

HOSPITAL REVOLVING FUND
OF
Postgraduate Institute of child health, Sector-30, Noida, U.P.

TENDER FOR THE YEAR 2024-25
FOR SUPPLY OF
MEDICINES

(Cost of Tender. 5,000.00, Inclusive of GST)
(Rupees Five thousand only.)

Address for Correspondence:

MOS
PGICH
Noida-201303
Ph. No. +91-120-2524102
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Postgraduate Institute of child health

Sector-30, Noida, U.P.-201303

e-mail: smostoressphgti@gmail.com

Hospital Revolving Fund (HRF)

Notice Inviting Tender

Sealed offers are invited on etender portal, in **Two** bid system (1) **Technical Bid** and (2) **Price Bid** from reputed & genuine manufacturers / importers/OEM only, for executing a rate contract for a period of one years for **Medicines**.

The detailed terms and conditions of the NIT can be downloaded from website of the Institute [www. pgich.edu.in](http://www.pgich.edu.in) and etender portal: <http://etender.up.nic.in>. The offer should be submitted online on etender portal only. The Director PGICH reserves the right to accept or reject any offer partially or fully without assigning any reason.

Director

In case, the date mentioned above is declared Government Holiday, the date shall automatically be shifted to the next working day. Offers received with in the stipulated period will only be considered. Institute shall not be responsible for any postal delay.

SALIENT POINTS OF THE NOTICE INVITING TENDER

Sealed offers are invited on etender portal in two bid system for supply of Medicines for a period of one year which may be extended for one year. **Bids will be accepted from reputed & genuine manufacturers / importers/ OEM only.** The salient features of the tender are as under:

- 1) The sealed offer should in two bid system: (1) Technical bid containing Tender documents & (2) Price bid containing the offered rates in the format provided (Annex. III) on etender portal. Technical bid and Price bid should be sealed in separate envelopes. These envelopes should be sealed in single envelope super scribed as 'HRF Tender for Medicines' and should bear the 'Tender No.'**
- 2) Cost of tender document (Non – refundable): Rs.5,000.00 (Inclusive of GST) (Rupees Five thousand only.),** online, favouring 'DIRECTOR PGICH NOIDA payable at NOIDA. Vendor must submit this fee online in the given account and upload the online submission receipt. Without this tender will be deemed cancelled. Those who has participated in previous similar tender (etender) which were cancelled by Institute. They must submit a valid proof of previous tender fee submission. They are not required to submit fresh tender fee.
A/c No.:- 179621010000044
A/c name: - PGICH- tender account
IFS Code: - UBIN0917966
Bank Name: - Union Bank of India
A/c type:- current account
- 3) Earnest Money Deposit (Refundable): Rs.50,000.00 (Rupees Fifty thousand only),** in form of TDR/FDR from a Nationalised / Scheduled Bank, pledged in favour of 'DIRECTOR PGICH, NOIDA .-The validity of the EMD shall be 36 months from the date of issue of the tender.
- 4) Performance Security:** 2.5% of the value (calculated as per approximate one year consumption) of the approved item. The Performance Security would be minimum Rs. 10,000.00 (Rupees ten thousand only) and maximum of Rs.3,00,000.00 (Rupees three Lacs only). Those vendors who have been identified for the purpose of Rate Contract will be required to deposit the performance security within 03 weeks after accepting the Rate Contract and it should be valid for a period of 36 months from the date of Rate Contract.
- 5) Submission of bid / offer:** Along with tender document submission sealed tenders should be submitted through speed post / courier/by hand, at MEDICAL OFFICER STORE OFFICE on ground floor. Any bid received after due date & time or if delivered at wrong place shall be rejected.
- 6) Last date for submission of bid / offer:** On or before 05.02.2025 up to 1300
- 7) Date and time of opening of bid / offer:** The bid / offer would be opened on 06.02.2025 as detailed on Tender document.
- 8) Validity of offer:** Your offer should be valid for 365 days from the last date of submission of the bid, i.e from 05.02.2025 or as if extended on etender and if your offered rates and items are accepted for Rate Contract the same will remain valid for the entire period of Rate Contract, i.e, The Rate Contract will be valid for period of one year from the date of issue of Rate Contract. It may be further extended for a maximum period of one year or till the finalization of new rate contract whichever is earlier, if required.
- 9) The award of the Rate contract is not linked with the procurement style opted by HRF / Institute during the entire period of rate contract. Any item under the rate contract may be procured through supply order. Modality of procurement and inventory management of any item may be changed at any point of time. Quantity shown in bid is approx. Institute may or may not procure the approx quantity indicated. Supply orders will be issued as per requirement of HRF pharmacy or institute.**

GENERAL TERMS AND CONDITIONS OF THE ABOVE NIT

1. **Bids will be accepted from reputed & genuine manufacturers / importers /OEM only.**
2. List of tendered item i.e scope of supply is attached herewith.
3. Items to be procured with a condition of staggered supply, preferably quarterly.
4. The firm has to submit 3rd party test report from Government approved laboratory or NABL accredited laboratory for each supplied batch at the time of supply.
5. Some of the items may be kept on utilization or consignment basis as per requirements of institute.
6. The firms who intend to participate in the tender should first ensure that they fulfil all eligibility criteria as prescribed in the general terms & conditions.
7. The tenderer submitting his / her tender would be deemed to have thoroughly read, considered and accepted all the terms & conditions mentioned in the tender document. No enquiries shall be entertained in respect of acceptance or rejection the bid.
8. Tenderer shall submit duly filled, signed & stamped annexures as per the format provided.
9. The firm should submit the self attested copies of i.e USFDA/WHO-GMP/CEE/COPP/ Research molecule certificate (In case of Research molecule), Manufacturing certificate or provide evidence of supply of medicines/consumables/disposable items/devices if they export/supply the tendered product to countries including in the 'very high human development' list of countries of the world for internal use in those markets if applicable. These will be included as a factor to judge quality.
10. **"For PGICH supply only"** should be mentioned on the supplied items [Individual units (strips of capsule/tablet,vials and ampoules) (Printed/Indelible Stamped)].
11. The sealed envelope containing tender bid super scribed as **'HRF Tender for Medicines'** and the **'Tender No.'**, will be in two parts. **Part '1' – Technical Bid & Part '2' – Price Bid** sealed in separate envelopes and should reach the institute on or before the date and time specified in the NIT.
12. Efforts have been made to avoid duplication in the list of items tendered. However, in case of any identical/similar products/items tendered in duplicate intentionally or unintentionally, the HRF reserves the right to club the technical/price bids for comparison and finalization of Rate Contract.

PART '1' - TECHNICAL BID:

The sealed envelope should be super scribed 'Technical Bid' and shall contain the following:

- I. The Checklist as per the format provided in the Tender documents.
 - II. List of items for which the rates are offered, as per the enclosed format (Annexure II).
 - III. Cost of the Tender document downloaded from the Institute's website and etender portal in form of demand draft, valued at Rs. 5,000.00 (Rupees Five thousand only), in favour of 'DIRECTOR PGICH, NOIDA. This cost would be non refundable.
- 10) Earnest Money Deposit (EMD) in form of FDR /BG from a Nationalised / Scheduled Bank for Rs. 50,000.00 (Rupees Fifty thousand only) pledged in favour of 'favouring 'DIRECTOR PGICH NOIDA payable at NOIDA.**
- IV. **.The validity of the EMD shall be 36 months from the date of issue of the tender.**
 - V. Non Conviction / No pending conviction certificate attested / issued by Notary, for preceeding three years on Rs. 100.00 Non Judicial stamp (Notarized).
 - VI. Self declaration on Rs. 100.00 (Rupees Hundred only) Non judicial stamp paper (Notarised), for the 'Lowest offered rates' and acceptance of 'Downward price revision' clause (Annexure IV).
 - VII. A Notorised affidavit that the tenderer does not have any relation with the person authorized to evaluate Technical Bid/Price Bid or involved in finalizing the tender or will decide the use of tendered items (**Annexure-V**) on stamp paper of Rs. 100.00 (Notarized).

- VIII. Annexure VI signed and stamped for acceptance of the terms & conditions of the tender.
- IX. Annexure VII & VIII duly filled, signed and stamped and also additional forms which are placed at page 26-27-
- X. Self attested documentary evidence to establish the status of the bidder.
- XI. Self attested copies of audited balance sheet for Financial Year 2022-23 & 2023-24 to access the turnover of the bidder.
- XII. Self attested copies of valid manufacturing/marketing/import license and registration certificate of the company for preceeding three years.
- XIII. The firm should submit the self attested copies of i.e
USFDA/EUCE/WHOGMP/CEE/COPP/DCGI/ Research molecule certificate (In case of
Research molecule)
- XIV. Self attested copy of the PAN Card
- XV. Self attested copy of the Income tax returns (ITR) for the Financial Year 2022-23 & 2023-24.
- XVI. Self attested copies of VAT registration certificates.
- XVII. Soft copy of the Technical bid strictly in the format as given in (Annexure II) on a Compact disc / Pen drive.
- XVIII. Specifications of the quoted item should be the same as per the details given in the tender.
- XIX. Any plea for clerical / typographical error etc. would not be accepted. No correspondence will be entertained after opening of Price bid.
- XX. Conditional bid would not be entertained.

PART '2' – PRICE BID:

The sealed envelope should be super scribed '**Price Bid**' and shall contain the following:

- I. Price bid in the prescribed format (Annexure III) duly filled, signed and stamped by the tenderer. Prices should be neatly typed and should be in figures and as well as in words. Any cutting / overwriting would make the offer invalid.

Guidelines for the Price bid:

- I. **Rates should be quoted for one unit only i.e one tab, one amp./vial, one bottle etc.** MRP mentioned should be for the minimum saleable pack i.e one strip, one vial, one bottle etc.
- II. Rates quoted should be inclusive of GST. HRF would only accept the stocks which are GST paid.
- III. The prices quoted by the tenderer should not exceed the controlled price, if any, fixed by the Central / State Government and the Maximum Retail Price (MRP) of the item.
- IV. The billing agency should be registered with GST/ Commercial tax department and posseses a TIN number. (HRF GST No. is 09AAAAI9738C2ZK)
- V. The quoted rates should be F.O.R destination (Central Stores under MO Store, PGICH, Noida)
- VI. Quoted item serial no. should be the same as the serial no. detailed in the item list of the tender document.
- VII. Specifications of the quoted item should be the same as per the details given in the tender.
- VIII. Any plea for clerical / typographical error etc. would not be accepted. No correspondence will be entertained after opening of Price bid.
- IX. Conditional bid would not be entertained.

11. A rational balance of quality, quantity and cost of the product offered / quoted by the firms, which meet the eligibility criteria, shall be the sole basis of awarding the contract.

12. The store offered should have 75% of remaining shelf life in case of products manufactured in India and 60% remaining shelf life in case of imported products. Loss or premature deterioration due to biological and or due to other factors, during the life span of the store shall have to be made good by the contractor free of cost.
13. The stores offered by the contractor should strictly conform to the provisions of Drugs & Cosmetics Act 1940, and rules made there under as amended from time to time.
14. **Each and every page or paper of the tender document should be serially numbered, signed & stamped by the authorised signatory of the bidder.**
15. Tenderer should uphold good business practices.
16. **Disqualification of the bid:**
 - I. Any deviation from the documents listed in the Tender Checklist of the Tender Documents would lead to disqualification of the bid.
 - II. Any action on the part of tenderer to influence any official will amount to rejection of his bid.

DEFINITIONS & INTERPRETATIONS OF DIFFERENT TERMS & TERMINOLOGY

In this tender, the words & expression used shall have the meaning / definition / expression as under:

- (a) Institute means Postgraduate Institute of child health, Noida.
- (b) Contracting Authority means the designated officers on behalf of the Director
- (c) Tenderer means any direct reputed & genuine manufacturer/Importer/OEM only.
- (d) “Acceptance of Tender” means the letter communicating for opening of price bid.
- (e) “Rate Contract” includes the notice inviting tender, general terms & conditions, definition & interpretations, instructions to tenderers, tender acceptance and submission of declaration forms.
- (f) “Contractor” means the person, firm or company with whom the contract is made
- (g) “Inspection” means inspection carried out by the person specified in the contract
- (h) “Purchaser” means the authority accepting the tender.
- (i) “Supply Order” means an order for the supply of goods
- (j) Utilization means vendor managed Inventory where the vendor keeps the track of their items required & consumed.
- (k) Consignment basis means when the vendor keeps the approved goods at his cost & risk.
- (l) “Test” means such tests as are considered necessary
- (m) “Unit” means the unit of purchase as specified in the schedule of goods
- (n) GST” means tax payable under the GSTAs per Act on sale or purchase of goods as the case may be
- (o) GST Invoice: Where the GST has been paid on the purchase of goods by the Institute’s HRF and such goods have been sold / used in the Institute, the amount of tax paid to the vendor on the purchase of such goods shall subject to input credit of tax paid on the purchase or sale of goods under the rules. The vendor / authorized billing agency shall provide the tax invoice for availing the tax input credit as per rules.
- (p) Manufacturer means that makes the first sale of such goods after manufacturing.
- (q) Importer means the firm who makes the first sale of such goods after imports
- (r) Purchase price means amount of valuable consideration paid or payable for purchase of goods.
- (s) “Billing agency” refers to the Rate Contract holder (manufacturer) itself or to any agency/clearing & forwarding agency appointed by the Rate Contract holder (manufacturer).

Rate Contract (other than Life Saving Category Item)

Following three categories of companies/entities will be selected and Rate Contract will be signed with them.

- i. Category 1: Rate Contract 1 – the first source for procurement (L-1)
- ii. Category 2: Rate Contract 2 – the second (alternative) source for procurement (L-2)
- iii. Category 3: Rate Contract 3 - the third (alternative source for procurement (L-3)
- iv. Situation under which supply order might be placed to alternative sources (RC-2 (L-2) AND RC-3 (L-3), in that order)
 - RC-1 source fails to supply the items within the stipulated time of 30 days.
 - The committee members in their collective judgement are not satisfied with the quality of items procured from RC -1 source.
 - When the RC-1 source fails to honor the terms and condition of the contract e.g. (i) asking for upward revision of prices, (ii) asking for extension of the delivery period beyond the accepted time, (iii) any other request from RC-1 source which does not serve the purpose of the Institute.
 - RC-1 could not perform well on account of good inventory management bringing loss on account of overstocking and expiry to zero level.

