

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **6A/H/Drugs/2022-23**

To,

**M/s AKUMS DRUGS AND PHARMACEUTICALS
LIMITED**

304, Mohan Place, L.S.C., Block-C
Saraswati Vihar, New Delhi- 110034
Contact No.- 9899666543,8860881221
Email: perfection@akums.net

Authorized Distributor:

M/s Pharmaskil

B-1/1, Rajouri Garden, New Delhi-110027
Warehouse Address: A-35/3, Mayapuri
Industrial Area, Ph-I, New Delhi
Phone No. 011-45523488, 9911311110,
8860511063
Email: pharmaskil@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Levofloxacin 500mg 100ml.	item18	Cost/ Injection	Rs. 17.88	12
2.	Injection Moxifloxacin 400mg 100ml	item109	Cost/ Injection	Rs. 41.80	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **6A/H/Drugs/2022-23**

To,

**M/s BDR PHARMACEUTICALS INTL
PRIVATE LIMITED**

Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004

Email: manoj.kapoor@bdrpharma.com,
dharmesh@bdrpharma.com

Contact: 9811383631, 022-40560560

Authorized Distributor:

M/s Unitas Pharmaceuticals Pvt. Ltd.

R-28, Inderpuri,

New Delhi- 110012

Telno.-25833497, 5836245,9811044701

Email.com: vandana_unitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Minocycline 100mg	item21	Cost/ Injection	Rs. 207	12

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Store Officer (H)

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Date: 07.05.2024

Rate Contract No.: **6A/H/Drugs/2022-23**

To,

M/s CONCORD BIOTECH LIMITED
1601-1602, B-wing
Mondeal Heights, Iskon Cross road
SG Highway, Ahmadabad-380015, Gujrat
Contact: 07968138721
Email:

Authorized Distributor:
M/s M.H.MEDICUS PVT. LTD
160-161, 163-164 & 167, Plot No. 04,
J-Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027
Ph. No. 011-41046660, 9873427505

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Capsule Cyclosporine 25mg	item76	Cost/ Capsule	Rs. 7.45	5

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Date: 07.05.2024

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To,

M/s GETWELL PHARMACEUTICALS

474 Udyog Vihar Phase V,
Gurgaon - 122016
Contact no.: 0124-4477981/982
Email :info@getwelloncology.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Doxorubicin RTU 10mg	item37	Cost/ Injection	Rs. 56.8	12
2.	Injection Doxorubicin RTU 50mg	item38	Cost/ Injection	Rs. 173.00	12

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To,

M/s LUPIN LIMITED

3rd Floor, Kalpatru Inspire,
Off W.E. Highway, Santacruz,
(East), Mumbai-400055
Contact: (91-22) 66402323, 8879967909
Email: manoj Singh4@lupin.com

Authorized Distributor:

M/s M.H.MEDICUS PVT. LTD

160-161, 163-164 & 167, Plot No. 04,
J-Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027.
Ph. No. 011-41046660, 9873427505
Email: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Capsule Rifabutin 150 mg	item105	Cost/ Capsule	Rs. 28.90	12

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Store Officer (H)

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To,

M/s MANKIND PHARMA LIMITED
208- Okhla Industrial Estate, Phase-III,
New Delhi-110020
Contact: 011-46541382
Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:
M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Bottle Amoxycillin+Clavulanic Acid (200mg+28.5mg/5ml) 30ml	item47	Cost/ Bottle	Rs. 37.48	12
2.	Syrup Ofloxacin 60ml	item86	Cost/ Syrup	Rs. 28.90	12

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To,

M/s MACLEODS PHARMACEUTICALS LIMITED

Atlanta Arcade, Merol Church Road,
Andheri (E), Mumbai-400059
Contact: 91-22-667602800, 9867023948
Email: Pal@Macleodspharma.Com

Authorized Distributor:

M/s Uma Pharma Associates

B-14, DSIDC Complex,
Patparganj Industrial area,
New Delhi-110092
Contact: 8826164434
Email:
umapharmaassociates@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Levofloxacin 750 mg	item65	Cost/ Tablet	Rs. 5.40	12

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To,

M/s NEON LABORATORIES LIMITED

140, Dhamji Shamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Email: elizabeth@neongroup.com,
smnorth@mkt.neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com
Contact-9891252035, 9911337151

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Daunurubicin 20 mg	item34	Cost/ Injection	Rs. 91.00	5

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Store Officer (H)

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ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **6A/H/Drugs/2022-23**

To,

M/s PROTECH TELELINKS

Suketi Road, Ogli, Kala-Amb District,
Sirmour, Himachal Pradesh
Email: protech.tenders@gmail.com
Contact: 9812004830

Authorized Distributor:

M/s Capital Biotech

SCO no. 103, Commercial Complex,
Sector 17, Jagadhri Yamunanagar
Haryana-135003
Email: capitalbiotech01@gmail.com
Contact: 9812004830

