

Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

DEPARTMENT MEMORANDUM

No. 2014 - 0338

FOR : **DR. TEODORO J. HERBOSA**
Undersecretary – NCR and Southern Luzon Operation Cluster


DR. PAULYN JEAN ROSELL-UBIAL
Asst. Secretary – Head of the Operations Cluster for Visayas

DR. GERARDO V. BAYUGO
Undersecretary – Head of the Operations Cluster for Northern and Central Luzon

DR. ROMULO A. BUSUEGO
Asst. Secretary – Head of the Operation Cluster for Mindanao

DR. KADIL M. SINOLINDING
Secretary of Health – ARMM

ATTN: DIRECTORS OF REGIONAL HEALTH OFFICES AND MEDICAL CENTER CHIEFS OF DOH RETAINED HOSPITALS

FROM : 
LILIBETH C. DAVID, MD, MPH, CESO III
OIC, Health Policy Finance and Research Development Cluster

SUBJECT : Submission of 2014 List of Procured Medicines and Purchase Orders

DATE : 04 November 2014

The 2013 (Second Edition) of the Drug Price Reference Index (DPRI) is already available online at www.ncpam.gov.ph and www.doh.gov.ph. You may now use the reference prices in your next procurement activity. The hard copy of the booklet will be distributed once it is printed.

In line with the above, the National Center for Pharmaceutical Access and Management (NCPAM) is now starting the data collection of the 2014 medicines procurement for the DPRI. In this regard, may we ask you to submit the copy of the 2014 Purchase Orders (PO) and list of procured medicines of your respective institution. The PO and summary/list should contain the following information:

1. Generic Name of Medicine
2. Brand Name

3. Complete Dosage Strength and Form (Example: Ranitidine 25mg/ml, 2ml ampule)
4. Acquisition Cost (as reflected in the PO)
5. Total Cost
6. Quantity
7. Mode of Procurement
8. Supplier
9. Manufacturer

The deadline for submission is on or before 19 December 2014. Please send the hard copy of the document through courier or email to dohncpam@gmail.com. Attached herewith are the sample PO and matrix for your reference. Should you have other inquiries you may contact DOH-NCPAM at 6517800 local 2554-2558.

For strict compliance.

sample

W. CONTRACT/PURCHASE ORDER



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

PURCHASE ORDER

Procurement of Various Pharmaceuticals, Ointment/Cream and Solutions
IB No. 2010-5-24(19)

Supplier:	Company F	PO No.:	2010-9-208		
Address:	Company Address	Date:			
Telephone No.:		Mode of Procurement:			
TIN:					
Gentlemen: Please furnish this office the following articles subject to the terms and conditions contained herein:					
Place of Delivery	: DOH Warehouse, Material Management Division, Bldg., 25, San Lazaro Cmpd., Sta. Cruz, Manila	Delivery Term	:		
Date of Delivery	: Thirty (30) calendar days upon receipt of Notice to Proceed	Payment Term	:		
Item No.	Unit of Issue	ITEM DESCRIPTION	QTY	UNIT COST	AMOUNT
1	bottle	Ascorbic Acid Oral Name of manufacturer: Company F1 Country of origin: Philippines Brand: Generic Strength: 100mg/5ml Dosage form: Syrup 60ml bottle Upon delivery the following shall be complied: <ul style="list-style-type: none"> • Shelf life: Drugs must be fresh commercial stock with a total shelf life of twenty four (24) months from the date of manufacture but not less than sixteen (16) months from the date of delivery. • Packaging Instructions: 60ml bottle, individually boxed, 144 bottles per corrugated carton. • Labeling Instructions: For each box, bottle and corrugated carton the 	3,600	14.40	51,840.00

	<p>Brand: Generic Strength: 500mg (as hydrochloride) Dosage form: tablet/film coated tablet</p> <p>Upon delivery the following shall be complied:</p> <ul style="list-style-type: none"> • Shelf life: drugs must be fresh commercial stock with a total shelf life of twenty four (24) months from the date of manufacture but not less than eighteen (18) months from the date of delivery. • Packaging Instructions: 10 tablets in blister pack / foil strip, 100 tablets per box. • Labeling Instructions: For each box, blister pack or foil strip and corrugated carton the following should legibly imprint: "Philippine Government Property- Department of Health-Not for Sale" Date of manufacture: _____ Date of expiry: _____ <p>X-X-X-X-X-X-X-X-X-X For the use of HEMS</p> <p>Note: Subject to the conditions stated in the Bidding Documents.</p>			
Five Hundred Thirty One Thousand Four Hundred Thirty Two Pesos Only				Php 531,432.00
In case of 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.				
<p>HOPE/DULY AUTHORIZED REPRESENTATIVE</p> <p>CONFORME:</p> <p>Signature over printed name of Supplier</p> <p>Date</p>				
Funds Available:	ALOBS No. : _____ Amount : _____			

