

Estado do MATO GROSSO
CASTANHEIRA
CNPJ: 24.772.154/0001-60

PROPOSTA DE PREÇOS
Pregão 00045 / 2024

Participante: 00000000 SÃO RAPHAEL LABORATÓRIO DE ANÁLISES CLÍNICAS LTDA
CNPJ / CPF: 45.745.664/0001-18 Porte empresarial: Microempresário (ME)
Endereço: AV IVES ORTOLAN Nº: 0000000308
Bairro: MODULO 3 CEP: 78.320-000
Cidade: JUINA Estado: MT

Apuração: Por lote
Tipo de licitação: Menor preço
Local de abertura: CASTANHEIRA Data: 18/12/2024 Hora: 08:00
Prazo de entrega: 18/12/2024 Hora: 08:00

Condição de pagamento:
Objeto: REGISTRO DE PREÇOS PARA FUTURA E EVENTUAL CONTRATAÇÃO DE EMPRESA PARA PRESTAÇÃO DE SERVIÇOS DE EXAMES LABORATORIAIS, PARA ATENDER A DEMANDA DA SECRETARIA DE SAÚDE, DO MUNICÍPIO DE CASTANHEIRA/MT.

Lote: 1026 - EXAMES

Código	Descrição	Marca	Unidade	Quantidade	Valor unit. R\$	% Desc.	Valor total R\$
11554	EXAME DE ACIDO FOLICO		un	50,0000	35,0000	0	1,750,0000
11555	EXAME DE ACIDO URICO		un	350,0000	25,0000	0	8,750,0000
11556	EXAME DE ALBUMINA PLASMATICA		un	50,0000	26,0000	0	1,300,0000
11557	EXAME DE ALFA FETOPROTEINA		un	50,0000	32,0000	0	1,600,0000
11558	EXAME DE AMILASE		un	200,0000	24,0000	0	4,800,0000
11559	EXAME DE ANTI HAV IGG		un	30,0000	29,0000	0	870,0000
11560	EXAME DE ANTI HAV IGM		un	30,0000	29,0000	0	870,0000
11561	EXAME DE ANTI HBC IGG		un	50,0000	34,0000	0	1,700,0000
11562	EXAME DE ANTI HBC IGM		un	50,0000	34,0000	0	1,700,0000
11563	EXAME DE ANTI HBE		un	20,0000	32,0000	0	640,0000
11564	EXAME DE ANTI HBS		un	20,0000	33,0000	0	660,0000
11565	EXAME DE ANTI TPO		un	10,0000	39,0000	0	390,0000
11566	EXAME DE ANTICARDIOLIPINA IGA		un	10,0000	35,0000	0	350,0000
11567	EXAME DE ANTICARDIOLIPINA IGG IGM		un	10,0000	41,0000	0	410,0000
11568	EXAME DE ANTICOAGULANTE LUPIDO		un	10,0000	50,0000	0	500,0000
11569	EXAME DE ANTIGENO DO FATOR DE VON WILLEBRAND (FVW)		un	5,0000	110,0000	0	550,0000
11571	EXAME DE AVIDEZ DE TOXOPLASMOSE		un	30,0000	48,0000	0	1,440,0000

