                               Załącznik do oferty

 Formularz rzeczowo cenowy

           dla Domu Pomocy Społecznej w Starachowicach

                   na leki i materiały medycznych

**realizowane w okresie 15.02.2016 r. – 31.01.2017 r.**

Oferujemy wykonanie zamówienia na warunkach jak poniżej :

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Lp. | Nazwa leku | Ilość  ( op. ) | Zapłata do wysokości limitu  ( odpłatność DPS ) | Łączna wartość do limitu DPS  3 x 4 | ⃰ Cena ofertowa  leku o odpł. 100 % lub  dopłata świadczeniobiorcy po refundacji NFZ dla leków refundowanych . | Wartość  ofertowa  3 x 6 |
| 1. | 2. | 3. | 4. | 5. | 6. | 7. |
|  | Absenor 0,3g 100 tab. | 24 |  |  |  |  |  |
|  | Absenor 0,5g 100 tab. | 50 |  |  |  |  |  |
|  | Amantix 100mg 100 tab. | 10 |  |  |  |  |  |
|  | Acidium.folici 15 30 tab. | 10 |  |  |  |  |  |
|  | Acurenal 20 30 tab. | 12 |  |  |  |  |  |
|  | Acard 60 tab. | 100 |  |  |  |  |  |
|  | Adipine 5mg 30 tab. | 10 |  |  |  |  |  |
|  | Agapurin SR400 20 tab. | 10 |  |  |  |  |  |
|  | Agen 5 30 tab. | 50 |  |  |  |  |  |
|  | Avedol 25mg 30 tab. | 20 |  |  |  |  |  |
|  | Ampril 10mg 30 tab. | 14 |  |  |  |  |  |
|  | Acenocumarol 4mg 60 tab. | 10 |  |  |  |  |  |
|  | Amizepin 0.2g 50 tab. | 24 |  |  |  |  |  |
|  | Amlopin 10 mg 30 tab. | 50 |  |  |  |  |  |
|  | Amlopin 5 mg 30 tab. | 32 |  |  |  |  |  |
|  | Amlozek5mg 30 tab. | 40 |  |  |  |  |  |
|  | Atrodil N aer.wziew.0,02mg           10ml | 30 |  |  |  |  |  |
|  | Aropilo SR 4mg 30 tab. | 10 |  |  |  |  |  |
|  | Aqua Pro inject 10ml szt. | 200 |  |  |  |  |  |
|  | Aqua Pro inject 5ml szt. | 500 |  |  |  |  |  |
|  | Alantan-Plus maść 30g | 20 |  |  |  |  |  |
|  | Atrowent N aer.wziewny,0,02mg/daw.  10ml | 50 |  |  |  |  |  |
|  | Avedol 6,25 30 tab. | 60 |  |  |  |  |  |
|  | Apo-Amlo 5mg 30tab. | 30 |  |  |  |  |  |
|  | Atrauman AG z maścią 10x20 1 szt. | 30 |  |  |  |  |  |
|  | Avedol 12,5 30 tab. | 20 |  |  |  |  |  |
|  | Amaryl 1 mg 30 tab. | 20 |  |  |  |  |  |
|  | Atoris 20 mg 30 tab. | 15 |  |  |  |  |  |
|  | Amoksiklav 1.0g 14 tab. | 20 |  |  |  |  |  |
|  | Augmentin 1.0g 14 tab. | 20 |  |  |  |  |  |
|  | Aqvitox D płyn 500ml | 20 |  |  |  |  |  |
|  | Acesan 0,075g 60 tab. | 1o |  |  |  |  |  |
|  | Aldan 10mg 30 tab. | 20 |  |  |  |  |  |
|  | Asaris prosz. do inhal. | 25 |  |  |  |  |  |
|  | Accu Chek active 50 szt. | 20 |  |  |  |  |  |
|  | Accu Chek performa 50 szt. | 20 |  |  |  |  |  |
|  | Altaziaja żel | 20 |  |  |  |  |  |
|  | Aspirin Protect 100x 28 tab. | 30 |  |  |  |  |  |
|  | Ascorutical 30 kaps. | 20 |  |  |  |  |  |