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Daptomycin 350 mg.	item17	Cost/ Injection	Rs. 1234.94	12
2.	Injection Tobramycin 80mg. 2ml	item30	Cost/ Injection	Rs. 14.94	12
3.	Injection Ceftazidime 1gm.	item94	Cost/ Injection	Rs. 39.94	12
4.	Injection Doripenem 500 mg	item98	Cost/ Injection	Rs. 321.94	12
5.	Injection Ertapenem 1gm	item112	Cost/ Injection	Rs. 889.94	12
6.	Injection Meropenam + Sulbactam 1.5gm	item108	cost/ Injection	Rs. 172.24	12

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HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **6A/H/Drugs/2022-23**

To,

**M/s SHREE KRISHNA KESHAV LABORATORIES
LIMITED**

Devashish, 3rd floor, Behind Bawarchi restaurant,
Near samudraannexoff. C.G. Road,
Ahmedabad-38006
Contact No.: 8826692025
Email: satendrapalsingh@radiffmail.com

Authorized Distributor:

M/s Akshat Health care
shop No. 6 & 7, CSC Ramji Lal complex,
DA Block, Shalimar Bagh, Delhi-110088
Contact No.: 8750091101
Email: akshathealthcare21@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Linezolid 200mg 100ml	item20	Cost/ Injection	Rs. 37.83	12

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Date: 07.05.2024

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To,

**M/s SKYMAP PHARMACEUTICALS PRIVATE
LIMITED**

302, Narmada Block-5, Pocket D-6,
Vasant Kunj, New Delhi- 110070
Contact: - 9811792539
Email: - skymaprke@gmail.com

Authorized Distributor:

M/s Royal Care Pharma

203,2nd floor, Anupam Complex,
Opp Jwalaheri Market, Paschim vihar,
New delhi-110063
Contact: 9910238144
Email: rcp.pv99@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items –reg.

Dear Sir,

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Sr. No.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Capsule Amoxycillin 500mg	item42	Cost/ Capsule	Rs. 2.90	12
2.	Capsule Amoxycillin 250mg	item43	Cost/ Capsule	Rs. 1.63	12
3.	Tablet Ciprofloxacin 500mg	item60	Cost/ Tablet	Rs. 2.19	12
4.	Tablet Doxophylline 400mg	item116	Cost/ Tablet	Rs. 1.57	12
5.	Tablet Levofloxacin 500mg	item64	cost/ Tablet	Rs. 2.79	12
6.	Tablet Cefixime 100mg	item89	cost/ Tablet	Rs. 2.59	12

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Date: 07.05.2024

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To,

**M/s SUPERMAX DRUGS AND PHARMACEUTICALS
PRIVATE LIMITED**

H-1231, DSIDC, Industrial Complex,
Nareli, Delhi -110040
Contact no: 07428230198
Email: supermaxdrugs@gmail.com

Authorized Distributor:

M/s Tirupati Medlines Pvt Ltd
203, 2nd Floor, Plot no. 9 & 10,
Vardhman Capital Mall, LSC, Gulabi
Bagh,
Shakti Nagar, Delhi -110007
Contact no.: 9899720172, 9999410172
Email: tirupatimedilines@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Cefotaxime 1gm.	item92	cost/ Injection	Rs. 15	12

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To,

M/s VENUS REMEDIES LIMITED

51-52, Industrial Area, Phase- 1

Panchukula (Hry.) 134113

Contact No.- 09815811600

E-mail: info@venusremedies.com

Authorized Distributor:

M/s Pharmatek India

G-71, Ground Floor, Vardhman Fortune

Mall, GT Karnal Road Industrial Area,

Delhi -110033

Contact no.: 9911071526

Email: Tekpharma@yahoo.co.in

Tekpharma2@gmail.com

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Ceftriaxone + Disodium Edetate + Salbactum 3.0gm	item106	Cost/ Injection	Rs. 1624.76	12
2.	Injection Ceftriaxone + Disodium Edetate + Salbactum 1.5gm	item107	Cost/ Injection	Rs. 808.11	12
3.	Injection Aztreonam 1gm.	item5	cost/ Injection	Rs. 75.00	12

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Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **6A/H/Drugs/2022-23**

To,

M/s WOCKHARDT LIMITED

Wockhardt towers ,Bandra Kurla complex,,
Bandra (E) Mumbai-400051
Contact No.: 022-26534444,9820407013
Email:jlade@wockhardt.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Levonadifloxacin 800mg/ 100ml	item84	Cost/ Injection	Rs. 2342.86	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **6A/H/Drugs/2022-23**