PREF. MUNIC.
FLS. 189
Rub. 1

Estado do MATO GROSSO

CASTANHEIRA

CNPJ: 24.772.154/0001-60

11572	EXAME DE BAAR	un	800,0000	36,0000	0	28,800,0000
11573	EXAME DE BHCG QUANTITATIVO	un	100,0000	38,0000	0	3,800,0000
11574	EXAME DE BILIRRUBINAS	un	400,0000	24,0000	0	9,600,0000
11575	EXAME DE BNP E NT PROBNP	un	100,0000	106,0000	0	10,600,0000
11576	EXAME DE BRUCELOSE	un	30,0000	24,0000	0	720,0000
11577	EXAME DE CA 125	un	20,0000	37,0000	0	740,0000
11578	EXAME DE CALCIO	un	50,0000	23,0000	0	1,150,0000
11579	EXAME DE CALCITONINA	un	20,0000	56,0000	0	1,120,0000
11580	EXAME DE CITOMEGALOVIRUS	un	1,000,0000	39,0000	0	39,000,0000
11582	EXAME DE CKMB	un	50,0000	36,0000	0	1,800,0000
11583	EXAME DE KKNAC	un	50,0000	34,0000	0	1,700,0000
11584	EXAME DE COAGULOGRAMA	un	200,0000	46,0000	0	9,200,0000
11586	EXAME DE COOMBS DIRETO	un	50,0000	29,0000	0	1,450,0000
11587	EXAME DE COOMBS INDIRETO	un	50,0000	31,0000	0	1,550,0000
11588	EXAME DE CORTISOL	un	50,0000	37,0000	0	1,850,0000
11589	EXAME DE COVID IGG/IGM	un	15,0000	65,0000	0	975,0000
11590	EXAME DE CREATININA	un	450,0000	24,0000	0	10,800,0000
11591	EXAME DE CULTURA EM GERAL	un	50,0000	56,0000	0	2,800,0000
11593	EXAME DE CURVA GLICEMICA	un	250,0000	52,0000	0	13,000,0000
11594	EXAME DE D DIMERO	un	100,0000	85,0000	0	8,500,0000
11595	EXAME DE DENGUE IGG IGM	un	200,0000	56,0000	0	11,200,0000
11596	EXAME DE EAS- URINA	un	300,0000	21,0000	0	6,300,0000
11597	EXAME DE EPSTEIN BARR VIRUS	un	60,0000	54,0000	0	3,240,0000
11598	EXAME DE ESTRADIOL	un	200,0000	40,0000	0	8,000,0000
11599	EXAME DE FAN	un	150,0000	25,0000	0	3,750,0000
11600	EXAME DE FATOR REUMATOIDE QUANTITATIVO	un	200,0000	28,0000	0	5,600,0000
11601	EXAME DE FERRITINA	un	200,0000	41,0000	0	8,200,0000
11602	EXAME DE FERRO SERICO	un	100,0000	28,0000	0	2,800,0000
11603	EXAME DE FEZES	un	70,0000	24,0000	0	1,680,0000
11604	EXAME DE FOSFATASE ALCALINA	un	200,0000	23,0000	0	4,600,0000
11605	EXAME DE FSH	un	200,0000	43,0000	0	8,600,0000

