



Cabidlanan, Nabunturan, Davao de Oro

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Purchase Request Number: 25-5860

Period of Delivery: PLEASE REFER TO ITEM NO. 3 OF THE TERMS AND CONDITION



PROVINCIAL GOVERNMENT OF DAVAO DE ORO

Cabidanan, Nabunturan, Davao de Oro

TECHNICAL SPECIFICATIONS FORM

Purchase Request Number: 25-5860

Bid Number: B-25-0198
Date: 10/22/2025
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ITEM NO.	QTY.	UNIT OF ISSUE	DESCRIPTION	APPROVED BUDGET		BID PRICES	
				Unit Price	Total Amount	Unit Price	Total Amount
22	1.0	SET	DISTAL MEDIAL HUMERUS STAINLESS	70,000.00	70,000.00		
23	1.0	SET	DISTAL MEDIAL HUMERUS TITANIUM	78,000.00	78,000.00		
24	1.0	SET	DISTAL RADIUS T-PLATE TITANIUM	78,000.00	78,000.00		
25	1.0	SET	DISTAL TIBIA LP- STAINLESS	68,000.00	68,000.00		
26	1.0	SET	DISTAL TIBIA LP- TITANIUM	78,000.00	78,000.00		
27	1.0	SET	ENDOBUTTON	83,000.00	83,000.00		
28	1.0	SET	EXFIX FOREARM POLYAXIAL	48,000.00	48,000.00		
29	1.0	SET	EXFIX HUMERUS POLYAXIAL	48,000.00	48,000.00		
30	1.0	SET	EXFIX TIBIA POLYAXIAL	48,000.00	48,000.00		
31	1.0	SET	EXFIX TIBIA ROGERANDERSON	48,000.00	48,000.00		
32	1.0	SET	EXPERT NAIL	78,000.00	78,000.00		
33	1.0	SET	FEMUR INTERLOCKING NAIL-SS	78,000.00	78,000.00		
34	1.0	SET	FEMUR INTERLOCKING NAIL-TITANIUM	78,000.00	78,000.00		
35	1.0	SET	HERBERT SCREW	48,000.00	48,000.00		
36	1.0	SET	ILLIZAROV	78,000.00	78,000.00		
37	1.0	SET	K-WIRES 1.2MM to 2.0MM	28,000.00	28,000.00		
38	1.0	SET	MALLEOLAR SCREWS 3.5MM	38,000.00	38,000.00		
39	1.0	SET	MALLEOLAR SCREWS 4.5MM	38,000.00	38,000.00		
40	1.0	SET	MINI DCP 2.7MM	40,000.00	40,000.00		
41	1.0	SET	MINI DCP 3.5MM	40,000.00	40,000.00		
42	1.0	SET	NARROW DCP	40,000.00	40,000.00		
			SUB-TOTAL		2,648,500.00		

Purpose: FOR THE USE OF DDOPH PANTUKAN
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ITEM NO.	QTY.	UNIT OF ISSUE	DESCRIPTION	APPROVED BUDGET		BID PRICES	
				Unit Price	Total Amount	Unit Price	Total Amount
			2. Scope of Use 2.1. The surgical implants are intended solely for surgical operation. 2.2. These implants are designed for specific surgical operation. 2.3. The Order and Re-order shall be based upon the type of surgical case determine by qualified Healthcare Professional. 3. Transport & Delivery 3.1. Implants will be transported in sterile packaging. Provided that all implants are new and single use only. The consignor shall issue certification that the items delivered is new and not yet used. 3.2. It is the responsibility of the Operating Nurse staff, Nurse Supervisor or senior nurse and the orthopedic surgeon to inspect the condition the integrity of the packaging upon receipt. 3.3. The recipient inspectorate team shall prepare and sign the Acceptance and Inspection Report (AIR) and submit to the supply office of the hospital. 3.4. The Chief of Hospital shall issue Office Order designating the inspectorate team of the hospital. 4. Storage and Handling 4.1. The consignee shall provide appropriate storage conditions for the products. 4.2. Implants must be stored in a clean and sterile environment. 4.3. Avoid exposure to excessive moisture, extreme temperature, and exposures to direct sunlight. 5. Payment Terms 5.1. The Consignee shall make full payment for the products on or before three (3) months from the date of completion and submission of Statement of Consigned Surgical Implants. 6. Returns and Replacements 6.1. Any defective Products shall be returned and replaced by the Supplier. 7. Patient Consent and Information 7.1. It is the responsibility of the				

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ITEM NO.	QTY.	UNIT OF ISSUE	DESCRIPTION	APPROVED BUDGET		BID PRICES	
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			healthcare provider to obtain informed consent for the patient, including explaining the risks and benefit to the use of implant.				
			GRAND TOTAL		5,399,500.00		

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