- Whenever RC-1 fails to completely honour three supply orders the rate contract would be cancelled and RC-2 (L-2) would be made the regular source of procurement and the performance security of RC-1 will be forfeited.
- In such a situation all clauses related to RC1 (L-1) shall automatically apply to RC2 (L-2).
- Companies performance during the current Rate Contract will be taken in consideration while finalizing the future tender.

Procurement on supply order basis:

Supply of material covered under this rate contract will be made on the basis of written supply order with terms and conditions enumerated therein. It will be the responsibility of supplier to have an access with HRF to maintain the optimum inventory level. This has been decided to tide over the problem of over stocking including near expiry/slow moving/non moving inventories, for which following mechanism will be observed: -

- (i) Besides having liaison with user department, you will be allowed to have access to computerized system to know the consumption pattern / reports of the items concerned.
- (ii) In hand stock position at central stores and peripheral sub stores can also be obtained from time to time.
- (iii) Access to Central stores to know the status of expiry / slow moving / non-moving products.
- (iv) Company will own the responsibility of overstocking & expiry.
- (v) Company will actively take preventive measures and inform MOS in writing about any specific item / quantity mentioned in supply order that may lead to overstocking / expiry.
- (vi) In case of any difficulty in getting the feedback from HRF stores, you may contact MOS/ Chairman (HRF) /Director.

You will agree that any loss of material is going to be a national loss. Please do inform about such items asked for supply but may not be required by the users. In case of any difficulty in getting the feedback from Central stores, you may contact MOS /Chairman (HRF)/Director.

1. Period of validity:

The Rate Contract will be valid for period of one year from the date of issue of Rate Contract. It may be further extended for a maximum period of one year or till the finalization of new rate contract whichever earlier, if required.

2. Authority to the purchase:

Medical Officer Store of the Institute shall be entitled to exercise all the rights and powers given in the contract

3. Responsibility of the Tenderer for executing the contract:

The tenderer shall perform the contract in all respect in accordance with the terms and conditions mentioned therein. The tenderer shall remain responsible until the actual delivery of the goods is made to the consignee at the stipulated place.

4. Rate:

The rate quoted by tenderer shall remain firm and fixed until the completion of contract.

- (i) All rates quoted should be for ONE UNIT. Bids should be neatly typed and no blank space should be left
- (ii) Tenderer must ensure that the quoted rates are inclusive of GST as applicable. HRF will only accept the material which would be GST paid, if applicable. All rates quoted should be inclusive of all taxes including Central Sales Tax/GST.
- (iii) All rates quoted should be F.O.R. destination i.e Central Stores, PGICH, Noida.
- (iv) The Institute will not own responsibilities for issuance of road permit and clearance of consignment from any road, rail, air, postal terminals etc.

- (v) No escalation in rates (except Govt levy / tax) would be permissible.
- (vi) Tenderer should take care that the rate and amount are written in such a way that interpolation is not possible.
- (vii) Tenderer should quote the rate in words & figures both.
- (viii) Alteration if any should be attested by the tenderer, otherwise tender will not be considered.

5. Earnest Money Deposit (EMD) & Performance Security:

- (i) EMD in shape of cheque / DD will not be acceptable. EMD should be deposited by the manufacturer / importer / OEM only.
 - (ii) EMD of **Rs. 50000.00 (Fifty thousand only)** in the shape of FDR /BG only, pledged in favour of “DIRECTOR PGICH NOIDA, issued by any scheduled / nationalized bank must be enclosed with the technical bid by the tenderer.
 - (iii) EMD amount in the shape of FDR/BG must have validity of minimum 36 months from the date of issue of Tender notice. The EMD of the RC holders would be released after signing of Rate Contract and deposition of performance security.
 - (iv) If the tenderer fails or neglects to observe or perform any of his/her obligations under the contract, it shall be lawful for the purchaser to forfeit the performance security furnished by the tenderer.
 - (v) Performance Security: 2.5% of the value (calculated as per approximate one year consumption) of the approved item. The Performance Security would be minimum Rs. 10000.00 (Rupees ten thousand only) to a maximum of **Rs. 3,00,000.00 (Three lacs only)**. EMD & Performance Security both will be in shape of FDR/BG pledged in favour of “**DIRECTOR PGICH, NOIDA**. It should be valid for 36 months from the date of issuance of Rate Contract and Performance Security should be submitted within 03 weeks after acceptance of Rate Contract.

6. Change in Constitution of firm:

Any change in the pattern of ownership of the contracting party will not nullify the provisions of the contract. The contract will devolve on the successor owners.

7. Fall Clause:

If at any point of time during the execution of the contract, the contractor reduces the MRP / Sale Price or sells or offers to sell such stores, as are covered under the rate contract of the Institute, to any Government Organization (Central/State Government Hospital/Institute) at a fixed price lower than the price chargeable under the rate contract of the Institute, He/She shall mandatorily notify any such reduction in MRP or Sale Price or offer of sale to the purchaser within a month of the earliest date of such a reduction in price. The price payable under contract with the purchaser will stand correspondingly reduced from the date of reduction of price as notified or evidence obtained of such reduction in the price. In case of delay (more than one month) in such a notification the difference in cost will be recovered and Director PGICH shall have the right to impose penalty such as forfeiture of Performance Security, cancellation of Rate Contract or possible removal of name from list of suppliers (any or all of the above). If such information comes to the notice of HRF authority from other sources, suitable action shall be initiated. Variation, if any, will be governed by the terms & conditions as enumerated in proposed rate contract.

8. Inspection and sampling at the consignee’s end:

- (i) After the receipt of the consignment, the demanding officer may draw a sample out of each consignment and send it for testing at one of the approved testing laboratories/user departments. If the sample/samples is/are found not of standard quality, the consignment shall be rejected. If the product is found to be not of standard quality for any of the above mentioned reasons, the total cost of laboratory test will be recovered from the supplier. Where there are visible and obvious defect in the consignment, it shall be rejected.

- (ii) All rejected stores shall in any event remain and will always be at the risk of the contractor immediately on such rejection.
- (iii) Purchaser reserves the right to depute persons as may be designated by him to visit the premises of the manufacturers for ensuring that GMP(s) are observed by the manufacturers. It is also open to the purchaser to send persons as may be designated by him to inspect stores and draw samples from there before dispatch of consignment.
- (iv) In case of rejection of stores, the supplier will have to replace the entire quantity or make full payment of entire consignment against the particular invoice irrespective of the fact that part of the supplied stores may have been consumed.

9. Penalty Clause:

- (a) **Non-execution of supply order** - For the reasons of failure to supply partially or completely within 30 days, if the HRF has to buy the items from the RC 2 (L-2), RC 3 (L-3) or approved local vendor firm, the rate difference in cost will be recovered from RC holder i.e L1 /Billing Agency as appointed by the Rate Contract Holder. In case if L-2 firm is not available in panel, HRF has to buy the item from locally approved vendor and the difference of cost will be recovered from RC holder/Billing agency payments. The difference of amount will be deducted from the forthcoming bills of the supplier pertaining to any product. Repeated failure (Three times) to supply in part or in full may amount to termination of rate contract for the product (s) and forfeiture of Performance Security. Reasons of failure to supply the material will be communicated by the firm to the HRF timely.
- (b) **Late delivery clause** -The date & time of the delivery as stipulated in the supply order shall be deemed to be the essence of the contract and delivery must be completed no later than the date(s) as specified in the supply order. Unsupplied items of each supply order which will not be supplied during stipulated time period of 30 days should be treated as cancelled and will be procured from RC-2/RC-3 or approved local vendor and difference amount deducted from forthcoming bills of RC1 (L1)/Billing Agency as appointed by the RC Holder.
- (c) **Non production of item** – Difference in the value between existing source and source from where supplies are being obtained for remaining tendered quantity will be recovered from the billing agency.

10. Items nearing expiry / Expired:

The items supplied nearing expiry and / or if not consumed, will be intimated at least three months in advance and will have to be replaced by the tenderer at his / her cost. Slow moving items may be asked for replacement with other approved items at the discretion of HRF.

11. Disputes and Arbitration:

All disputes or differences arising during the execution of the contract shall be resolved by mutual discussion failing which the matter will be referred to the Director (PGICH, Noida) for arbitration whose decision shall be the final binding on the contracting parties.

12. Laws governing the contract:

- (i) This contract shall be governed by the laws of Uttar Pradesh, India
- (ii) The Courts of Lucknow shall alone have jurisdiction to decide any dispute arising out of or in respect of the contract.
- (iii) Terms and expressions not herein defined shall have the meaning assigned to them, if any, in the Indian Sale of Goods Act, 1930 or the Indian Contract Act, 1872 or the General Clauses Act, 1897 as amended from time to time.
- (iv) In view of the notification issued by the Ministry of Health & Family Welfare, Government of India, Gazette Notification no. SO 1468 (E) dated 6.10.2005 and GSR 627 (E) dated 7.10.2005, it would be sole responsibility of the Rate contract holder to comply with the applicable rules and regulations from time to time.

(v) HRF will entertain only direct correspondence from RC holder.

13. Information required on challan & bills:

(a) **Challan:** Supply order will be released and you may execute the supplies directly or through Billing agency. Challan must be endorsed by the security personal at PGICH main gate. The endorsement must clearly mention time and date of entry of the material. The Challan must always bear the following information:

- (i) Name of the item as, it is mentioned in Rate contract/ supply order.
- (ii) Name of the item as, it is mentioned in the product literature of the company (i.e. Brand Name, if any)
- (iii) Size of the item
- (iv) Supply order no. and Date
- (v) Date of manufacturing
- (vi) Date of expiry
- (vii) Batch number
- (viii) Quantity of each item (in unit)
- (ix) Maximum Retail Price (MRP)
- (x) GST No. of PGICH

(b) **Pre-receipted Bill (Tax Invoice),** must always bear the following information:

- (i) Name of the item as, it is mentioned in Rate contract/ supply order.
- (ii) Name of the item as, it is mentioned in the product literature of the company (i.e. Brand Name, if any)
- (iii) Size of the item
- (iv) Supply order no. and Date
- (v) Date of manufacturing
- (vi) Date of expiry
- (vii) Batch number
- (viii) Quantity of each item (in unit)
- (ix) Value of each item
- (x) Total value of the bill
- (xi) The amount of GST paid by the supplier.
- (xii) Maximum Retail Price (MRP)
- (xiii) GST Number of PGICH

14. PAYMENT:-

- (a) 100% payment shall be made on receipt of goods in satisfactory conditions and submission of bill with the material/challan.
- (b) Payment will be made on 30th day from the date of submission of bill, with early payment option facility to be enumerated in the supply order.
 - (i) If you allow 4% trade discount, payment shall be made within (03) working days from its submission date.
 - (ii) If you allow 2% trade discount, payment shall be made within (07) working days from its submission date.
 - (iii) If you do not wish to avail the opportunity of early payments, payments shall be made on 30th day on its submission.
 - (iv) Early payment options are applicable against 100% supplies.
- (c) On consignment / Utilization basis- Fortnightly payment would be released against the item consumed and settled bills of the patients.
- (d) Bills not received in accordance with the instructions as required on challan / bill (mentioned above) will not be entertained /processed for payment by the Institute.

- (e) The part supplies are accepted for the sake of convenience of Central store only. The remaining order shall be treated as cancelled only after last date of supply as per supply order. In case of Part Supply and procurement being done from RC2 or other sources, the cost difference account shall be deducted from the forthcoming bills of the RC1 (L1)/Billing Agency as appointed by the RC Holder.
- (f) The Institute retains the right of returning (to the supplier/s) any item in any quantity that helps to manage the inventory in most economical manner. The value of returned goods would be adjusted in any possible manner that suits the need of the Institute.
- (g) Bill in quadruplicate and pre-receipted payment must be submitted along with copy of challan at the time of supply of the material at Central store. You are advised to comply this point very strictly to avoid any delay in release of the dues. Further you must ensure uninterrupted supply and change of billing agency, will in no way affect the supply schedule.
- (h) **Any variation** in the prices detected at any point of time, the sole responsibility would rest with the firm and shall invite necessary action such as recovery/Administrative action as deemed proper.
- (i) Billing agency may collect payment in its own name for supplies made under written authorization from the manufacturer/importer.

15. Termination of Contract: In case any party (Institute or the company) wants to withdraw from the rate contract, it can do so after giving 03 (three) months notice in writing to the Chairman (HRF)

16. The Director reserves the right to accept or reject any offer partially or fully without assigning any reason.

ESSENTIAL DOCUMENTS

(To be submitted in Original)

To,

The Chairman (HRF)
Hospital Revolving Fund (HRF)
Postgraduate Institute of Child Health,
Sector-30, Noida-201303.

Sub: Tender No. / _____ dated:

Sir,

I am / we are submitting technical bid enclosing the documents as per details given below:

CHECKLIST

| Sl | Name of Document | Page (From) | Page (To) |
|-----|--|-------------|-----------|
| 1. | Cost of Tender document downloaded from etender portal (Non-refundable) Receipt Order No.....Dated..... Issuing Bank.....for Rs.5000 inclusive of GST (Rs Five thousand only) in following account:- | | |
| 2. | E.M.D. – TDR/FDR No: -----date of issue ----- Name & address of issuing bank the TDR / FDR ----- Amount in figures & words. EMD of Rs. 50000.00 (Fifty thousand only) for Medicines in favour of “DIRECTOR PGICH, NOIDA | | |
| 3. | List of items for which the rates are offered, as per enclosed Proforma (Annexure-II). This list should <i>be in duplicate with a copy enclosed on top of the technical bid (Annexure-II)</i> | | |
| 4. | Tender document (Annexure – VI & VII, VIII) duly filled, signed & stamped | | |
| 5. | Self attested copy of the PAN Card | | |
| 6. | Self attested copy of the Income tax returns (ITR) for Financial Year 2022-23&2023-24 | | |
| 7. | Self Attested copies of GST registration certificate | | |
| 8. | Self Attested copies of audited balance sheet for Financial Year 2022-23&2023-24 to access turnover of the bidder. | | |
| 9. | Non-conviction / No pending conviction certificate attested/ issued by Notary for preceding three years | | |
| 10. | Self Attested copies of valid manufacturing/marketing/import license and registration certificates of the company for preceding three years (Annexure I) | | |
| 11. | Documentary evidence stating the status of the bidder i.e. Proprietorship/ Partnership / Company etc | | |
| 12. | Self-Declaration on Rs 100/- Non-judicial stamp paper (Notarized) about lowest rate & passing on the Downward rate revision (Annexure-IV) | | |
| 13. | List of Institute/Hospital where the company supplying the tendered item during last 12 months. | | |
| 14. | An Notorised affidavit on Rs. 100/- Non Judicial stamp paper that tenderer does not have any relation with the person authorized to evaluate technical bid/price bid or involved in finalizing the tender or will decide the use of tendered items (Annexure-V) on stamp paper | | |
| 15. | An Notorised affidavit on Rs. 100/- Non Judicial stamp paper certifying that the firm has not been black listed in the past by any Government/Private Institution and there is no vigilance/CBI/case pending against the firm/supplier | | |

DECLARATION OF THE COMPANY

The Bidder should have to give the details of the CEO (MD), Chairman (with the Authorised Signatory of the tender Bid) such as:

- 1) Name
- 2) Tel. No.
- 3) E-mail ID,
- 4) Address

Declaration by the Authorized Signatory

It is certified that each and every page of the tender document are serially numbered, duly signed by me and the information furnished in tender document is true and correct to the best of my knowledge and belief.

