

Republic of the Philippines DEPARTMENT OF HEALTH PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City 1100 website: www.pcmc.gov.ph email: officeofthedirector@pcmc.gov.ph Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

> **NOTICE OF AWARD** NOA-2025-051

EURO-MED LABORATORIES PHIL., INC.

PPL Building, United Nations Avenue, Manila Tel. No.: 8524-0091 to 98 Email Add: sales-mktg@euromedlab.net

Dear Sir / Madam:

This is to inform you that based on the result of the Public Bidding conducted on December 18, 2024, for One (1) Lot Supply and Delivery of reagents/consumables under Reagent Tie-up Agreement for one (1) year with Commissioning and free use of Point of Care Testing (POCT) Analyzer under Invitation to Bid No. IB-2025-049, as per BAC Resolution No. R2025=01=079, your proposal was found to be the Lowest Calculated and Responsive Bid (LCRB):

Item Description	Total Cost
One (1) Lot Supply and Delivery of reagents/consumables under Reagent Tie-up Agreement for one (1) year with Commissioning and free use of Point of Care Testing (POCT) Analyzer (Refer to Terms of Reference and Annex "A" for detailed offer)	Php 819,340.32

You are hereby required to provide on or before **0 7** FEB 2025

the Performance Security in either of the

following form:

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY	
	(Equal to Percentage of the Total Contract Price)	
a) Cash or cashier's/ manager's check issued by a Universal or Commercial Bank	Five percent (5%)	
b) Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank	<u>Php40,967.02</u>	
c) Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security.	Thirty percent (30%) Php245,802.10	

Kindly disregard and report any form of solicitation using the name of the Executive Director and/or the PCMC. These unsanctionedrequests are unlawful and will not be tolerated.





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Failure to provide the Performance Security shall constitute sufficient ground for cancellation of the award and imposition of penalties/forfeiture corresponding to the Bid Security posted.

Very truly yours,

Ma In Junn MARIA EVA I. JOPSON, MD, MScHSM, MPM OIC, Executive Director File

Conforme:

This is to certify that the company has authorized me to accept this award, sign all related documents and hold the company bound by rules and laws applicable thereto.

I further certify that I have chosen the following mode (as checked) as the form of retention money required of us under RA 9184 Sec. 62.1.

[] Bank Guarantee

[] 1% Deduction from claims on the first payment for staggered deliveries

Authorized Signatory (Signature over printed name)

Designation

Date

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ANNEX A NOA-2025-051 EURO-MED LABORATORIES PHIL., INC.

Item Description						
Or	One (1) unit of Fully automated blood gas analyzer					
	Brand: i-STAT					
Awarded Amount: Php 819,340.32						
I. Specifications:						
1	With require disposable cartridges					
2	Ambient temperature requirement (Room temperature 20°C to 25°C)					
3	The total time for the machine to warm-up, introduce sample and generate results is less than 120 seconds					
4	Sample requirement must not be more than 90ul					
5	Contain all components in the analyzer including cartridge, solutions, sensors, sampler and waste bag					
6	Time in between samples is less than 120 seconds					
7	With an integrated barcode reader					
8	Does not require any use of gas tank					
9	With CE markings					
	tal Number of tests that should be covered by the proposal including all consumables needed (see ached)					
DE	ELIVERY PERIOD: Within seven (7) working days from receipt of the Delivery Order Slip					

Conforme:

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Authorized Signatory (Signature over printed name)

Designation/Position

Date :

A

ANNEX A (attachment) NOA-2025-051

Total Number of tests that		mber of tests that	Reagents/ Consumables needed to complete the required number of tests						
should be covered by the proposal including all consumables needed:		al including all	Description	Packing	No. of Tests	No. of test per kit or per pack	No. of Kits	Unit Cost per kit or per pack	Total Cost
Qty	Unit	Item Description	Brand: i-STAT						
1,200	test	POCT cartridges (electrolytes, Hgb/Hct and blood gas)	EG7+ each cartridge	25 kits per box	1,200	48 tests per kit	25 kits	29,318.88	732,972.00
40	test	POCT Control Level 1	Tri-control Level 1	10 ampules (1.7ml) per box	40	4 tests per ampule	10 ampules	2,273.04	22,730.40
40	test	POCT Control Level 2	Tri-control Level 2	10 ampules (1.7ml) per box	40	4 tests per ampule	10 ampules	2,273.04	22,730.40
40	test	POCT Control Level 3	Tri-control Level 3	10 ampules (1.7ml) per box	40	4 tests per ampule	10 ampules	2,273.04	22,730.40
36	roll	Thermal paper	Paper, portable printer	6 rolls per box	36	6 tests per roll	6 rolls	3,029.52	18,177.12
	GRAND TOTAL (Php)							819,340.32	

EURO-MED LABORATORIES PHIL., INC.