



**W.U.S. HEALTH CENTRE
UNIVERSITY OF DELHI
DELHI-110007**

TENDER NOTICE

PURCHASE OF DRUGS & MEDICINES FOR THE YEAR 2014-2015

No.HC/Tender Notice/Drugs & Medicine/2014-2015/I

Date: 07.04.2014

WUSHC/D&M/TENDER-A & WUSHC/PBSD/TENDER-B

Sealed tenders are invited from manufacturers having G.M.P. certificate as per WHO guidelines and having turnover of ` **100 Crore** or above per annum and their authorised distributors having turnover of ` **4 Crore** or above per annum in the prescribed form with complete details.

A Set of Tender Forms (**A&B**) are available from the Office of the Chief Medical Officer, Room No. 10, W.U.S. Health Centre (Main Campus), Chhatra Marg, Delhi-110007 from **07.04.2014** on any working day between **10:00 a.m. to 12:00 noon**, against the Bank Draft of ` **2000/-** for Tender in favour of the “**Registrar, University of Delhi**”, payable at Delhi till **07.05.2014** at **11:00 a.m.** The duly filled in tender forms in separate sealed envelopes along with the relevant documents must reach the undersigned latest by **07.05.2014** by **01:00 p.m.** The tenders will be opened on **Wednesday, 07.05.2014** at **03:00 p.m.** in the Committee Room of W.U.S. Health Centre before the bidders or the representatives of the tenderers who choose to be present. Details are also available on the Website:- <http://www.du.ac.in>

The terms & conditions of tender B will be same as of tender A. Tender Form Part B is a Sub Tender of Part A. The fee of tender form B is along with tender form A. No extra cost for Part B if they apply for Part A. However, if the tenderer applies only for Tender Form Part B the fee remains the same i.e., ` **2000/-**

PURCHASE OF LABORATORY CHEMICALS, DRESSING, DENTAL MATERIAL & X-RAY FILMS FOR THE YEAR 2014-2015

WUSHC/MISC/TENDER-C

Sealed tenders are invited from vendors in the prescribed form with complete details.

Tender Form C is available from the Office of the Chief Medical Officer, Room No. 10, W.U.S. Health Centre (Main Campus), Chhatra Marg, Delhi-110007 from **07.04.2014** on any working day between **10:00 a.m. to 12:00 noon**, against the Bank Draft of ` **500/-** for Tender in favour of the “**Registrar, University of Delhi**”, payable at Delhi till **07.05.2014** at **11:00 a.m.** The duly filled in tender forms in separate sealed envelopes along with the relevant documents must reach the undersigned latest by **07.05.2014** by **01:00 p.m.** The tenders will be opened on **Wednesday, 07.05.2014** at **03:00 p.m.** in the Committee Room of W.U.S. Health Centre before the bidders or the representatives of the tenderers who choose to be present. Details are also available on the Website:- <http://www.du.ac.in>

Note: The Technical Bid & Financial Bid of each tender i.e. Part A, Part B & Part C should be submitted in sealed envelope separately.

-Sd/-

CHIEF MEDICAL OFFICER



**OFFICE OF THE CHIEF MEDICAL OFFICER
W.U.S.HEALTH CENTRE, UNIVERSITY OF DELHI,
DELHI-110007**

Phone Nos.27667908
27667725- Extn.1661
Website: - www.du.ac.in

WUSHC/D&M/TENDER-A

To, _____
M/s _____ Signature of C.MO _____
_____ Tender Form No. _____
_____ No.HC/Pur/2014-2015 _____
D.D.No _____ Dated _____

Date of Tender opening: 07.04.2014 at 10:00 A.M.
Date & Time of closing: 07.05.2014 at 11:00 A.M.

Sir/Madam,

Please submit the duly filled Application/Tender (Hard Copy as well as Soft Copy duly signed) complete in all respects as per the following terms and conditions, supported with attested photocopies of required documents to the undersigned within stipulated period.

PURCHASE OF DRUGS & MEDICINES
TERMS & CONDITIONS

TWO BIDS SYSTEM

The tender enquiry is for executing the rate contract from ***Branded Medicines/Drugs from Manufacturing Companies either directly or through authorised distributors only*** for medical supplies in all the W.U.S. Health Centres under University of Delhi for the financial year 2014-2015. Each sealed tender must contain two **Separate** sealed envelopes as per following details (**Please see Sr. No. 4 of General Terms & Conditions**):

Tender form can be purchased from the office of the Chief Medical Officer, W.U.S. Health Centre, North Campus, University of Delhi at a cost of ` 2000/- payable by DD drawn in favour of the **‘Registrar’ University of Delhi**, payable at Delhi/New Delhi. Cheque/FD/Postal Order/Money Order/Cash will not be accepted. In case the form has been downloaded, it should be accompanied by a DD of ` 2000/- as mentioned above as a cost of form.

The tender form complete in all respect and duly signed with stamp of the firm on each page should be put in the tender box placed in the Stores Office of the Chief Medical Officer, W.U.S. Health Centre, North Campus latest by **01:00 p.m. on Wednesday, the 07.05.2014**. Late submission of tenders will not be entertained.

Envelope-I.

Envelope No.1, superscribed as: Office of Chief Medical Officer
TECHNICAL BID
TENDER FOR THE SUPPLY OF
TENDER No. _____ Due on _____

Envelope No.I should contain the following documents **strictly in the serial order mentioned below:-**

1. Details of earnest money deposit (**see Sr. No. 11 of General Terms & Conditions**).
2. The first page of the tender in original form purchased from the office of the W.U.S. Health Centre at a cost of ` . 2000/- should be enclosed alongwith the tender document. However, those who would submit their tender on the tender form downloaded from the University website should submit a DD of ` . 2000/- towards the cost of the tender form.
3. Manufacturer’s copies of Sales Tax/VAT clearance, ITCC & P.A.N.
4. ***Non-Conviction certificate from manufacturer (certificate of no blacklisting/debarring).***

5. Certified copy of the Drug Manufacturing License. It should be clearly mentioned that tenderer is manufacturing the drug quoted for the past 3 years. If the quoted drug is manufactured by other agency, the same should be clearly mentioned with copy of appropriate documents.
6. The manufacturer should submit a quality control certificate that the items quoted are of standard quality as per G.M.P. Certificate from Regulatory Authority.
7. Undertaking by the manufacturer to produce test report from a Govt. approved laboratory, declaring the quoted items as of "Standard Quality/Certificate of Quality Control/Bio-availability" as and when required for a particular item as per **Annexure-I**.
8. Manufacturer should submit details of annual turnover for preceding three financial years, out of which at least for the one preceding financial year, the turnover should be ` **100 crore** or more. The detail should be duly certified and supported by copy of audited balance sheet and income tax return form.
9. Undertaking by the tenderer that the rates quoted are for **Branded Drugs only**.
10. Name of all the Drugs & Medicines quoted in the tender alongwith their Brand Names as per given below format. (Please Note that No prices shall be indicated in the technical bid otherwise the bid shall be rejected)

S.N	Group	T.S.No	Product/Composition	Brand	Manufacturer/Marketed by	Pack Size
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11. If the drugs are to be supplied through the distributor:
 - (a) A letter of authorization by the manufacturer for preferably two distributors, Institutional to submit the tender form on their behalf for all its items, as per **Annexure-II**.
 - (b) Authorized distributor should submit details of annual turnover for preceding three financial years, out of which at least for the one preceding financial year, the turnover should be ` **Four crore** or more. The details should be duly certified by a chartered accountant and supported by copies of audited balance sheet, P & L Account and income tax return form.
 - (c) Authorized distributor should submit his Sales Tax/VAT Clearance Certificate, ITCC, P.A.N.
 - (d) Authorized distributor should submit his Valid Drug License.
 - (e) Proof of supply to any of the Govt./Public Undertaking Agency, like NSSIC/DGS&D/DDG (Store), Ministry of Health & Family Welfare/Defence/Railway/ESIC etc.
 - (f) Non-Conviction Certificate (Certificate of no blacklisting/debarring) by the authorized distributor.
 - (g) The Distributors should certify that neither he/she nor any of his/her relative is/are employee of the W.U.S. Health Centres of the University of Delhi. **An affidavit attested by Notary Public to this effect on a non-judicial stamp paper of Rs.10 should be enclosed along with the tender.**

All the above documents should be properly flagged.

Envelope-II.

Envelope No.II, superscribed as: Office of Chief Medical Officer
 FINANCIAL BID
 TENDER FOR THE SUPPLY OF
 TENDER No._____ Due on _____
 Number of Total Products quoted _____

Envelope No. II will be opened only if the criterion in envelope No.I are satisfied. It should contain following documents strictly in the serial order as under:-

1. Rate schedule as per enclosed proforma (**Annexure-III**) in Hard Copy as well as Soft Copy.

GENERAL TERMS & CONDITIONS:

1. It should be mentioned clearly that the rates quoted are for the **Branded Drugs only**.
2. The tenders should be submitted in enclosed format form preferably typed. There should be no over writing.
3. The specifications of the items quoted by the tenderer should conform to the required specifications. Where the tenderer feels that the items are not fully specified or differ otherwise, the exact specification of every item offered should be given. Literature, Catalogues and Leaflets for illustration purposes should be attached with the tender indicating the items quoted.

4. The **Technical bid** (Envelope No. I) & the **Financial bid** (Envelope No. II) should be sealed in two separate envelopes. Both these sealed envelopes should be put in a sealed large envelope addressed to the Chief Medical Officer, W.U.S. Health Centre, University of Delhi, Delhi-7 and submitted. This large envelope containing **separately** sealed envelope No. I and envelope No. II, , should have the following information superscribed :
- a) Name of Manufacturer/Distributor
 - b) Tender for the supply of _____
 - c) Tender No. _____ Due on _____
5. The tenders will be opened on the closing day, i.e. **Wednesday, the 07.05.2014 at 03.00 P.M.** in the presence of the bidders or the representatives of the tenderers who choose to be present in the Committee Room of W.U.S. Health Centre.
6. The rates quoted in the tender and accepted by the University will be valid for 15 months after the finalization of the Rate Contract. The supply orders will be placed on the accepted rates quoted in the tender in suitable installments as per requirements of each Health Centre.
7. The rate should be quoted as per following:
- i Unit Pack Size, for example Strip of 10, bottle of 60/100ml
 - ii Net Pack Price, for example cost of strip of 10, bottle of 60/100ml
 - iii Net Rate/Unit, for example cost of one tab/cap/1ml
8. The manufacturer/distributor should quote the rates of the strip as well as loose (bulk) packing separately, as per availability. Similarly, the rates for ampoules/vials/kg. packing/jars should be mentioned separately as per the availability.
9. The rates quoted should be exclusive of Sales Tax/VAT. The rates of Sales Tax (State/Central)/VAT, chargeable may, however, be given separately. **No Sales Tax /VAT and other charges will be payable, if not mentioned in the tender.** In case of excisable articles, the rate quoted must be inclusive of excise duty. Any variation in the rate of excise duty after the prescribed date of submission of tender by the tenderers shall be at the purchaser's account, i.e. any increase/decrease in the excise will be borne by the purchaser, but only after proper documentation.
10. The tenderer will not supply the same item anywhere on lower rate than quoted to W.U.S. Health Centre University of Delhi. If the manufacturer, due to any reason, reduces the rate of any item during validity of the tender, the tenderer will intimate about the reduced price immediately and will charge the revised prices instead of tendered rates.
11. Earnest Money Deposit
- (a) Fresh Earnest Money Deposit of ` **50000/-** (Rupees Fifty thousand only) in the form of Account Payee Demand Draft in acceptable form from any of the public sector banks drawn in favour of the 'Registrar, University of Delhi, Delhi 110007' must be submitted along with the bid document (clearly indicating the name and address of manufacturer/distributor/supplier by whom the same is submitted) failing which the bid shall not be accepted. However, submission of EMD will not be required in the case of the tenderer being a Public Sector Undertaking.
 - (b) The EMD shall remain deposited for a period of forty five days beyond finalization of the Rate Contract List.
 - (c) EMD of a tenderer shall be forfeited, if the
 - i tenderer withdraws or amends its tender or impairs or derogates from the tender in any respect within the period of validity of its tender;
 - ii successful tenderer fails to furnish the required Performance Security on the discretion of the University, as mentioned in clause 12 (a) of the terms and conditions of tender, within the specified period;
 - (d) EMD of all unsuccessful tenderers will be returned to them without any interest whatsoever at the earliest after expiry of the final tender validity period or 30 days after conclusion of the contract, whichever is later.
 - (e) EMD of successful tenderer shall be returned, without any interest whatsoever, after receipt of performance security from it as called for in clause 12 (a)

12. Performance Security:

- (a)** Successful bidders shall have to furnish Performance Security for an amount of five percent of the total value of contract awarded in the form of a Fixed Deposit from a nationalized bank in favour of the Registrar, University of Delhi, Delhi 110007 within twenty one days of notification of the award. In no case whatsoever, supply order shall be issued to the successful bidders unless they have furnished the requisite Performance Security.
- (b)** Performance Security should remain valid for a period of sixty days beyond the date of completion of all contractual obligations of the supplier.
- (c)** Performance Security shall be forfeited
 - i** in the event of a breach of any of the terms and conditions of the contract by the supplier;
 - ii** if the supplier fails to supply entire or part of the items covered under contract during the rate contract period due to reasons not convincingly beyond its control.
- (d)** Performance Security shall be refunded to the supplier without any interest, whatsoever, after it duly performs and completes the contract in all respects within sixty days of completion of all such obligations under the contract.