Yours faithfully,

Signature

SEAL OF THE

TENDERER

Name

Designation

Name of company (Tenderer)

Address

Telephone No.

Mobile No.

Fax No.

E-mail:

HRF FORM

Annexure- I

MANUFACTURING & MARKETING CERTIFICATE

This is to certify that M/s _____ are holding valid manufacturing license No. _____ Dated _____ of the State and they are manufacturing the following products.

It is further certified that the following products are also being marketed.

The Products are as follows:

| Sl. No. | Name of Product | Specification | Size |
|---------|-----------------|---------------|------|
|---------|-----------------|---------------|------|

Note: This certificate is to be signed by the Drug Controller of State. Certificate issued by Inspector of Drugs/Drugs Inspector will not be accepted unless their authorization by the State Drug Controller to this effect is supported with documentary proof.

Signature and seal of
Drug Controller of the State

Dated:

HRF FORM

Annexure- II

Detail of the items quoted in the Technical Bid

| Sl. | Tender Item Sl. No. | Name of Item as in the Tender List | Specification of quoted items | Brand Name | Name of Agency for Quality Certification. e.g. US-FDA, CEE/COPP, WHO GMP etc. | Category Brand/Generic Brand/Generic |
|-----|---------------------|------------------------------------|-------------------------------|------------|---|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| | | | | | | |

Note:

1. Tender list serial no. of the item should be the same serial no. as detailed in item list of tender document.
2. Use separate sheet in the same format in case of need of more space.
3. Any product other than listed in tender enquiry can be quoted in separate sheet in same format.
4. Mention of category of each item whether Generic or Generic Brand or Branded is mandatory, failing which item is liable for rejection.

HRF FORM

Annexure- III

Format of Price Bid
As per tender

| Sl | Tender Item Sl. No. | Name of Item as Appeared in the Tender List | Specificati on (Strength & Formulati on i.e Tab./inj/ Syp. of quoted item | Brand Name | Pack Size | Maximum Retail Price (MRP) inclusive of all taxes (in Rs) | Offered Rates/Unit Only Basic Price) | GST (in %) | Total Offered Rates/Unit (8+9) |
|----|---------------------|---|---|------------|-----------|---|--------------------------------------|------------|--------------------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| | | | | | | | | | |

Note:

1. Tender item list Sl. No. of the item should be the same serial no. as detailed in item list of tender document
2. Use sheet in the same format. Please do provide the above information in Excel software in Compact Disk
3. The file name should be the Bidders company name
4. Identification of comparable products (Items) would be done by the expert's committee
5. Committee's decision would be final on this issue.

HRF FORM

Annexure IV

SELF DECLARATION FOR LOWEST RATE (Notarized)
(on Rs 100.00 Non-judicial Stamp paper)

I, (Name of the Authorized Signatory), (Designation of the Signatory) with M/s (Name of the Company), do hereby certify that we (the company) or its subsidiaries/designated representatives have not supplied the product at a cost lower than that quoted in the Tender No. **eBID No-**to any Government Organization (Central/State Government Hospital/Institute) at a fixed price lower than the price chargeable under the rate contract of the Institute.

We also undertake that any downward revision in MRP/Sale price/offer to sale to any Government Organization (Central/State Government Hospital/Institute, anywhere in India) of the product during the entire period of Rate Contract, including any extended periods, will be duly informed to PGICH within a month (30 days) of such price revision, and the same will be passed on to the Institute.

Authorised Signatory

Designation

Seal

Date: Place:

HRF FORM

Annexure V

AFFIDAVIT (notarized)
(on Rs 100.00 Non-judicial Stamp paper)

Reference : Tender No. Tender No. -for Medicines

I, (Name of the Signatory), S/o (Father's Name), (Designation of the Signatory) with (Name of the Company), with its office at (Address of the Head office of the Company), do solemnly affirm and declare as under:-

The Tenderer does not have any relation with the person authorized to evaluate technical bid/price bid or involved in finalizing the tender or will decide the use of tendered items

Place: Date:

Deponent

Verification:

Verified that the contents of the above affidavit of mine are true and correct to the best of my knowledge and no part of it is false and nothing has been concealed therein.

Verified at (Place), on this (Date) day of (Month) 2024.

Deponent



Postgraduate Institute of child health

Sector-30, Noida, U.P.-201303

e-mail:smostoressphpgti@gmail.com

Hospital Revolving Fund (HRF)

Ref:

Dated:

To,

Sub: Annual Rate contract for Supply of Medicines

Dear Sirs,

In reference to tender bid for above-mentioned items, your products as per enclosed **Annexure** are being covered under Annual Rate Contract. The terms and conditions to govern the Annual Rate Contract are as follows:

The award of rate contract is not linked to the procurement style opted by HRF / Institute during the entire period of rate contract. Any item under rate contract may be procured through supply order. Mode of procurement and inventory management of any item may be changed at any point of time.

1. **(a) PROCUREMENT ON SUPPLY ORDER BASIS:** - Supply of material is covered under this rate contract may increase or decrease. It will be made available on the basis of written supply order with terms and conditions as enumerated therein. It will be the responsibility of supplier to have an access with HRF to maintain the optimum inventory level. This has been decided to tide over the problem of over stocking including near expiry / slow moving / non moving inventories, for which following mechanism will be observed: -
 - (i) Besides having liaisoning with user department, you will be allowed to have access to computerized system to know the consumption pattern / reports of the items concerned.
 - (ii) Stock in hand position at Central HRF Store and peripheral sub stores can also be provided on demand.
 - (iii) Access to Central store is allowed to know the status of expiry / slow moving / nonmoving products.
 - (iv) The company will own the responsibility of overstocking & expiry.
 - (v) Items to be procured with a condition of staggered supply, preferably quarterly.
 - (vi) The firm has to submit 3rd party test report from Government approved laboratory or NABL accredited laboratory for each supplied batch at the time of supply.
 - (vii) The company will take all preventive measures and will keep informed MOS in writing about any specific item / quantity mentioned in supply order that may lead to overstocking or expiry.
 - (viii) In case of any difficulty in getting the feedback from HRF stores, you may contact MOS/ Chairman/ Director.

(ix) The Institute has the right to switch over from supply order based procurement to consignment / utilization based procurements also.

You will appreciate that any loss of material is going to be a national loss. Please keep informed about such items asked for supply but in fact not required by the users. In case of any difficulty in getting the feedback from Central store, you may contact MOS / Chairman / Director.

2. **(b) PROCUREMENT ON CONSIGNMENT/UTILIZATION BASIS:-** All approved items on consignment / Utilization basis must be made available in sufficient quantity to cater the whole need of the Institute, Lead time for replenishment of such stocks will be 48 to 72 hours. It will be communicated by telephone, fax or e-mail to you or your authorized distributor.
3. **PERIOD OF VALIDITY:** - The Rate Contract will be valid for period of two year from the date of issue date of Rate Contract. It may be further extended for a maximum period of one year or till the finalization of new rate contract whichever earlier, if required.
4. **PERFORMANCE SECURITY:** - Please submit performance security @2.5% of the value (calculated as per approximate one year consumption) of the approved item. The Performance Security would be minimum Rs. 10000.00 (Rupees ten thousand only) and maximum of Rs.300000.00 (Rupees three Lacs only). Performance security will be in shape of TDR/FDR drawn in favour of "DIRECTOR PGICH NOIDA" (as stipulated in tender notice) payable at NOIDA from any nationalised bank / scheduled bank. The performance Security will have the minimum validity of 36 months from issuance of Rate Contract and it should be submitted within 03 weeks after acceptance of the awarded Rate Contract.
5. **TAXES AND DUTIES:** - Rates are inclusive of all taxes including GST as applicable. Any price variation due to Govt. levies will be settled accordingly. In case the excise duty is being claimed excise gate pass should accompany the supplies or annotation to the effect that excise duty has been deposited. Other charges like banks charges, postage, freight, etc. will be borne by your company.
6. **PRICES:-** Rates are F.O.R. destination basis i.e. Central store, PGICH, Noida. No escalation in rates except Govt. levy/ tax would be permissible. If at any point of time during the execution of the contract, the contractor reduces the MRP / Sale Price or sells or offers to sell such stores, as are covered under the rate contract of the Institute, to any Government Organization (Central/State Government Hospital/Institute) at a fixed price lower than the price chargeable under the rate contract of the Institute, He/She shall mandatorily notify any such reduction in MRP or Sale Price or offer of sale to the purchaser within a month of the earliest date of such a reduction in price. The price payable under contract with the purchaser will stand correspondingly reduced from the date of reduction of price as notified or evidence obtained of such reduction in the price. In case of delay (more than one month) in such a notification the difference in cost will be recovered and Director PGICH shall have the right to impose penalty such as forfeiture of Performance Security, cancellation of Rate Contract or possible removal of name from list of suppliers (any or all of the above). If such information comes to the notice of HRF authority from other sources, suitable action shall be initiated. Variation, if any, will be governed by the terms & conditions as enumerated in proposed rate contract.
7. **ROAD PERMIT:** - No road permit i.e. Form 31/32, Form C or D would be provided by the Institute. It would be the sole responsibility of the supplier to affect the door deliveries at his / her own. HRF will neither own any responsibility for clearance of goods from any road, rail, postal, air terminals nor any machinery of PGICH would be allowed for this purpose.
8. **DELIVERY:** - Supplied material should have ordinarily minimum shelf life of 75% at the time of supply. Batch number and expiry date must be mentioned on face of the bill. Stores supplied through courier, post etc may be received under the sole responsibility of supplier regarding quantity, specification and breakage.

9. **DEFECTIVE INVENTORY:** - Central Store / User department / HRF Management Committee of the Institute will be the sole authority to declare inventory as defective either at the time of receiving the goods or after the use of goods. Cost of such defective inventory will be recoverable from forthcoming bill of the supplier or replaced with any other approved stocks, failing which contract may be terminated.
10. **Penalty Clause:**
- (a) **Non-execution of supply order** - For the reasons of failure to supply partially or completely within 30 days, if the HRF has to buy the items from the RC 2 (L-2), RC 3 (L-3) or approved local vendor firm, the rate difference in cost will be recovered from RC holder i.e L1 /Billing Agency as appointed by the Rate Contract Holder. The difference amount will be deducted from the forthcoming bills of the supplier pertaining to any product. Repeated failure (Three times) to supply in part or in full may amount to termination of rate contract for the product (s) and forfeiture of Performance Security. Reasons of failure to supply the material will be communicated by the firm to the HRF timely.
- (b) **Late delivery clause** -The date & time of the delivery as stipulated in the supply order shall be deemed to be the essence of the contract and delivery must be completed no later than the date(s) as specified in the supply order. Unsupplied items of each supply order which will not be supplied during stipulated time period of 30 days should be treated as cancelled and will be procured from RC-2/RC-3 or approved local vendor and difference amount deducted from forthcoming bills of RC1 (L1)/Billing Agency as appointed by the Rate Contract Holder.
- (c) **Non production of item** – Difference in the value between existing source and source from where supplies are being obtained for remaining tendered quantity will be recovered from the billing agency.
10. **INFORMATION REQUIRED ON CHALLAN / BILL: -**
- (a) **Challan:** Supply order will be released and you may execute the supplies directly or through Billing agency. Challan must be endorsed by the security personal at PGICH main gate. The endorsement must clearly mention time and date of entry of the material. The Challan must always bear the following information:
- (i) Name of the item as, it is mentioned in Rate contract/ supply order.
 - (ii) Name of the item as, it is mentioned in the product literature of the company (i.e. Brand Name, if any)
 - (iii) Size of the item
 - (iv) Supply order no. and Date
 - (v) Date of manufacturing
 - (vi) Date of expiry
 - (vii) Batch number
 - (viii) Quantity of each item (in unit)
 - (ix) Maximum Retail Price (MRP)
 - (x) GST No. of PGICH
- (b) **Pre-receipted Bill (Tax Invoice)**, must always bear the following information:
- (i) Name of the item as, it is mentioned in Rate contract/ supply order.
 - (ii) Name of the item as, it is mentioned in the product literature of the company (i.e. Brand Name, if any)
 - (iii) Size of the item
 - (iv) Supply order no. and Date
 - (v) Date of manufacturing
 - (vi) Date of expiry
 - (vii) Batch number
 - (viii) Quantity of each item (in unit)

- (ix) Value of each item
- (x) Total value of the bill
- (xi) The amount of GST paid by the supplier.
- (xii) Maximum Retail Price (MRP)
- (xiii) GST Number of PGICH

11. **Replacement of near expiry / slow moving / non-moving items:** - It will be responsibility of supplier to get status of slow / non-moving inventory for replacement purposes from Central Store on quarterly basis or at a higher frequency. If company fails to replace such slow moving / non-moving stocks in time, Institute will retain the right to identify such stocks any time during the contract period and return the same to the company. Cost of such returned inventory will be recoverable from forthcoming bill of the supplier or replaced with any other approved stocks, failing which contract may be terminated.

