



REQUEST FOR QUOTATION

Date: 15 September 2023

RFQ No.: R1 100-23-05-878

Name of Company: _____

Address: _____

Name of Store/Shop: _____

Address: _____

TIN: _____

PhilGEPS Registration Number: _____

The City Government of Pasig, through the Bids and Awards Committee (BAC), intends to procure **Supply and Delivery of Ultrasound Equipment (LOT 1) – City Health Office** with an Approved Budget for the Contract (ABC) of **Php 870,000.00**, in accordance with **Section 53.9** of the 2016 revised Implementing Rules and Regulations of Republic Act No. 9184. Please quote your best offer for the item in the table below.

The Project shall be awarded as One Project having several items that shall be awarded as one contract. Quotations received exceeding each total Cost per Item and/or the total Approved Budget for the Contract shall be rejected.

Item No.	Item Description	Brand Name <small>(PLEASE DO NOT LEAVE BLANK)</small>	QTY	UOM	Approved Budget		Price Offer	
					Unit Cost	Total Cost	Unit cost	Total Cost
1	Ultrasound Bone Sonometer, -Main Unit -Measured Parameter: SOS with Z score and T Score (Expressed in m/sec) -Quantitative Ultrasound Parameters: Bone Mineral Density, Elasticity Cortial Thickness, Micro Architecture -Scan Time: 1 or less than a minute per skeletal site -Power: 100-240v and 50-60Hz Dimensions: 15x5x12 inches to 17x8x14 inches -Weight: 5 to 7 kgs -Precision: RMS CV = 0.4% to 0.8% Other Condition: 1. With handheld probes 2. Easy to understand, graphical measurement report created within minutes 3. Report includes patient details and measurement history 4. Ability to share data Probe -Frequency: 0.5 to 1.2MHZ		1	set	870,000.00	870,000.00		



<p>-CM Probe: Used for bone strength assessment at the radius</p> <p>Display Options</p> <ul style="list-style-type: none"> -LCD flat color display monitor -Windows 10 - 1 GHz or faster processor - 1 to 2 GB RAM - 16 to 20 GB available hard disk - Super VGA (800x600) or Higher-resolution video adapter and monitor - Keyboard and Mouse - 8 MB of video RAM <p>PRINTER</p> <ul style="list-style-type: none"> - Standard PC Printer <p>Accessories</p> <ul style="list-style-type: none"> - Radius measurement gauze - Proximal - Skin Marker - SQV (system Quality Verification Phantom) - Hard rest - Power Supply and Cable - USB connection cable 						
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<p>Note: Other terms and conditions are stipulated in the attached Terms of Reference, if any.</p>	Total	870,000.00	
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DELIVERY TERM: Within **Sixty (60)** calendar days upon the receipt of Notice to Proceed but not to exceed 31 December 2023.

**Indicate the BRAND NAME or MANUFACTURER NAME and the specific MODEL to be offered or attach a BROCHURE for the offered item; items including but not limited to clothing, vehicle, equipment, devices, electronics, machines, drugs, medicines, medical supplies must be branded or at the very least, manufacturer shall be indicated.*

Caruncho Avenue, Brgy. San Nicolas, Pasig City, Philippines 1600

 (02) 8643-1111 * (02) 8641-1111 loc 1461 *  bidsandawards@pasigcity.gov.ph *

 pasigcity.gov.ph

Terms of Reference

- A. Project:** Supply and Delivery of Console Type- General Ultrasound Machine, OB-Gyne Ultrasound and Ultrasound Bone Sonometer
- B. Proponent:** CITY HEALTH DEPARTMENT
Radiology Section
- C. Delivery Schedule:** 60 days upon receipt of notice to proceed.
- D. Delivery site:** Medical Depot, Pasig Mega Dialysis Center
PI Building, 280 Eusebio Avenue, Brgy. San Miguel, Pasig City
- E. Terms of Payment:** Processing of payment upon completion of delivery with acceptance and inspection report
- F. Requirements/Specifications**

CONSOLE TYPE – GENERAL ULTRASOUND MACHINE

Clinical Applications

- o General Abdominal Imaging
- o Thyroid Imaging
- o Small parts Imaging
- o Obstetrics and Gynecology Imaging
- o Urology Imaging

General Features

- o Height Range: 1350 – 1690 mm (with monitor)
- o Width Range: 450 – 650 mm
- o Depth Range: 750 – 850 mm
- o Weight Range: 80 – 100 kg. (With safe working load)
- o 20 – 22" LED Monitor with HD Resolution
- o 70 – 90 degrees tilt range (up/down/left/right)
- o Complete alphanumeric keypad
- o Highly sensitive trackball/pad
- o Probe and gel holders
- o Ports/Slots for management of probe cables

Probes/Transducers

1. Convex Probe – Frequency: 1 – 7 MHz
Scanning Angle: 60 – 80 degrees
2. Linear Probe – Frequency: 4 – 15 MHz
Field of View: 35mm – 45mm
3. Endocavitary Probe – Frequency: 2 – 13 MHz
Scanning Angle: 150 – 200 degrees


Certified True Copy:

JM
CITY ENGINEER/CONTRACT OFFICER
OIC, Procurement Management Office

5th floor Office of the City Health Officer Pasig City Hall Caruncho Ave., San Nicolas Pasig City 1600
Tel: 8643-1111 local 391 * Fax: 8642-7754 * email: pasigcityhealth@gmail.com

