



**SUPPLEMENTAL/BID BULLETIN NO. 1**

This Supplemental/Bid Bulletin is issued to all prospective bidders to clarify, modify and/or amend items in the Bidding Documents for the **Procurement for the On-Site CY 2024 Annual Physical Examination for DOT Officials and Employees in the Central Office (Permanent/Job Order Personnel) (DOT-BAC IB NO. 2024-020)**, as follows:

**I. Changes under Section VI. Schedule of Requirements**

OLD PROVISION					NEW PROVISION				
Item No.	Description	Qty	Total Amount	Delivered, Weeks/Months	Item No.	Description	Qty	Total Amount	Delivered, Weeks/Months
1	Procurement for the On-Site CY 2024 Annual Physical Examination for DOT Officials and Employees in the Central Office (Permanent/Job Order Personnel)	490 pax	PhP2,278,010.00	At least one (1) month upon issuance of the Notice to Proceed which will run for a period of approximately three (3) months	1	Procurement for the On-Site CY 2024 Annual Physical Examination for DOT Officials and Employees in the Central Office (Permanent/Job Order Personnel)	490 pax	PhP2,278,010.00	<u>The implementation dates will be set collaboratively by the Provider and the DOT c/o HRD, at least one (1) month upon issuance of the Notice to Proceed. The agreed-upon implementation period will run for approximately three (3) months. Conduct of onsite APE would be three (3) weeks in staggered basis (first 2 weeks straight conduct of APE; 3rd week to be scheduled upon agreement) based on the agreed dates of both parties.</u>



## II. Changes under Section VII. Technical Specifications

OLD PROVISION	NEW PROVISION
<p><b>General Examination for all DOT officials and employees:</b></p> <ol style="list-style-type: none"> <li>1. Comprehensive Medical History and Physical Examination (including visual acuity and BMI detection)</li> <li>2. Complete Blood Count (CBC) with platelet count</li> <li>3. Blood Typing</li> <li>4. Routine Urinalysis</li> <li>5. Fecalysis</li> <li>6. Blood Chemistry: Fasting Blood Sugar, Uric Acid, Liver Enzymes (SGPT and SGOT), Blood Urea Nitrogen (BUN) and Creatinine; Lipid Profile (Total Cholesterol, Triglycerides, HDL, LDL, VLDL)</li> <li>7. Serum Sodium (Na+ and Potassium (K+))</li> <li>8. HbA1C (<i>for those with a history of Diabetes Mellitus</i>)</li> <li>9. Mobile Chest X-ray (PA view)</li> <li>10. Mobile Dental check-ups including cleaning and prophylaxis</li> <li>11. 12-L EKG Bone Densitometry</li> </ol>	<p><b>General Examination for all DOT officials and employees:</b></p> <ol style="list-style-type: none"> <li>1. Comprehensive Medical History and Physical Examination (including visual acuity and BMI detection)</li> <li>2. Complete Blood Count (CBC) with platelet count</li> <li>3. Blood Typing</li> <li>4. Routine Urinalysis</li> <li>5. Fecalysis</li> <li>6. Blood Chemistry: Fasting Blood Sugar, Uric Acid, Liver Enzymes (SGPT and SGOT), Blood Urea Nitrogen (BUN) and Creatinine; Lipid Profile (Total Cholesterol, Triglycerides, HDL, LDL, VLDL)</li> <li>7. Serum Sodium (Na+ and Potassium (K+))</li> <li>8. HbA1C (<i>for those with a history or <b>history in the family of Diabetes Mellitus, upon assessment of the service provider's medical team</b></i>)</li> <li>9. Mobile Chest X-ray (PA view)</li> <li>10. Mobile Dental check-ups including cleaning and prophylaxis (<b><i>with at least 3 dental beds and complete w/ necessary supplies</i></b>)</li> <li>11. 12-L EKG</li> <li>12. Bone Densitometry (<b><i>onsite</i></b>)</li> </ol>
<p><b>DELIVERABLES:</b></p> <ol style="list-style-type: none"> <li>1. <b>Medical Personnel</b> The Provider must ensure the provision of licensed physicians, dentists, nurses, medical technologists, radiological technologists, and other allied health staff throughout the duration of the APE to conduct tests and procedures.</li> <li>2. <b>Personal Protective Equipment (PPE)</b> The Provider must ensure the medical team wears complete PPEs with visible name tags for the entire duration of the APE.</li> <li>3. <b>Pre-APE Checklist</b> The Provider must distribute a checklist of TO DOs to employees in preparation for the APE program before the actual conduct.</li> </ol>	<p><b>DELIVERABLES:</b></p> <ol style="list-style-type: none"> <li>1. <b>Medical Personnel</b> <ol style="list-style-type: none"> <li>a. The Provider must ensure the provision <b><i>of but not limited to the following</i></b> licensed medical/health team throughout the duration of the APE to conduct tests and procedures: <ul style="list-style-type: none"> <li>- <b><u>2 Physicians (1 male, 1 female)</u></b></li> <li>- <b><u>3 Dentists</u></b></li> <li>- <b><u>4 Nurses</u></b></li> <li>- <b><u>4 Medical Technologists</u></b></li> <li>- <b><u>2 Optometrists</u></b></li> <li>- <b><u>2 Radiological Technologists</u></b></li> <li>- <b><u>2 Receptionists</u></b></li> </ul> <b><i>(during registration)</i></b> </li> <li>b. <b><i>The Provider must ensure that the Medical Team shall comply with the following:</i></b></li> </ol> </li> </ol>



**4. Consent Forms**

The Provider must have readily available consent forms for employees during the APE, in both digital and printed formats.

