

Govt. Of Maharashtra  
Chhatrapati Pramila Raje General Hospital, Kolhapur - 416002.

Dean Office: (0231) 2641583

cprmedstore@gmail.com

Medical Store : (0231 ) 2641326

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

No. CPRGHK/MS/No. 1400/2020

Date: 14/12/2020

To,

M/s-----

Subject :- Quotation Call for Injections.

Reference: - As per Sanctioned Note sheet Date :-

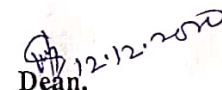
Please arrange to give your lowest possible rate for the items mentioned below.

Sr. No.	Name of Drug	Pack Size	Mfg by	MRP	Rate
1	Inj.Acetylcystein 1gm	1x5ml			
2	Inj.Adenosine	1x2ml			
3	Inj.ADS 10000 IU	1x1 ml			
4	Inj.Aminophylline	1x1 amp			
5	Inj.Amiodarone 150mg	1x3ml			
6	Inj.Anawin heavy (sensorcain type) 0.25% 5ml	1x4ml			
7	Inj.Anawin Heavy (sensorcain type)0.5%	1x1 vial			
8	Inj.Anti Rabies Serum 5ml 1500 IU	1x5 ml			
9	Inj.Anti Rabies vaccine ID	1x 0.5ml			
10	Inj.Anti Rabies vaccine ID	1x1ml			
11	Inj.Anti Rabies vaccine IM	1x1ml			
12	Inj.Artisunate 60mg	1x1 vial			
13	Inj.Atracurium Besylate	1X5ml amp			
14	Inj.Azithromycin 500mg	1x1 vial			
15	Inj.Caffein Citrate ( capnea type)	1x1ml			
16	Inj.Colistine 1miu	1x1 vial			
17	Inj.Dexmedetomidine 100mcg	1x2ml			
18	Inj.Dicyclomine HCL	1x2ml			
19	Inj.Digoxin 0.25	1x1ml Amp			
20	Inj.Diltiazem 5mg	1x 5ml			
21	Inj.Dobutamine 250mg	1x 5ml			
22	Inj.Ethamsylate 250mg	1x2ml			
23	Inj.Gentamycin 40mg	1x2ml			
24	Inj.Glycopyrrolate	1x1ml			
25	Inj.Haloperidol 5mg (Serenace)	1x1 amp			

26	Inj.Heparin 25000IU	1x5ml			
27	Inj.Heparin 5000IU	1x5ml			
28	Inj.Hepatitis B	1x10 ml			
29	Inj.Ismolol 10 mg/ml	1x1 vial			
30	Inj Etomidate 2mg/ml	1x1 vial			
31	Inj.Lignocain 2% 50ml (xylocard type)	1x1 vial			
32	Inj.Lorazepam 2mg	1x1 amp			

**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 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 Quotate Rates of other items except above mention .Dont miss serial of above list.
8. Submit printed quotation on own letter head with duly signed and stamped . Hand written quotation will be rejected.
9. Organisation / distributor require Authorisation letter foe submission of the quotation.
10. Packing or Before Date :- 17/12/2020 Upto 3.00 Pm positively forwarding freight should be
11. Sealed Quotations should reach this office i.e. CENTRAL MEDICAL STORE, KASARI BUILDING , C.P.R.HOSPITAL , KOLHAPUR on/before Dt.:- 17/12/2020 , Upto 3.00 pm.

  
 12.12.2020  
 Dean,  
 C.P.R.General Hospital,  
 Kolhapur.