

Govt. Medical College and Hospital Nagpur

शासकीय वैद्यकीय महाविद्यालय व रुग्णालय, नागपूर
औषधीभांडार विभाग

Quotation Enquiry

Ref No.MCHN/Medical Stores/Recall Quot/ -511- /24.

Dt. 07/06 /2024.

To,

**Subject: - Quotation Enquiry for "SUPPLY OF MEDICINE ITEMS"
for Medical Stores .**

This is to inform you that the Quotation, for the medicinal items list is attached herewith, you are requested to send the rate of each item in properly sealed cover envelope by **registered A/D or by hand** to medical store department, Government Medical College & Hospital Nagpur during working hour on or before **21/06 /2024** at 5.00pm, quoting our reference in the envelope for your convenience. The copy of medical items list can be used to fill the rate in typewritten or printed form. No handwritten quotation will be accepted.

IMPORTANT

- 1) This quotation is valid for
 - a) Medical Store, Government Medical College & Hospital, Nagpur.
 - b) Medical Store, Super Speciality Hospital of Government Medical college, Nagpur.
 - c) MJPJY, Government Medical College & Hospital, Nagpur.
 - d) MJPJY, Super Speciality Hospital of Government Medical College & Hospital, Nagpur.
- 2) **No handwritten quotation will be accepted.**
- 3) In a separate envelope along with the quotation submit attested photocopies of GSTIN No. Shop Establishment, Drug Licenses, Income Tax, PAN Card etc. (New Suppliers)
- 4) **Quote rate for Single Unit only.**
- 5) This Quotation is for Local Supplier only i.e. Nagpur Only (Outside Nagpur District Quotation will be Rejected).

OUR TERMS AND CONDITIONS: -

1. You may quote rates for any number of the specified items in the accompanying table.
Do not change the given specifications of items.
2. Rates quoted should be valid for a period of Six Month after opening by the QCAC Committee, GMCH, Nagpur.
3. The rates quoted should be inclusive of all Taxes, , Packing and forwarding charges etc. door delivery to, Medical Stores, GMC OR GMC & Super Speciality Hospital of Government Medical College, Nagpur.
4. You should clearly specify in your quotation as to with whom the supply order is to be placed (i.e name of supplier/stockiest/distributor-as the case may be) if your quotation is accepted.
5. The supply of goods will have to be made within 10 days from the date of our office order. The ordered quantity will have to be supplied in one single consignment.
6. Supplied goods must be of standard quality as approved by the FDA.
7. Goods should have expiry date at least one year after the date of supply.
8. Your invoice and challan should have the certification that, the drug supplied under this challan & Invoice are of required pharmacopieal standard and any defect found in future shall be sole responsibility of supplier.
9. Improperly sealed quotations will not be considered
10. This office reserves the right to cancel the order at any time without giving any reason what to ever.


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Govt. Medical College & Hospital,
Nagpur

Enclosures: - Drugs List attached.