**5. Equipment**

The Provider must be prepared to replace defective or non-functional equipment immediately to avoid disrupting the tests/procedures.

**6. Medical Supplies and Equipment**

The Provider shall provide all materials (ice box/cooler, thermometers, etc.), medical supplies (alcohol, cotton balls, etc.), emergency medicines, and other necessary paraphernalia for the APE program.

**7. Biohazardous Waste Disposal**

The Provider is responsible for the proper disposal of all used materials and articles, particularly biological wastes, following the procedures prescribed by the Department of Health (DOH) Healthcare Waste Management Manual.

**8. Implementation Dates**

The implementation dates will be set collaboratively by the Provider and the DOT c/o HRD, at least one (1) month upon issuance of the Notice to Proceed. The agreed-upon implementation period will run for approximately three (3) months. Conduct of onsite APE would be three (3) weeks based on the agreed dates of both parties.

Should any of the employees are not able to complete all the procedures and/or there are still remaining avalees after the onsite implementation date/s, the Provider shall conduct the APE in their clinic/laboratory until the period agreed upon between the provider and the DOT;

- 9. x
- 10. x
- 11. x
- 12. x
- 13. x
- 14. x

Fully vaccinated against COVID-19 (e.g. primary vaccine plus the required booster doses;

Negative Antigen test results (nasal or throat swab) before the first and second batch schedule of vaccination;

Medical certificate from their company physician attesting that the medical staff is "Covid-19-Free" based on their Health Declaration Form; and

Be in full PPE while performing the tests.

c. The Service Provider must submit the list of the medical team together with the photocopies of their PRC licenses to the DOT at least five (5) days before the APE.

~~9. Personal Protective Equipment (PPE)~~

~~The Provider must ensure the medical team wears complete PPEs with visible name tags for the entire duration of the APE.~~

**2. Pre-APE Checklist**

The Provider must distribute a checklist of TO DOs to employees in preparation for the APE program before the actual conduct.

**3. Consent Forms**

The Provider must have readily available consent forms for employees during the APE, in both digital and printed formats.

**4. Equipment**

The Provider must be prepared to replace defective or non-functional equipment immediately to avoid disrupting the tests/procedures.

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## 8. Post-APE Services

Following the APE, the Provider must extend the following services:

- Free consultations/check-ups for at least three (3) times, and/or referral to specialists in case of abnormal laboratory results or physical examinations, based on the APE program recommendations within the three (3) month period of implementation. This can be done through physical face-to-face consultation or teleconsultation.
- Free follow-up laboratory and diagnostic tests/procedures for at least three (3) times (if needed or with abnormal test results).

In case of error in the results (laboratory, imaging, etc.):

- The Provider should make an explanatory note what happened and be given to the employee with a copy for the medical clinic;
- A repeat of the test should be done



free-of-charge, collection of the specimen preferably at the DOT head office.

Operational Hours: The service must be available to employees from 7:00 AM to 5:00 PM (Monday-Friday).

Consolidated Report: A consolidated report detailing the physician's findings, patient's history, and laboratory results must be submitted in hard and soft copy to the DOT Medical Clinic before the issuance of the Certificate of Completion.

#### **9. Examination Results**

Employee examination results (hard copy - sealed in an envelope) must be provided to the DOT Head Office, and soft copy results to be emailed to the employees within two (2) weeks after the conclusion of each employee's APE.

#### **10. Data Encoding and Processing**

The Provider must ensure that the encoding and processing of APE results are done or supervised by a biostatistician using biostatistics software.

#### **11. Communication**

The Provider, through its biostatistician, must coordinate with the Human Resource Division/Medical Officer before, during, and after the conduct of the APE, including providing updates while writing the APE Report. The list epidemiologic data needed by DOT shall be given to the Provider c/o the medical clinic.

#### **12. Final APE Report**

The final summary of APE results should be submitted in hard and soft copy to the DOT Medical Clinic before the issuance of the Certificate of Completion. The Final Report (employees' APE results) should be arranged in alphabetical order for ease of retrieval. A summary report containing relevant epidemiological data (e.g. frequency of smokers, diabetics, most common diagnosis, etc.) should be submitted to the medical clinic not more than 30 days after the conclusion of the APE.



	<p><b>13. Non-Disclosure of Information</b> The Service Provider must maintain all medical results and other information in strict confidence. The Provider must not disclose documents and information unless authorized by the DOT or the employee concerned.</p>
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All unamended portions of the Bidding Documents shall remain the same.

Please be advised that due to the belated posting of this bid bulletin the **deadline of submission** and **opening of bids** will be moved to **24 July 2024 at 9:00 a.m. and 10:00 a.m.**, respectively.

This Supplemental/Bid Bulletin shall form an integral part of the Bidding Documents.

For the guidance and information of all concerned.



**USEC. FERDINAND C. JUMAPAO** *J/C*  
BAC Chairperson

