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INGRESO
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Fecha de emisión: 2026-01-28
Fecha de vencimiento: 2026-01-28

CANT.	UNIDAD	DESCRIPCIÓN	LOTE	F. VENC.	P.UNIT	DTO.	TOTAL
60	NIU	TAPSIN PLUS CALIENTE NOCHE X 60 SOBRES			1.17	0.00	69.90
20	NIU	TAPSIN SC 1g POLVO EFERV CAJA X 20 SOBRES X 3.7g			1.10	0.00	21.90
20	NIU	TAPSIN SC 1g POLVO EFERV CAJA X 20 SOBRES X 3.7g			0.90	0.00	17.90
3	NIU	LECHE DE MAGNESIA PHILLIPS AZUL x 120mL * *			8.34	0.00	25.02
3	NIU	LECHE DE MAGNESIA PHILLIPS AZUL x 120mL * *			7.47	0.00	22.40
3	NIU	LECHE DE MAGNESIA PHILLIPS CEREZA FCO X 120mL * *			8.34	0.00	25.02
3	NIU	LECHE DE MAGNESIA PHILLIPS CEREZA FCO X 120mL * *			7.47	0.00	22.40
11	NIU	CLORURO DE SODIO 0.9% X1000 ML			5.80	0.00	63.80
1	NIU	CLORURO DE SODIO 0.9% X1000 ML			0.00	0.00	0.00
1	NIU	ABRILAR EA 575 JARABE X 100mL**			22.50	0.00	22.50
1	NIU	ABRILAR EA 575 JARABE X 100mL**			12.37	0.00	12.37
50	NIU	DICLOFENACO SODICO 75MG / 3ML ENDOVENOSO AMP CORPORACION FS			0.37	0.00	18.60
30	NIU	LIVOLIN FORTE CAJA X 30 CAPS *2			1.40	0.00	41.90
20	NIU	EQUIPO DE VENOCLISIS *20			1.05	0.00	21.00
5	NIU	EQUIPO DE VENOCLISIS *20			0.00	0.00	0.00
6	NIU	CHOLO 2 SOL INY AMPOLLA IV/IM			12.97	0.00	77.80
6	NIU	LYMPHDIALAR INY X 20 IV/IM			12.97	0.00	77.80
6	NIU	PASCONAL FORTE INY X2ML IM/IV			12.97	0.00	77.80
3	NIU	FEBRAMOL SOLUCION PERFUSION X 100 ML			18.50	0.00	55.50
100	NIU	BUSCAPINA COMPOSIT-N CAJA x 100 COMP			1.06	0.00	105.90
56	NIU	ACICLAV 500mg + 125mg CAJA X 14 TAB *3			0.99	0.00	55.60
100	NIU	AMOXICILINA 500 MG			0.26	0.00	25.90
10	NIU	BENCILPENICILINA BENZATINICA 1200000 UI X 10 AMP			1.49	0.00	14.93
1	NIU	BENCILPENICILINA BENZATINICA 1200000 UI X 10 AMP			11.03	0.00	11.03
10	NIU	CEFTRIAXONA 1G IV/IM			1.57	0.00	15.65
10	NIU	CEFTRIAXONA 1G IV/IM			1.23	0.00	12.31
100	NIU	CIPROFLOXACINO 500MG TAB CAJ X 100			0.19	0.00	18.90

CANT.	UNIDAD	DESCRIPCIÓN	LOTE	F. VENC.	P.UNIT	DTO.	TOTAL
30	NIU	DEXAMETASONA fosfato 4 mg x 10 ampollas			0.32	0.00	9.48
20	NIU	CONTROL GYN TES DE EMBARAZO CASSET			2.20	0.00	44.00
2	NIU	CONTROL GYN TES DE EMBARAZO CASSET			0.00	0.00	0.00
12	NIU	TEST DE EMBARAZO CONTROLGYN LAPICERO			2.59	0.00	31.08
2	NIU	TEST DE EMBARAZO CONTROLGYN LAPICERO			0.00	0.00	0.00