13. In the event of situation mentioned at clause 12(c) (ii), the University may also consider debarring the supplier for a period ranging from one to three years (excluding the current bidding) from further bidding for supply to WUS Health Centre, University of Delhi. In the case of serious default, the University may blacklist the supplier for any future bidding in the University of Delhi.

14. The delivery of the goods will have to be made to the concerned stores of the following Health Centres between 09.00 A.M to 02:00 P.M on all the working days free of the delivery charges:-

- a)** WUS Health Centre (North Campus), Near V.P.Chest Institute, Chhatra Marg, University of Delhi, Delhi-110007 (Phone No.27667908).
- b)** WUS Health Centre, University of Delhi, South Campus, Benito Juarez Road (Near Dhaula Kuan), New Delhi-110021 (Phone No.24110505).
- c)** WUS Health Centre,(West Delhi),C/o Shivaji College, Raja Garden, New Delhi (Phone No.25105659).
- d)** WUS Health Centre,(East Delhi),Flat No. 2 & 3, Staff Quarters, Dr. B.R. Ambedkar College, Main Wazirabad Road, Yamuna Vihar, Delhi-110053 (Phone No. 22813870).

15. The supplies shall have to be made within 30 days from the date of receipt of the supply order failing which the order is likely to be cancelled. In such case the Health Centre reserves the right to purchase the same supply from the subsequent bidder at the risk & cost of tenderer who may face appropriate action.

16. A comprehensive list of supplies made to various Govt.Deptt./State Govt.Deptt. in the past should be submitted.

17. All the containers should be labelled with the date of manufacturing and not more than 1/6th life should have expired at the time of delivery. The Batch No., Date of Manufacturing & Date of Expiry should be mentioned on all bills & challans. All medicines supplied against one bill should have Batch No., Date of Manufacturing & Date of Expiry etc., failing which the company will be debarred for next two years. In the event of a company supplying expired medicines to W.U.S. Health Centre the company can be debarred for the next two years.

18. All supplies should be duly stamped as:

“W.U.S.HEALTH CENTRE SUPPLY, NOT FOR SALE”

19. The requirement of each item may vary according to the needs of the Health Centres.

20. It should be taken into account by the tenderers that if the Health Centre decides to get the supplies analyzed from a reputed Test Lab then they will be bound by the action taken by the Centre on such analysis reports.

21. In the event of an inadequate consumption of medicines and in the process if medicines get expired the company/distributor may be asked to replace those medicines free of cost.

22. If any drug manufacturing firm/pharmacy is black listed in any State/Union Territory of India, it should be treated as black listed. If this fact is concealed by the firm, its tender will be deemed to be cancelled automatically & the firm will be liable for Departmental legal action/penalty.
23. The University reserves the right to reject any or all tenders without assigning any reason at any stage.
24. All Legal matters/cases, if any arising out of conditions of tender, will be subject to the Jurisdiction of the NCT of Delhi only.
25. Bank account number, Banks name, its branch and IFSC number of the vendors to be mentioned in the tender forms.
26. Vendors outside the city should mention their convenient Delhi address, name & mobile number of the contact person in their tender form.
27. All manufacturers and their vendors should give the name, address, designation and contact number of responsible person on whose name the tender has been quoted.
28. Any cutting, overwriting, defacing or missing words will not be entertained.
29. Any alteration in price and misrepresentation will not be allowed at any stage.
30. Discontinuation of any product will be taken seriously. However, if the same is on account of Government policy the same will be considered.
31. In case there is any calculation mistake in unit pack from the vendor either the amount of bulk pack will be considered as quoted rate and unit pack to be ignored or the tender for that particular item will stand cancelled.
32. **The University reserves the right to approve any medicines, without assigning any reasons. The approval may not be totally based on the rate but as per requirement of the beneficiaries of the Health Centres.**

CHIEF MEDICAL OFFICER



**OFFICE OF THE CHIEF MEDICAL OFFICER
W.U.S.HEALTH CENTRE, UNIVERSITY OF DELHI,
DELHI-110007**

Phone Nos.27667908
27667725- Extn.1661
Website: - www.du.ac.in

WUSHC/PBSD/TENDER-B

To,
M/s _____ Signature of C.M.O _____
_____ Tender Form No. _____
_____ No.HC/Pur/2014-2015 _____
D.D.No _____ Dated _____

Date of Tender opening: 07.04.2014 at 10:00 A.M.
Date & Time of closing: 07.05.2014 at 11:00 A.M.

Sir/Madam,

Please submit the duly filled Application/Tender (Hard Copy as well as Soft Copy duly signed) complete in all respects as per the following terms and conditions, supported with attested photocopies of required documents to the undersigned within stipulated period.

PURCHASE OF PREFERRED/BRAND SPECIFIC DRUGS
TERMS & CONDITIONS

TWO BIDS SYSTEM

The tender enquiry is for executing the rate contract for *Preferred/Brand Specific Drugs from Manufacturing Companies either directly or through authorised distributors only* for medical supplies in all the W.U.S. Health Centres under University of Delhi for the financial year 2014-2015. Each sealed tender must contain two **Separate** sealed envelopes as per following details (**Please see Sr. No. 4 of General Terms & Conditions**):

Tender form can be purchased from the office of the Chief Medical Officer, W.U.S. Health Centre, North Campus, University of Delhi at a cost of ` 2000/- payable by DD drawn in favour of the **‘Registrar’ University of Delhi**, payable at Delhi/New Delhi. Cheque/FD/Postal Order/Money Order/Cash will not be accepted. In case the form has been downloaded, it should be accompanied by a DD of ` 2000/- as mentioned above as a cost of form. **The tenderer quoting for tender A need not pay for the cost of tender B**

The tender form complete in all respect and duly signed with stamp of the firm on each page should be put in the tender box placed in the Stores Office of the Chief Medical Officer W.U.S. Health Centre, North Campus latest by **01:00 p.m. on Wednesday, the 07.05.2014**. Late submission of tenders will not be entertained.

Envelope-I.

Envelope No.1, superscribed as: Office of Chief Medical Officer
TECHNICAL BID
TENDER FOR THE SUPPLY OF
TENDER No. _____ Due on _____

Envelope No.I should contain the following documents **strictly in the serial order mentioned below:-**

1. Details of earnest money deposit (see Sr. No. 11 of General Terms & Conditions). **The tenderer quoting for tender A need not submit a separate Earnest Money Deposit for tender C**
2. The first page of the tender in original form purchased from the office of the W.U.S. Health Centre at a cost of ` 2000/- should be enclosed alongwith the tender document. However, those who would submit

their tender on the tender form downloaded from the University website should submit a DD of ` 2000/- towards the cost of the tender form.

3. Manufacturer's copies of Sales Tax/VAT clearance, ITCC & P.A.N.
4. Non-Conviction certificate from manufacturer (certificate of no blacklisting/debarring)
5. Certified copy of the Drug Manufacturing License. It should be clearly mentioned that tenderer is manufacturing the drug quoted for the past 3 years. If the quoted drug is manufactured by other agency, the same should be clearly mentioned with copy of appropriate documents.
6. The manufacturer should submit a quality control certificate that the items quoted are of standard quality as per G.M.P. Certificate from Regulatory Authority.
7. Undertaking by the manufacturer to produce test report from a Govt. approved laboratory, declaring the quoted items as of "Standard Quality/Certificate of Quality Control/Bio-availability" as and when required for a particular item as per **Annexure-I**.
8. Manufacturer should submit details of annual turnover for preceding three financial years, out of which at least for the one preceding financial year, the turnover should be ` 100 crore or more. The detail should be duly certified and supported by copy of audited balance sheet and income tax return form.
9. A Certificate should be enclosed by the tenderer that the products quoted are our **Proprietary Brands**.
10. Name of all the Drugs & Medicines quoted in the tender alongwith their Brand Names as per given below format. (Please Note that No prices shall be indicated in the technical bid otherwise the bid shall be rejected)

S.N	Group	T.S.No	Product/Composition	Brand	Manufacturer/Marketed by	Pack Size
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11. If the drugs are to be supplied through the distributor:

- (a) A letter of authorization by the manufacturer for preferably two distributors, Institutional to submit the tender form on their behalf for all its items, as per **Annexure-II**.
- (b) Authorized distributor should submit details of annual turnover for preceding three financial years, out of which at least for the one preceding financial year, the turnover should be ` **Four crore** or more. The details should be duly certified by a chartered accountant and supported by copies of audited balance sheet, P & L Account and income tax return form.
- (c) Authorized distributor should submit his Sales Tax/VAT Clearance Certificate, ITCC, P.A.N.
- (d) Authorized distributor should submit his Valid Drug License.
- (e) Proof of supply to any of the Govt./Public Undertaking Agency, like NSSIC/DGS&D/DDG (Store), Ministry of Health & Family Welfare/Defence/Railway/ESIC etc.
- (f) Non-Conviction Certificate (Certificate of no blacklisting/debarring) by the authorized distributor.
- (g) The Distributors should certify that neither he/she nor any of his/her relative is/are employee of the W.U.S. Health Centres of the University of Delhi. **An affidavit attested by Notary Public to this effect on a non-judicial stamp paper of ` .10 should be enclosed along with the tender.**

All the above documents should be properly flagged.

Envelope-II.

Envelope No.II, superscribed as: Office of Chief Medical Officer
FINANCIAL BID
TENDER FOR THE SUPPLY OF
TENDER No. _____ Due on _____
Number of Total Products quoted _____

Envelope No. II will be opened only if the criterion in envelope No.I are satisfied. It should contain following documents strictly in the serial order as under:-

1. Rate schedule as per enclosed proforma (**Annexure-IV**) in Hard Copy as well as Soft Copy.

GENERAL TERMS & CONDITIONS:

1. It should be mentioned clearly that the rates quoted are for the **Proprietary Brands only**.
2. The tenders should be submitted in enclosed format form preferably typed. There should be no over writing.

3. The specifications of the items quoted by the tenderer should conform to the required specifications. Where the tenderer feels that the items are not fully specified or differ otherwise, the exact specification of every item offered should be given. Literature, Catalogues and Leaflets for illustration purposes should be attached with the tender indicating the items quoted.
4. The **Technical bid** (Envelope No. I) & the **Financial bid** (Envelope No. II) should be sealed in two separate envelopes. Both these sealed envelopes should be put in a sealed large envelope addressed to the Chief Medical Officer, W.U.S. Health Centre, University of Delhi, Delhi-7 and submitted. This large envelope containing **separately** sealed envelope No. I and envelope No. II, , should have the following information superscribed :
 - a) Name of Manufacturer/Distributor
 - b) Tender for the supply of _____
 - c) Tender No. _____ Due on _____
5. The tenders will be opened on the closing day, i.e. **Wednesday, the 07.05.2014 at 03.00 P.M.** in the presence of the bidders or the representatives of the tenderers who choose to be present in the Committee Room of W.U.S. Health Centre.
6. The rates quoted in the tender and accepted by the University will be valid for 15 months after the finalization of the Rate Contract. The supply orders will be placed on the accepted rates quoted in the tender in suitable installments as per requirements of each Health Centre.
7. The rate should be quoted as per following:
 - i Unit Pack Size, for example Strip of 10, bottle of 60/100ml
 - ii Net Pack Price, for example cost of strip of 10, bottle of 60/100ml
 - iii Net Rate/Unit, for example cost of one tab/cap/1ml
8. The manufacturer/distributor should quote the rates of the strip as well as loose (bulk) packing separately, as per availability. Similarly, the rates for ampoules/vials/kg. packing/jars should be mentioned separately as per the availability.
9. The rates quoted should be exclusive of Sales Tax/VAT. The rates of Sales Tax (State/Central)/VAT, chargeable may, however, be given separately. **No Sales Tax /VAT and other charges will be payable, if not mentioned in the tender.** In case of excisable articles, the rate quoted must be inclusive of excise duty. Any variation in the rate of excise duty after the prescribed date of submission of tender by the tenderers shall be at the purchaser's account, i.e. any increase/decrease in the excise will be borne by the purchaser, but only after proper documentation.
10. The tenderer will not supply the same item anywhere on lower rate than quoted to W.U.S. Health Centre University of Delhi. If the manufacturer, due to any reason, reduces the rate of any item during validity of the tender, the tenderer will intimate about the reduced price immediately and will charge the revised prices instead of tendered rates.
11. Earnest Money Deposit
 - (a) Fresh Earnest Money Deposit of ` **50000/-** (Rupees Fifty thousand only) in the form of Account Payee Demand Draft in acceptable form from any of the public sector banks drawn in favour of the 'Registrar, University of Delhi, Delhi 110007' must be submitted along with the bid document (clearly indicating the name and address of manufacturer/distributor/supplier by whom the same is submitted) failing which the bid shall not be accepted. However, submission of EMD will not be required in the case of the tenderer being a Public Sector Undertaking.
 - (b) The EMD shall remain deposited for a period of forty five days beyond finalization of the Rate Contract List.
 - (c) EMD of a tenderer shall be forfeited, if the
 - i tenderer withdraws or amends its tender or impairs or derogates from the tender in any respect within the period of validity of its tender;
 - ii successful tenderer fails to furnish the required Performance Security on the discretion of the University, as mentioned in clause 12 (a) of the terms and conditions of tender, within the specified period;

- (d) EMD of all unsuccessful tenderers will be returned to them without any interest whatsoever at the earliest after expiry of the final tender validity period or 30 days after conclusion of the contract, whichever is later.
- (e) EMD of successful tenderer shall be returned, without any interest whatsoever, after receipt of performance security from it as called for in clause 12 (a)