To,

M/s ZEE LABORATORIES LIMITED

Behind 47, Industrial Area,
Paonts Sahib- 173025 (H.P)
H.O.: Uchani, G.T. Road,
Karnal- 132001.
Contact No.- 08197575225
E-mail: sales.institutions@zeelab.co.in

Authorized Distributor:

M/s Swaroop Life Sciences
Shop no-14/14,
DDA Commercial Market
Nangal Raya, New Delhi -110046
Contact: 8700065588
Email: swarooplifescience@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Ciprofloxacin I.V 200mg 100ml.	item12	Cost/ Injection	Rs. 9.67	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s ASTRAZENECA PHARMA INDIA LIMITED
Block-N1, 12th Floor, Manyata Embassy Business
Park, Rachenahalli, Outer Ring Road,
Bangalore-560045
Contact: 080-67748000
Email: institution.az@astrazeneca.com,
rakesh.singh1@astrazeneca.com

Authorized Distributor:
M/s. Albino Lifesciences Pvt. Ltd.
B-167, G.F., East Of Kailash,
New Delhi – 110065
Contact Person : Mr. Bibhuti Biswal,
Mob. No. : 9910486269,
Mr. Dinesh Daga, Mob. No. : 9810033890
Email Id: mail@albino91.com,
dinesh@albino91.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Durvalumab 120mg	item126	Cost/ Injection	Rs. 27785.10	12
2.	Injection Durvalumab 500mg	item127	Cost/ Injection	Rs. 115772.27	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

**M/s BDR PHARMACEUTICALS INTL
PRIVATE LIMITED**

Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004
Email: manoj.kapoor@bdrpharma.com,
dharmesh@bdrpharma.com
Contact: 9811383631, 022-40560560

Authorized Distributor:

M/s Unitas Pharmaceuticals Pvt. Ltd.
R-28, Inderpuri,
New Delhi- 110012
Telno.-25833497, 5836245,9811044701
Email.com: vandana_unitsa@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Dasatanib 50mg.	item5	Cost/ Tablet	Rs.15.15	12
2.	Tablet Everolimus 5mg	item46	Cost/ Tablet	Rs. 180	5
3.	Tablet Everolimus 10mg	item47	Cost/ Tablet	Rs. 370	5
4.	Tablet Lapatinib 250mg	item58	Cost/ Tablet	Rs.46	5
5.	Tablet Lenalidomide 5mg	item59	Cost/ Tablet	Rs.7.02	12
6.	Capsule Nintedanib 150mg	item79	Cost/ Capsule	Rs. 27	12
7.	Tablet Thalidomide 50 mg	item102	Cost/ Tablet	Rs.6.07	12
8.	Tablet Thalidomide 100mg	item103	Cost/ Tablet	Rs. 10.80	12
9.	Tablet Abiraterone Acetate 500mg	item114	Cost/ Tablet	Rs. 63	12
10.	Injection Leuprolide Acetate 22.5mg	item115	Cost/ Injection	Rs. 5030	12
11.	Capsule Everolimus 0.25 mg	item121	Cost/ Capsule	Rs. 17.10	5
12.	Capsule Everolimus 0.50 mg	item122	Cost/ Capsule	Rs. 33.30	5

h
7/5/24

13.	Capsule Ibrutinib 140mg	item144	Cost/ Capsule	Rs.90.00	12
14.	Tablet Abiraterone Acetate 250mg	item113	Cost/ Tablet	Rs. 29.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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3. Store Accounts Section
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s BIOCON BIOLOGICS LIMITED
Biocon House, Tower 3, Semicon Park,
Electronic City, Phase-II, Hosur Road,
Bengaluru -560100
Contact no.: 8067756775
Email: bbl@biocon.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Nimotuzumab 50mg	item77	Cost/ Injection	Rs. 10500	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

**M/s EISAI PHARMACEUTICALS INDIA PRIVATE
LIMITED**

6th floor, A wing ,Marwah Centre,
Krishnlal Marwah Marg,
Andheri (E), Mumbai 400072
Contact No.: 91-22-40751311
Email: eil-info@eisai.co.in

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016

Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Eribulin 1mg	item41	Cost/ Injection	22142.86 (+1 free vial)	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s GETWELL PHARMACEUTICALS
474 Udyog Vihar Phase V,
Gurgaon – 122016
Contact no.: 0124-4477981/982
Email :info@getwelloncology.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection L-Asparaginase 5000IU	item1	Cost/ Injection	Rs. 427	5
2.	Injection Ifosfamide 1gm	item54	Cost/ Injection	Rs.288.00	12
3.	Injection Cyclophosphamide 200mg	item112	Cost/ Injection	Rs. 22.90	5
4.	Injection Irinotecan 100 mg	item57	Cost/ Injection	Rs. 314.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway, Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Busulfan 60 mg	item20	Cost/ Injection	Rs. 1090	5
2.	Injection Cytarabine 1000mg	item33	Cost/ Injection	Rs. 370	5
3.	Injection Carfilzomib 60mg	item142	Cost/ Injection	Rs. 4122.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s JOHNSON AND JOHNSON PRIVATE LIMITED
L.B.S. Marg, Mulund (W),
Mumbai -400080
Contact No.: 9315146546
Email: tenderspharma@its.jnj.com

