

# Sassoon General Hospital, Pune-1

Tel : 26128000 Blood bank Ext: 2364

## Quotation Form ( Regional Blood Bank)

No.SGH/BB/ Blood bag lable / 122

Date: 66 / 10 / 2022.

7100

Sub:- Blood Bank online Quotation year 202-23

Sir,

This Hospital has to purchase the Blood Bank material mentioned below. Therefore, please send your Online quotation.

| Sr.No | Name of Item (लेवलचे नाव) | Quantity |
|-------|---------------------------|----------|
| 1     | A Positive Whole Blood    | 50       |
| 2     | A Negative whole Blood    | 50       |
| 3     | A Positive HRBCC          | 15000    |
| 4     | A Negative HRBCC          | 3000     |
| 5     | A Positive FFP            | 10000    |
| 6     | A Negative FFP            | 5000     |
| 7     | A Positive Platelet       | 2000     |
| 8     | A Negative platelet       | 200      |
| 9     | B Positive Whole Blood    | 50       |
| 10    | B Negative whole Blood    | 50       |
| 11    | B Positive HRBCC          | 15000    |
| 12    | B Negative HRBCC          | 5000     |
| 13    | B Positive FFP            | 8000     |
| 14    | B Negative FFP            | 3000     |
| 15    | B Positive Platelet       | 1000     |
| 16    | B Negative platelet       | 500      |
| 17    | O Positive Whole Blood    | 50       |
| 18    | O Negative whole Blood    | 50       |
| 19    | O Positive HRBCC          | 15000    |
| 20    | O Negative HRBCC          | 2000     |
| 21    | O Positive FFP            | 10000    |
| 22    | O Negative FFP            | 3000     |
| 23    | O Positive Platelet       | 2000     |
| 24    | O Negative platelet       | 500      |
| 25    | AB Positive Whole Blood   | 50       |
| 26    | AB Negative whole Blood   | 50       |
| 27    | AB Positive HRBCC         | 5000     |
| 28    | AB Negative HRBCC         | 1000     |
| 29    | AB Positive FFP           | 5000     |
| 30    | AB Negative FFP           | 2000     |
| 31    | AB Positive Platelet      | 1000     |
| 32    | AB Negative platelet      | 300      |
| 33    | O Cryo Positive           | 1000     |
| 34    | O Cryo Negative           | 500      |
| 35    | A Cryo Positive           | 1000     |
| 36    | A Cryo Negative           | 500      |
| 37    | B Cryo Positive           | 1000     |
| 38    | B Cryo Negative           | 200      |

|    |                  |        |
|----|------------------|--------|
| 39 | AB Cryo Positive | 500    |
| 40 | AB Cryo Negative | 100    |
|    |                  | 119700 |

**Terms & Conditions:-**

- 1) Rate should be quoted inclusive of all taxes & valid up to SIX months.
- 2) Strength of Drug, MRP Cost & Mfg Company packing must be mentioned.
- 3) The delivery of the materials must be at Blood Bank.
- 4) Delivery period 30 days from the date of receipt of the order.
- 5) The quotation and envelope should be addressed on the name of ( Attention Blood Bank).
- 6) DEAN, SASSOON GENERAL HOSPITAL, PUNE-1 and it should be submitted within stipulated time at Administrative Office.
- 7) Quotation envelope should mention Quotation Reference No. along with name & strength of Drug.
- 8) Rates must be mentioned in figure as well as in words.
- 9) Rates should be quoted for. & Material should be supplied as per official PHARMACOPEAL STANDARDS.
- 10) Conditional Quotation will not be accepted.
- 11) Right to Accept, Recall or Reject above Quotation lies solely with DEAN, SASSOON GENERAL HOSPITAL, PUNE-1

Last Date to Submit Quotation : Dt. 15 / 10 /2022



Dean

Sassoon General Hospital, Pune