12. Performance Security:

- (a) Successful bidders shall have to furnish Performance Security for an amount of five percent of the total value of contract awarded in the form of a Fixed Deposit from a nationalized bank in favour of the Registrar, University of Delhi, Delhi 110007 within twenty one days of notification of the award. In no case whatsoever, supply order shall be issued to the successful bidders unless they have furnished the requisite Performance Security.
 - (b) Performance Security should remain valid for a period of sixty days beyond the date of completion of all contractual obligations of the supplier.
 - (c) Performance Security shall be forfeited
 - i in the event of a breach of any of the terms and conditions of the contract by the supplier;
 - ii if the supplier fails to supply entire or part of the items covered under contract during the rate contract period due to reasons not convincingly beyond its control.
 - (d) Performance Security shall be refunded to the supplier without any interest, whatsoever, after it duly performs and completes the contract in all respects within sixty days of completion of all such obligations under the contract.
- 13.** In the event of situation mentioned at clause 12(c) (ii), the University may also consider debarring the supplier for a period ranging from one to three years (excluding the current bidding) from further bidding for supply to WUS Health Centre, University of Delhi. In the case of serious default, the University may blacklist the supplier for any future bidding in the University of Delhi.
- 14.** The delivery of the goods will have to be made to the concerned stores of the following Health Centres between 09.00 A.M to 02:00 P.M on all the working days free of the delivery charges:-
- a) WUS Health Centre (North Campus), Near V.P.Chest Institute, Chhatra Marg, University of Delhi, Delhi-110007 (Phone No.27667908).
 - b) WUS Health Centre, University of Delhi, South Campus, Benito Juarez Road (Near Dhaula Kuan), New Delhi-110021 (Phone No.24110505).
 - c) WUS Health Centre,(West Delhi),C/o Shivaji College, Raja Garden, New Delhi (Phone No.25105659).
 - d) WUS Health Centre,(East Delhi),Flat No. 2 & 3, Staff Quarters, Dr. B.R. Ambedkar College, Main Wazirabad Road, Yamuna Vihar, Delhi-110053 (Phone No. 22813870).
- 15.** The supplies shall have to be made within 30 days from the date of receipt of the supply order failing which the order is likely to be cancelled. In such case the Health Centre reserves the right to purchase the same supply from the subsequent bidder at the risk & cost of tenderer who may face appropriate action.
- 16.** A comprehensive list of supplies made to various Govt.Deptt./State Govt.Deptt. in the past should be submitted.
- 17.** All the containers should be labelled with the date of manufacturing and not more than 1/6th life should have expired at the time of delivery. The Batch No., Date of Manufacturing & Date of Expiry should be mentioned on all bills & challans. All medicines supplied against one bill should have Batch No., Date of Manufacturing & Date of Expiry etc., failing which the company will be debarred for next two years. In the event of a company supplying expired medicines to W.U.S. Health Centre the company can be debarred for the next two years.
- 18.** All supplies should be duly stamped as:

“W.U.S.HEALTH CENTRE SUPPLY, NOT FOR SALE”

19. The requirement of each item may vary according to the needs of the Health Centres.
20. It should be taken into account by the tenderers that if the Health Centre decides to get the supplies analyzed from a reputed Test Lab then they will be bound by the action taken by the Centre on such analysis reports.
21. In the event of an inadequate consumption of medicines and in the process if medicines get expired the company/distributor may be asked to replace those medicines free of cost.
22. If any drug manufacturing firm/pharmacy is black listed in any State/Union Territory of India, it should be treated as black listed. If this fact is concealed by the firm, its tender will be deemed to be cancelled automatically & the firm will be liable for Departmental legal action/penalty.
23. The University reserves the right to reject any or all tenders without assigning any reason at any stage.
24. All Legal matters/cases, if any arising out of conditions of tender, will be subject to the Jurisdiction of the NCT of Delhi only.
25. Bank account number, Banks name, its branch and IFSC number of the vendors to be mentioned in the tender forms.
26. Vendors outside the city should mention their convenient Delhi address, name & mobile number of the contact person in their tender form.
27. All manufacturers and their vendors should give the name, address, designation and contact number of responsible person on whose name the tender has been quoted.
28. Any cutting, overwriting, defacing or missing words will not be entertained.
29. Any alteration in price and misrepresentation will not be allowed at any stage.
30. Discontinuation of any product will be taken seriously. However, if the same is on account of Government policy the same will be considered.
31. In case there is any calculation mistake in unit pack from the vendor either the amount of bulk pack will be considered as quoted rate and unit pack to be ignored or the tender for that particular item will stand cancelled.
32. **The University reserves the right to approve any medicines, without assigning any reasons. The approval may not be totally based on the rate but as per requirement of the beneficiaries of the Health Centres.**

CHIEF MEDICAL OFFICER



**OFFICE OF THE CHIEF MEDICAL OFFICER
W.U.S.HEALTH CENTRE, UNIVERSITY OF DELHI,
DELHI-110007**

Phone Nos.27667908
27667725- Extn.1661
Website: - www.du.ac.in

WUSHC/MISC/TENDER-C

To,
M/s _____ Signature of C.M.O. _____
_____ Tender Form No. _____
_____ No.HC/Pur/2014-2015 _____
D.D.No _____ Dated _____

Date of Tender opening: 07.04.2014 at 10:00 A.M.
Date & Time of closing: 07.05.2014 at 11:00 A.M.

Sir/Madam,

Please submit the duly filled Application/Tender (Hard Copy as well as Soft Copy duly signed) complete in all respects as per the following terms and conditions, supported with attested photocopies of required documents to the undersigned within stipulated period.

**PURCHASE OF LAB CHEMICALS & GLASSWARES, X-RAY FILMS, DRESSING,
DENTAL MATERIALS AND OTHER ITEMS, ETC.
TERMS & CONDITIONS**

TWO BIDS SYSTEM

The tender enquiry is for executing the rate contract from *manufacture/ authorized distributor/dealer* for medical supplies in all the W.U.S. Health Centres under University of Delhi for the financial year 2014-2015. Each sealed tender must contain two **Separate** sealed envelopes as per following details (**Please see Sr. No. 3 of General Terms & Conditions**):

Tender form can be purchased from the office of the Chief Medical Officer, W.U.S. Health Centre, North Campus, University of Delhi at a cost of ` 500/- payable by DD drawn in favour of the **‘Registrar’ University of Delhi**, payable at Delhi/New Delhi. Cheque/FD/Postal Order/Money Order/Cash will not be accepted. In case the form has been downloaded, it should be accompanied by a DD of ` 500/- as mentioned above as a cost of form.

The tender form complete in all respects and duly signed with stamp of the firm on each page should be put in the tender box placed in the Stores Office of the Chief Medical Officer, W.U.S. Health Centre, North Campus latest by **01:00 p.m. on Wednesday, the 07.05.2014**. Late submission of tenders will not be entertained.

Envelope-I.

Envelope No.1, superscribed as: Office of Chief Medical Officer
TECHNICAL BID
TENDER FOR THE SUPPLY OF
TENDER No. _____ Due on _____

Envelope No.I should contain the following documents **strictly in the serial order mentioned below:-**

1. Details of earnest money deposit (**see Sr. No. 8 of General Terms & Conditions**).
2. The first page of the tender in original form purchased from the office of the W.U.S. Health Centre at a cost of ` 500/- should be enclosed alongwith the tender document. However, those who would submit their tender on the tender form downloaded from the University website should submit a DD of

` 500/- towards the cost of the tender form.

3. The vender should be the manufacturer/authorized distributor/dealer.
4. Proof of supply to any of the Govt./Public Undertaking Agency, like NSSIC/DGS&D/DDG (Store), Ministry of Health & Family Welfare/Defence/Railway/ESIC etc.
5. Non-Conviction Certificate (Certificate of no blacklisting/debarring) by the manufacturer/authorized distributor/dealer
6. Copy of a VAT Registration.
7. Copy of PAN.
8. Copies of ITR of Vender
9. The vender should certify that neither he/she nor any of his/her relative is/are employee of the W.U.S. Health Centres of the University of Delhi. **An affidavit attested by Notary Public to this effect on a non-judicial stamp paper of Rs.10 should be enclosed along with the tender.**
10. Samples alongwith its specifications of Dressing Material, i.e., Gauze, Bandage and Cotton etc., are to be deposited alongwith the tender form. A certificate to this effect is to be enclosed with the tender form if the same has been deposited at the stores as per **Annexure-I. (Please see Sr.No. 15 of General Terms & Condition)**

All the above documents should be properly flagged.

Envelope-II.

Envelope No.II, superscribed as: Office of Chief Medical Officer
FINANCIAL BID
TENDER FOR THE SUPPLY OF
TENDER No._____ Due on _____
Number of Total Products quoted _____

Envelope No. II will be opened only if the criterion in envelope No.I are satisfied. It should contain following documents strictly in the serial order as under:-

1. Rate schedule as per enclosed proforma (**Annexure-V**) in Hard Copy as well as Soft Copy.

GENERAL TERMS & CONDITIONS:

1. The tenders should be submitted in enclosed format form preferably typed. There should be no over writing.
2. The specifications of the items quoted by the tenderer should conform to the required specifications.
3. The **Technical bid** (Envelope No. I) & the **Financial bid** (Envelope No. II) should be sealed in two separate envelopes. Both these sealed envelopes should be put in a sealed large envelope addressed to the Chief Medical Officer, W.U.S. Health Centre, University of Delhi, Delhi-7 and submitted. This large envelope containing **separately** sealed envelope No. I and envelope No. II, , should have the following information superscribed :
 - a) Name of Manufacturer/Distributor
 - b) Tender for the supply of _____
 - c) Tender No._____Due on _____
4. The tenders will be opened on the closing day, i.e. **Wednesday, the 07.05.2014 at 03.00 P.M.** in the presence of the bidders or the representatives of the tenderers who choose to be present in the Committee Room of W.U.S. Health Centre.
5. The rates quoted in the tender and accepted by the University will be valid for 15 months after the finalization of the Rate Contract. The supply orders will be placed on the accepted rates quoted in the tender in suitable installments as per requirements of each Health Centre.
6. The rates quoted should be exclusive of Sales Tax/VAT. The rates of Sales Tax (State/Central)/VAT, chargeable may, however, be given separately. **No Sales Tax /VAT and other charges will be payable, if not mentioned in the tender.** In case of excisable articles, the rate quoted must be inclusive of excise duty. Any variation in the rate of excise duty after the prescribed date of submission of tender by the tenderers shall be at the purchaser's account, i.e. any increase/decrease in the excise will be borne by the purchaser, but only after proper documentation.
7. The tenderer will not supply the same item anywhere on lower rate than quoted to W.U.S. Health Centre University of Delhi. If the manufacturer, due to any reason, reduces the rate of any item during

validity of the tender, the tenderer will intimate about the reduced price immediately and will charge the revised prices instead of tendered rates.

8. Earnest Money Deposit

- (a)** Fresh Earnest Money Deposit of ` 2000/- (Rupees Two thousand only) in the form of Account Payee Demand Draft in acceptable form from any of the public sector banks drawn in favour of the 'Registrar, University of Delhi, Delhi 110007' must be submitted along with the bid document (clearly indicating the name and address of manufacturer/distributor/supplier by whom the same is submitted) failing which the bid shall not be accepted. However, submission of EMD will not be required in the case of the tenderer being a Public Sector Undertaking.
- (b)** The EMD shall remain deposited for a period of forty five days beyond finalization of the Rate Contract List.
- (c)** EMD of a tenderer shall be forfeited, if the
 - i tenderer withdraws or amends its tender or impairs or derogates from the tender in any respect within the period of validity of its tender;
 - ii successful tenderer fails to furnish the required Performance Security on the discretion of the University, as mentioned in clause 12 (a) of the terms and conditions of tender, within the specified period;
- (d)** EMD of all unsuccessful tenderers will be returned to them without any interest whatsoever at the earliest after expiry of the final tender validity period or 30 days after conclusion of the contract, whichever is later.
- (e)** EMD of successful tenderer shall be returned, without any interest whatsoever, after receipt of performance security from it as called for in clause 12 (a)

9. Performance Security:

- (a)** Successful bidders shall have to furnish Performance Security for an amount of five percent of the total value of contract awarded in the form of an Account Payee Fixed Deposit Receipt from a nationalized bank in an acceptable form in favour of the Registrar, University of Delhi, Delhi 110007 within twenty one days of notification of the award. In no case whatsoever, supply order shall be issued to the successful bidders unless they have furnished the requisite Performance Security.
- (b)** Performance Security should remain valid for a period of sixty days beyond the date of completion of all contractual obligations of the supplier.
- (c)** Performance Security shall be forfeited
 - i in the event of a breach of any of the terms and conditions of the contract by the supplier;
 - ii if the supplier fails to supply entire or part of the items covered under contract during the rate contract period due to reasons not convincingly beyond its control.
- (d)** Performance Security shall be refunded to the supplier without any interest, whatsoever, after it duly performs and completes the contract in all respects within sixty days of completion of all such obligations under the contract.

10. In the event of situation mentioned at clause 12(c) (ii), the University may also consider debarring the supplier for a period ranging from one to three years (excluding the current bidding) from further bidding for supply to WUS Health Centre, University of Delhi. In the case of serious default, the University may blacklist the supplier for any future bidding in the University of Delhi.