Authorized Distributor:
M/s Adarsh Distributor
203, 2nd Floor, Shri Mahavir Bhawan,
C-2, Karampura, New Delhi 110015
Ph: 9810164557

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

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Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Daratumumab 100mg	item140	Cost/ Injection	Rs. 13001	12
2.	Injection Daratumumab 400mg	item141	Cost/ Injection	Rs. 51900.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

**M/s KHANDELWAL LABORATORIES
PRIVATE LIMITED**
79/87,D Lad Path, Mumbai 400 033
Contact No.: 91-2249252828
Email:info@khandelwallab.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Bleomycin 15 mg	item2	Cost/ Injection	Rs.420	5
2.	Injection Epirubicin 10 mg	item38	Cost/ Injection	Rs. 110	5
3.	Tablet Hydroxyurea 500 mg	item53	Cost/ Tablet	Rs. 2,60	5
4.	Tablet Tamoxifen 10mg	item101	Cost/ Tablet	Rs. 0.98	12
5.	Injection Cisplatin 10 mg	item29	Cost/ Injection	Rs. 55.00	12
6.	Injection Cisplatin 50 mg	item30	Cost/ Injection	Rs. 205	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s ROCHE PRODUCTS (INDIA) PRIVATE LIMITED
146-B, 166A, Unit no. 7.8.9, 8th floor, R city office, R city
Mall, Lal Bahadur Shastri Marg, Ghatkopar, Mumbai-
400086
Contact No.: 91-2250457300
Email: institutional.business@roche.com
Hemelin.karekar@roche.com
Rajenderan.krishnamurthy@roche.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Obinutuzumab 1000mg	item151	Cost/ Injection	Rs. 256021	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s MERCK SPECIALITIES PRIVATE LIMITED

Godrej one, 8th floor, Pirojshah Nagar,
Eastern Express Highway,
Vikhroli(E) Mumbai-400079
Contact No.: 91-2262109000 ,9810273673
Email: sunil.kaul@merckgroup.com
Nitesh.sharma@merckgroup.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Cetuximab 500mg	item26	Cost/ Injection	Rs. 79055.05	12
2.	Injection Cetuximab 100mg 20 ml	item27	Cost/ Injection	Rs. 15811.01	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s NOVARTIS HEALTHCARE PRIVATE LIMITED

Inspire, BKC, BKC Main Road,
Bandra Kurla Complex,
Bandra (E) Mumbai -400051
Contact No.: 9892141402
Email: puru.gupta@novartis.com

Authorized Distributor:

M/s. Albino Lifesciences Pvt. Ltd.

B-167, G.F., East Of Kailash,
New Delhi - 110065
Contact Person : Mr. Bibhuti Biswal,
Mob. No. : 9910486269,
Mr. Dinesh Daga, Mob. No. : 9810033890
Email Id: mail@albino91.com,
dinesh@albino91.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Capsule Nilotinib 150mg	item75	Cost/ Capsule	Rs. 1397.86	5
2.	Capsule Nilotinib 200mg	item76	Cost/ Capsule	Rs. 1397.86	5
3.	Tablet Ruxolitinib 5mg	item93	Cost/ Tablet	Rs.1365	12
4.	Tablet Ruxolitinib 15mg	item94	Cost/ Tablet	Rs.2735	12
5.	Tablet Ruxolitinib 20mg	item95	Cost/ Tablet	Rs.2735	12
6.	Tablet Dabrafenib Mesylate 75mg	item135	Cost/ Tablet	Rs. 1166.90	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s SAMARTH LIFE SCIENCES PRIVATE LIMITED
Samarth House, 168, Bangur Nagar,
Off Link Road, Near Ayappa Temple &
Kallol Kali Temple, Goregaon (W), Mumbai-400090.
Contact- 9555601676
Email- abhi-mittal187@yahoo.com

Authorized Distributor:
M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Leucovorin Calcium Folate 50mg	item60	Cost/ Injection	Rs. 29.91	5
2.	Injection Leucovorin Calcium Folate 15mg	item61	Cost/ Injection	Rs. 11.91	5
3.	Tablet Leucovorin Calcium Folate 15mg	item63	Cost/ Tablet	Rs. 7.50	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s SHILPA MEDICARE LIMITED
604-605, Metro Avenue, Pereira Hill Road
Andheri East, Mumbai- 400099
Contact: 9910110208
Email: cc@vbsilpa.com