25	NIU	AMIKANEN (AMIKACINA 500MG)IM-IV CAJA X 25 AMP OTARVASQ			1.60	0.00	39.90
25	NIU	BETAMETASONA 4MG/1ML AMPOLLA			1.12	0.00	27.90
25	NIU	KETANEN 30MG/ML CAJA X 25 AMP (KETEROLACO)			0.79	0.00	19.80
25	NIU	KETOPAN (KETOPROFENO 100MG/5 ML)INY X25 AMP			2.20	0.00	55.00
100	NIU	UREN 100mg CAJA X 100 TAB REC			0.43	0.00	42.90
100	NIU	ACIDO FOLICO 05 MG CJA X 100 TAB			0.04	0.00	3.90
100	NIU	ATORVASTATINA 20MG			0.17	0.00	17.25
100	NIU	CETIRIZINA 10MG TABLETA CJA X 100			0.07	0.00	6.75
100	NIU	CLINDAMICINA 300MG X 100 CAP			0.40	0.00	39.90
2	NIU	HIDROXIDO DE ALUMINIO + MAGNESIO JBE 120ML			0.00	0.00	0.00
20	NIU	GASA ESTERIL 7.5CM X 7.5CM			0.50	0.00	9.90
3	NIU	LACTULOSA 3.3G/5ML X 120ML			7.90	0.00	23.70
60	NIU	LOSARTAN 50 MG TABLETAS			0.09	0.00	5.50
2	NIU	EQUIPO DE VOLUTROL			3.00	0.00	6.00
8	NIU	EQUIPO DE VOLUTROL			2.75	0.00	22.00
20	NIU	GASA ESTERIL 10 CM X 10 CM			0.90	0.00	17.90
2	NIU	ALCOHOL PURO 96° FCO X 500mL *2			5.60	0.00	11.20
2	NIU	ALCOHOL PURO 96° FCO X 500mL *2			5.04	0.00	10.08
54	NIU	DOLOCORDRALAN EXTRA FORTE NF CAJA X 54 CAPSULAS			1.56	0.00	84.50
24	NIU	PIEL PRESRVATIVO FANTASIA FRESA CAJA 24 UND			1.95	0.00	46.90
24	NIU	PRESERVATIVO PIEL CON RETARDANTE			2.87	0.00	68.90
24	NIU	PIEL PRESERVATIVO SUPER SEGURO			1.95	0.00	46.90
60	NIU	ANAFLEX MUJER 200 GR			0.80	0.00	48.00
2	NIU	MESIGYNA 50mg + 5mg CAJA X AMP 1mL **			18.50	0.00	37.00
2	NIU	MESIGYNA 50mg + 5mg CAJA X AMP 1mL **			15.46	0.00	30.92
10	NIU	DIGERMIN 2000 MILLONES UFC/5mL SUSP X 10 AMP *2			1.44	0.00	14.40
10	NIU	DIGERMIN 2000 MILLONES UFC/5mL SUSP X 10 AMP *2			1.21	0.00	12.08
30	NIU	ESOMEPRAZOL 40MG X 30 TAB			0.36	0.00	10.70
100	NIU	GRIPACHECK CAPSULA BLANDA			0.67	0.00	66.90
60	NIU	HEPADINE FORTE			0.83	0.00	50.00
60	NIU	HEPADINE FORTE			0.52	0.00	31.04
12	NIU	PARIS 20MG (TADALAFILO)			2.50	0.00	30.00

CANT.	UNIDAD	DESCRIPCIÓN	LOTE	F. VENC.	P.UNIT	DTO.	TOTAL
12	NIU	ALGODÓN CORONA 25 GR			1.20	0.00	14.40
1	NIU	ALGODÓN CORONA 25 GR			0.00	0.00	0.00
25	NIU	ORFEDOL 60MG/2ML AMP(ORFENADRINA)			1.12	0.00	27.90
10	NIU	COBAVIT -12 1MG/ML X 10 AMP			1.38	0.00	13.80
3	NIU	HIDROCORTISONA SUCCINATO 100MG AMPOLLA			5.50	0.00	16.50
100	NIU	MIODEL RELAX NF CAJA x 100 TABLETAS			0.75	0.00	74.90
1	NIU	PURINOR SUSP ORAL X 100ML			42.80	0.00	42.80