PREF. MUNIC.
FLS. 185
Rub. 1

Estado do MATO GROSSO
CASTANHEIRA
CNPJ: 24.772.154/0001-60

11606	EXAME DE FTA ABS IGG E IGM	un	20,0000	47,0000	0	940,0000
11607	EXAME DE GAMA GT	un	200,0000	23,0000	0	4,600,0000
11608	EXAME DE GLICOSE EM JEJUM	un	400,0000	13,0000	0	5,200,0000
11609	EXAME DE GRUPO SANGUINEO + RH	un	150,0000	26,0000	0	3,900,0000
11610	EXAME DE HBE - AG	un	60,0000	32,0000	0	1,920,0000
11611	EXAME DE HELICOBACTER PYLORI IGG ANTICORPOS ANTI	un	50,0000	40,0000	0	2,000,0000
11612	EXAME DE HEMOGLOBINA GLICADA	un	450,0000	39,0000	0	17,550,0000
11613	EXAME DE HEMOGRAMA COMPLETO	un	2,500,0000	34,0000	0	85,000,0000
11614	EXAME DE HEPATITE B (HBSAG)	un	300,0000	39,0000	0	11,700,0000
11615	EXAME DE HEPATITE C (ANTI HCV)	un	300,0000	34,0000	0	10,200,0000
11616	EXAME DE HIV 1 E 2	un	300,0000	37,0000	0	11,100,0000
11617	EXAME DE HOMA BETA	un	20,0000	39,0000	0	780,0000
11618	EXAME DE HOMA IR	un	10,0000	47,0000	0	470,0000
11619	EXAME DE HTLV	un	100,0000	38,0000	0	3,800,0000
11620	EXAME DE INSULINA BASAL	un	50,0000	39,0000	0	1,950,0000
11621	EXAME DE LDH LACTATO DESIDROGENASE	un	100,0000	24,0000	0	2,400,0000
11622	EXAME DE LEISHMANIOSE	un	100,0000	30,0000	0	3,000,0000
11623	EXAME DE LH	un	80,0000	44,0000	0	3,520,0000
11624	EXAME DE LIPASE	un	200,0000	32,0000	0	6,400,0000
11625	EXAME DE LIPIDOGRAMA	un	600,0000	53,0000	0	31,800,0000
11626	EXAME DE LITIO	un	10,0000	30,0000	0	300,0000
11627	EXAME DE MAGNESIO	un	20,0000	30,0000	0	600,0000
11628	EXAME DE NS1	un	200,0000	39,0000	0	7,800,0000
11629	EXAME DE PCR QUANTITATIVO	un	400,0000	25,0000	0	10,000,0000
11630	EXAME DE PCR ULTRA SENSIVEL	un	50,0000	46,0000	0	2,300,0000
11631	EXAME DE POTASSIO	un	400,0000	27,0000	0	10,800,0000
11632	EXAME DE PROGESTERONA	un	200,0000	44,0000	0	8,800,0000
11633	EXAME DE PROLACTINA	un	100,0000	40,0000	0	4,000,0000
11634	EXAME DE PROTEINAS TOTAIS E FRACOES	un	50,0000	30,0000	0	1,500,0000
11635	EXAME DE PSA LIVRE	un	1,000,0000	55,0000	0	55,000,0000
11636	EXAME DE PSA TOTAL	un	1,000,0000	46,0000	0	46,000,0000

PREF. MUNIC.
FLS. 156
Rub. 1

Estado do MATO GROSSO
 CASTANHEIRA
 CNPJ: 24.772.154/0001-60

11637	EXAME DE RETICULOCITOS	un	100,0000	23,0000	0	2,300,0000
11638	EXAME DE RUBEOLA IGG	un	1,000,0000	35,0000	0	35,000,0000
11639	EXAME DE RUBEOLA IGM	un	1,000,0000	33,0000	0	33,000,0000
11640	EXAME DE SODIO	un	400,0000	26,0000	0	10,400,0000
11642	EXAME DE T4 LIVRE	un	300,0000	37,0000	0	11,100,0000
11643	EXAME DE T4 TOTAL	un	300,0000	35,0000	0	10,500,0000
11644	EXAME DE TAP	un	300,0000	24,0000	0	7,200,0000
11648	EXAME DE TGO	un	400,0000	24,0000	0	9,600,0000
11649	EXAME DE TGP	un	400,0000	24,0000	0	9,600,0000
11650	EXAME DE TOXICOLOGICO	un	20,0000	131,0000	0	2,620,0000
11651	EXAME DE TOXOPLASMOSE IGG	un	1,000,0000	41,0000	0	41,000,0000
11652	EXAME DE TOXOPLASMOSE IGM	un	1,000,0000	45,0000	0	45,000,0000
11653	EXAME DE TRANSFERRITINA	un	40,0000	33,0000	0	1,320,0000
11655	EXAME DE TROPONINA T	un	50,0000	38,0000	0	1,900,0000
11656	EXAME DE TSH	un	400,0000	35,0000	0	14,000,0000
11657	EXAME DE TTPA	un	300,0000	25,0000	0	7,500,0000
11658	EXAME DE UREIA	un	400,0000	24,0000	0	9,600,0000
11659	EXAME DE UROCULTURA	un	60,0000	47,0000	0	2,820,0000
11660	EXAME DE VDRL	un	150,0000	27,0000	0	4,050,0000
11661	EXAME DE VHS	un	50,0000	22,0000	0	1,100,0000
11662	EXAME DE VITAMINA A	un	50,0000	76,0000	0	3,800,0000
11663	EXAME DE VITAMINA B12	un	100,0000	42,0000	0	4,200,0000
11664	EXAME DE VITAMINA B6 SERICO	un	50,0000	147,0000	0	7,350,0000
11665	EXAME DE VITAMINA C	un	50,0000	59,0000	0	2,950,0000
11666	EXAME DE VITAMINA D	un	250,0000	51,0000	0	12,750,0000
11667	EXAME DE ZINCO SERICO	un	50,0000	38,0000	0	1,900,0000
33661	EXAME TESTOSTERONA LIVRE	un	200,0000	114,0000	0	22,800,0000
33662	EXAME TESTOSTERONA TOTAL	un	200,0000	41,0000	0	8,200,0000
56453	SERVICO DE EXAME - DO TIPO PESQUISA DE SANGUE OCULTO NAS FEZES	un	10,0000	32,0000	0	320,0000
56455	SERVICO DE EXAME - DO TIPO T3 TOTAL	un	200,0000	32,0000	0	6,400,0000

