

University of Science and Technology of Southern Philippines

Alubijid | Balubal | Cagayan de Oro | Claveria | Jasaan | Oroquieta | Panaon | Villanueva

OFFICE OF THE BIDS AND AWARDS COMMITTEE IV

BID FORM

NAME OF THE PROJECT: PROPOSED PROCUREMENT OF THE SUPPLY, DELIVERY, INSTALLATION AND COMMISSIONING FOR SKILLS

LABORATORY AND CLASSROOM EQUIPMENT FOR COLLEGE OF MEDICINE CY 2024

APPROVED BUDGET OF $\,:\,$ FORTY MILLION PESOS AND 00/100 (P40,000,000.00) ONLY CONTRACT

BRIEF DESCRIPTION

: SUPPLY, DELIVERY, INSTALLATION AND COMMISSIONING FOR SKILLS LABORATORY AND CLASSROOM EQUIPMENT FOR COLLEGE OF MEDICINE CY 2024

SOURCE OF FUND

: EFP CY 2024

CONTRACT DURATION : NINETY (90) CALENDAR DAYS (ONE LOT)

ITEM NO.	DESCRIPTION/SPECIFICATIONS	QTY	UNIT	USTP APPROVED UNIT PRICE	UNIT PRICE	AMOUNT
	ABDOMINAL EXAMINATION TRAINER An anatomically accurate adult male torso. It can be used to teach and practice palpation of the abdomen, auscultation, and percussion elements of abdominal or gastrointestinal (GI) examination. OVERVIEW • Trainer or Simulated Patient can vary respiratory movement of liver and spleen by the turn of a wheel • Integral amplifier and surface mounted MP3 player. Allows training in auscultation of normal and high pitched or obstructed bowel sounds, renal and aortic bruits • Volume of bowel sounds can be adjusted, and the MP3 player allows you to add additional sounds • Distension set allows for realistic checking for ascites using percussion, shifting dullness or fluid thrill technique. As well as simulation of bowel obstruction on percussion and auscultation • Pulse bulb allows simulation of a normal and aneurysmal aortic pulse REALISM • Organs feel realistic on palpation and respond appropriately to percussion • Life like quality of abdominal skin allows stretching for gaseous distension and ascites simulation • Realistic ballottement of enlarged kidney VERSATILITY • Abdominal skin is simple to remove, allowing quick and easy changeover of organs • Suitable for both bench top use and hybrid use with a Simulated Patient • Model can be rolled onto its side for examination of	QTY	lot	APPROVED UNIT PRICE	P P	P
Ÿ	ascites and shifting dullness CLEANING • Skin surface is easily washable using soap and water SAFETY • Product is Latex free					



ITEM NO.	DESCRIPTION/SPECIFICATIONS	QTY	UNIT	USTP APPROVED UNIT PRICE	UNIT PRICE	AMOUNT
	Weight of model is within male and female health and safety limits for lifting to chest height	Si .				
	ANATOMY Torso features include an abdomen, pelvis and lower part of the thorax Bony landmarks include ribs, costal margin, xiphisternum, pubic crest and anterior superior iliac spine Ilivers: slightly enlarged, enlarged with smooth edge and enlarged liver with irregular edge Slightly enlarged and markedly enlarged spleens endemondary enlarged spleens e					
	SKILLS GAINED • Familiarity with the abdominal regions and underlying anatomy • Practice in abdominal palpation, auscultation and percussion • Ability to recognize and differentiate a range of abnormal organs and pathologies • Identification of ascites, specifically shifting dullness and fluid thrill • Identification of gaseous distension and bowel obstruction • Ballottement of kidneys • Professional-to-patient communication					
2	An anatomically correct birthing simulator allowing for multiple training scenarios. OVERVIEW: Bluetooth enabled baby for force monitoring during shoulder dystocia drills Free, downloadable Birthing Simulator software allows trainees' actions and interventions to be recorded during drills, with time to deliver baby PDFs of trainee drills can be saved and printed for debriefing Software compatible with Windows, PC, iOS and Android devices Software scenarios can be modified or created from scratch to fit with your own language and procedures REALISM Suitable for use with Simulated/ Standardized Patient Realistic pelvic floor Articulating thighs for McRobert's procedure Stretchable perineum Soft, flexible birthing canal VERSATILITY Additional optional modules available to extend training: o Post-Partum Hemorrhage management o C-section o Cervical Dilatation and Effacement Optional lower legs for all fours position Supports bench top training or hybrid simulation CLEANING Skin washable with soap and water SAFETY Latex free ANATOMY Birth canal and cervix	1	lot	1,890,000.00	P	P



