

Republic of the Philippines
Province of Davao del Norte
 Government Center, Mankilam, Tagum City

PR Number : 1301-0085

Bid Number : B20130037

Date : April 24, 2013

Page : 1

Item No.	Qty./Unit	Item	Bid Price	
			Unit Price	Total Amount
DRUGS & MEDICINES				
1	3 BOT	ACICLOVER 250 MG	_____	_____
2	25 TAB.	ACICLOVER 400MG.	_____	_____
3	25 AMP.	ADRENALINE	_____	_____
4	18 BOT.	ALUMINUM + MAGNESIUM HYDROXIDE SUSP 60	_____	_____
5	8 BOX	ALUMINUM + MAGNESIUM HYDROXIDE TAB. 10'S	_____	_____
6	3 BOX	AMBROXOL 30MG TAB 100'S	_____	_____
7	25 BOT.	AMBROXOL DROPS 15ML. GENERIC	_____	_____
8	25 BOT.	AMBROXOL SYRUP 15ML. GENERIC	_____	_____
9	15 AMP.	AMINOPHYLLINE 25MG /ML X 6ML	_____	_____
10	10 BOX	AMOXICILLIN 500MG CAP. 100'S	_____	_____
11	50 VIAL	AMPICILLIN + SULBACTAN 1.5GM	_____	_____
12	100 VIAL	AMPICILLIN 100MG	_____	_____
13	8 BOX	AMPICILLIN 1G VIAL 10'S	_____	_____
14	75 VIAL	AMPICILLIN 250MG VIAL	_____	_____
15	75 VIAL	AMPICILLIN 500MG	_____	_____
16	375 TAB	ASCORBIC ACID + ZINC	_____	_____
17	3 BOX	ASCORBIC ACID 500MG TAB. 100'S	_____	_____
18	18 TAB.	ASCORBIC ACID+ ZINC SYRUP	_____	_____
19	25 BOT.	ASCORBIC ACID+TAURINE & LYSINE SYRUP 60ML.	_____	_____
20	18 BOT.	ASCORBIC ACID+ZINC DROPS	_____	_____

DRUGS & MEDICINES EXPENSES, DAVAO DEL NORTE HOSPITAL (KAPALONG ZONE) 1st Qtr 2013

APPROVED BUDGET FOR THE CONTRACT (ABC) : P 1,387,760.01

PGSO WAREHOUSE

Period of Delivery : _____ day/s

**SUPPLIERS MUST SPECIFY/INDICATE
 BRAND NAMES UPON QUOTATION**

INSTRUCTIONS IN FILLING UP THIS BID FORM

Bids Distributed To:

- Bidder must read carefully the statement at the back hereof.
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21	25 AMP.	ATROPINE 250MG/ML AMPULE		
22	125 CAP.	AZITHROMYCIN 500 MG.		
23	625 NEBU	BACILLUCLAUSII		
24	1 BOX	BETAHISTINE 8MG TAB 100'S		
25	6 PC.	BISACODYL 10MG SUPPOSITORY		
26	6 PC.	BISACODYL 5MG SUPPOSITORY		
27	1 BOX	BISACODYL 5MG TABLET 100'S		
28	75 NEB	BUDESONIDE		
29	13 AMP	BUPIVACAINE		
30	25 BOT.	BUTAMITRATE 7.5MG/5ML 60ML SYRUP		
31	2 BOX	BUTAMITRATE CITRATE 50MG TAB		
32	10 VIAL	BUTORPHANOL TARTRATE 2MG/ML VIAL		
33	2 AMP.	CALCIUM GLUCONATE AMP. 10'S		
34	1 BOX	CALCIUM LACTATE TABLETS 100'S		
35	4 BOX	CAPTOPRIL 25MG TAB 100'S		
36	1 BOX	CAPTOPRIL 50MG TABLET 100'S		
37	5 BOX	CARBOCISTEINE 500MG CAP 100'S		
38	20 BOT.	CARBOCISTEINE DROPS 10ML		
39	20 BOT.	CARBOCISTEINE SYRUP 60ML		
40	18 BOT.	CEFACLOR 125 MG SYRUP		
41	18 BOT.	CEFACLOR 250 MG. SYRUP		

