

**TENDER REFERENCE NO.: KK/215/2025/LAB(TC)**

**MINISTRY OF HEALTH  
NEGARA BRUNEI DARUSSALAM**

**THE PROVISION OF OUTSOURCING CLINICAL  
LABORATORY TESTS FOR NATIONAL BLOOD  
TRANSFUSION REFERENCE LABORATORY,  
DEPARTMENT OF LABORATORY SERVICES, MINISTRY  
OF HEALTH FOR A PERIOD OF FIVE (5) YEAR USAGE**

**TENDER FEES : \$500.00**

**RECEIPT NO. :**

**CLOSING DATE : ON TUESDAY, 19<sup>TH</sup> August 2025**

**TIME : 2.00 PM**

**FOA :**

**THE CHAIRMAN  
MINI TENDER BOARD, TENDER BOX  
GROUND FLOOR, MINISTRY OF HEALTH  
COMMONWEALTH DRIVE  
BANDAR SERI BEGAWAN BB3910  
NEGARA BRUNEI DARUSSALAM**

**(CLUSTERING)**

## SECTION 2

### SPECIFICATIONS AND REQUIREMENTS

TENDER REFERENCE NO.: KK/215/2025/LAB(TC)

#### INVITATION TO TENDER

THE PROVISION OF OUTSOURCING CLINICAL LABORATORY TESTS FOR NATIONAL BLOOD TRANSFUSION REFERENCE LABORATORY, DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH FOR A PERIOD OF FIVE (5) YEARS USAGE

NO.	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKAGING SIZE	TOTAL ESTIMATE USAGE/YEAR
	<b>HLA</b>		
	<b>HLA Typing</b>		
1	HLA ABC Low resolution	TEST	65
2	HLA DRB/DQB low resolution	TEST	65
3	HLA 11 Loci by NGS	TEST	15
4	Add on charge for more than 1 donor HLA Typing	TEST	5
	<b>HLA Antibody Screen (Panel Reactive Antibody)</b>	TEST	
5	HLA Class I & II by Flow	TEST	30
	<b>HLA Antibody Identification (Donor Specific Antibody)</b>	TEST	
6	HLA Class I only	TEST	1
7	HLA Class II only	TEST	1
8	HLA Class I & II	TEST	35
9	C1q HLA Class I only	TEST	1
10	C1q HLA Class I only	TEST	1
	<b>Crossmatch (for HLA)</b>	TEST	
11	Complement Dependent Cytotoxicity (CDC)	TEST	30
12	CDC - auto crossmatch	TEST	1
13	Flow with pronase	TEST	30
14	Flow without pronase	TEST	1
15	HLA-B27 CDC (Screening)	TEST	15
16	HLA B-27 HR (PCR)	TEST	5
17	HLAB*5701	TEST	60