PREF. MUNIC.
 FLS. 127
 Rub. 1

Estado do MATO GROSSO
 CASTANHEIRA
 CNPJ: 24.772.154/0001-60


Código	Descrição	Marca	Unidade	Quantidade	Valor unit. R\$	% Desc.	Valor total R\$
56456	SERVICO DE EXAME - DO TIPO TRIODOTIRONINA LIVRE- T3 LIVRE		un	200,0000	35,0000	0	7,000,0000
56458	SERVICO DE EXAME - BACILOSCOPIA DIRETA P/ BAAR TUBERCULOSE (ESCARRO)		un	100,0000	35,0000	0	3,500,0000
56459	SERVICO DE EXAME - DO TIPO TESTE RAPIDO DE HANSEIAE QUALITATIVO PARA DETECAO DE ANTICORPOS PARA OS ISOTIPOS (IGG, IGM).		un	500,0000	130,0000	0	65,000,0000
56463	SERVICO DE EXAME - CULTURA DE MICOBACTERIAS ATIPICAS PARA TUBERCULOSE		un	50,0000	43,0000	0	2,150,0000
56465	TESTE SOROLOGICO - RAPIDO IMUNOCROMATOGRAFICO PARA A DETECAO E DIFERENCIACAO SIMULTANEA DOS ANTICORPOS IGG E IGM ANTI-ZIKA		un	20,0000	42,0000	0	840,0000
Total por lote: R\$							1,005,505,0000

Lote: 1027 - EXAME

Código	Descrição	Marca	Unidade	Quantidade	Valor unit. R\$	% Desc.	Valor total R\$
11581	EXAME DE CITOPATOLOGICO		un	1,000,0000	0,0000	0	0,0000
Total por lote: R\$							0,0000
Total geral: R\$							1,005,505,0000

Observações: 1. A validade da presente proposta é de 60 (sessenta) dias corridos. 2. Prazo de Entrega dos serviços será conforme o Item 10 do Termo de Referência, bem como as demais condições.
 3. E-mail: rhlaboratorios@gmail.com. 4. Tel.: 66 3566-4353.

Validade: 18/02/2025
 Prazo de entrega: 18/02/2025

Carimbo/Assinatura

45.745.664/0001-18
 SAO RAPHAEL LABORATORIO
 DE ANALISES CLINICAS
 AV IVES ORTOLAN, 308 N,
 MÓDULO 03
 CEP:78.320-000
 MT

