Govt. Of Maharashtra

Chhatrapati Pramila Raje General Hospital, Kolhapur - 416002.

Mahatma Jyotiba Phule Jan Aarogya Yojana.(Rajiv Gandhi Jeevandayee Aarogya Yojana.)

Tel: (0231) 2641583 cprmedstore@gmail.com Medical store : (0231) 2641326

By Regd. A.D / U.P.C.

No. CPRGHK/MJPJAY/ 495 / 2019 Date : 03/08/2019

To,

M/s. ----------

Subject :- Quotation Call For CVTC MJPJAY – TABLET AND CAPSUL

Reference :- As per Sanctioned Notesheet Date :- 15 / 07 /2019.

Please arrange to give your lowest possible rate for the items mentioned below.

Sr. No.	Name of Item / Drug / Medicine	Pack Size	MFG By	MRP	Quotated Rate Per Unit
1	Cap. Amoxycillin 500mg	1Strip x10 Caps.			
2	Cap. Doxycycline 100mg	1Strip x10 Caps.			
3	Cap. Indomethacin 25mg	1Strip x10 Caps.			
4	Cap. Itraconazole 200 mg	1Strip x10 Caps.			
5	Cap. Nifedipine 5 mg	1Strip x10 Caps.			
6	Tab. Acetazolamide 250mg	1Strip x10 Tabs.			
7	Tab. Acetyl Salicylic Acid-150 mg (Asprin /Ecosprin)	1Strip x14 Tabs			
8	Tab. Acetyl Salicylic Acid-75 mg (Asprin /Ecosprin)	1Strip x14 Tabs			
9	Tab. Alprazolam - 0.5 mg	1Strip x10 Tabs.			
10	Tab. Amox 500 + Clav.125 (625 mg)	1Strip x10 Tabs.			
11	Tab. Atorvasatin 80mg	1Strip x10 Tabs.			
12	Tab. Atorvastatin - 20 mg	1Strip x10 Tabs.			
13	Tab. Atorvastatin - 40 mg	1Strip x10 Tabs.			
14	Tab. Bisacodyl - 5 mg (Dulcolax)	1 x100 Tabs.			
15	Tab. Cefixime 200 mg	1Strip x10 Tabs.			
16	Tab. Cefuroxime 500 mg	1Strip x10 Tabs.			
17	Tab. Cilostazole 100 mg (Stiloz Type)	1Strip x10 Tabs.			
18	Tab. Cilostazole 50 mg (Stiloz Type)	1Strip x10 Tabs.			
19	Tab. Clopidogrel - 75 mg	1Strip x10 Tabs.			
20	Tab. Diclofenac Sodium - 50 mg.	1Strip x10 Tabs.			
21	Tab. Diltiazem 30 mg	1Strip x10 Tabs.			
22	Tab. Dispersible Acetyl Salicylic Acid 150mg (Disprin Type)	1Strip x10 Tabs.			

23	Tab. Doxifylline 200mg	1Strip x10 Tabs.			
24	Tab. Frusemide 20mg+ Spiranolactone50mg (Lasilactone Type)	1Strip x10 Tabs.			
25	Tab. Gasex	1x100 Tabs.			
26	Tab. Griseofulvin - 250 mg	1Strip x10 Tabs.			
27	Tab. Imipramine - 25 mg (IMI)	1Strip x10 Tabs.			
28	Tab. Ivabradine 5 mg	1Strip x10 Tabs.			
29	Tab. Levitiracetam 250 mg	1Strip x10 Tabs.			
30	Tab. Levofloxacin 500 mg	1Strip x10 Tabs.			
31	Tab. Levosalbutamol – 2 mg	1Strip x10 Tabs.			
32	Tab. Linezolid 600 mg	1Strip x10 Tabs.			
33	Tab. Liv 52	1x100Tab			
34	Tab. Losartan - 50 mg	1Strip x10 Tabs.			
35	Tab. Mebendazole	1Strip x10 Tabs.			
36	Tab. Metoclopramide (Reglan type)10mg	1Strip x10 Tabs.			
37	Tab. Metoprolol XL 25 mg	1Strip x10 Tabs.			
38	Tab. Metoprolol XL 50 mg	1Strip x10 Tabs.			
39	Tab. Nicorandil 5 mg	1Strip x10 Tabs.			
40	Tab. Nifedipine SR - 10 mg	1Strip x10 Tabs.			
41	Tab. Nifedipine SR - 20 mg	1Strip x10 Tabs.			
42	Tab. Nitrofurantoin 50mg	1Strip x10 Tabs.			
43	Tab. Nitroglycerine – 2.6 mg	1Strip x10 Tabs.			
44	Tab. Norfloxacin 400mg + Tinidazole 600mg	1Strip x10 Tabs.			
45	Tab. Ofloxacin - 200 mg (Oflox)	1Strip x10 Tabs.			
46	Tab. Ondansetron 4.8mg	1Strip x10 Tabs.			
47	Tab. Pancreatin 150mg (Creon type)	1Strip x10 Tabs.			
48	Tab. Pantaprozole - 40 mg	1Strip x10 Tabs.			
49	Tab. Propranolol (Inderal) 40mg	1Strip x10 Tabs.			
50	Tab. Propranolol 10 mg	1Strip x10 Tabs.			
51	Tab. Propranolol 20 mg	1Strip x10 Tabs.			
52	Tab. Rabeprazole 20 mg	1Strip x10 Tabs.			
53	Tab. Ramipril hydrochloride 2.5 mg	1Strip x10 Tabs.			
54	Tab. Refaximin (Rifagut) 550mg	1Strip x10 Tabs.			
55	Tab. Roxithromycin 150mg	1Strip x10 Tabs.			
56	Tab. Salbutamol 2mg	1Strip x10 Tabs.			
57	Tab. Salbutamol 4mg	1Strip x10 Tabs.			

58	Tab. Spiranolactone 25mg	1Strip x10 Tabs.			
59	Tab. Telmisartan 40 mg	1Strip x10 Tabs.			
60	Tab. Torsamide 10+ Spironolactone 50	1Strip x10 Tabs.			
61	Tab. Trihexyphenidyl (Pacitane) 2 mg	1Strip x10 Tabs.			
62	Tab. Pnakreoflat	1Strip x10 Tabs.			
63	Tab. Olenzepine 5mg	1Strip x10 Tabs.			
64	Tab. Sertraline 50mg	1Strip x10 Tabs.			
65	Tab. Fluxetine	1Strip x10 Tabs.			
66	Tab. Clozapine 50mg	1Strip x10 Tabs.			

Terms & Condition as follows:-

1. Rate should be inclusive of all taxes, Inclusive with GST.
2. Delivery period should be within 10 days from the date of confirm order otherwise the order should be Treated as cancelled
3. Material in good condition as per the specification required by the respective department.
4. Inspection – By HOD CVTC / Cathlab/ Respective User Department .
5. Attach Xerox copy of PAN, GST & FDA Drug Licence with attested .
6. All rights are preserve in favour of The Dean , C.P.R. Hospital,Kolhapur.
7. Don't Quoate Rates of other items except above mention .Dont miss serial of above list.
8. Organisation/ Distibutor Require Authorization letter for submission of the quatation.
9. Submit printed quotation on own letter head with duly signed and stamped . Hand written quotation will be rejected.
10. Packing or Before Date :- 13/08/2019 **Upto 4.00 Pm** positively forwarding freight should be
11. Sealed Quotations should reach this office i.e. on/before **MAHATMA JYOTIBA PHULE JAN AAROGYA YOJANA, OLD FMT BULDING C.P.R.HOSPITAL , KOLHAPUR** Dt.:- 13/08/2019 **Upto 4.00 pm.**

Dean, 2/8/19
C. P. R. General Hospital,
Kolhapur.