|  | Baclofen 0.01 g 50 tab. | 50 |  |  |  |  |  |
|  | Beto 25 ZK 28 tab. | 10 |  |  |  |  |  |
|  | Biofuroksym 0.75 inj 1amp | 300 |  |  |  |  |  |
|  | Biofuroksym 1,5 inj.1amp | 100 |  |  |  |  |  |
|  | Biotropil 1200 1,2g | 5 |  |  |  |  |  |
|  | Beto 50 ZK 30 tab. | 10 |  |  |  |  |  |
|  | Betaserc 24mg 30 tab. | 30 |  |  |  |  |  |
|  | Bufomix Easy Haler  prosz.do inhal. | 20 |  |  |  |  |  |
|  | Bisocard 5 mg 30 tab. | 60 |  |  |  |  |  |
|  | Calcium C 16 tab. | 50 |  |  |  |  |  |
|  | Cardura XL 4mg 30 tab. | 20 |  |  |  |  |  |
|  | Cozaar 50mg 28 tab. | 15 |  |  |  |  |  |
|  | Clecsane 5000 10amp. | 15 |  |  |  |  |  |
|  | Cezarius 250mg 50 tab. | 20 |  |  |  |  |  |
|  | Captopril 12,5mg 30tab. | 15 |  |  |  |  |  |
|  | Cinnarizinum 0.025g 50 tab | 15 |  |  |  |  |  |
|  | Clotrimazoli 1% 20g krem | 20 |  |  |  |  |  |
|  | Cordarone 20mg 30tab. | 10 |  |  |  |  |  |
|  | Candepres 160 +12,5mg  30tab | 12 |  |  |  |  |  |
|  | Co-Valscacor 80mg +12,5mg      30tab. | 20 |  |  |  |  |  |
|  | Cipronex 500 10tab. | 25 |  |  |  |  |  |
|  | Concor Cor 1,25mg 28 tab | 20 |  |  |  |  |  |
|  | Controloc 20 28 tab | 10 |  |  |  |  |  |
|  | Co-Bespres 0,16g+0,0125g     28 tab. | 12 |  |  |  |  |  |
|  | Carvetrend 6,25 mg 30 tab. | 25 |  |  |  |  |  |
|  | Carvetrend 12,5 mg 30 tab. | 30 |  |  |  |  |  |
|  | Cuprenil 250 30 tab. | 48 |  |  |  |  |  |
|  | Cardura 4 30 tab. | 10 |  |  |  |  |  |
|  | Cholamid 500 30 szt. | 10 |  |  |  |  |  |
|  | Dalacin C 300mg x 16 kaps. | 10 |  |  |  |  |  |
|  | Depakine-chrono 300 30 tab. | 120 |  |  |  |  |  |
|  | Depakine-chrono 500 30 tab. | 54 |  |  |  |  |  |
|  | Dilzem 0,09g 30 tab. | 20 |  |  |  |  |  |
|  | Dermowate maść 25 | 40 |  |  |  |  |  |
|  | Diphergan 10mg 20 szt. | 30 |  |  |  |  |  |
|  | Digoxin 0,1mg 30 tab. | 46 |  |  |  |  |  |
|  | Diabrezide 80mg 40tab. | 10 |  |  |  |  |  |
|  | Dicortinne ff zawiesina | 10 |  |  |  |  |  |
|  | Donecept 10mg 30tab. | 20 |  |  |  |  |  |
|  | Ditropan 5mg 30tab. | 24 |  |  |  |  |  |
|  | Diured 5mg 30tab. | 12 |  |  |  |  |  |
|  | Decaldol 0.05g/1ml             5amp.a 1ml | 15 |  |  |  |  |  |
|  | Dexapolcort N aer. 30ml | 10 |  |  |  |  |  |
|  | Diagomat Strip test pask.                            50pasków | 20 |  |  |  |  |  |
|  | Diaprel MR 0,06g 60 tab. | 12 |  |  |  |  |  |
|  | Dilzem retart tabl.0.09g  30 tab | 20 |  |  |  |  |  |
|  | Diosminex 0,5g 60 tab. | 10 |  |  |  |  |  |
|  | Diphergan draż.0.025g, 20tab | 80 |  |  |  |  |  |
|  | Diuresin SR 1,5 30 tab. | 20 |  |  |  |  |  |
|  | Doxar 1mg 30 tab. | 12 |  |  |  |  |  |