Authorized Distributor:
M/s Pharma-Surge Impex
Plot no-4 &5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Gefitinib 250mg	item51	Cost/ Tablet	Rs. 15.90	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s PFIZER PRODUCTS INDIA PRIVATE LIMITED
1802/1901 Plot No. C-70, G Block
Bandra Kurla Complex, Bandra, Mumbai
Contact: - 9760289797, 9910065011
Email: - deepakkumar.jha@pfizer.com

Authorized Distributor:

M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Capsule Palbociclib 100mg	item84	Cost/ Capsule	Rs.720	12
2.	Tablet Crizotinib 250mg	item133	Cost/ Tablet	Rs. 1160.50	12
3.	Injection Inotuzumab 1mg	item149	Cost/ Injection	Rs. 226285.71	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **7A/H/Drugs/2022-23**

To,

M/s ZYDUS LIFESCIENCES LIMITED
Zydus Corporate Park, Scheme no.63
Survey no. 536,Khoraj (Gandhinagar)
S.G.Highway, Ahmedabad - 382481
Contact no.: 7971800000

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Trastuzumab Emtansine 100mg	item124	Cost/ Injection	Rs. 24177.83	12
2.	Injection Trastuzumab Emtansine 160mg	item125	Cost/ Injection	Rs. 37198.64	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **8A/H/Drugs/2022-23**

To,

**M/s BAYER PHARMACEUTICALS PRIVATE
LIMITED**

Bayer House, Central Avenue Hiranandani
Estate, Thane (West), Maharashtra India
Contact: +91-11-23353128, 9899042531, 9974408614
Email- varunvohra355@gmail.com,
jinay.shah@bayer.com

M/s Prime Agencies

Unit No.6, First
Floor, CSC, DDA Market, Block B & C,
Phase-IV, Ashok Vihar,
Delhi-110052
Tel No, 011-27306191-92, 9811166400

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Iopromide 370 mg, 50ml	item1	Cost/ Injection	Rs. 846	5
2.	Injection Gadobutrol (1.0 mmol eq. to 6047.72 mg gadobutrol) 5ml	item9	Cost/ Injection	Rs. 1184.82	5
3.	Injection Iopromide 370 mg 100ml	item37	Cost/ Injection	Rs. 1629	5
4.	Injection Iopromide 300mg/ml (50ml)	item38	Cost/ Injection	Rs. 703.00	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **8A/H/Drugs/2022-23**

To,

**M/s GENETEK LIFESCIENCES PRIVATE
LIMITED**

Plot no.10,2nd floor, Chartered Square,
Samrat Ashok Square, Siraspeth,
Nagpur - 440009
Contact no.: 9371272375

Authorized Distributor:

M/s Sri Sai Vinayaka Enterprises

F-88 basement, maya puri,
industrial area, phase-II, new delhi-110064
phone no.- 011-28111211, 9818355226
EMAIL: ssvinayakaenterprises1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Diatrizoate sod 41.7%w/v 30ml	item4	Cost/ Injection	Rs. 179.20	12
2.	Injection Gadopentetate dimeglumine 469mg+78.6mg (20 ml)	item11	Cost/ Injection	Rs. 616.00	5
3.	Injection Iopamidol 300mg/ml (50ml)	item34	Cost/ Injection	Rs. 483.20	5
4.	Iohexol 300mg/ml (50ml)	item23	Cost/ Injection	Rs. 431.2	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **8A/H/Drugs/2022-23**

To,

M/s GUERBET INDIA PRIVATE LIMITED

Omega House, 402, 4th floor, Main street,
Hiranandani Gardens, Powai,
Andheri (E) – Mumbai -400076
Contact No.: 91-7208961628
Email: info.india@guerbet.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Iodized Oil 480mg/ml (10 ml)	item21	Cost/ Injection	Rs. 16088	0

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **8A/H/Drugs/2022-23**

To,

M/s IMAGING PRODUCTS (INDIA)

PRIVATE LIMITED

D-117, TTC Indus. Area, Shirwane Village,

Nerul, Navi Mumbai

Contact: 7011957462

Email: ipi@imagingproductsindia.com

Authorized Distributor:

M/s Mex India

Address: Plot No 302, F.I.E., Patparganj

Industrial Area, Delhi 110092

Mobile: 9810578789, 9810021999,

9818233396

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Gadobenate dimeglumine 334mg+ 195mg/ml (10ml)	item7	Cost/ Injection	Rs. 1193	5
2.	Injection Gadobenate dimeglumine 334mg+195mg/ml (15ml)	item8	Cost/ Injection	Rs. 1789	5
3.	Injection Iomeprol 400mg/ml (100ml)	item31	Cost/ Injection	Rs. 2290	12
4.	Injection Sulphur hexa Fluoride Microbubble Powder Kit 5ml	item49	Cost/ Injection	Rs. 6072	12

