



SECRETARÍA DE SALUD

ALMACEN NACIONAL DE MEDICAMENTOS E INSUMOS EN SALUD

DESPACHOS HOSPITALES Y REGIONES DEPARTAMENTALES DICIEMBRE 2017

N°	DESTINO	CANTIDAD ENTREGADA EN LEMPIRA
1	HOSPITAL ANIBAL MURILLO	L. 475,125.42
2	HOSPITAL ATLANTIDA	L. 169,648.23
3	HOSPITAL DE EL PROGRESO	L. 685,896.72
4	HOSPITAL DE OCCIDENTE	L. 64,294.56
5	HOSPITAL DE ROATAN	L. 648,270.48
6	HOSPITAL DE TELA	L. 318,502.61
7	HOSPITAL DEL SUR	L. 345,327.91
8	HOSPITAL ENRIQUE AGUILAR CERRATO	L. 130,594.20
9	HOSPITAL ESCUELA	L. 123,278.96
10	HOSPITAL GABRIELA ALVARADO	L. 504,986.04
11	HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	L. 167,043.94
12	HOSPITAL LEONARDO MARTINEZ	L. 240,742.80
13	HOSPITAL MANUEL DE JESUS SUBIRANA	L. 213,366.36
14	HOSPITAL MARIO CATARINO RIVAS	L. 1320,281.83
15	HOSPITAL PSIQUIATRICO MARIO MENDOZA	L. 596,801.78
16	HOSPITAL PUERTO CORTES	L. 311,361.12
17	HOSPITAL PUERTO LEMPIRA	L. 222,965.99
18	HOSPITAL ROBERTO SUAZO CORDOBA La Paz	L. 335,659.31
19	HOSPITAL SALVADOR PAREDES	L. 73,075.03
20	HOSPITAL SAN FELIPE	L. 2540,121.08
21	HOSPITAL SAN FRANCISCO	L. 792,054.54
22	HOSPITAL SAN ISIDRO TOCOA	L. 149,891.30
23	HOSPITAL SAN MARCOS DE OCOTEPEQUE	L. 210,685.19
24	HOSPITAL SANTA BARBARA	L. 138,991.00
25	HOSPITAL SANTA ROSITA	L. 39,310.37
26	HOSPITAL SANTA TERESA	L. 530,017.63
27	INCP TORAX	L. 361,532.91
28	REGION DEPARTAMENTAL ATLANTIDA	L. 410,531.67
29	REGION DEPARTAMENTAL CHOLUTECA	L. 320,950.08
30	REGION DEPARTAMENTAL COLON	L. 1092,550.99
31	REGION DEPARTAMENTAL COMAYAGUA	L. 311,910.94
32	REGION DEPARTAMENTAL COPAN	L. 322,291.18
33	REGION DEPARTAMENTAL CORTES	L. 786,104.13
34	REGION DEPARTAMENTAL EL PARAISO	L. 214,683.00
35	REGION DEPARTAMENTAL FRANCISCO MORAZAN	L. 347,065.23
36	REGION DEPARTAMENTAL LA PAZ	L. 72,835.94
37	REGION DEPARTAMENTAL OCOTEPEQUE	L. 392,767.23
38	REGION DEPARTAMENTAL OLANCHO	L. 476,130.67
39	REGION DEPARTAMENTAL VALLE	L. 285,147.28
40	REGION DEPARTAMENTAL YORO	L. 898,424.17
41	REGION METROPOLITANA SAN PEDRO SULA	L. 943,972.05
42	REGION METROPOLITANA TEGUCIGALPA	L. 265,441.38
TOTAL		L. 18850,633.25

Elaborado por :Brayan Hallan Ayestas Alvarado

DESPACHOS HOSPITALES DICIEMBRE 2017

N°	DESTINO	CANTIDAD ENTREGADA EN LEMPIRAS
1	HOSPITAL ANIBAL MURILLO	L. 475,125.42
2	HOSPITAL ATLANTIDA	L. 169,648.23
3	HOSPITAL DE EL PROGRESO	L. 685,896.72
4	HOSPITAL DE OCCIDENTE	L. 64,294.56
5	HOSPITAL DE ROATAN	L. 648,270.48
6	HOSPITAL DE TELA	L. 318,502.61
7	HOSPITAL DEL SUR	L. 345,327.91
8	HOSPITAL ENRIQUE AGUILAR CERRATO	L. 130,594.20
9	HOSPITAL ESCUELA	L. 123,278.96
10	HOSPITAL GABRIELA ALVARADO	L. 504,986.04
11	HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	L. 167,043.94
12	HOSPITAL LEONARDO MARTINEZ	L. 240,742.80
13	HOSPITAL MANUEL DE JESUS SUBIRANA	L. 213,366.36
14	HOSPITAL MARIO CATARINO RIVAS	L. 1320,281.83
15	HOSPITAL PSIQUIATRICO MARIO MENDOZA	L. 596,801.78
16	HOSPITAL PUERTO CORTES	L. 311,361.12
17	HOSPITAL PUERTO LEMPIRA	L. 222,965.99
18	HOSPITAL ROBERTO SUAZO CORDOBA La Paz	L. 335,659.31
19	HOSPITAL SALVADOR PAREDES	L. 73,075.03
20	HOSPITAL SAN FELIPE	L. 2540,121.08
21	HOSPITAL SAN FRANCISCO	L. 792,054.54
22	HOSPITAL SAN ISIDRO TOCOA	L. 149,891.30
23	HOSPITAL SAN MARCOS DE OCOTEPEQUE	L. 210,685.19
24	HOSPITAL SANTA BARBARA	L. 138,991.00
25	HOSPITAL SANTA ROSITA	L. 39,310.37
26	HOSPITAL SANTA TERESA	L. 530,017.63
27	INCP TORAX	L. 361,532.91
TOTAL		L. 11709,827.31

DESPACHOS REGIONES DEPARTAMENTALES DICIEMBRE 2017

N°	DESTINO	CANTIDAD ENTREGADA EN LEMPIRAS
1	REGION DEPARTAMENTAL ATLANTIDA	L. 410,531.67
2	REGION DEPARTAMENTAL CHOLUTECA	L. 320,950.08
3	REGION DEPARTAMENTAL COLON	L. 1092,550.99
4	REGION DEPARTAMENTAL COMAYAGUA	L. 311,910.94
5	REGION DEPARTAMENTAL COPAN	L. 322,291.18
6	REGION DEPARTAMENTAL CORTES	L. 786,104.13
7	REGION DEPARTAMENTAL EL PARAISO	L. 214,683.00
8	REGION DEPARTAMENTAL FRANCISCO MORAZAN	L. 347,065.23
9	REGION DEPARTAMENTAL LA PAZ	L. 72,835.94
10	REGION DEPARTAMENTAL OCOTEPEQUE	L. 392,767.23
11	REGION DEPARTAMENTAL OLANCHO	L. 476,130.67
12	REGION DEPARTAMENTAL VALLE	L. 285,147.28
13	REGION DEPARTAMENTAL YORO	L. 898,424.17
14	REGION METROPOLITANA SAN PEDRO SULA	L. 943,972.05
15	REGION METROPOLITANA TEGUCIGALPA	L. 265,441.38
TOTAL		L. 7140,805.94

DESPACHOS DEL 04 AL 08 DE DICIEMBRE DE 2017

N°	DESTINO	FECHA	CANTIDAD ENTREGADA EN LEMPIRAS
1	HOSPITAL ENRIQUE AGUILAR CERRATO	04-nov-17	L. 21,608.32
2	HOSPITAL SANTA ROSITA	04-nov-17	L. 1,017.72
3	HOSPITAL LEONARDO MARTINEZ	04-nov-17	L. 240,742.80
4	HOSPITAL MANUEL DE JESUS SUBIRANA	05-nov-17	L. 124,044.96
5	HOSPITAL MARIO CATARINO RIVAS	05-nov-17	L. 663,363.82
6	REGION DEPARTAMENTAL COMAYAGUA	06-nov-17	L. 30,871.88
7	REGION DEPARTAMENTAL YORO	06-nov-17	L. 854,206.63
9	HOSPITAL SAN FELIPE	07-nov-17	L. 650,037.98
11	HOSPITAL ATLANTIDA	07-nov-17	L. 47,840.00
12	HOSPITAL DE EL PROGRESO	08-nov-17	L. 500,593.72
TOTAL			L. 3134,327.83

HOSPITAL ENRIQUE AGUILAR CERRATO

Request Number : 764-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	3	L. 22.83	L. 68.49
	Total Price			L. 68.49

Request Number : 3061-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	C01CA07 DOBUTAMINA (clorhidrato) 12.5mg/mL VIAL (115-05-03)	50	L. 30.00	L. 1,500.00
	Total Price			L. 1,500.00

Request Number : 2049-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	A10BA02 METFORMINA 850 mg TB (155-00-32)	64980	L. 0.31	L. 20,039.83
	Total Price			L. 20,039.83

TOTAL	L. 21,608.32
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HOSPITAL SANTA ROSITA

Request Number : 2067-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA ROSITA	A10BA02 METFORMINA 850 mg TB (155-00-32)	3300	L. 0.31	L. 1,017.72
	Total Price			L. 1,017.72

TOTAL	L. 1,017.72
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HOSPITAL LEONARDO MARTINEZ

Request Number : 2095-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL LEONARDO MARTINEZ	N03AB0203 FENITOINA 100mg (120-00-05)	1200	L. 1.50	L. 1,800.00
	Total Price			L. 1,800.00

Request Number : 3028-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL LEONARDO MARTINEZ	B03AA0701 HIERRO (sulfato) 300mg (equivalente a 60mg de hierro elemental) SULFATO FERROSO 300 mg.	50000	L. 0.12	L. 6,000.00
	B05XA05 MAGNESIO (sulfato heptahidrato) 10% (100mg/mL)(120-00-10)	401	L. 5.75	L. 2,305.75
	B05XA05 MAGNESIO (sulfato heptahidrato) 10% (100mg/mL)(120-00-10)	105	L. 6.41	L. 673.05

D08AC02 CLORHEXIDINA (gluconato) 20% P/V	188	L. 265.00	L. 49,820.00
Total Price			L. 58,798.80

Request Number : 704-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL LEONARDO MARTINEZ	B05BB0206 LACTATO DE SODIO + ELECTROLITOS SOL HARTMAN 1000ml (165-01-22)	10008	L. 18.00	L. 180,144.00
	Total Price			L. 180,144.00

TOTAL L. 240,742.80

TOTAL DIA L. 263,368.84

HOSPITAL MANUEL DE JESUS SUBIRANA

Request Number : 2048-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MANUEL DE JESUS SUBIRANA	A10BA02 METFORMINA 850 mg TB (155-00-32)	40020	L. 0.31	L. 12,342.17
	Total Price			L. 12,342.17

Request Number : 781-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MANUEL DE JESUS SUBIRANA	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	400	L. 22.83	L. 9,132.44
	Total Price			L. 9,132.44

Request Number : 2087-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MANUEL DE JESUS SUBIRANA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	53000	L. 0.19	L. 10,070.00
	N03AB0203 FENITOINA 100mg (120-00-05)	4500	L. 1.50	L. 6,750.00
	Total Price			L. 16,820.00

Request Number : 652-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MANUEL DE JESUS SUBIRANA	B05BB0206 LACTATO DE SODIO + ELECTROLITOS SOL HARTMAN 1000ml (165-01-22)	2268	L. 18.00	L. 40,824.00
	B05XA0302 SODIO (cloruro) 0.9% en 250 mL	600	L. 13.90	L. 8,340.00
	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	3305	L. 11.07	L. 36,586.35
	Total Price			L. 85,750.35

TOTAL L. 124,044.96

HOSPITAL MARIO CATARINO RIVAS

Request Number : 2047-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	A10BA02 METFORMINA 850 mg TB (155-00-32)	135000	L. 0.31	L. 41,634.00
	Total Price			L. 41,634.00

Request Number : 790-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	3861	L. 59.80	L. 230,893.58
	Total Price			L. 230,893.60

Request Number : 769-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	1200	L. 22.83	L. 27,397.32
	Total Price			L. 27,397.32

Request Number : 2085-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	60000	L. 0.19	L. 11,400.00
	N03AB0203 FENITOINA 100mg (120-00-05)	20000	L. 1.50	L. 30,000.00
	Total Price			L. 41,400.00

Request Number : 741-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	V03AF0301 FOLINATO DE CALCIO 50mg (Leucovorina cálcica) Vial (175-00-22)	230	L. 724.23	L. 166,572.89
	Total Price			L. 166,572.90

Request Number : 2038-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	L02BG06 EXEMESTANO 25 mg	1800	L. 86.37	L. 155,466.00
	Total Price			L. 155,466.00

TOTAL L. 663,363.82

TOTAL DIA L. 787,408.78

REGION DEPARTAMENTAL COMAYAGUA

Request Number : 1811-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
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REGION DEPARTAMENTAL COMAYAGUA	A03BA0301 HIOSCINA (butilbromuro) 20mg/mL	400	L.	5.66	L.	2,264.00
	A12AA0300 CALCIO (gluconato) 10% (175-02-02)	15	L.	6.84	L.	102.60
	J01CF0100 DICLOXACILINA (sódica) 125 mg/5mL	576	L.	21.78	L.	12,545.28
	Total Price				L.	14,911.88

Request Number : 747-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	38000	L. 0.42	L. 15,960.00
	Total Price			L. 15,960.00

TOTAL L. 30,871.88

REGION DEPARTAMENTAL YORO

Request Number : 3021-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	90000	L. 0.19	L. 17,100.00
	N03AB0203 FENITOINA 100mg (120-00-05)	40000	L. 1.50	L. 60,000.00
	Total Price			L. 77,100.00

Request Number : 708-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	G02BB0000 CONDON MASCULINO (150-00-52)	266400	L. 0.51	L. 136,609.92
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	19440	L. 6.25	L. 121,538.88
	G03AC0601 MEDROXIPROGESTERONA (acetato) 150mg/mL (160-00-31)	20000	L. 18.24	L. 364,710.00
	MQJ-K-009 Jeringa Desechable de 1 ml BLACK 22GX1 / 0.7X25mm	20000	L. 1.82	L. 36,400.00
	Total Price			L. 659,258.80

Request Number : 754-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	10000	L. 0.42	L. 4,200.00
	Total Price			L. 4,200.00

Request Number : 2014-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	1200	L. 2.59	L. 3,108.00
	Total Price			L. 3,108.00

Request Number : 1975-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	C02AB01 ALFAMETILDOPA 500mg (115-02-01)	200	L. 2.58	L. 516.00

REGION DEPARTAMENTAL YORO	Total Price			L. 516.00
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Request Number : 1898-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	R06AX1300 LORATADINA 1 mg/mL(170-00-08)	6912	L. 10.50	L. 72,576.00
	Total Price			L. 72,576.00

Request Number : 1803-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	C09CA04 IRBESARTAN 300mg (115-02-54)	20000	L. 1.10	L. 22,034.00
	Total Price			L. 22,034.00

Request Number : 2077-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	A10BA02 METFORMINA 850 mg TB (155-00-32)	49980	L. 0.31	L. 15,413.83
	Total Price			L. 15,413.83

TOTAL	L. 854,206.63
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TOTAL DIA	L. 885,078.51
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HOSPITAL SAN FELIPE

Request Number : 2035-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	L01BC02 5-FLUOROURACILO (5-FU) 50 mg/ml	500	L. 212.75	L. 106,375.00
	Total Price			L. 106,375.00

Request Number : 1857-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	L02BG06 EXEMESTANO 25 mg	3000	L. 86.37	L. 259,110.02
	Total Price			L. 259,110.00

Request Number : 2033-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	3500	L. 2.59	L. 9,065.00
	Total Price			L. 9,065.00

Request Number : 2075-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	L01CB01 ETOPOSIDO (VP-16) 20 mg/mL (175-00-34)	306	L. 98.00	L. 29,988.00
	Total Price			L. 29,988.00

Request Number : 742-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	V03AF0301 FOLINATO DE CALCIO 50mg (Leucovorina cálcica) Vial (175-00-22)	230	L. 724.23	L. 166,572.89
	Total Price			L. 166,572.90

Request Number : 3007-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	N03AB0203 FENITOINA 100mg (120-00-05)	10000	L. 1.50	L. 15,000.00
	Total Price			L. 15,000.00

Request Number : 780-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	2800	L. 22.83	L. 63,927.08
	Total Price			L. 63,927.08

TOTAL L. 650,037.98

HOSPITAL ATLANTIDA

Request Number : 721-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ATLANTIDA	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	800	L. 59.80	L. 47,840.00
	Total Price			L. 47,840.00