|  | Dermatol 5g subst. | 50 |  |  |  |  |  |
|  | Diohespan Max1g 60 tab. | 25 |  |  |  |  |  |
|  | Duomox 1g 20tab. | 50 |  |  |  |  |  |
|  | Effox Long 75 30 kap. | 30 |  |  |  |  |  |
|  | Effortil krople 7,5mg/1ml            15g | 10 |  |  |  |  |  |
|  | Encorton 10mg 20tab | 15 |  |  |  |  |  |
|  | Enarenal 5 mg 60tab | 30 |  |  |  |  |  |
|  | Estazolam 2mg | 50 |  |  |  |  |  |
|  | Etopro 50 28 tab | 10 |  |  |  |  |  |
|  | Elocom 0,1% krem 30g | 8 |  |  |  |  |  |
|  | Egiramlon 10+5mg 30kap. | 10 |  |  |  |  |  |
|  | Espumisan 100kap. | 5 |  |  |  |  |  |
|  | Escitalopram 10mg 30tab. | 24 |  |  |  |  |  |
|  | Eutyrox N 75mg 50 tab | 20 |  |  |  |  |  |
|  | Flegamina syrop 200ml | 10 |  |  |  |  |  |
|  | Finamlox 5mg 30 tab | 20 |  |  |  |  |  |
|  | Finospir 25mg 100 tab | 12 |  |  |  |  |  |
|  | Flucinar 0,025%maść 15g | 50 |  |  |  |  |  |
|  | Furaginum TEVA 30tab. | 40 |  |  |  |  |  |
|  | Furosemid 0,04g 30 tab | 100 |  |  |  |  |  |
|  | Fromilid 500mg 14tab | 10 |  |  |  |  |  |
|  | Fosidal syrop 2mg/ml 150mg | 30 |  |  |  |  |  |
|  | Finlepsin 200 Retard 50szt | 20 |  |  |  |  |  |
|  | Finaster 5mg 30tab. | 20 |  |  |  |  |  |
|  | Fragmin 5000j. 10amp | 40 |  |  |  |  |  |
|  | Flegamina 8mg 20tab. | 10 |  |  |  |  |  |
|  | Formetic 500 30 szt. | 30 |  |  |  |  |  |
|  | Flutixon 200mcg proszek do inh 120szt | 15 |  |  |  |  |  |
|  | Formetic 850 60 szt. | 12 |  |  |  |  |  |
|  | Glibetic 2mg 30 tab | 10 |  |  |  |  |  |
|  | Glibetic 3mg 30 tab. | 12 |  |  |  |  |  |
|  | Glibetic 1mg 30 tab. | 12 |  |  |  |  |  |
|  | Gynalgin 10 tab. | 10 |  |  |  |  |  |
|  | Gastrolit 15 saszet. | 5 |  |  |  |  |  |
|  | Glucophage 100mg 30tab. | 20 |  |  |  |  |  |
|  | Glukoza 5% | 10 |  |  |  |  |  |
|  | Glucophage 850mg 30 tab. | 10 |  |  |  |  |  |
|  | Haloperidol 1 mg 40 tab. | 40 |  |  |  |  |  |
|  | Hydrocortison 0,5%krem 15g | 12 |  |  |  |  |  |
|  | Heparegen 100tab. | 10 |  |  |  |  |  |
|  | Ibuprofen 0,2g 60 tab. | 40 |  |  |  |  |  |
|  | Ibum 200 60 tab.. | 25 |  |  |  |  |  |
|  | Indapen SR 1,5 30 tab. | 44 |  |  |  |  |  |
|  | Hydroxyzinum25mg 30 tab. | 100 |  |  |  |  |  |
|  | Ibum 0,2g 60kaps | 10 |  |  |  |  |  |
|  | Ibuprofen PABI 0,2g 60tab. | 70 |  |  |  |  |  |
|  | IbuprofenHASCO 0,2  60 kaps | 30 |  |  |  |  |  |
|  | Iporel 75mg 30tab. | 12 |  |  |  |  |  |
|  | Iruxol mono maść 20g | 5 |  |  |  |  |  |
|  | IPP20 0.02 28 tab. dojelit | 30 |  |  |  |  |  |
|  | Indix 1,5 30 tab. | 10 |  |  |  |  |  |
|  | Ins. Humalog Mix. 25 3ml              5wkł | 12 |  |  |  |  |  |
|  | Ins. Humulin N Cart. 3ml                                  5wkł | 50 |  |  |  |  |  |
