

**Deliver To :**

**MAIN STORES - KINGSTON HOSPITAL  
GALSWORTHY ROAD  
KINGSTON UPON-THAMES  
LONDON**

**KT2 7QB**

**GB**

Requested delivery date: 07-01-2026

Location ID: RAX 683219 BEA1 SUNSHINE WARD  
BMW LEVEL 3

**Invoice and Payment Enquiries To**

**KINGSTON AND RICHMOND HOSPITAL NHS FT  
RAX PAYABLES F955  
PO BOX 312  
LEEDS**

**LS11 1HP**

**GB**

Tel: 0303 123 1177

All enquiries regarding this order to:

Contact : RJ7 PROCUREMENT, SWL

Telephone : 020 3322 3912

Facsimile No. :

Email Address : queries@swlondonprocurement.nhs.uk

**Supplier**

**Viamed Ltd**

Customer's Supplier Name:

**VIAMED LTD**

**Conditions**

THIS ORDER IS SUBJECT TO STANDARD NHS TERMS AND CONDITIONS. IF PRICES STATED ON THIS ORDER ARE INCORRECT ANY REVISED PRICES MUST BE AUTHORISED BY THE BUYER PRIOR TO ORDER EXECUTION. PAYMENT WILL BE MADE AT THE PRICES STATED HEREIN. DO NOT ASSIGN THIS ORDER SPECIAL INSTRUCTIONS.

Line	Goods or Services Required	Quantity	UOM	Contract Ref.	Unit Price	Line Value	VAT
1	1114006 <b>EyeMax 2 Neonatal Phototherapy Mask Preemie</b> GTIN: 410002456253	1	PACK 20	353000375	£56.70	£56.70	-
2	1114005 <b>EyeMax 2 Neonatal Phototherapy Mask Regular</b> GTIN: 853061006920	1	PACK 20	353000375	£56.70	£56.70	-

Net Total : **£113.40**

Carriage : -

Tax : -

Total : **£113.40**