NO.	SPECIFICATIONS AND REQUIREMENTS											
1	The testing laboratory(ies) shall be accredited (complied to the requirement of ISO 15189) or licensed to perform laboratory testing in accordance to any state statues, regulation, relevant laws, by-laws or guidelines issued by their local Health Authority as well as Brunei Health Authority from time to time.											
2	The vendor shall have necessary in-house facilities to perform required preparations/processes which comply with the requirements specified in ISO 15189 prior sending specimens to the testing laboratory. The Laboratory Services has the right to conduct site visit of the vendor's premise at any given time of the vendor premise.											
3	External Quality Program shall be conducted accordingly and make available upon request. Failure to maintain accreditation or licensure is cause for termination of this agreement.											
4	The Vendor shall provide the Laboratory Services with the copy of supporting documents in both softcopy and hardcopy which include <ul style="list-style-type: none"><li>a. Accreditation certificates or licensure of the testing laboratory</li><li>b. Schedule of accredited tests</li><li>c. Report of External Proficiency Evaluation</li></ul>											
5	The information on sample type, no tubes required, performing lab(s) and turn-around-time (TAT) must be provided and updated annually as the following format below: <table><tr><td>Name of tests</td><td>Sample type</td><td>No of tube required</td><td>Performing Lab</td><td>TAT</td></tr></table>						Name of tests	Sample type	No of tube required	Performing Lab	TAT	
Name of tests	Sample type	No of tube required	Performing Lab	TAT								
6	Vendor shall make their own arrangement to collect specimen together with the requisite form from the designated Laboratories under acceptable condition. Sample must be collected between 8.00 am to 12.00pm every working day. In case of any emergency investigation required, the sample must be collected as and when informed.											
7	The list of testing laboratory(ies) to which the investigation is to be outsourced shall be provided and updated annually as per following format below: <table><tr><td>Name of the Laboratory</td><td>Address of the Laboratory</td><td>Accreditation/ License Number</td><td>Date of expiry of Accreditation/ License</td></tr></table>						Name of the Laboratory	Address of the Laboratory	Accreditation/ License Number	Date of expiry of Accreditation/ License		
Name of the Laboratory	Address of the Laboratory	Accreditation/ License Number	Date of expiry of Accreditation/ License									
8	The information on the methodology of testing, sample collection and handling of the individual quoted tests shall be provided and updated annually as following format below: <table><tr><td>Name of the tests</td><td>Name and address of performing laboratory</td><td>Method / Technique used</td><td>Specimen requirement (Including special instruction and type of tube used)</td><td>Storage, transport and temperature requirements- (Including sensitive tests)</td><td>Maximum time required for submission of report to the Laboratory (Turn-around-time TAT)</td></tr></table>						Name of the tests	Name and address of performing laboratory	Method / Technique used	Specimen requirement (Including special instruction and type of tube used)	Storage, transport and temperature requirements- (Including sensitive tests)	Maximum time required for submission of report to the Laboratory (Turn-around-time TAT)
Name of the tests	Name and address of performing laboratory	Method / Technique used	Specimen requirement (Including special instruction and type of tube used)	Storage, transport and temperature requirements- (Including sensitive tests)	Maximum time required for submission of report to the Laboratory (Turn-around-time TAT)							
9	Performing testing laboratories must be agreeable to Laboratory Services and preferred testing lab includes and not limited to; HSA, MAYO CLINIC, NUH, NUHS, NUS, KKH, THOMSON and SGH.											
10	When in any case the quoted testing laboratories are not able to perform the test, vendor is responsible to cover the expenses for the test to be performed on alternative testing lab.											
11	Vendor shall incur <u>all expenses</u> associated for the outsourcing of the quoted tests which include transporting of samples, declaration of samples from the Laboratory Services to the testing laboratory(ies).											
12	The tubes that is available in Laboratory Services are plain, EDTA, sodium citrate, Heparin, Trisodium citrate tube, sterile urine bottle and sterile CSF bottle. Any tubes and/or bottles required for the test other than the above mentioned, shall be supplied by the vendor without extra charges. This include and not limited to EDTA transfix and Sodium Heparin.											
13	Any packing container that is required shall be provided by vendor at no extra charges.											
14	Vendor shall provide leak -proof container for collecting all samples to be outsourced.											
15	Sample shall be transported in leak-proof container to ensure that no damage or displacement of sample occurs during transportation											
16	The vendor shall pack the sample as per requirement of the testing and send to the testing laboratory within the stipulated time considering the integrity of sample.											

NO.	SPECIFICATIONS AND REQUIREMENTS
17	The Vendor shall be able to show temperature records of the containers at the various collection points. It is their responsibility to maintain the specimens at the required stated temperature.
18	The Vendor shall be responsible for the safe custody of the sample until being received by the testing Laboratory. The standard specimen custody form shall be used which will be regularly reviewed and approved by Laboratory Services
19	The conditions and regulations above are subject to changes. There may be amendment from time to time with mutual agreement from both parties during the contract period.
20	Vendor shall be capable of absorbing the workload throughout the operational contract agreement.
21	All test reports received from the testing laboratory(ies) shall be kept secured and confidential except as otherwise authorized by law of Brunei Darussalam. Under no circumstances shall any results, reports or data be used for any publication, written statement or advertisement without the written consent of the Head of Laboratory Services.
22	The results shall be sent by fax or emailed password protected document, and followed by original copy.
23	Three (3) copies of test reports shall be provided out of which two (2) copies should be sent to Head of the concerned laboratory of the Laboratory Services and the third copy should be enclosed with the monthly 'Laboratory Service Summary' and invoice for audit and financial purpose.
24	Training shall be provided, at no additional cost, as follows: The successful tenderer needs to ensure the key users are updated on any relevant information related to the laboratory testing. <b>They shall provide ONE off-site training for two (2) key users per year of contract.</b> All expenses for attending the training shall be borne by the vendor; full registration, air ticket, daily allowance, accommodation, transport to and from the airport and place of training. <b>Training may be in the form of operator's training, workshop, congress, international conference including 3<sup>rd</sup>-party conference, or other forms of training that is deemed appropriate and relevant.</b> Inviting speakers from overseas to give talks or presentations to the users on topics related to the laboratory testing as part of users' continuous education. Certificate of attendance is to be issued to all trainees after completion of training.
25	<b>EXIT CLAUSE:</b> The tender contract shall be automatically terminated even though tender has not yet expired and this shall be in effect due to, but not limited to, the following: 1. When the testing is no longer required or relevant i.e. test is obsolete, to the laboratory or the Department. 2. When the item(s) set out in this tender is/are no longer required by the laboratory or the Department. When the approved budget allocation for this tender contract has been used up before the tender contract expires whereby a renewal of tender shall be submitted by the user for an open advertisement subject to approval by the Mini Tender Board ( <i>Lembaga Tawaran Kecil</i> ).
26	<b>PRICE VALIDITY:</b> The quotation shall remain valid for 12 MONTHS from the final date for the submission of the quotation and no supplier may withdraw his/her quotation within that period. The Government reserves the right to extend this period if deemed necessary provided that such extension to the quotation validity period shall have written consent of the supplier(s).