|  | Ins. Humulin R Cart 3ml                                   5wkł | 50 |  |  |  |  |  |
|  | Ins. Insulatard penfil 3ml                        5wkł | 25 |  |  |  |  |  |
|  | Ins. Mixtard 40HM Penfil 3ml                                   5wkł | 24 |  |  |  |  |  |
|  | Ins.Mixtard 30 HM Penfil 3ml                                   5wkł | 10 |  |  |  |  |  |
|  | Humulin M3 ( 100j/1ml 3ml                                   5wkł | 10 |  |  |  |  |  |
|  | Polhumin mix3 zaw.do wstrz.                         100j.m./1 | 10 |  |  |  |  |  |
|  | Kalipoz Prol. 30 tab. | 10 |  |  |  |  |  |
|  | Ketrel 25mg 30tab. | 60 |  |  |  |  |  |
|  | Ketipinor 0,025g 100 tab. | 90 |  |  |  |  |  |
|  | Klozapol 100mg 50 tab | 60 |  |  |  |  |  |
|  | Kwetaplex 25mg 30 tab | 50 |  |  |  |  |  |
|  | Lactulose-MIP 500ml syrop | 20 |  |  |  |  |  |
|  | 4Lacti 20 kaps | 30 |  |  |  |  |  |
|  | Levopront syrop | 10 |  |  |  |  |  |
|  | Letrox 50 50 tab. | 20 |  |  |  |  |  |
|  | Lokren 0.02g 28 tab | 10 |  |  |  |  |  |
|  | Loperamid 2mg 30 tab | 20 |  |  |  |  |  |
|  | Lorista 0,05g 28 tab. | 38 |  |  |  |  |  |
|  | Lerivon 0,01g 30 tab. | 20 |  |  |  |  |  |
|  | Loperamid 2mg 30 tab | 15 |  |  |  |  |  |
|  | Lozap Zentiwa 0,05g 30 tab | 12 |  |  |  |  |  |
|  | Naclofen Top 10 mg żel                                120g | 15 |  |  |  |  |  |
|  | Nasen 0,01g 20 tab. | 20 |  |  |  |  |  |
|  | Neurotop 300 50 tab. | 15 |  |  |  |  |  |
|  | Nifuroksazyd 100mg 24 tab | 25 |  |  |  |  |  |
|  | Nifuroxazyd 200mg 12 tab | 15 |  |  |  |  |  |
|  | Nolpaza 2mg 28 tab. | 10 |  |  |  |  |  |
|  | Milgamma inj. 10 amp. | 5 |  |  |  |  |  |
|  | Mucosolvan płyn do inh. | 5 |  |  |  |  |  |
|  | Metafen Zatoki 200mg+30mg            10szt | 10 |  |  |  |  |  |
|  | Metformax 500mg 60szt | 40 |  |  |  |  |  |
|  | Madopar HBS 125 100 kap. | 24 |  |  |  |  |  |
|  | Metformax 850mg 30 tab. | 10 |  |  |  |  |  |
|  | Metocard 50 30 tab. | 56 |  |  |  |  |  |
|  | Metoclopramid 10 50 tab. | 3 |  |  |  |  |  |
|  | Miflonide 400mg x 60 kaps. Inh | 15 |  |  |  |  |  |
|  | Mucosolvan syrop 100ml | 10 |  |  |  |  |  |
|  | Nowate 0,05% maść | 15 |  |  |  |  |  |
|  | Nimesil gran. 0,1g 30 sasz. | 6 |  |  |  |  |  |
|  | No-Spa Forte 80 20 tab. | 25 |  |  |  |  |  |
|  | No-spa 20tab. | 20 |  |  |  |  |  |
|  | Nebivolek 5mg 28tab. | 25 |  |  |  |  |  |
|  | Nystatyna zawiesina                                    1flakon | 10 |  |  |  |  |  |
|  | Nolicin .0.4g 20 tab. | 10 |  |  |  |  |  |
|  | Octenisept płyn 250ml | 4 |  |  |  |  |  |
|  | Omnic Ocas 0,4 30 tab. | 12 |  |  |  |  |  |
|  | Onbrez Breezholer 0,3  proszek do ihobicji | 12 |  |  |  |  |  |
|  | Ostenil 70 0,07g 4 tab. | 20 |  |  |  |  |  |
|  | Oxycardil 60mg 30tab. | 24 |  |  |  |  |  |
|  | Oxodil prosz. D/inh. 60kaps. | 12 |  |  |  |  |  |
|  | Perazin 100 mg 30 tab. | 100 |  |  |  |  |  |
|  | Perazin 25 mg 50 tab. | 500 |  |  |  |  |  |
|  | Piramil 5 mg 30 tab. | 80 |  |  |  |  |  |
|  | Polocard 75mg 60 tab. | 10 |  |  |  |  |  |
|  | Polsart 80 mg 30tab | 24 |  |  |  |  |  |
|  | Paracetamol 500 20tab | 30 |  |  |  |  |  |
|  | Paracetamol Hasco 125mg czopki 10 szt. | 10 |  |  |  |  |  |
|  | Polsen 10mg 10 tab. | 10 |  |  |  |  |  |
|  | Polprazol 20 28 tab. | 60 |  |  |  |  |  |
|  | Polpril 2,5mg 28 tab | 12 |  |  |  |  |  |
|  | Polpril 10mg 28 tab | 12 |  |  |  |  |  |
|  | Poltram 0,1g/2ml x 5 amp | 30 |  |  |  |  |  |
|  | Polocard 75mg do jelit  60 tabl. | 50 |  |  |  |  |  |
|  | Pridinol 5mg 50 tab | 24 |  |  |  |  |  |
|  | Propranolol 0.01g 50 tab | 10 |  |  |  |  |  |
|  | Polifilin prol.0,4 60 tab. | 10 |  |  |  |  |  |
|  | Prestarium 5mg 30 tab. | 24 |  |  |  |  |  |
|  | Ramve 10 mg 28 kaps. | 27 |  |  |  |  |  |
|  | Ranigast 0.15 g 60 tab. | 10 |  |  |  |  |  |
|  | Ristidic 6mg 28 kaps | 16 |  |  |  |  |  |
|  | Ristidic6mg 56 kaps | 10 |  |  |  |  |  |
|  | Ranlosin0,4 30tab | 25 |  |  |  |  |  |
|  | Ranloc 20mg 30tab | 24 |  |  |  |  |  |
|  | Relanium 5 mg 20tab | 10 |  |  |  |  |  |
|  | Risperon 2 mg 20 tab. | 30 |  |  |  |  |  |
|  | Scorbolamid 20 draż | 10 |  |  |  |  |  |
|  | Setaloft 50mg 30 tab. | 15 |  |  |  |  |  |
|  | Simvasterol 20 mg 28 szt. | 20 |  |  |  |  |  |
|  | Siofor 1000mg 30 tab. | 20 |  |  |  |  |  |
|  | Spiriwa 0,018/daw. 30 kaps | 22 |  |  |  |  |  |
|  | Seebric Breezholer 44 pr do inh 30 kaps. | 12 |  |  |  |  |  |
|  | Sortis 20 30szt | 12 |  |  |  |  |  |
|  | Sulfacetamidum 10% 0,5ml gttx12mm | 5 |  |  |  |  |  |
|  | Scorbolamid 20 tab. | 10 |  |  |  |  |  |
|  | Sebidin tab do ssania 20 tab. | 5 |  |  |  |  |  |
|  | Siofor 500mg 30 tab. | 10 |  |  |  |  |  |
|  | SymapamidSR 1,5mg 30 tab | 25 |  |  |  |  |  |
|  | Spironol 0.025g 20 tab | 50 |  |  |  |  |  |
|  | Spironol 0,1g 20 tab | 9 |  |  |  |  |  |
|  | Sulpiryd 50 mg 24 kaps | 15 |  |  |  |  |  |
|  | Theospirex retard 300mg  50 tab. | 30 |  |  |  |  |  |
|  | Theospirex Retard 150  50 tab. | 10 |  |  |  |  |  |
|  | Theovent 300mg 50 tab. | 80 |  |  |  |  |  |
|  | Tulip 20mg 30 tab. | 12 |  |  |  |  |  |
|  | Tritace 10mg 28 tab. | 35 |  |  |  |  |  |
|  | Tritace 5mg 28 tab. | 30 |  |  |  |  |  |
|  | Teovent100 30tab. | 10 |  |  |  |  |  |