TOTAL L. 47,840.00

TOTAL DIA L. 697,877.98

HOSPITAL DE EL PROGRESO

Request Number : 724-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	1400	L. 59.80	L. 83,720.00
	Total Price			L. 83,720.00

Request Number : 2007-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	900	L. 2.59	L. 2,331.00
	Total Price			L. 2,331.00

Request Number : 3003-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	150000	L. 0.19	L. 28,500.00
	N03AB0203 FENITOINA 100mg (120-00-05)	3000	L. 1.50	L. 4,500.00
	Total Price			L. 33,000.00

Request Number : 3029-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	H03AA01 LEVOTIROXINA (sódica) 100 mcg TAB (150-06-02)	50000	L. 0.57	L. 28,560.00
	Total Price			L. 28,560.00

Request Number : 2073-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	A10BA02 METFORMINA 850 mg TB (155-00-32)	144110	L. 0.31	L. 44,443.53
	Total Price			L. 44,443.53

Request Number : 3030-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	A03BA0300 HIOSCINA (butilbromuro) 10mg	3000	L. 2.32	L. 6,970.50
	A03BA0301 HIOSCINA (butilbromuro) 20mg/mL	600	L. 5.66	L. 3,396.00
	A11AA0301 MULTIVITAMINAS ADULTOS (165-00-01)	3000	L. 0.34	L. 1,020.00
	B03BB0101 ACIDO FOLICO 5 mg	24000	L. 0.11	L. 2,640.00
	C01DA08 ISOSORBIDE (dinitrato) 5 mg (115-00-00)	100	L. 4.99	L. 499.00
	N04BA02 LEVODOPA 250mg + carbidopa 25 mg (120-02-01)	1440	L. 7.25	L. 10,440.00
	P01AB02 TINIDAZOL 500mg (110-00-52)	500	L. 1.11	L. 554.55
	Total Price			L. 25,520.05

Request Number : 763-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	A10AC01 INSULINA ISOFANICA HUMANA NPH 100 UI/ml (155-00-01)	2400	L. 89.12	L. 213,880.08
	Total Price			L. 213,880.10

Request Number : 699-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	B05XA0301 SODIO (cloruro) 0.9% en 1000 mL	1206	L. 17.50	L. 21,105.00
	Total Price			L. 21,105.00

Request Number : 705-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	MQC-T28-00 Catéter torácico con trocar 28fr	12	L. 129.21	L. 1,550.52
	MQS-J-3/0 SEDA 3/0 AG. CURVA REDONDA 26 MM	72	L. 12.00	L. 864.00
	MQS-R01-00 SEDA 1 AG. Recta cortante	72	L. 12.00	L. 864.00
	Total Price			L. 3,278.52

Request Number : 706-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	MQC-T32-00 Catéter torácico con trocar 32fr	12	L. 129.21	L. 1,550.52
	Total Price			L. 1,550.52

Request Number : 687-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE EL PROGRESO	B05BA0304 DEXTROSA EN AGUA 5% BOLSA 500ml (165-01-08)	120	L. 13.90	L. 1,668.00
	B05BB0205 DEXTROSA + CLORURO DE SODIO 5%+0.9% 500ml (165-01-20)	1260	L. 15.70	L. 19,782.00
	B05BB0206 LACTATO DE SODIO + ELECTROLITOS SOL HARTMAN 1000ml (165-01-22)	1170	L. 18.00	L. 21,060.00
	B05XA0302 SODIO (cloruro) 0.9% en 250 mL	50	L. 13.90	L. 695.00
	Total Price			L. 43,205.00

TOTAL	L.	500,593.72
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TOTAL DIA	L.	500,593.72
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TOTAL SEMANA	L.	3134,327.83
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DESPACHOS DEL 11 AL 15 DE DICIEMBRE DE 2017

N°	DESTINO	FECHA	CANTIDAD ENTREGADA EN LEMPIRAS
1	HOSPITAL DE ROATAN	11-dic-17	L. 57,148.85
2	REGION DEPARTAMENTAL ATLANTIDA	11-dic-17	L. 44,038.98
5	HOSPITAL ANIBAL MURILLO	12-dic-17	L. 113,471.90
6	REGION DEPARTAMENTAL COPAN	12-dic-17	L. 322,291.18
7	HOSPITAL ROBERTO SUAZO CORDOBA La Paz	13-dic-17	L. 57,090.53
8	REGION DEPARTAMENTAL VALLE	13-dic-17	L. 42,249.38
9	REGION DEPARTAMENTAL OCOTEPEQUE	14-dic-17	L. 392,767.23
10	HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	15-dic-17	L. 128,192.46
11	HOSPITAL DE OCCIDENTE	15-dic-17	L. 64,294.56
TOTAL			L. 1221,545.07

HOSPITAL DE ROATAN

Request Number : 2042-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	A12AA0300 CALCIO (gluconato) 10% (175-02-02)	100	L. 6.84	L. 684.00
	B02BA0102 VITAMINA K1 (Fitomenadiona) 10mg/1mL AM (130-01-05)	220	L. 4.48	L. 985.60
	J01CE0101 PENICILINA G CRISTALINA 10,000.000 UI	200	L. 62.00	L. 12,400.00
	J01CE09 PENICILINA G PROCAINICA 4,000.000 UI(110-01-25)	100	L. 10.77	L. 1,077.00
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	500	L. 6.43	L. 3,213.00
	J01GB0601 AMIKACINA (sulfato) 250mg/mL	200	L. 13.92	L. 2,784.00
	M01AE17 DESKETOPROFENO (trometanol) 25mg/mL (100-00-06)	800	L. 14.09	L. 11,270.00
	N07CA0001 DIMENHIDRINATO 50mg/ml	100	L. 3.76	L. 376.00
	Total Price			L. 32,789.60

Request Number : 2056-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	A10BA02 METFORMINA 850 mg TB (155-00-32)	45,000	L. 0.31	L. 13,878.00
	Total Price			L. 13,878.00

Request Number : 738-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	H01BB02 OXITOCINA 10 UI (150-04-50)	100	L. 9.00	L. 900.00
	Total Price			L. 900.00

Request Number : 737-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	N02AB02 MEPPERIDINA (clorhidrato) 50 mg/mL	100	L. 95.20	L. 9,520.00
	N05AD0100 HALOPERIDOL 5 mg/mL Amp (120-04-04)	10	L. 6.13	L. 61.25
	Total Price			L. 9,581.25

TOTAL	L.	57,148.85
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REGION DEPARTAMENTAL ATLANTIDA

Request Number : 1994-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	396-01-84 BIBERONES	18	L. 38.50	L. 693.00
	MI0-MED-004 MAMADERAS	18	L. 6.50	L. 117.00
	Total Price			L. 810.00

Request Number : 1993-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	A11-180-57 LECHE NAN CONFORT 24X400G XP	360	L. 120.08	L. 43,228.98
	Total Price			L. 43,228.98

TOTAL L. 44,038.98

TOTAL DIA L. 101,187.83

HOSPITAL ANIBAL MURILLO

Request Number : 2082-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ANIBAL MURILLO	C09CA04 IRBESARTAN 300mg (115-02-54)	100,000	L. 1.10	L. 110,169.99
	R03AC0201 SALBUTAMOL 2 mg/5ml FC(130-00-02)	480	L. 6.88	L. 3,301.87
	Total Price			L. 113,471.90

TOTAL L. 113,471.90

REGION DEPARTAMENTAL COPAN

Request Number : 2052-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COPAN	A10BA02 METFORMINA 850 mg TB (155-00-32)	64,200	L. 0.31	L. 19,799.28
	Total Price			L. 19,799.28

Request Number : 1732-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COPAN	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	133,000	L. 0.34	L. 45,220.00
	Total Price			L. 45,220.00

Request Number : 748-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COPAN	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	61,000	L. 0.42	L. 25,620.00
	Total Price			L. 25,620.00

Request Number : 744-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COPAN	N06AA02 IMIPRAMINA (clorhidrato) 25 mg TB (120-04-05)	21,000	L. 0.86	L. 17,971.80
	Total Price			L. 17,971.80

Request Number : 2081-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COPAN	J04AB0200 RIFAMPICINA 100mg/5ml (110-08-05)	20	L. 64.92	L. 1,298.40
	Total Price			L. 1,298.40

Request Number : 1999-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COPAN	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	70,000	L. 0.34	L. 23,800.00
	B03AA0702 HIERRO (sulfato) 125mg/ml (equivalente a 25mg de hierro elemental)SULFATO FERROSO 125MG/ML -30ML FC (125-00-56)	3,500	L. 11.35	L. 39,725.00
	C03AA03 HIDROCLOROTIAZIDA 25mg (115-03-04)	52,000	L. 0.45	L. 23,426.00
	J01CF0101 DICLOXACILINA (sódica) 500 mg	26,000	L. 2.35	L. 61,100.00
	J01FA1001 AZITROMICINA (anhidra o dihidrato) 500mg TB(110-01-91)	10,700	L. 2.97	L. 31,746.90
	J05AB0103 ACICLOVIR 400mg (110-09-02)	4,700	L. 1.63	L. 7,661.00
	R06AX1301 LORATADINA 10mg (170-00-07)	150,500	L. 0.17	L. 24,922.80
	Total Price			L. 212,381.70

TOTAL	L.	322,291.18
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TOTAL DIA	L.	435,763.08
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HOSPITAL ROBERTO SUAZO CORDOBA La Paz

Request Number : 2043-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	A10BA02 METFORMINA 850 mg TB (155-00-32)	2,010	L. 0.31	L. 619.88
	Total Price			L. 619.88

Request Number : 2039-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	B05BA0305 DEXTROSA EN AGUA 50% 50ml (165-01-14)	150	L. 18.75	L. 2,812.50
	B05XA01 POTASIO (cloruro) 20 mEq/10 mL	750	L. 5.08	L. 3,810.00
	C01CA04 DOPAMINA (clorhidrato) 40mg/mL (115-05-01)	80	L. 13.16	L. 1,053.18
	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	500	L. 2.59	L. 1,295.00
	R03AC0200 SALBUTAMOL 100MCG/DISPARO (130-00-58)	300	L. 28.52	L. 8,556.57

V03AB15 NALOXONA (clorhidrato) 0.4 mg/mL	20	L.	112.52	L.	2,250.40
Total Price				L.	19,777.65

Request Number : 739-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	N01AX10 PROPOFOL+E.D.T.A. 1% (equivalente a 10mg/mL).(105-00-08)	450	L. 81.54	L. 36,693.00
	Total Price			L. 36,693.00

TOTAL	L.	57,090.53
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REGION DEPARTAMENTAL VALLE

Request Number : 3032-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL VALLE	P01BA01 CLOROQUINA (base) 150mg (110-06-00)	500	L. 0.31	L. 154.00
	P01BA0300 PRIMAQUINA (fosfato) 5 mg (110-06-01)	500	L. 0.21	L. 106.25
	P01BA0301 PRIMAQUINA (fosfato) 15 mg (110-06-02)	500	L. 0.24	L. 118.05
	Total Price			L. 378.30

Request Number : 2065-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL VALLE	A10BA02 METFORMINA 850 mg TB (155-00-32)	20,010	L. 0.31	L. 6,171.08
	Total Price			L. 6,171.08

Request Number : 761-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL VALLE	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	85,000	L. 0.42	L. 35,700.00
	Total Price			L. 35,700.00

TOTAL	L.	42,249.38
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TOTAL DIA	L.	99,339.91
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REGION DEPARTAMENTAL OCOTEPEQUE

Request Number : 2063-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OCOTEPEQUE	A10BA02 METFORMINA 850 mg TB (155-00-32)	49,980	L. 0.31	L. 15,413.83
	Total Price			L. 15,413.83

Request Number : 693-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OCOTEPEQUE	G02BA02 T de COBRE, (T Cu 380 A)(Dispositivo Intrauterino) (150-00-53)	200	L. 5.75	L. 1,150.80
	G02BB0000 CONDON MASCULINO (150-00-52)	136,800	L. 0.51	L. 70,151.04
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	10,800	L. 6.35	L. 68,581.08
	G03AC0601 MEDROXIPROGESTERONA (acetato) 150mg/mL (160-00-31)	11,000	L. 18.24	L. 200,590.50
	MQJ-K-009 Jeringa Desechable de 1 ml BLACK 22GX1 / 0.7X25mm	11,000	L. 1.82	L. 20,020.00
	Total Price		L.	360,493.40

Request Number : 756-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OCOTEPEQUE	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	10,000	L. 0.42	L. 4,200.00
	Total Price		L.	4,200.00

Request Number : 1978-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OCOTEPEQUE	C02AB01 ALFAMETILDOPA 500mg (115-02-01)	1,000	L. 2.58	L. 2,580.00
	Total Price		L.	2,580.00

Request Number : 1901-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OCOTEPEQUE	R06AX1300 LORATADINA 1 mg/mL(170-00-08)	960	L. 10.50	L. 10,080.00
	Total Price		L.	10,080.00

TOTAL L. 392,767.23

TOTAL DIA L. 392,767.23**HOSPITAL JUAN MANUEL GALVEZ LEMPIRA**

Request Number : 673-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	1,728	L. 11.07	L. 19,128.96
	Total Price		L.	19,128.96

Request Number : 2006-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
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HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	3,000	L.	2.59	L.	7,770.00
	Total Price				L.	7,770.00

Request Number : 1907-ANT-OH-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	M01AE17 DESKETOPROFENO (trometanol) 25mg/mL (100-00-06)	6,000	L.	14.09	L.	84,525.00
	R06AX1300 LORATADINA 1 mg/mL(170-00-08)	1,597	L.	10.50	L.	16,768.50
	Total Price				L.	101,293.50

TOTAL	L.	128,192.46
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HOSPITAL DE OCCIDENTE

Request Number : 677-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL DE OCCIDENTE	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	5,808	L.	11.07	L.	64,294.56
	Total Price				L.	64,294.56

TOTAL	L.	64,294.56
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TOTAL DIA	L.	192,487.02
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TOTAL SEMANA	L.	1221,545.07
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DESPACHOS DEL 18 AL 22 DE DICIEMBRE DE 2017

N°	DESTINO	FECHA	CANTIDAD ENTREGADA EN LEMPIRAS
1	HOSPITAL ESCUELA	19-dic-17	L. 118,340.74
2	HOSPITAL MARIO CATARINO RIVAS	19-dic-17	L. 584,457.36
3	REGION DEPARTAMENTAL OLANCHO	19-dic-17	L. 186,893.27
4	HOSPITAL SAN FELIPE	19-dic-17	L. 1766,723.10
5	REGION DEPARTAMENTAL EL PARAISO	19-dic-17	L. 214,683.00
6	HOSPITAL DE ROATAN	19-dic-17	L. 18,282.92
7	HOSPITAL DEL SUR	19-dic-17	L. 167,094.51
8	REGION METROPOLITANA SAN PEDRO SULA	20-dic-17	L. 24,186.83
11	HOSPITAL SANTA TERESA	20-dic-17	L. 180,146.14
12	REGION DEPARTAMENTAL VALLE	20-dic-17	L. 242,897.90
13	REGION DEPARTAMENTAL CHOLUTECA	20-dic-17	L. 320,950.08
14	HOSPITAL GABRIELA ALVARADO	20-dic-17	L. 504,986.04
15	INCP TORAX	20-dic-17	L. 127,317.63
16	HOSPITAL ANIBAL MURILLO	21-dic-17	L. 337,873.52
17	HOSPITAL SAN FRANCISCO	21-dic-17	L. 792,054.54
18	HOSPITAL ROBERTO SUAZO CORDOBA La Paz	21-dic-17	L. 176,283.11
19	HOSPITAL SALVADOR PAREDES	22-dic-17	L. 73,075.03
20	HOSPITAL ATLANTIDA	22-dic-17	L. 12,168.90
21	HOSPITAL ENRIQUE AGUILAR CERRATO	22-dic-17	L. 108,985.88
22	HOSPITAL MANUEL DE JESUS SUBIRANA	22-dic-17	L. 89,321.40
23	HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	22-dic-17	L. 38,851.48
24	HOSPITAL SANTA BARBARA	22-dic-17	L. 33,834.00
TOTAL			L. 6119,407.38

HOSPITAL ESCUELA

Request Number : 4010-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ESCUELA	L01XX09 MILTEFOSINA 10mg	560	L. 23.53	L. 13,175.40
	L01XX10 MILTEFOSINA 50mg	420	L. 42.35	L. 17,786.79
	P01CA0201 BENZNIDAZOL 100 mg	3000	L. 11.25	L. 33,757.20
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	300	L. 34.87	L. 10,460.34
	P01CC01 NIFURTIMOX 120 MG	6000	L. 2.87	L. 17,220.00
	Total Price			L. 92,399.73