L
 JUINA

PREF. MUNIC.
 FLS. 188
 Rub. (



Estado do MATO GROSSO
 CASTANHEIRA
 CNPJ: 24.772.154/0001-60

11572	EXAME DE BAAR	un	800,0000	37,3300	0	29.864,0000
11573	EXAME DE BHCG QUANTITATIVO	un	100,0000	39,2600	0	3.926,0000
11574	EXAME DE BILURRUBINAS	un	400,0000	25,0200	0	10.008,0000
11575	EXAME DE BNP E NT PROBNP	un	100,0000	50,0000	0	5.000,0000
11576	EXAME DE BRUCELOSE	un	30,0000	10,0000	0	300,0000
11577	EXAME DE CA 125	un	20,0000	10,0000	0	200,0000
11578	EXAME DE CALCIO	un	50,0000	15,0000	0	750,0000
11579	EXAME DE CALCITONINA	un	20,0000	15,0000	0	300,0000
11580	EXAME DE CITOMEGALOVIRUS	un	1.000,0000	15,0000	0	15.000,0000
11582	EXAME DE CKMB	un	50,0000	36,4000	0	1.820,0000
11583	EXAME DE CKNAC	un	50,0000	34,3600	0	1.718,0000
11584	EXAME DE COAGULOGRAMA	un	200,0000	30,0000	0	6.000,0000
11586	EXAME DE COOMBS DIRETO	un	50,0000	10,0000	0	500,0000
11587	EXAME DE COOMBS INDIRETO	un	50,0000	10,0000	0	500,0000
11588	EXAME DE CORTISOL	un	50,0000	15,0000	0	750,0000
11589	EXAME DE COVID IGG/IGM	un	15,0000	65,6300	0	984,4500
11590	EXAME DE CREATININA	un	450,0000	24,3100	0	10.939,5000
11591	EXAME DE CULTURA EM GERAL	un	50,0000	57,5200	0	2.876,0000
11593	EXAME DE CURVA GLICEMICA	un	250,0000	15,0000	0	3.750,0000
11594	EXAME DE D DIMERO	un	100,0000	60,0000	0	6.000,0000
11595	EXAME DE DENGUE IGG IGM	un	200,0000	30,0000	0	6.000,0000
11596	EXAME DE EAS- URINA	un	300,0000	10,0000	0	3.000,0000
11597	EXAME DE EPSTEIN BARR VIRUS	un	60,0000	15,0000	0	900,0000
11598	EXAME DE ESTRADIOL	un	200,0000	20,0000	0	4.000,0000
11599	EXAME DE FAN	un	150,0000	15,0000	0	2.250,0000
11600	EXAME DE FATOR REUMATOIDE QUANTITATIVO	un	200,0000	28,1700	0	5.634,0000
11601	EXAME DE FERRITINA	un	200,0000	41,8800	0	8.376,0000
11602	EXAME DE FERRO SERICO	un	100,0000	15,0000	0	1.500,0000
11603	EXAME DE FEZES	un	70,0000	24,8600	0	1.740,2000
11604	EXAME DE FOSFATASE ALCALINA	un	200,0000	15,0000	0	3.000,0000
11605	EXAME DE FSH	un	200,0000	15,0000	0	3.000,0000

PREF. MUNIC.
 FLS. 181
 Rub. 1

[Handwritten signatures and initials]