12. **Release of EMD**

- (i) The EMD of Rate Contract Holder would be released after submission of Performance Security.**
- (ii) The bidders who has/have not awarded Rate Contract can take their EMD immediately after finalization of Rate Contract after due correspondence.**

13. **PAYMENT:-**

- (a) 100% payment shall be made on receipt of goods in satisfactory conditions and submission of bill with the material/challan.
- (b) Payment will be made on 30th day from the date of submission of bill, with early payment option facility to be enumerated in the supply order.
 - (i) If you allow 4% trade discount, payment shall be made within (03) working days from its submission date.
 - (ii) If you allow 2% trade discount, payment shall be made within (07) working days from its submission date.
 - (iii) If you do not wish to avail the opportunity of early payments, payments shall be made on 30th day on its submission.
 - (iv) Early payment options are applicable against 100% supplies.
- (c) On consignment / Utilization basis- Fortnightly payment would be released against the item consumed and settled bills of the patients.
- (d) Bills not received in accordance with the instructions as required on challan / bill (mentioned above) will not be entertained / processed for payment by the Institute.
- (e) The part supplies are accepted for the sake of convenience of HRF cell only. The remaining order shall be treated as cancelled only after last date of supply as per supply order. In case of Part Supply and procurement being done from RC2 or other sources, the cost difference account shall be deducted from the forthcoming bills of the RC1 (L1)/Billing Agency as appointed by the RC Holder.
- (f) The Institute retains the right of returning (to the supplier/s) any item in any quantity that helps to manage the inventory in most economical manner. The value of returned goods would be adjusted in any possible manner that suits the need of the Institute.
- (g) Bill in quadruplicate and pre-receipted payment must be submitted along with copy of challan at the time of supply of the material at Central store. You are advised to comply this point very strictly to avoid any delay in release of the dues. Further you must ensure uninterrupted supply and change of billing agency, will in no way affect the supply schedule.

(h) Billing agency may collect payment in its own name for supplies made under written authorization from the manufacturer/importer.

14. **Any variation** in the prices detected at any point of time, the sole responsibility would rest with the firm and shall invite necessary action such as recovery / administrative action as deemed proper.
15. In addition the other terms and conditions as detailed in tender documents would be applicable.
16. In view of the notification issued by the Ministry of Health & Family welfare, Government of India Gazette Notification no SO 1468 (E) dated 06.10.2005 and GSR 627 (E) dated 07.10.2005; it would be sole responsibility of the Rate Contract holder to comply with the applicable rules and regulations from time to time.
17. Any communication as regards to the Rate Contract will be done with the Rate Contract holder only.
18. It would be responsibility of the Rate Contract holder to submit the undertaking during currency of contract by 1st week of every month to the effect that their prices have not come down during the preceding / prevailing month.
19. Name & Address of Billing Agency will be informed by the tenderer after award of Rate Contract (if required) with the following details of the billing agency:
 - PAN Card
 - Sale GST Registration with GST Return for preceding three years.
 - Non Conviction Certification /no pending conviction certificate attested/issued by notary for preceding three years
 - A Notorised affidavit that the billing agency does not have any relation with the person authorized to evaluate Technical Bid/Price Bid or involved in finalizing the tender or will decide the use of tendered items (Annexure-IX) on stamp paper of Rs. 100.00
20. RC holder shall be responsible for all acts of commission and omission carried out by the beneficiary/Billing agency.
21. All Terms & Conditions as mentioned in Tender document will also be the part of this Rate Contract.

Please send us your acceptance duly signed and stamped on duplicate copy of this rate contract as token of your acceptance before execution of the first supply order and also submit the performance security.

Yours faithfully,
Chairman HRF

HRF FORM

Annexure VII

To,
The Chairman (HRF)
PGICH,
Sector-30, Noida.

Ref: Tender No.

Subject: Acceptance of Terms and Conditions of Rate Contract

Sir,

I have gone through the conditions laid down in the tender documents.

I hereby accept the above proposed terms and conditions of the rate contract (Annexure-V) in case of the same is being awarded to my firm against quoted items in this tender documents.

(Authorised Signatory)

Date:

Place:

HRF FORM

Annexure VIII

To,
The Chairman (HRF)
PGICH,
Sector-30, Noida

Ref: Tender no: _____ for Medicines

Sir,

I have gone through the conditions laid down in the tender documents.

I hereby offer to supply the items mentioned in Price Bid at the rates quoted therein. I hereby declare to supply the material duly paid with GST, if applicable. I agree to hold this offer open for the period of two years from the date of issuance of Rate Contract, if awarded.

(Authorised Signatory)

Name

Seal

HRF FORM

Annexure-IX

AFFIDAVIT (Notarized)

(To be filled by RC Holder) (on Rs 100.00 Non-judicial Stamp paper)

Ref: Tender No. _____ for Medicines

I, (Name of the Signatory): _____

S/o (Father's Name): _____ Designation

of the Signatory) with (Name of the Company):

Address of the Head office of the Company:

Do solemnly affirm and declare as under:-

The RC holder or its representative will not have:

- (i) Any conflict of interest in Satisfactory execution of that RC
- (ii) Will not indulge in any corrupt practice
- (iii) Will not indulge in any fraudulent practice

Verification:

Verified that the contents of the above affidavit of mine are true and correct to the best of my knowledge and no part of it is false and nothing has been concealed therein.

Verified at (Place), on this (Date) day of (Month) 2024

Deponent

HRF Form –1(Part I)

Form for pre-qualification for supply of items / rendering services to the HRF, PGICH, Noida.

General:

1. (a) Name of the Tenderer :
(b) Status of the tenderer :
Proprietorship/Partnership/Company
2. Full Postal Address :

3. Telephone No. : 4. Mobile No.
5. Fax No.
6. E-mail Address :
7. State whether tenderer is small scale, medium scale, organized sector (Indian or multinational firm /company)
8. Name of the persons who are responsible for conduct of business as explained under section 34 of the Drugs & Cosmetics Act, 1940.

| Sl. No. | Name | Father's/Husband's Name | Age | Residential Address |
|---------|------|-------------------------|-----|---------------------|
|---------|------|-------------------------|-----|---------------------|

-
9. Particulars of licenses held under the : Drugs & Cosmetics rules including date of grant of license, if applicable
 10. (a) Names of procurement agencies :
with whom the tender is registered
(b) List of the Institute / Hospital where : the company is supplying the tendered item during last 12 months.

- (c) Has the tenderer ever been black :
listed/ debarred by any procurement agency?
If yes, give details:
11. (a) Is there any case pending in the : court
under the Drugs & Cosmetics Act? If yes, give
details (attach separate sheets) like name of
item,
nature of complaints
- (b) Has the tenderer ever been : convicted under the
Drugs &
Cosmetics Act? If yes, give details. If
not, enclose a copy of Nonconviction
certificate from State Drugs
Controller where manufacturing unit
is located.

Technical:

1. Does the tenderer have adequate : **(a)**
Space for :
 (i) Storage of raw materials, packing :
 materials, Intermediaries and finished
 products.
 (ii) Manufacturing operations : (iii) Quality control
 operations :
 (iv) Other facilities like water treatment,
 : heating
 (Emergency electricity generation), waste
 disposal etc.
(b) Equipment for : (i) Material handling :
 (ii) Manufacturing of item permitted on :

 the
 (iii) Quality control of item permitted on :
 the licenses held (or alternatively the tenderer
 have arrangements with approved
 Testing laboratory/(ies) for very sophisticated or
 highly expensive Equipment):
 (iv) Other facilities like water supply, :
 heating, air cleaning and
 air conditioning (wherever
 required) emergency electricity generation,
 waste disposal etc.
**(c) Specialized testing facilities:(d) Do you
 have your own testing : laboratories and in
 house quality assurance**

2. Number of technical staff with the :
 tenderer
 (a) For supervision of manufacture of :
 items
 (b) For quality control of raw materials, :
 Intermediates & finished products

3. Particulars of Heads of Production and :
 Quality control

| Name | Qualification | Whether approved by regulatory agency |
|------|---------------|---------------------------------------|
|------|---------------|---------------------------------------|

For manufacturing

For quality control

4. Has the tenderer carried out stability: studies for the items for which rates have been quoted
5. Does the tenderer possess valid quality: certificate for the items quoted in the tender?
Please specify the name of agency certifying the quality in column no. 7 of Annexure 'A'.
6. Installed capacity for manufacturing of : different items per annum and actual production during the last 12 months.
 - (a) Any significant variations between : capacity and production should be explained.
 - (b) The basis on which calculations : have been made for installed capacity should be stated and due allowance should be given to time loss during change over of product and maintenance of machinery and equipment. Attach a separate sheet to furnish information
7. (a) Whether any item manufactured by : the tenderer has/have been recalled during last three years? If yes, give details:
 - (b) Whether any item imported by the : tenderer has/have been recalled by FDA or similar agencies of Europe and Australia during last three years? If yes, give details:
 - (c) What are the results of investigation : on the recalled items?
 - (d) What action has been taken to : prevent recurrence of recall of items on that particular account? (Attach separate sheet, if space is not sufficient).
8. Do you agree to samples being sent to : laboratories approved by Drug controller, NABL, Central Govt., State Govt. for quality checking

Financial Aspects:

1. Financial status (annual turn-over) of the tenderer. Please furnish attested copies of audited balance sheet / certificate issued by the Banker / Chartered Accountant for Financial Year 2022-23&2023-24 to know financial status of the tenderer.

(Rs. In Lacs)

2. (a) Annual turn over : (b) Facilities available from bank : (i) Over draft facilities :
(ii) Over draft facilities against :
 hypothecation
(iii) Others :

3. Names & Address of the Banker

Name and address of chartered
: accountant

4. Furnish the following information with :
documents
(a) Income Tax PAN :
(b) Central Sales Tax Reg No. :
(c) GST Reg No. :
(d) Service Tax Registration No. :

5. Name and address of the Billing : agency

IMPORTANT Billing from within UP state will only be accepted in order to ensure that supplied goods are Uttar Pradesh GST paid

HRF Form – 1 (Part – IV)

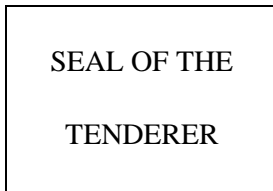
Declaration

I, -----

Prop/ Partner/ Director of M/s -----

Hereby declare that the information given in this Form – 1 (Part-I to III) is true and correct to the best of my knowledge and belief.

Signature and Name of the authorized signatory



Designation

Date

Place

Warning:- Subsequently, if information furnished in this Form is found incorrect, tenderer is liable to be penalized including the Blacklisting

List of Medicines

| Sl. No | Composition | TOTAL |
|--------|--|-------|
| 1 | Aprepitant Capsules Kit 125MG & 80MG IP | OD |
| 2 | ATRACURIUM BESYLATE INJECTION IP 100 MG / 10 ML | 1020 |
| 3 | ATRACURIUM BESYLATE INJECTION IP 25 MG/ 2. 5 ML | OD |
| 4 | ATRACURIUM BESYLATE INJECTION IP 50 MG/ 5 ML | OD |
| 5 | ATROPINE EYE DROPS B.P 5ML 1% W/V | OD |
| 6 | AZTREONAM FOR INJECTION USP 500 MG | 800 |
| 7 | ACETYLCYSTEINE 20% 2 ML INJ | 2790 |
| 8 | ACYCLOVIR 200MG DT TAB | 1000 |
| 9 | ACYCLOVIR 250MG/5ML INJ | 35 |
| 10 | ACYCLOVIR 400MG TAB | 500 |
| 11 | ACYCLOVIR 500MG/10ML INJ | 100 |
| 12 | ADENOSINE 6MG/1ML INJ | 55 |
| 13 | ADRENALINE bitartrate 1ML INJ | 14986 |
| 14 | ALBENDAZOLE 400/10ML Syp | 1700 |
| 15 | ALBUMIN 20% infusion 100ml | 555 |
| 16 | ALLOPURINOL 100 MG tab | 20000 |
| 17 | AMBROXOL 30mg/5ml & levosalbutamol 1mg/5ml100 ML | 840 |
| 18 | AMBROXOL 30MG/5ML 100 ML SYP | 1630 |
| 19 | AMIKACIN 100MG INJ. | 4290 |
| 20 | AMIKACIN 250MG INJ | 12550 |
| 21 | AMIKACIN 500MG INJ | 20750 |
| 22 | Amino Acid alone (all types, concentrations and volumes should be quoted) (10% 100 ml) Bottel/ Bag | 65 |
| 23 | AMINO ACID, VITAMINS, MINERALS AND ANTIOXIDANTS TABLETS | OD |
| 24 | AMIODARONE 50MG INJ | 40 |
| 25 | AMLODIPINE 2.5 MG TAB | 15070 |
| 26 | AMLODIPINE 5 MG TAB | 15050 |
| 27 | AMOXY CLAV 1.2 GM INJ | 2100 |
| 28 | AMOXY CLAV 150 MG INJ | OD |
| 29 | AMOXY CLAV 228/5ml 30ML Syp | 13500 |
| 30 | AMOXY CLAV 300MG INJ | 2500 |
| 31 | AMOXY CLAV 457/5ml DDS 30ML Syp | 5100 |
| 32 | AMOXY CLAV 600MG INJ | OD |
| 33 | AMOXYCILLIN 125 MG/5ml 30 ML SYP | 3740 |
| 34 | AMOXYCILLIN 250 MG/5ml 60 ML SYP | 2200 |
| 35 | AMOXYCILLIN 250MG CAP. | 1200 |
| 36 | AMOXYCILLIN 500MG CAP. | 1000 |
| 37 | AMOXYCLAVE 375MG Tab | 8000 |
| 38 | AMOXYCLAVE 625MG Tab | 8700 |
| 39 | AMPHOTERICIN B LIPOSOMAL 50MG INJ | 630 |