| GOVERNMENT MEDICAL COLLEGE AND HOSPITAL, | | | |
|---|----------------|---|---------------------------|
| DRUG LIST for Recall Quotation - 2024 | | | |
| DRUG CODE | SR. NO. | NAME OF DRUG / MEDICINE / ITEM | Rate per Unit Item |
| TABLETS and ORAL UNIT DOSAGE FORM | | | |
| Antibiotics | | | |
| 1 | 1 | Cap. D-Penicillamine 250mg | |
| Antiviral | | | |
| 2 | 1 | Tab. Acyclovir 800mg | |
| Other Drugs | | | |
| 3 | 1 | Tab. Chlorzoxazone 250 mg | |
| 4 | 2 | Tab. Eltroxin 25ug | |
| 5 | 3 | Tab. Medroxy Progesterone Acetate 5mg | |
| 6 | 4 | Tab. Misoprost 200mg | |
| 7 | 5 | Tab. Neomercazole 5mg | |
| 8 | 6 | Tab. Buprenorphine 2 mg Sublingual Tablet | |
| 9 | 7 | Tab. Buprenorphine 4 mg Sublingual Tablet | |
| 10 | 8 | Tab. Buprenorphine 8 mg Sublingual Tablet | |
| 11 | 9 | Tab. Dapsone 100mg | |
| 12 | 10 | Tab. Isoprinosine 500mg | |
| 13 | 11 | Tab. Morphine 15mg | |
| 14 | 12 | Tab. Nicotinamide 250mg | |
| 15 | 13 | Tab. Trypsin + Chymotrypsin 100,000AU (Chymarol Forte Like) | |
| 16 | 14 | Tab. Trypsin 96mg + Bromelain 180mg + Rutoside Trihydrate 200mg (Disperzyme Like) | |
| Analgesic and Antipyretics | | | |
| 17 | 1 | Tab. pregabalin with methylcobalamine 300mg | |
| 18 | 2 | Tab. Thiocolchicoside 4mg | |
| Anti-Allergic | | | |
| 19 | 1 | Tab. Levocitrizine 10mg | |
| Antihypertensive AND Other Cardiac Drugs | | | |
| 20 | 1 | Tab. Labetalol 100mg | |
| Sickle Cell Drugs | | | |
| 21 | 1 | Tab. Sodium Bicarbonate 1gm | |
| Psychiatric Medicines | | | |
| 22 | 1 | Tab. Clozapin 50mg | |
| 23 | 2 | Tab. Escitalopram 10mg | |
| 24 | 3 | Tab. Lithium Carbonate 300mg | |
| 25 | 4 | Tab. Lorazepam 0.5mg | |
| 26 | 5 | Tab. Trifluoperazine 5mg | |
| Injections | | | |
| Antibiotics & Antimicrobials | | | |
| 27 | 1 | Inj. Amphotericin B 50mg Lyophilised Liposomal | |
| Antihypertensive and Cardiac Agent | | | |
| 28 | 1 | Inj. Clonidine | |

| | | | |
|----------------------|---|--|--|
| 29 | 2 | Inj. Diltiazem 0.5% (5mg/ml) | |
| 30 | 3 | Inj. Xylocard (Lignocain 21.3mg + Sodium Chloride 0.6mg for cardiac use) | |
| | | Psychiatric Medicines | |
| 31 | 1 | Inj. Lorazepam 4mg | |
| | | Vitamins | |
| 32 | 1 | Inj. Vit. D3 60000 IU | |
| | | Steroids | |
| 33 | 1 | Inj. Methyl Prednisolone Sodium Succinate 40mg Depot Preparation | |
| | | Coagulant, Anticoagulant and Blood Related Agents | |
| 34 | 1 | Inj. Hyaluronidase 1500 IU Ampule | |
| | | Misscelenious | |
| 35 | 1 | Inj. Denosumab 60mg | |
| 36 | 2 | Inj. Teriparatide 750 mcg | |
| | | Anaesthetic and Muscle Relaxants | |
| 37 | 1 | Inj. Loxicard (IV Lignocaine) 2% (Without Preservative) | |
| 38 | 2 | Inj. Ropivacaine 0.2% | |
| 39 | 3 | Inj. Ropivacaine 0.75% | |
| | | Vaccines and Antisera | |
| 40 | 1 | Inj. Anti Thymocyte Globulin 25mg Vial | |
| 41 | 2 | Inj. H. Inflenza B Vaccine | |
| 42 | 3 | Inj. Haemophilus Influenza type B Vaccine, Diphtheria, Tetanus, Pertussis conjugate vaccine (Adsorbed) | |
| 43 | 4 | Inj. Haemophilus Influenza Type B 0.5ml Syringe (Inactivated Influenza Vaccine) | |
| 44 | 5 | Inj. Rabies Antiserum 1500IU/5ml Vial IM/SC | |
| 45 | 6 | Inj. Tetanus Immunoglobuline 250 IU Vial | |
| 46 | 7 | Inj. Tetanus Immunoglobuline 500 IU Vial | |
| | | Coagulant, Anticoagulant and Blood Related Agents | |
| 47 | 1 | Inj. Anticoagulant 2 ml (Tissel kit) | |
| 48 | 2 | Inj. Haemostatic Matrix in Syr (Flo seal) 5 ml | |
| | | Contrast Media | |
| 49 | 1 | Indo Cyanine Green Dye (ICG) Sterile Powder 25 mg Lyophilized | |
| 50 | 2 | Inj. Non Ionic Contrast Media Iohexol 300mg/ml 100ml Vial | |
| 51 | 3 | Inj. Non Ionic Contrast Media (Iohexol OR Any other Brand with same Specification) 350 mg 500 ml | |
| 52 | 4 | Inj. Trepine blue Dye Ampule | |
| | | Narcotics | |
| 53 | 1 | Inj. Buprenorphine 0.3mg (Buprigesic 2 ml Amp) | |
| 54 | 2 | Inj. Ketamin 50mg/ml 10ml Vial | |
| 55 | 3 | Inj. Fentanyl 50mcg/ml, 10 ml Amp | |
| 56 | 4 | Inj. Fentanyl 50mcg/ml, 2 ml Amp | |
| DISINFECTANTS | | | |

| | | | |
|--------------------------------------|----|---|--|
| 57 | 1 | Cetrimide 2% 100ml Bottle | |
| 58 | 2 | Chlorhexidine Gluconate (Saniguard M20) | |
| 59 | 3 | Sod. Perborate Mono Hydrate 810gm | |
| TOPICAL/ SKIN PRODUCTS | | | |
| 60 | 1 | Fentanyl Transderman patches 25 Mcg & 50 mcg (Release per hour) | |
| 61 | 2 | Fluocinolone Acetonide 0.025% | |
| 62 | 3 | Fluocinolone Acetonide Cream High Strenght (Flucort H 30gm Cream) | |
| 63 | 4 | Fusidic Acid + Mupirocin 2% | |
| 64 | 5 | Permethrine Cream/Lotiuon 5% | |
| LIQUID ORALS | | | |
| 65 | 1 | Paracetamol Drop 1mg/100mg | |
| 66 | 2 | Syrup Ferrous Sulphate 80mg/5ml | |
| 67 | 3 | Syrup Ibuprofen 100mg/5ml | |
| 68 | 4 | Syrup Levetiracetam 100mg/ml | |
| ENT and OPTHALMIC PRODUCTS | | | |
| 69 | 1 | Adapelen and Clindamycin Gel | |
| 70 | 2 | Chloramphenicol + Polymyxin B + Dexamethasone Eye Ointment | |
| 71 | 3 | Clobetasone Proprionate Ointment | |
| 72 | 4 | Moxifloxacin + Prednisolone Eye Drop | |
| 73 | 5 | Neosporin with Hydrocortisone Ear Drops 10ml | |
| 74 | 6 | Povidone Iodine (betadine) Eye Drop 5% | |
| 75 | 7 | Povidone Iodine (Betadine) Gargles | |
| 76 | 8 | Sodium Chloride 6% Eye Ointment (Hypersol Like) | |
| 77 | 9 | (Botroclot Like) Nasal Dops 10ml | |
| 78 | 10 | Tropicamide 0.8% + Phenylepherine 5% Eye Drop | |
| 79 | 11 | Xylocaine 10% Spray | |
| INHALATION ANAESTHETIC AGENTS | | | |
| 80 | 1 | Desflurane 240 ml Bottle | |
| RESPIRATORY PRODUCTS | | | |
| 81 | 1 | Beclomethasone 200mcg Inhaler (200 Doses) | |
| 82 | 2 | Mometasone furoate Nasal Spray | |
| New Drug | | | |
| 83 | 1 | Inj. N-Butyl Cyanoacrylate 0.5ml | |
| 84 | 2 | Lactobacillus Sachet | |


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