Estado do MATO GROSSO
 CASTANHEIRA
 CNPJ: 24.772.154/0001-60

11606	EXAME DE FTA ABS IGG E IGM	un	20,0000	48,1100	0	962,2000
11607	EXAME DE GAMA GT	un	200,0000	24,2800	0	4,856,0000
11608	EXAME DE GLICOSE EM JEJUM	un	400,0000	13,9400	0	5,576,0000
11609	EXAME DE GRUPO SANGUINEO + RH	un	150,0000	26,6300	0	3,994,5000
11610	EXAME DE HBE - AG	un	60,0000	15,0000	0	900,0000
11611	EXAME DE HELICOBACTER PYLORI IGG ANTICORPOS ANTI	un	50,0000	20,0000	0	1,000,0000
11612	EXAME DE HEMOGLOBINA GLICADA	un	450,0000	40,1800	0	18,081,0000
11613	EXAME DE HEMOGRAMA COMPLETO	un	2,500,0000	20,0000	0	50,000,0000
11614	EXAME DE HEPATITE B (HBSAG)	un	300,0000	30,0000	0	9,000,0000
11615	EXAME DE HEPATITE C (ANTI HCV)	un	300,0000	30,0000	0	9,000,0000
11616	EXAME DE HIV 1 E 2	un	300,0000	38,1100	0	11,433,0000
11617	EXAME DE HOMA BETA	un	20,0000	40,0200	0	800,4000
11618	EXAME DE HOMA IR	un	10,0000	48,5900	0	485,9000
11619	EXAME DE HTLV	un	100,0000	30,0000	0	3,000,0000
11620	EXAME DE INSULINA BASAL	un	50,0000	30,0000	0	1,500,0000
11621	EXAME DE LDH LACTATO DESIDROGENASE	un	100,0000	24,9900	0	2,499,0000
11622	EXAME DE LEISHMANIOSE	un	100,0000	31,1000	0	3,110,0000
11623	EXAME DE LH	un	80,0000	35,0000	0	2,800,0000
11624	EXAME DE LIPASE	un	200,0000	15,0000	0	3,000,0000
11625	EXAME DE LIPOGRAMA	un	600,0000	40,0000	0	24,000,0000
11626	EXAME DE LITIO	un	10,0000	31,2000	0	312,0000
11627	EXAME DE MAGNESIO	un	20,0000	31,1200	0	622,4000
11628	EXAME DE NS1	un	200,0000	35,0000	0	7,000,0000
11629	EXAME DE PCR QUANTITATIVO	un	400,0000	25,7300	0	10,292,0000
11630	EXAME DE PCR ULTRA SENSIVEL	un	50,0000	46,9900	0	2,349,5000
11631	EXAME DE POTASSIO	un	400,0000	15,0000	0	6,000,0000
11632	EXAME DE PROGESTERONA	un	200,0000	35,0000	0	7,000,0000
11633	EXAME DE PROLACTINA	un	100,0000	35,0000	0	3,500,0000
11634	EXAME DE PROTEINAS TOTAIS E FRACOES	un	50,0000	31,3400	0	1,567,0000
11635	EXAME DE PSA LIVRE	un	1,000,0000	20,0000	0	20,000,0000
11636	EXAME DE PSA TOTAL	un	1,000,0000	20,0000	0	20,000,0000