<b>DELIVERY PERIOD AFTER PO ISSUED</b>	<b>SAMPLES IMMEDIATELY SEND ABROAD: TEST RESULTS AFTER 15 – 30 DAYS</b>	
Lab/Section/Unit	<b>DEPARTMENT OF LABORATORY SERVICES</b>	
Lab/Section/Unit Ref No.:	<b>NATIONAL BLOOD TRANSFUSION REFERENCE LABORATORY</b>	
Person to Contact	Name	: Ken Teo Shyh Kheng
	E-mail	: <a href="mailto:shykheng.teo@moh.gov.bn">shykheng.teo@moh.gov.bn</a>
	Tel. No.	: 2242424 ext 6622
<b>FOR ADMINISTRATION USE ONLY</b>		
PPM/PROC Ref. No.	PPM/PROC/2025/>50K/007(BDC-NBTRL)	
Advertisement Ref. No.		Date:

**SECTION 3**  
**FORMS TO BE USED**

**CONTENTS**

**SCHEDULE 1 - TENDER FORM**

**SCHEDULE 2 - INFORMATION SUMMARY**

**SCHEDULE 3 - SUB-CONTRACTS**

**SCHEDULE 4 - COMPANY BACKGROUND**

**SCHEDULE 5 - REFERENCES**

**SCHEDULE 6 - SUBMISSION OF SAMPLE**

**SCHEDULE 7 - LETTER OF DECLARATION**

**SCHEDULE 1**  
**TENDER FORM**

To:

**TENDER REFERENCE NO.: KK/215/2025/LAB(TC)**

**INVITATION TO TENDER**  
**THE PROVISION OF OUTSOURCING CLINICAL LABORATORY TESTS FOR NATIONAL BLOOD TRANSFUSION REFERENCE LABORATORY,**  
**DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH FOR A PERIOD OF FIVE (5) YEARS USAGE**

**TENDER OF (*name of tenderer*)** \_\_\_\_\_

Company/Business Registration No \_\_\_\_\_

Tender Closing Date \_\_\_\_\_

<b>DELIVERY PERIOD</b>	
------------------------	--

	USER'S REQUIREMENTS			VENDOR'S OFFER					
NO.	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKAGING SIZE	TOTAL ESTIMATE USAGE / YEAR	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKAGING SIZE	TOTAL QUANTITY OFFERED / YEAR	*COST PER UNIT (B\$)	TOTAL COSTS (B\$)
	HLA								
	HLA Typing								
1	HLA ABC Low resolution	test	65						
2	HLA DRB/DQB low resolution	test	65						

	USER'S REQUIREMENTS			VENDOR'S OFFER					
NO.	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKAGING SIZE	TOTAL ESTIMATE USAGE / YEAR	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKAGING SIZE	TOTAL QUANTITY OFFERED / YEAR	*COST PER UNIT (B\$)	TOTAL COSTS (B\$)
	<b>HLA</b>								
3	HLA 11 Loci by NGS	test	15						
4	Add on charge for more than 1 donor HLA Typing	test	5						
	<b>HLA Antibody Screen (Panel Reactive Antibody)</b>	test							
5	HLA Class I & II by Flow	test	30						
	<b>HLA Antibody Identidication (Donor Specific Antibody)</b>	test							
6	HLA Class I only	test	1						
7	HLA Class II only	test	1						
8	HLA Class I & II	test	35						
9	C1q HLA Class I only	test	1						
10	C1q HLA Class I only	test	1						
	<b>Crossmatch (for HLA)</b>	test							