ITEM NO.	DESCRIPTION/SPECIFICATIONS	QTY	UNIT	USTP APPROVED UNIT PRICE	UNIT PRICE	AMOUNT
	Ischial spines and pubic bone Gynaecoid pelvis Articulating thighs Fully articulated baby with clavicles, fontanelles, flexible head, detachable umbilical cord and placenta SKILLS GAINED Training and practice in the following types of birth: Normal Vaginal breech Shoulder dystocia with force feedback* Vaginal assisted (forceps and vacuum devices) Third stage of labor Cord prolapse Urinary catheter placement IM injection Communication and teamwork skills					
3	ADVANCED MALE RECTAL EXAMINATION TRAINER OVERVIEW Simulation of sphincter contraction allows trainees to assess and tone Interchangeable prostates can be quickly and easily inserted, out of sight of the trainee Left lateral positioning Addition of impacted fecal matter allows trainees to recognise and distinguish this common finding High quality illustration pack of 9 external anal conditions Offers a contractible anal sphincter, allowing for anal tone assessment, and a fecal impaction clip in module External ano-rectal illustrations are ideal for incorporation into scenarios and OSCE assessments REALISM Soft, partable buttacks Realistic anus with resting tone and ability to contract VERSATILITY Trainer can also be presented in a 'semi standing' position using the optional Standing Position Stand SAFETY Latex free ANATOMY Buttacks, anus, rectum, prostate and perineum Pathological perineum - with polyp and rectal cancer 4 abnormal prostates: o Benign unilateral enlarged o Benign bilateral enlarged o Unilateral carcinoma o Bilateral carcinoma SKILLS GAINED Digital examination of the anus, rectum and prostate Assessment of anal tone Identification of faecal matter in the rectum Identification of faecal matter in the rectum Identification of sexternal ano-rectal conditions Professional-to-patient communication CONTAINS Base Unit Left lateral stand Normal perineum with anal tone Pathological perineum with anal tone Normal prostate Benign unilateral enlarged prostate Benign unilateral enlarged prostate Benign unilateral enlarged prostate Benign unilateral enlarged prostate Benign bilateral enlarged prostate Benign bilateral carcinoma prostate Benign unilateral carcinoma prostate Benign to bilateral enlarged prostate Benign bilateral carcinoma prostate Benign bilateral enlarged prostate Unilateral carcinoma prostate Benign bilateral enlarged prostate Unilateral carcinoma prostate Benign bilateral enlarged prostate	1	lot	750,000.00	P	P