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Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **8A/H/Drugs/2022-23**

To,

M/s UNIJULES LIFE SCIENCES LIMITED

D-82, MIDC Area Cross Road No. 4-A, Hingna,
Nagpur-440028

Contact No.- 9765569051

E-mail: murtazaali@unijules.com,
admin.d82@unijules.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Diatrizoate sod 41.7%w/v 100ml	item3	Cost/ Injection	Rs. 520	12
2.	Injection Gadodiamide 20 ml	item10	Cost/ Injection	Rs. 1275	5
3.	Injection Iohexol 300mg/ml (100 ml)	item24	Cost/ Injection	Rs. 830	5
4.	Injection Iopamidol 370mg/ml (50ml)	item35	Cost/ Injection	Rs. 620	5
5.	Injection Iopamidol 370mg/ml (100ml)	item36	Cost/ Injection	Rs. 1175	5
6.	Injection Sodium Diatrizoate & Meglumine Diatrizoate 76%- pack of 20ml	item48	Cost/ Injection	Rs. 152	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **8A/H/Drugs/2022-23**

To,

M/s WIPRO GE HEALTHCARE PRIVATE LIMITED

S-46, Janta Market, Rajouri Garden,
New Delhi -110027

Contact No.: 011-4144 4691,9656647257

Email: bilesh.raj@ge.com

Authorized Distributor:

M/s South Delhi Pharma

60/4, Lower Ground Floor, Inside
IOC Building Compound

Yusuf Sarai, New Delhi-110016

Contact: 9891296838

Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Iodixanol USP 320mg /100ml	item18	Cost/ Injection	Rs. 1877	12
2.	Injection Iodixanol USP 320mg /50ml	item19	Cost/ Injection	Rs. 960	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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3. Store Accounts Section
4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **9A/H/Drugs/2022-23**

To,

M/s BAXTER INDIA PRIVATE LIMITED

5th Floor, Building No. 9, Tower A,

DLF Cyber City, DLF Phase-III,

Gurgaon-122002

Contact: 9810592367

Email: baxsolutions_india@baxter.com,

rahul_gupta@baxter.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Desflurane 240ml	item6	Cost/ Injection	Rs. 8400	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **9A/H/Drugs/2022-23**

To,

M/s GLAND PHARMA LIMITED

MIG-II, Plot No. 48.49,56,57,A.P.H.B Colony,
opp. I.D.P.L Colony, Chintal, Hyderabad-500037
Contact No.: 040-69113000
Email:sarada@glandpharma.com
narayanab@glandpharma.com
susheel.orga@glandpharma.com

Authorized Distributor:

M/s Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex
Green Park, Extension (Market)
New Delhi- 110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Rocuronium Bromide 50 mg/5ml	item31	Cost/ Injection	Rs. 143.00	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **9A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED
140, DhamjiShamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Contact-9769562907, 9911337151
Email:elizabeth@neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com

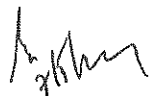
Authorized Distributor:
M/s Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex
Green Park, Extension (Market)
New Delhi- 110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Bupivacaine 0.5 % hyperbaric (Heavy) 0.5% 4ml	item3	Cost/ Injection	Rs. 21.50	12
2.	Injection Dexmedetomidine HCL 200 mcg 2ml	item8	Cost/ Injection	Rs. 120.00	12
3.	Injection Etomidate 10ml 2mg/ml 10ml	item9	Cost/ Injection	Rs. 240.00	12
4.	Jelly Lubricating jelly 20gm	item16	Cost/ Jelly	Rs. 83.48	12
5.	Jelly Lubricating jelly 50mg	item17	Cost/ Jelly	Rs. 173.78	12
6.	Injection Lignocaine 2% 30ml	item19	Cost/ Injection	Rs. 17.98	12
7.	Injection Lignocaine Hcl + Adrenaline 21.3mg/ml+0.005mg/ml (30ml)	item20	Cost/ Injection	Rs. 23.37	12
8.	Injection Lignocaine Hcl (Topical) 42.7mg/ml 4% (30 ml)	item22	Cost/ Injection	Rs. 28.28	12
9.	Jelly Lignocaine jelly 2% 30gm	item23	Cost/ Jelly	Rs. 23.79	12
10.	Spray Lignocaine throat spray 10% 50ml	item25	Cost/ Spray	Rs. 479.57	12