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| 40 | AMPICILLIN 250MG INJ | 450 |
| 41 | AMPICILLIN 500MG INJ | 200 |
| 42 | ANTACID 200ML SYP | 5340 |
| 43 | ANTISEPTIC/ANTIBIOTIC 50GM OINT. | 170 |
| 44 | ARTEMETHER20+LUMIFANTRINE120 TAB | 100 |
| 45 | ARTEMETHER40&LUMIFANTRINE240 TAB | OD |
| 46 | ARTEMETHER80&LUMIFANTRINE480 TAB | 100 |
| 47 | ARTISUNATE INJ. 60 MG VIAL | 250 |
| 48 | ASPRIN 75MG TAB | OD |
| 49 | ASTHALIN RESPULES 2.5 MG RESPULE | 11200 |
| 50 | LYMPHOCYTE IMMUNE GLOBULIN ANTI-THYMOCYTE GLOBULIN 250MG PROTEIN INJECTION | OD |
| 51 | ATORUVASTATIN 40MG TAB | OD |
| 52 | ATRACURIUM INJ | 40 |
| 53 | ATROPINE 1ML INJ | 1171 |
| 54 | AZITHROMYCIN 100 mg/5ML Syp | 3100 |
| 55 | AZITHROMYCIN 200 mg/5ML Syp | 1210 |
| 56 | AZITHROMYCIN 250MG Tab | 2650 |
| 57 | AZITHROMYCIN 500MG Tab | 2650 |
| 58 | Bacillus clausii spores suspension | 1600 |
| 59 | BACILLUS SUBTILIS(HU58*)2 BILLION CFU/5ML | OD |
| 60 | Benzalkonium Chloride & Zinc Oxide Cream 20g | 100 |
| 61 | Betadine scrub 7.5% 100ml SOLUTION | 6095 |
| 62 | Betadine Solution 10% 500ml SOLUTION | 6330 |
| 63 | Betadine Solution 5% 500ml SOLUTION | 55 |
| 64 | Betamethasone Dipropionate 0.05% w/v Zinc Sulphate IP 0.5% w/v | OD |
| 65 | Montelukast 10 mg Tablets | 500 |
| 66 | BLEACHING POWDER I.P. 200 GM PACKING (DOUBLE PACKING-OUTER AND INNER) | 750 |
| 67 | BLEOMYCIN SULPHATE 15 MG INJ | 650 |
| 68 | BORIC POWDER I.P. 100 GMS PACKING (DOUBLE PACKING-OUTER AND INNER) | OD |
| 69 | BOTULINUM TOXIN TYPE A 50IU | OD |
| 70 | Brinzolamide IP 1.0%w/v and Brimonidine tartrate IP 0.2% w/v eye drops | OD |
| 71 | BROAD SPECTRUM ENVIRONMENTAL DISINFECTANT (HIGH LEVEL) EPA APPROVED 1 LTR | 2030 |
| 72 | BROAD SPECTRUM ENVIRONMENTAL DISINFECTANT (MEDIUM LEVEL) EPA APPROVED 1 LTR | 920 |
| 73 | BUDESONIDE 0.5 MG RESPULES | 710 |
| 74 | BUPIVACAINE 0.25% 20 ML INJ | 1000 |
| 75 | BUPIVACAINE 0.50% 20 ML INJ | 520 |
| 76 | BUPIVACAINE H 0.5% 4 ML INJ | 100 |
| 77 | CAFFEINE CITRATE 60 MG/3ML INJ. | 210 |
| 78 | CAFFEINE CITRATE 60 MG/3ML SUSPENSION/SYRUP | 150 |
| 79 | CALAMINE LOTION | 500 |
| 80 | CALCIUM AND PHOSPHORUS WITH VITAMIN D3, 200 ML SYRUP | 2000 |

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| 81 | CALCIUM CARBONATE (625 MG)+VITAMIN D125 MCG/5 ML 200 ML | 1000 |
| 82 | calcium carbonate (elemental calcium 500 mg) tab | 2000 |
| 83 | CALCIUM CHLORIDE 100MG/ML inj | 100 |
| 84 | CALCIUM CITRATE VIT. D3 Tab | 1000 |
| 85 | CALCIUM GLUCONATE 10% INJ | 2024 |
| 86 | CALCIUM LEUCOVORIN 50mg/5ml INJ | 5000 |
| 87 | Calcium syrup, 200ml suspension of atleast 80-130mg/5ml element calcium phosphate with 200IU/5ml Vitamin D3 and 2.5 mcg/5ml Vitamin B 12, no extra active ingredients, sweet in taste, Palatable. | 50 |
| 88 | CALCIUM TABLETS 250MG, CHEWABLE, SWEET IN TEST | 15000 |
| 89 | Carboplatin Injection IP 450mg / 45ml | 300 |
| 90 | CARBOXY METHYL CELLULOSE 1% W/V EYE DROPS | 170 |
| 91 | CEFIXIME 100MG/5ml 30ML Syb | 1300 |
| 92 | CEFIXIME 200MG Tab | 4700 |
| 93 | CEFIXIME 200MG/5ml 30ML Syb | 2100 |
| 94 | CEFIXIME DT 100MG TAB. | 500 |
| 95 | CEFOPERAZONE 2GM,SULBACTAM 1GM | 4050 |
| 96 | CEFOPERAZONE SULBACTUM INJ. 1.5 MG VIAL | 100 |
| 97 | CEFOTAXIME 1GM SODIUM INJ. | 4000 |
| 98 | CEFOTAXIME 250MG INJ | 2650 |
| 99 | CEFOTAXIME 500 MG INJ | 1550 |
| 100 | CEFPODOXIME 100 MG Tab | 500 |
| 101 | CEFPODOXIME PROXETIL 100MG/5ML SYP | 500 |
| 102 | CEFPODOXIME PROXETIL 200MG TAB. | 500 |
| 103 | CEFPODOXIME PROXETIL 200MG/5ML SYP | 50 |
| 104 | CEFTRIAZONE 1GM inj | 12450 |
| 105 | CEFTRIAZONE 250 MG VIAL | 1650 |
| 106 | CEFTRIAZONE 500 MG VIAL | 5600 |
| 107 | CETIRIZINE 10MG Tab | 1400 |
| 108 | CETIRIZINE 30/60ML Syb | 724 |
| 109 | CETIRIZINE 5MG TAB | 200 |
| 110 | CHLORHEXIDINE ANTISEPTIC SOLUTION (SAVLON) (1LTR. PACK) | 2522 |
| 111 | CHLORHEXIDINE GLUCONATE MOUTH WASH 100 ML | 3200 |
| 112 | CHLORINE WATER 500 ML | OD |
| 113 | Chlorpheniramine Maleate 1mg+paracetamol 125mg+phenylephrine 2.5mg drop 15ml | 500 |
| 114 | Chlorpheniramine Maleate 1mg+paracetamol 125mg+phenylephrine 5mg+sodium citrate 60mg syp 100ml | 1500 |
| 115 | Chlorpheniramine Maleate 2mg+paracetamol 125mg+phenylephrine 5mg/5ml 60mg syp 100ml | OD |
| 116 | Chlorpheniramine Maleate 2mg+paracetamol 500mg+phenylephrine 10mg tab | 1500 |
| 117 | CHOLECALCIFEROL IP (VITAMIN D3) tablet 60000 IU | 600 |
| 118 | CIDEX 5 LITRE | 528 |
| 119 | CISATRACURIUM BESYLATE INJ. USP 10 MG/ 5ML | 100 |
| 120 | CISATRACURIUM BESYLATE INJ. USP 20 MG/ 10ML | 100 |

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| 121 | CIS-ATRACURIUM INJ | OD |
| 122 | CLARITHROMYCIN 125MG/5ml (30ML) Syp | OD |
| 123 | CLINDAMYCIN 150MG/ML,4ML VIAL | 370 |
| 124 | CLINDAMYCIN 300MG TAB | 100 |
| 125 | CLOBAZAM 10 MG | 500 |
| 126 | CLOBAZAM 5 MG | 500 |
| 127 | CLOBETASOL OINTMENT | OD |
| 128 | Clonazepam 0.5mg tab | OD |
| 129 | Clotrimazole +Beclomethasone 2% oint | OD |
| 130 | Clotrimazole 75mg POWDER | 100 |
| 131 | CLOTRIMAZOLE MOUTH PAINT 15 ML | 5300 |
| 132 | CLOXACILLIN 500 MG INJ. | 600 |
| 133 | COLISTIMETHATE SODIUM 1MIU INJ | 5400 |
| 134 | COLISTIMETHATE SODIUM 2 MIU INJ | 2500 |
| 135 | COLISTIMETHATE SODIUM 3MIU INJ | 2200 |
| 136 | Composition: Oxymetazoline Hydrochloride IP 0.05% w/v Benzalkonium Chloride IP 0.02% w/v (As preservative) In Buffered Aqueous Solution q.s. | 500 |
| 137 | Composition:Each combipack contains: 10 Hard gelatin capsules of Silodosin (A) and 10 soft gelatin capsules of Dutasteride (B) (A) Each hard gelatin capsule contains: Silodosin 4 mgApproved colours us | OD |
| 138 | Composition:White soft paraffin IP 13.2% w/w Light liquid paraffin IP 10.2% w/w Glycerine containing cream base q.s. Preservatives Methyl paraben IP 0.114% w/wPropyl paraben IP 0.014% w/w | OD |
| 139 | CO-TRIMOXAZOLE 160MG/800MG TAB | 31100 |
| 140 | CYCLOPHOSPHAMIDE 1000 MG INJ | 500 |
| 141 | CYCLOPHOSPHAMIDE 500 MG INJ | 500 |
| 142 | CYCLOSPORINE ORAL 100 MG/ML, 50 ML | 300 |
| 143 | CYTARABINE 1 GM/10ML INJ. | 1000 |
| 144 | CYTARABINE 100 MG/ML INJ. | 5000 |
| 145 | Dacarbazine for Injection IP 200mg (Lyophilised) | OD |
| 146 | Dacarbazine for Injection USP 500 mg (Lyophilised) | 600 |
| 147 | DACTINOMYCIN .5 MG INJ. | 200 |
| 148 | DASATINIB TABLETS 50MG | 2500 |
| 149 | DAUNORUBICIN INJ. 20 MG INJ. | 1500 |
| 150 | DEFERASIROX 500 MG | 50000 |
| 151 | Deferiprone TAB | 20000 |
| 152 | Deflazacort 6mg tab | 400 |
| 153 | DEXAMETHASONE 4 MG INJ | 2850 |
| 154 | Dexamethasone 4 MG Tab | 5000 |
| 155 | DEXAMETHASONE 8 MG INJ | 1906 |
| 156 | DEXAMETHASONE 8 MG TAB | OD |
| 157 | DEXMEDETOMIDINE HYDROCHLORIDE INJ USP 200 MCG/ 2 ML | OD |
| 158 | DEXMEDETOMIDINE HYDROCHLORIDE INJECTION USP 50 MCG / 0.5 ML | 200 |
| 159 | DEXMEDETOMIDINE HYDROCHLORIDE INJECTION USP 100 MCG/ 1 ML | 400 |

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| 160 | Dextromethorphan Hydrobromide, Chlorpheniramine Maleate & Phenylephrine Hydrochloride Syrup | 500 |
| 161 | ALBENDAZOLE 400/10ML Syp | 7336 |
| 162 | DEXTROSE 25% INJ. 100ML | 1476 |
| 163 | Dextrose 5% Fluid IV 500ml | 6710 |
| 164 | DIAZEPAM 10 MG/2ML INJ | 10 |
| 165 | DICLO& PARA 50,500 MG TAB | 150 |
| 166 | DICLOFENAC 75MG TAB | 500 |
| 167 | DICLOFENAC 75 MG/ 3ML INJ | 1932 |
| 168 | Diclofenac diethylamine Methyl Salicylate Menthol and Linseed oil spray | OD |
| 169 | DICLOFENAC GEL | 100 |
| 170 | DISILLED WATER 10 ML VIAL | 6650 |
| 171 | DNS 0.9% 500ML IVF | 33900 |
| 172 | DNS 1/2 500ML .45% IVF | 62524 |
| 173 | DOBUTAMINE INJ. 40mg/ml | 1282 |
| 174 | DOMPERIDONE 30ML Syp (1MG/1ML) | 900 |
| 175 | DOMPERIDONE TAB. 10 MG | 1500 |
| 176 | DOPAMINE 200MG/5ML INJ | 3898 |
| 177 | DOXORUBICIN 50 MG INJ. | 1500 |
| 178 | DOXYCYCLINE 100MG TAB | 500 |
| 179 | Drop Dicyclomine + Paracetamol 10mg+40mg | OD |
| 180 | E C G GELLY 250 ML | 500 |
| 181 | Each 15 gm of granules contains: Lactitol monohydrate USP 10 gm B330 Ispaghula Husk IP 3.5 gm | 100 |
| 182 | EACH 2ML CONTAINS ONDANSETRON 4MG | 21520 |
| 183 | Each 5 ml contains: Montelukast Sodium USP equivalent to Montelukast 4 mg Levocetirizine Hydrochloride IP 2.5 mg Flavoured Syrup base q.s | 2000 |
| 184 | Each 5 ml syrup contains extract: Eranda Karkatti (Carica Papaya Leaf) 275 mg Excipients & Flavours..... q.s Preservatives: Sodium Methyl Paraben IP, Sodium Propylparaben IP & Sodium Benzoate IP | OD |
| 185 | Each 5ml contains:Levocetirizine Dihydrochloride 2.5mg In A Flavoured Syrup Base Q.S. | 500 |
| 186 | EACH CAPSUL CONTAINS: IRON 100MG AND FOLIC ACID 1.5MG CAPSULES | 100 |
| 187 | Each Capsule Contains : Nitrofurantine 100 mg | 1500 |
| 188 | Each capsule contains: Pregabalin IP 75mg, Methylcobalamin IP(as film coated tablet) 0.75mg, Excipients q.s, Colour Ferric Oxide(Red)USP-NF | 500 |
| 189 | Each Capsule Contains:Pregabalin IP 75mg,Mecobalamine IP 0.75 mg,Alpha Lipoic Acid 100 mg,Pyridoxine Hydrochloride IP 3 mg,Folic Acid IP 1.5 mg,Excipients q. s.Approved colours used in capsule shell | OD |
| 190 | Each enteric coated tablet contains: Pantoprazole Sodium Sesquihydrate equivalent to Pantoprazole 20mg, Domperidone BP 10mg. | 2000 |
| 191 | Each Film Coated Tablet contains : CEFUROXIME AXETIL 250 mg | 800 |

