महाराष्ट्र शासन

Chhatrapati Pramila Raje General Hospital, Kolhapur (Surgical Store)

Tel: (0231) 26413	326	cprmedstore@gmail.com	Fax: (0231) 2645279			
CPRGHK/SS/	74	/ 2010	Date: 10/01/2020			

Subject: Quotation for CVTC CATH LAB Dept. (Quotation No. 105)
Reference: As per Requirment consion Department

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

SR.	NAME OF ITEMS	MRP	Rate Per Unit		SR.	NAME OF ITEMS	MRP	Rate Per Unit
1	ADHESIVE TAPE	-11148	39018	4.4	19	PRESSURE MONITOR LINE M/F 200 CM	ic GUIDE a rua a a	LIATOM WAYAN
2	ASD DEVICE WITH KIT	312 15	873	78	20	PTCA WIRE CROSS IT 100 190 CM		0.0.01
3	BIVALVE (3 WAY CONNECTOR)	SALLY! SARON	4AVA)	ma la	21	PTCA WIRE CROSS IT 200 190 CM	130	The in
4	CHEST LEAD	EAS IAS	ni Nazas	23	22	PTCA WIRE BMW 190 CM	0-13	MERSM
5	CIDEX INDICATOR	MO BAR JAI	HIA DM3	142	23	PTCA WIRE RUNTHROUGH NS FLOPPY 180 CM		Šinow.
6	CTO BALLOON 1.0 X 10mm , 1.25 x10mm, 1.5x10mm	CNE SBASKE	HTA	H2	24	PEDIATRIC 4 FR SHEATH (AVANTY TYPE)	(01 39A (0100 0)	MO MO
7	CAROTID STENT	Mana e in			25	PERIPHERAL BALLOON		260 09
8	DISPO MASK	Dani Life			26	PERIPHERAL STENT		SIZES
9	DISPO APRON	DAIW O	MOAT	10	27	PDA DEVICE WITH KIT	32 aba	THRO
10	DYNAPLAST				28	RENAL STENT	0-5	MUST
11	DISPO NEEDLE 26.5,				29	SURGICAL BLADE NO. 23	W 30N3	1027
12	DISPO NEEDLE 21				30	SYRINGES LUERLOCK 2CC		
13	DISPO NEEDLE 22	Jahese	Llanon		31	SYRINGES LUERLOCK 5CC	2218-968	94
14	DISPO NEEDLE 23				32	SYRINGES LUERLOCK 10CC	olla	
15	EXTENSION 10 CM	not bas	noti b	anoin	33	SYRINGES LUERLOCK 20CC	olout i	6
16	ETO PAPER 10,12, 25cm X200 M		1 121	907	34	SYRINGES LUERLOCK 50CC	rf Jeum mad Sa	
17	FEMORAL SHEATH 7 FR 11 CM (AVANTY TYPE)	ib bago	heford menti if Post	yodi		SURGICAL BLADE NO. 11		

SR.	NAME OF ITEMS	MRP	Rate Per Unit		SR.	NAME OF ITEMS	MRP	Rate Per Unit
36	GRAFT STENTS		Ont	(83	50	SCORFEX BALLOON		
37	IV INFUSION SET	رهردر	(b)	(A)	51	4 F PEDIATRIC DIAGNOSTIC JR PIGTAIL NIH		0990
38	IV CANNULA NO. 20		o langer	noi	52	5 F DIAGNOSTIC JL, JR, PIGRAIL		
39	IVC FILTER	21VI3	11303	IMAI	53	6F DIAGNOSTIC JL, JR, PIGRAIL	ewati	O 3MAI
40	METALLIC GUIDE WIRE 150 CM J TIP 0.032 CM J	ONITO	URE M	8E1S 6/F 20	54	4 F MICROSNER	TAPE	икзна
41	MANIFOLD (WHITE)	1 220310	N SINA	90 C	55	8 F FEMORAL SHEATH 1: cm (AVANTY TYPE)	UANALE	NAG GE
41	RIGHT OFF		N	D De	56	6F, 7 F FEMORAL SHEAT		DIVINE
43		OFFITMU	A BRV	A)T	57	SHEATH / CIVI		ari Addi
	POLYDRAPE 100 CM X 150	0	ol 19	3145	58	6F FEMORAL PAEDIATR SHEATH 7 CM	ON 1 D X	11/A8 O1
	TERUMO GUIDEWIRE	(3	977 77	MAY/	59	4F MICRO BASKET	THE DLY CS	ma Cixe
	TYSHAK BALLOON ALL	O DAS	IA93h	MAN	6	0 6F VASCULAR SNEAR	VASTE NEED	BA UPICI
-	SIZES THROMBUS SUCTION CATHERER 6F	A HUM	301/3	G AI	6	6F PACING WIRE	RON	TA Ó GER
	8 VICRYL 2-0		JAM	81		124	YXXAPI	
	9 VSD DEVICE WITH KIT		12 93		EDI E 36	M (H2)		

Terms and Conditions:

- 1) All rights are reserved by The Dean, C.P.R. General Hospital, Kolhapur to reject any or all quotations without assigning any reason.
- Quote the lowest possible rates for above mentioned items and long Expire Date. Quotation must be given on suppliers letter head. Write the MRP per item and do not chang the sr.no. of item.
- 3) Sealed quotation should reach to this office on or before Date: 18 61/2010 up to 05-00 p.m. positively. Quotation received after above mentioned date and time will not be entertained. This office is not liable for any delay of Post Office or Courier Agency or at any other conditions.

- 4) If you failed to supply the material, after confirm order, the order will be diverted to next lowest rates provider and in this case the difference between first lowest and second lowest should be born by you.
- 5) The rates quoted should be inclusive of service Tax, excise duty, GST, Transportation, Insurance, packing and forwarding charges etc., but not include L.B.T. duty. Rates should be within the market rate limits and should not be more than M.R.P. at any circumstances. At any stage of the quotation process even after completion of the process if it is found that the rates mentioned are more than the M.R.P., the supplier is responsible for refund the difference with interest to this office.
- 6) Attach the self attested photo copies of PAN Card, GST Registration Certificate, Shop Registration Certificate (Shop Act License etc.) or any other registration certificate necessary for operating your business.
 - 7) Sample approved by HOD CVTC CATHLAB
- 8) Please superscript the envelope with "QUOTATION FOR THE CVTC CATHLAB" Quo tatim No.

Dean, Chhatrapati Pramilaraje General Hospital, Kolhapur.

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Professor And H.O.D., Dept. of P.S.M. and President,
Website Development Committee, C.P.R. Hospital, Kolhapur.