Request Number : 3098-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ESCUELA	J02AA0100 ANFOTERICINA B (desoxicolato so´dico o complejo liposomal) 50 mg inyect:IV (110-05-00)	70	L. 369.70	L. 25,878.80
	Total Price			L. 25,878.80

Request Number : 3062-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ESCUELA	P01BA01 CLOROQUINA (base) 150mg (110-06-00)	100	L. 0.31	L. 30.80
	P01BA0300 PRIMAQUINA (fosfato) 5 mg (110-06-01)	70	L. 0.21	L. 14.88
	P01BA0301 PRIMAQUINA (fosfato) 15 mg (110-06-02)	70	L. 0.24	L. 16.53
	Total Price			L. 62.21

TOTAL L. 118,340.74

HOSPITAL MARIO CATARINO RIVAS

Request Number : 4008-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	B01AB01 HEPARINA (sódica) 5,000UI/mL (130-01-00)	250	L. 50.06	L. 12,515.00
	B03BB0101 ACIDO FOLICO 5 mg	25000	L. 0.11	L. 2,750.00
	C02DB0201 HIDRALAZINA (clorhidrato) 50 mg(115-02-06)	2000	L. 13.50	L. 27,000.00
	P01BA02 HIDROXICLOROQUINA (base) 310mg (170-01-02)	2220	L. 5.65	L. 12,543.00
	P02CA0301 ALBENDAZOL 200 mg/5mL (110-02-07)	112	L. 10.82	L. 1,211.84
	Total Price			L. 56,019.84

Request Number : 723-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	1930	L. 11.07	L. 21,365.10
	V07AB0001 AGUA DESTILADA 500 ml.(165-04-01)	2016	L. 11.47	L. 23,123.52
	Total Price			L. 44,488.62

Request Number : 714-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	B05BA0300 DEXTROSA EN AGUA 10% 250ml (165-01-11)	1332	L. 19.00	L. 25,308.00
	Total Price			L. 25,308.00

Request Number : 3040-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	12000	L. 2.19	L. 26,280.00
	Total Price			L. 26,280.00

Request Number : 3072-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	A03FA0100 METOCLOPRAMIDA 5mg/ml solución inyectable (145-01-01)	100	L. 4.10	L. 410.00
	A06AD11 LACTULOSA 10 g/15 mL (145-03-02)	400	L. 105.00	L. 42,000.00
	B03AA0701 HIERRO (sulfato) 300mg (equivalente a 60mg de hierro elemental) SULFATO FERROSO 300 mg.	1000	L. 0.12	L. 120.00
	C01AA0502 DIGOXINA 0.25 mg/mL AM (115-04-02)	150	L. 27.09	L. 4,063.50
	D08AC02 CLORHEXIDINA (gluconato) 20% P/V	72	L. 265.00	L. 19,080.00
	H02AB0402 METILPREDNISOLONA (succinato sódico) 1 g	50	L. 1,048.00	L. 52,400.00
	H02AB0701 PREDNISONA 50mg TAB	2000	L. 1.60	L. 3,192.20
	J01AA02 DOXICICLINA (clorhidrato o hclato) 100mg CAP (110-01-75)	100	L. 0.70	L. 70.00
	J01CF04 OXACILINA (sódica) 1g (110-01-27)	1480	L. 9.45	L. 13,980.08
	J01GB0601 AMIKACINA (sulfato) 250mg/mL	1300	L. 13.92	L. 18,096.00
	L01AA0100 CICLOFOSFAMIDA 50 mg. (175-00-09)	100	L. 16.71	L. 1,670.70
	L01AA0100 CICLOFOSFAMIDA 50 mg. (175-00-09)	600	L. 17.62	L. 10,573.62
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	42000	L. 0.11	L. 4,561.20
	Total Price			L. 170,217.30

Request Number : 821-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	N05AH0201 CLOZAPINA 100 mg TB(120-04-17)	2500	L. 12.50	L. 31,250.00
	Total Price			L. 31,250.00

Request Number : 790-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	3861	L. 59.80	L. 230,893.58
	Total Price			L. 230,893.60

TOTAL L. 584,457.36

REGION DEPARTAMENTAL OLANCHO

Request Number : 2078-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OLANCHO	A10BA02 METFORMINA 850 mg TB (155-00-32)	69990	L. 0.31	L. 21,584.92
	Total Price			L. 21,584.92

Request Number : 814-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OLANCHO	N05BA06 LORAZEPAM 2mg	2000	L. 0.34	L. 680.00
	Total Price			L. 680.00

Request Number : 813-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OLANCHO	A10AC01 INSULINA ISOFANICA HUMANA NPH 100 UI/ml (155-00-01)	500	L. 89.12	L. 44,558.35
	Total Price			L. 44,558.35

Request Number : 3020-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OLANCHO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	109000	L. 0.19	L. 20,710.00
	N03AB0203 FENITOINA 100mg (120-00-05)	50000	L. 1.50	L. 75,000.00
	Total Price			L. 95,710.00

Request Number : 753-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OLANCHO	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	58000	L. 0.42	L. 24,360.00
	Total Price			L. 24,360.00

TOTAL L. 186,893.27

HOSPITAL SAN FELIPE

Request Number : 3078-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	B05BA0305 DEXTROSA EN AGUA 50% 50ml (165-01-14)	500	L. 18.75	L. 9,375.00
	Total Price			L. 9,375.00

Request Number : 3088-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	L01XA01 CISPLATINO 50mg (175-00-52)	750	L. 368.00	L. 276,000.00
	Total Price			L. 276,000.00

Request Number : 3083-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
	A02BA0202 RANITIDINA 150 mg TB (145-00-01)	50000	L. 0.28	L. 14,040.00
	A04AA01 ONDANSETRON 2mg/ml solución inyectable ampolla (145-01-02)	3498	L. 14.85	L. 51,938.30
	A06AD11 LACTULOSA 10 g/15 mL (145-03-02)	300	L. 105.00	L. 31,500.00
	B01AB01 HEPARINA (sódica) 5,000UI/mL (130-01-00)	150	L. 50.06	L. 7,509.00
	B03AA0701 HIERRO (sulfato) 300mg (equivalente a 60mg de hierro elemental) SULFATO FERROSO 300 mg.	50000	L. 0.12	L. 6,000.00
	C03CA0100 FUROSEMIDA 10mg/ml (115-03-02)	3000	L. 1.77	L. 5,310.00

HOSPITAL SAN FELIPE	C05BX01 DOBESILATO DE CALCIO 500mg	100000	L.	1.00	L.	100,000.00
	G01AF01 METRONIDAZOL 0.75%	624	L.	19.75	L.	12,324.00
	H02AB0201 DEXAMETASONA (fosfato) 4mg/mL	4000	L.	5.70	L.	22,800.00
	J01CA01 AMPICILINA (anhidra o sódica) 1g	650	L.	5.50	L.	3,575.00
	J01CR05 PIPERACILINA (sódica) 4g + TAZOBACTAM (sódico) 500mg (110-01-43)	1200	L.	50.86	L.	61,032.00
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	2000	L.	6.43	L.	12,852.00
	J01GB0601 AMIKACINA (sulfato) 250mg/mL	1000	L.	13.92	L.	13,920.00
	J01MA0201 CIPROFLOXACINA (clorhidrato) 500 mg TAB (110-01-41)	6000	L.	1.04	L.	6,240.00
	L02BA01 TAMOXIFENO (citrato) 20 mg	8500	L.	7.44	L.	63,240.00
	L02BG06 EXEMESTANO 25 mg	1200	L.	86.37	L.	103,644.00
	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	4000	L.	2.59	L.	10,360.00
	N04BA02 LEVODOPA 250mg + carbidopa 25 mg (120-02-01)	6000	L.	7.25	L.	43,500.00
	P01AB0101 METRONIDAZOL 500 mg (110-00-02)	300	L.	9.28	L.	2,784.00
	R03BB0101 IPRATROPIO (bromuro) 250 mcg/mL FC (130-00-09)	100	L.	21.66	L.	2,166.00
	Total Price				L.	574,734.30

Request Number : 3051-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	5000	L. 2.19	L. 10,950.00
	Total Price			L. 10,950.00

Request Number : 818-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	A10AC01 INSULINA ISOFANICA HUMANA NPH 100 UI/ml (155-00-01)	5996	L. 89.12	L. 534,343.74
	H01BB02 OXITOCINA 10 UI (150-04-50)	3000	L. 9.00	L. 27,000.00
	L03AA02 FILGRASTIM (factor estimulador de colonias de granulocitos) 300 mcg/ml (30 millones UI)(175-00-41)	446	L. 506.22	L. 225,773.94
	S01EE01 LATANOPROST 0.005%	221	L. 148.51	L. 32,821.15
	Total Price			L. 819,938.80

Request Number : 817-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	N02AA05 OXICODONA (clorhidrato) 20mg	1000	L. 74.50	L. 74,500.00
	N05BA01 DIAZEPAM 5mg/mL AM (120-00-01)	100	L. 12.25	L. 1,225.00
	Total Price			L. 75,725.00

TOTAL L. 1766,723.10

REGION DEPARTAMENTAL EL PARAISO

Request Number : 3025-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL EL PARAISO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	100000	L. 0.19	L. 19,000.00
	Total Price			L. 19,000.00

Request Number : 702-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL EL PARAISO	G02BB0000 CONDON MASCULINO (150-00-52)	302400	L. 0.51	L. 155,070.71
	G03AC08 ETONORGESTREL 68 mg	216	L. 188.02	L. 40,612.32
	Total Price			L. 195,683.00

TOTAL	L. 214,683.00
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HOSPITAL DE ROATAN

Request Number : 795-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	300	L. 59.80	L. 17,940.45
	Total Price			L. 17,940.45

Request Number : 785-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	15	L. 22.83	L. 342.47
	Total Price			L. 342.47

TOTAL	L. 18,282.92
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HOSPITAL DEL SUR

Request Number : 736-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	H01BB02 OXITOCINA 10 UI (150-04-50)	1800	L. 9.00	L. 16,200.00
	Total Price			L. 16,200.00

Request Number : 3049-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	12000	L. 2.19	L. 26,280.00
	Total Price			L. 26,280.00

Request Number : 2041-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	B01AB01 HEPARINA (sódica) 5,000UI/mL (130-01-00)	60	L. 50.06	L. 3,003.60
	C07AB0700 BISOPROLOL (fumarato o hemifumarato) 2.5mg	18000	L. 0.75	L. 13,500.00
	M04AC01 COLCHICINA 0.5 mg	400	L. 0.87	L. 346.16
	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	600	L. 2.59	L. 1,554.00
	N03AB0201 FENITOINA (sódica) 50 mg/mL (120-00-04)	600	L. 15.75	L. 9,450.00
	P02CA03 400 ALBENDAZOL 400 MG (110-02-08)	1000	L. 8.22	L. 8,220.00
	Total Price			L. 36,073.76

Request Number : 767-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	500	L. 22.83	L. 11,415.55
	Total Price			L. 11,415.55

Request Number : 3004-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	10000	L. 0.19	L. 1,900.00
	N03AB0203 FENITOINA 100mg (120-00-05)	11000	L. 1.50	L. 16,500.00
	Total Price			L. 18,400.00

Request Number : 794-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	800	L. 59.80	L. 47,841.20
	Total Price			L. 47,841.20

Request Number : 698-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	B05BA0303 DEXTROSA EN AGUA 5% en 250 ml	400	L. 13.31	L. 5,324.00
	B05XA0302 SODIO (cloruro) 0.9% en 250 mL	400	L. 13.90	L. 5,560.00
	Total Price			L. 10,884.00

TOTAL L. 167,094.51

TOTAL DIA L. 3056,474.90

REGION METROPOLITANA SAN PEDRO SULA

Request Number : 3016-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	88000	L. 0.19	L. 16,720.00
	Total Price			L. 16,720.00

Request Number : 3068-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	A11-180-57 LECHE NAN CONFORT 24X400G XP	60	L. 120.08	L. 7,204.83
	Total Price			L. 7,204.83

Request Number : 3069-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	396-01-84 BIBERONES	4	L. 38.50	L. 154.00
	MIO-MED-004 MAMADERAS	4	L. 6.50	L. 26.00
	Total Price			L. 180.00

Request Number : 3067-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	J05AF0100 ZIDOVUDINA 10mg/ml 110-11-03	1	L. 47.21	L. 47.21
	J05AG0100 NEVIRAPINA 10mg/ml FCO(110-11-12)	1	L. 34.79	L. 34.79
	Total Price			L. 82.00

TOTAL L. 24,186.83

HOSPITAL SANTA TERESA

Request Number : 3044-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	31000	L. 2.19	L. 67,890.00
	Total Price			L. 67,890.00

Request Number : 1751-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	85000	L. 0.34	L. 28,900.00
	Total Price			L. 28,900.00

Request Number : 2090-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	46000	L. 0.19	L. 8,740.00
	N03AB0203 FENITOINA 100mg (120-00-05)	6000	L. 1.50	L. 9,000.00
	Total Price			L. 17,740.00

Request Number : 804-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	12	L. 70.12	L. 841.39
	Total Price			L. 841.39

Request Number : 783-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	500	L. 22.83	L. 11,415.55
	Total Price			L. 11,415.55

Request Number : 800-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	200	L. 59.80	L. 11,960.30
	Total Price			L. 11,960.30

Request Number : 3064-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	R03DA05 AMINOFILINA 250mg (130-00-00)	100	L. 11.19	L. 1,118.60
	Total Price			L. 1,118.60

Request Number : 716-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	MQA-018-00 Aguja hipodérmica nº 18 x 1 1/2	3000	L. 0.29	L. 870.00
	MQS-R01-00 SEDA 1 AG. Recta cortante	360	L. 12.00	L. 4,320.00
	Total Price			L. 5,190.00

Request Number : 2044-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	A10BA02 METFORMINA 850 mg TB (155-00-32)	75000	L. 0.31	L. 23,130.00
	Total Price			L. 23,130.00

Request Number : 800-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	200	L. 59.80	L. 11,960.30
	Total Price			L. 11,960.30

TOTAL L. 180,146.14

REGION DEPARTAMENTAL VALLE

Request Number : 713-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL VALLE	G02BB0000 CONDON MASCULINO (150-00-52)	273600	L. 0.51	L. 140,302.08
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	7920	L. 6.25	L. 49,515.84
	Total Price			L. 189,817.90

Request Number : 1756-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL VALLE	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	65000	L. 0.34	L. 22,100.00
	Total Price			L. 22,100.00

Request Number : 2084-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL VALLE	N02BE0101 ACETAMINOFEN 120mg/5mL (100-00-00)	3000	L. 8.30	L. 24,900.00
	Total Price			L. 24,900.00

Request Number : 3017-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL VALLE	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	32000	L. 0.19	L. 6,080.00
	Total Price			L. 6,080.00

TOTAL	L. 242,897.90
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REGION DEPARTAMENTAL CHOLUTECA

Request Number : 751-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CHOLUTECA	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	100000	L. 0.42	L. 42,000.00
	Total Price			L. 42,000.00

Request Number : 3024-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CHOLUTECA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	33000	L. 0.19	L. 6,270.00
	Total Price			L. 6,270.00

Request Number : 2080-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CHOLUTECA	A10BA02 METFORMINA 850 mg TB (155-00-32)	50010	L. 0.31	L. 15,423.08
	Total Price			L. 15,423.08

Request Number : 717-ANT-ORD-BI-17| -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CHOLUTECA	A07CA00 SALES DE REHIDRATAION ORAL (145-04-00)	20000	L. 2.39	L. 47,800.00
	Total Price			L. 47,800.00

Request Number : 3077-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CHOLUTECA	B03AA0701 HIERRO (sulfato) 300mg (equivalente a 60mg de hierro elemental) SULFATO FERROSO 300 mg.	50000	L. 0.12	L. 6,000.00
	B03BB0101 ACIDO FOLICO 5 mg	50000	L. 0.11	L. 5,500.00
	C07AA05 PROPRANOLOL 40 mg (115-01-02)	50000	L. 0.14	L. 6,900.00
	C07AB0701 BISOPROLOL (fumarato o hemifumarato) 10mg	45000	L. 1.27	L. 57,150.00
	C09AA0201 ENALAPRIL (maleato) 20mg (115-02-11)	30000	L. 0.19	L. 5,727.00
	J01CA0400 AMOXICILINA (trihidrato) 250 mg/ 5mL(110-01-34)	5000	L. 15.00	L. 75,000.00
	J01CE08 PENICILINA G BENZATÍNICA 1,200.000 UI(110-01-26)	3000	L. 4.40	L. 13,200.00
	J01MA0201 CIPROFLOXACINA (clorhidrato) 500 mg TAB (110-01-41)	28000	L. 1.04	L. 29,120.00
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	100000	L. 0.11	L. 10,860.00
	Total Price			L. 209,457.00