1	NIU	PURINOR SUSP ORAL X 100ML			33.00	0.00	33.00
12	NIU	ALCOHOL MEDICINAL 70° FCO X 120mL PAQ X 12 UND **			0.12	0.00	1.49
10	NIU	B VAT 2mL CAJA X 10 AMP *2			10.56	0.00	105.55
10	NIU	B VAT 2mL CAJA X 10 AMP *2			9.81	0.00	98.07
100	NIU	IBUPAIN 400mg CAJA X 100 CAPSULA BLANDA			0.46	0.00	45.90
3	NIU	VITAMINA C REFORCE			38.90	0.00	116.70
3	NIU	VITAMINA C REFORCE			36.90	0.00	110.70
100	NIU	JERINGA 10 ML			0.20	0.00	19.90
100	NIU	JERINGA DESCART 20ML /CC 2			0.18	0.00	18.00
20	NIU	CLORFENAMINA MALEATO AMPOLLA			0.39	0.00	7.80
20	NIU	CLORFENAMINA MALEATO AMPOLLA			0.34	0.00	6.80
2	NIU	NOFERTYL INY			14.87	0.00	29.74
10	NIU	TIBEX 1.5 COMP			2.96	0.00	29.60
10	NIU	TIBEX 1.5 COMP			1.93	0.00	19.30
3	NIU	TRIMEXASOL PEDIATRICO 200MG + 40MG/5ML FCO X 60ML			4.90	0.00	14.70
100	NIU	DIREFACOM 2MG CAJA X 100 TAB			0.18	0.00	17.90
60	NIU	LIZINALER 5MG X 60 TABL (LEVOCETIRIZINA)			0.67	0.00	39.90
60	NIU	TRIMAX 500MG CAJA X 60 TAB (AZITROMICINA)			1.20	0.00	72.00
3	NIU	ZAYTAM COMPOSITUM JBE X 120 ML			13.98	0.00	41.94
6	NIU	CYCLOFEMINA 5 MG			8.50	0.00	51.00
1	NIU	CYCLOFEMINA 5 MG			0.00	0.00	0.00
20	NIU	EVITTA 1.5 MG XAJA X 1 COMPRIMIDO (LEVONORGESTREL)			2.70	0.00	54.00
1	NIU	EVITTA 1.5 MG XAJA X 1 COMPRIMIDO (LEVONORGESTREL)			0.00	0.00	0.00
4	NIU	DIVINA 28 CAJA X 28 TABLE			3.98	0.00	15.92
1	NIU	FERROPEN 50mg/mL SOL. GOTAS X 20mL **			19.46	0.00	19.46
3	NIU	DICLOFENACO 1% GEL			5.90	0.00	17.70
3	NIU	DICLOFENACO 1% GEL			5.58	0.00	16.74
8	NIU	FLUCONAZOL 200MG			2.13	0.00	17.00
8	NIU	FLUCONAZOL 200MG			1.63	0.00	13.04
10	NIU	FUROSEMIDA 20MG/2ML X 10 AMP			1.60	0.00	15.98
100	NIU	IBUPROFENO 400MG CAJA X 100TAB			0.12	0.00	11.90
6	NIU	LINCOMICINA 600MG/2ML X 10 AMP			2.42	0.00	14.50
5	NIU	MELOXICAM 15 MG/1.5 ML			3.52	0.00	17.60

CANT.	UNIDAD	DESCRIPCIÓN	LOTE	F. VENC.	P.UNIT	DTO.	TOTAL
5	NIU	MELOXICAM 15 MG/1.5 ML			3.30	0.00	16.50
3	NIU	PIRANTEL SUSP 250MG/5ML X 15 ML			4.90	0.00	14.70
3	NIU	PIRANTEL SUSP 250MG/5ML X 15 ML			3.75	0.00	11.25
10	NIU	SILDENAFILO 50 MG CJA X 1 TAB			2.27	0.00	22.70
3	NIU	SULFADIAZINA DE PLATA 1 % 30 GR			10.90	0.00	32.70
1	NIU	WELTONIC JARABE X 180ML			10.43	0.00	10.43
1	NIU	WELTONIC JARABE X 180ML			7.62	0.00	7.62
1	NIU	WELTONIC JARABE 345ML			20.27	0.00	20.27