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42	18 BOT	CEFACTOR DROPS		
43	36 BOT.	CEFALEXIN 250MG SYRUP		
44	40 BOX	CEFALEXIN 500MG CAP. 100'S		
45	25 BOT.	CEFALEXIN DROPS		
46	13 VIAL	CEFTAZIDIME 1 GM.		
47	250 VIAL	CEFTRIAZOME 1GM VIAL		
48	2 BOX	CEFUROXIME 500MG TAB. 100'S		
49	520 VIAL	CEFUROXIME 750G VIAL		
50	1 BOX	CELECOXIB 200MG CAP. 100'S		
51	25 BOT.	CETERIZINE DROPS		
52	25 BOT.	CETERIZINE SYRUP		
53	10 BOX	CETIRIZINE 10MG TAB. 100'S		
54	20 BOT.	CHLORAMPHENICOL 125MG. SUSP.		
55	2 BOX	CHLORAMPHENICOL 500GM CAPSULE 100'S		
56	5 AMP.	CHLORPHENIRAMINE MALEATE AMP.		
57	1 BOX	CINNARIZINE 25MG 100'S TAB		
58	25 BOX	CIPROFLOXACIN 500MG 100'S TAB		
59	10 BOT.	CLARITHROMYCIN 125G SUSP.		
60	100 TAB.	CLARITHROMYCIN 250 MG		
61	12 BOX	CLARITHROMYCIN 500MG TAB. 10'S		
62	3 BOX	CLINDAMYCIN 300MG. CAP. 100'S		

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63	2 PC.	CLOTRIMAZOLE CREAM		
64	1 BOX	CLOXACILLIN 500MG CAP. 100'S		
65	15 BOT.	CO-AMOXICLAV 125MG SUSP.		
66	20 BOT.	CO-AMOXICLAV 250MG SUSP.		
67	200 TAB	CO-AMOXICLAV 625 MG.		
68	125 NEB.	COMBIVENT		
69	36 BOT.	COTRIMOXAZOLE 200MG SUSPENSION		
70	25 BOT.	COTRIMOXAZOLE 400MG SUSPENSION		
71	2 BOX	COTRIMOXAZOLE 800MG CAP. 100'S		
72	440 BOT.	D5 0.3% NACL 500CC		
73	100 BOT.	D5 0.9 NSS 1 LITER		
74	440 BOT.	D5 1MB 500CC		
75	50 BOT.	D5 W 500CC		
76	15 VIAL	D50 WATER VIAL		
77	625 BOT.	D5LR 1L		
78	10 AMP.	DEXAMETHASONE 20MG AMPULE		
79	125 TAB.	DEXTROMETHORPHAN		
80	18 BOT	DEXTROMETHORPHAN SYRUP		
81	50 AMP.	DIAZEPAM 10MG/2ML AMPULE		
82	1 BOX	DIAZEPAM 5MG TABLET 100'S		
83	1 BOX	DICLOFENAC NA 50MG TABLET 100'S		

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			Unit Price	Total Amount
84	20 AMP.	DICLOFENAC NA 75MG/ML 2ML AMPULE		
85	1 BOX	DICYCLOVERINE 10MG TABLET 100'S		
86	1 BOX	DIGOXIN 250MCG TABLET 100'S		
87	10 AMP.	DIGOXIN AMPULE		
88	3 BOX	DIPHENHYDRAMINE HCL AMP. 10'S 50MCG SOL		
89	300 TAB.	DOMPERIDONE		
90	24 BOT.	DOMPERIDONE SUSP. 100ML, 1G/ML. SUSP.		
91	3 BOT.	DOPAMINE 200MG (PRE MIXED)		
92	10 BOT.	DOXOPHYLLINE 100 MG. SYRUP		
93	100 TAB.	DOXOPHYLLINE 400 MG		
94	20 AMPS	EPHEDRINE 50MG/ML AMPULE		
95	18 BOT.	ERTHROMYCIN 200MG/ML SUSP.		
96	1 BOX.	ERYTHROMYCIN 500MG TAB. 100'S		
97	88 TAB.	ETOFAMIDE FORTE		
98	18 BOT.	ETOFAMIDE SUSPENSION		
99	1 BOX	FELODIPINE 5 MG. TAB. 100'S		
100	50 BOX	FERROUS SULFATE 60MG ELEMENTAL IRON 100'S		
101	6 BOX	FOLIC ACID + FERRUS SULFATE CAPSULE 100'S		
102	150 TAB	FURAZOLIDONE		
103	175 AMP.	FUROSEMIDE 10MG/ML AMPULE		
104	2 BOX.	FUROSEMIDE 20MG TAB. 100'S		