TOTAL	L. 320,950.08
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HOSPITAL GABRIELA ALVARADO

Request Number : 812-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	38	L. 70.12	L. 2,664.40
	Total Price			L. 2,664.40

Request Number : 3050-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	25000	L. 2.19	L. 54,750.00
	Total Price			L. 54,750.00

Request Number : 683-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	5904	L. 11.07	L. 65,357.28
	Total Price			L. 65,357.28

Request Number : 811-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	20000	L. 0.42	L. 8,400.00
	N03AE01 CLONAZEPAM 2 mg TB (120-00-12)	6000	L. 0.39	L. 2,340.00
	N05AD0100 HALOPERIDOL 5 mg/mL Amp (120-04-04)	30	L. 6.13	L. 183.76
	Total Price			L. 10,923.76

Request Number : 715-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	B05BB0201 DEXTROSA + CLORURO DE SODIO 5%+0.3% 500ml (165-01-16)	510	L. 15.34	L. 7,823.40
	B05BB0205 DEXTROSA + CLORURO DE SODIO 5%+0.9% 500ml (165-01-20)	1500	L. 15.70	L. 23,550.00
	B05BB0206 LACTATO DE SODIO + ELECTROLITOS SOL HARTMAN 1000ml (165-01-22)	2016	L. 18.00	L. 36,288.00
	B05XA0301 SODIO (cloruro) 0.9% en 1000 mL	3006	L. 17.50	L. 52,605.00
	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	2346	L. 11.07	L. 25,970.22
	Total Price			L. 146,236.60

Request Number : 3005-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	100000	L. 0.19	L. 19,000.00
	N03AB0203 FENITOINA 100mg (120-00-05)	41000	L. 1.50	L. 61,500.00
	Total Price			L. 80,500.00

Request Number : 2071-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	A10BA02 METFORMINA 850 mg TB (155-00-32)	54000	L. 0.31	L. 16,653.60
	Total Price			L. 16,653.60

Request Number : 3074-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL GABRIELA ALVARADO	A02BC0101 OMEPRAZOL 40 MG/ML .2ML AM(145-00-05)	1000	L. 11.50	L. 11,500.40
	B03AA0702 HIERRO (sulfato) 125mg/ml (equivalente a 25mg de hierro elemental)SULFATO FERROSO 125MG/ML -30ML FC (125-00-56)	500	L. 11.35	L. 5,675.00
	B03BB0100 ACIDO FOLICO 1 mg (125-00-00)	50000	L. 0.11	L. 5,695.00
	C03AA03 HIDROCLOROTIAZIDA 25mg (115-03-04)	20040	L. 0.45	L. 9,028.02
	H02AB0201 DEXAMETASONA (fosfato) 4mg/mL	1000	L. 5.70	L. 5,700.00
	J01CA01 AMPICILINA (anhidra o sódica) 1g	3000	L. 5.50	L. 16,500.00
	J01CA0401 AMOXICILINA (trihidrato) 500 mg CP (110-01-40)	10000	L. 0.56	L. 5,618.00
	J01CE09 PENICILINA G PROCAINICA 4,000.000 UI(110-01-25)	100	L. 10.77	L. 1,077.00
	J01DB01 CEFALEXINA (monohidrato) 500 mg (110-01-36)	4000	L. 2.74	L. 10,960.00
	J01DH51 IMIPENEM (monohidrato) 500mg + CILASTATINA (sódica) 500mg. (110-01-44)	300	L. 107.74	L. 32,322.00
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	1000	L. 6.43	L. 6,426.00
	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	2000	L. 2.59	L. 5,180.00
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	40000	L. 0.11	L. 4,344.00
	N03AB0201 FENITOINA (sódica) 50 mg/mL (120-00-04)	500	L. 15.75	L. 7,875.00
Total Price			L. 127,900.40	

TOTAL L. 504,986.04

INCP TORAX

Request Number : 709-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	MQ0-BIG-P0 Bigotera p/oxigeno pediátrica	500	L. 8.46	L. 4,230.00
	MQB-I11-00 Hoja de bisturí num 11x100	500	L. 0.97	L. 485.00
	MQS-R02-00 SEDA AG RECTA 2/0 DE 60 MM	120	L. 12.00	L. 1,440.00
	MQS-R03-00 SEDA RECTA 3/0 DE 60 MM	120	L. 12.00	L. 1,440.00
Total Price			L. 7,595.00	

Request Number : 3054-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	52000	L. 2.19	L. 113,880.00
Total Price			L. 113,880.00	

Request Number : 743-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	N05CD0800 MIDAZOLAN (clorhidrato) 1mg/mL (120-03-07)	100	L. 17.17	L. 1,716.80
Total Price			L. 1,716.80	

Request Number : 765-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	150	L. 22.83	L. 3,424.67

INCP TORAX	Total Price			L. 3,424.67
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Request Number : 792-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	10	L. 70.12	L. 701.16
	Total Price			L. 701.16

TOTAL	L. 127,317.63
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TOTAL DIA	L. 1400,484.62
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HOSPITAL ANIBAL MURILLO

Request Number : 3076-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ANIBAL MURILLO	C01BD0101 AMIODARONA (clorhidrato) 200 mg	10	L. 2.50	L. 25.00
	C01DA14 ISOSORBIDE (mononitrato) 20 mg (115-00-03)	10000	L. 1.33	L. 13,300.00
	C10AA0501 ATORVASTATINA 40mg	60120	L. 0.60	L. 36,072.00
	J01FA1001 AZITROMICINA (anhidra o dihidrato) 500mg TB(110-01-91)	1000	L. 2.97	L. 2,967.00
	J01GB0601 AMIKACINA (sulfato) 250mg/mL	200	L. 13.92	L. 2,784.00
	N01AX03 KETAMINA (clorhidrato) 50mg/mL (105-00-05)	10	L. 24.74	L. 247.40
	R03AC0202 SALBUTAMOL (sulfato) 5 mg/mL (0.5%) FC (130-00-03)	200	L. 19.44	L. 3,888.00
	R03BB0101 IPRATROPIO (bromuro) 250 mcg/mL FC (130-00-09)	100	L. 21.66	L. 2,166.00
	Total Price			L. 61,449.40

Request Number : 815-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ANIBAL MURILLO	N04AA0200 BIPERIDENO (clorhidrato) 2 mg (120-02-50)	2000	L. 0.60	L. 1,196.00
	Total Price			L. 1,196.00

Request Number : 816-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ANIBAL MURILLO	B05AA0102 ALBÚMINA HUMANA 20% (200g/l)	20	L. 590.14	L. 11,802.80
	M03AC04 ATRACURIO (besilato) 10mg/ml (120-05-06)	60	L. 21.18	L. 1,270.92
	Total Price			L. 13,073.72

Request Number : 3002-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ANIBAL MURILLO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	150000	L. 0.19	L. 28,500.00
	N03AB0203 FENITOINA 100mg (120-00-05)	15000	L. 1.50	L. 22,500.00
	Total Price			L. 51,000.00

Request Number : 3048-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
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HOSPITAL ANIBAL MURILLO	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	66000	L.	2.19	L.	144,540.00
	Total Price				L.	144,540.00

Request Number : 2074-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ANIBAL MURILLO	A10BA02 METFORMINA 850 mg TB (155-00-32)	216000	L. 0.31	L. 66,614.40
	Total Price			L. 66,614.40

TOTAL L. 337,873.52

HOSPITAL SAN FRANCISCO

Request Number : 3008-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	33000	L. 0.19	L. 6,270.00
	Total Price			L. 6,270.00

Request Number : 766-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	116	L. 22.83	L. 2,648.41
	Total Price			L. 2,648.41

Request Number : 3052-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	10000	L. 2.19	L. 21,900.00
	Total Price			L. 21,900.00

Request Number : 801-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	600	L. 59.80	L. 35,880.90
	Total Price			L. 35,880.90

Request Number : 2068-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	A10BA02 METFORMINA 850 mg TB (155-00-32)	150000	L. 0.31	L. 46,260.00
	Total Price			L. 46,260.00

Request Number : 819-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	10000	L. 0.42	L. 4,200.00
	Total Price			L. 4,200.00

Request Number : 820-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	40	L. 70.12	L. 2,804.63
	B02BD02 FACTOR ANTIHEMOFILICO HUMANO (Factor VIII) 250-500UI (130-03-00)	200	L. 1,982.78	L. 396,556.59
	J06BB01 INMUNOGLOBULINA ANTI D(RH+) 0.3 mg/mL ó 1500UI JE/P (155-01-00)	50	L. 702.32	L. 35,115.92
	Total Price			L. 434,477.10

Request Number : 3082-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	A03BA0301 HIOSCINA (butilbromuro) 20mg/mL	1000	L. 5.66	L. 5,660.00
	B05XA01 POTASIO (cloruro) 20 mEq/10 mL	1000	L. 5.08	L. 5,080.00
	C01CA04 DOPAMINA (clorhidrato) 40mg/mL (115-05-01)	300	L. 13.16	L. 3,949.44
	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	15000	L. 2.19	L. 32,850.00
	C08CA01 AMLODIPINO (besilato) 10mg	6000	L. 0.38	L. 2,274.00
	H03BA02 PROPILTIOURACILO 50 mg (150-06-01)	3440	L. 3.09	L. 10,629.60
	J01FA0900 CLARITROMICINA 250mg/5ml	150	L. 79.50	L. 11,925.00
	R03AC0201 SALBUTAMOL 2 mg/5ml FC(130-00-02)	100	L. 6.88	L. 687.89
	R03BB0101 IPRATROPIO (bromuro) 250 mcg/mL FC (130-00-09)	200	L. 21.66	L. 4,332.00
	V03AB15 NALOXONA (clorhidrato) 0.4 mg/mL	25	L. 112.52	L. 2,813.00
Total Price			L. 80,200.93	

Request Number : 718-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FRANCISCO	B05BB0202 DEXTROSA + CLORURO DE SODIO 5%+0.45% 500ml (165-01-17)	1230	L. 15.34	L. 18,868.20
	B05BB0206 LACTATO DE SODIO + ELECTROLITOS SOL HARTMAN 1000ml (165-01-22)	4158	L. 18.00	L. 74,844.00
	B05XA0301 SODIO (cloruro) 0.9% en 1000 mL	3006	L. 17.50	L. 52,605.00
	B05XA0302 SODIO (cloruro) 0.9% en 250 mL	1000	L. 13.90	L. 13,900.00
Total Price			L. 160,217.20	

TOTAL L. 792,054.54

HOSPITAL ROBERTO SUAZO CORDOBA La Paz

Request Number : 3042-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	75000	L. 2.19	L. 164,250.00
Total Price				L. 164,250.00

Request Number : 782-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	100	L. 22.83	L. 2,283.11
Total Price				L. 2,283.11

Request Number : 2092-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
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HOSPITAL ROBERTO SUAZO CORDOBA La Paz	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	30000	L.	0.19	L.	5,700.00
	N03AB0203 FENITOINA 100mg (120-00-05)	2700	L.	1.50	L.	4,050.00
	Total Price				L.	9,750.00

TOTAL	L.	176,283.11
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TOTAL	L.	1306,211.17
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HOSPITAL SALVADOR PAREDES

Request Number : 722-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SALVADOR PAREDES	B05BB0201 DEXTROSA + CLORURO DE SODIO 5%+0.3% 500ml (165-01-16)	150	L. 15.34	L. 2,301.00
	B05XA0301 SODIO (cloruro) 0.9% en 1000 mL	90	L. 17.50	L. 1,575.00
	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	360	L. 11.07	L. 3,985.20
	Total Price			L. 7,861.20

Request Number : 2022-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SALVADOR PAREDES	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	700	L. 2.59	L. 1,813.00
	Total Price			L. 1,813.00

Request Number : 2098-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SALVADOR PAREDES	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	33000	L. 0.19	L. 6,270.00
	N03AB0203 FENITOINA 100mg (120-00-05)	2500	L. 1.50	L. 3,750.00
	Total Price			L. 10,020.00

Request Number : 787-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SALVADOR PAREDES	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	78	L. 22.83	L. 1,780.83
	Total Price			L. 1,780.83

Request Number : 2057-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SALVADOR PAREDES	A10BA02 METFORMINA 850 mg TB (155-00-32)	75000	L. 0.31	L. 23,130.00
	Total Price			L. 23,130.00

Request Number : 3058-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SALVADOR PAREDES	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	13000	L. 2.19	L. 28,470.00
	Total Price			L. 28,470.00

TOTAL	L.	73,075.03
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HOSPITAL ATLANTIDA

Request Number : 3086-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ATLANTIDA	N01AX03 KETAMINA (clorhidrato) 50mg/mL (105-00-05)	25	L. 24.74	L. 618.50
	Total Price			L. 618.50

Request Number : 823-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ATLANTIDA	N01AH01 - FENTANILO (citrato) 0.05mg/mL (100-01-00)	200	L. 32.00	L. 6,400.00
	N05CD0800 MIDAZOLAN (clorhidrato) 1mg/mL (120-03-07)	300	L. 17.17	L. 5,150.40
	Total Price			L. 11,550.40

TOTAL	L.	12,168.90
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HOSPITAL ENRIQUE AGUILAR CERRATO

Request Number : 720-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	MQC-237-00 CRÓMICO 2/0 AG. RED. 37 MM	1200	L. 19.00	L. 22,800.00
	MQC-326-00 CRÓMICO 3/0 AG. RED. 26 MM	192	L. 19.00	L. 3,648.00
	Total Price			L. 26,448.00

Request Number : 3063-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	A02BC0101 OMEPRAZOL 40 MG/ML .2ML AM(145-00-05)	500	L. 11.50	L. 5,750.20
	A11AA0301 MULTIVITAMINAS ADULTOS (165-00-01)	6000	L. 0.34	L. 2,040.00
	B01AB01 HEPARINA (sódica) 5,000UI/mL (130-01-00)	50	L. 50.06	L. 2,503.00
	C01DA08 ISOSORBIDE (dinitrato) 5 mg (115-00-00)	40	L. 4.99	L. 199.60
	C10AA0501 ATORVASTATINA 40mg	6280	L. 0.60	L. 3,768.00
	D08AC02 CLORHEXIDINA (gluconato) 20% P/V	50	L. 265.00	L. 13,250.00
	D08AG02 YODO 10% +polivinil pirrolidona (yodo povidona)	150	L. 40.00	L. 6,000.00
	H03AA01 LEVOTIROXINA (sódica) 100 mcg TAB (150-06-02)	1085	L. 0.57	L. 619.75
	J01CF0100 DICLOXACILINA (sódica) 125 mg/5mL	96	L. 21.78	L. 2,090.88
	J01CF0101 DICLOXACILINA (sódica) 500 mg	3000	L. 2.35	L. 7,050.00
	J01DB01 CEFALEXINA (monohidrato) 500 mg (110-01-36)	1000	L. 2.74	L. 2,740.00
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	800	L. 6.43	L. 5,140.80
	N01AX03 KETAMINA (clorhidrato) 50mg/mL (105-00-05)	5	L. 24.74	L. 123.70
	N01BB01 BUPIVACAINA 5mg/mL (0.5%) (sin preservantes derivados del parabeno)	100	L. 31.89	L. 3,189.20
	N01BB0202 LIDOCAINA 2% (equivalente a 20mg/mL); sin preservantes derivados del parabeno)	50	L. 23.00	L. 1,150.00
	N01BB51 BUPIVACAINA 5mg/mL (0.5%)+ GLUCOSA 7.5-8%/mL; (sin preservantes derivados del parabeno)	50	L. 10.83	L. 541.50
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	20000	L. 0.11	L. 2,172.00
	Total Price			L. 58,328.63

Request Number : 805-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	G02AB01 ERGONOVINA (maleato) (metilergometrina) 0.2 mg/1mLl (150-04-00)	25	L. 5.97	L. 149.25
	Total Price			L. 149.25

Request Number : 806-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	N01AH01 - FENTANILO (citrato) 0.05mg/mL (100-01-00)	100	L. 32.00	L. 3,200.00
	Total Price			L. 3,200.00

Request Number : 3037-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	4000	L. 2.19	L. 8,760.00
	Total Price			L. 8,760.00

Request Number : 2086-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ENRIQUE AGUILAR CERRATO	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	40000	L. 0.19	L. 7,600.00
	N03AB0203 FENITOINA 100mg (120-00-05)	3000	L. 1.50	L. 4,500.00
	Total Price			L. 12,100.00

