



## Bid Notice Abstract

### Request for Quotation (RFQ)

**Reference Number** 10710438  
**Procuring Entity** DEPARTMENT OF TOURISM  
**Title** Procurement of Medicines for the DOT Medical Clinic and Regional Offices  
**Area of Delivery**

<b>Solicitation Number:</b>	RFQ NP-SVP 2024-03-0094	<b>Status</b>	<b>Active</b>
<b>Trade Agreement:</b>	Implementing Rules and Regulations	<b>Associated Components</b>	3
<b>Procurement Mode:</b>	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	<b>Bid Supplements</b>	0
<b>Classification:</b>	Goods	<b>Document Request List</b>	2
<b>Category:</b>	Medical Supplies and Laboratory Instrument	<b>Date Published</b>	02/04/2024
<b>Approved Budget for the Contract:</b>	PHP 366,875.00	<b>Last Updated / Time</b>	02/04/2024 00:00 AM
<b>Delivery Period:</b>		<b>Closing Date / Time</b>	05/04/2024 13:00 PM
<b>Client Agency:</b>			
<b>Contact Person:</b>	NAZER NIÑO L ALLANIGUE Administrative Officer I 351 Sen. Gil Puyat Avenue Makati City Metro Manila Philippines 1200 63-02-4595200 Ext.425  nlallanigue@tourism.gov.ph		

#### Description

TECHNICAL SPECIFICATIONS  
HEALTH AND WELLNESS PROGRAM  
PROCUREMENT OF MEDICINES FOR THE  
DOT MEDICAL CLINIC AND REGIONAL OFFICES  
MINIMUM TECHNICAL SPECIFICATIONS:  
LINE  
ITEM NO. ITEM/PARTICULARS UNIT COST QUANTITY TOTAL COST  
1 Paracetamol (500mg) tab 4.85 3,000 914,550.00  
2 Etoricoxib (60mg) tab 62.75 200 P12,550.00  
3 Ibuprofen/Paracetamol (325mg) capsule 9.50 300 P2,850.00  
4 Doxycycline (100mg) capsule 45.25 300 P13,575.00  
5 Ambroxol (75mg) capsule 49.80 1,000 P49,800.00  
6 Phenylpropanolamine/  
Paracetamol Chlorphenamine  
(25/325/2mg) capsule 9.97 500 P4,985.00  
7 Naphazoline HCl  
0.1mg/Maleate 2.2mg Opth soln (10ml) bot 249.00 5 P1,245.00  
8 Na Alginate 250mg, Na Bicarbonate 267mg, Ca  
Carbonate 80mg tab 19.50 300 P5,850.00  
9 Na Alginate 500mg, Na Bicarbonate 267mg, Ca  
Carbonate 160mg oral sachet 33.05 200 P6,610.00

10 Oral Rehydration Salt sachet 15.96 300 788.00  
 11 Mefenamic Acid (500mg) tab 38.25 2,000 P76,500.00  
 12 Meloxicam (15mg) tab 30.17 500 P15,085.00  
 13 Co-Amoxiclav (625mg) tab 44.25 300 P13,275.00  
 14 Clarithromycin (500mg) capsule 65.28 300 P19,584.00  
 15 Ciprofloxacin (500mg) tab 28.25 300 P8,475.00  
 16 Cloxacillin (500mg) capsule 13.25 300 P3,975.00  
 17 N-Acetylcysteine (600mg) tab 31.58 200 P6,316.00  
 18 Butamirate Citrate (50mg) tab 20.75 1,000 P20,750.00

Page 1 of 2

19 Betahistine (16mg) tab 60.58 300 P18,174.00  
 20 Domperidone tab 32.58 200 P6,516.00  
 21 Loperamide Hct (2mg) capsule 6.42 300 P1,926.00  
 22 Amlodipine Besilate (10mg) tab 5.75 1,000 E 750.00  
 23 Losartan K (100mg) tab 15.69 300 P4,707.00  
 24 Atorvastatin Ca (40mg) tab 23.23 300 P6,969.00  
 25 Metformin (500mg) tab 3.66 1,000 P3,660.00  
 26 Cetirizine (10mg) tab 15.66 1,000 P15,660.00  
 27 Multivitamins w/ Iron tab 15.75 1,000 P15,750.00  
 28 Ascorbic Acid (500mg) tab 7.00 1,000 ,000.00  
 TOTAL P366,875.00

**II. DELIVERY REQUIREMENTS:**

Delivery shall be of goods to DOT Main Office at Makati City

Expiration dates of the purchased medicines should be at least two (2) years after the delivery date

Delivery shall be fifteen (15) days upon receipt of funded approved purchase order

**PAYMENT PROCEDURE:** Government Procedure — Send Bill Arrangement

**APPROVED BUDGET FOR THE CONTRACT (ABC):**

The Approved Budget for the Contract is Three Hundred Sixty-Six Thousand Eight Hundred Seventy-Five Pesos Only (PhP366,875.00) chargeable against FY 2024 HRD — General Administrative Expense (GAE) Funds inclusive of all applicable taxes.

**CONTACT PERSON:**

DR. UL S. AL NTARA

Medical Consultant

Tel. No. (02) 8459 5200 Local # 220

DOT Medical Clinic — Main

**APPROVED BY:**

AITY. O ENCI GOZA

Director for Administrative Services ZEN ECHILLE C. PARINAS

Administrative Officer III

Tel. No. (02) 8459 5200 Local # 408

DOT Human Resource Division

**Other Information**

Eligibility Requirements

1. Mayor's/Business Permit issued by the city or municipality where the principal place of business of the prospective bidder is located, or the equivalent document for Exclusive Economic Zone Area,

In cases of recently expired Mayor's/Business permits, it shall be accepted together with the official receipt as proof that the bidder has applied for renewal within period prescribed by the local government unit.

2. PhilGEPS Certification/ Registration Number.

3. Original or Certified True Copy of Duly Notarized Omnibus Sworn Statement

Note: Kind submit your proposals together with your eligibility requirements thru email and send it to nlallanigue@tourism.gov.ph on or before April 5, 2024 at 1:00 pm. Late and unsigned quotations shall not be accepted.

**Created by** NAZER NIÑO L ALLANIGUE

**Date Created** 01/04/2024

The PhilGEPS team is not responsible for any typographical errors or misinformation presented in the system. PhilGEPS only displays information provided for by its clients, and any queries regarding the postings should be directed to the contact person/s of the concerned party.