PREF. MUNIC.
 FLS. 132
 Rub. 1

Estado do MATO GROSSO
 CASTANHEIRA
 CNPJ: 24.772.154/0001-60

11637	EXAME DE RETICULOCITOS	un	100,0000	24,3100	0	2,431,0000
11638	EXAME DE RUBEOLA IGG	un	1,000,0000	36,1900	0	36,190,0000
11639	EXAME DE RUBEOLA IGM	un	1,000,0000	34,1900	0	34,190,0000
11640	EXAME DE SODIO	un	400,0000	15,0000	0	6,000,0000
11642	EXAME DE T4 LIVRE	un	300,0000	30,0000	0	9,000,0000
11643	EXAME DE T4 TOTAL	un	300,0000	35,8800	0	10,764,0000
11644	EXAME DE TAP	un	300,0000	24,8900	0	7,467,0000
11648	EXAME DE TGO	un	400,0000	24,7800	0	9,912,0000
11649	EXAME DE TGP	un	400,0000	24,6200	0	9,848,0000
11650	EXAME DE TOXICOLOGICO	un	20,0000	110,0000	0	2,200,0000
11651	EXAME DE TOXOPLASMOSE IGG	un	1,000,0000	35,0000	0	35,000,0000
11652	EXAME DE TOXOPLASMOSE IGM	un	1,000,0000	35,0000	0	35,000,0000
11653	EXAME DE TRANSFERRITINA	un	40,0000	34,1200	0	1,364,8000
11655	EXAME DE TROPONINA T	un	50,0000	39,3700	0	1,968,5000
11656	EXAME DE TSH	un	400,0000	25,0000	0	10,000,0000
11657	EXAME DE TTPA	un	300,0000	25,7000	0	7,710,0000
11658	EXAME DE UREIA	un	400,0000	24,7300	0	9,892,0000
11659	EXAME DE UROCULTURA	un	60,0000	48,7200	0	2,923,2000
11660	EXAME DE VDRL	un	150,0000	27,9300	0	4,189,5000
11661	EXAME DE VHS	un	50,0000	22,8700	0	1,143,5000
11662	EXAME DE VITAMINA A	un	50,0000	50,0000	0	2,500,0000
11663	EXAME DE VITAMINA B12	un	100,0000	43,5600	0	4,356,0000
11664	EXAME DE VITAMINA B6 SERICO	un	50,0000	100,0000	0	5,000,0000
11665	EXAME DE VITAMINA C	un	50,0000	61,0400	0	3,052,0000
11666	EXAME DE VITAMINA D	un	250,0000	52,1400	0	13,035,0000
11667	EXAME DE ZINCO SERICO	un	50,0000	39,2600	0	1,963,0000
33661	EXAME TESTOSTERONA LIVRE	un	200,0000	40,0000	0	8,000,0000
33662	EXAME TESTOSTERONA TOTAL	un	200,0000	42,8500	0	8,570,0000
56453	SERVICO DE EXAME - DO TIPO PESQUISA DE SANGUE OCULTO NAS FEZES	un	10,0000	32,5900	0	325,9000
56455	SERVICO DE EXAME - DO TIPO T3 TOTAL	un	200,0000	32,9900	0	6,598,0000

PREF. MUNIC.
 FLS. 193
 Rub. 1

[Handwritten signatures and initials]

Estado do MATO GROSSO
 CASTANHEIRA
 CNPJ: 24.772.154/0001-60

Código	Descrição	Marca	Unidade	Quantidade	Valor unit. R\$	% Desc.	Valor total R\$
56456	SERVICO DE EXAME - DO TIPO TRIIODOTIRONINA LIVRE-T3 LIVRE		un	200,0000	20,0000	0	4.000,0000
56458	SERVICO DE EXAME - BACILOSCOPIA DIRETA P/ BAAR TUBERCULOSE (ESCARRO)		un	100,0000	5,0000	0	500,0000
56459	SERVICO DE EXAME - DO TIPO TESTE RAPIDO DE HANSENIASE QUALITATIVO PARA DETECCAO DE ANTICORPOS PARA OS ISOTIPOS (IGG, IGM).		un	500,0000	120,0000	0	60.000,0000
56463	SERVICO DE EXAME - CULTURA DE MICOBACTERIAS ATIPICAS PARA TUBERCULOSE		un	50,0000	44,7000	0	2.235,0000
56465	TESTE SOROLOGICO RAPIDO IMUNOCROMATOGRAFICO PARA A DETECCAO E DIFERENCIACAO SIMULTANEA DOS ANTICORPOS IGG E IGM ANTI-ZIKA		un	20,0000	43,3300	0	866,6000
Total por lote: R\$							748.784,3500

Código	Descrição	Marca	Unidade	Quantidade	Valor unit. R\$	% Desc.	Valor total R\$
11581	EXAME DE CITOPATOLOGICO		un	1.000,0000	38,6200	0	38.620,0000
Total por lote: R\$							38.620,0000
Total geral: R\$							787.404,3500

Observações: Endereço eletrônico: laborman@laboratoriolaborman.com.br convenioslaboratoriolaborman@gmail.com Carimbo/Assinatura Contato: 66 3566-1255

Validade: 31/12/2025
 Prazo de entrega: 31/12/2025

Carimbo/Assinatura

Laborman
 LABORATÓRIO DE ANÁLISES CLÍNICAS
 14.974.505/0001-61 - DR. MOACYR MANDADORI
 Av. Mato Grosso, 784 N - Centro
 CEP 78 320-000 Juína - MT

PREF. MUNIC.
FLS. 199
Rub. (