11. The delivery of the goods will have to be made to the concerned stores of the following Health Centres between 09.00 A.M to 02:00 P.M on all the working days free of the delivery charges:-

- a)** WUS Health Centre (North Campus), Near V.P.Chest Institute, Chhatra Marg, University of Delhi, Delhi-110007 (Phone No.27667908).
- b)** WUS Health Centre, University of Delhi, South Campus, Benito Juarez Road (Near Dhaula Kuan), New Delhi-110021 (Phone No.24110505).
- c)** WUS Health Centre,(West Delhi),C/o Shivaji College, Raja Garden, New Delhi (Phone No.25105659).
- d)** WUS Health Centre,(East Delhi),Flat No. 2 & 3, Staff Quarters, Dr. B.R. Ambedkar College, Main Wazirabad Road, Yamuna Vihar, Delhi-110053 (Phone No. 22813870).

12. The supplies shall have to be made within 30 days from the date of receipt of the supply order failing which the order is likely to be cancelled. In such case the Health Centre reserves the right to purchase the same supply from the subsequent bidder at the risk & cost of tenderer who may face appropriate action.
13. All supplies should be duly stamped as:

“W.U.S.HEALTH CENTRE SUPPLY, NOT FOR SALE”

14. The requirement of each item may vary according to the needs of the Health Centres.
15. The samples of Cotton/Bandages/Gauze and other linen items etc. must be submitted before submission of tender and receipt taken from the stores. Four samples of each item should be submitted and mentioned in the tender as **Annexure-I (Dressing Materials)**
Each Specimen samples should be sealed in an envelope and the following information superscribed on each envelope
 - a) Name of Manufacturer/Distributor
 - b) Tender Form No.
 - c) Tender due on

All the items should be placed in a container which should also have the above information.

It may be noted that if at any stage if it is detected that there is difference in the quality of the supply and the sample, appropriate action shall be taken.

16. The University reserves the right to reject any or all tenders without assigning any reason at any stage.
17. All Legal matters/cases, if any arising out of conditions of tender, will be subject to the Jurisdiction of the NCT of Delhi only.
18. Bank account number, Banks name, its branch and IFSC number of the vendors to be mentioned in the tender forms.
19. Vendors outside the city should mention their convenient Delhi address, name & mobile number of the contact person in their tender form.
20. All manufacturers and their vendors should give the name, address, designation and contact number of responsible person on whose name the tender has been quoted.
21. Any cutting, overwriting, defacing or missing words will not be entertained.
22. Any alteration in price and misrepresentation will not be allowed at any stage.
23. In case there is any calculation mistake in unit pack from the vendor either the amount of bulk pack will be considered as quoted rate and unit pack to be ignored or the tender for that particular item will stand cancelled.
24. **The University reserves the right to approve any item, without assigning any reasons. The approval may not be totally based on the rate but as per requirement of the beneficiaries of the Health Centres.**

CHIEF MEDICAL OFFICER

UNDERTAKING FOR QUALITY CONTROL/BIO-AVAILABILITY TEST

I/we, undertake to submit the test report for Quality Control of the specified product/ Bio-availability tests whenever the Chief Medical Officer, W.U.S. Health Centre, University of Delhi, Delhi-110007, or any other authority acting on their behalf decides to ask for the same.

Signature and stamp of the manufacturer

AUTHORITY LETTER

(Authority letter to be issued by the Manufacturer for appointing a Distributor on its approved Letter Head)

I/we the undersigned who is/are authorized signatory/signatories of the manufacturing firm

M/s. _____
Address _____

do hereby Authorize

1. M/s. _____
Address _____

2. M/s. _____
Address _____

to supply items/drugs/collect the orders/raise the bills for the items manufactured by me/us under the tender form No. _____ issued by the W.U.S. Health Centre, University of Delhi for the supply of drugs & medicines for the year 2013-2014. I/we have not authorized any other Distributor for this purpose.

I/we have gone through all the terms and conditions of the tender and will be binding on me/us and also on the Distributor. M/s. _____ appointed by me/us during the whole contract period including extension period of the said contract.

I/we, hereby undertake that I/we shall not change our authorized distributor as mentioned during the period of contract including extension period. However, in exceptional circumstances, if the distributor is changed, the same will be bound by all the legalities of the Contract.

**Authorized Signature of the
Distributor
(Rubber Stamp)**

**Authorized Signature of the
Distributor
(Rubber Stamp)**

**Authorized Signatory of the Manufacturing
Firm (Rubber Stamp)**

**Annexure-I
(For Dressing Material)**

(This is to be issued on Manufacturer's/Distributor's approved letterhead)

SAMPLE RECEIPT
DRUGS/SURGICAL ITEM
(To be submitted in triplicate)

TENDER FORM NO.....

Please receive following samples of Drugs/Surgical item from M/s. _____
Address _____

for the tender enquiry _____
No. _____ dated _____.

Received following items as per details given against each:

S.No	Name of the item	Number of Item	D/o Manuf. – D/o Expiry
1.
2.
3.
4.
5.
6.

Each Sample Item is sealed in an envelope and the following information is super scribed on each envelope:

- a) Name of Manufacturer/Distributor
- b) Tender Form No.
- c) Tender due on

All the items are placed in a container which also has the above information.

Place : **Tenderer's Signature and Stamp**
Date :
Seal :

Received above samples

Receiver's signature with date
and stamp of the W.U.S. Health Centre

NAME OF THE COMPANY/ MANUFACTURER:

NAME OF THE DISTRIBUTOR:

TENDER FORM NO:

EARNEST MONEY DD No.....Dated.....

Annexure-III

(PLEASE SEE S.No.07 OF THE GENERAL TERMS & CONDITIONS)