TOTAL L. 108,985.88

HOSPITAL MANUEL DE JESUS SUBIRANA

Request Number : 822-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MANUEL DE JESUS SUBIRANA	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	12000	L. 0.42	L. 5,040.00
	Total Price			L. 5,040.00

Request Number : 3039-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MANUEL DE JESUS SUBIRANA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	15000	L. 2.19	L. 32,850.00
	Total Price			L. 32,850.00

Request Number : 3081-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MANUEL DE JESUS SUBIRANA	A03BA0300 HIOSCINA (butilbromuro) 10mg	7000	L. 2.32	L. 16,264.50
	A03BA0301 HIOSCINA (butilbromuro) 20mg/mL	1365	L. 5.66	L. 7,725.90
	J01FA1001 AZITROMICINA (anhidra o dihidrato) 500mg TB(110-01-91)	6000	L. 2.97	L. 17,802.00
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	1500	L. 6.43	L. 9,639.00
	Total Price			L. 51,431.40

TOTAL	L.	89,321.40
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HOSPITAL JUAN MANUEL GALVEZ LEMPIRA

Request Number : 2091-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	23000	L. 0.19	L. 4,370.00
	Total Price			L. 4,370.00

Request Number : 3079-ANT-ORH-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	J05AG0101 NEVIRAPINA 200 mg	120	L. 0.83	L. 99.60
	J05AR03 TENOFOVIR (disoproxil fumarato) 300mg + EMTRICITABINA 200mg (110-11-28)	120	L. 4.40	L. 528.31
	J05AR1001 LOPINAVIR 200mg + RITONAVIR 50mg TB (110-11-27)	120	L. 3.49	L. 418.49
	Total Price			L. 1,046.40

Request Number : 2050-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	A10BA02 METFORMINA 850 mg TB (155-00-32)	80010	L. 0.31	L. 24,675.08
	Total Price			L. 24,675.08

Request Number : 3038-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL JUAN MANUEL GALVEZ LEMPIRA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	4000	L. 2.19	L. 8,760.00
	Total Price			L. 8,760.00

TOTAL	L.	38,851.48
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HOSPITAL SANTA BARBARA

Request Number : 3087-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA BARBARA	A10BA02 METFORMINA 850 mg TB (155-00-32)	60000	L. 0.31	L. 18,504.00
	Total Price			L. 18,504.00

Request Number : 3060-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA BARBARA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	7000	L. 2.19	L. 15,330.00
	Total Price			L. 15,330.00

TOTAL	L.	33,834.00
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TOTAL DIA	L.	356,236.69
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TOTAL SEMANA	L. 6119,407.38

DESPACHOS DEL 26 AL 29 DE DICIEMBRE DE 2017

Nº	DESTINO	FECHA	CANTIDAD ENTREGADA EN LEMPIRAS
1	HOSPITAL PSIQUIATRICO MARIO MENDOZA	26-dic-17	L. 596,801.78
2	REGION DEPARTAMENTAL COLON	27-dic-17	L. 1092,550.99
3	HOSPITAL SAN ISIDRO TOCOA	27-dic-17	L. 149,891.30
4	HOSPITAL MARIO CATARINO RIVAS	27-dic-17	L. 72,460.65
5	HOSPITAL PUERTO CORTES	27-dic-17	L. 311,361.12
6	REGION DEPARTAMENTAL CORTES	27-dic-17	L. 786,104.13
7	REGION DEPARTAMENTAL OLANCHO	27-dic-17	L. 289,237.40
8	HOSPITAL SANTA ROSITA	27-dic-17	L. 38,292.65
9	INCP TORAX	27-dic-17	L. 234,215.28
10	REGION METROPOLITANA SAN PEDRO SULA	27-dic-17	L. 919,785.22
11	REGION DEPARTAMENTAL ATLANTIDA	27-dic-17	L. 366,492.69
12	HOSPITAL ATLANTIDA	27-dic-17	L. 109,639.33
13	HOSPITAL DE EL PROGRESO	27-dic-17	L. 185,303.00
14	REGION DEPARTAMENTAL LA PAZ	27-dic-17	L. 72,835.94
15	HOSPITAL DE TELA	27-dic-17	L. 318,502.61
16	HOSPITAL SAN FELIPE	27-dic-17	L. 61,680.00
17	HOSPITAL SAN FELIPE	28-dic-17	L. 61,680.00
18	REGION DEPARTAMENTAL COMAYAGUA	28-dic-17	L. 281,039.06
19	HOSPITAL SANTA TERESA	28-dic-17	L. 349,871.49
20	HOSPITAL ROBERTO SUAZO CORDOBA La Paz	28-dic-17	L. 102,285.67
21	HOSPITAL PUERTO LEMPIRA	28-dic-17	L. 222,965.99
22	HOSPITAL SANTA BARBARA	28-dic-17	L. 105,157.00
23	HOSPITAL SAN MARCOS DE OCOTEPEQUE	28-dic-17	L. 210,685.19
24	HOSPITAL DE ROATAN	28-dic-17	L. 572,838.71
25	HOSPITAL ANIBAL MURILLO	28-dic-17	L. 23,780.00
26	REGION METROPOLITANA TEGUCIGALPA	29-dic-17	L. 265,441.38
27	REGION DEPARTAMENTAL YORO	29-dic-17	L. 44,217.54
28	REGION DEPARTAMENTAL FRANCISCO MORAZAN	29-dic-17	L. 347,065.23
29	HOSPITAL DEL SUR	29-dic-17	L. 178,233.40
30	HOSPITAL ESCUELA	29-dic-17	L. 4,938.22
TOTAL			L. 8375,352.97

HOSPITAL PSIQUIATRICO MARIO MENDOZA

Request Number : 2088-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PSIQUIATRICO MARIO MENDOZA	N03AB0203 FENITOINA 100mg (120-00-05)	61700	L. 1.50	L. 92,550.00
	Total Price			L. 92,550.00

Request Number : 830-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PSIQUIATRICO MARIO MENDOZA	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	5000	L. 0.42	L. 2,100.00
	N03AE01 CLONAZEPAM 2 mg TB (120-00-12)	100000	L. 0.39	L. 39,000.00
	N04BD01 SELEGILINA (clorhidrato) 5 mg (120-02-04)	600	L. 4.25	L. 2,550.00
	N05AB02 FLUFENAZINA (decanoato o enantato) 25mg/1mL (120-04-02)	500	L. 72.35	L. 36,176.00
	N05AD0100 HALOPERIDOL 5 mg/mL Amp (120-04-04)	422	L. 4.79	L. 2,021.38
	N05AD0100 HALOPERIDOL 5 mg/mL Amp (120-04-04)	78	L. 6.13	L. 477.75
	N05AH0201 CLOZAPINA 100 mg TB(120-04-17)	25000	L. 12.50	L. 312,500.00
	N05BA01 DIAZEPAM 5mg/mL AM (120-00-01)	1000	L. 12.25	L. 12,250.00
	N06AA02 IMIPRAMINA (clorhidrato) 25 mg TB (120-04-05)	15000	L. 0.86	L. 12,837.00
	N06AB03 FLUOXETINA (clorhidrato) 20mg TB(120-04-19)	70000	L. 0.55	L. 38,500.00
	Total Price			L. 458,412.10

Request Number : 3099-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PSIQUIATRICO MARIO MENDOZA	A02BA0202 RANITIDINA 150 mg TB (145-00-01)	1300	L. 0.28	L. 365.04
	B03BB0100 ACIDO FOLICO 1 mg (125-00-00)	7000	L. 0.11	L. 797.30
	C07AA05 PROPRANOLOL 40 mg (115-01-02)	5000	L. 0.14	L. 690.00
	N04BA02 LEVODOPA 250mg + carbidopa 25 mg (120-02-01)	2880	L. 7.25	L. 20,880.00
	Total Price			L. 22,732.34

Request Number : 3099-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PSIQUIATRICO MARIO MENDOZA	A02BA0202 RANITIDINA 150 mg TB (145-00-01)	1300	L. 0.28	L. 365.04
	B03BB0100 ACIDO FOLICO 1 mg (125-00-00)	7000	L. 0.11	L. 797.30
	C07AA05 PROPRANOLOL 40 mg (115-01-02)	5000	L. 0.14	L. 690.00
	N04BA02 LEVODOPA 250mg + carbidopa 25 mg (120-02-01)	2880	L. 7.25	L. 20,880.00
	Total Price			L. 22,732.34

Request Number : 4035-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PSIQUIATRICO MARIO MENDOZA	B05BA0305 DEXTROSA EN AGUA 50% 50ml (165-01-14)	20	L. 18.75	L. 375.00
	Total Price			L. 375.00

TOTAL	L.	596,801.78
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TOTAL DIA	L.	596,801.78
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REGION DEPARTAMENTAL COLON

Request Number : 4027-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	P01CA0201 BENZNIDAZOL 100 mg	4500	L. 11.25	L. 50,635.80
	Total Price			L. 50,635.80

Request Number : 3092-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	L01XX09 MILTEFOSINA 10mg	6048	L. 23.53	L. 142,294.33
	L01XX10 MILTEFOSINA 50mg	3360	L. 42.35	L. 142,294.31
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	1800	L. 34.87	L. 62,762.04
	Total Price			L. 347,350.70

Request Number : 721-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	1008	L. 11.07	L. 11,158.56
	Total Price			L. 11,158.56

Request Number : 3033-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	A11-180-57 LECHE NAN CONFORT 24X400G XP	60	L. 120.08	L. 7,204.83
	Total Price			L. 7,204.83

Request Number : 3034-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	396-01-84 BIBERONES	3	L. 38.50	L. 115.50
	MIO-MED-004 MAMADERAS	3	L. 6.50	L. 19.50
	Total Price			L. 135.00

Request Number : 750-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	56000	L. 0.42	L. 23,520.00
	Total Price			L. 23,520.00

Request Number : 3011-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	90000	L. 0.19	L. 17,100.00
	N03AB0203 FENITOINA 100mg (120-00-05)	2400	L. 1.50	L. 3,600.00
	Total Price			L. 20,700.00

Request Number : 3085-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	112,000	L. 0.34	L. 38,080.00
	A11AA0301 MULTIVITAMINAS ADULTOS (165-00-01)	56,000	L. 0.34	L. 19,040.00
	C03AA03 HIDROCLOROTIAZIDA 25mg (115-03-04)	9,000	L. 0.45	L. 4,054.50
	C03CA0100 FUROSEMIDA 10mg/ml (115-03-02)	500	L. 1.77	L. 885.00
	H02AB0701 PREDNISONA 50mg TAB	56,000	L. 1.60	L. 89,381.60
	J01CA0401 AMOXICILINA (trihidrato) 500 mg CP (110-01-40)	80,000	L. 0.56	L. 44,944.00
	J01EE0100 TRIMETOPRIM 40 mg + SULFAMETOXAZOL 200mg/5mL (110-01-30)	1,000	L. 9.40	L. 9,400.00
	M01AE0100 IBUPROFENO 100mg/5ml	1,920	L. 10.88	L. 20,886.53
	M01AE0101 IBUPROFENO 600mg	112,000	L. 0.39	L. 43,680.00
	N02BE0101 ACETAMINOFEN 120mg/5mL (100-00-00)	6,000	L. 8.30	L. 49,800.00
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	112,000	L. 0.11	L. 12,163.20
	P02CA0301 ALBENDAZOL 200 mg/5mL (110-02-07)	2,018	L. 10.82	L. 21,834.76
Total Price			L. 354,149.60	

Request Number : 703-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COLON	G02BB0000 CONDON MASCULINO (150-00-52)	194400	L. 0.51	L. 99,688.31
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	5760	L. 6.53	L. 37,619.71
	G03AC0601 MEDROXIPROGESTERONA (acetato) 150mg/mL (160-00-31)	7000	L. 18.24	L. 127,648.50
	MQJ-K-009 Jeringa Desechable de 1 ml BLACK 22GX1 / 0.7X25mm	7000	L. 1.82	L. 12,740.00
Total Price			L. 277,696.50	

TOTAL L. 1092,550.99

HOSPITAL SAN ISIDRO TOCOA

Request Number : 788-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	100	L. 22.83	L. 2,283.11
Total Price				L. 2,283.11

Request Number : 3059-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	10500	L. 2.19	L. 22,995.00
	Total Price			L. 22,995.00

Request Number : 2023-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	1000	L. 2.59	L. 2,590.00
	Total Price			L. 2,590.00

Request Number : 2058-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	A10BA02 METFORMINA 850 mg TB (155-00-32)	78000	L. 0.31	L. 24,055.20
	Total Price			L. 24,055.20

Request Number : 798-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	100	L. 59.80	L. 5,980.15
	Total Price			L. 5,980.15

Request Number : 1749-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	150000	L. 0.34	L. 51,000.00
	Total Price			L. 51,000.00

Request Number : 2099-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	100000	L. 0.19	L. 19,000.00
	N03AB0203 FENITOINA 100mg (120-00-05)	3500	L. 1.50	L. 5,250.00
	Total Price			L. 24,250.00

Request Number : 680-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN ISIDRO TOCOA	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	1512	L. 11.07	L. 16,737.84
	Total Price			L. 16,737.84

TOTAL	L. 149,891.30
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HOSPITAL MARIO CATARINO RIVAS

Request Number : 4032-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL MARIO CATARINO RIVAS	J02AA0100 ANFOTERICINA B (desoxicolato sodico o complejo liposomal) 50 mg inyect:IV (110-05-00)	196	L. 369.70	L. 72,460.65
	Total Price			L. 72,460.65
TOTAL			L.	72,460.65

HOSPITAL PUERTO CORTES

Request Number : 2008-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO CORTES	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	1000	L. 2.59	L. 2,590.00
	Total Price			L. 2,590.00

Request Number : 3006-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO CORTES	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	100000	L. 0.19	L. 19,000.00
	N03AB0203 FENITOINA 100mg (120-00-05)	13000	L. 1.50	L. 19,500.00
	Total Price			L. 38,500.00

Request Number : 3073-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO CORTES	A02BA0202 RANITIDINA 150 mg TB (145-00-01)	26000	L. 0.28	L. 7,300.80
	A02BC0101 OMEPRAZOL 40 MG/ML .2ML AM(145-00-05)	62	L. 11.50	L. 713.02
	A06AD11 LACTULOSA 10 g/15 mL (145-03-02)	125	L. 105.00	L. 13,125.00
	A12AX00 CALCIO (carbonato) 600mg (elemental) + VITAMINA D 200 UI (125-04-02)	4630	L. 0.77	L. 3,565.10
	B01AA03 WARFARINA (SODICA) 5mg (130-01-04)	250	L. 0.35	L. 87.00
	B01AC04 CLOPIDOGREL (bisulfato) 75mg	3750	L. 1.86	L. 6,975.00
	B05XA02 SODIO (bicarbonato) 7.5% (equivalente a 0.892meq/mL)	4	L. 41.41	L. 165.65
	B05XA05 MAGNESIO (sulfato heptahidrato) 10% (100mg/mL)(120-00-10)	556	L. 5.75	L. 3,197.00
	C01AA0502 DIGOXINA 0.25 mg/mL AM (115-04-02)	38	L. 27.09	L. 1,029.42
	C01BD0101 AMIODARONA (clorhidrato) 200 mg	480	L. 2.50	L. 1,200.00
	C01CA04 DOPAMINA (clorhidrato) 40mg/mL (115-05-01)	1	L. 13.16	L. 13.16
	C01DA08 ISOSORBIDE (dinitrato) 5 mg (115-00-00)	40	L. 4.99	L. 199.60
	C03AA03 HIDROCLOROTIAZIDA 25mg (115-03-04)	31400	L. 0.45	L. 14,145.70
	C07AA05 PROPRANOLOL 40 mg (115-01-02)	4420	L. 0.14	L. 609.96
	C07AB0701 BISOPROLOL (fumarato o hemifumarato) 10mg	15000	L. 1.27	L. 19,050.00
	C08CA01 AMLODIPINO (besilato) 10mg	19070	L. 0.38	L. 7,227.53
C09AA0201 ENALAPRIL (maleato) 20mg (115-02-11)	25000	L. 0.19	L. 4,772.50	

