



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

January 19, 2021

DEPARTMENT CIRCULAR

No. 2021- 0018 _____

FOR : **DIRECTORS OF CENTERS FOR HEALTH DEVELOPMENT (CHD), DIVISION CHIEFS OF CHD-REGULATIONS, LICENSING AND ENFORCEMENT DIVISION (RLED) AND HEALTH FACILITIES AND SERVICES REGULATORY BUREAU; MINISTER OF HEALTH – BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO (MOH-BARMM), REGULATORY OFFICERS, MEDICAL DIRECTORS AND OWNERS OF CARTRIDGE-BASED COVID-19 TESTING LABORATORIES AND ALL OTHERS CONCERNED**

SUBJECT : **Survey on the COVID-19 Testing Price Offered by COVID-19 Testing Laboratories Performing Cartridge-based RT-PCR**

The Department of Health (DOH) together with the Department of Trade and Industry (DTI) issued Joint Administrative Order (JAO) No. 2020-0001, signed on November 24, 2020, titled "*Guidelines for the Implementation of Executive Order No. 118 on Regulation of Prices for COVID-19 Reverse Transcription and Polymerase Chain Reaction (RT-PCR) Testing and Test Kits,*" mandating price regulation for RT-PCR testing and kits nationwide. Corollary to this, Department Circular (DC) No. 2020-0391, dated November 27, 2020, titled "*Price Range for COVID-19 Reverse Transcription-Polymerase Reaction (RT-PCR) Testing,*" sets the price range for COVID-19 tests only for plate-based RT-PCR, hence, this new survey to set prices for cartridge-based RT-PCR.

The survey to be conducted by the Health Facilities and Services Regulatory Bureau (HFSRB), aims to determine the current prices offered by the cartridge-based COVID-19 testing laboratories, performing cartridge-based RT-PCR as well as to gather information that may be used as reference in proposing the recommended price range for cartridge-based RT-PCR.

The survey can be accessed on line and responses are to be submitted via this link on or before January 29, 2021: <https://hfsrb.doh.gov.ph/covid-lab-testing-price-survey/>

For further questions or details, please contact the Standards Development Division of HFSRB at 8743-8808 or 8651-7800 local 2525 or via email at hfsrb.sdd@gmail.com

For information and guidance.

By Authority of the Secretary of Health:

DR. MARIA ROSARIO S. VERGEIRE, MPH, CESO IV
OIC - Undersecretary of Health
Health Regulation Team

COVID-19 Cartridge-Based Testing Price Survey

* Required

I. Region: *

Choose

II. Name of Laboratory: *

Your answer

III. Address *

Your answer

IV. Classification: *

Hospital Based

Non - Hospital Based

V. Ownership: *



Government

Private

VI. Operating Hours of the COVID-19 Laboratories *

If not on the list, please specify in (OTHER) option

8 - Hours

12 - Hours

24 - Hours

Other:

VII. Brand of Cartridge: *

If not on the list, please specify in (OTHER) option

EasyNat Diagnostic Kit for Novel-Corona Virus (2019 nCoV) RNA (Isothermal Amplification-Real Time Fluorescence Assay)

GeneXpert

Biofire Respiratory Panel 2.1

i-dency Pack UniversalSARS-CoV-2 Detection System

POCKIT CENTRAL SARS-CoV-2 (orf 1ab) Premix Reagent

Other:

VIII. How Many Specimens/Sample can be tested per run *

Your answer



IX. Running Time of the Procedure/Test (Time for Specimen Collection and Releasing of Results are not Included) *

If not on the list, please specify in (OTHER) option

2 Hours

3 Hours

4 Hours

5 Hours

6 Hours

Other:

X. Service Fee per Patient:

Please indicate the fee being charged to patient according to turn-around-time

a. Regular *

Your answer

b. Stat

If Applicable

Your answer

 c. Other

If Applicable



Your answer

XI. Costing:

Please Compute for one sample/Specimen.

A. Direct Cost

1. Testing Kit (Price): *

Your answer

2. Control (Price); *

Your answer

3. Frequency of Running the Control *

If not on the list please specify in (OTHER) option

- Daily
- Weekly
- Per Run of Test
- Other:

B. Indirect Cost:



1. Salary of Personnel

Please compute salary per day

a. Pathologist *

Your answer

b. Medical Technologist *

Your answer

c. Admin *

Your answer

Others: *

Please specify position and Salary per day(example. Encoder - 550.00)

Your answer

2. Utilities:

Please compute expenses per day

a. Water *

Your answer



b. Electricity *

Your answer

c. Rent

(If Applicable)

Your answer

d. Internet Connection

(If Applicable)

Your answer

e. Others

Please Specify

Your answer

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