Unit Pack Size (U.P.S.) = e.g. Strip of 10, bottle of 60/100ml

Net Pack Price (N.P.P.) = e.g. cost of strip of 10, bottle of 60/100ml

Net Rate/Unit = e.g. cost of one tab/cap/1ml

Please quote the price of Net rate/unit is not more than two decimals e.g. 0.00

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	A. ANTI BACTERIAL DRUGS								
1	01.Amoxycillin Tab (Dispersible)	125mg							
2	02.Amoxycillin Syp	125mg/5ml							
3	03.Amoxycillin Cap/Tab	250mg							
4	04.Amoxycillin Cap/Tab	500mg							
5	05.Amoxycillin+Lactobacillus Cap	250mg							
6	06 Amoxycillin+Dicloxacillin Cap	250mg+250mg							
7	07 Amoxycillin+Clavulanic Acid Tab	500+125mg							
8	08 Amoxycillin+Calvulanic Acid Syp	200+28.5mg							
9	09.Azithromycin Tab	250mg							
10	10. Azithromycin Tab	500mg							
11	11.Azithromycin susp-15ml	100mg/5ml							
12	12.Azithromycin +Clavulanic Acid	250mg+125mg							
13	13. Cefachlor Adult	500mg							
14	14. Cefadroxil Tab	250mg							
15	15.Cefadroxil Tab (Dispersible)	125mg							
16	16.Cefixime syp	50mg/5ml							
17	17.Cefixime Tab	200mg							
18	18.Cefixime +Clavulanic Acid	200+125mg							
19	19.Cefpodoxime Tab	200mg							
20	20.Cefpodoxime Syp	50mg/5ml							
21	21.Cefpodoxime+Clavulanic Acid	200+125mg							
22	22.Cefuroxime Tab	500mg							
23	23.Cefuoroxime Tab	250mg							
24	24.CefuroximeAxiti+Clavulanic Acid	500mg+125mg							
25	25.Ciprofloxacin Tab	500mg							
26	26.Clarithromycin Tab	500mg							
27	27.Doxycycline Tab/Cap	100mg							
28	28.Gemifloxacin	320mg							
29	29.Levofloxacin Tab	250mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
30	30.Levofloxacin Tab	500mg							
31	31.Norfloxacin Tab	400mg							
32	32.Ofloxacin Tab	200mg							
33	33.Roxithromycin Tab	150mg							
34	34.Cefixime+Ofloxacin	200+200mg							
35	35 Amikacin Inj. Vial	500mg/2ml							
36	36.Gentamycin Sulphate Inj.	80mg/ml							
37	37.Any Other Antibiotic Product								
	B. ANTI VIRAL DRUGS								
38	01 Acyclovir Tab	400mg							
39	02 Acyclovir Tab	800mg							
40	03 Amantadin Tab	200mg							
41	04 Valacyclovir	500mg							
42	05 Valacyclovir	1gm							
43	06 Any Other Product								
	C. ANTI FUNGAL DRUGS								
44	01.Fluconazole Tab	150mg							
45	02.Terbinafine Tab	250mg							
46	03. Fluconazole Tab	200mg							
47	04. Isotretinon	10mg							
48	05. Itraconazole	100mg							
49	06. Any Other Antifungal Product								
	D. ANTI MALARIAL DRUGS								
50	01.Chloroquin Tab	250mg							
51	02.Tab Sulphadoxine+Pyrimethamine								
52	03. Any Other Antimalarial Product Tab/Syp								
	E. ANTI TUBERCULAR DRUGS								
53	01.Ethambutol Tab	800mg							
54	02.Ethambutol Tab	1000mg							
55	03.Pyrazinamide Tab	750mg							
56	04.Rifampicin Cap	150mg							
57	05.Rifampicin Cap	450mg							
58	06.Rifampicin Cap	600mg							
59	07.Rifampicin+INH Tab/Cap	450 mg+300mg							
60	08.Rifampicin+INH Tab/Cap	600mg+300mg							
61	09.Rifampicin+INH+Ethambutol	450+300+800mg							
62	10.Rifampicin+INH+Ethambutol+PZA	450+300+800+1500							
63	11.Any Other Antitubercular Product .								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	F. ANALGESIC/ ANTIPYRATIC/ ANTIINFLAMMATORY/MUSCLE RELAXLANT								
64	01.Aceclofenac Tab	100 mg							
65	02.Aceclofenac+PCM Tab	100mg+500mg							
66	03.Aceclofenac +Serratiopeptidase	100mg +15mg							
67	04.Aceclofenac+PCM+Chlorhexazone	100+500+500							
68	05.Aspirin Soluble Tab	75mg							
69	06.Aspirin Soluble Tab	150mg							
70	07.Allopurinol Tab	100mg							
71	08.Baclofen	25mg							
72	09.Catyl Myristoleate	20.5mg							
73	10.Diclofenac Sodium Tab	50mg							
74	11.Diclofenac Sodium Tab	75mg							
75	12.Diclofenac Sodium SR Tab	100mg							
76	13.Diclofenac+PCM Tab	50 mg+325mg							
77	14.Diclofenac Potassium+Chlorzoxazone+PCM Tab	50+500+500mg							
78	15 Diclofenac.Potassium.+Serratiopeptidase	50+15mg							
79	16 Diclofenac Sodium+Serrtiopeptidase	50+15mg							
80	17 Diclofenac Potassium+ Metaxalone	50mg+400mg							
81	18.Diclofenac +Chlorzoxazone	50+500mg							
82	19 Etoricoxib Tab	90mg							
83	20.Etoricoxib Tab	120mg							
84	21.Etodolac	400mg							
85	22.Etodolac+Paracetamol	400+500mg							
86	23.Etodolac+Thicolchicoride	400 +4mg							
87	24.Etodolac	600mg							
88	25 Hydroxychloroquin Tab	200mg							
89	26 Ibuprofen+PCM Tab	400mg+500mg							
90	27.Ibuprofen+PCM Tab	400mg+325mg							
91	28.Ibuprofen+Chlorzoxazone+PCM Tab	400+250+500mg							
92	29.Ibuprofen+PCM Syp.	200+125mg							
93	30.Indomethacin SR Cap	75mg							
94	31.Ketorlac Disp, Tab	10mg							
95	32.Leflunomide Tab	20mg							
96	33.Leflunomide Tab	10mg							
97	34.Larnoxicam	4mg							
98	35.Naproxen Tab	250mg							
99	36.Nimesulide Tab	100mg							
100	37.Nimesulide+Serratiopeptidase	100+10mg							
101	38.Nimuslide +Paracetamol	100mg +500mg							
102	39.Paracetamol (strip)	500mg							
103	40.Paracetamol (Strip)	650mg							
104	41.Paracetamol Syp. (60 ml)	125mg/5ml							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
105	42.Piroxicam-DT	20mg							
106	43.Serratiopeptidase Tab	10mg							
107	44.Chymotrypsin	10000 Unit							
108	45.Tolperisone Hcl	150MG							
109	46.Tolperisone Hcl SR	450mg							
110	47.Tramadol +Paracetamol	37.5mg+325mg							
111	48.Tapentadol Hcl	50/100mg							
112	49.Aceclofenac +Thicolchicoride	100+4mg							
113	50.Diclofenac Sodium Inj.	25mg/ml							
114	51.Paracetamol Inj.	250mg/ml							
115	52.Pentazocaine Lactate HCL Inj.	30mg/ml							
116	53.Etorocoxib+ Thicolchicoride	60mg +4mg							
117	54.Diclofenac + PCM +Serrtiiopeptidase	50mg +325mg +10mg							
118	55.Trypsin+Bromelein +Rutoside Trihydrate+Dic Sod	48+90+100+50mg							
119	56.Trypsin+Bromelein +Rutoside Trihydrate	96+180+200mg							
120	57.Thiocolchiceside	4mg							
121	58.Any Other Product of This Category								
	G. ANTI ALLERGIC/ ANTIHISTAMINICS/ ANTISEROTONINS								
122	01.Cetizine Tab	10mg							
123	02.Desloratadine	5mg							
124	03.Fexofinadine Tab	120mg							
125	04.Montelukast + Fexofenadine Tab	10+120mg							
126	05.Levocetizine Tab	5mg							
127	06.Cetizine Syp-30ml	2.5mg/5ml							
128	07.Loratidine	10mg							
129	08.Mizolastine Tab	10mg							
130	09.Montelukast Tab	10mg							
131	10. Pheniramine Maleate Tab	25mg							
132	11.Phenylepherine+PCM+CPM	10+325+2mg							
133	12.PCM+CPM +Phenylepherine+Sod Citrate Syp-60ml	125+1+5mg							
134	13.Promethazine Syp.100ml	5mg/5ml							
135	14.Levocetizine +Pseudoephedrine+PCM	5+60+500mg							
136	15.Montelukast +Levocetizine	10+5mg							
137	16.Promethazine Inj.	25mg/ml							
138	17.Phenarmine Maleate Inj	25mg/ml							
139	18.Pentazocine Inj	30mg/ml							
140	19. Azithromycin +Ambroxol	500+60mg							
141	20.Any other product in thois category Syp/Tab								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	H. RESPIRATORY SYSTEM								
	a. Antitussive,Expectorants & Mucolytics								
		100ml/120ml							
142	01.Ambroxol Hcl+ Salbutamol-Syp	15mg +1mg							
143	02.CPM+Codiin Phosphate Syp	4mg +10mg							
144	03.Ambroxol HCl+Terbutalin+Guenphensin Syp	30+1.25+50mg							
145	04. Acebrophylline Tab	400mg							
146	05.Cetizine +Ambroxol Syp	2.5+30mg							
147	06.Levocloperastine Hcl Syp	20mg							
148	07.Dexomethorphen + CPM+Menthol Syp	10+2+2mg							
149	08.Diphenhydramine+Amm chloride+Sod Citrate+Menthol	14.08+138+57+1.14mg							
150	09.Terbutalin Sulphate +Bromhexine Syp	2.5mg+8mg							
151	10.Ambroxol +Terbutalin +Guainphensin Syp	15+1.25+50mg							
152	11.CPM+Amm.Chloride+Sod Citrate+Menthol Syp	2.5+100+40+.9mg							
153	12.Ambroxol+Levosalbutol Sulphate +Guainphensin	30mg+1mg+50mg							
154	13. Diphenhydramine+Amm.Chloride+Sod.Citrate	10mg+100mg+60mg							
155	14. Bromhexine+Terbutalin+Amm.Chloride+Menthol	10+1.5+50mg							
156	15.Dextromethorphen+Phenylepheren+CPM	10+5+2mg							
157	16.Any Other Product of This Category								
	b. Antiasthamatics								
158	01.Salbutamol Tab	4mg							
159	02.Salbutamol Syp.	2mg/5ml							
160	03.Salbutamol+Theophylline Syp.	100ml							
161	04.Theophylline CR Tab	400mg							
162	05.Theophylline+Etofiline Tab	100mg							
163	06.Theophylline+Etofiline Tab	150mg							
164	07.Theophylline+Etofiline Tab	300mg							
165	08.Theophylline+Etofiline Inj.	100mg							
166	09.Theophylline+Etofiline Syp.	200mg							
167	10.Theophylline-SR+Etofyllin SR+Montelukast	69+231+10mg							
168	11.Doxophyline tab	400mg							
169	12.Bromhexine tab	8mg							
170	13.Terbutalin Sulphate +Bromhexine tab	2.5+8mg							
	c. Inhaler Aerosols & Nebulizing Solutions								
171	01.Inh.Budesonide	200mcg/Dose							
172	02.Inh.Formoterol +Budesonide	06mcg+200mcg							
173	03.Inh.Formoterol +Budesonide	12mcg+400mcg							
174	04.Inh.Beclomethasone +levosalbutol	50mcg+50mcg							
175	05.Inh.Salbutamol	100mcg/Dose							
176	06.Inh.Salmeterol	25mcg/Dose							
177	07.Inh.Levo Salbutamol	50mcg /Dose							
178	08.Inh.Solubutamol +Beclomethasone Dip	100mcg+50mcg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
179	09.Inh.Salmeterol+Fluticasone	25+500mcg/Dose							
180	10.Inh.Salmeterol+Fluticasone	25+250mcg/Dose							
181	11.Inh.Tiotropium Bromide	9mcg/Dose							
182	12.Any Other Product of This Category								
	Rotocap								
183	01. Salbutamol Roto Cap	200mcg/Dose							
184	02. Budesonide Roto Cap	200mcg/Dose							
185	03. Levo Salbutamol RotoCap	2mg							
186	04. Formoterol+Budesonide R.C.	6mcg+200mcg							
187	05. Formoterol+Budesonide R.C.	6mcg+400mcg							
188	06 Salmeterol+Fluticasone R.C.	50mcg+250mcg							
189	07. Tiotropium Roto Cap.	9mcg							
190	08. Any Other Product of This Category								
	Respules								
191	01.Salbutamol Respules	2.5mg/2.5ml							
192	02.Budesonide Respules	0.5mg/2ml							
193	03.Levosalbutamol	1.25mg/2.5ml							
194	04.Ipratropium +Levosalbutamol	20mcg+50mcg							
195	05.Any Other Product of This Category								
	d. Nasal Sprays								
196	01.Budesonide Nasal Spray	0.5mg							
197	02.Fluticasone Nasal Spray	100mcg							
198	03.Azelastine Nasal Spray								
199	04.Mometasone Nasal Spray								
200	05.Azelastine+Fluticasone	140mcg+50mcg							
201	06.Calcitonin Spray								
	I. CARDIOVASCULAR SYSTEM								
	1. Antihypertensives								
	a. Betablockers								
202	01.Atenolol Tab	25mg							
203	02.Atenolol Tab	50mg							
204	03.Atenolol Tab	100mg							
205	04.Metoprolol Tab	50mg							
206	05.Metaprolol XR	12.5mg							
207	06.Metoprolol XR Tab	25mg							
208	07.Metoprolol XR Tab	50mg							
209	08.Metoprolol XR Tab	100mg							
210	09.Propranolol Tab	10mg							
211	10.Propranolol Tab	40mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
212	11.Propranolol SR Cap	40mg							
213	12.Nebivolol Tab	2.5mg							
214	13.Nebivolol Tab	5mg							
215	14.Bisprolol Tab	2.5mg							
216	15.Bisoprolol Tab	5mg							
217	16.Atenolol+Amlodepin Tab	50mg+5mg							
218	17.Eplerenone	25mg							
219	18.Bisprolol + Hctz	2.5mg +6.25mg							
220	19.Bisprolol + Hctz	5mg +6.25mg							
221	20. Nebivolol+Hctz	5mg+12.5mg							
222	21. Any other product								
	b. ACE Inhibitor								
223	01.Enalapril Tab	2.5mg							
224	02.Enalapril Tab	5mg							
225	03.Captopril Tab	25mg							
226	04.Lisinopril Tab	2.5mg							
227	05.Lisinopril Tab	5mg							
228	06.Ramipril Cap/Tab	1.25mg							
229	07.Ramipril Cap/Tab	2.5mg							
230	08.Ramipril Cap/Tab	5mg							
231	09.Ramipril Cap/Tab	10mg							
232	10.Benazepril Tab	5mg							
233	11.Perindopril	4mg							
234	12.Perindopril+Indapamide	4mg+1.25mg							
235	13.Ramipril+HCTZ Cap/Tab	2.5mg+12.5mg							
236	14.Ramipril+HCTZ Cap/Tab	5mg+12.5mg							
237	15.Hydrochlorothiazide	12.5mg							
238	16.Chlorthalidone	6.25mg/12.5mg							
239	17.Ramipril +Amlodepin	2.5+5mg							
240	18.Perindopril	8mg							
241	19.Perindopril+Amlodepin	4mg +5mg							
242	20.Trandolapril	1mg							
243	21.Piribedil	50mg							
244	22.Any other product								
	c. Angiotensin II Inhibitor								
245	01.Losartan K Tab	25mg							
246	02.Losartan K Tab	50mg							
247	03.Losartan K+HCTZ Tab	50mg+12.5mg							
248	04.Olmesartan	20mg							
249	05.Telmisartan	20mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
250	06.Telmisartan	40mg							
251	07. Telmisartan	80mg							
252	08. Moxovas	0.02mg							
253	09. Moxovas	0.03mg							
254	10. Valsartan Tab	40mg/80mg							
255	11.Telmisartan +Ramipril	40mg +2.5mg							
256	12.Olmesartan +HCTZ	20mg +12.5mg							
257	13.Telmisartan Tab +HCTZ	40mg +12.5mg							
258	14.Irbesartan	150mg/300mg							
259	15.Telmisartan + Amlodepin +HCTZ	40mg +5mg+6.25mg							
260	16.Any Other Product of This Category								
	d. Calcium Channel Blockers								
261	01.Nifedipine R Tab/Cap	20mg							
262	02.Amlodipine Tab	2.5mg							
263	03.Amlodipine Tab	5mg							
264	04.S(-)Amlodipine Tab	2.5mg							
265	05.S(-)Amlodipine Tab	5mg							
266	06.Lercanidipine	10mg							
267	07.Lercanidipine	20mg							
268	08.Verapamil SR Tab	80mg							
269	09.Verapamil SR Tab	120mg							
270	10.Diltiazem Tab	30mg							
271	11.Diltiazem Tab	60mg							
272	12.Diltiazem SR Tab/Cap	90mg							
273	13.Diltiazem SR Tab/Cap	120mg							
274	14.Diltiazem SR Tab/Cap	180mg							
275	15.Clinidipin Tab	5mg/10mg							
276	16.Lacosamide	50mg							
277	17.Any Other Product of This Category								
	e. Miscellaneous Antihypertensive								
278	01.Clonidine tab	0.1mg							
279	02.Clonidine+Hydrochlorthiazide Tab	0.1mg+20mg							
280	03.Prazosin-XL Tab	2.5mg							
281	04.Prazosin-XL Tab	5mg							
282	05.Nicorandil Tab	5mg							
283	06.Nicorandil Tab	10mg							
284	07.Indapamide Tab	2.5mg							
285	08.Indapamide SR Tab	1.5mg							
286	09.Lacidpne Tab	2mg							
287	10.Lacidpne Tab	4mg							
288	11.Any Other Product of This Category								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	2. Anti Anginal								
289	01.Isosorbide Dinitrate SL	5mg							
290	02.Isosorbide Dinitrate SL	10mg							
291	03.Isosorbide-5 MononitrateTab	10mg							
292	04.Isosorbide-5 MononitrateTab	20mg							
293	05.Isosorbide-5 MononitrateTab (SR)	30mg							
294	06.Isosorbide-5 MononitrateTab	60mg							
295	07.Glyceryl Trinitrate (Nitroglycerine) Prep.	2.6/2.5mg							
296	08.Glyceryl Trinitrate (Nitroglycerine) Prep.	6.2/6.4mg							
297	09.Trimetazidine Tab	20mg							
298	10.Trimetazidine MR Tab	35mg							
299	11.Trimetazidine SR Tab	70mg							
	3. Anti Arrhythmic								
300	01.Amiodarone Tab	100mg							
301	02.Amiodarone Tab	200mg							
	4. Drugs in Cardiac Failure & Shock								
302	01.Digoxin Tab	0.25mg							
303	02.Any Other Product of This Category								
	5. Vasodilators								
304	01.Pentoxifylline Tab	400mg							
305	02.Isoxsuprine Tab	10mg							
306	03.Isoxsuprine SR Tab/Cap	40mg							
307	04.Ranolazine	500mg							
308	05.Cilostazol	50mg							
309	06.Any Other Product of This Category								
	6. Haemostatic/Coagulant								
310	01.Ethamsylate Tab	500mg							
311	02.Ethamsylate Inj.(2 ml/Vial)	125mg/ml							
312	03.Tranexamic Tab	500mg							
313	04.Calcium Dobesilate Cap	500mg							
314	05.Tranexamic Acid+Mefenamic Acid Tab	500mg+250mg							
315	06.Ethamsylate.+Tranexamic Acid Tab	250mg+250mg							
316	07.Diosmin+Hesperidine	450mg+50mg							
317	08.Citrus Bio Flavonold Compound	150mg							
318	09.Any Other Product								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	7. Anticoagulant,Antithrombotic & Antiplatelets								
319	01.Clopidogrel Bisulphate Tab	75mg							
320	02.Clopidogrel Bisulph.+Aspirine Tab	75mg+75mg							
321	03.Clopidogrel Bisulph.+Aspirine Tab	75mg+150mg							
322	04.Clopidogrel+Aspirin+Atorvastatin	75+75+10mg							
323	05.Clopidogrel+Aspirin+Atorvastatin	75+75+20mg							
	8. Hypolypedaemic Agents/Statis								
324	01.Atorvastatin Tab	5mg							
325	02.Atorvastatin Tab	10mg							
326	03.Atorvastatin Tab	20mg							
327	04.Atorvastatin Tab	40mg							
328	05.Atorvastatin+Ezetimibe Tab	10mg+10mg							
329	06.Atorvastatin +Fenofibrate	10+160mg							
330	07.Atorvastatin+Fenobibrate	10+145mg							
331	08.Carvedilol Tab	12.5mg							
332	09.Carvedilol Tab	6.25mg							
333	10.Carvedilol Tab	3.125mg							
334	11.Ezetimide Tab	10mg							
335	12.Fenofibrate Tab	160mg							
336	13.Lovastatin Tab	10mg							
337	14.Rosuvastatin Tab	5mg							
338	15.Rosuvastatin Tab	10mg							
339	16.Rosuvastatin	20mg							
340	17.Simvastatin Tab	5mg							
341	18.Simvastatin Tab	10mg							
342	19.Fenobibrate + B-cyclodextrin	145mg							
343	20.Fenofibrate +Atorvastatin	200+10mg							
344	21 Rosuvastatin +Fenofibrtae	10+160mg							
345	22.Any other product								
	J. GENITOURINARY SYSTEM								
	1. Diuretics								
346	01.Frusemide Tab	40mg							
347	02.Frusemide Inj.(2 ml/Amp)	10mg/ml							
348	03.Triamterene+Benzthiazide Tab	50mg+25mg							
349	04.Splronolactone Tab	50/100							
350	05.Frusemide+Splronolactone Tab	20mg+50mg							
351	06.Torseamide	20mg							
352	07.Torseamide	10mg							
353	08.Torsamide +Spironolactone	10mg+50mg							
354	09.Any Other Product of This Category								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	2. Urinary Alkalizers								
355	01.Urinary Alkaliser/ Urinary Anti-infective	100 ml Bott.							
356	02.Other Product of This Category								
	3. Urogenital Analgesics & Antispasmodics								
357	01.Flavoxate	200mg							
358	02.Flavoxate +Ofloxacin	200+200mg							
359	03.Any Other Product of This Category								
	4. Drugs acting on Prostrate								
360	01.Finastride	5mg							
361	02.Terazocin Tab	1mg							
362	03.Terazocin Tab	2mg							
363	04.Tamsulosin Cap	0.4mg							
364	05.Finasteride Tab	5mg							
365	06.Tamsulosin+Finasteride Tab	0.4 mg+5 mg							
366	07.Tolterodine	2mg							
367	08.Tolterodine	4mg							
368	09.Tamsulosin+Dutasteride	0.4mg+0.5mg							
369	10.Silodosin	8mg							
370	11.Dutastride	0.5mg							
371	12. Any other Product of this category								
	5. Drugs acting on Vaginal & Urithral Conditions								
372	01.Clotrimazole Vaginal Pessary	100mg							
373	02.Povidone-Iodine Vaginal Pessary	200mg							
	K. ALIMENTRY SYSTEM								
	1. Antacid/Antiulcerants/Antisecretories								
374	01.Antacid Tab	10's							
375	02.Antacid Gel	170ml/200ml							
376	03.Esomeprazole Tab	40mg							
377	04. Itopride	50mg							
378	05.Itopride +Pantaprozol	150+40mg							
379	06.Lansoprazole Cap	30mg							
380	07.Mebeverine Tab	135mg							
381	08.Mesalamine Tab	400mg							
382	09.Mesalamine	800mg							
383	10.Mesalamine	1200mg							
384	11.Omeprazole Cap	20 mg							
385	12.Omeprazole+Domperidone Tab	20mg+10mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
386	13.Pantoprazole Tab	40mg							
387	14.Rabeprazole Tab	20mg							
388	15.Ranitidine Tab	150mg							
389	16.Inj.Ranitidine	50 mg/2 ml							
390	17.Sulphasalazine Tab	500mg							
391	18.Sulphasalazine Tab	1000mg							
392	19.Pantoprazole+Domperidome	20mg+10mg							
393	20.Pantoprazole+Domperidome SR	40mg+30mg							
394	21.Rabeprazole+Domperidone	20mg+10mg							
395	22.Rabeprazole +Domperidon DSR	20mg +30mg							
396	23.Rabeprazole+Itoperide	20mg+150mg							
397	24.Dexrabeprazole +Domperidon SR	10mg+30mg							
398	25.Rebeperazole + Aceclofenac-SR	20mg +200mg							
399	26.Revaprazan	200mg							
400	27.Rebeperazole+Levuspride SR	20+75mg							
401	28.Troxipide ER	300mg							
402	29.Rebeperazole+ Zinccarnosine	20 + 75mg							
403	30. Any other products in this category								
	2. Antiemetic/ Antinauseanta								
404	01.Domperidone Tab	10mg							
405	02.Domperidone Syp.(30 ml)	2 mg/ml							
406	03.Doxylamine+Pyridoxin	10mg +10mg							
407	04.Metachlorpromide Tab	10 mg							