J01CE09 PENICILINA G PROCAINICA 4,000.000 UI(110-01-25)	38	L.	10.77	L.	409.26
J01CR0200 AMOXICILINA (trihidrato) 250mg + Acido Clavulánico (como clavulanato de potasio) 62.5mg/5mL (110-01-94)	1120	L.	64.55	L.	72,300.48
J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	1835	L.	6.43	L.	11,791.71
J01GB03 GENTAMICINA 40mg/ml solución inyectable (110-00-02)	686	L.	3.58	L.	2,455.88
J05AB0100 ACICLOVIR 200mg/5mL	6	L.	38.47	L.	230.82
J05AB0103 ACICLOVIR 400mg (110-09-02)	636	L.	1.63	L.	1,036.68
N03AB0201 FENITOINA (sódica) 50 mg/mL (120-00-04)	151	L.	15.75	L.	2,378.25
N07AA01 NEOSTIGMINA (metil sulfato) 0.5mg/mL. AM (120-05-03)	13	L.	4.30	L.	55.90
R03AC0201 SALBUTAMOL 2 mg/5ml FC(130-00-02)	589	L.	6.88	L.	4,051.67
V03AB15 NALOXONA (clorhidrato) 0.4 mg/mL	6	L.	112.52	L.	675.12
Total Price				L.	178,762.20

Request Number : 810-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO CORTES	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	12	L. 70.12	L. 841.39
	G02AB01 ERGONOVINA (maleato) (metilergometrino) 0.2 mg/1mL (150-04-00)	25	L. 5.97	L. 149.25
	H01BB02 OXITOCINA 10 UI (150-04-50)	1500	L. 9.00	L. 13,500.00
	J06AA0301 SUERO ANTIOFIDICO polivalente anticrotálico	21	L. 417.81	L. 8,774.09
	J06BB01 INMUNOGLOBULINA ANTI D(RH+) 0.3 mg/mL ó 1500UI JE/P (155-01-00)	9	L. 702.32	L. 6,320.87
	N01AX10 PROPOFOL+E.D.T.A. 1% (equivalente a 10mg/mL).(105-00-08)	300	L. 81.54	L. 24,462.00
	Total Price			L. 54,047.60

Request Number : 809-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO CORTES	N02AB02 MEPERIDINA (clorhidrato) 50 mg/mL	88	L. 95.20	L. 8,377.60
	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	7000	L. 0.42	L. 2,940.00
	N05BA01 DIAZEPAM 5mg/mL AM (120-00-01)	100	L. 12.25	L. 1,225.00
	Total Price			L. 12,542.60

Request Number : 2070-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO CORTES	A10BA02 METFORMINA 850 mg TB (155-00-32)	80800	L. 0.31	L. 24,918.72
	Total Price			L. 24,918.72

TOTAL L. 311,361.12

REGION DEPARTAMENTAL CORTES

Request Number : 4024-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CORTES	396-01-84 BIBERONES	36	L. 38.50	L. 1,386.00
	MI0-MED-004 MAMADERAS	36	L. 6.50	L. 234.00

Total Price			L. 1,620.00
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Request Number : 4029-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CORTES	P01BA0300 PRIMAQUINA (fosfato) 5 mg (110-06-01)	200	L. 0.21	L. 42.50
	P01BA0301 PRIMAQUINA (fosfato) 15 mg (110-06-02)	400	L. 0.24	L. 94.44
	Total Price			L. 136.94

Request Number : 4007-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CORTES	L01XX09 MILTEFOSINA 10mg	5040	L. 23.53	L. 118,578.60
	L01XX10 MILTEFOSINA 50mg	2940	L. 42.35	L. 124,507.52
	P01CA0201 BENZNIDAZOL 100 mg	1500	L. 11.25	L. 16,878.60
	Total Price			L. 259,964.70

Request Number : 710-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CORTES	G02BA02 T de COBRE, (T Cu 380 A)(Dispositivo Intrauterino) (150-00-53)	250	L. 5.75	L. 1,438.50
	G02BB0000 CONDON MASCULINO (150-00-52)	194400	L. 0.51	L. 99,688.32
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	15840	L. 6.53	L. 103,454.20
	Total Price			L. 204,581.00

Request Number : 710-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CORTES	G02BA02 T de COBRE, (T Cu 380 A)(Dispositivo Intrauterino) (150-00-53)	250	L. 5.75	L. 1,438.50
	G02BB0000 CONDON MASCULINO (150-00-52)	194400	L. 0.51	L. 99,688.32
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	15840	L. 6.53	L. 103,454.20
	Total Price			L. 204,581.00

Request Number : 3022-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL CORTES	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	8000	L. 0.19	L. 1,520.00
	N03AB0203 FENITOINA 100mg (120-00-05)	32000	L. 1.50	L. 48,000.00
	Total Price			L. 49,520.00

Request Number : 4029-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
	P01BA0300 PRIMAQUINA (fosfato) 5 mg (110-06-01)	200	L. 0.21	L. 42.50

REGION DEPARTAMENTAL CORTES	P01BA0301 PRIMAQUINA (fosfato) 15 mg (110-06-02)	400	L.	0.24	L.	94.44
	Total Price				L.	136.94

Request Number : 4022-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL CORTES	J05AF0100 ZIDOVUDINA 10mg/ml 110-11-03	3	L.	47.21	L.	141.64
	J05AF0500 LAMIVUDINA 10mg/ml FC (110-11-04)	3	L.	38.01	L.	114.03
	J05AG0100 NEVIRAPINA 10mg/ml FCO(110-11-12)	3	L.	34.79	L.	104.37
	Total Price				L.	360.04

Request Number : 4023-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL CORTES	A11-180-57 LECHE NAN CONFORT 24X400G XP	540	L.	120.08	L.	64,843.47
	Total Price				L.	64,843.47

Request Number : 4022-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL CORTES	J05AF0100 ZIDOVUDINA 10mg/ml 110-11-03	3	L.	47.21	L.	141.64
	J05AF0500 LAMIVUDINA 10mg/ml FC (110-11-04)	3	L.	38.01	L.	114.03
	J05AG0100 NEVIRAPINA 10mg/ml FCO(110-11-12)	3	L.	34.79	L.	104.37
	Total Price				L.	360.04

TOTAL L. 786,104.13

REGION DEPARTAMENTAL OLANCHO

Request Number : 3080-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL OLANCHO	A02BA0202 RANITIDINA 150 mg TB (145-00-01)	60000	L.	0.28	L.	16,848.00
	A03BA0300 HIOSCINA (butilbromuro) 10mg	10000	L.	2.32	L.	23,235.00
	B03AA0701 HIERRO (sulfato) 300mg (equivalente a 60mg de hierro elemental) SULFATO FERROSO 300 mg.	100000	L.	0.12	L.	12,000.00
	C07AB0700 BISOPROLOL (fumarato o hemifumarato) 2.5mg	20250	L.	0.75	L.	15,187.50
	C07AB0701 BISOPROLOL (fumarato o hemifumarato) 10mg	10000	L.	1.27	L.	12,700.00
	C09AA0201 ENALAPRIL (maleato) 20mg (115-02-11)	50000	L.	0.19	L.	9,545.00
	J01EE0101 TRIMETOPRIM 160 mg + SULFAMETOXAZOL 800mg	10000	L.	0.75	L.	7,500.00
	M01AE0101 IBUPROFENO 600mg	60000	L.	0.39	L.	23,400.00
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	100000	L.	0.11	L.	10,860.00
	P01AB02 TINIDAZOL 500mg (110-00-52)	10000	L.	1.11	L.	11,091.00
	Total Price				L.	142,366.50

Request Number : 4005-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL OLANCHO	P01CA0201 BENZNIDAZOL 100 mg	4500	L. 11.25	L. 50,635.80
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	2760	L. 34.87	L. 96,235.13
	Total Price			L. 146,870.90

TOTAL	L. 289,237.40
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HOSPITAL SANTA ROSITA

Request Number : 3097-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA ROSITA	A02BC0101 OMEPRAZOL 40 MG/ML .2ML AM(145-00-05)	6	L. 11.50	L. 69.00
	C07AA05 PROPRANOLOL 40 mg (115-01-02)	400	L. 0.14	L. 55.20
	C08CA01 AMLODIPINO (besilato) 10mg	300	L. 0.38	L. 113.70
	H02AB0201 DEXAMETASONA (fosfato) 4mg/mL	25	L. 5.70	L. 142.50
	N03AB0201 FENITOINA (sódica) 50 mg/mL (120-00-04)	6	L. 15.75	L. 94.50
	N03AG0101 VALPROATO (sódico) 200 mg/mL (120-00-52)	310	L. 40.78	L. 12,641.80
	R06AA0201 DIFENHIDRAMINA (clorhidrato) 10mg/mL	100	L. 17.16	L. 1,716.00
	R06AA0203 DIFENHIDRAMINA 50 MG CAP	20000	L. 0.35	L. 7,000.00
	R06AX1301 LORATADINA 10mg (170-00-07)	300	L. 0.17	L. 49.68
	S01AA01 CLORANFENICOL 0.5% Colirio (150-00-01)	20	L. 10.21	L. 204.12
Total Price			L. 22,086.50	

Request Number : 694-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA ROSITA	B05XA0301 SODIO (cloruro) 0.9% en 1000 mL	54	L. 17.50	L. 945.00
	B05XA0302 SODIO (cloruro) 0.9% en 250 mL	12	L. 13.90	L. 166.80
	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	48	L. 11.07	L. 531.36
Total Price			L. 1,643.16	

Request Number : 826-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA ROSITA	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	1	L. 70.12	L. 70.12
	A10AC01 INSULINA ISOFANICA HUMANA NPH 100 UI/ml (155-00-01)	16	L. 89.12	L. 1,425.87
Total Price			L. 1,495.99	

Request Number : 3053-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA ROSITA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	100	L. 2.19	L. 219.00
Total Price			L. 219.00	

Request Number : 825-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA ROSITA	N04AA0200 BIPERIDENO (clorhidrato) 2 mg (120-02-50)	1000	L. 0.60	L. 598.00
	N05BA01 DIAZEPAM 5mg/mL AM (120-00-01)	1000	L. 12.25	L. 12,250.00
	Total Price			L. 12,848.00

TOTAL	L. 38,292.65
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INCP TORAX

Request Number : 3089-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	J04AB01 CICLOSERINA 250mg (110-08-10)	4000	L. 6.34	L. 25,360.00
	J04AD03 ETIONAMIDA 250mg (110-08-55)	3900	L. 1.51	L. 5,873.79
	J04AD03 ETIONAMIDA 250mg (110-08-55)	2100	L. 1.51	L. 3,172.89
	J04AK01 PIRAZINAMIDA 500mg (110-08-03)	1500	L. 0.67	L. 1,007.10
	J04AK01 PIRAZINAMIDA 500mg (110-08-03)	3500	L. 0.74	L. 2,590.00
	Total Price			L. 38,003.78

Request Number : 3009-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	100000	L. 0.19	L. 19,000.00
	N03AB0203 FENITOINA 100mg (120-00-05)	2000	L. 1.50	L. 3,000.00
	Total Price			L. 22,000.00

Request Number : 3084-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
INCP TORAX	A02BA0202 RANITIDINA 150 mg TB (145-00-01)	20000	L. 0.28	L. 5,616.00
	A02BC0101 OMEPRAZOL 40 MG/ML .2ML AM(145-00-05)	63	L. 11.50	L. 724.53
	B01AA03 WARFARINA (SODICA) 5mg (130-01-04)	2000	L. 0.35	L. 696.00
	C03AA03 HIDROCLOROTIAZIDA 25mg (115-03-04)	50000	L. 0.45	L. 22,525.00
	C03CA0100 FUROSEMIDA 10mg/ml (115-03-02)	3000	L. 1.77	L. 5,310.00
	C07AB0700 BISOPROLOL (fumarato o hemifumarato) 2.5mg	30000	L. 0.75	L. 22,500.00
	C08CA01 AMLODIPINO (besilato) 10mg	60000	L. 0.38	L. 22,740.00
	C10AA0501 ATORVASTATINA 40mg	60000	L. 0.60	L. 36,000.00
	R03BB0100 IPRATROPIO (bromuro) 20 mcg/disparo(130-00-10)	1000	L. 53.90	L. 53,900.00
	R06AX1300 LORATADINA 1 mg/mL(170-00-08)	400	L. 10.50	L. 4,200.00
	Total Price			L. 174,211.50

TOTAL	L. 234,215.28
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REGION METROPOLITANA SAN PEDRO SULA

Request Number : 4012-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	L01XX09 MILTEFOSINA 10mg	1680	L. 23.53	L. 39,526.20
	L01XX10 MILTEFOSINA 50mg	420	L. 42.35	L. 17,786.79
	P01CA0201 BENZNIDAZOL 100 mg	1500	L. 11.25	L. 16,878.60
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	300	L. 34.87	L. 10,460.34
	Total Price			L. 84,651.92

Request Number : 2018-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	200	L. 2.59	L. 518.00
	Total Price			L. 518.00

Request Number : 1519-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	100660	L. 0.34	L. 34,224.40
	Total Price			L. 34,224.40

Request Number : 669-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA SAN PEDRO SULA	G02BB0000 CONDON MASCULINO (150-00-52)	424800	L. 0.51	L. 217,837.44
	G02BB0000 CONDON MASCULINO (150-00-52)	133920	L. 0.52	L. 69,638.40
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	30240	L. 6.35	L. 192,027.03
	G03AC0601 MEDROXIPROGESTERONA (acetato) 150mg/mL (160-00-31)	16000	L. 18.24	L. 291,768.00
	MQJ-K-009 Jeringa Desechable de 1 ml BLACK 22GX1 / 0.7X25mm	16000	L. 1.82	L. 29,120.00
	Total Price			L. 800,390.90

TOTAL L. 919,785.22

REGION DEPARTAMENTAL ATLANTIDA

Request Number : 4030-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	A11-180-57 LECHE NAN CONFORT 24X400G XP	120	L. 120.08	L. 14,409.66
	Total Price			L. 14,409.66

Request Number : 4031-ANT-ORD-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	396-01-84 BIBERONES	6	L. 38.50	L. 231.00
	MI0-MED-004 MAMADERAS	6	L. 6.50	L. 39.00
	Total Price			L. 270.00

Request Number : 4015-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	L01XX09 MILTEFOSINA 10mg	1120	L. 23.53	L. 26,350.80
	L01XX10 MILTEFOSINA 50mg	420	L. 42.35	L. 17,786.79
	P01CA0201 BENZNIDAZOL 100 mg	1500	L. 11.25	L. 16,878.60
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	580	L. 34.87	L. 20,223.32
	Total Price			L. 81,239.51

Request Number : 1517-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	199000	L. 0.34	L. 67,660.00
	H02AB0201 DEXAMETASONA (fosfato) 4mg/mL	300	L. 5.70	L. 1,710.00
	Total Price			L. 69,370.00

Request Number : 2061-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	A10BA02 METFORMINA 850 mg TB (155-00-32)	123510	L. 0.31	L. 38,090.48
	Total Price			L. 38,090.48

Request Number : 3071-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	J04AB0200 RIFAMPICINA 100mg/5ml (110-08-05)	100	L. 64.92	L. 6,492.00
	Total Price			L. 6,492.00

Request Number : 3015-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL ATLANTIDA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	140000	L. 0.19	L. 26,600.00
	N03AB0203 FENITOINA 100mg (120-00-05)	5000	L. 1.50	L. 7,500.00
	Total Price			L. 34,100.00

Request Number : 760-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
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REGION DEPARTAMENTAL ATLANTIDA	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	4000	L.	0.42	L.	1,680.00
	Total Price				L.	1,680.00

Request Number : 1759-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL ATLANTIDA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	200000	L.	0.34	L.	68,000.00
	Total Price				L.	68,000.00

Request Number : 711-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL ATLANTIDA	G02BA02 T de COBRE, (T Cu 380 A)(Dispositivo Intrauterino) (150-00-53)	200	L.	5.75	L.	1,150.80
	G02BB0000 CONDON MASCULINO (150-00-52)	100800	L.	0.51	L.	51,690.24
	Total Price				L.	52,841.04

TOTAL L. 366,492.69

HOSPITAL ATLANTIDA

Request Number : 2054-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL ATLANTIDA	A10BA02 METFORMINA 850 mg TB (155-00-32)	75000	L.	0.31	L.	23,130.00
	Total Price				L.	23,130.00

Request Number : 1737-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL ATLANTIDA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	100000	L.	0.34	L.	34,000.00
	Total Price				L.	34,000.00

Request Number : 789-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL ATLANTIDA	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	300	L.	22.83	L.	6,849.33
	Total Price				L.	6,849.33

Request Number : 2094-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	108000	L.	0.19	L.	20,520.00

HOSPITAL ATLANTIDA	N03AB0203 FENITOINA 100mg (120-00-05)	8000	L.	1.50	L.	12,000.00
	Total Price				L.	32,520.00

Request Number : 3055-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL ATLANTIDA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	6000	L.	2.19	L.	13,140.00
	Total Price				L.	13,140.00

TOTAL L. 109,639.33

HOSPITAL DE EL PROGRESO

Request Number : 802-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL DE EL PROGRESO	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	2000	L.	59.80	L.	119,603.00
	Total Price				L.	119,603.00