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			Unit Price	Total Amount
105	10 AMP.	GENTAMYCIN 40MG/ML AMPULE		
106	3 BOX	GLIBENCLAMIDE 5 MG. TAB. 100'S		
107	40 AMP.	HTIG		
108	75 AMP.	HYDRALAZINE 20MG/ML AMPULE		
109	50 VIAL	HYDROCORTISONE 100MG VIAL		
110	65 VIAL	HYDROCORTISONE 250MG VIAL		
111	125 VIAL	HYDROCORTISONE 500MG VIAL		
112	250 AMP.	HYOSCINE 10MG AMPULE		
113	2 BOX	HYOSCINE 10MG TABLET 100'S		
114	2 TAB	INOSIPLEX (IMMUNOSIN)500 MG		
115	18 BOT	INOSIPLEX 250 MG SYRUP (IMMUNOSIN)		
116	250 BOX	IPRATROPIUM + SALBUTAMOL NEB 30S		
117	250 NEB.	IPRATROPIUM PLAIN		
118	1 BOX	ISOSORBIDE 5 MONONITRATE 60MG 100'S		
119	2 BOX	ISOXSUPRINE TABLET 100'S		
120	125 TAB.	LEVOFLOXACIN 500 MG. TAB.		
121	125 CAP.	LEVOFLOXACIN 750MG		
122	12 BOX	LIDOCAINE HCl AND EPINEPHRINE 2% CARPULE		
123	3 CAN	LIDOCAINE HCl(R) EPINEPHRINE 2% XYLESTESINE 50'S		
124	250 AMP.	LIDOCAINE POLY AMP (ASTRA)		
125	1 BOX	LOPERAMIDE 2MG CAP. 100'S		

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126	250 VIAL	MAGNESIUM SULFATE 25% (250 MG/ML)		
127	3 BOT.	MANNITOL INJECTION 20%, 500ML		
128	1 BOX	MEBENDAZOLE 500MG TABLET 100'S		
129	50 BOX	MEFENAMIC ACID 500 MG. CAP.100'S		
130	18 BOT.	METHISOPRINOL 250 MG. SYRUP		
131	50 TAB.	METHISOPRINOL 500MG		
132	25 AMP.	METHYLERGOMETRINE MALEATE AMP.		
133	1 BOX	METHYLERGOMETRINE MALEATE TAB. 100'S		
134	20 BOT.	METOCLOPRAMIDE 10MG SYRUP		
135	1 BOX	METOCLOPRAMIDE 10MG TABLET 100'S		
136	250 AMP.	METOCLOPRAMIDE 5MG/ML AMPULE		
137	2 BOX	METOPROLOL 100MG100'S		
138	2 BOX	METOPROLOL 50MG TAB. 100'S		
139	18 BOT	METRONIDAZOLE 125MG SUSPENSION		
140	4 BOX.	METRONIDAZOLE 500MG. TAB. 100'S		
141	7 AMP.	MIDAZOLAM 5MG/ML AMPULE		
142	2 BOX	MONTELUKAST 10MG 30'S		
143	50 AMP.	NALBUPHINE 10MG/ML, SOL.		
144	25 AMP.	NICARDIPINE 2MG/2ML SOLUTION		
145	3 BOX	NIFEDIPINE 5MG CAPSULE 100'S		
146	100 BOX	NIFEDIPINE 10MG		