11.	Cream Lignocaine+Prilocaine(dermal anaesthetic cream) 2.5%+2.5% (30 gm)	item27	Cost/ Cream	Rs. 270.00	12
12.	Injection Neostigmine 5ml 2.5mg	item28	Cost/ Injection	Rs. 16.85	12
13.	Injection Neostigmine 1 ml 0.5mg	item29	Cost/ Injection	Rs. 3.97	12
14.	Injection Ropivacaine HCl 0.75% 20ml	item32	Cost/ Injection	Rs. 90	12
15.	Injection Succinylcholine Chloride 500mg 10ml	item34	Cost/ Injection	Rs. 42.67	5
16.	Injection Thiopentone 1000mg	item35	Cost/ Injection	Rs. 44.65	12
17.	Injection Thiopentone 500mg	item36	Cost/ Injection	Rs. 36.72	12
18.	Injection Levobupivacaine 0.50%	item38	Cost/ Injection	Rs. 106.79	12
19.	Injection Isoflurane 250 ml	item14	Cost/ Injection	Rs.1282.40	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **9A/H/Drugs/2022-23**

To,

M/s PIRAMAL PHARMA LIMITED

Agastya Corporate Park, Opp. Fire Brigade,
Kamani Junction, LBS Marg, Kurla West,
Mumbai 400 070

Contact No.: 91-223802 3000

Email: sujata.loke@piramal.com

Nalinakshi.salian@piramal.com

Authorized Distributor:

M/s Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex

Green Park, Extension (Market)

New Delhi- 110016

Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Isoflurane 100ml	item15	Cost/ Injection	Rs. 465	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **9A/H/Drugs/2022-23**

To,

M/s SAMARTH LIFE SCIENCES PRIVATE LIMITED

Samarth House, 168, Bangur Nagar,
Off Link Road, Near Ayappa Temple &
Kallol Kali Temple, Goregaon (W), Mumbai-400090.
Contact- 9555601676
Email- abhi-mittal187@yahoo.com

Authorized Distributor:

M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Vecuronium Bromide 4 mg/2ml	item37	Cost/ Injection	Rs. 26.91	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **9A/H/Drugs/2022-23**

To,

M/s TROIKAA PHARMACEUTICALS LIMITED

Commerce house-1, Satya Marg,
Bodakdev, Ahmedabad- 380054
Gujarat
Contact No.- 9879615617
E-mail: institution@troikaapharma.com,
tendersupport@troikaapharma.com
sanaul.karim01@gmail.com

Authorized Distributor:

M/s Basal Healthcare India Pvt. Ltd.
P-11, second floor, Pandav
Nagar, Mayurvihar phase-1, Delhi-
110091
ph:9717040799, 8130492280
Email: Sanjay.basalhealthcare@gmail.com,
sanaul.karim01@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Bupivacaine Hcl preservative free 0.50% 20 ml. amp	item2	Cost/ Injection	Rs. 31.82	12
2.	Lozenges Lignocaine Lozenges	item24	Cost/ Lozenges	Rs. 68.18	12
3.	Injection Sevoflurane 99.97% 250 ml	item33	Cost/ Injection	Rs. 3150.00	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **9A/H/Drugs/2022-23**

To,

M/s VERVE HUMAN CARE LABORATORIES

Plot No.- 15-A, Pharmacy,
Selaqui, Dehradun, uttrakhand- 248011
Contact No.- 9212409003
E-mail: sushil@vervehumancare.com,
admin@vervehealth.in

Authorized Distributor:

M/s Verve Health Care Limited

A-43, Basement, G.T Karnal Road
Industrial Area Delhi- 110033
Contact No.: 9212409003, 7042699038
E-mail: sushil@vervehumancare.com
Info@vervehumancare.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Ketamine I.V 100mg 2ml	item39	Cost/ Injection	Rs. 16	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **10A/H/Drugs/2022-23**

To,

M/s ABBOTT INDIA LIMITED

3, Corporate Park, Sion Trombay Road,
Mumbai-400071

Contact No.: 91-2238161000

Email: institution.business@abott.com ,
upkar.sheel@abott.com

Authorized Distributor:

M/s Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex
Green Park, Extension (Market)
New Delhi- 110016

Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Inactivated Influenza Quadrivalent 0.5ml	item27	Cost/ Injection	Rs.735	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **10A/H/Drugs/2022-23**

To,

**M/s ALLERGAN HEALTHCARE INDIA PRIVATE
LIMITED**

**Level 6 & 7 Prestige Obelisk No.3, Kasturba
Road,Bangalore-560001**

Contact No.: 6266558326

Email: in-institutions@abbvie.com

Palanisamy.s@abbvie.com

Nishigandha.nirgun@abbvie.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Botulinum Toxin Type A 50U	item15	Cost/ Injection	Rs.5524	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **10A/H/Drugs/2022-23**

To,

M/s DR REDDYS LABORATORIES LIMITED

Global Generics- India

7-1-27, Ameerpet,

Hyderabad-500 016

Contact: 9990268259, 09818656831, 09716355326

Email- anandroy@drreddys.com

Authorized Distributor:

M/s South Delhi Pharma

60/4, Lower Ground Floor,

Inside IOC Building Compound

Yusuf Sarai, New Delhi-110016

Contact: 9891296838

Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Botulinum Toxin 100U	item36	Cost/ Injection	Rs.8385	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **10A/H/Drugs/2022-23**

To,

M/s PFIZER LIMITED

1802/1901 Plot No. C-70, G Block
Bandra Kurla Complex, Bandra, Mumbai
Contact: - 9760289797, 9910065011
Email: - deepakkumar.jha@pfizer.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Pneumococcal Polysaccharide conjugate vaccine (13 Serotype) 13mcg 0.5ml	item8	Cost/ Injection	Rs.2863.62	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 10A/H/Drugs/2022-23

To,

M/s VINS BIOPRODUCTS LIMITED
806, Essajay House, Road No.3,
Banjara Hills, Hyderabad-500034, Telangana
Contact: - 91-40-23350369
Email: - mktg@vinsbio.in

Authorized Distributor:
M/s Pharma-Surge Impex
Plot no-4 & 5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Diptheria Antitoxin 1000 IU/ml (10ml)	item19	Cost/ Injection	Rs. 1198.00	5
2.	Injection Rabies Antiserum 1500 IU 1500 IU	item28	Cost/ Injection	Rs. 252	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 10A/H/Drugs/2022-23

To,

M/s RELIANCE LIFE SCIENCES PRIVATE LIMITED

R-282, TTC Area of MIDC, Thane

Belapur Road, Rabale, Navi Mumbai-400701

Contact: - 8527597226

Email: - mahesh.kumar@relbio.com

Authorized Distributor:

M/s Prime Agencies, Unit No.6, First

Floor, CSC, DDA Market, Block B & C,

Phase-IV, Ashok Vihar,

Delhi-110052

Tel No: 011-27306191-92, 9811166400

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Hepatitis B Immunoglobulin 100IU	item33	Cost/ Injection	Rs. 1760.00	5
2.	Injection Injection Human IV Gammaglobulins 50 ml 2.5gm	item35	Cost/ Injection	Rs. 3889.00	5

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Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 11A/H/Drugs/2022-23

To,

M/s AISHWARYA LIFESCIENCES

127, Swastik Plaza, Pokhran Road no.2

Thane Nr-Mumbai, Maharashtra – 400601

Contact No.: 9811632501, 9833075279

Email: rajiv10315@yahoo.co.in,

bd@aishwaryahealthcare.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Pack Size	Basic Rate Without Tax (INR)	GST %
1.	DNS (Dex.+ Sod. Chloride) 0.45% 500ml	item14	Two Port Close system container 500ml	Rs.28.50	12
2.	Compound Sodium Lactate 500ml	item3	Two Port Close system container 500ml	Rs. 25.50	12
3.	Dextrose 5% 500ml	item6	Two Port Close system container 500ml	Rs. 25.30	12
4.	Multiple Electrolytes & Dextrose Type 3 (500ml)	item24	Two Port Close system container 500ml	Rs. 29.50	12
5.	Normal saline (Sod. Chloride) (FFS) 0.9% 100 ml	item28	Plastic 100ml	Rs. 9.70	12
6.	Ringer Lactate Solution (Compound Sod. Lactate Injection) (FFS) 500ml	item33	Plastic 500ml	Rs. 21.20	12
7.	Sodium Chloride 0.9% w/v 500ml	item35	Two Port Close system container 500ml	Rs. 23.98	12
8.	Sodium Chloride 0.9% w/v 100ml	item36	Two Port Close system container 100ml	Rs. 15.70	12
9.	Sodium Chloride + Dextrose 0.9% w/v + 5% w/v	item37	Two Port Close system container	Rs. 25.30	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **11A/H/Drugs/2022-23**

To,

M/s BAXTER INDIA PVT. LTD.

5th Floor, Tower A, Building no.9

DLF Cyber City, DLF Phase III

Gurgaon, Haryana -122002

Contact No.: 9810592367

Email: rahul_gupta@baxter.com,

baxsolution_india@baxter.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Pack Size	Basic Rate Without Tax (INR)	GST %
1.	P.D. fluid Low calcium (CAPD Bags) 2 Litre	item31	Plastic 2 Litre	Rs. 340	12
2.	PD Fluid 1.5% dextrose 5Litre	item53	IV Fluid 5 Litre	Rs. 450	12
3.	PD Fluid 2.5% dextrose 5Litre	item54	IV Fluid 5 Litre	Rs. 450	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 11A/H/Drugs/2022-23

To,

M/s BBRAUNMEDICAL INDIA PVT LTD
A-601, 6th Floor, Boomerang
Near Chandivali Studio
Andheri (East), Mumbai-400072
Contact No.: 9560437778
Email: sales.admin@bbraun.com

M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Pack Size	Basic Rate Without Tax (INR)	GST %
1.	Normal saline (Sod. