

# TERMS OF REFERENCE

**I. PROJECT TITLE:**

2017 Vaccination Program for all DOT  
Officials and Employees (Permanent/Job Order Personnel)

**II. IMPLEMENTATION DATE:**

September to December 2017

**III. NUMBER OF PAX:**

800 (Head Office and Regional Offices)

**IV. INCLUSIONS:**

- Quadrivalent Influenza Vaccine
- Hepatitis B Vaccine
- Tetanus Toxoid Vaccine

**V. SPECIFICATIONS:**

LOT NO.	VACCINE	DESCRIPTION	ACTIVE SUBSTANCES	DOSAGE	QUANTITY	UNIT PRICE	TOTAL
1	<b>Quadrivalent Influenza Vaccine</b>	Inactivated Types A and B Subvirion  0.5ml Prefilled Syringe  2017 WHO Recommended Strains	A/Michigan/45/2015 (H1N1) pdm09-like virus  A/Hong Kong/4801/2014 (H3N2)-like virus  B/Brisbane/60/2008-like virus  B/Phuket/3073/2013-like virus	0.5ml	800	Php 1,200.00	<b>PhP 960,000.00</b>
2	<b>Hepatitis B Vaccine</b>	Recombinant Hepatitis B Vaccine 20mcg/ml Suspension for Injection (IM) - Single Dose  Preservative Free  1ml Vial	Purified HBsAg 20mcg	1ml (3 Doses)  <i>1<sup>st</sup> Dose: at elected date</i>  <i>2<sup>nd</sup> Dose: 1 month after the first dose</i>  <i>3<sup>rd</sup> Dose: 6 months after the first dose</i>	800	Php 1,450.00	<b>PhP 3,480,000.00</b>

3	<b>Tetanus Toxoid Vaccine</b>	Tetanus Toxoid Adsorbed 40IU/0.5ml Suspension for IM Injection	Tetanus Toxoid Adsorbed 40IU	0.5ml	800	Php 395.00	<b>Php 316,000.00</b>
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**VI. REQUIREMENTS:**

1. Delivery of vaccines to DOT Head Office and Regional Offices.
2. Cold Chain Storage during delivery must be maintained.
3. Vaccinator/s for the Head Office and Regional Offices will be provided by the supplier and should be under the supervision of a physician.
4. Administration of vaccines in the Head Office and Regional Offices shall be c/o the supplier.
5. Supplier must be FDA accredited.
6. All vaccines should have Certificates of Product Registration from the FDA.
7. Supplier must provide individual immunization record card for each employee.
8. All materials (Ref thermometer, etc.), medical supplies (alcohol, cotton balls, syringe, etc.) and other necessary paraphernalia for the Vaccination program shall be provided by the supplier.
9. Supplier is responsible for the disposal of all used materials and articles, especially the needles and syringes.
10. Time frame for the Head Office shall be five (5) days for the mass conduct of the Vaccination Program and additional three (3) scheduled onsite visits for those employees who won't be able to attend the mass conduct of the said program. All vaccines shall only be exclusively availed during the 5-day mass conduct of the Vaccination Program and additional three (3) scheduled onsite visits.
11. The date for the conduct of the Vaccination Program in the Regional Offices shall be set, as agreed by the provider and the Regional Offices. There shall be an additional one (1) scheduled onsite visit for those employees who won't be able to attend the mass conduct of the said

program. All vaccines shall only be exclusively availed during the scheduled date of the mass conduct of the Vaccination Program and additional one (1) scheduled onsite visit, as agreed by the provider and the Regional Offices.

12. A series of meetings between the Medical Officer and the supplier must be done before, during and after the Vaccination Program, and midway in writing the Vaccination Report.
13. Vaccination Report should be submitted in hard and soft copy to the DOT Medical Clinic before the release of the Certificate of Completion.
14. Provider should submit a Vaccination Report based on the requirements of the DOT Medical Clinic.

***NOTE: Payment will be based on the actual number of vaccines availed by the employees during the Vaccination Program.***

**VII. PAYMENT PROCEDURE:**

Government Procedure

**IV. TOTAL BUDGET ESTIMATE:**

Php 4,756,000.00

**VIII. CONTACT PERSONS:**

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