408	05.Metachlorpromide Syp.(30 ml)	5 mg/5 ml							
409	06.Metachlorpromide Inj.(Amp)	1 mg/ml							
410	07.Ondansetron Tab	4mg							
411	08.Onanstron Inj	2mg/ml							
412	09.Any Other Product of This Category								
	3. Antidiarrhoeal Preparation								
413	01.Racecadotril Cap	100mg							
414	02.Racecadotril Sachet	Sachet							
415	03.Metronidazole +Furazolidone Tab	400mg+100mg							
416	04.Lactobacillus 60mill spores	Sachet							
417	05.Any Other Product Tab/ Syp								
	4. Antiamoebic/Antigiardiasis/Trichomonocidal								
418	01.Metronidazole Tab	400mg							
419	02.Metronidazole Susp.(60 ml)	200 mg/5 ml							
420	03.Tinidazole Tab	500mg							
421	04.Ornidazole Tab	500mg							
422	05.Ciprofloxacin+Tinidazole Tab	500 mg+600 mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
423	06.Norfloxacin+Tinidazole Tab	400 mg+600 mg							
424	07.Ofloxacin+Ornidazole	200mg+500mg							
425	08.Cefixime+ Ornidazole	200mg+500mg							
426	09.Metronidazole+Furazolidone Susp	100+30mg/5ml							
427	10.Ofloxacin +Ornidazole Syp	50mg +125mg							
428	11.Ofloxacin +Metronidazole Syp-30ml	50mg +100mg							
429	12.Any other Product								
	5. Anthelmintics and Anti Infestive Drugs								
430	01.Albendazole Tab	400mg							
431	02.Albendazole Syp.	200mg/5ml							
432	03.Mebendazole Tab	100mg							
433	04.Ivermectin	12mg							
434	05.Ivermectin+Albendazole	6mg+400mg							
435	06.DiethylCarbamazine	50mg/100mg							
	6. Antispasmodic Preparation								
436	01.Mefenamic+Dicyclomine Tab	250mg +10mg							
437	02.Dicyclomine+PCM Tab	20mg +500mg							
438	03.Clidinium Bromide +ChlordiazaperoxideTab	2.5mg +5mg							
439	04.Hyoscine Butyl Bromide Tab	10mg							
440	05.Hyoscine Butly Bromide Inj	20mg/ml							
441	06.Dicyclomin Syp-30ml	20mg /ml							
442	07.Drotavarin Hcl Tab	80mg							
443	08.Drotaverin+Mefenamic Acid Tab	80+250mg							
444	09.Any Other Product								
	7. Laxatives								
445	01.Bisacodyl Tab	5mg							
446	02.Sodium picosulphate	10mg							
447	03.Lactulose Syp 100ml	10gm/15ml							
448	04.Laxative Suspension								
449	05.Liq.Parafin+Mag.Hydroxide+Sod. Picosulphate	1.25+300+3.33mg							
450	06. Any Other Tab/Cap. of This Category.								
	8. Drugs acting on Colon/Rectum								
451	01.Ointments for Piles								
	(Give Composition)								
	9. Digestive Enzyme/Liver Preparation								
452	01.Digestive Enzyme Cap								
453	02.Digestive Tab								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
454	03.Diastase+Pepsin Cap	50mg+10mg							
455	04.Ursodeoxycholic Acid	300mg							
456	05.Ursodeoxycholic Acid	500mg							
457	06.Slymarin	70mg							
458	07.Hepatobilliary Prep								
	L. ANTI DIABETIC DRUGS								
	a. Sulfonyl Urea								
459	01.Glibenclamide	5mg							
460	02.Gliclazide	40mg							
461	03.Gliclazide	80mg							
462	04.Gliclazide (MR)	30mg							
463	05.Gliclazide (MR)	60mg							
464	06.Glipizide Tab	5mg							
465	07.Glimepride Tab	1mg							
466	08.Glimepride Tab	2mg							
467	09.Glimpiride Tab	3mg							
	b. Insuline Sparing Drugs/Bigunaides								
468	01.Metformin Tab	500mg							
469	02.Metformin Tab	850mg							
470	03.Metformin -C.R./S.R Tab	500mg							
471	04.Metformin -C.R./S.R Tab	1000mg							
	c. Peripheral Tissue Sensitizer								
472	01.Pioglitazone Tab	15mg							
473	02.Pioglitazone Tab	30mg							
474	03.Any other Product of This Category								
	d. Alpha Glucosidase Inhibitors								
475	01.Acarbose Tab	25mg							
476	02.Acarbose Tab	50mg							
477	03.Voglibose	0.2mg							
478	04.Voglibose	0.3mg							
479	05.Acarbose +Metformin	50mg +500mg							
480	06.Voglibose +Metformin	0.3mg +500mg							
481	07.Any Other Product of This Category								
	e. Insulin Analogues								
482	01.Repaglinide Tab	0.5mg							
483	02.Repaglinide Tab	1mg							
484	03.Sitptaglipitin	50mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
485	04.Sitptagliptin	100mg							
486	05.Sitiptaliptin+Metformin	50mg +500mg							
487	06.Vildagliptin tab	50mg							
488	07.Vildagliptin +Metformin	50+500mg							
489	08.Vildagliptin- + Metformin	50mg +1000mg							
490	09.Linagliptin	5mg							
491	10.Sexagliptin	2.5mg							
492	11.Sexagliptin	5mg							
493	12.Sexagliptin + Metformin-SR	2.5mg +500mg							
494	13.Migliitol	50mg							
495	14.Ticagrelor	90mg							
496	15.Any Other Product of This Category								
	f. Combination Drugs								
497	01.Glibenclamide+Metformin Tab	5 mg+500 mg							
498	02.Gliclazide+Metformin Tab	80 mg+500 mg							
499	03.Glimepride+Metformin Tab	1 mg+500 mg							
500	04.Glimepride+Metformin Tab	2 mg+500 mg							
501	05.Glipizide+Metformin Tab	5 mg+500 mg							
502	06.Pioglitazone+Metformin Tab	15 mg+500 mg							
503	07.Pioglitazone+Metformin Tab	30 mg+500 mg							
504	08.Pioglitazone+Glimpiride+Metformin Tab	15+1+500							
505	09.Pioglitazone+Glimpiride+Metformin Tab	15+2+500							
506	10.Any Other Product of This Category								
	g. Insulin Injectables								
507	01.Insulin Biphasic Isophane-30/70 Vial	40 IU/ml							
508	02.Insulin Biphasic Isophane-30/70 Cart	100 IU/ml							
509	03.Insulin Biphasic Isophane-50/50 Cart	40 IU/ml							
510	04.Insulin Lispro-25/75 Cart	100IU/ml							
511	05.Insulin Lispro-50/50 Cart	100IU/ml							
512	06.Insulin Aspart 30 Pen	100 IU/ml							
513	07.Insulin Aspart 30 Penfil Cart	100IU/ml							
514	08.Insulin Detemir Pen	100IU/ml							
515	09 Insulin Glargine (Cart)	100 IU/ml							
516	10 Inj Insulin Glargin Pen	100 IU/ml							
517	11 Insulin Aspart 50 Pen	100IU/ml							
518	12.Insulin liraglutide Pen	6mg							
519	13.Insulin Degludec Pen	100IU/ml							
520	14.Insulin Degludec Cart	100IU/ml							
521	15. Any Other Product of This Category								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	M. CENTRAL NERVOUS SYSTEM								
	1. Psychotherapeutic Agents								
	a. Antidepressants								
522	01.Amisulpiride	100mg							
523	02.Amitriptyline Tab	10mg							
524	03. Amitriptyline Tab	25mg							
525	04.Citalopram Tab	10mg							
526	05.Dothiepin Tab	25mg							
527	06.Dothiepin Tab	75mg							
528	07.Duloxetine	20mg							
529	08.Escitalopram	5mg							
530	09.Escitalopram	10mg							
531	10.Fluoxetine Cap	20mg							
532	11.Fluvoxamine Tab	100mg							
533	12.Impiramine Tab	25mg							
534	13.Lithium Carbonate Tab	300mg							
535	14.Mirtazapine	15mg							
536	15.Paroxetin CR	37.5mg							
537	16.Quitipine-SR	200mg							
538	17.Respiridone	1mg							
539	18.Respiridone	2mg							
540	19.Respiridone	3mg							
541	20.Sertraline Tab	50mg							
542	21.S.Citalopram	10mg							
543	22.Tianeptine	12.5mg							
544	23.Trazodone Hydrochloride	50mg							
545	24.Venlafaxine XR	37.5mg							
546	25.Paroxatine	10mg/20mg							
547	26.Any Other Product of This Category								
	b. Antipsychotic								
548	01.Aripiprazole	10mg							
549	02.Atomoxetine	18mg							
550	03.Atomoxetine	25mg							
551	04.Citicoline	500mg							
552	05.Haloperidol	1.5mg							
553	06.Olanzapine Tab	5mg							
554	07.Olanzapine Tab	10mg							
555	08.Rizatriptam	5mg							
556	09.Rizatriptam	10mg							
557	10.Trifluperazine	5mg							
558	11.Any Other Product of This Category								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	c. Sedatives & Tranquilizers								
559	01.Alprazolam Tab	0.25mg							
560	02.Alprazolam Tab	0.5mg							
561	03.Alprazolam SR Tab	0.5mg							
562	04.Buspirone Tab	5mg							
563	05.Buspirone Tab	10mg							
564	06.Clobazam	5mg							
565	07.Clobazam	10mg							
566	08.Diazepam Tab	5mg							
567	09.Diazepam Inj.	5mg/1ml							
568	10.Lorazepam Tab	1mg							
569	11.Lorazepam Tab	2mg							
570	12.Zolpidem Tab	5mg							
571	13.Zolpidem Tab	10mg							
572	14.Chlordiazepoxide + Triflurazine Tab	10 +1mg							
	d. Hypnotics								
573	01.Nitrazepam Tab	5mg							
574	02.Nitrazepam Tab	10mg							
575	03.Zopiclone	7.5mg							
576	04.Eszopicolone	1mg							
577	05.Any Other Product of This Category .								
	2. Anti Alzheimer`s Disease								
578	01.Donepezil Tab	5mg							
579	02.Donepezil Tab	10mg							
580	03.Memantine Hcl	5mg							
581	04.Memantine Hcl	10mg							
582	05.Any Other Product of This Category								
	3. Antiepileptics								
583	01.Bromocryptine	2.5mg							
584	02.Carbamazepine Tab	200mg							
585	03.Carbamazepine SR Tab	200mg							
586	04.Clonazepam Tab	0.5mg							
587	05.Clonazepam Tab	1mg							
588	06.Divalproex Tab/Cap	250mg							
589	07.Divalproex Tab/Cap	500mg							
590	08.Gabapentin Tab	300mg							
591	09.Lamotrigine Tab	50mg							
592	10.Levatericetam	250mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
593	11.Levatericetam	500mg							
594	12.Levatericetam	1gm							
595	13.Oxcarbazepine Tab	150mg							
596	14.Oxcarbazepine Tab	300mg							
597	15.Oxcarbazepine-SR	600mg							
598	16. Phenytoin Sodium Tab/Cap	100mg							
599	17. Phenobarbitone Sodium Tab/Cap	30mg							
600	18.Phenobarbitone Sodium Tab/Cap	60mg							
601	19. Pregabalin	75mg							
602	20.Pregabalin+Methylcobalamine	75+750mg							
603	21.Sodium Valproate Plain Tab	200mg							
604	22.Sod.Valproate+Valproic Acid Tab	135 mg+58 mg							
605	23.Sod.Valproate+Valproic Acid Tab	200 mg+87 mg							
606	24.Sod.Valproate+Valproic Acid Tab	333 mg+145 mg							
607	25.Topirmate	50mg							
608	26.Toprimate	100mg							
609	27.Gabapentin+ Methylcobalamin	100mg+500mg							
610	28.Gabapentin+ Methylcobalamin	300mg+500mg							
611	29.Epalrestat +Mecobalamin	50mg+500mg							
612	30.Any Other Product of This Category								
	4. Antiparkinsonism								
613	01.Amantadine	100mg							
614	02.Levodopa+Carbidopa Tab	250 mg+25 mg							
615	03.Levodopa+Carbidopa (C.R.) Tab	100 mg+10 mg							
616	04.Levodopa+Carbidopa (C.R.) Tab	250 mg+50 mg							
617	05.Levodopa+Carbidopa Tab	100 mg+25 mg							
618	06.Piribedil Tab	50mg							
619	07.Ropinirole Tab	0.5mg							
620	08.Ropinirole Tab	1mg							
621	09.Selegiline Tab	5mg							
622	10.Trihexyphenidyl HCL Tab	2mg							
623	11.Any Other Product of This Category								
	5. Antimigrain & Antivertigo								
624	01.Prep. of Ergotamine Tartrate								
625	02.Betahistine Tab	8mg							
626	03.Betahistine Tab	16mg							
627	04.Cinnarzine Tab	25mg							
628	05.Flunarin Tab	10mg							
629	06.Prochlorperazine Tab	5mg							
630	07.Prochlorperazine Inj.(Amp)	12.5mg/ml							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
631	08.Paracetamol + Domperidon	500+20mg							
632	09.Sumatriptan	50mg							
633	10.Any Other Product of This Category								
	<u>N. ANTI CANCER PREPARATIONS</u>								
634	01.Methotrexate Tab	2.5mg							
635	02.Methotrexate Tab	7.5mg							
636	03.Methotrexate Tab	10mg							
637	04.Tamoxifen Tab	10mg							
638	05.Tamoxifen Tab	20mg							
639	06.Abiraterone Acetate	250mg							
640	07.Exemestane	25mg							
	<u>O. VACCINES/ SERA</u>								
641	01.Anti Rabies Vaccine (Amp)								
642	02.Inj Tetneous Toxide.(Amp)								
643	03.Hepatitis-B Vaccine (Multi Dose)								
644	04.Any Other Product of This Category								
	<u>P. STEROID PREPARATION</u>								
645	01.Prednisolone Tab	5mg							
646	02.Prednisolone Tab	10mg							
647	03.Prednisolone Tab	20mg							
648	04.Dexamethasone Inj.(Vial)	4mg/ml							
649	05.Hydrocortisone Inj.(Vial)	100mg/Vial							
650	06.Methyl Prednisolone Tab	4mg							
651	07.Methyl Prednisolone Tab	8mg							
	<u>Q. HARMONES/ THYROID/ ANTI-THYROID PREPARATION</u>								
652	01.Allyloestrenol Tab	5mg							
653	02.Norethisterone Tab	5mg							
654	03.Thyroxin Tab	12.5mg							
655	04.Thyroxine Tab	25mcg							
656	05.Thyroxine Tab	50mcg							
657	06.Thyroxine Tab	75mcg							
658	07.Thyroxine Tab	100mcg							
659	08.Thyroxine Tab	125mcg							
660	09.Carbimazole Tab	5mg							
661	10.Carbimazole Tab	10mg							
662	11.Conjugated Estrogens	0.625mg							
663	12.Hydroxyprogesterone Inj.	250mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
664	13.Natural Micro.Progesterone Tab/Cap	100mg							
665	14.Medroxyprogesterone Tab	10mg							
666	15.Estradiol Valerate Tab	2mg							
667	16.Estradiol Valerate cream	1mg							
668	17.Levogestrinol IUD								
	R. VITAMINS/ MINERALS/ CALCIUM PREPARATION								
669	01.Ascorbic Acid Tab	500mg							
670	02.Vitamin E Acetate Cap	400mg							
671	03.Vitamin-E Acetate+L-Carnitine	200+150mg							
672	04.Vitamin B1+B2+B6+B12+Nicotinamide Tab								
673	05.Inj Mecobalamine+Pyridoxin+Nicotinamide	1000mcg+100+100mg							
674	06.Vit-B1+B2+B6+B12+Ascorbic Acid + Nicotinamide + Bio	5mcg + 150mg + 100mg + 50mg + 1.5mcg							
675	07.Folic Acid Tab	5mg							
676	08.Multivitamin Cap/Tab								
677	09.Alfacalcidol Cap	0.25mcg/0.5mcg							
678	10.Alfacalcidol+Calcium Cap	0.25mg+625MG							
679	11.Pyridoxin Hcl	100mg							
680	12.Calcium Carb+Vit-D3+Vit-K2-7	500mg+500IU+50mcg							
681	13.Preparation of Iron tab/cap Containing								
682	14.Fe.Fumarate +Folic Acid +Zinc	152mg+750mcg+22.5mg							
683	15.Fe.Fumarate+Folic Acid+VitB12	300mg +1.5mg+15mcg							
684	16.Fe.sulphate+Folic Acid	150mg +0.5mg							
685	17. Fe.Fumarate+ Folic Acid +Docusate Sod	165+750mcg+50mcg							
686	18.Iron Syp.	100ml/200ml							
687	19.Mecobalamine +Pyridoxin+Alphalipic Acid	1500mg+200mcg							
688	20.Mecobalamine Tab/Cap	1500mg							
689	21.Mecobalamine Inj	1500mg							
690	22.Cap B-complex with Zinc								
691	23.Nandrolone Phenyl Prop.Inj. (1 ml Amp)	25mg/ml							
692	24.Calcium Citrate + Vit D3	500mg							
693	25.Calcium Carbonate+ Vit D3								
694	26.Calcium D3 sachet	Sachet							
695	27.Chloecalciferol (Vit-D3) Cap	60000IU							
696	28.Preparation of Potassium Syp.	200ml							
697	29.Preparation of O.R.S.	21gm							
698	30.Diacerine	50mg							
699	31.Glucosamine	500mg/750mg							
700	32.Glucosamine + Diacerine +MSM	500+50mg+750mg							
701	33.Estified Fatty Acid Cap								
702	34.Levocarnitine	500mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
703	35.L-carnitine+Ubidecarenone	500mg+30mg							
704	36..Antioxident with Lutein Tab								
705	37.L-Glutathione Sachet	2mg							
706	38.Elemental Calcium +Phosphorous +Vit-D3	350+175+100IU							
707	39.Diclofeanc Diethylamin +MSM Spray	15ml							
708	40.Colostrum Cap	500mg							
709	41. Euporbia Prostrate Dry Extract tab	100mg							
710	42.Any Other Product of This Category								
	S. TOPICAL SKIN OINTMENTS/ CREAMS/ LOTIONS								
711	01..Adapalene Gel	0.001							
712	02.Betamethasone + Neomycin	00.1%+0.5%							
713	03.Beclomethasone Combination								
714	04.Clotrimazole +Neomycin+Beclomathasone	1%+0.5%+0.25%+							
715	05.Betamethasone +Gentamycin+Miconazole	0.12%+0.1%+2%							
716	06.Clobetasol oint	0.05%w/w							
717	07.Clotrimazole Oint	0.01							
718	08.Clotrimazole + Beclomethasone	1% +0.025%							
719	09.Fusidic Acid	2%w/w							
720	10.Fusidic Acid+Beclomethasone	20mg+0.25mg							
721	11.Clobetasole +Gentamycin	0.05%+0.1%							
722	12.Clobetasole +Gentamycin +Miconazole	0.5%+0.1%+2%							
723	13.Mometasome Furoate	0.1%w/w							
724	14.Dinoprostone gel	o.5gm							
725	15.Hydroquinone +Oxybenzone+Octinoxate	2%+0.025%+1%							
726	16.Acyclovir Oint/cream	0.05							
727	17.Fluocinolone Acetonid+Neomycin+Miconazole	0.025%+0.5%+0.2%							
728	18.Extr Cepae+Heparin Sodium+Allantion Gel	0.1G+50IU+0.10%							
729	19.Fluticasone oint	0.0005							
730	20.Miconazole Oint	0.02							
731	21.Terbinafin Cream	1%w/w							
732	22.Permethrin Cream	5%w/w							
733	23.Tacrolimus Oint	0.0001							
734	24.Pimecrolimus Cream	1%w/w							
735	25.Povidone-Iodine Oint (15 gm Tube)	5% W/w							
736	26.Povidone-Iodine Oint (250 gm Jar)	5% W/w							
737	27.Povidone-Iodine Sol (100ml)	5% W/w							
738	28.Povidone Iodine Gargle (50ml)	0.02							
739	29.Benzyl Peroxide Gel	2.5% W/w							
740	30.Tretinoin Cream	0.0025							
741	31.Silver Sulphadiazine Oint (15 gm)								
742	32 Povidone Iodine Powder (10gm)	5%w/w							
743	33. Clotrimazole Powder (15gm)	10mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
744	34.Chlarithromycin Gel	4% W/v							
745	35.Chlarithromycin Lotion	2% W/v							
746	36.Clindamycin Gel	1% W/w							
747	37.Clindamycin Lotion	0.01							
748	38.Mupirocin Oint	2% W/w							
749	39.Clobetasole +Salycilic Acid	0.05%+6%							
750	40.Ofloxacin+Ornidazole+Terbinalin+Clobetasol (15gm)								
751	41.Clotrimazol Powder	1%w/w							
752	42.Any Other Product of This Category .								
	Scabicial Agent								
753	01.Gamma Benz.Hexachl.Lotion (100 ml)	1% W/w							
	Rubeficient/ Muscle Relaxant Agent								
754	01.Diclofenac Gel	1.16% W/w							
755	02.Nimesulide Gel	1% W/w							
756	03.Diclofenac Sodium+Oleum Lini +Methyl Salicylate+Menthol	1.16%w/w +3%w/w 10%w/w+5%w/w							
	Ear Drop								
757	01.Chloramphenicol Ear Drop								
758	02.Paradichlorobenzen +Benzocain +Chorbutol	2%+2.7%+5%							
759	03.Clotrimazole ear Drop								
760	04.Chloramphenicol +Beclomethasone+Lignocain	5%+1%+2%							
761	05.Any Other Product of This Category								
	T. LOCAL ANAESTHETICS								
762	01.Preparation of Xylocain Oint/Gel	0.05							
763	02.Lignocain Inj. 30 ml Vial	0.02							
764	03.Ligno.+Adrenaline Inj. 30 ml Vial								
765	04.Any Other Product of This Category .								
	U. OPHTHALMIC PREPARATIONS								
766	01.Sulfacetamide Eye Drops 20%								
767	02.Ciprofloxacin Eye Drops								
768	03.Cyclopentolate Eye Drop	0.01							
769	04.Framycetin Eye drops								
770	05.Framycetin +Dexamethasone+Gramicidine Drop	5mg+0.5mg+0.05mg							
771	06.Framycetin Oint								
772	07.Chloromycetin Eye Applicaps								
773	08.Dorzolamide Eye Drop	0.02							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
774	09.Ofloxacin Eye Drops								
775	10.Neosporine+Hydrocortisone Oint								
776	11.Neomycine+Betamethasone Eye Drops								
777	12.Carboxymethylcelluse Eye drop								
778	13.Sodium Chromoglycate Eye Drops	2%w/v							
779	14.Pilocarpine Eye Drops 2%	0.02							
780	15.Timolol Maleate Eye Drops	0.5%w/w							
781	16.Brimonidine Eye Drops	2mg/ml							
782	17.Latanoprost Eye Drops	50mcg/ml							
783	18.Povidone +Polyvinyl Alchohol Eye drop								
784	19.Moxifloxacin Eye drop	0.005							
785	20.Moxifloxacin +Loteprednol	0.5%w/w+0.5%w/w							
786	21.Tropicamide+ Phenylephirine Eye Drops	0.8%+5%							
787	22.Hydroxypropyl Methylcellulose gel	0.3%w/w							
788	23.Hydroxypropyl Methylcellulose Eye Drop	3mg/ml							
789	24.Sod.carboxymethylcellulose Eye Drop	5mg/ml							
790	25.Carboxymethylcellulose+Oxychlorocomplex	10mg +0.075mg							
791	26.Olapatadine Eye Drop	0.001							
792	27.Proparacin Eye Drop	0.00005							
793	28.Nephazolin +CPM Eye Drop								
794	29.Besifloxacin Opthalic Susp	0.006							
795	30.Brinzolamide Eye Drop	1%w/w							
796	31 Any Other Product of This Category .								
	V. ENT /DENTAL PREPARATIONS								
797	01.Ginkobiloba Extract tabs	40mg							
798	02.Xylometazoline Nasal drops	0.5mg/ml							
799	03.Xylometazoline Nasal Drops	1%/ml							
800	04.Hydrocortisone +Nephazolin Nitrate	0.02%+0.025%							
801	05.Any Other Product of This Category .								
802	06.Cholin Salicylate + Cetalkonium Chloride gel	8.7%+0.01%							
803	07.Chlorohexidien Gluconate + Chlorobutol	0.1%+0.50%							
804	08.Triamcinolone Oral gel								
805	09.Chlorohexidien Mouth Wash	100ml							
806	10.Tannic Acid Gum Paint								
807	11.Camphor+Chlorbutol+Eucllyptus Oil+Terpineol	25+5+125+55mg							
	W. MISCELLANEOUS								
808	01.Alendronic Acid	35mg							
809	02.Alendronic Acid	70mg							
810	03.Azathioprine	50mg							
811	04.S-Adenosyl/L-Methionine	200mg							
812	05.Febuxoatate Tab	40mg							