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Technical Features

- a. Imaging Mode
 - o 2D imaging
 - o Dual image display
 - o Quad image display
 - o High quality zoom (Write zoom mode and Read zoom mode)
 - o B Mode
 - o M Mode
 - o Color Doppler imaging
 - o Power Doppler imaging
 - o Pulse wave Doppler imaging
- b. System Operations
 - o Cine view and measurement display
 - o Patient Information data base
 - o OB Calculations
 - o Renal Calculations
 - o SonoBiometry or its equivalent
 - o Gynecological calculations
 - o Auto measurement
 - o Cine view/memory up to 15,000 frames storage or its equivalent
 - o Image archive
 - o Connectivity data transfer (ability to store/export data in hard disk and USB flash drive)
 - o Black and white printer – photo like thermal paper
- c. Power Requirements
 - o Voltage: 100 – 240 VAC
 - o Frequency: 50 – 60 Hz
 - o UPS Capacity: 600 – 700VA

CONSOLE TYPE – OB-GYNE ULTRASOUND MACHINE

Clinical Applications

- o General Abdominal Imaging
- o Thyroid Imaging
- o Small parts Imaging
- o Obstetrics and Gynecology Imaging
- o Urology Imaging

General Features

- o Height Range: 1350 – 1690 mm (with monitor)
- o Width Range: 450 – 650 mm
- o Depth Range: 750 – 850 mm
- o Weight Range: 80 – 100 kg. (With safe working load)
- o 20 – 22" LED Monitor with HD Resolution
- o 70 – 90 degrees tilt range (up/down/left/right)
- o Complete alphanumeric keypad
- o Highly sensitive trackball/pad
- o Probe and gel holders
- o Ports/Slots for management of probe cables


Certified True Copy:


ATTY. ROSARIO M. OJEDA
OIC, Procurement and Contract Office

5th floor Office of the City Health Officer Pasig City Hall Caruncho Ave., San Nicolas Pasig City 1600
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Submit this Quotation (Accomplished and duly signed by the Owner or the respective Authorized Representative indicated in the Secretary's Certificate/Special Power of Attorney) not later than the closing date specified in the Bid Notice Abstract posted in PhilGEPS website along with the following documents:

- **Mayor's/Business Permit** (or a recently expired Mayor's/Business permit together with the official receipt as proof that the prospective bidder has applied for renewal within the period prescribed by the concerned local government unit subject to submission of the Mayor's Permit before the award of contract). The nature of business as stated in the Mayor's/Business Permit should at the very least be similar or related to the project to be bid.
- **PhilGEPS Registration Number**
- **Income Tax Return** - Latest Income or Business Tax Returns filed and paid through the BIR Electronic Filing and Payment System (EFPS).

In accordance with Revenue Regulation No. 3-2005, the above-mentioned tax returns shall refer to the following:

1. Latest Income Tax Return (ITR) - For participants already with an Annual ITR, latest ITR shall refer to the ITR for the preceding Tax Year be it on a calendar or fiscal year. For new establishments which, therefore, have no annual ITR yet, it shall refer to the most recent quarter's ITR.
 2. Latest Business Tax Return - refers to the Value Added Tax (VAT) or Percentage Tax returns covering the previous six (6) months.
- Accomplished and notarized **Omnibus Sworn Statement** ([https://www.gppb.gov.ph/assets/forms/Omnibus%20Sworn%20Statement\(Revised\).docx](https://www.gppb.gov.ph/assets/forms/Omnibus%20Sworn%20Statement(Revised).docx))
 - **Proof of Authorization: Secretary's Certificate** if corporation, or **Special Power of Attorney**, if individual.

ADDITIONAL REQUIREMENTS:

For Procurement of Drugs and Medicines:

Documents from the Food and Drug Administration (FDA):

- a. Certificate of Product Registration;
- b. Certificate of Good Manufacturing Practice;
- c. License to Operate;
- d. Batch Release Certificate (*for vaccines, toxoids and immunoglobulins only*) [to be submitted upon delivery]; and
- e. Certificate of Analysis (*for anesthesia and antibiotics*) [to be submitted upon delivery].

If the Supplier is not the Manufacturer, a certification from the Manufacturer that the supplier is an authorized distributor/dealer of the products/items.

Please submit the accomplished Quotation and required documents on or before the deadline of submission at the Bids and Awards Committee (BAC) through the **Procurement Management Office (BAC Secretariat Office), 4th Floor, Pasig City Hall, San Nicolas, Pasig City.**


All documents should be submitted in a sealed brown envelope addressed to the "Bids and Awards Committee, 4th Floor, Pasig City Hall", and properly marked with the Project Title as provided herein.

The CITY GOVERNMENT OF PASIG reserves the right to reject any and all bids, declare a failure of bidding, or not award the contract at any time prior to contract award in accordance with Sections 35.6

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and 41 of the 2016 revised IRR of RA No. 9184, without thereby incurring any liability to the affected bidder or bidders.

For any clarification, you may contact us at telephone no. (02) 8641-1111 / (02) 8643-1111 loc. 1461 or email address at bidsandawards@pasigcity.gov.ph



ATTY. PONCE MIGUEL D. LOPEZ
Officer in Charge, Procurement Management Office

I hereby certify that I have read and agree to this Request for Quotation, its Terms of Reference, and Bid Bulletin/s, if any. I further certify that the products to be delivered will conform to the specifications stated in the Item Description.



Conforme:


Signature over Printed Name

Position

Duly authorized to sign quotation/offer for and on behalf of _____
(Please indicate Company Name)

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