

NO. GMCHN/Med Store/

3) M/s ____

GovernmentMedical College & Hospital, Nandurbar शासकीय वैद्यकीय महाविद्यालय व रुग्णालय, नंदुरबार.



27/01/2025

पत्ता : जिल्हा सामान्य रुग्णालय परिसर, साक्री रोड, नंदुरबार- 425412.

Website - htpp://gmchnandurbar.com

E -Mail:- deangmchnandurbar@gmail.com

Date:

То	
То,	
1) M/s	
2) M/s	

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Subject: Urgent Open Quotation notice - For supply of Medicines for treatment of patients at G.M.C.& H., Nandurbar For financial year 2024-2025.

/2025

Sir/Madam,

G.M.C.& H., Nandurbar invite quotations for supply of medicines/drugs for drug stores G.M.C.& H., Nandurbar from manufacturer/Dealer/chemist/ stockiest / drug supplier.

Detail drug list is enclosed. Interested parties can send their quotations.

- 1) Last date and time for submission of quotations & relevant documents : Dt. 06/02/2025 up to 6:00 Pm.
- 2) Place of submission: Dean Office, G.M.C.&H., Nandurbar.
- 3) Quotation open date :- 07/02/2025 (Tentative)

Terms & Conditions:

- a) Quotation should be sent in sealed envelope bearing quotation enquiry No. & should mention "Medicine Quotation for Financial year 2024-25" should be clearly written on envelope. Quotations should be addressed to "The Dean, G.M.C. & H., Nandurbar."
- b) Quotation should be send by post or by hand delivery to reach the office on or before Dt. 06/02/2025. 6:00 PM.
- c) Quotation received after due date & time will not be considered.
- d) Supply should be made within 15 days from the date of receipt of order.
- e) Rate quote only of strength mentioned in list, please don't change the strength.
- f) Quotation Validity is up to Dt. 31/03/2025.
- g) Quotation enquiry is available on institute website and in medical store.
- h) Quoted rates should be free door delivery of goods at G.M.C. & H., Nandurbar, premises only.
- i) Quoted rates should be inclusive of all taxes/GST.
- j) Goods should be of door delivery.
- k) The rates of the drug items must be submitted enclosed drug list on companies/ firm letter head along with rubber stamp/sealed of firm with signature on each page of list. (Only in Printed form)
- Supplied goods should be of good quality as per specification mentioned in IP/BP / USP standards.
- m) Quoted rates should be of per item (i.e. per tablet, per injection etc.)
- n) Defective goods, stopped used / samples for physician use will not be accepted and will be returned to the concerned firm. Such act may lead to the supplier getting black listed.

- o) Short expiry (up to 6 months) medicines will not be accepted.
- p) For accepted quotations it is mandatory for supplier to supply the goods within stipulated period, otherwise order will be treated as cancelled.
- q) The list of medicines for quotations is also displayed on this institute website gmcnandurbar.com supplier can be download the quotation from the website. No need to collect from medical store.
- r) All rights are reserved for Cancellation/Recall/Accept/Reject of quotation with the undersigned authority.

Documents to be submitted along with quotation rate list

The bidder would be required to submit following documents (self-attested Xerox copies) in order to qualify for the above quotations.

- 1) Valid drug license issued by competent authority.
- 2) Shop Act/Aadhar Udyam copy.
- 3) GST clearance certificate.
- 4) Copy of PAN card.
- 5) Bank details cancelled or Xerox copy of cheque, email address.
- 6) Undertaking for following on letter head that,
 - a) Bidder not currently under conviction under the drugs & cosmetics act 1940 for supplier of stated drug or any other ground he has been deregistered, debarred or black listed by any Govt. organization/institution / hospital in state or India.
 - b) Acceptance of all terms and conditions of quotation.
 - c) No conflict of interest with purchase department or its members or staff working in Medical store or involved in purchase.
- 7) Copy of all the above documents to be submitted, should be self-attested with rubber stamp of the firm.

Dean Government Medical College & Hospital, Nandurbar.

List of drugs is attached herewith, List Pg. No. 01 Sr. No. 1 to 27.

Sr. No.	Drug Name	Packing	Rate	Remark
1	Erythropoietin 10000 IU Inj.			
2	Erythropoietin 2000 IU Inj.			
3	Erythropoietin 4000 IU Inj.			
4	Heparin Sodium 25000 I.U. Inj 5ml Vial			
5	Heparin Sodium 5000 I.U. Inj 5ml Vial			-
6	Hyaluronidase 1500 IP Inj.			
7	Hypromellose Ophthalmic Solution USP 2% w/v			
8	Human Normal Immunoglobulin for Intravenous Administration I.P. (I.V.I.G) 5% 5 gm. 100 ml			
9	Ketamine Hydrochloride 50mg/ml Inj 10ml Vial			
10	Phenobarbitone Sodium 200mg/ml Inj 1ml amp			
11	Thiamine (Vitamin B1) 200mg/2ml Inj			
12	Thiopentone Sodium 1gm Inj			
13	Tranexamic Acid 500mg/5ml Inj			
14	Atropine 1 % eye drop 5 ml.			
15	Atropine Sulphate 1% Ointment 5 gm.			
16	Benzyl Benzoate 25% Lotion 100 ml.			
17	IV Sodium Chloride 0.9% 500 ml.			
18	Levetiracetam 100mg/ml Syrup 100 ml bottle			
19	Moxifloxacin 0.5% with Dexamethasone 0.1% Eye Drop 5ml vial			
20	Syp. Cetirizine 5mg/5ml 30 ml Syrup			
21	Syp. Phenobarbitone 20mg/5ml. 60 ml.			
22	Syp. Phenytoin 30mg/5ml 200 ml.			
23	Syp. Prednisolone 5mg/5ml, 60 ml.		4	
24	Clopidrogel 75 mg Tab			
25	Norethisterone 5mg Tab.			
26	Isoxsuprine Hydrochloride 10 Tab.			
27	Telmisartan 40 mg Tab			

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