ITEM NO.	DESCRIPTION/SPECIFICATIONS	QTY	UNIT	USTP APPROVED UNIT PRICE	UNIT PRICE	AMOUNT
4	CHEST DRAIN & NEEDLE DECOMPRESSION TRAINER Simulator to deliver training in both surgical and guide wire assisted thoracostomy and thoracentesis, chest drainage and needle decompression techniques. Chest tube insertion is possible on both types of pad, with the Advanced model's eco-lucent material allowing practice of Seldinger's ultrasound technique. OVERVIEW Approved for use in ATLS (Advanced Trauma Life Support) V10 courses Reservoirs in the rear of the model can be filled with fluid or mock blood to represent pleural effusion REALISM Needle decompression air reservoirs provide realistic releases of air on insertion of needle Anatomically accurate representation of an adult male torso with raised arms Standard Pads have a Pleural Layer which has realistic give and "pop" when puncturing with forceps or finger Combined use of the Advanced Pads and the chest reservoirs allows for the simulation of pleural effusion VERSATILITY Able to perform the Seldinger Technique Trainer can be used in a sitting or supine position CLEANING Clean the product with a damp soft cloth or sponge, using warm water with mild detergent Always drain, clean and dry after use to ensure that the trainer remains in good condition SAFETY This product is latex free Product must be stored dry Trainer & accessories are heavy when packed in carrying case, take care when transporting Standard Chest Drain Pads are not suitable for use with liquids ANATOMY Adult male torso with raised arms Internal landmarks: ribs, lung and diaphragm SKILLS GAINED Needle decompression/ needle thoracostomy of a tension pneumothorax at both the 2nd and 5th intercostal space Ultrasound guided chest tube insertion, also known as the Seldinger Technique, including insertion of the needle into the pleural space under direct vision and ultrasonic recognition of chest structures Open or cut-down chest tube insertion, including recognition of correct position, surgical incision, blunt dissection through the chest wall Use of a chest drain, includin	2	lot	1,220,000.00	P	P
5	ELECTRIC THREE FUNCTION HOSPITAL BED (1 set) MAIN FEATURES: • Detachable ABS head and foot board, durable • One-step punching bed surface, durable and antiscratch • Up-down ABS rails, 2 pcs/side, safe and reliable • Center-control braking system, diameter: 150mm • Long life and low noise • Backrest adjustable: 0-75±5° • Knee section adjustable: 0-45±5°	1	lot	250,000.00	P	P



ITEM NO.	DESCRIPTION/SPECIFICATIONS	QTY	UNIT	USTP APPROVED UNIT PRICE	UNIT PRICE	AMOUNT
	Height adjustable: 200±20mm Two Crank Hospital Bed (1 set) Integrated stamping frame and mattress base are made of steel epoxy, polyester powder coated & baked finish, resistant to chipping and scratching.					
	FUNCTION: • Back rest lifting angle is 0-75° (±5°) • Knee rest lifting angle is 0-45° (±5°) • Inclusion: o Detachable ABS head and foot board o Collapsible Aluminum rails o 5" Castor with brakes o Urine hooks o IV Drip holes o IV pole					
	FEMALE CATHETERIZATION TRAINER The Female Catheterization Trainer allows trainees to learn urinary catheterization techniques, as well as care of a pre-inserted suprapubic catheter via the pre ported bung. The feel of the catheter passing along the urethra into the bladder corresponds closely to real life.					
	OVERVIEW • More robust design means longer lasting models, keeping on-going costs lower • Ability to view catheter path when modules are used outside of the Pelvic Shell • Improved Water System • Softer, more realistic female anatomy • Improved internal anatomy to allow for smoother insertion of catheter into the bladder					
	REALISM • Supple urethra & resistant sphincter providing realistic response • Anatomically accurate bladder • Softer labia to practice parting using aseptic no touch technique • Meatus is less obvious than previous simulator, allowing for truer to life experience when performing female catheterization • Increased realism of anatomy, inclusion of a vaginal vault allows for potential insertion of catheter into the					
6	incorrect location VERSATILITY • Modules are removable and easily Interchangeable • Ability to view the path of the catheter during procedures • Non-drip valve • Reusable double-sleeve catheter packaging is supplied for teaching aseptic technique • Syringe supplied with water-based lubricant to simulate proprietary local anesthetic gel	1	lot	460,000.00	P	P
	CLEANING • Drain all water from the product • Remove all catheters from the trainer • Clean product surface with soft, damp cloth and mild detergent • Allow trainer to dry completely before storing					
	SAFETY Components of the trainer are latex free Foley Catheter supplied is made of silicone coated latex Use supplied Milton Antifungal agent to sterilize water Always deflate the balloon before removing a catheter Only use mock gel that's supplied with the catheterization simulator Use lubricant when inserting the catheter					
	ANATOMY • Can be used with a standardized patient to help improve communication skills					



