



Republic of the Philippines
Cebu Normal University

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Procurement Unit

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REQUEST FOR QUOTATION

CANVASS No. : 23-07-565

Advertisement No. _____

Purchase Request No. 23-07-565

Name of Supplier/Company : _____

Company Address/Tel./Fax#.: _____

Philgeps Registration No. : _____

BIR Tin No. _____

DBP Bank Account(No Bank Charge): _____

If none DBP Bank Account, Charges May Apply to Suppliers Account

Gentlemen:

Please quote your lowest price on the item/s listed below this page stating the shortest time of delivery and submit your quotation duly signed by your representative not later than July 19, 2022.

HONEY GRACE M. IRIZARI
Focal Person for Procurement Activities

Item No.	Qty	Unit	ITEM & DESCRIPTION	Unit Price	Total
	2	Unit	Infusion Pump		
			Specifications:		
			9 infusion modes available: Rate, Time, Bodyweight, drip, sequential, trapezium, loading dose, micro, relay.		
			Infusion Rate Range: 0.1- 1200ml/h, increment 0.1ml/h		
			VTBI Setting range 0.1-9999mL.		
			Infusion accuracy $\leq \pm 5\%$		
			KVO Rate: 0.1-5.0mL/h		
			Color TFT touch screen with screen auto lock		
			11 level occlusion available		
			Anti Free-Flow design when opening the pump door		
			Automatic door and Automatic anti-free-flow clamp		
			Titration function available		
			Calibration functions to enable different brand syringe which is compliant to industry standard.		
			All types of alarm: Near End, Infusion End, Occlusion Alarm, Low Battery, Battery Empty, No Battery, No Power Supply, System trouble, Air Bubble and Reminder Alarm.		
			high sensitivity air bubble sensor with 7 levels choice		
			Strong date storage: 2000 events can be stored		
			Connectivity: LAN/WIFI function can connect to Infusion CMS		
			Different mounting method, vertical or horizontal.		
			Long time battery support, up to 5 hours with 25ml/h infusion rate.		
			European CE or US FDA certification		
			Very light design, only 1.2Kg with battery.		
			Barcode Scanner for quick patient information input		
			All set should be European CE/US FDA approved		
			Drop sensor specific mounting position should be available Drug Library 1000 types		

NOTE :

1. DELIVERY PERIOD IS WITHIN _____ CALENDAR DAYS.
2. WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES AND MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY.
3. PRICE VALIDITY SHALL BE FOR A PERIOD OF _____ CALENDAR DAYS.
4. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT.
5. THIS FORM SHALL BE ENCLOSED IN AN ENVELOPE AND SEALED BY THE BIDDER HIMSELF.

After having carefully read and accepted your General Conditions, I / We quote you on the items at prices written above.

_____ **Canvasser Signature**

_____ **Printed Name / Signature of Supplier / Contractor**

_____ **Date**

SDF-USO-206-003-01



Certification Date: 1 February 2021
Recertification due date: 24 January 2024
For recertification of the certificate please access www.ukas.com. (Certification check and type the registration number)



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