Request Number : 3047-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
HOSPITAL DE EL PROGRESO	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	30000	L.	2.19	L.	65,700.00
	Total Price				L.	65,700.00

TOTAL L. 185,303.00

REGION DEPARTAMENTAL LA PAZ

Request Number : 4006-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL LA PAZ	P01CA0201 BENZNIDAZOL 100 mg	1500	L.	11.25	L.	16,878.60
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	300	L.	34.87	L.	10,460.34
	Total Price				L.	27,338.94

Request Number : 752-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity		Unit Price		Total Price
REGION DEPARTAMENTAL LA PAZ	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	66000	L.	0.42	L.	27,720.00
	Total Price				L.	27,720.00

Request Number : 791-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL LA PAZ	H01BB02 OXITOCINA 10 UI (150-04-50)	200	L. 9.00	L. 1,800.00
	Total Price			L. 1,800.00

Request Number : 2017-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL LA PAZ	N02AX02 TRAMADOL (clorhidrato) 50mg/mL	300	L. 2.59	L. 777.00
	Total Price			L. 777.00

Request Number : 3019-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL LA PAZ	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	80000	L. 0.19	L. 15,200.00
	Total Price			L. 15,200.00

TOTAL L. 72,835.94

HOSPITAL DE TELA

Request Number : 707-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	4512	L. 11.07	L. 49,947.84
	Total Price			L. 49,947.84

Request Number : 696-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	B05BB0202 DEXTROSA + CLORURO DE SODIO 5%+0.45% 500ml (165-01-17)	2700	L. 15.34	L. 41,418.00
	B05BB0206 LACTATO DE SODIO + ELECTROLITOS SOL HARTMAN 1000ml (165-01-22)	3006	L. 18.00	L. 54,108.00
	Total Price			L. 95,526.00

Request Number : 681-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	B05XA0303 SODIO (cloruro) 0.9% en 500 mL(165-01-03)	816	L. 11.07	L. 9,033.12
	Total Price			L. 9,033.12

Request Number : 3001-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	6000	L. 0.19	L. 1,140.00
	N03AB0203 FENITOINA 100mg (120-00-05)	2000	L. 1.50	L. 3,000.00

Total Price			L. 4,140.00
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Request Number : 799-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	B03XA0101 ERITROPOYETINA alfa RECOMBINANTE HUMANA 2,000 UI.	700	L. 59.80	L. 41,861.05
	Total Price			L. 41,861.05

Request Number : 3035-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	A11HA02 PIRIDOXINA (Vitamina B6) (clorhidrato) 50 mg (165-00-05)	1500	L. 0.31	L. 465.90
	A12AX00 CALCIO (carbonato) 600mg (elemental) + VITAMINA D 200 UI (125-04-02)	1500	L. 0.77	L. 1,155.00
	C09CA04 IRBESARTAN 300mg (115-02-54)	50000	L. 1.10	L. 55,085.00
	C10AA0501 ATORVASTATINA 40mg	5600	L. 0.60	L. 3,360.00
	H03AA01 LEVOTIROXINA (sódica) 100 mcg TAB (150-06-02)	1000	L. 0.57	L. 571.20
	M01AE17 DESKETOPROFENO (trometanol) 25mg/mL (100-00-06)	500	L. 14.09	L. 7,043.75
	R03BB0101 IPRATROPIO (bromuro) 250 mcg/mL FC (130-00-09)	480	L. 21.66	L. 10,396.80
	Total Price			L. 78,077.64

Request Number : 786-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	N02AA0101 MORFINA (sulfato o clorhidrato) 10mg/mL	30	L. 22.83	L. 684.93
	Total Price			L. 684.93

Request Number : 2040-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	A11AA0301 MULTIVITAMINAS ADULTOS (165-00-01)	7000	L. 0.34	L. 2,380.00
	C01AA0501 DIGOXINA 0.25 mg TB (115-04-01)	1000	L. 0.69	L. 690.00
	C07AB0700 BISOPROLOL (fumarato o hemifumarato) 2.5mg	2000	L. 0.75	L. 1,500.00
	C08CA01 AMLODIPINO (besilato) 10mg	2000	L. 0.38	L. 758.00
	H03AA01 LEVOTIROXINA (sódica) 100 mcg TAB (150-06-02)	1000	L. 0.57	L. 571.20
	J01CF04 OXACILINA (sódica) 1g (110-01-27)	1000	L. 9.45	L. 9,446.00
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	400	L. 6.43	L. 2,570.40
	Total Price			L. 17,915.60

Request Number : 740-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	20	L. 70.12	L. 1,402.32
	Total Price			L. 1,402.32

Request Number : 2060-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	A10BA02 METFORMINA 850 mg TB (155-00-32)	50370	L. 0.31	L. 15,534.11
	Total Price			L. 15,534.11

Request Number : 3046-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE TELA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	2000	L. 2.19	L. 4,380.00
	Total Price			L. 4,380.00

TOTAL L. 318,502.61

HOSPITAL SAN FELIPE

Request Number : 2069-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	A10BA02 METFORMINA 850 mg TB (155-00-32)	200000	L. 0.31	L. 61,680.00
	Total Price			L. 61,680.00

TOTAL L. 61,680.00

TOTAL DIA L. 5008,352.31

HOSPITAL SAN FELIPE

Request Number : 2069-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN FELIPE	A10BA02 METFORMINA 850 mg TB (155-00-32)	200000	L. 0.31	L. 61,680.00
	Total Price			L. 61,680.00

TOTAL L. 61,680.00

REGION DEPARTAMENTAL COMAYAGUA

Request Number : 3093-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	P01CA0201 BENZNIDAZOL 100 mg	1500	L. 11.25	L. 16,878.60
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	300	L. 34.87	L. 10,460.34
	Total Price			L. 27,338.94

Request Number : 2051-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	A10BA02 METFORMINA 850 mg TB (155-00-32)	12990	L. 0.31	L. 4,006.12
	Total Price			L. 4,006.12

Request Number : 1733-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	200000	L. 0.34	L. 68,000.00
	Total Price			L. 68,000.00

Request Number : 3012-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	33000	L. 0.19	L. 6,270.00
	N03AB0203 FENITOINA 100mg (120-00-05)	50000	L. 1.50	L. 75,000.00
	Total Price			L. 81,270.00

Request Number : 807-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	N03AE01 CLONAZEPAM 2 mg TB (120-00-12)	2400	L. 0.39	L. 936.00
	N05BA06 LORAZEPAM 2mg	4000	L. 0.34	L. 1,360.00
	N06AA02 IMIPRAMINA (clorhidrato) 25 mg TB (120-04-05)	5500	L. 0.86	L. 4,706.90
	Total Price			L. 7,002.90

Request Number : 712-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	B05BA0303 DEXTROSA EN AGUA 5% en 250 ml	150	L. 13.31	L. 1,996.50
	B05BA0304 DEXTROSA EN AGUA 5% BOLSA 500ml (165-01-08)	90	L. 13.90	L. 1,251.00
	B05BB0200 DEXTROSA + CLORURO DE SODIO 5%+0.3% 250ml	50	L. 13.90	L. 695.00
	B05BB0201 DEXTROSA + CLORURO DE SODIO 5%+0.3% 500ml (165-01-16)	90	L. 15.34	L. 1,380.60
	B05BB0202 DEXTROSA + CLORURO DE SODIO 5%+0.45% 500ml (165-01-17)	90	L. 15.34	L. 1,380.60
	B05BB0205 DEXTROSA + CLORURO DE SODIO 5%+0.9% 500ml (165-01-20)	30	L. 15.70	L. 471.00
	B05XA0302 SODIO (cloruro) 0.9% en 250 mL	50	L. 13.90	L. 695.00
	V07AB0001 AGUA DESTILADA 500 ml.(165-04-01)	24	L. 11.47	L. 275.28
	Total Price			L. 8,144.98

Request Number : 3012-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	33000	L. 0.19	L. 6,270.00
	N03AB0203 FENITOINA 100mg (120-00-05)	50000	L. 1.50	L. 75,000.00
	Total Price			L. 81,270.00

Request Number : 2051-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL COMAYAGUA	A10BA02 METFORMINA 850 mg TB (155-00-32)	12990	L. 0.31	L. 4,006.12
	Total Price			L. 4,006.12
TOTAL			L.	281,039.06

HOSPITAL SANTA TERESA

Request Number : 724-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	B05BA0300 DEXTROSA EN AGUA 10% 250ml (165-01-11)	108	L. 19.00	L. 2,052.00
	B05BA0303 DEXTROSA EN AGUA 5% en 250 ml	150	L. 13.31	L. 1,996.50
	B05BB0203 DEXTROSA + CLORURO DE SODIO 5%+0.45% 1000ml (165-01-18)	828	L. 17.50	L. 14,490.00
	B05BB0206 LACTATO DE SODIO + ELECTROLITOS SOL HARTMAN 1000ml (165-01-22)	1512	L. 18.00	L. 27,216.00
	B05XA0302 SODIO (cloruro) 0.9% en 250 mL	450	L. 13.90	L. 6,255.00
	Total Price			L. 52,009.50

Request Number : 835-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	4000	L. 0.42	L. 1,680.00
	N04AA0200 BIPERIDENO (clorhidrato) 2 mg (120-02-50)	500	L. 0.60	L. 299.00
	N05BA06 LORAZEPAM 2mg	6000	L. 0.34	L. 2,040.00
	Total Price			L. 4,019.00

Request Number : 836-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA TERESA	J06BB01 INMUNOGLOBULINA ANTI D(RH+) 0.3 mg/mL ó 1500UI JE/P (155-01-00)	16	L. 702.32	L. 11,237.09
	Total Price			L. 11,237.09

Request Number : 4017-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
	A03FA0100 METOCLOPRAMIDA 5mg/ml solución inyectable (145-01-01)	700	L. 4.10	L. 2,870.00
	A03FA0101 METOCLOPRAMIDA 10mg TAB (145-01-00)	2000	L. 0.34	L. 685.40
	B02BA0102 VITAMINA K1 (Fitomenadiona) 10mg/1mL AM (130-01-05)	200	L. 4.48	L. 896.00
	B03AA0701 HIERRO (sulfato) 300mg (equivalente a 60mg de hierro elemental) SULFATO FERROSO 300 mg.	13000	L. 0.12	L. 1,560.00
	B03BB0100 ACIDO FOLICO 1 mg (125-00-00)	47000	L. 0.11	L. 5,353.30
	B05XA01 POTASIO (cloruro) 20 mEq/10 mL	200	L. 5.08	L. 1,016.00
	B05XA05 MAGNESIO (sulfato heptahidrato) 10% (100mg/mL)(120-00-10)	600	L. 5.75	L. 3,450.00

HOSPITAL SANTA TERESA

C01BD0101 AMIODARONA (clorhidrato) 200 mg	510	L.	2.50	L.	1,275.00
C01CA04 DOPAMINA (clorhidrato) 40mg/mL (115-05-01)	200	L.	13.16	L.	2,632.96
C01CA07 DOBUTAMINA (clorhidrato) 12.5mg/mL VIAL (115-05-03)	200	L.	30.00	L.	6,000.00
C03AA03 HIDROCLOROTIAZIDA 25mg (115-03-04)	8000	L.	0.45	L.	3,604.00
C08CA01 AMLODIPINO (besilato) 10mg	9000	L.	0.38	L.	3,411.00
C09AA0201 ENALAPRIL (maleato) 20mg (115-02-11)	14000	L.	0.19	L.	2,672.60
D07AA02 HIDROCORTISONA Tubo (acetato) al 1% (equivalente a 10mg/g)	500	L.	11.12	L.	5,562.00
D08AG02 YODO 10% +polivinil pirrolidona (yodo povidona)	150	L.	40.00	L.	6,000.00
G01AF01 METRONIDAZOL 0.75%	48	L.	19.75	L.	948.00
H02AB0201 DEXAMETASONA (fosfato) 4mg/mL	800	L.	5.70	L.	4,560.00
H03BA02 PROPILTIOURACILO 50 mg (150-06-01)	3200	L.	3.09	L.	9,888.00
J01AA02 DOXICICLINA (clorhidrato o hclato) 100mg CAP (110-01-75)	1400	L.	0.70	L.	980.00
J01CA01 AMPICILINA (anhidra o sódica) 1g	2300	L.	5.50	L.	12,650.00
J01CE08 PENICILINA G BENZATÍNICA 1,200.000 UI(110-01-26)	500	L.	4.40	L.	2,200.00
J01CF0101 DICLOXACILINA (sódica) 500 mg	10000	L.	2.35	L.	23,500.00
J01CR05 PIPERACILINA (sódica) 4g + TAZOBACTAM (sódico) 500mg (110-01-43)	50	L.	50.86	L.	2,543.00
J01DB01 CEFALEXINA (monohidrato) 500 mg (110-01-36)	15000	L.	2.74	L.	41,100.00
J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	1400	L.	6.43	L.	8,996.40
J01GB0601 AMIKACINA (sulfato) 250mg/mL	1125	L.	13.92	L.	15,660.00
J01MA0201 CIPROFLOXACINA (clorhidrato) 500 mg TAB (110-01-41)	16000	L.	1.04	L.	16,640.00
M01AE0100 IBUPROFENO 100mg/5ml	864	L.	10.88	L.	9,398.94
M01AE0101 IBUPROFENO 600mg	20000	L.	0.39	L.	7,800.00
N01BB0202 LIDOCAINA 2% (equivalente a 20mg/mL); sin preservantes derivados del parabeno)	300	L.	23.00	L.	6,900.00
N01BB51 BUPIVACAINA 5mg/mL (0.5%)+ GLUCOSA 7.5-8%/mL; (sin preservantes derivados del parabeno)	150	L.	10.83	L.	1,624.50
N02AX02 TRAMADOL (clorhidrato) 50mg/mL	1800	L.	2.59	L.	4,662.00
N02BE0101 ACETAMINOFEN 120mg/5mL (100-00-00)	800	L.	8.30	L.	6,640.00
N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	20000	L.	0.11	L.	2,172.00
N03AB0201 FENITOINA (sódica) 50 mg/mL (120-00-04)	100	L.	15.75	L.	1,575.00
N03AG0101 VALPROATO (sódico) 200 mg/mL (120-00-52)	100	L.	40.78	L.	4,078.00
P01AB02 TINIDAZOL 500mg (110-00-52)	4000	L.	1.11	L.	4,436.40
R03AC0200 SALBUTAMOL 100MCG/DISPARO (130-00-58)	900	L.	28.52	L.	25,669.71
R03BB0100 IPRATROPIO (bromuro) 20 mcg/disparo(130-00-10)	150	L.	53.90	L.	8,085.00
R03BB0101 IPRATROPIO (bromuro) 250 mcg/mL FC (130-00-09)	150	L.	21.66	L.	3,249.00
R06AA0200 DIFENHIDRAMINA 2.5mg/ml S.O	480	L.	7.25	L.	3,479.47
R06AA0203 DIFENHIDRAMINA 50 MG CAP	6000	L.	0.35	L.	2,100.00
S01AA01 CLORANFENICOL 0.5% Colirio (150-00-01)	150	L.	10.21	L.	1,530.90
V03AB15 NALOXONA (clorhidrato) 0.4 mg/mL	18	L.	112.52	L.	2,025.36
V07AV0001 JALEA LUBRICANTE ESTERIL (135-07-00)	23	L.	22.87	L.	525.98
Total Price				L.	282,605.90

TOTAL L. 349,871.49

HOSPITAL ROBERTO SUAZO CORDOBA La Paz

Request Number : 840-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	B05AA0102 ALBÚMINA HUMANA 20% (200g/l)	10	L. 590.14	L. 5,901.40
	Total Price			L. 5,901.40

Request Number : 839-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	4000	L. 0.42	L. 1,680.00
	N03AE01 CLONAZEPAM 2 mg TB (120-00-12)	5000	L. 0.39	L. 1,950.00
	Total Price			L. 3,630.00

