

SASSOON GENERAL HOSPITAL PUNE-1**QUOTATION (SECTION -C)**

MS/MED/ QTN/C/ 144 /20

DT 9 / 6 /2020

	Name Of Drug
1 Inj.	Ondansetron 2mg/ml 2ml Amp
2 Inj.	Oxytocin 5 I.U. .ml 1ml Amp
3 Inj.	Pheniramine Maleate 22.75mg/ml 2ml Amp
4 Inj.	Protamine Sulphate 10mg/ml 5ml Amp
5 Inj.	Sodium Nitroprusside 50mg Vial
6 Inj.	N-Acetylcystine 400mg/2ml
7 Tab.	Bisacodyl 5mg
8 Tab.	Duphastone 10mg(Dydrogestron)
9 Tab.	Formalin 1gm
10 Tab.	Metoclopramide 10mg
11 Tab.	Mebendazole 100mg
12 Tab.	Mifepristone 200mg
13 Tab.	Mifepristone 200mg + Misoprostol 200mcg
Terms & Conditions	
1	Strength of Drug ,MRP,Cost & Mfg Company , Packing must be mentioned
2	The Delivery Of the Material must be at Medical Store at Office Time
3	The Envelop &Quotation Should be addressed on name Of DEAN SASSOON GENERAL OSPITAL PUNE-1 (Attention Medical Store) & it Should be submitted stipulated time at Administrative Office before 5=00 P.M.
4	Delivery Period 24 Hours From the Date Of Receipt of the Order
5	The Quotation envelop should mention Qtn. Ref No. along with Generic Name& Strength of drug
6	Rates must be mentioned in figure as well as in words
7	Rates should be quoted as per official PHARMACOPEAL STANDARDS.
8	Conditional Quotations will not be accepted
9	Right to Accept, Recall, Or Reject above quotations lies solely with DEAN , SASSOON GENERAL HOSPITALS,PUNE
10	Rates For Tablets should Be quoted for Strip packing Only
11	If it is Noticed that the mentioned drug is available in local Market at lower price than that of quoted rate then the claim for the purchase by this qtn. Will become invalid
LAST DATE OF SUBMISSION OF QUOTATION 24-6-2020 BEFORE 5=00P.M.	

Your's Faithfully



DEAN

SASSOON GENERAL HOSPITAL PUNE-1