/> 104 Computer Hardware   | <input type="checkbox"/> 310 Surgical Gloves                    |
| <input type="checkbox"/> 105 Contract Management Systems   | <input type="checkbox"/> 311 Surgical Lights, Lighting Systems  |
| <input type="checkbox"/> 106 File & Retrieval Systems  | <input type="checkbox"/> 312 Tables and Stretchers              |
| <input type="checkbox"/> 107 Forms   | <input type="checkbox"/> 313 Wound Care/Hypothermia Products    |
| <input type="checkbox"/> 108 Handheld/Point-of-Use Products                                      | <input type="checkbox"/> 314 Other OR Products                  |
| <input type="checkbox"/> 109 Instrument Tracking Systems   | <b>INFECTION CONTROL</b>  |
| <input type="checkbox"/> 110 Materials Management/Supply Chain<br>Info Systems incl. ERP modules | <input type="checkbox"/> 400 Air Purification Systems           |
| <input type="checkbox"/> 111 Printers/Scanners/Copiers/Multi-function                            | <input type="checkbox"/> 401 Cleaning Equipment & Supplies      |
| <input type="checkbox"/> 112 Storage Systems   | <input type="checkbox"/> 402 Disaster Preparedness Products     |
| <input type="checkbox"/> 113 Other Inventory Control Products                                    | <input type="checkbox"/> 403 Disinfectants & Sterilants         |
| <b>PATIENT CARE</b>  | <input type="checkbox"/> 404 EtO Monitoring Devices             |
| <input type="checkbox"/> 200 Bariatric Specialty Equipment/ Supplies                             | <input type="checkbox"/> 405 Gloves                             |
| <input type="checkbox"/> 201 Diagnostic Equipment  | <input type="checkbox"/> 406 Hand Hygiene Products & Dispensers |
| <input type="checkbox"/> 202 ID/Security/Alert Systems   | <input type="checkbox"/> 407 Protective Wear                    |
| <input type="checkbox"/> 203 IV Systems/Syringes   | <input type="checkbox"/> 408 Sharps Safety Products             |
| <input type="checkbox"/> 204 Linen   | <input type="checkbox"/> 409 Sterilization Supplies & Equipment |
| <input type="checkbox"/> 205 Patient Beds/Furniture  | <input type="checkbox"/> 410 Sterilization Wraps & Containers   |
| <input type="checkbox"/> 206 Patient Transport/Lift Products                                     | <input type="checkbox"/> 411 Other Infection Control Products   |
| <input type="checkbox"/> 207 Patient Warming/ Positioning Products                               | <b>OTHER PURCHASING &amp; SERVICES</b>                          |
| <input type="checkbox"/> 208 Respiratory Care & Monitoring                                       | <input type="checkbox"/> 500 Business Equipment & Supplies      |
| <input type="checkbox"/> 209 Scales  | <input type="checkbox"/> 501 Communications Equipment           |
| <input type="checkbox"/> 210 Temperature/Blood Pressure Monitors                                 | <input type="checkbox"/> 502 Environmental Services Products    |
| <input type="checkbox"/> 211 Wound Management/Bandages/Wraps                                     | <input type="checkbox"/> 503 Facility Equipment & Maintenance   |
| <input type="checkbox"/> 212 Other Patient Care Products   | <input type="checkbox"/> 504 Food & Dietary Supplements         |
| <b>OPERATING ROOM</b>  | <input type="checkbox"/> 505 Food Service Equipment             |
| <input type="checkbox"/> 300 Cardiac Equipment & Supplies  | <input type="checkbox"/> 506 Imaging Supplies & Equipment       |
| <input type="checkbox"/> 301 Catheters/Needles   | <input type="checkbox"/> 507 Laundry Supplies & Equipment       |
| <input type="checkbox"/> 302 Critical Care   | <input type="checkbox"/> 508 Shipping and Transportation        |
| <input type="checkbox"/> 303 Custom Procedure Trays/Kits/Packs                                   | <input type="checkbox"/> 509 Waste Management                   |
| <input type="checkbox"/> 304 Drapes  | <input type="checkbox"/> 900 None of the above                  |

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HPN-0802 BI

<b>AVERAGE ANNUAL AUDITED QUALIFIED CIRCULATION AND CURRENT UNAUDITED CIRCULATION STATEMENTS</b>						
6-Month Period Ended:	Audited Data	Audited Data	Audited Data	Audited Data	Audited Data	Circulation Claim
	July - December 2008	January - June 2009	July - December 2009	January - June 2010	July - December 2010	January - June 2011*
Total Audit Average Qualified: _____	33,175	33,175	33,175	33,175	33,175	33,175
Qualified Non-Paid: ____	33,175	33,175	33,175	33,175	33,175	33,175
Qualified Paid: _____	-	-	-	-	-	-
Post Expire Copies included in Total Qualified Circulation: __	**NC	**NC	**NC	**NC	**NC	**NC
Average Annual Order Price: _____	**NC	**NC	**NC	**NC	**NC	**NC

**\*NOTE: January - June 2011 data is unaudited. With each successive period, new data will be added until six 6-month periods are displayed.**

\*\*NC = None Claimed.

#### ADDITIONAL DATA

#### PUBLISHER'S AFFIDAVIT

We hereby make oath and say that all data set forth in this statement are true.

Kristine Russell, Publisher

Tiffany Coffman, Circulation

(At least one of the above signatures must be that of an officer of the publishing company or its authorized representative.)

#### IMPORTANT NOTE:

This unaudited circulation statement has been checked against the previous audit report. It will be included in the annual audit made by BPA Worldwide.

Date signed July 22, 2011

State Florida

County Sarasota

Received by BPA Worldwide July 22, 2011

Type PSD

ID Number H040S0J1