|  | Tolura80 30tab. | 12 |  |  |  |  |  |
|  | Toramide 10 30tab. | 25 |  |  |  |  |  |
|  | Torsemed10 30tab | 15 |  |  |  |  |  |
|  | Tegretol CR200 50tab. | 30 |  |  |  |  |  |
|  | Telmisartan 40 30tab. | 15 |  |  |  |  |  |
|  | Trifas 10 30tab. | 15 |  |  |  |  |  |
|  | Tramal150 30tab. | 10 |  |  |  |  |  |
|  | Trusopt2% gutt.opht. 5 ml | 10 |  |  |  |  |  |
|  | Uprox 0,4 30tab | 25 |  |  |  |  |  |
|  | Uniben 1,5mg aer 30ml | 10 |  |  |  |  |  |
|  | Vivacor12,5mg 30tab | 10 |  |  |  |  |  |
|  | Ventolin aerozol. | 40 |  |  |  |  |  |
|  | Vicebrol 5mg 50tab. | 10 |  |  |  |  |  |
|  | Vinpoton 5 mg 50 tab. | 10 |  |  |  |  |  |
|  | Zinacef inj.0,75 10 fiol. | 10 |  |  |  |  |  |
|  | Zinnat 500 10 tab. | 5 |  |  |  |  |  |
|  | Ziaja oliwka do masażu                           500ml | 8 |  |  |  |  |  |
|  | Voltaren Acti 12,5 mg | 10 |  |  |  |  |  |
|  | Vitamimin E 400mg kaps                                  30szt | 5 |  |  |  |  |  |
|  | Wazelina kosmetyczna biała  z wit. E | 5 |  |  |  |  |  |
|  | Zolafren 10mg 30 tab. | 20 |  |  |  |  |  |
|  | Zyrtec 0,01g 30 szt. | 10 |  |  |  |  |  |
|  | Opaska dziana 4m x 10cm | 1000 |  |  |  |  |  |
|  | Gaza op. nie jał. 1m | 200 |  |  |  |  |  |
|  | Gaza op. nie jał. 0,5m | 100 |  |  |  |  |  |
|  | Gaza op. jał. 1m | 500 |  |  |  |  |  |
|  | Gaza op. jał. 0,5m | 200 |  |  |  |  |  |
|  | Kompresy 10 x 10 nie jał.  a 100 szt. | 20 |  |  |  |  |  |
|  | Przyrząd do przet. krwi | 40 |  |  |  |  |  |
|  | Strzykawka 5 ml | 150 |  |  |  |  |  |
|  | Strzykawka 10 ml | 150 |  |  |  |  |  |
|  | NaCl 0,9% 500 ml | 120 |  |  |  |  |  |
|  | Opatrunki Atrauman AG  z maścią 10x20 | 30 |  |  |  |  |  |
|  | Kompresy 10x10 jałowe | 200 |  |  |  |  |  |
|  | PWE 500ml | 50 |  |  |  |  |  |
|  | Worki na mocz 2 l | 50 |  |  |  |  |  |
|  | Wata bawełniana 100g | 20 |  |  |  |  |  |
|  | **RAZEM** |  |  |  |  |  |  |

⃰ - **cena ofertowa** – cena leku 100 % pokrywana przez mieszkańca lub dopłata świadczeniobiorcy po refundacji NFZ dla leków refundowanych .

**1.Wartość oferty do wysokości limitu ( poz. 5 ) :**…………………..……………….

**Zgłoszona w Konkursie do oceny wartość ofertowa ( poz.7 ) oferty wynosi :**

………………………………………………………….. **zł** …………. **gr brutto**

(słownie złotych : …………………………………………………………. )

**Oświadczam**, że jestem upoważniony do składania oświadczeń woli w imieniu Wykonawcy, którego reprezentuję, w tym do złożenia oferty w powyższym konkursie .

                                                                                                  ………………………………………..  czytelny podpis lub pieczęć i podpis