1	NIU	WELTONIC JARABE 345ML			14.02	0.00	14.02
24	NIU	PANADOL EFERVESCENTE CAJ X 24 TABLETAS			1.17	0.00	27.96
28	NIU	PANADOL FORTE CAJA X 56 TAB			1.93	0.00	53.90
1	NIU	PANADOL NIÑOS JBE X 60ML			15.80	0.00	15.80
1	NIU	PANADOL NIÑOS JBE X 60ML			14.99	0.00	14.99
1	NIU	PANADOL PARA BEBES GOTAS X 15mL * *			15.80	0.00	15.80
1	NIU	PANADOL PARA BEBES GOTAS X 15mL * *			15.20	0.00	15.20
20	NIU	DICLOTEK 75MG/3ML			0.39	0.00	7.80
20	NIU	DICLOTEK 75MG/3ML			0.33	0.00	6.58
1	NIU	BANES FORTE 200mg/5mL SUSP x 60mL * *			14.90	0.00	14.90
1	NIU	BANES FORTE 200mg/5mL SUSP x 60mL * *			13.41	0.00	13.41
2	NIU	CLINOMIN AMPOLLA			13.50	0.00	27.00
2	NIU	VITACOSE PLUS INYEC			12.90	0.00	25.80
2	NIU	VITACOSE PLUS INYEC			11.18	0.00	22.36
4	NIU	DORITA CAJA X 28 TAB			5.50	0.00	22.00
50	NIU	SAMAY ZZZ 50MG CAJA X 50 CAP			1.20	0.00	59.80
2	NIU	GASTRORAL SUSP X 200 ML			13.90	0.00	27.80
11	NIU	CIPROF -200MG FRASCO X 100ML(CIPROFLOXACINO)			2.40	0.00	26.40
1	NIU	FRAMIDEX NF SOL. OFTALMICA GOTAS x 2.5mL *6			7.50	0.00	7.50
5	NIU	FRAMIDEX NF SOL. OFTALMICA GOTAS x 2.5mL *6			6.42	0.00	32.10
3	NIU	VENDAS 10 X 5			3.30	0.00	9.90
3	NIU	VENDA 12 X 5			4.90	0.00	14.70
3	NIU	VENDA 2 X 5			0.95	0.00	2.85
3	NIU	VENDA 3 X 5			1.25	0.00	3.75
3	NIU	VENDA 4 X 5			1.65	0.00	4.95
3	NIU	VENDA ELASTICA 5 * 5 CM GALENO			1.97	0.00	5.91
3	NIU	VENDAS ELASTICAS GALENO 6X5 YARDAS			2.19	0.00	6.57
3	NIU	VENDA ELASTICA 8 X 5 YDS			2.69	0.00	8.07
6	NIU	ELECTROLUSA FRESA SOL ORAL 100ML			8.10	0.00	48.60
40	NIU	APROXOL 1G)PARACETAMOL) CAJA X 20 SOBRES			1.15	0.00	45.80
100	NIU	DOLO NEUROFOR X 100 CAPS			1.04	0.00	103.80
20	NIU	ECLOX 10MG /2ML X 10 AMP (METOCLOPRAMIDA)			0.65	0.00	13.00

CANT.	UNIDAD	DESCRIPCIÓN	LOTE	F. VENC.	P.UNIT	DTO.	TOTAL
10	NIU	DICLOFENACO SODICO 75MG / 3ML ENDOVENOSO AMP CORPORACION FS			0.00	0.00	0.00
30	NIU	DEXAMETASONA fosfato 4 mg x 10 ampollas			0.38	0.00	11.40
12	NIU	PARIS 20MG (TADALAFILO)			2.25	0.00	26.97
40	NIU	LYON'S 100mg CAJA x 2 TAB REC (Sildenafil 100mg)			2.90	0.00	116.00
40	NIU	LYON'S 100mg CAJA x 2 TAB REC (Sildenafil 100mg)			0.00	0.00	0.00
1	NIU	CIPROF -200MG FRASCO X 100ML(CIPROFLOXACINO)			3.94	0.00	3.94
					OP. EXONERADAS: S/		4,012.00
					OP. GRAVADAS: S/		204.95
					IGV: S/		36.89
					TOTAL A PAGAR: S/		4,253.84