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
813	06.Human Erythropoietin Inj.	2000 IU							
814	07.Human Erythropoietin Inj.	4000 IU							
815	08.Human Erythropoietin Inj.	5000 IU							
816	09.Ibandronate Tab	150mg							
817	10.Nicoumalone Tab	1mg							
818	11.Nicoumalone Tab	2mg							
819	12.Nicoumalone Tab	3mg							
820	13.Piracetam Tab	400mg							
821	14.Piracetam Tab	800mg							
822	15.Raloxifen Tab	60mg							
823	16.Allupronil	100mg							
824	17.Alfuzocin	10mg							
825	18.Orlistat	60/120mg							
826	19.Cabergolin	0.25gm							
827	20.Nitrofuradention	50mg/100mg							
828	21.Calcipotriol	0.005%.							
829	22.Nicotinic Acid	500mg							
830	23.Acetyl cysteine	600mg							
831	24.Quinapril Hydrochloride	10mg							
832	25.Darifenacin	7.5mg/15mg							
833	26.Balsalazide	750mg							
834	27.Alpha Ketoanalogue	67mg /101mg							
835	28.Risedronate Sodium	35mg							
836	29.Colchicine tab	0.5mg							
837	30.Bicalutamide Tab	50mg							
838	31.Entecavir	0.5mg/1mg							
839	32.Ketosteril								
840	33.Locosamide	50mg							
841	34. Alfuzocin+ Dutasride	10+05mg							
842	35.Hylane -G-F-20 Inj								
843	36.Ganabeuron+Nortriptyline	400+10mg							
844	37. Hyaluranidase Inj	1500 IU							