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	ANATOMY • Soft labia • Subtle meatus • Vaginal vault • Pre-ported suprapubic catheter • Pubic bone									
	SKILLS GAINED Correct handling of female anatomy Aseptic catheterization technique Withdrawal of catheter Urinary catheterization Fluid management Suprapubic catheter management on female anatomy									
_	IV PERIPHERAL INTRAVENOUS (IV) CATHETERIZATION ARM Intravenous Catheterization arm to teach injections, venepuncture techniques, phlebotomies, simulation and training of needle and catheter punctures. It also allows for the simulation of ultrasound-guided needle punctures. Accessible veins include the dorsal, basilica, and cephalic.		1-1	150,000,00						
7	INCLUDED: • Two feeding bags • Sample of blood powder AVAILABLE REPLACEMENT PARTS:	2	lot	150,000.00	P	P				
	Skin (light, medium or dark) Tubing (clear or black) Blood powder									
	MALE CATHETERIZATION TRAINER Allows trainees to learn urinary catheterization techniques specific to the male anatomy.		1.							
	OVERVIEW • More robust design means longer lasting models, keeping on-going costs lower • Ability to view catheter path when modules are used outside of the Pelvic Shell • Improved Water System • Softer, more realistic male anatomy • Improved internal anatomy to allow for smoother insertion of catheter into the bladder									
8	REALISM • Supple urethra & resistant sphincter providing realistic response • Anatomically accurate bladder • Flaccid penis with a removable foreskin for realistic male catheterization • Increased mobility of the penis gives a more accurate representation of inserting the catheter	1	1	1	1	1	lot	460,000.00	P	P
	VERSATILITY • Modules are removable and easily interchangeable • Module comes with removable foreskins • Ability to view the path of the catheter during procedures • Non-drip valve • Reusable double-sleeve catheter packaging is supplied for teaching aseptic technique • Syringe supplied with water-based lubricant to simulate proprietary local anesthetic gel									
	CLEANING • Drain all water from the product • Remove all catheters from the trainer • Clean product surface with soft, damp cloth and mild detergent • Allow trainer to dry completely before storing									



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	SAFETY Components of the trainer are latex free Foley Catheter supplied is made of silicone coated latex Use supplied Milton Antifungal agent to sterilize water Always deflate the balloon before removing a catheter Only use mock gel that's supplied with the catheterization simulator Use lubricant when inserting the catheter ANATOMY Can be used with a standardized patient to help improve communication skills ANATOMY Pubic bone Realistic meatus Flaccid penis Foreskins (removable) SKILLS GAINED Correct handling of male anatomy Aseptic catheterization technique Withdrawal of catheter Urinary catheterization Fluid management					
9	OPHTHOSIM FUNDOSCOPY Simulator Hands-on simulation system for students to learn how to diagnose and treat eye pathologies. Software and accompanying tools empower students to actively diagnose real-world eye conditions. FEATURES: Computer and software driven ophthalmoscopy trainer 200 high-resolution images Instrumented ophthalmoscope detects instrument movement and orientation Eye geometry – replicates magnification of lens in the human eye and different clinical conditions. Training and testing modules Land marking function to highlight specific pathologies Pre-annotated data images Allows importation of own images to image library INCLUSIONS: Ophthalmoscopy simulator base unit Laptop computer with simulator software Eye Piece Instrumented Ophthalmoscope Control Box Protective Hard Case	1	lot	2,200,000.00	P	P
10	PREHOSPITAL INSTRUCTOR DRIVEN PATIENT SIMULATION 1 full body wireless adult mannequin in medium skin tone, 2 preconfigured patients, 4 scenarios, 4 scenario development licenses, lithium-ion battery, charger, fluid pump, Surface Pro Computer, 1 TouchPro wireless patient monitor loaded into a compatible Computer Simulator Features: AIRWAY: • Anatomically realistic upper airway modeled from actual CT scan of real human. • Allows for intubation: orotracheal and nasotracheal, with detection of right main stem intubation • Gastric Distension with esophageal intubation • ET Tube, LMA, Combitube and other airway adjuncts • BVM Ventilation • Emergency Airway Procedures: needle cricothyrotomy, transtracheal jet ventilation, retrograde wire techniques		lot	9,500,000.00	P	P