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| 192 | Each Film Coated Tablet contains : CEFUROXIME AXETIL 500 mg | 400 |
| 193 | Each Film Coated Tablet Contains : Ciprofloxacin Hydrochloride IP equivalent to Ciprofloxacin 250 mg, Colour: Titanium Dioxide | OD |
| 194 | Each film coated tablet contains : Etoricoxib 90 mg, Colour : Iron Oxide Red, Titanium Dioxide | 500 |
| 195 | Each film coated tablet contains : Levofloxacin Hemihydrate IP equivalent to Levofloxacin 500 mg, Colours: Titanium Dioxide, Iron Oxide Red & Iron Oxide Yellow | 500 |
| 196 | Each film coated tablet contains : Sildenafil Citrate IP equivalent to Sildenafil 25 mg, Colours Ferrix Oxide Red USNF, Indigo Carmine USNF, Ponceau 4R, Titanium Dioxide IP | 100 |
| 197 | EACH FILM COATED TABLET CONTAINS: LEVETIRACETAM 500MG | 5200 |
| 198 | EACH FILM COATED TABLETS CONTAINS: TRANEXAMIC ACID BP 500MG | 2100 |
| 199 | Each Flim coated tablet contains: Vildagliptin 50 mg Metformin Hydrochloride IP 500 mg | OD |
| 200 | Each flim coated Tablet contains: Rosuvastatin Calcium IP equivalent to Rosuvastatin 10 mg Fenofibrate (Micronised) IP 160 mg | OD |
| 201 | Each flim coated Tablet contains: Rosuvastatin Calcium IP equivalent to Rosuvastatin 20 mg | OD |
| 202 | Each gm contains : Sodium Fusidate IP ? 20 mg in a neutral ointment base | 200 |
| 203 | EACH GM CONTAINS: HYDROXYPROPYL METHYLCELLULOSE IP 0.3% W/W, SODIUM PERBORATE BP (AS PRESERVATIVE) 0.228% W/W,AQUEOUS BUFFERED VEHICLE Q.S | 200 |
| 204 | EACH GRAM CONTAINS: HYDROUS BENZYOL PEROXIDE USP EQUIVALENT TO ANHYDROUS BENZOYL PEROXIDE (AS MICROSPHERE) 3.5% W/W, AQUEOUS GEL BASE Q.S. | OD |
| 205 | Each hard gelatin capsule contains : Rabeprazole Sodium 20mg (As enteric coated tablet) IP, Domperidone BP30 mg (As sustained Release Tablet) | 3000 |
| 206 | Each hard gelatin capsule contains : Silodosin 4mg Excipients qs Approved colours used in capsule shell. | OD |
| 207 | Each hard Gelatin Capsule contains: Collagen (Type i,ii,v & x) 200 mg Mucopolysaccharides 50 mg Chondroitin Sulfate 100 mg Hyaluronic Acid 75 mg Other Ingredient : Magnesium Stearate (INS 470 (III) Contains Permitted Synthetic Colours (INS 122) (INS 171) (INS 102) & (INS 133) in Empty Capsule Shell. | OD |
| 208 | Each ml contains : Amoxicillin Trihydrate IP equivalent to Amoxicillin 100 mg, in a flavoured base q.s., | 200 |
| 209 | EACH ML CONTAINS : PACLITAXEL 6MG | OD |

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| 210 | EACH ML CONTAINS : PACLITAXEL 6MG, POLYOXYL 35 CASTOR OIL USNF 527MG, ABSOLUTE ALCOHOL IP 45.7% v/v | OD |
| 211 | EACH ML CONTAINS: CARBOXYMETHYLCELLULOSE SODIUM USP 5MG STABILIZED OXYCHLORO COMPLEX (AS PRESERVATIVE) 0.005% W/V | 500 |
| 212 | DOXORUBICIN HYDROCHLORIDE IP 20MG EACH ML CONTAIN | 200 |
| 213 | EACH ML CONTAINS: HYDROXYPROPYL METHYLCELLULOSE IP 3MG, SODIUM PERBORATE BP (AS PRESERVATIVE) 0.028% W/V, AQUEOUS BUFFERED VEHICLE Q.S. | 200 |
| 214 | EACH ML CONTAINS: LEVETIRACETAM 100 MG WATER FOR INJECTION IP Q.S. | 700 |
| 215 | EACH ML CONTAINS: LUBRICATING EYE DROPS (HPMC 0.3%W/V/ WITH SOC) | OD |
| 216 | EACH ML CONTAINS: METHYLPREDNISOLONE ACETATE USP 40MG inj | 500 |
| 217 | EACH ML CONTAINS: MOXIFLOXACIN HYDROCHLORIDE EQUIVALENT TO MOXIFLOXACIN | 500 |
| 218 | each ml contains: moxifloxacin hydrochloride ip eq.to moxifloxacin 5 mg dexamethasone sodium phosphate ip. eq. to dexamethasone phosphate 1 mg aqueous buffered vehicle q.s. | 100 |
| 219 | EACH ML CONTAINS: NEPAFENAC 0.1% W/V, BENZALKONIUM CHLORIDE IP (AS PRESERVATIVE) 0.005% W/V EYE DROP | 500 |
| 220 | EACH ML CONTAINS: OLOPATADINE HYDROCHLORIDE EQUIVALENT TO OLOPATADINE 2MG BENZALKONIUM CHLORIDE SOLUTION IP (AS PRESERVATIVE) 0.02% W/V EYE DROP | 200 |
| 221 | EACH ML CONTAINS: POLYETHYLENE GLYCOL 400 NF 0.4%W/V,PROPYPLENE GLYCOL IP 0.3% W/V STERILE AQUEOUS BUFFERED VEHICLE Q.S EYE DROP | 200 |
| 222 | Each ml Contains: Simethicone Emulsion USP equivalent to Simethicone USP..... 40 mg, Dill Oil BP0.005 ml, Fennel Oil..... 0.0007 ml. In DROPbase. | 2000 |
| 223 | EACH ML CONTAINS: TOBRAMYCIN SULFATE USP EQ. TO TOBRAMYCIN 3MG. FLUOROMETHOLONE USP 1MG | 500 |
| 224 | EACH ML CONTAINS: TRANEXAMIC ACID BP 100MG/ML INJECTION | 1570 |
| 225 | Ferric Carboxymaltose500 MCG INJECTION | 50 |
| 226 | Each ml contains:Cholecalciferol IP 400 IU(As stabilized vitamin D3)Flavoured syrupy base: QS | 4000 |
| 227 | Each sachet of 1 gm contains: Cholecalciferol IP 60000 IU | 8000 |

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| 228 | Each soft gelatin Capsule contains: Cholecalciferol IP 60000 IU | 500 |
| 229 | Each spary delivers : Mometasone Furoate Monohydrate Equivalent to Mometasone Furoate 0.05% w/w | 1000 |
| 230 | EACH TUBE CONTAINS : AMORPHOUS HYDROGEL WOUND DRESSING WITH COLLOIDAL SILVER | 500 |
| 231 | EACH UNCOATED BILAYER TABLET CONTAINS: GLIMEPIRIDE IP 2MG, METFORMIN HYDROCHLORIDE IP (AS EXTENDED RELEASE) 1000MG | OD |
| 232 | each uncoated bilayer tablet contains:glimepiride IP 0.5mg,metformin hydrochloride IP (as extended release) 500 mg | OD |
| 233 | EACH UNCOATED FLAVOURE CHEWABLE TABLET CONTAINS: MONTELUKAST SODIUM EQ. TO MONTELUKAST 5MG. | 2000 |
| 234 | EACH UNCOATED SUSTAINED RELEASE TABLET CONTAINS: ACEBROPHYLLINE 200MG | OD |
| 235 | Each uncoated tablet contains : Chlorzoxazone USP 500mg, Diclofenac Sodium 50mg and Paracetamol 500mg | 500 |
| 236 | Each uncoated tablet contains : Diazepam 5mg | OD |
| 237 | Each uncoated tablet contains Alprazolam IP 0.25 mg | 500 |
| 238 | Each uncoated tablet contains: Alprazolam IP 0.5 mg | 500 |
| 239 | EACH UNCOATED TABLET CONTAINS: METHOTREXATE IP 10MG | 10000 |
| 240 | Each uncoated tablet contains:Piroxicam IP 20mg (As Betacyclodextrin complex) | OD |
| 241 | EACH VIAL CONTAIN OCTREOTIDE ACETATE 33.6MG,EQUIVALENT TO 30 MG OCETREOTIDE BASE.EACH PFS (2ML) | 600 |
| 242 | Each vial contains: Cholecalciferol IP 60000 IU | 500 |
| 243 | Each Vial Contains: Artestunate 60 mg, Sodium Bicarbonate IP 5%w/v 1ml ampoule, Sodium Chloride Injection IP 0.9% w/v/ 5ml ampoule Water for Injection IP q.s. | 500 |
| 244 | EACH VIAL CONTAINS: AZACITIDINE FOR INJECTION | OD |
| 245 | Each vial contains: Ceftazidime (As Ceftazidime Pentahydrate IP).....2.0 gm, Avibactam Sodium equivalent to Avibactam 0.5 gm. | 800 |
| 246 | EACH VIAL CONTAINS: METHYLPREDNISOLONE SODIUM SUCCINATE EQ. TO METHYLPREDNISOLONE 1000MG | 220 |
| 247 | EACH VIAL CONTAINS: METHYLPREDNISOLONE SODIUM SUCCINATE EQUIVALENT TO METHYLPREDNISOLONE 125MG | 1000 |
| 248 | EACH VIAL CONTAINS: SILDENAFIL CITRATE IP EQ. TO SILDENAFIL 0.8MG WATER FOR INJECTION IP Q.S | 15 |
| 249 | Each Vial contains:L-Asparaginase 5000 IU | 50 |
| 250 | ELECTROLYTE-P 500ML IVF | 5000 |
| 251 | ENALAPRIL 2.5 MG TAB | 2000 |
| 252 | ENZYMATIC DETERGENT SOLUTION 5L | 10 |

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| 253 | ESMOLOL 100MG INJ | 200 |
| 254 | ETOMIDAT 10 ML INJ | 100 |
| 255 | ETOPOSIDE 100MG INJ | 500 |
| 256 | Etoricoxib IP 60 mg Thiocolchicoside IP 4 mg tab | 500 |
| 257 | FENTANYL 100MCG/2ML INJ | 4954 |
| 258 | Ferrous Ascorbate equivalent to Elemental iron 100mg tablet | 5000 |
| 259 | FEXOFENADINE 120 MG TAB | 500 |
| 260 | FILGRASTIM 300MCG/ML INJ | 1500 |
| 261 | FLUCONAZOL 200 MG INJ | 125 |
| 262 | FLUCONAZOLE 150 MG TAB | 500 |
| 263 | FLUCONAZOLE 50 MG TAB | 500 |
| 264 | FLUID IV ISOLYTE- P (500 ML) BOTTLE | 5150 |
| 265 | FLUID IV NS 0.9% Nacl 100ml | 69200 |
| 266 | FLUID IV NS 3% 100ml | 2650 |
| 267 | Fluticasone 50mcg INHALER | OD |
| 268 | FLUTICASONE PROPIONATE BP 0.05% W/V nasal spray | 400 |
| 269 | FOLIC ACID 5MG Tab | 10000 |
| 270 | FORMALDEHYDE 500 ML solution | 160 |
| 271 | FORMALDEHYDE TABLET | 4000 |
| 272 | Formeterol+Budesonide Inhaler 6mcg+400mcg | 200 |
| 273 | FORMULA FEED FOR TERM NEONATE POWDER/TIN | 450 |
| 274 | FORMULA FEED-PRETRM, LOW BIRTH WEIGHT POWDER TIN | 370 |
| 275 | Framycetin 30gm CREAM | 150 |
| 276 | FRUSEMIDE 10MG/2ML INJ | 17281 |
| 277 | FUSIDIC ACID +BETAMETHASONE COMB cream | OD |
| 278 | GABAPENTIN 400MG NORTRYPTILINE 10MG TABLETS | OD |
| 279 | GENTAMYCIN 20 MG INJ. | 150 |
| 280 | GENTAMYCIN 80 MG INJ. | 800 |
| 281 | Glucosamine 500mg tab | OD |
| 282 | GLUCOSTICK STRIPS | 24700 |
| 283 | GLUTERALEHYDE 2% 5LTR. | 177 |
| 284 | GLYCERINE IP 400GM solution | 500 |
| 285 | GLYCEROL 100 ML SYP | OD |
| 286 | GLYCOPYRROLATE INJECTION IP 0.2 MG./1ML 10 ML VIAL | 3020 |
| 287 | HAEMACCEL GLATIN 4% | 50 |
| 288 | HAND RUB 500ML SOLUTION | 34250 |
| 289 | HAND WASH 500ML | 34890 |
| 290 | HEPARIN 5000 IU inj | 580 |
| 291 | HEPARIN LOW MOLECULAR WT 60mg INJ | 0 |
| 292 | HEPARINE 25000 IU INJ | 1050 |
| 293 | HEPATITIS B VACCINE --10ML VIAL | 202 |
| 294 | HOMATROPINE EYE DROP | 1000 |
| 295 | HUMAN ALBUMIN 20% 100 ML VIA | 230 |
| 296 | HUMAN MILK FORTIFIER, 1G SACHET | 500 |
| 297 | HYDROCORTISONE 100 MG INJ | 3260 |

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| 298 | HYDROGEN PEROXIDE 500 ML 400 ML (IN OPAQUE PLASTIC BOTTLE) (SAME MONTH OF MANUFACTURE AS SUPPLY) | 2117 |
| 299 | HYDROXYPROPYL METHYCELLULOSE OPHTHALMIC GEL 0.3% | OD |
| 300 | Hydroxypropylmethylcellulose 0.3% w/v ointment | OD |
| 301 | Hydroxypropylmethylcellulose IP 98.5% and Peppermint powder 1.5%) nasal spray | OD |
| 302 | HYDROXYUREA CAP. 500 MG | 2000 |
| 303 | HYOSCINE 20MG/ML INJ | 500 |
| 304 | IBUPROFEN 100MG SYP | 1000 |
| 305 | IBUPROFEN PARACETAMOL 60 ML | 3000 |
| 306 | IFOSFAMIDE 1 GM WITH MESNA INJ | 2000 |
| 307 | Inh Salbutamol 100mcg/MDI | 1000 |
| 308 | Inj. Azithromycin 500mg | 150 |
| 309 | Inj. Crystalline Penicillin, IP inj. Crystalline Benzthine Penicillin G, 6 Lakh IU vial | OD |
| 310 | Inj. TT, Inj. Tetanus Toxioid 0.5ml/40IU | 2000 |
| 311 | INSULIN-REGULAR INJ. (100 U) 10 MLVIAL | OD |
| 312 | INSULIN-REGULAR INJ. (40 U/ML) 10 MLVIAL | 86 |
| 313 | INTRALIPID 20% (100 ML) FAT EMULSION | 75 |
| 314 | IPRATROPIUM BROMIDE RESP 500lebet MCG/2ML | 450 |
| 315 | Irenotican Injection IP -100 mg / 5 ml | OD |
| 316 | IRON 80MG/ML 200ml Syp | 5000 |
| 317 | IRON DROPS CONTAINING 25 MG/ ML OF ELEMENTAL IRON (ORAL DROPS) | 2000 |
| 318 | ISOFLURANE IP LIQUID FOR INHALATION 250 ML BOTTLE | 200 |
| 319 | ISOPRENALIN INJ. I ML | OD |
| 320 | Isphaghula Husk + Lactulose 3.5+10gm POD | 50 |
| 321 | IVIG 5GM INJ | 405 |
| 322 | KETAMINE HCL I.P. 500 MG/10 ML INJ | 3610 |
| 323 | KETAMINE HYDROCHLORIDE INJECTION IP 250 MG/ 5 ML INJ | 2000 |
| 324 | KETAMINE HYDROCHLORIDE INJECTION IP100MG/2ML INJ | 3080 |
| 325 | KETOCONAZOLE CREAM | 100 |
| 326 | KETOCONAZOLE SHAMPOO | 500 |
| 327 | KETOROLAC DT 10MG Tab | 2000 |
| 328 | LABETALOL 4ML INJ | 1200 |
| 329 | LACTULOSE 200 ML SYP | 2900 |
| 330 | Lansoprazole 15mg Tab DT | 2250 |
| 331 | L-ASPARAGINASE 10000u Each Vial contains | OD |
| 332 | L-ASPARAGINASE 500 IU INJ. | OD |
| 333 | LEVETIRACETAM 100 MG inj. | 100 |
| 334 | LEVETIRACETAM 100 MG/5ML 200 ml syp | 500 |
| 335 | LEVETIRACETAM 500MG TAB. | 5000 |
| 336 | LEVOCETIRIZINE 10 MG | 10000 |
| 337 | LEVOCETIRIZINE 5 MG | 200 |
| 338 | LEVOSALBUTAMOL 0.63MG RESP | 30000 |

