



Republic of the Philippines
Department of Health
METRO MANILA CENTER FOR HEALTH DEVELOPMENT

SUPPLEMENTAL/ BID BULLETIN NO. 1

IB NO. 2023-054E
PROCUREMENT OF 18 SETS DELIVERY INSTRUMENT SET

This Supplemental/Bid Bulletin No. 1 is being issued to revise provisions/specifications in the Bidding Documents for a fore cited project:

Revision and clarification to provisions/specifications in the Bidding Documents:	
ORIGINAL TECHNICAL SPECIFICATIONS	AMENDED
No changes as stipulated in technical specification	

Bidders are advised to use the following attached forms and submit together with all required documents for the submission of bids on June 15, 2023, 10:00 AM

This Supplemental/Bid Bulletin No. 1 shall form part of the Bidding Documents. Any provisions in the Bidding Documents inconsistent herewith is hereby amended, modified and superseded accordingly.

For guidance and information of all concerned.

Issued this 9th day of June, 2023 in MMCHD.

Approved by:

SGD.
PRETCHELL P. TOLENTINO, MD, MCHM
Director III / BAC Chairperson

Section VII. Technical Specifications

Republic of the Philippines

Department of Health

Metro Manila Center for Health Development

TECHNICAL SPECIFICATIONS

Item No. 1	DELIVERY INSTRUMENT SET	Qty./Unit	18 SET
Name of Manufacturer:		Country of Origin	
Brand:		Model: (if applicable)	
ABC: 900,000.00			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
<p>DELIVERY INSTRUMENT SET</p> <p>Includes the following instruments:</p> <ul style="list-style-type: none"> ● 6 pcs. Sponge Holding Forcep 9 1/2" straight ● 6 pcs. Backhaus Towel Clamp 5 1/4" ● 1 pc. Operating Scissors S/B 5 1/2" straight ● 1 pc. Braun Episiotomy Scissors 8 1/2" Angled to side ● 1 pc. Umbilical Scissors 4" ● 2 pcs. Thumb Forceps 5 1/2" Serrated ● 2 pcs. Tissue Forceps (1x2T) 5 1/2" ● 6 pcs. Allis Tissue Forceps (5x6T) 6" ● 6 pcs. Crile Forceps 5 1/2" straight ● 1 pc. Bozeman Uterine Dressing Forceps 10 1/4" (Double Curved) ● 2 pcs. Schroeder Braun Uterine Tenaculum 10 1/4" straight ● 1 pc. Lova Membrane Puncturing Forceps 10 1/4" (Double Curved) ● 1 pc. Simpson Obstetrical Forceps 4" ● 1 pc. McLean-Tucker-Luikart Obstetrical Forceps 15 1/2" ● 1 pc. Kielland Obstetrical Forceps 17 1/2" ● 1 pc. Piper Obstetrical Forceps 17 1/2" ● 1 pc. Bill Traction Handle (For use with any Obstetrical Forceps) 			

<ul style="list-style-type: none"> ● 1 pc. Martin Pelvimeter (Graduated in cm and inches) ● 1 pc. Mayo-Hegar Needle Holder 6" ● 1 pc. Mayo- Hegar Needle Holder 7" ● 1 pc. Sterilizing tray (Perforated) ● Laser mark the word "DOH-MMCHD" in each instrument. 	
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<p>Requirements if awarded the Contract</p> <p>1. Completion Period: The delivery, installation, testing and commissioning of the equipment and its accessories, including the training of end-users and maintenance staff must be completed within 30 calendar days upon receipt of Notice to Proceed.</p> <p>2. Prior to acceptance, the end user shall conduct a physical inspection. The equipment must have no physical damage and defect.</p> <p>3. Warranty: Warranty certificate for one (1) year on craftsmanship. Attached also the notarized undertaking that supplier shall replace any part in the equipment that is found to be defective in material or in workmanship under normal use within five (5) calendar days upon notification of the equipment breakdown from the end-users. The undertaking shall include a statement that the numbers of days the equipment is unusable due to defective materials or workmanship, shall be added to the warranty period. The warranty period shall commence from the date of acceptance by the end-user after testing and commissioning.</p> <p>4. Manuals: The supplier must provide the end-user one (1) hard and one (1) soft copy of the following:</p> <p style="padding-left: 40px;">a) Cleaning/Sterilization manual in English language</p> <p>5. With "DOH-MMCHD HFEP" (Government Property not for sale) sticker in each container/tray.</p> <p>X-X</p> <p>Source of Fund: SAA 2023-02-000687</p> <p>Recipient: Navotas City – 5 Sets Ospital ng Malabon – 10 Sets Malabon City – 2 Sets Municipality of Pateros 1 Set</p>	
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Name of Company: _____
Address: _____
Signature Over Printed Name : _____
Telephone/Fax Number : _____
Email: _____

Section VI. Schedule of Requirements

The delivery schedule expressed as weeks/months stipulates hereafter a delivery date which is the date of delivery to the project site.

Description	Quantity	Delivery Site	Delivery Period
DELIVERY INSTRUMENT SET	18 SETS	Health Facility in National Capital Region	30 calendar days upon receipt of the Notice to Proceed

Name of Company: _____

Address: _____

Signature Over Printed Name : _____

Telephone/Fax Number : _____

Email: _____