NAME OF THE COMPANY/ MANUFACTURER:

NAME OF THE DISTRIBUTOR:

TENDER FORM NO:

EARNEST MONEY DD No.....Dated.....

Annexure-IV

(PLEASE SEE S.No.07 OF THE GENERAL TERMS & CONDITIONS)

Unit Pack Size (U.P.S.) = e.g. Strip of 10, bottle of 60/100ml

Net Pack Price (N.P.P.) = e.g. cost of strip of 10, bottle of 60/100ml

Net Rate/Unit = e.g. cost of one tab/cap/1ml

Please quote the price of Net rate/unit is not more then two decimals e.g. 0.0

S.No.	NAME OF THE DRUG	STRENGTH	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	X. PREFERRED/BRAND SPECIFIC DRUGS							
845	Genteal Eye Drop		Novartis					
846	Genteal Eye Gel		Novartis					
847	Tab Asomex-2.5		Emcure					
848	Tab Polaramine		MSD					
849	9 PM Eye Drop		Cipla Ltd					
850	Novanac Eye Drop		Alchon					
851	Systan Ultra Eye Drop		Alchon					
852	Otrivin Nasal Drop		Novartis					
853	Inj Architol		Solvey					
854	Soliwax Ear Drop		Nulife					
855	Bifilac Sachet		Tablet India					
856	Tab Vertin-8/16mg		Solvey					
857	Combigen Eye Drp		Allergan					
858	Tab Pulmoclear		Fourrts					
859	Volitra-MR		Ranbaxy					
860	Sofracort Ear Drop		Aventis					
861	Tab Zyloric		GSK					
862	Travatan Eye Drop		Alchon					
863	Refresh Tear Eye Drop		Allergan					
864	Refresh Tear Liq Gel		Allergan					
865	Pataday Eye Drop		Alchon					
866	Tab Azoran-50		RPG					
867	Tab Diclomol		Win Medicare					
868	Tab Gabaneuron		Aristo Pharma					
869	Tab Epilex Chrono-200/300/500		Abbott Pharma					
870	Tab Primolute-N		Cadila(GR)					
871	Tab Lasilactone		Aventis					

S.No.	NAME OF THE DRUG	STRENGTH	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
872	Tab Eption-100		Abbott Pharma					
873	Tab Amlodec-5		Cadila Zydus					
874	Tab Amtas-AT		Intas Pharma					
875	Tab Valtum Plus		Intas Pharma					
876	Tab Eslo-5		Zuventus					
877	Inj Eporise-4000		Zuventus					
878	Tab Prelogic		J&J					
879	Tab Olmat-20mg		Micro Lab					
880	Tab Arbutal-40mg		Micro Lab					
881	Tab Dolonex-DT		Pfizer Ltd					
882	Tab Minipress XL-2.5/5mg		Pfizer Ltd					
883	Tab Tegretol-200/CR		Novartis					
884	Tab Rozat-10/20mg		Dr Reddy Lab					
885	Tab Atocor-10/20mg		Dr Reddy Lab					
886	Tab Betacard-50		Torrent Pharma					
887	Tab Euglim-1/2mg		Bayer					
888	Vegamox Eye Drop		Alchon					
889	Tab Ecosprin-75/150		USV Ltd					
890	Tab Losar-50/H		Unichem					
891	Tab Deplett-A		Torrent Pharma					

Total 47 Brands

NAME OF THE VENDER:

Annexure-V

TENDER FORM NO:

EARNEST MONEY DD No.....Dated.....

Please quote the price of Net rate/unit is not more then two decimals e.g. à 0.00

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
	Y. DRESSING MATERIAL AND GENERAL ITEMS								
893	01.Adhesive Plaster	4"x5 mtrs							
894	02.Adhesive Plaster (Micropore)	1' & 2"							
895	03.Bandage	5cm x 4 mtrs							
896	04.Bandage	7.5cm "x 4 mtrs							
897	05.Bandage	10cm x 4 mtrs							
898	06.Bandage	15cm x 4mtrs							
899	07.Cotton roll	100gm							
900	08.Cotton Roll	300gm							
901	09.Calamine Lotion	400ml							
902	10.Calamine Lotion	100ml							
903	11.Insulin Needles (BD)								
904	12.Insulin Syringes (Dispovan)	40 IU							
905	13.Insulin Syringes (Dispovan)	100 IU							
906	14.Disposable Syringes (Dispovan)	2 ml							
907	15.Disposable Syringes (Dispovan)	5 ml							
908	16.Disposable Gloves	6.5 & 7.5 No							
909	17.Sterlized Golves (Surgicare/Dial)	6.5 & 7.5 No							
910	18.E.C.G.Rolls (Manual/Automatic)								
911	19.E.C.G.Jelly								
912	20.Gauge (ISI Mark)	90cmx18mtrs							
913	21.Gention Violet	25ml/400ml							
914	22.Hydrogen Peroxide Liquid	400ml							
915	23.Icthyl Belladona Glycerine	400ml							
916	24.I.V. Set (HMD)	one							
917	25.Mercurochrome Lotion (Small /Large)	30ml/400ml							
918	26.Mag.Sulf.Paste	400gm							
919	27.Scalp Vein Set	Nos							
920	28.Ultrasound Jelly								
921	29.Water for Injection (Amp)	Amp							
922	30.Potassium Permagnate	400gm							
923	31.Borax Glycerin	25gm							
924	32.Borax Glycerine	400gm							
925	33.Surgical Blade								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
926	34.Glycerine Pure	400gm							
927	35.WoodenTonge Depressor								
928	36.Macantosh Sheet	Meter							
929	37.Wax	Kg							
930	38.Bandaaid	One							
931	39.Medicated siprit	400/450ml							
932	40.Dettoll	1000ml							
933	41.Savlon	1000ml							
934	42.Silver Sulphadiazene Cream	250gm							
935	43.Sumag								
	Z-RAY FILMS								
936	1. X-Ray Film	8"x10"							
937	2. X-Ray Film	12"x10"							
938	3. X-Ray Film	12"x15"							
939	4. X-Ray Film	14"x14"							
940	5. X-Ray Film	14"x17"							
941	6. X-Ray FILM (Dental)	****							
942	7. Developer Manual	13.50 ltr							
943	8. Developer Auto Processor	13.50 ltr							
944	9. Fixer Manual	13.50 ltr							
945	10. Fixer Manual Auto Processor	13.50 ltr							
946	11. Any Other Product of this category								
	AA. CHEMICALS & GLASSWARE								
947	1. Glucose								
948	2. Urea Kinetic								
949	3. Urea Berthlot								
950	4. Creatinine								
951	5. Uric Acid								
952	6. Cholesterol								
953	7. Triglyceride								
954	8. HDL-Cholestrol								
955	9. Bilirubin Total								
956	10. Bilirubin Direct								
957	11. Glycoselated Hemoglobin								
958	12. Alkaline Phospatase								
959	13. S.G.P.T.								
960	14. S.G.O.T								
961	15. S.Calcium								
962	16. C.R.P.								
963	17. R.A. Factor								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
964	18. R.P.R.								
965	19. T3/T4/TSH								
966	20. Preg. Strip								
967	21. HBsAg Strip								
968	22. Widal Slide								
969	23. Leishmain Stain								
970	24. Acetone								
971	25. Acetic Acid Glacial								
972	26. Barium Chloride Sol. 10%								
973	27. E.D.T.A. Vial								
974	28. Sodium Chloride								
975	29. Benedict Reagent								
976	30. Hydrogen Peroxide								
977	31. Uristic								
978	32. Multistic								
979	33. Litmas Paper								
980	34. PH Paper								
981	35. Filter Paper								
982	36. Micro Tips Yellow								
983	37. Micro Tips Blue								
984	38. ESR Tube								
985	39. Glass Marking Pen								
986	40. Cover Slip								
987	41. Slide Box								
988	42. Test Tube								
989	43. D/Water								
990	44. Esr Tube For Analyzer								
991	45. Urine Container Sterlized								
992	46. Fouchet's Reagent								
993	47. Hydrochloric Acid N/10								
994	48. Immersion Oil								
995	49. Lugol's Iodine								
996	50. Platelet Counting Fluid								
997	51. Sodium Citrate Solution3.8%								
998	52. Sodium Hypochlorite Solution								
999	53. Tissue Roll								
1000	54. Thermal Paper Roll 57mm								
1001	55. Micropipette Fixed Volume								
1002	56. Micropipette Variable Volume								
1003	57. Blood Lancet								
1004	58. Blood Lancet For Glucometer Pen								
1005	59. Glucometer Strip								

S.No.	NAME OF THE DRUG	STRENGTH	BRAND NAME	MFG. COMPANY	MARKT. COMPNAY	U.P.S.	N.P.P.	NET RATE/UNIT	VAT
1006	60. Any Other Product of this category								
	AB. DENTAL MATERIALS								
1007	01.Silver Ionomer Restorative Material 3M								
1008	02.Silver reinforced Glass Ionomer Material 3M								
1009	03.Local Anaesthesia								
1010	04.Suction Tips								
1011	05.G.P. Points (15-40)								
1012	06. Temp Filling Material already mix								
1013	07.K-files (15-40)								
1014	08.H-files (15-40)								