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| 339 | LEVOSALBUTAMOL Syp | 10000 |
| 340 | Levosalbutamol+Beclomethasone MDI 50mcg+50mcg | 100 |
| 341 | Levosalbutamol+Ipratropium Inhaler 50mcg+20mcg | 10 |
| 342 | LIDOCAINE 10% SPRAY | OD |
| 343 | LIDOCAINE HYDROCHLORIDE 4% TOPICAL INJECTION | |
| 344 | SOLUTION USP 42.7 MG/ML I.P | 50 |
| 345 | LIDOCAINE HYDROCHLORIDE ORAL TOPICAL 2% SOLUTION USP | 10 |
| 346 | LIDOCAINE TOPICAL AEROSOL 10% SPRAY 50 ML | OD |
| 347 | LIGNOCAINE 2% 30 ML ADR inj | 1500 |
| 348 | LIGNOCAINE 2% 30 ML INJ | 2000 |
| 349 | LIGNOCAINE 2% 30GM JELLY | 5000 |
| 350 | LIGNOCAINE 2% 50 ML INJ | 525 |
| 351 | LIGNOCAINE -2% LIGNOCAINE WITHOUT ADRENALINE 50 ML MULTIDOSE VIAL | OD |
| 352 | LIGNOCAINE 4% TOPICAL INJ | 100 |
| 353 | LIGNOCAINE SPRAY 100 MG SPRAY | 100 |
| 354 | LINEZOLID INJ. 600 MG | 250 |
| 355 | LINEZOLID TAB. 300 MG | 775 |
| 356 | LINEZOLID TAB. 600 MG | 1500 |
| 357 | LIQUID PARAFFIN 400 ML | 75 |
| 358 | LIQUID PARAFFIN+MILK OF MAGNESIA Syp | 200 |
| 359 | LORATADINE 10MG TAB | OD |
| 360 | Losartan Potassium 50mg tab | OD |
| 361 | LOSARTAN POTASSIUM 25MG | OD |
| 362 | MAGNESIUM SULPHATE INJ | 1545 |
| 363 | MANNITOL INJ. 20% 100 ML | 890 |
| 364 | MERCAPTOPURINE 50 MG tab | 20000 |
| 365 | MEROPENEM 1GM INJ | 8850 |
| 366 | MEROPENEM 250MG Inj. | 3050 |
| 367 | MEROPENEM 500 MG INJ.VIAL | 800 |
| 368 | MESNA 200 MG INJ | 10000 |
| 369 | MESNA 600 MG INJ | OD |
| 370 | METHOTREXATE 2.5 MG TAB | 20000 |
| 371 | METHOTREXATE 5 MG TAB | 5000 |
| 372 | Methotrexate Injection IP 15 mg / 3 ml | 2500 |
| 373 | Methotrexate Injection IP 50 mg / 2ml | OD |
| 374 | Methotrexate Injection IP 500 mg / 5 ml | 3000 |
| 375 | METHYLCOBALAMINE 500 MG TAB. | 10000 |
| 376 | METRONIDAZOLE 60ML Syp | 2400 |
| 377 | METRONIDAZOLE INJ. 100ML | 11775 |
| 378 | METRONIDAZOLE TAB. 400mg . | 1700 |
| 379 | MIDAZOLAM 10 MG INJ | 4800 |
| 380 | MIDAZOLAM 5MG/5ML INJ | 470 |
| 381 | MIDAZOLAM NASAL SPRAY | 210 |
| 382 | MILRINONE LACTATE 10MG/10ML inj | 110 |

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| 383 | Mometasone 0.05% oint | 200 |
| 384 | MONTELUKAST 5 MG TAB | 2000 |
| 385 | MONTELUKAST &LEVOCETRIZINE 10 MG TAB | 10000 |
| 386 | MONTELUKAST SODIUM EQ.TO MONTELUKAST 4 MG AND LEVOCETIRIZINE DIHYDROCHLORIDE 2.5 MG tab/cap | 5000 |
| 387 | MOXIFLOXACIN+TOBRAMYCIN EYE DROP | 500 |
| 388 | MULTIVITAMIN 200 ML SYP | 1800 |
| 389 | MULTIVITAMIN 400 ML SYP | 1200 |
| 390 | MULTIVITAMIN ORAL DROP 15 ML (DROP) | 1000 |
| 391 | Multivitamins and multiminerals Tablets | 10000 |
| 392 | MUPIROCIN 5GM OINT.- | 5980 |
| 393 | N S 250 ML (ECOFLAC PLUS) IVF | OD |
| 394 | NACL 3% (HYPERTONIC SALINE) 50 ML INJ. | 2000 |
| 395 | N-BUTYL-2 CYANOACRYLATE .5 ML inj | OD |
| 396 | NEOSTIGMINE 2.5MG/5ML INJ | 130 |
| 397 | NEPHAZOLINE+CMC+CAMPHOR eye drop | OD |
| 398 | NITAZOXANIDE 200 MG TAB | 500 |
| 399 | NITROGLYCERINE 2.6 MG TAB | OD |
| 400 | NITROGLYCERINE 25 MG/5ML INJ | 160 |
| 401 | NORADRENALINE 2 ML | 6520 |
| 402 | NORFLOXACIN TINIDAZOLE 400/600 tab | 1000 |
| 403 | NORMAL SALINE 100 ML IVF | 15752 |
| 404 | NORMAL SALINE 500 ML IVF | 53850 |
| 405 | NUTRITIONAL POWDER PDC | OD |
| 406 | O R S SACHET | 20000 |
| 407 | OCTREOTIDE 0.05MG PER ML (1ML AMP) | OD |
| 408 | OCTREOTIDE 100 MCG INJ. | 500 |
| 409 | OFLOXACIN TAB. 200 MG | OD |
| 410 | OMEPRAZOLE 40MG Tab | 2000 |
| 411 | OMEPRAZOLE INJ 40MG/VIAL | 500 |
| 412 | ONDANSETRON 30ML SYP | 3000 |
| 413 | ONDANSETRON 4MG TAB | 10000 |
| 414 | ONDANSETRON 4MG/2ML INJ | 30000 |
| 415 | ONDANSETRON 8 MG TAB | 3000 |
| 416 | OSELTAMIVIR 12MG/ML 75ML SYP | 500 |
| 417 | PANTOPRAZOLE TAB. 40 MG | 20000 |
| 418 | PANTOPRAZOLE INJ. 40 MG | 5000 |
| 419 | PANTOPRAZOLE+DOMPERIDONE. 40 MG+30 MG CAP | 5000 |
| 420 | PARACETAMOL 170 MG SUPPOS | 100 |
| 421 | Paracetamol + Dicyclomin hcl 500mg+20mg tab | OD |
| 422 | PARACETAMOL + IBUPROFEN TAB | 2000 |
| 423 | PARACETAMOL 100 MG/ML DROPS | 5000 |
| 424 | PARACETAMOL 125MG/5ml 60ML SYP | 5300 |
| 425 | PARACETAMOL 250MG/5ml 60ML/100ml SYP | 30000 |
| 426 | PARACETAMOL 500 MG TAB | 50000 |
| 427 | PARACETAMOL 650 MG TAB | 50000 |
| 428 | PARACETAMOL INJ. 1000MG/100 ML | 30000 |
| 429 | PARACETAMOL INJ. 2ML | 1400 |

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| 430 | Paradichlorobenzene, Benzocaine, Chlorbutol & Turpentine Oil Ear Drops | 2000 |
| 431 | PARENTARAL NUTRI (ANINOPLASMA) 10% | OD |
| 432 | PARENTARAL NUTRI (OMEGA) 625 ML | 0 |
| 433 | PARENTARAL NUTRI (OMEGA) 625 ML 20% | OD |
| 434 | PHENIRAMINE 22.75MG/2ML INJ | 3000 |
| 435 | PHENOBARBITONE 200 MG/ML INJ | 438 |
| 436 | PHENOBARBITONE 60 ML SYP | 120 |
| 437 | PHENYLEPHRINE HYDROCHLORIDE INJECTION 50 MCG / ML 10ML VIAL | 100 |
| 438 | PHENYTOIN 100MG TAB | 3000 |
| 439 | PHENYTOIN 100MG/2 ML INJ | 1820 |
| 440 | PHENYTOIN SYP. 30 MG/5 ML | 200 |
| 441 | PIPERACILLIN,TAZO 4.5GM INJ. | 2000 |
| 442 | PIPERACILLINE+TAZOBECTUM 1.125GM INJ | 1800 |
| 443 | PIPERACILLINE+TAZOBECTUM 2.25GM INJ | 2000 |
| 444 | POLIDOCANOL 2 ML INJ | 200 |
| 445 | Polymyxin b 10000iu/gm chloramphenicol 10mg/gm EYE OINTMENT | 200 |
| 446 | POLYVALANT ANTI SNAKE VENOM 10 ML INJ. | 350 |
| 447 | POSACONAZOLE 100ml inj | OD |
| 448 | POTASSIUM CHLORIDE 10 ML INJ | 44850 |
| 449 | Potassium Citrate + Magnesium Citrate Oral Solution | OD |
| 450 | Potassium citrate, Magnesium citrate and Pyridoxine oral solution | OD |
| 451 | POTASSIUM PERMANGANATE 500 GM | 500 |
| 452 | POVIDINE-IODINE GARGLE | 26150 |
| 453 | Povidone Iodine 5% SOL | 100 |
| 454 | POVIDONE-IODINE 10% LOTION 500 ML BOTTLE | 5000 |
| 455 | POVIDONE-IODINE 10% OINTMENT TUBE 100GMS | 252 |
| 456 | POVIDONE-IODINE 7.5% SURGICAL SCRUB SOLUTION 100 ML BOTTLE | 2000 |
| 457 | Pre & Probiotic Capsules | 500 |
| 458 | Prednisolone Acetate, Chloramphenicol, Glacial Acetic Acid & Benzocaine Ear Drop | OD |
| 459 | PREDNISOLONE EYE DROP 10ML | 240 |
| 460 | PREDNISOLONE FORTE SYP. 15 MG/5 ML (60 ML) | 500 |
| 461 | PRILOCAINE LIGNOCAINE CREAM | 100 |
| 462 | PROMETHAZINE 50MG/2ML INJ | 20 |
| 463 | PROMETHAZINE 5mg/5ml 100 ML /125ML SYP | 20000 |
| 464 | PROPOFOL INJECTION IP 1% W/V 20ML VIAL | 4000 |
| 465 | PROPOFOL INJECTION IP 1% W/V 50ML VIAL | 500 |
| 466 | PROPOFOL INJECTION IP 1% W/V MCT/LCT | OD |
| 467 | PROPOFOL INJECTION IP 1% W/V MCT/LCT | OD |
| 468 | PROPOFOL INJECTION IP 1% W/V MCT/LCT | OD |
| 469 | PROPRANALOL 10 MG TAB | 650 |
| 470 | Propylene Glycol, Procapil, Promois WK, Keravis | OD |
| 471 | PROTAMINE SULPHATE 50MG 5ML INJ. | 1200 |
| 472 | PYRIDOXIN 40 MG TAB | 2000 |

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| 473 | RACECADOTRIL 10 MG SACHET | 2600 |
| 474 | RANITIDINE 25MG/ML INJ. | 5990 |
| 475 | RANITIDINE15 MG/ML Syp | 1500 |
| 476 | Rebrazole 20mg TAB | OD |
| 477 | REMDESIVIR 100MG INJ | OD |
| 478 | RINGER LACTATE 500ML IVF | 29250 |
| 479 | ROCURONIUM BROMIDE INJECTION 100 MG/ 10 ML VIAL | 500 |
| 480 | ROCURONIUM BROMIDE INJECTION 50 MG/ 5 ML VIAL | 600 |
| 481 | SACCHAROMYCES SACHET | 2000 |
| 482 | Salbutamol + Fluticasone Inh. 25mg+50mcg INHALER | OD |
| 483 | SALBUTAMOL 2.5MG RESP | 12000 |
| 484 | SALBUTAMOL(2MG/5ML) 100ML Syp | 15000 |
| 485 | SALINE NASAL DROPS (DROP) 20 ML | 10000 |
| 486 | SEVOFLURANE USP <i>LIQUID FOR INHALATION 250ML BOTTLE</i> | 800 |
| 487 | SILVER SULFADIAZINE 500GM/250GM OINT' | 20 |
| 488 | SODA LIME GRANULES 5KG | 100 |
| 489 | SODIUM BICARBONATE AMP. 25 ML | 31115 |
| 490 | SODIUM NITROPRUSIDE 50 MG INJ | OD |
| 491 | SODIUM VALPROATE IP 200MG 200ml syp | 150 |
| 492 | SODIUM VALPROATE IP 500MG/5ml inj | 300 |
| 493 | SOFRAMYCIN CREAM (Framycetin Cream) 100GM | 500 |
| 494 | SOLVENT ETHER 500 ML | 11 |
| 495 | Spirit- Medical Spirit 5 ltr | 5000 |
| 496 | STERILE WATER 500 ML | 5072 |
| 497 | Streptokinase 1500000iu inj. | 10 |
| 498 | SU MAG OINT. | 2990 |
| 499 | SUCCINYLCHOLINE 10ML INJ | 100 |
| 500 | Sucrafate 500 mg/5ml | 500 |
| 501 | SURFACTANT, BOVINE/PORCINE, 3ML/4 ML (SUSPENSION) | 10 |
| 502 | TEICOPLANIN 200 MG INJ | 145 |
| 503 | TEICOPLANIN 400 MG INJ | 2520 |
| 504 | TELMISARTAN 40MG TAB | OD |
| 505 | THYROXINE (12.5 MCG) TAB (BOLLLE OF 100 TAB) | 100 |
| 506 | THYROXINE (50 MCG) TAB (BOLLLE OF 100 TAB) | 100 |
| 507 | THYROXINE (75 MCG) TAB (BOLLLE OF 100 TAB) | 100 |
| 508 | TIGECYCLINE FOR INJECTION USP (Lyophilised) 50 MG | 500 |
| 509 | TINCTURE BENZOIN 400ML | 50 |
| 510 | TINCTURE IODINE (7% SOLUTION) 100 ML BOTTLE | 100 |
| 511 | TOBRAMYCIN EYE DROP | 1000 |
| 512 | TORASEMIDE-10 DYTOR PLUS SPIRONOLACTION 50 MG TAB | 1000 |
| 513 | TRAMADOL 50MG CAP | 1000 |
| 514 | TRAMADOL 50MG/1ML INJ | 1050 |
| 515 | TROPICAMIDE & PHENYLEPHRINE HYDROCHLORIDE OPHTHALMIC SOLUTION - EYE DROPS 5ML | 500 |