TEM NO.	DESCRIPTION/SPECIFICATIONS	QTY	UNIT	USTP APPROVED UNIT PRICE	UNIT PRICE	AMOUNT
	and cricothyrotomy. • Must feature the following difficult airway: tongue swell, bronchial occlusion					
	ARTICULATION: • Articulated elbows, and knees (bi-lateral).					
	BREATHING: • Ability to exhale carbon dioxide. • Bilateral or unilateral chest rise and fall • Spontaneous breathing • Bilateral Chest tube insertion (sensored) with output of fluid • Bilateral Needle decompression generates changes in pulmonary mechanics and gas exchange • Esophageal intubation fully supported with gastric distention. • Breathing/Lung sounds must include all the following: Normal, crackles, diminished, wheezing. • Lung sounds can be independently controlled. • Integrated SpO2 probe with simulated patient monitor CIRCULATION:					
	Bilateral carotid, brachial, radial, femoral, popliteal, and dorsalis pedis pulses (14 pulse sites minimum) Decrease of systolic blood pressure beyond certain threshold automatically cause pulse deficit Pulses synchronized with ECG ECG monitoring with real ECG monitor possible Blood pressure can be measured by palpation and auscultation. Hemodynamic monitoring for the following: o Arterial Blood Pressure o Left Ventricular Pressure o Central Venous Pressure o Right Atrial Pressure o Pulmonary Artery Occlusion o Thermodilution Cardiac Output					
	CARDIAC: Cardiac Sounds must include ALL of the following: Normal, S3, S4, S3 and S4, Early Systolic Murmur, Mid Systolic Murmur, Late Systoloic Murmur, Pan Systolic Murmur, Late Diastolic Murmur. 5-lead dynamic ECG Display Allows for defibrillation, pacing and cardioversion using actual defibrillator During live defibrillation energy is automatically detected, quantified and logged.					
	CPR: CPR Analysis AHA 2015 Compliant with CPR Matrix Display Proper CPR reflected in physiologic feedback of patient (i.e. changes in patient monitor display when CPR is performed) Proper CPR results in changes in circulation, cardiac output, central and peripheral blood pressure, and carbon dioxide return.					
	NEUROLOGICAL: Reactive Pupils and blinking eyes Convulsions Pharmacology System: Automatically calculates intravenous and inhaled medications for at least 60 drugs Responses are automatic, dose dependent and follow appropriate time course					
	SECRETIONS: • Eyes, nose and mouth					



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	SOUNDS: Heart, Breath and Bowel sounds Other sounds can be provided via wireless microphone TRAUMA: Bleeding and fluid drainage linked to physiology Two simultaneous bleeding sites 1.5 liter blood tank capacity minimum Limbs can be removed at knees and elbows to support amputation scenarios UROLOGICAL: Interchangeable male and female genitalia Urine output Rate and flow of urine controlled by instructor VASCULAR ACCESS: IV insertion supported in right arm: cephalic, basilic and antebrachial veins IO site on anterior tibia Right jugular IV line for infusions SCENARIOS AND PATIENT PROFILE: At least 2 patient profiles separate from scenarios Scenarios programming should run over or in conjunction with patient profile (i.e. patient affects scenario outcome) All scenarios provided must be evidence based and have the following: o Synopsis o Scenario Programming o Patient History o SBAR Handoff Report o Healthcare Provider Orders o Learning Objectives o Learning Performance Measures o Preparatory Questions o Suggested Equipment and Supplies needed o Facilitator Notes					
11	SIMULATION EQUIPMENT DEFIBRILLATOR INCLUDES: Defibrillator carry bag, AED pads, 3-lead ECG cables, student tablet, simulation software, license (monitor and AED), and first year warranty Includes: 12 lead ECG wire, SPO2 probe, NIBP cuff, IBP connector, temperature sensor and CO2 sample line KEY FEATURES • Full range of typically monitored values common to defibrillators and AEDs (HR, SpO2, RR, ABP, and more) • Simulates electrical therapy (defibrillation, cardioversion, pacing), with realistic responses • Adjustable alarms and other settings • Provides experiential learning skills required to deliver electrical therapy, configure a defibrillator or manage defibrillation of a patient (e.g., responding to alarms, adjusting layout based on patient mode and/or operator preference) • Pads, ECG I, II, III, aVR, aVL, aVf, V1, V2, V3, V4, V5, V6, CO2, ABP, SpO 1	1	lot	1,730,000.00	P	P
12	TUBE FEEDING & TRACHEOSTOMY CARE & SUCTIONING TRAINING MODEL Realistic training with anatomically correct structures. - Oral/Nasal feeding tube injection. - Check tube placement by auscultation with stethoscope. - Practicing with a real liquid food - Easy to maintain; Detachable stomach and trachea. - Positioning with a stand by adjusting the angle. (0°, 21~45°, 90°) - Checking tube placement through transparent window - Training tube feeding, PEG care, tracheostomy care, suction, gastrostomy tube care	1	lot	850,000.00	P	P



