

# Sassoon General Hospital ,Pune

## Quotation Form (MJPJAY )

MS/MED/

166

/ 2020

Dt. :-

19/6/2020

**Sub:-Quotation For Drug as Given Below**

**Sir, You are Requested to furnish your Quotation for the following items to the DEAN SASSOON GENERAL HOSPITAL PUNE.**

Sr.	Name Of Drug	Sr.	Name Of Drug
1	Inj Irinotecan 100mg	13	HIB Vaccine (Influenza vaccine Type B) 0.25ml
2	Inj Irinotecan 40mg	14	<u>Meningococcal Vaccine (Adult) 0.5ml</u>
3	Inj Mitoxantrone 20mg	15	Inj Levetiracetam 100mg/ml 5ml
4	Inj Dactinomycin 0.5mg	16	Iohexol Inj 100ml
5	Inj Daunorubicin 20mg	17	Iohexol Inj 50ml
6	<u>Inj. Bendamustine 100mg</u>	18	Iohexol Inj 20ml
7	Inj Filgrastim 300mcg PFS	19	Inj Sodium Chloride 0.45% <u>500ml</u>
8	Inj Filgrastim 300mcg vial	20	Inj. Sodium Chloride 3% 100ml
9	Tab. Aprepitant Kit (125+80+80)	21	Peritoneal Dialysis Fluid 1 Litre
10	Tab Gefitinib 250mg	22	Silver Stream Liquid 100ml
11	Cap Celecoxib 200mg	23	Caspofungin 50mg Inj
12	Inj Citicholine	24.	<u>Meningococcal Vaccine 0.25ml (pediatric)</u>

### Terms & Conditions

25. Dasatinib 50mg tab

Note:- 1)Rate Should be quoted inclusive of All Taxes ( Goods & Service Tax & all other taxes if any) & Rates Valid Up to six Months

2.Strength of Drug ,MRP,Cost & Mfg Company , Packing must be mentioned

3.The Delivery Of the Material must be at Medical Store at Office Time

4.The Envelop &Quotation Should be addressed on name Of **DEAN SASSOON GENERAL HOSPITAL PUNE-1 (Attention Medical Store )** & it Should be submitted in stipulated time at Administrative Office before 5=00 P.M.

5.Delivery Period 24 Hours From the Date Of Receipt of the Order

6.The Envelope Of Quotation Should be mention **Quotation. Ref. No.** Along with Generic name & strength of Drug and should be as per official PHARMACOPEAL STANDARDS.

7.Rates must be mentioned in figure as well as in words

8.Conditional Quotations will not be accepted

9.Rates For Tablets/ Capsules should Be quoted for Strip packing Only

10.Right to Accept, Recall, Or Reject above quotations lies solely with DEAN , SASSOON GENERAL Hospital,PUNE

11.If it is noticed that the mentioned drug is available in local market at lower rate than that of quoted rate then the claim for the purchase by this quotation will become invalid.

**LAST DATE OF SUBMISSION OF QUOTATION** 30.06.2020

**BEFORE 5=00P.M.**

Your's Faithfully

*Yant*

Dean Sasoon General Hospital Pune