

**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:**