	USER'S REQUIREMENTS			VENDOR'S OFFER					
NO.	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKAGING SIZE	TOTAL ESTIMATE USAGE / YEAR	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKAGING SIZE	TOTAL QUANTITY OFFERED / YEAR	*COST PER UNIT (B\$)	TOTAL COSTS (B\$)
	HLA								
11	Complement Dependent Cytotoxicity (CDC)	test	30						
12	CDC - auto crossmatch	test	1						
13	Flow with pronase	test	30						
14	Flow without pronase	test	1						
15	HLA-B27 CDC (Screening)	test	15						
16	HLA B-27 HR (PCR)	test	5						
17	HLAB*5701	test	60						



NO.	SPECIFICATIONS AND REQUIREMENTS					VENDOR'S OFFER (PLEASE STATE)
1	The testing laboratory(ies) shall be accredited (complied to the requirement of ISO 15189) or licensed to perform laboratory testing in accordance to any state statues, regulation, relevant laws, by-laws or guidelines issued by their local Health Authority as well as Brunei Health Authority from time to time.					
2	The vendor shall have necessary in-house facilities to perform required preparations/processes which comply with the requirements specified in ISO 15189 prior sending specimens to the testing laboratory. The Laboratory Services has the right to conduct site visit of the vendor's premise at any given time of the vendor premise.					
3	External Quality Program shall be conducted accordingly and make available upon request. Failure to maintain accreditation or licensure is cause for termination of this agreement.					
4	The Vendor shall provide the Laboratory Services with the copy of supporting documents in both softcopy and hardcopy which include a. Accreditation certificates or licensure of the testing laboratory b. Schedule of accredited tests c. Report of External Proficiency Evaluation					
5	The information on sample type, no tubes required, performing lab(s) and turn-around-time (TAT) must be provided and updated annually as the following format below:					
	Name of tests	Sample type	No of tube required	Performing Lab	TAT	
6	Vendor shall make their own arrangement to collect specimen together with the requisite form from the designated Laboratories under acceptable condition. Sample must be collected between 8.00 am to 12.00pm every working day. In case of any emergency investigation required, the sample must be collected as and when informed.					
7	The list of testing laboratory(ies) to which the investigation is to be outsourced shall be provided and updated annually as per following format below:					
	Name of the Laboratory	Address of the Laboratory	Accreditation/ License Number	Date of expiry of Accredi License		
8	The information on the methodology of testing, sample collection and handling of the individual quoted tests shall be provided and updated annually as following format					

NO.	SPECIFICATIONS AND REQUIREMENTS						VENDOR'S OFFER (PLEASE STATE)
	below:						
	Name of the tests	Name and address of performing laboratory	Method / Technique used	Specimen requirement (Including special instruction and type of tube used)	Storage, transport and temperature requirements- (Including sensitive tests)	Maximum required submission report to Laboratory around-time	
9	Performing testing laboratories must be agreeable to Laboratory Services and preferred testing lab includes and not limited to; HSA, MAYO CLINIC, NUH, NUHS, NUS, KKH, THOMSON and SGH.						
10	When in any case the quoted testing laboratories are not able to perform the test, vendor is responsible to cover the expenses for the test to be performed on alternative testing lab.						
11	Vendor shall incur <u>all expenses</u> associated for the outsourcing of the quoted tests which include transporting of samples, declaration of samples from the Laboratory Services to the testing laboratory(ies).						
12	The tubes that is available in Laboratory Services are plain, EDTA, sodium citrate, Heparin, Trisodium citrate tube, sterile urine bottle and sterile CSF bottle. Any tubes and/or bottles required for the test other than the above mentioned, shall be supplied by the vendor without extra charges. This include and not limited to EDTA transfix and Sodium Heparin.						
13	Any packing container that is required shall be provided by vendor at no extra charges.						
14	Vendor shall provide leak -proof container for collecting all samples to be outsourced.						
15	Sample shall be transported in leak-proof container to ensure that no damage or displacement of sample occurs during transportation						
16	The vendor shall pack the sample as per requirement of the testing and send to the testing laboratory within the stipulated time considering the integrity of sample.						
17	The Vendor shall be able to show temperature records of the containers at the various collection points. It is their responsibility to maintain the specimens at the required stated temperature.						

