



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



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March 26, 2019

**AMENDMENT #4
FOR
GMHA IFB 009-2019 - Hemodialysis Supplies**

TO: All prospective bidders,

This Amendment is being issued to clarify the following:

- 1) Reference to Bid number GMHA Bid 009-2019, page No. 26 of 27- GMHA Bid Specifications: Item #9.

This is to rescind and replace pg. 26 of 27-GMHA Bid Specifications: Item #9. The attached (corrected) GMHA Bid Specifications form rescinds and replaces the bid specifications form attached to original bid packet and must be submitted with your Bid offer upon Bid Submission.

2) Vendor: Medpharm

In lieu with the upcoming BID on April, kindly confirm if we can use the March 8, 2019 date notarized Bid, as this is what we have notarized the date or it should be dated on April?

GMHA Response: Yes the March 8, 2019 notarized date can be used.

3) Vendor: Medpharm

We would like to bring to your attention that Baxter has acquired Gambro. As a result, we will be serving BAXTER for all Gambro-referenced products (line nos. 1,2,3 and 9) on the upcoming GMHA IFB 009-2019 as well as for any future requisitions.

GMHA Response: Please make sure to follow the guidelines for GMHA IFB 009-2019 General Terms and Conditions: line items #24-Brand Names, line item #25-Descriptive Literature on page 6 of 27, and line item #26-Samples on page 7 of 27.

If any other questions/clarifications please send via telefax addressed to Mrs. Lillian Perez-Posadas, RN, MN.



Dolores F. Pangelinan,
Hospital Supply Management Admin.

Acknowledgment of Receipt: Return acknowledgment to fax number 649-3640

Company

Print Name

Signature Date

Description	Quantity	Unit	Unit Price	Extension
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9. DIALYZER-HI FLUX 1.8 S/AREA
GMHA#- 100655

3120 EA

SPECS:

**** Hemoflow dialyzer, surface area (M2) 1.8 prime to 1.9, Prime Volume 110 to 117 ML, UFR 7.5 Invivo, PS Membrane. High Efficiency Therapy. For use on GAMBRO Phoenix 36 Kidney Machine.**

(minimum 12 months expiration dates required upon delivery)

COMMENTS

QUANTITY PER PACKAGE _____

APPROVED EQUAL

BIDDING ON:

MFG: _____

MAKE: _____

BRAND: _____

PLACE OR ORIGIN: _____

DATE OF DELIVERY: _____

**** Reference Product or Equivalent****

- 1) B. Braun (HI PS 18) (20/cs)----- 7204103
- 2) B. Braun (19H Diacap Pro High Flux)- - - 720DH19
- 3) Gambro-(Revaclear Max) (24/cs) - - - - - 110634

(GUAM) AFTER RECEIPT OF PURCHASE ORDER