Request Number : 4036-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ROBERTO SUAZO CORDOBA La Paz	A02BC0101 OMEPRAZOL 40 MG/ML .2ML AM(145-00-05)	159	L. 11.50	L. 1,828.56
	A03BA0300 HIOSCINA (butilbromuro) 10mg	4000	L. 2.32	L. 9,294.00
	A03BA0301 HIOSCINA (butilbromuro) 20mg/mL	20	L. 5.66	L. 113.20
	A03FA0100 METOCLOPRAMIDA 5mg/ml solución inyectable (145-01-01)	500	L. 4.10	L. 2,050.00
	A06AD11 LACTULOSA 10 g/15 mL (145-03-02)	27	L. 105.00	L. 2,835.00
	A10BA02 METFORMINA 850 mg TB (155-00-32)	10020	L. 0.31	L. 3,090.17
	A11HA02 PIRIDOXINA (Vitamina B6) (clorhidrato) 50 mg (165-00-05)	500	L. 0.31	L. 155.30
	A12AX00 CALCIO (carbonato) 600mg (elemental) + VITAMINA D 200 UI (125-04-02)	5300	L. 0.77	L. 4,081.00
	A12CB01 ZINC (sulfato) 2mg/mL (145-04-01)	20	L. 34.50	L. 690.00
	B01AC04 CLOPIDOGREL (bisulfato) 75mg	3000	L. 1.86	L. 5,580.00
	B05XA05 MAGNESIO (sulfato heptahidrato) 10% (100mg/mL)(120-00-10)	300	L. 5.75	L. 1,725.00
	C01AA0502 DIGOXINA 0.25 mg/mL AM (115-04-02)	6	L. 27.09	L. 162.54
	C09CA04 IRBESARTAN 300mg (115-02-54)	20000	L. 1.10	L. 22,034.00
	H02AB0201 DEXAMETASONA (fosfato) 4mg/mL	1000	L. 5.70	L. 5,700.00
	J01CF0100 DICLOXACILINA (sódica) 125 mg/5mL	100	L. 21.78	L. 2,178.00
	J01CF0101 DICLOXACILINA (sódica) 500 mg	3000	L. 2.35	L. 7,050.00
	J01DH51 IMIPENEM (monohidrato) 500mg + CILASTATINA (sódica) 500mg. (110-01-44)	123	L. 107.74	L. 13,252.02
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	600	L. 6.43	L. 3,855.60
	N03AB0203 FENITOINA 100mg (120-00-05)	3000	L. 1.50	L. 4,500.00
	R03BB0101 IPRATROPIO (bromuro) 250 mcg/mL FC (130-00-09)	100	L. 21.66	L. 2,166.00
R03DA05 AMINOFILINA 250mg (130-00-00)	37	L. 11.19	L. 413.88	
	Total Price			L. 92,754.27

TOTAL L. 102,285.67

HOSPITAL PUERTO LEMPIRA

Request Number : 827-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO LEMPIRA	B02BD02 FACTOR ANTIHEMOFILICO HUMANO (Factor VIII) 250-500UI (130-03-00)	100	L. 1,982.78	L. 198,278.30
	Total Price			L. 198,278.30

Request Number : 834-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO LEMPIRA	G02AB01 ERGONOVINA (maleato) (metilergometrina) 0.2 mg/1mL (150-04-00)	100	L. 5.97	L. 597.00
	J06AA0301 SUERO ANTIOFIDICO polivalente anticrotálico	50	L. 417.81	L. 20,890.69
	Total Price			L. 21,487.69

Request Number : 833-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL PUERTO LEMPIRA	N01AH01 - FENTANILO (citrato) 0.05mg/mL (100-01-00)	100	L. 32.00	L. 3,200.00
	Total Price			L. 3,200.00

TOTAL L. 222,965.99

HOSPITAL SANTA BARBARA

Request Number : 1755-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA BARBARA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	200000	L. 0.34	L. 68,000.00
	Total Price			L. 68,000.00

Request Number : 3060-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA BARBARA	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	7000	L. 2.19	L. 15,330.00
	Total Price			L. 15,330.00

Request Number : 3000-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA BARBARA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	89000	L. 0.19	L. 16,910.00
	N03AB0203 FENITOINA 100mg (120-00-05)	1000	L. 1.50	L. 1,500.00
	Total Price			L. 18,410.00

Request Number : 4037-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SANTA BARBARA	B03BB0100 ACIDO FOLICO 1 mg (125-00-00)	30000	L. 0.11	L. 3,417.00
	Total Price			L. 3,417.00

TOTAL L. 105,157.00

HOSPITAL SAN MARCOS DE OCOTEPEQUE

Request Number : 726-ANT-ORH-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN MARCOS DE OCOTEPEQUE	B05BB0205 DEXTROSA + CLORURO DE SODIO 5%+0.9% 500ml (165-01-20)	420	L. 15.70	L. 6,594.00
	Total Price			L. 6,594.00

Request Number : 4021-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN MARCOS DE OCOTEPEQUE	A06AD11 LACTULOSA 10 g/15 mL (145-03-02)	60	L. 105.00	L. 6,300.00
	B01AC04 CLOPIDOGREL (bisulfato) 75mg	200	L. 1.86	L. 372.00
	B03AA0701 HIERRO (sulfato) 300mg (equivalente a 60mg de hierro elemental) SULFATO FERROSO 300 mg.	10000	L. 0.12	L. 1,200.00
	J01CE0101 PENICILINA G CRISTALINA 10,000.000 UI	100	L. 62.00	L. 6,200.00
	J01CE09 PENICILINA G PROCAINICA 4,000.000 UI(110-01-25)	6	L. 10.77	L. 64.62
	J01MA0201 CIPROFLOXACINA (clorhidrato) 500 mg TAB (110-01-41)	2000	L. 1.04	L. 2,080.00
	J05AB0103 ACICLOVIR 400mg (110-09-02)	300	L. 1.63	L. 489.00
	N01AB08 SEVOFLUORANE 100% v/v 250ml	10	L. 2,585.00	L. 25,850.00
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	10000	L. 0.11	L. 1,086.00
	N03AB0203 FENITOINA 100mg (120-00-05)	2000	L. 1.50	L. 3,000.00
	N03AG0101 VALPROATO (sódico) 200 mg/mL (120-00-52)	100	L. 40.78	L. 4,078.00
	P01AB0101 METRONIDAZOL 500 mg (110-00-02)	150	L. 9.28	L. 1,392.00
	R03AC0202 SALBUTAMOL (sulfato) 5 mg/mL (0.5%) FC (130-00-03)	96	L. 19.44	L. 1,866.24
	R03DA0401 TEOFILINA 250 mg.	2500	L. 52.44	L. 131,100.00
	R06AA0201 DIFENHIDRAMINA (clorhidrato) 10mg/mL	50	L. 17.16	L. 858.00
S01AA01 CLORANFENICOL 0.5% Colirio (150-00-01)	25	L. 10.21	L. 255.15	
	Total Price			L. 186,191.00

Request Number : 2089-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN MARCOS DE OCOTEPEQUE	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	11000	L. 0.19	L. 2,090.00
	N03AB0203 FENITOINA 100mg (120-00-05)	3000	L. 1.50	L. 4,500.00
	Total Price			L. 6,590.00

Request Number : 831-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN MARCOS DE OCOTEPEQUE	N05AD0100 HALOPERIDOL 5 mg/mL Amp (120-04-04)	5	L. 4.79	L. 23.95
	N05BA06 LORAZEPAM 2mg	100	L. 0.34	L. 34.00
	Total Price			L. 57.95

Request Number : 3043-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN MARCOS DE OCOTEPEQUE	C03DA01 ESPIRONOLACTONA 100mg (115-03-52)	2000	L. 2.19	L. 4,380.00

HOSPITAL SAN MARCOS DE OCOTEPEQUE	Total Price			L. 4,380.00
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Request Number : 2045-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN MARCOS DE OCOTEPEQUE	A10BA02 METFORMINA 850 mg TB (155-00-32)	20010	L. 0.31	L. 6,171.08
	Total Price			L. 6,171.08

Request Number : 832-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL SAN MARCOS DE OCOTEPEQUE	A10AB01 INSULINA CRISTALINA 100 UI/ml (155-00-00)	10	L. 70.12	L. 701.16
	Total Price			L. 701.16

TOTAL	L. 210,685.19
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HOSPITAL DE ROATAN

Request Number : 837-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	3000	L. 0.42	L. 1,260.00
	N03AE01 CLONAZEPAM 2 mg TB (120-00-12)	1000	L. 0.39	L. 390.00
	N05BA06 LORAZEPAM 2mg	1000	L. 0.34	L. 340.00
	Total Price			L. 1,990.00

Request Number : 2097-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	20000	L. 0.19	L. 3,800.00
	N03AB0203 FENITOINA 100mg (120-00-05)	2500	L. 1.50	L. 3,750.00
	Total Price			L. 7,550.00

Request Number : 838-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DE ROATAN	C02DB0200 HIDRALAZINA (clorhidrato) 20 mg/mL(115-02-07)	55	L. 94.72	L. 5,209.82
	H01BB02 OXITOCINA 10 UI (150-04-50)	500	L. 9.00	L. 4,500.00
	J06BB01 INMUNOGLOBULINA ANTI D(RH+) 0.3 mg/mL ó 1500UI JE/P (155-01-00)	5	L. 702.32	L. 3,511.59
	Total Price			L. 13,221.41

Request Number : 4026-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
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HOSPITAL DE ROATAN	A02BC0101 OMEPRAZOL 40 MG/ML .2ML AM(145-00-05)	100	L.	11.50	L.	1,150.04
	A11AA0301 MULTIVITAMINAS ADULTOS (165-00-01)	20000	L.	0.34	L.	6,800.00
	A12AA0300 CALCIO (gluconato) 10% (175-02-02)	100	L.	6.84	L.	684.00
	C01AA0501 DIGOXINA 0.25 mg TB (115-04-01)	30	L.	0.69	L.	20.70
	C01CA24 ADRENALINA (clorhidrato) 1:1000/1mL (1mg/mL)(115-05-00)	100	L.	5.71	L.	571.20
	C09AA0201 ENALAPRIL (maleato) 20mg (115-02-11)	10000	L.	0.19	L.	1,909.00
	D08AC02 CLORHEXIDINA (gluconato) 20% P/V	30	L.	265.00	L.	7,950.00
	J01CE0101 PENICILINA G CRISTALINA 10,000.000 UI	200	L.	62.00	L.	12,400.00
	J01FF0100 CLINDAMICINA (palmitato) 75mg/5mL FCO	1503	L.	303.00	L.	455,409.00
	J01FF0101 CLINDAMICINA (fosfato) 150mg/mL(110-01-11)	5300	L.	6.43	L.	34,057.80
	J02AC0102 FLUCONAZOL 150 mg CAP	1000	L.	1.40	L.	1,400.00
	M01AE0101 IBUPROFENO 600mg	20000	L.	0.39	L.	7,800.00
	N07CA0001 DIMENHIDRINATO 50mg/ml	150	L.	3.76	L.	564.00
	P01AB0101 METRONIDAZOL 500 mg (110-00-02)	500	L.	9.28	L.	4,640.00
	R03AC0200 SALBUTAMOL 100MCG/DISPARO (130-00-58)	300	L.	28.52	L.	8,556.57
	R03AC0202 SALBUTAMOL (sulfato) 5 mg/mL (0.5%) FC (130-00-03)	150	L.	19.44	L.	2,916.00
	R03BB0101 IPRATROPIO (bromuro) 250 mcg/mL FC (130-00-09)	150	L.	21.66	L.	3,249.00
	Total Price				L.	550,077.30

TOTAL	L.	572,838.71
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HOSPITAL DE ROATAN

Request Number : 4038-ANT-ORH-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ANIBAL MURILLO	A10BB01 GLIBENCLAMIDA 5 mg TB (155-00-31)	200000	L. 0.12	L. 23,780.00
	Total Price			L. 23,780.00

TOTAL	L.	23,780.00
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TOTAL DIA	L.	1930,303.11
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REGION METROPOLITANA TEGUCIGALPA

Request Number : 1730-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA TEGUCIGALPA	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	200000	L. 0.34	L. 68,000.00
	Total Price			L. 68,000.00

Request Number : 3023-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA TEGUCIGALPA	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	130000	L. 0.19	L. 24,700.00
	N03AB0203 FENITOINA 100mg (120-00-05)	38200	L. 1.50	L. 57,300.00

Total Price				L. 82,000.00
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Request Number : 4002-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA TEGUCIGALPA	P01CA0201 BENZNIDAZOL 100 mg	600	L. 11.25	L. 6,751.44
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	300	L. 34.87	L. 10,460.34
	Total Price			L. 17,211.78

Request Number : 2076-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA TEGUCIGALPA	A10BA02 METFORMINA 850 mg TB (155-00-32)	294000	L. 0.31	L. 90,669.60
	Total Price			L. 90,669.60

Request Number : 746-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION METROPOLITANA TEGUCIGALPA	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	18000	L. 0.42	L. 7,560.00
	Total Price			L. 7,560.00

TOTAL	L. 265,441.38
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REGION DEPARTAMENTAL YORO

Request Number : 4003-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL YORO	P01CA0201 BENZNIDAZOL 100 mg	3000	L. 11.25	L. 33,757.20
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	300	L. 34.87	L. 10,460.34
	Total Price			L. 44,217.54

TOTAL	L. 44,217.54
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REGION DEPARTAMENTAL FRANCISCO MORAZAN

Request Number : 3090-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	P01CA0201 BENZNIDAZOL 100 mg	1200	L. 11.25	L. 13,502.88
	P01CB01 ANTIMONIATO DE MEGLUMINA 1.5 g/5mL (110-03-00)	600	L. 34.87	L. 20,920.68
	Total Price			L. 34,423.56

Request Number : 2034-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	C09AA0201 ENALAPRIL (maleato) 20mg (115-02-11)	1000	L. 0.19	L. 190.90
	N02BE0102 ACETAMINOFEN TAB 500mg (100-00-01)	5100	L. 0.11	L. 553.86
	S01AA01 CLORANFENICOL 0.5% Colirio (150-00-01)	2873	L. 10.21	L. 29,321.84
	Total Price			L. 30,066.60

Request Number : 3014-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	B01AC06 ACIDO ACETIL SALICILICO TAB 100mg	96900	L. 0.19	L. 18,411.00
	Total Price			L. 18,411.00

Request Number : 1973-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	C02AB01 ALFAMETILDOPA 500mg (115-02-01)	2500	L. 2.58	L. 6,450.00
	Total Price			L. 6,450.00

Request Number : 2053-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	A10BA02 METFORMINA 850 mg TB (155-00-32)	76710	L. 0.31	L. 23,657.37
	Total Price			L. 23,657.37

Request Number : 749-ANT-ORD-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	N03AA0201 FENOBARBITAL (sódico) 100 mg TB (120-00-07)	43000	L. 0.42	L. 18,060.00
	Total Price			L. 18,060.00

Request Number : 1731-ANT-ORD-BG1-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	A11AA0300 MULTIVITAMINAS + ACIDO FOLICO 0.5mg + FLUOR 1 mg + HIERRO 60mg elemental para uso prenatal (165-00-02)	102000	L. 0.34	L. 34,680.00
	Total Price			L. 34,680.00

Request Number : 690-ANT-ORD-BI-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
REGION DEPARTAMENTAL FRANCISCO MORAZAN	G02BA02 T de COBRE, (T Cu 380 A)(Dispositivo Intrauterino) (150-00-53)	250	L. 5.75	L. 1,438.50
	G02BB0000 CONDON MASCULINO (150-00-52)	21600	L. 0.51	L. 11,076.48
	G03AA07 ETINILESTRADIOL 0.03mg + L-NORGESTREL 0.15mg (150-00-01)	10800	L. 6.25	L. 67,521.60
	G03AC0601 MEDROXIPROGESTERONA (acetato) 150mg/mL (160-00-31)	1000	L. 18.24	L. 18,235.50

G03AC08 ETONORGESTREL 68 mg	432	L.	188.02	L.	81,224.64
MQJ-K-009 Jeringa Desechable de 1 ml BLACK 22GX1 / 0.7X25mm	1000	L.	1.82	L.	1,820.00
Total Price				L.	181,316.70

TOTAL	L.	347,065.23
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HOSPITAL DEL SUR

Request Number : 841-ANT-ORH-BG2-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL DEL SUR	A10AC01 INSULINA ISOFANICA HUMANA NPH 100 UI/ml (155-00-01)	2000	L. 89.12	L. 178,233.41
	Total Price			L. 178,233.40

TOTAL	L.	178,233.40
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HOSPITAL ESCUELA

Request Number : 4043-ANT-ORH-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ESCUELA	396-01-84 BIBERONES	3	L. 38.50	L. 115.50
	MIO-MED-004 MAMADERAS	3	L. 6.50	L. 19.50
	Total Price			L. 135.00

Request Number : 4044-ANT-ORH-ARV-17 -

Recipient	Item	Dose/Quantity	Unit Price	Total Price
HOSPITAL ESCUELA	A11-180-57 LECHE NAN CONFORT 24X400G XP	40	L. 120.08	L. 4,803.22
	Total Price			L. 4,803.22

TOTAL	L.	4,938.22
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TOTAL DIA	L.	839,895.77
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TOTAL SEMANA	L.	8375,352.97
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