NO.	SPECIFICATIONS AND REQUIREMENTS	VENDOR'S OFFER (PLEASE STATE)
18	The Vendor shall be responsible for the safe custody of the sample until being received by the testing Laboratory. The standard specimen custody form shall be used which will be regularly reviewed and approved by Laboratory Services	
19	The conditions and regulations above are subject to changes. There may be amendment from time to time with mutual agreement from both parties during the contract period.	
20	Vendor shall be capable of absorbing the workload throughout the operational contract agreement.	
21	All test reports received from the testing laboratory(ies) shall be kept secured and confidential except as otherwise authorized by law of Brunei Darussalam. Under no circumstances shall any results, reports or data be used for any publication, written statement or advertisement without the written consent of the Head of Laboratory Services.	
22	The results shall be sent by fax or emailed password protected document, and followed by original copy.	
23	Three (3) copies of test reports shall be provided out of which two (2) copies should be sent to Head of the concerned laboratory of the Laboratory Services and the third copy should be enclosed with the monthly 'Laboratory Service Summary" and invoice for audit and financial purpose.	
24	<p>Training shall be provided, at no additional cost, as follows:</p> <p>The successful tenderer needs to ensure the key users are updated on any relevant information related to the laboratory testing. <b>They shall provide ONE off-site training for two (2) key users per year of contract.</b> All expenses for attending the training shall be borne by the vendor; full registration, air ticket, daily allowance, accommodation, transport to and from the airport and place of training. <b>Training may be in the form of operator's training, workshop, congress, international conference including 3<sup>rd</sup>-party conference, or other forms of training that is deemed appropriate and relevant.</b></p> <p>Inviting speakers from overseas to give talks or presentations to the users on topics related to the laboratory testing as part of users' continuous education. Certificate of attendance is to be issued to all trainees after completion of training.</p>	
25	<p><b>EXIT CLAUSE:</b></p> <p>The tender contract shall be automatically terminated even though tender has not yet expired and this shall be in effect due to, but not limited to, the following:</p>	

NO.	SPECIFICATIONS AND REQUIREMENTS	VENDOR'S OFFER (PLEASE STATE)
	<ol style="list-style-type: none"> <li>1. When the testing is no longer required or relevant i.e. test is obsolete, to the laboratory or the Department.</li> <li>2. When the item(s) set out in this tender is/are no longer required by the laboratory or the Department.</li> </ol> <p>When the approved budget allocation for this tender contract has been used up before the tender contract expires whereby a renewal of tender shall be submitted by the user for an open advertisement subject to approval by the Mini Tender Board (<i>Lembaga Tawaran Kecil</i>).</p>	
26	<p><b>PRICE VALIDITY:</b> The quotation shall remain valid for 12 MONTHS from the final date for the submission of the quotation and no supplier may withdraw his/her quotation within that period. The Government reserves the right to extend this period if deemed necessary provided that such extension to the quotation validity period shall have written consent of the supplier(s).</p>	

1. We offer and undertake on your acceptance of our Tender to supply and deliver the above mentioned goods in accordance with your Invitation To Tender.
2. Our Tender is fully consistent with and does not contradict or derogate from anything in your Invitation To Tender. We have not qualified or changed any of the provisions of your Invitation To Tender.
3. We shall execute a formal agreement in the appropriate form set out in Section 4 – Contract of the Invitation to Tender together with such further terms and conditions, if any, agreed between the Government and us.
4. OUR OFFER IS VALID FOR **TWELVE (12)** CALENDER MONTHS FROM THE TENDER CLOSING DATE.
5. When requested by you, we shall extend the validity of this offer.
6. We further undertake to give you any further information which you may require.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
*[Signature of authorised officer of Tenderer]*

Name:

Designation:

Tenderer's official stamp:

## **SCHEDULE 2 - INFORMATION SUMMARY**

2.1 Tenderers shall provide in this Schedule the following information:

- a. Management summary
- b. Company profile (including Contractor and sub-contractor(s), if any)
- c. Years of experience (as of the Tender Closing Date) of the Contractor and sub-contractor(s) in the:
  - *Supply & Delivery Of Laboratory Equipment, Test Kits and Consumables.*
- d. Other information which is considered relevant

### SCHEDULE 3 – SUB-CONTRACTS

- 3.1 Tenderers shall complete Table 3.1 with information about all the companies involved in the provision of the services and items specified in this tender. This shall include details about the Contractor and each sub-contractor involved, as well as their respective responsibilities.
- 3.2 Tenderers shall also indicate in Table 3.1 any alliance relationship established with each sub-contractor. An alliance is defined as a formal and binding business relationship between the allied parties.