NO.	DESCRIPTION/SPECIFICATIONS	QTY	UNIT	APPROVED UNIT PRICE	UNIT PRICE	AMOUNT
13	VIRTUAL ANATOMY DISSECTOR WITH MOTORIZED INTERACTIVE SMARTBOARD With the largest touch interface on the market, the Anatomy Viewer provides an ideal environment for quickly integrating virtual dissection expected in 21st century collaborative learning. Gestures, multiple touch points and easy-to-share tools allows groups of people to collaborate and learn anatomy as a team. FEATURES: 75" Touch Display with Motorized Height and Tilt Adjustment. Intel i7 CPU, Windows 10 and Android. VH Dissector Touch Anatomy Atlas. Interactive high resolution photographs of each one with labeled landmarks provide students with a way to study these details outside of the anatomy lab. Students can identify each landmark and view them from a variety of angles. Anatomy atlas features scan of a real human from the National Library of Medicine Specifications: Screen Size:	2	lot	2,885,000.00	P	P
14	75" RAM: 4GB Storage: 32GB Resolution: 3840 x 2160 Android version: Android 8.0 VIRTUAL ELECTRONIC DISSECTION TABLE 99" 99" Digital Dissection Table for education on a motorized tilt stand – fully annotated human anatomy with the ability to read CT/MRI data and convert it to 3D for better understanding of the human anatomy. • Comprehensive human body atlas: o fully annotated life size male and female human anatomy o coronal o sagittal o transverse planes of view o w/ regional anatomy o virtual dissection o organ animation o sectional anatomy o 3 axis display mode o Endoscope Teaching Mode • Radiological software that can read CT/MRI or DICOM data into 3D o DICOM based virtual cadaver • Endoscope Mode • Histopathology Atlas with the following tools/functions: o Annotation o Pen Tool o Image Tool o Amplification Hardware Specifications: CPU :Intel i9 RAM :16 GB HDD :4 TB SSD : 512 GBGPU: RTX 2060 Screen size: 99 inches Resolution: 3840 x 1080 Display Angle: 0° & 90° Wheels: Heavy Duty Caster Wheels	1	lot	10,000,000.00	P	P

Total Bid Price in Figure:	
Total Bid Price in Words:	
Name and Signature of Bidder:	

All bid proposals must be sealed in envelopes properly labeled and submitted to this University on or before the deadline of submission of bids, **JUNE 03, 2024, 01:30 A.M.** at the Procurement Services, 2nd Level Gymnasium Lobby, University of Science and Technology of Southern Philippines, C.M. Recto Ave., Lapasan Cagayan de Oro City.

The University of Science and Technology of Southern Philippines assumes no responsibility whatsoever to compensate or indemnify bidders for any expenses incurred in the preparation of the bid. The USTsP neither assumes any obligation for whatsoever losses that the bidders may incur in the preparation on their bids nor guarantee that an award will be made.

BAC IV Chairperson