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147	125 TAB	NIFUROXAZIDE 200 MG		
148	25 TAB	NITROGLYCERIN 400 MCG SUBLINGUAL		
149	1 BOX.	NITROGLYCERIN PATCH 30'S 5MG		
150	2 BOX	NORFLOXACIN 400MG TABLET 100'S		
151	50 CAP.	OMEPRAZOLE 20MG CAPSULE		
152	50 VIAL	OMEPRAZOLE 40 ML.		
153	220 AMP.	OXYTOCIN 10IU AMPULE		
154	125 TAB.	PANTOPRAZOLE		
155	13 PC.	PARACETAMOL 125MG SUPPOSITORY		
156	72 BOT.	PARACETAMOL 125MG/5ML SYRUP		
157	125 AMP.	PARACETAMOL 150MG/ML 2ML AMPULE		
158	72 BOT	PARACETAMOL 250MG/5ML SYRUP		
159	10 BOX.	PARACETAMOL 500MG. TAB. 100'S		
160	72 BOT.	PARACETAMOL DROPS		
161	2 BOT	PHENOBARBITAL 90MG TAB 100'S		
162	10 BOT.	PHENYLPROPANOLAMINE DROPS		
163	15 BOT.	PHENYLPROPANOLAMINE SYRUP		
164	3 TAB.	PHENYLPROPANOLAMINE TAB. 100'S		
165	250 AMP.	PHYTOMENADIONE AMPULE		
166	625 BOT.	PLAIN LR 1L		
167	667 BOT.	PLAIN NSS 1 LITER		

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168	30 VIAL	PLAIN NSS 20ML 20'S		
169	10 VIAL	POTASSIUM CHLORIDE		
170	125 TAB.	PROCATEROL 25 MCG		
171	125 TAB.	PROCATEROL 50 MCG. (MEPTIN)		
172	13 BOT.	PYRANTEL PAMOATE 125 MG SYRUP		
173	4 BOX	RANITIDINE 150MG TAB.		
174	1,200 AMP.	RANITIDINE AMP.		
175	50 BOX	ROWATINEX		
176	125 CAP.	ROXITHROMYCIN 150 MG.		
177	1 BOX	SALBUTAMOL 2 MG. TAB. 100'S		
178	72 BOT.	SALBUTAMOL 2MG/ML SYRUP		
179	1,800 NEB.	SALBUTAMOL NEBULES		
180	10 BOX	SAMBONG 250MG TAB 100'S		
181	1 BOX	SECNIDAZOLE 500MG CAPSULE 100'S		
182	10 AMP.	SODIUM BICARBONATE		
183	70 TAB.	SUCRALFATE 1G TAB 100'S		
184	13 BOT	TERBUTALINE SULFATE		
185	40 AMP.	TETANUS TOXOID		
186	150 VIAL	TRAMADOL 50MG/ML 2ML VIAL		
187	240 AMP.	TRANEXAMIC ACID 500MG AMPULE		
188	5 BOX	TRANEXAMIC ACID 500MG CAPSULE 100'S		

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189	5 AMP	VERAPAMIL 5 MG	_____	_____
190	36 BOT.	ZINC DROPS	_____	_____
191	36 BOT	ZINC SYRUP	_____	_____

- > expiry date must be at least 1 year from date of purchase
- > supplier must specify the brand name of items

Remarks : > *Suppliers must specify brand name*
 > *Expiry date of items must be 1 year or more from date of purchased.*

* * * GRAND/LOT PRICE : P _____

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5. Place of Delivery shall be at the PGSO Warehouse unless otherwise indicated in the bid form.
6. Submit Bid in the sealed envelope.
7. Unprinted name of establishment, unprinted name of the bidder and unsigned bid shall be disqualified.
8. Erasures/alterations should be initialed accordingly.

 Name of Establishment

 Name of Bidder

 Signature of Bidder