

## Odběratel:

Nemocnice s poliklinikou Havířov  
Nemocniční lékárna  
Dělnická 1132/24  
73601 Havířov 1  
Bankovní spojení:  
KB Havířov  
27132791 / 0100  
IČO: 00844896  
DIČ: CZ00844896

## Dodavatel:

Pharmos RECEPTY  
Tesinska 1349/296  
Ostrava / Radvanice  
71600  
IČO: 19010290  
DIČ: CZ19010290

Pr 899 vedená u Krajského soudu v Ostravě

Den zápisu 4.11.2003

| Název | Objednáno | Cena bez DPH/j | Cena s DPH/j |
|-------|-----------|----------------|--------------|
|-------|-----------|----------------|--------------|

|                                                     |        |  |  |
|-----------------------------------------------------|--------|--|--|
| AFONILUM SR 250 MG POR CPS PRO 50X250M              | 100.00 |  |  |
| AMBROSAN TBL 20X30MG                                | 10.00  |  |  |
| AMOKSIKLAV 457 MG/5 ML POR PLV SUS 70ML             | 5.00   |  |  |
| ANAFRANIL SR 75 TBL OBD 20X75MG                     | 10.00  |  |  |
| APO-PANTO 40 POR TBL ENT 100X40M                    | 20.00  |  |  |
| APO-TIC POR TBL FLM 100X250                         | 5.00   |  |  |
| ARTRILOM 15 MG POR TBL NOB 100X15M                  | 0.00   |  |  |
| BELOGENT KREM CRM 1X30GM                            | 5.00   |  |  |
| BETAHISTIN-RATIOPHARM 8 MG POR TBL NOB 120X8MG      | 3.00   |  |  |
| BETALOC SR 200MG TBL RET 100X200MG                  | 5.00   |  |  |
| BURONIL 25MG DRG 50X25MG                            | 20.00  |  |  |
| CALCICHEW D3 LEMON 800 IU POR TBL MND 60            | 2.00   |  |  |
| CONCOR COR 2.5 MG TBL OBD 28X2.5MG                  | 10.00  |  |  |
| CYMBALTA 60 MG POR CPS ETD 28X60MG                  | 5.00   |  |  |
| CYNT 0,3 TBL FLM 98X0,3MG I                         | 3.00   |  |  |
| DAVKOVAC LEKU KS                                    | 0.00   |  |  |
| DIAZEPAM SLOVAKOFARMA TBL 20X5MG                    | 10.00  |  |  |
| EMANERA 20 MG POR CPS ETD 90X20MG                   | 6.00   |  |  |
| ERDOMED POR CPS DUR 60X300M                         | 30.00  |  |  |
| EUPHYLLIN CR N 200 POR CPS PRO 50X200M              | 100.00 |  |  |
| FROMILID 500 TBL OBD 14X500MG                       | 10.00  |  |  |
| FUNGICIDIN LECIVA UNG 1X10GM                        | 10.00  |  |  |
| FURON 40 MG POR TBL NOB 50X40MG                     | 50.00  |  |  |
| HELICID 20 ZENTIVA CPS ETD 28X20MG                  | 3.00   |  |  |
| INDAPAMID STADA 1.5 MG POR TBL PRO 30X1.5M          | 2.00   |  |  |
| INSULATARD PENFILL 100 IU/ML INJ SUS 5X3ML/300UT    | 0.00   |  |  |
| KALNORMIN TBL PRO 30X1G                             | 50.00  |  |  |
| KLACID 500 TBL OBD 14X500MG                         | 20.00  |  |  |
| KVENTIAX PROLONG 300 MG TBL PRO 60X300MG            | 0.00   |  |  |
| KYLOTAN PLUS H 160/12.5 MG POR TBL FLM 98           | 1.00   |  |  |
| LAMOTRIGIN MYLAN 100 MG POR TBL NOB 100X100         | 0.00   |  |  |
| LEVEMIR 100 U/ML (PENFILL) INJ SOL 5X3ML            | 0.00   |  |  |
| LIKARDA 2,5 MG POR TBL FLM 30X2.5M                  | 0.00   |  |  |
| LIPOBASE DRM CRM 1X100GM                            | 3.00   |  |  |
| LITHIUM CARBONICUM TBL 100X300MG                    | 3.00   |  |  |
| LOZAP 100 ZENTIVA POR TBL FLM 90X100M               | 10.00  |  |  |
| MESTINON VALEANT POR TBL OBD150X60MG                | 3.00   |  |  |
| METAMIZOL STADA 500 MG/ML PEROR POR GTT SOL 1X100ML | 0.00   |  |  |
| METAMIZOL STADA 500 MG/ML PEROR POR GTT SOL 1X20ML/ | 0.00   |  |  |
| METYPRED 4 MG POR TBL NOB 100X4MG                   | 8.00   |  |  |
| MONOTAB SR POR TBLPRO100X100MG                      | 10.00  |  |  |
| MYCOMAX 150 CPS 1X150MG                             | 1.00   |  |  |
| NAPLAST NA KURI OKA 6KS                             | 0.00   |  |  |
| NASOBEC SPR NAS 200X50RG                            | 4.00   |  |  |
| NEURONTIN 100MG CPS 100X100MG                       | 5.00   |  |  |

