**广州医科大学附属第五医院医用耗材市场调研表**

致：广州医科大学附属第五医院（盖公章）

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **省/市耗材采购平台产品ID码** | **产品名称****（注册证名称）** | **规格** | **型号** | **包装规格** | **计量单位** | **省/市平台最低价****（元）** | **报价（元）** | **省内在用三甲医院名单及单价** |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |

**产品的国家标准编码信息**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **对应产品序号** | **医保耗材代码** | **一级分类** | **二级分类** | **三级分类** | **医保通用名** | **材质** | **规格（特征、参数）** | **注册证号** | **单件产品名称** | **耗材企业名称** |
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**产品的国产标准编码信息请咨询厂家后填写，要求和国家医保局数据库一致，不要自编。多个产品的话，请自行增加相应行数。**

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