Table 3.1 - Responsibility Table

Company Name	Responsibility Description	Alliance Relationship between Contractor and Sub-contractor(s)		
		Alliance Exists? (Y/N)	Date Established	Alliance Description
Contractor				
		Not Applicable	Not Applicable	Not Applicable
Sub-contractor(s)				

#### **SCHEDULE 4 – COMPANY’S BACKGROUND**

- 4.1 Each of the companies involved in this tender, including Contractor and sub-contractor(s) (if any), shall provide information on the company’s background, scope of operations, financial standing and certified copy of its Certificate of Incorporation or Certificate of Registration (as the case may be).



## SCHEDULE 5 – REFERENCES

- 5.1 Tenderers shall submit a list of customers in Table 5.1 to whom the Contractor has provided similar services and items as specified in this tender in the recent 5 years as of the Tender Closing Date.

Table 5.1 - References of previous customers

Customer Name and Address	Customer Type (Govt or Quasi Govt)*	Contact Person	Title	Contact Number, Fax Number and E-mail Address

**\*Note:** Tenderers shall indicate whether the customer is a Government or Quasi Government organisation. A Quasi Government is defined as an organisation which (1) is managed and controlled by the Government; or (2) has at least 50% shares being held by the Government. Please leave the column blank if the customer is neither a Government or Quasi Government organisation.

- 5.2 The Ministry of Health shall treat all the information submitted under this schedule in strict confidence.
- 5.3 The Ministry of Health reserves the right to contact the references for tender assessment purposes.

#### **SCHEDULE 6 - SUBMISSION OF SAMPLE**

- 6.1 Tenderers shall submit the Submission of Sample form below in respect of the items specified in this tender.
- 6.2 Samples of the items to be submitted shall be:
  - a. identical in packing and manufacture to the items to be offered by the Tenderer; and
  - b. marked with the corresponding item number of the tender.

## SUBMISSION OF SAMPLE FORM

To:

TENDER REFERENCE NO: KK/215/2025/LAB(TC)

### INVITATION TO TENDER

**THE PROVISION OF OUTSOURCING CLINICAL LABORATORY TESTS FOR NATIONAL BLOOD TRANSFUSION REFERENCE LABORATORY, DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH FOR A PERIOD OF FIVE (5) YEAR USAGE**

---

### SUBMISSION OF SAMPLE FORM OF (NAME OF TENDERER)

NO.	TEST/REAGENT NAME	SAMPLE SUBMITTED (indicate with ✓ )	SAMPLE NOT SUBMITTED (indicate with ✕ )	OFFERED/ NOT OFFERED (indicate as appropriate)
	<b>HLA Typing</b>			
1	HLA ABC Low resolution			
2	HLA DRB/DQB low resolution			
3	HLA 11 Loci by NGS			
4	Add on charge for more than 1 donor HLA Typing			
	<b>HLA Antibody Screen (Panel Reactive Antibody)</b>			
5	HLA Class I & II by Flow			
	<b>HLA Antibody Identification (Donor Specific Antibody)</b>			
6	HLA Class I only			
7	HLA Class II only			
8	HLA Class I & II			
9	C1q HLA Class I only			
10	C1q HLA Class I only			
	<b>Crossmatch (for HLA)</b>			
11	Complement Dependent Cytotoxicity (CDC)			
12	CDC - auto crossmatch			
14	Flow with pronase			
15	Flow without pronase			
16	HLA-B27 CDC (Screening)			

NO.	TEST/REAGENT NAME	SAMPLE SUBMITTED (indicate with ✓ )	SAMPLE NOT SUBMITTED (indicate with ✕ )	OFFERED/ NOT OFFERED (indicate as appropriate)
D	HLA B-27 HR (PCR)			
17	HLAB*5701			

We understand as stated in the Instructions to Tenderers that Tenders without samples shall not be considered.

Tenderer's official stamp:

\_\_\_\_\_  
[signature of authorized officer of Tenderer]

Name:

Designation:

Date:

---

**FOR OFFICE USE**

Date of receipt : \_\_\_\_\_

Receiving Officer : \_\_\_\_\_