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|-----------------------------------------------------|-----------|----------------|--------------|
| NITROMINT AER 1X10GM                                | 3.00      |                |              |
| NOLPAZA 40 MG ENTEROSOLVENTNI T POR TBL ENT 84X40MG | 10.00     |                |              |
| NOVORAPID PENFILL 100 U/ML INJ SOL 5X3ML            | 0.00      |                |              |
| OLAZAX DISPERZI 5 MG TBL DIS 28X5MG                 | 0.00      |                |              |
| OPHTHALMO-AZULEN UNG OPH 5GM                        | 5.00      |                |              |
| OPHTHALMO-SEPTONEX OPH GTT SOL 1X10ML               | 0.00      |                |              |
| PRAGIOLA 75 MG POR CPS DUR 56X75MG                  | 4.00      |                |              |
| PRESTARIUM NEO POR TBL FLM 30X5MG                   | 5.00      |                |              |
| PURINOL 100MG TBL 100X100MG                         | 20.00     |                |              |
| RADIOXAR KREM 50ML                                  | 5.00      |                |              |
| RECTODELT 100 MG SUP 4X100MG                        | 0.00      |                |              |
| REQUIP-MODUTAB 4 MG POR TBL PRO 84X4MG              | 2.00      |                |              |
| REQUIP-MODUTAB 8 MG POR TBL PRO 84X8MG              | 1.00      |                |              |
| RHEFLUIN TBL 30                                     | 0.00      |                |              |
| ROSALOX DRM CRM 1X40GM 1%                           | 0.00      |                |              |
| SNEHURKA HREJIVY GEL 200ML S KAST. A ARNIKOU        | 0.00      |                |              |
| TANYZ POR CPS RDR 50X0,4M                           | 20.00     |                |              |
| TOBRADEX OCNI MAST OPH UNG 3.5GM                    | 3.00      |                |              |
| TORECAN DRG 50X6.5MG                                | 5.00      |                |              |
| TORVACARD NEO 20 MG POR TBL FLM 90X20MG             | 10.00     |                |              |
| TOVIAZ 4 MG POR TBL PRO 84X4MG                      | 0.00      |                |              |
| TOVIAZ 8 MG POR TBL PRO 28X8MG                      | 0.00      |                |              |
| TWINRIX ADULT INJ SUS 1X1ML+STR+S                   | 4.00      |                |              |
| ULTRACOD POR TBL NOB 30                             | 5.00      |                |              |
| VEROSPIRON TBL 100X25MG                             | 20.00     |                |              |
| ZINERYT LOT 1X30ML                                  | 0.00      |                |              |
| ZOVIRAX 800 MG TBL 35X800M                          | 0.00      |                |              |
| Celkem                                              |           | 82981.08       | 91318.08     |