

PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

G 1:	DO MEDI	TRON INC		T _I	P.O. No	21-08-149	3 000	
Address: LFG Building, #82 Panay Avenue, Quezon City Date						ode of Procurement: PUBLIC BIDDING		
					Mode of			
Gentlemen:	Please fu	rnish this of	fice the following articles subject to the te	rms and conditi	ions co	ntained heréin:		
Place of Delivery : Pasig City General Hospital Delivery					60 days within 45 days upon	completion of deliver		
Date of D	Delivery :			_ Payment	Term.	UNIT	completion of deliver	
ITEM NO.	UNIT	OTY	DESCRIPTION			COST	AMOUNT	
31	UNITS 2		changing settings. " Graphical display of pressure, flow and " Built-in nebulizer " Can display simultaneous 15 physiolog " A broad range of operating modes incl " Assist/Control, SIMV, and CPAP. " Pressure Regulated Volume Control (FBIPHASIC) " Volume Control, Pressure Control, and " Ventilation Apnea Backup ventilation in " Leak compensation " F/V Loops; P/V Loops " Trends: Maximum Inspiratory Pressure " Communication package including a re" connection and fiberoptic connection. I " flow oxygen inlet with accumulator" " Polivers and displays tidal volumes as	rting and digital or easy interaction. I volume (with free ic monitoring uding PRVC) Airway Pre I Pressure Suppor a SIMV and CPAP (MIP) / Negative emote nurse call Both a high-pressu BTPS (Body rected, Self-testing	1,499,000.00 2,5 upted ventilation. igital raction, membrane buttons and a dial for with freeze function) ing vay Pressure Release Ventilation (APRV / Support I CPAP/PSV. egative Inspiratory Flow (NIF) e call i-pressure oxygen inlet with blender and a low dy f-testing at power-up and background testing		PRV /	
			43 4 5 5 5 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6	Start Miles and Start Commen	(3)E(3)		All Control of the Co	
		4						
Control 1	No. 2911					SUBTOTAL:	Php 2,998,000.0	
	mount in W		Million Nine Hundred Ninety-eight Thousan			(140)		
of one	(1) percent for	or every day o	te the full delivery within the time specified above of delay shall be imposed. To call the full delivery within the time specified above the full delivery shall be imposed.		Very	o truly yours, OR MA. REGIS N (Authorized Office)		
	(Signa	ture over gri	Date			City Mayor		

Funds Available:

Amount:

Requisitioning Office/Dept.:



PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

P.O. No.: 21-08-1493 Supplier: RG MEDITRON, INC. Date: 06 AUGUST 2021 LFG Building, #82 Panay Avenue, Quezon City Address: Mode of Procurement: PUBLIC BIDDING Gentlemen: Please furnish this office the following articles subject to the terms and conditions contained herein: Place of Delivery: Pasig City General Hospital Delivery Term: 60 days Date of Delivery: Payment Term: within 45 days upon completion of delivery **ITEM** UNIT NO. UNIT QTY DESCRIPTION COST **AMOUNT** " CPAP: up to max of 10-16cm H2O at 35l/min flow " Alarms: High pressure, Low pressure (disconnect), "Low battery, Low supply gas *Other features * Use in MRI scanner to 3 Tesla * Built in oxygen therapy facility * CPAP and integrated PEEP function * DEMAND system, allowing the patient to breathe with the ventilator Lightweight and rugged * Manual breath with Pneupac with volume limiter Luminescent manometer Display of inspiratory and expiratory pressure * Hyperinflation accessory for Neonatal ventilation *********** Nothing Follows ******* For the use of PCGH - Nursing Service Offce for the use of Pasig City General Hospital Control No. 2911 **GRAND TOTAL:** Php 4,286,000.00 Total Amount in Words | Four Million Two Hundred Eighty-six Thousand Pesos Only. In case of the failure to make the full delivery within the time specified above, a penalty of one tenth (1/10) of one (1) percent for every day of delay shall be imposed. Very truly yours, 120 m

Conforme:

MICHELYET. GARCES

RODELMA L. SANTOS

(Signature der printed name of Supplier)

Date

VICTOR MA. REGIS N. SOTTO

(Authorized Official)

City Mayor

Requisitioning Office/Dept.:

Funds Available

Amount 1, 286, 0001-



PURCHASE ORDER CITY GOVERNMENT OF PASIG

Agency Name

	: RG MEDI	ron, inc.		P.O. No. : 21-08-1493			
	· · · · · · · · · · · · · · · · · · ·		y Avenue, Quezon City	te: 06 AUGUST 2021			
				Mode	lode of Procurement: PUBLIC BIDDING		
Gentlemen:	Please fur	nish this off	fice the following articles subject to the terms	and conditions	contained herein:		
Place of D		Pasig City G	eneral Hospital	Delivery Term		and the second second	
Date of D	Delivery :			Payment Term	u: within 45 days upon completion of delive		
ITEM NO.	UNIT	QTY	DESCRIPTION		COST	AMOUNT	
32	UNIT	1	VENTILATOR TRANSPORT " Power source: (Fully pneumatic) Medical O	xygen 280-600kPa	1,288,000.00	1,288,000.0	
			" Dimensions: At least (H x W x D) 240 x 165 x 93mm (9.25 x 6.5 x 3.7in) or its equivalent				
			" Weight:2.4kg (5.3lb)				
			" MRI Compatibility:3 Tesla field strength, 7.5 Tesla/m (750g/cm) spatial gradient, Open bore shielded magnet				
			" Modes:CMV, SIMV, CPAP, Demand, Manu	al breath			
			" Tidal Volume: 70-1500ml				
			" Frequency: 8-40bpm				
			"I:E ratio1:2				
			" FiO2: 50% and100%				
			" Pressure relief valve and alarm:20-60cmH2	20			
			" PEEP range: 0-20cmH2O				
			" Oxygen Flow range: 0-35L/min				
For the	use of PCGI	H - Nursing Se	ervice Offce for the use of Pasig City General Hospi	ital			
For the	use of PCGI	d - Nursing So	ervice Offce for the use of Pasig City General Hospi	ital			
For the	use of PCGI	H - Nursing So	ervice Offce for the use of Pasig City General Hospi	ital			
		H - Nursing Se	ervice Offce for the use of Pasig City General Hospi	ital	CDAND TOTAL	Dhn 4 296 000 0	
Control N	Jo. 2911				GRAND TOTAL:	Php 4,286,000.0	
Control N	Jo. 2911 nount in We	ords Four M	Million Two Hundred Eighty-six Thousand Pesos	s Only.		Php 4,286,000.0	
Control N Total An	Jo. 2911 nount in Wo	ords Four Mailure to make		s Only.		Php 4,286,000.0	
Control N Total An	Jo. 2911 nount in Wo	ords Four Mailure to make	Million Two Hundred Eighty-six Thousand Pesos e the full delivery within the time specified above, a p	only.	n (1/10)	Php 4,286,000.0	
Control N Total An	Jo. 2911 nount in Wo	ords Four Mailure to make	Million Two Hundred Eighty-six Thousand Pesos e the full delivery within the time specified above, a p	only.		Php 4,286,000.0	
Control N Total An In of one (nount in Wo	ords Four Maker every day of	Million Two Hundred Eighty-six Thousand Pesos e the full delivery within the time specified above, a process of delay shall be imposed.	oenalty of one tent	n (1/10) ry truly yours,		
Control N Total An	nount in Wo	ords Four Mailure to make revery day of	Million Two Hundred Eighty-six Thousand Pesos e the full delivery within the time specified above, a property of delay shall be imposed.	oenalty of one tent	ry truly yours,	I. SOTTO	
Control N Total An In of one (nount in Word case of the formula (1) percent formula (2)	ords Four Mailure to make revery day of	Million Two Hundred Eighty-six Thousand Pesos e the full delivery within the time specified above, a property of delay shall be imposed. T. 6ALCOS	oenalty of one tent	n (1/10) ry truly yours,	I. SOTTO	
Control N Total An In of one (nount in Word case of the formula (1) percent formula (2)	michell RODELMA	Million Two Hundred Eighty-six Thousand Pesos e the full delivery within the time specified above, a property of delay shall be imposed.	oenalty of one tent	ry truly yours, OR MA. REGIS N (Authorized Office)		

Requisitioning Office/Dept.: Funds Available. Amount:



CITY GOVERNMENT OF PASIG

Agency Name

					DO N	21_08_	1 403		
	pher . Ro medition, inc.					. No.: 21-08- 1 493 e: 06 AUGUST 2021			
Address :	S . Li o building, #621 analy Avenue, Quezon ony					ode of Procurement: PUBLIC BIDDING			
Gentlemen:	Please fu	rnish this offic	ee the following articles subject to the ter	rms and cond	litions co	ontained herein:			
Place of De	3	Pasig City Ger	neral Hospital			60 days within 45 days upor	n completion of deliver		
ITEM NO.	UNIT	QTY	DESCRIPTION			UNIT COST	AMOUNT		
			Spontaneous Exhaled Tidal Volume (Inspired Tidal Volume (Vti): 0-4,000 r Oxygen inlet pressure: 0 to 100 psig (Percent Oxygen: 21 % to 100 % "Alarm Parameters High Pressure Alarm Limit: 5-120 cm Low Pressure Alarm Limit: 5-120 cm Low Minute Volume Alarm: OFF, 2-60 Low Minute Volume Alarm: OFF-99.9 High Breath Rate: OFF, 3-150 bpm Apnea Interval: 10-60 seconds Backter Breath Rate: Greater of: 12 bpm or second Backter Breath Rate: Greater of: 12 bpm or second Backter Breath Rate: Greater of: 12 bpm or second Backter Breath Rate: Greater of: 12 bpm or second Breath Rate:	nl (6.89 bar) nH2O 0 cmH2O 9 L up] set breathrate g (2.62 bar) g (4.48 bar) er AC, 47 to 65 Hz					
						OUDTOTAL .	Dbn 2 009 000 0		
Control No			W. M. I.	I.D O.1.		SUBTOTAL:	Php 2,998,000.0		
ln c	ease of the base o	failure to make t	SANTOS manue of Sumplies) GUST 2021		Very	truly yours, OR MA. REGIS N (Authorized Offi			
	(Signat	ure over printed	name of Sumplier)			City Mayor			

Funds Available

Amount:

Requisitioning Office/Dept.:



CITY GOVERNMENT OF PASIG Agency Name

Supplier	: RG MEDI	TRON, INC.			P.O. No	o.: 21-08-149	3	
Address	etress . Er o Building, not i und i trende, quezen en					. 06 AUGUST 2021		
		Karau Gerran IV	Mode of Procurement: PUBLIC BIDDING					
Gentlemen:		rnish this offic	e the following articles subject to t	the terms and condit	tions co	ntained herein:		
Place of F	Ooliyom:	Pasia City Gar	neral Hospital	Delivery	Term ·	60 days		
						completion of deliver		
ITEM				Tay and	3311	UNIT		
NO.	UNIT	QTY	DESCRIPTIO	<u>ON</u>		COST	AMOUNT	
			Peak Flow: 10-140 L/min; Spont Maximum Flow of 180 Li Sensitivity: OFF, 1-8 L/min PEEP/CPAP: 0-35 cmH2O Pressure Support: OFF, 1-60 of Oxygen Percent: 21-100% Bias Flow:10-20 L/min Sigh (1.5 X Set Vt): ON/OFF, 1 Manual Breath: X 1 Inspiratory Hold: 6 second mat 100% O2: ON/OFF, 3 minute in Over Pressure Relief: 20-130 of Inspiratory Pause: OFF, 0.1 - 2 Expiratory Hold: 6 second mat Inspiratory Pressure: OFF, 1-10 Inspiratory Pressure: OFF, 1-10 Inspiratory Time: 0.3 - 10.0 sec Flow Waveforms: Decelerating "Monitored Parameters Total Breath Rate (f): 0-250 by Spontaneous Breath Rate (f): I:E Ratio (I:E): 1:99 - 99:1 Exhaled Minute Volume (Ve): 0 Spontaneous Exhaled Min. Volum Peak Inspiratory Pressure (Ppe Mean Airway Pressure (Pmean Inspiratory Time (Ti): 0.01-99.9 Expiratory Time (Te): 0.01-99.9 Positive End Exp.Pressure (PE Mandatory Exhaled Tidal Volum	cmH2O 1 Sigh every 100 breath x. maximum cmH2O 2.0 sec (c. 00 cmH2O c. ± 0. seconds g pm : 0-250 bpm 0-99.9 Liters lume (Spon V-99.9 Liter eak): 0-140 cmH2O n): 0-99 cmH2O 99 sec 99 sec EEP): 0-99 cmH2O	ers rs	minutes, whiche	ver occurs first	
Control N	Jo 2911					SUBTOTAL :	Php 2,998,000.0	
	nount in W	ords Two Mi	llion Nine Hundred Ninety-eight Tho	rusand Pesos Only.	ALL STATE OF THE S	OOD TO TALL	1 110 2,000,000.	
In	case of the f	ailure to make t	he full delivery within the time specified a leavy shall be imposed.		e tenth (1	1/10)		
					Very	truly yours,		
Conform	ne:	martus	T. SARCOS		VICTO	R MA. REGIS N		
	(Cionali	RODELMA I				(Authorized Offi City Mayor	cuii)	
	(Signati	Ø9 AU	name of Supplier) HUST 2021					
Dogwish	ionina Officia	Da	Funds Available /	Aa				
Requisir	ioning Offic	TRO JR., MD	And the second	ACUENCO		Amount : _		