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| | Trypsin Bromelain Rutoside Trihydrate | BP | 48 90 | mg mg | |
| 516 | Diclofenac Sodium IP 50 mg | BP | 100 | mg | OD |
| 517 | U S G GELLY 250 ML | | | | 500 |
| 518 | URsodeoxycholic acid 300 MG TAB | | | | 5000 |
| 519 | URsodeoxycholic acid 450 MG TAB | | | | 1000 |
| 520 | Ursodeoxycholic acid TAB. 150 MG | | | | 1000 |
| 521 | VACURONIUM BROMIDE 4MG INJ | | | | 1100 |
| 522 | VANCOMYCIN 250 MG INJ | | | | 2000 |
| 523 | VANCOMYCIN 500 MG INJ | | | | 5000 |
| 524 | VASOPRESSIN 1 ML INJ | | | | 45 |
| 525 | VECURONIUM BROMIDE INJ. I.P.4 MG LYOPHILISED AMPOULE | | | | OD |
| 526 | VECURONIUM BROMIDE INJECTION IP (Lyophilised) 10 MG LYO VIAL | | | | OD |
| 527 | VECURONIUM BROMIDE INJECTION IP (Lyophilised) 20 MG LYO VIAL | | | | OD |
| 528 | VinblastinSulfate Injection 10mg/10ml | | | | 200 |
| 529 | VINCRISTINE 1 MG INJ | | | | 2000 |
| 530 | VIREX 5LTR | | | | 1500 |
| 531 | Vitamin B Complex (with vitamin C) syrup, 120 ml syrup, sweet palatable taste, No extra active ingredient. | | | | 2000 |
| 532 | VITAMIN E 200MG CAP. | | | | 1000 |
| 533 | VITAMIN E 400MG CAP. | | | | 2000 |
| 534 | VITAMIN E 600MG CAP. | | | | 2000 |
| 535 | VITAMIN K 1MG/0.5 ML INJ | | | | 5000 |
| 536 | VITAMIN K INJ. 10MG | | | | 3100 |
| 537 | VORICONAZOLE 200MG TAB. | | | | 10000 |
| 538 | VORICONAZOLE 200MG INJ. | | | | 230 |
| 539 | WATER FOR INJECTIN 10 ML (INJ) | | | | 6800 |
| 540 | WAX DISSOLENT EAR DROP | | | | 4000 |
| 541 | When constituted as directed : Each 5 ml of the constituted suspension contains : Cephalexin IP equivalent to anhydrous Cephalexin 125 mg | | | | OD |
| 542 | White Soft Paraffin Ip 13.2% W/W + Light Liquid Paraffin Ip 10.2% W/W | | | | 1000 |
| 543 | XYLOMETHAZALINE NASAL0.025% DROP | | | | 5000 |
| 544 | XYLOMETHAZALINE NASAL0.50% DROP | | | | 5000 |
| 545 | zinc 50mg tab | | | | 500 |
| 546 | ZINC SULPHATE 20mg/ml 15ml DROP | | | | 5000 |
| 547 | ZINC SYP 20mg/5ml 100 ml | | | | 5000 |
| 548 | Anti diphtheric serum | | | | 130 |
| 549 | Formaline Solution | | | | 508 |
| 550 | Hansaplast Bandage | | | | 12700 |
| 551 | Silver X Oint | | | | 114 |
| 552 | mephentermine 30mg/ml inj | | | | 100 |
| 553 | naloxone inj | | | | 610 |

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| 554 | plasmalyte inj | 500 |
| 555 | MULTIPLE ELECTROLYTES 500ML INJECTION | OD |
| 556 | VITAMIN D3 60K INJ | 600 |
| 557 | DICLOFENAC SUPPOSITORY 12MG | 400 |
| 558 | CRYSTALLINE BENZATHINE PENICILLIN 6LAKH INJ | 400 |
| 559 | CALCIUM 200ML SYP 250MG/5ML SWEET TASTE PALATABLE | 2000 |
| 560 | CALCIUM 200ML SYP 625MG/5ML SWEET TASTE PALATABLE | 5000 |
| 561 | TRIBASIC CALCIUM PHOSPHATE 500MG CHEWABLE SWEET PALATABLE | 6000 |
| 562 | CHLORPHENIRAMINE MALEATE INJ | 200 |
| 563 | CLINDAMYCINE 150MG TAB/CAP | 1000 |
| 564 | HYDROXYPROPYLMETHYCELLULOSE 0.3%W/V WITH SOC EYE DROP | 50 |
| 565 | SODIUM HYPOCHLORITE WITH NEUTRAL PH NON TOXIC 500 ML | 210 |
| 566 | INJ DERIPHYLLINE | 24 |
| 567 | METHYPREDNISOLONE 20MG/ML INJ | 60 |
| 568 | SUXAMETHONIUM INJ | 10 |
| 569 | BUTORPHANOL TARTRATE 1MG INJ | 150 |
| 570 | LUBRICATING JELLY 50GMS | 120 |
| 571 | MIDAZOLAM 5MG/ML INJ | 150 |
| 572 | CAMPHOR,CHLOROTHYMOLO MENTHOLCAPSULES VAPOCAP | 2400 |
| 573 | POLYMYXIN B SULPHATE AND CHLORAMPHENICOL EYE OINTMENT | 300 |
| 574 | SODIUM VALPORATE 200MG TAB | 300 |
| 575 | TRIMETHOPRIM 160MG AND SULPHAMETHOXAZOLE 800MG TAB | 20000 |
| 576 | TRIMETHOPRIM 40MG AND SULPHAMETHOXAZOLE 200MG SYP | 1000 |
| 577 | VITAMIN C 500MG TABLET | 1500 |
| 578 | FEXAFENADINE 30MG/5ML SYP | 1200 |
| 579 | ITRACONAZOLE 100MG CAP | 600 |
| 580 | LINEZOLID 100MG/5ML SYP | 1500 |
| 581 | MYCOPHENOLATE MOFETIL 500MG TAB | 3000 |
| 582 | TACROLIMUS 0.5MG TAB | 3000 |
| 583 | CIPROFLOXACIN500MG+TINIDAZOLE 600MG TAB | 3000 |
| 584 | L-ASPARAGINASE 3750/5ML INJ | 100 |
| 585 | CYCLOSPORINE 100MG TAB | 6000 |
| 586 | POLYMYXIN B-500000IU INJ | 150 |
| 587 | POSACONAZOLE GASTRO 100MG TAB | 6000 |
| 588 | LEVOSALBUTAMOL+IPRATROPIUM RESPULE | 40000 |
| 589 | BUDESONIDE 100MCG INHALER | 150 |

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| 590 | ATORVASTATIN 10MG+FENOFIBRATE 160MG TAB | 3000 |
| 591 | ENALAPRIL MALEATE 5MG TAB | 500 |
| 592 | OMEORAZOLE POWDER 3GM SACHET | 1000 |
| 593 | MUOUT POWDER | 5000 |
| 594 | VITAMIN B COMPLEX TAB | 5000 |
| 595 | CLOTRIMAZOLE 30 CREAM | 450 |
| 596 | CLOTRIMAZOLE EAR DROP | 300 |
| 597 | MICAFUNGIN 50MG INJ | 1500 |
| 598 | ACECLEFANAC+PCM+SERR TAB | 1500 |
| 599 | DACARBAZINE 500MG INJ | 600 |
| 600 | ACETAZOLAMIDE 250MG TAB | 1500 |
| 601 | ARSENIC TRIOXIDE 10MG INJ | 100 |
| 602 | PANTOPRAZOLE 20MG TAB | 4500 |
| 603 | ALBENDAZOLE 400MG TAB | 2000 |
| 604 | DICLOMINE+MEFENAMIC TAB | 500 |
| 605 | BETAMETHASONE VALERATE AND NEOMYCIN SKIN CREAM | 200 |
| 606 | METOPROLOL 25MG TAB | 5000 |
| 607 | METOPROLOL 50MG TAB | 5000 |
| 608 | MONTELUKAST+FEXOFENADINE TAB | 1500 |
| 609 | OFLOXACIN 200MG+ORNIDAZOLE 500MG TAB | 500 |
| 610 | LEVOSALBUTAMOL+AMBROXOL+GUAIPHENSESIN SYP | 10000 |
| 611 | RAMIPRIL 2.5MG TAB | 1500 |
| 612 | CLONDINE HCL 1ML INJ | OD |
| 613 | ROPIVACAINE 0.2% 50ML INJ | 20 |
| 614 | ACECLOFENEC+PCM+CHLORZOXAZONE TAB | 300 |
| 615 | ACETAMINOPHEN325MG+ TRAMADOL 37.5MG TAB | 2000 |
| 616 | SUCRALFATE+OXETBAZAIN SYP | 600 |
| 617 | METHYLCOBALAMINE 500 MG INJ | 500 |
| 618 | DROTAVARINE 20MG INJ | 200 |
| 619 | CEFOPERAZONE 500MG+SULBACTUM 500MG INJ | 9000 |
| 620 | IMATINIB 400MG TAB | 5000 |
| 621 | ETODOLAC 400MG +THIOLCHICOSIDE 4MG TAB | 2000 |
| 622 | CHLORPHENIRAMINE 2MG+ PHENYLEORINE 5MG SYP | 1500 |
| 623 | GLIMEPIRIDE 1MG TAB | 600 |
| 624 | DIPHENHYDRAMINE 14.08.AMMONIUM CHLORIDE 138MG SODIUM CITRATE57.03 100ML SYP | 6000 |
| 625 | ACECLOFENEC+ PCM TAB | 5000 |
| 626 | ACECLOFENEC 100MG TAB | 5000 |
| 627 | ALKASOL 100ML SYP | 600 |
| 628 | ALLOPURINOL 100MG TAB | 2000 |
| 629 | AMLODIPINE5+METOPROLOL50 TAB | 1500 |
| 630 | ANTACID TAB | 5000 |
| 631 | ASPIRIN 150MG TAB | 500 |
| 632 | BROMOHEXINE 100ML SYP | OD |

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| 633 | CALCITRIOL 0.25MG CAP | 500 |
| 634 | CARVEDILOL 3.125MG TAB | 3000 |
| 635 | CEFPODOXINE200+CLUVANIC125 TAB | 1000 |
| 636 | CETRIMIDE+LIGNOCAINE SPRAY | OD |
| 637 | CETRIZINE 5MG TAB | 5000 |
| 638 | CETRIZINE 10MG TAB | 5000 |
| 639 | CETRIZINE SYP | 2000 |
| 640 | DIGOXIN 0.25MG TAB | 500 |
| 641 | ETORICOXIB 60MG TAB | 1000 |
| 642 | FEBUXOSTAT 40MG TAB | 500 |
| 643 | GLYCOPYRROLATE 0.2MG+ NEOSTIGMINE 5ML INJ | 1000 |
| 644 | HYDROXYZINE 10MG/5ML SYP | 1000 |
| 645 | ISOSORBIDE DINITRATE 10MG TAB | 200 |
| 646 | ISOSORBIDE + MONONITRATE 30MG TAB | 200 |
| 647 | IVERMECTIN 12MG TAB | 600 |
| 648 | METFORMIN+GLIMIPRIDE+VOGLIBOSE | OD |
| 649 | METOPROLOL+RAMIPRIN 50MG/5ML TAB | OD |
| 650 | NAPROXEN 250 DOMEPERIDONE10 MG TAB | 500 |
| 651 | NAPROXEN 500 DOMEPERIDONE20 MG TAB | 500 |
| 652 | NEOMYCIN AND POLYMYXIN B SULFATES BACITRACIN ZINC AND HYDROCORTISONE OPHTHALMIC OIEMENT | 200 |
| 653 | NEOMYCIN AND POLYMYXIN B SULFATES BACITRACIN ZINC AND HYDROCORTISONE EAR DROP | 100 |
| 654 | OFLOXACIN 100MG/5ML SYP | 200 |
| 655 | OFLOXACIN 100ML IV INJ | 500 |
| 656 | ORNIDAZOLE 500MG TAB | 500 |
| 657 | PERMETHRIN 5% 30GM CREAM | 500 |
| 658 | POSACONAZOLE 40MG/5ML SYP | 50 |
| 659 | PREDNISOLNE 5MG TAB | 2000 |
| 660 | PREDNISOLNE 10MG TAB | 2000 |
| 661 | PREDNISOLNE 20MG TAB | 2000 |
| 662 | PREDNISOLNE 40MG TAB | 2000 |
| 663 | PREGABALIN 75MG TAB | 2000 |
| 664 | PRIMAQUINE 7.5MG TAB | 1000 |
| 665 | RIVAROXABAN 10MG TAB | 500 |
| 666 | TRYPSIN + CHYMOTRIPSIN+ DICLOFENAC TAB | 2000 |
| 667 | VITAMIN A CHEWABLE TAB | 2000 |
| 668 | CYCLOSPORINE INJECTION | 2000 |
| 669 | SUGAMMADEX 100MG INJECTION | 100 |
| 670 | REMIFENTANIL 5mg INJECTION | 50 |
| 671 | CHOLECALCIFEROL 800IU/ML DROP | 15000 |
| 672 | COFSILS LOZENGES | 10000 |