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/ 496 / 2019 Date : 03/08/2019

To,
M/s. ----------

Subject :- Quotation Call For CVTC MJPJAY – I.V. AND OTHER

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	Calciferol Sachet	1Sachet			
2	Lactodex HFM SatCHET	1SATCHET			
3	Denatured Spirit	1 x 1 Lit			
4	Citrosteril solution 5 litre jar	1No.			
5	Glutaraldehyde 2% With Activator (Cidex-28Days)	1X5LTR			
6	KMNO 4 Powder	1X450GM			
7	Sodalime (JAR)	1X 5kg			
8	Cream framycetin 1%w/w (Soframycin type)	1X30 GM			
9	Enema Sodium phosphate Enema	1X100ML			
10	I.V. Amino Acid 10% (Aminoven type)	1X500ML			
11	I.V. Amino Acid 10% (Aminoven type)	1X100ML			
12	I.V. Ciprofloxacin	1X100ML			
13	I.V. D.N.S.	1X500ML			
14	I.V. Dextrose 25%	1X100ML			
15	I.V. Dextrose 5%	1X500ML			
16	I.V. Fluconazole 2MG	1X100ML			
17	I.V. Hydroxy Ethyl Starch 6%	1X500ML			
18	I.V. Levofloxacin	1X100ML			
19	I.V. Linezolid 200MG	1X100ML			
20	I.V. Mannitol 20%	1X100ML			
21	I.V. Metronidazole 0.5gm	1X100ML			
22	I.V. N.S. (Sodium Chloride 0.9%)	1X500ML			
23	I.V. N.S. (Sodium Chloride 0.9%)	1X100ML			
24	I.V. N.S.1/2(Sodium Chloride 0.45%)	1X100ML			
25	I.V. Ofloxacin 200mg	1X100ML			
26	I.V. plasmolyte (multiple eleektrolyte)	1X500ML			
27	I.V. Ringer Lactate	1X500ML			
28	I.V. Tirofiban 5mg	1 X 100ml			
29	I.V. Albumin 20 %	1x 100 ml			
30	I.V. N.S. 3% (Sodium Chloride)	1X100ml			
31	I.V. Paracetmol 1gm	1X100ml			
32	I.V. Total Parenteral Nutrition (TPN)	100ML			
33	Liquid Ammonia	1 X 500ML			
34	I.V. Dextrose 10%	1 X 500ML			
35	Diclofenace Gel	1 X 20 gm			
36	Oint Sliver sulphadizine	1 X 500 gm			
37	Glove Powder	1 X 500gm			
38	Jelly E.C.G.	1X250ML			
39	Jelly Lignocaine	1X30GM			
40	Jelly USG	1X250ML			
41	Liq. Halothane	1X250ML			

42	O.R.S.	1X21GM			
43	Ointment Betamethasone 0.10%w/w	1X15GM			
44	Ointment Thrombophob	1X30MG			
45	Permethrin Lotion 5%	1X30ML			
46	Povidine Iodine Ointment 5%w/w	1X15GM			
47	Povidine Iodine Scrub 7.5%	1X500ML			
48	Povidine Iodine Solution 10%	1X500ML			
49	Povidine Iodine Solution 5%	1X500ML			
50	Respules Acetylcysteine (Mucomix)	1X 1Respule			
51	Respules Ambroxol 15mg (Inhalex type)	1X 1Respule			
52	Respules Salbutamol (Asthalin)	1X 1Respule			
53	Solution Salbutamol Respiratory (Asthalin)	1X15 ml			
54	Syp. Amoxy+Clav. (Agumentine type)	1X30ML			
55	Syp. Ampiclline 125mg	1X60ML			
56	Syp. Antacid	1x200 ml			
57	Syp. Azithromycin 100mg	1X30ML			
58	Syp. Disodium hydrogen citrate (Cital type)	1x100 ml			
59	Syp. Co trimoxazole	1X50ML			
60	Syp. Cremaffin Plus	1x100 ml			
61	Syp. Kidrich D3 Drops 1000IU/ml	1X60ML			
62	Syp. Lactulose (Duphalac)	1X250ML			
63	Syp. Nitrofurantoin	1X100ML			
64	Syp. Paracetamol 120mg/5ml	1X60ML			
65	Syp. Phenobarbitone 20mg/5ml	1x 30 ml			
66	Syp. Vitamin D3 Drops	1x 15ML			
67	Syp.Dextromethorphan HBr ,Chlorpheniramine Maleate & Guaiphenesin (Cough Syrup)	1X100ML			
68	Syp.montair LC kid	1X60ML			
69	Oint Soframycine	1 X 100gm			
70	Sodium Hypochloride Slon (Medichlor)	1 X 5ltr			
71	Mgso4 Powder	1X 500gm			
72	Syp. Amoxicillin dry powder 125mg	1 X 60ml			
73	Oint. Silver sulphadizine	1 X 500gm			
74	Chlorhexidine Gluconate and Cetrimide (Savlon) 100ml	1x100ml			
75	Glutaldehyde OPA (Cidex Type) Jar -28 days	1 x 5lit			

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.**

2/8/19

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