

Hospital Vendor Contract Summary Sheet

1. ☒ Existing Vendor ☐ New Vendor
2. **Name of Contract:** Memorandum of Understanding
3. **Contract Parties:** MRMC/Oklahoma Department of Mental Health and Substance Abuse Services
4. **Contract Type Services:** MOU
5. **Impacted Hospital Departments:** Hospital Pharmacy
6. **Contract Summary:** To provide access to overdose reversal kits for distribution to persons of risk.
7. **Cost:** None
8. **Prior Cost:** None
9. **Term:** The term of the Agreement shall remain in effect for 1 year from date of agreement and as funding allows.
- 10.
11. **Termination Clause:** None
12. **Other:**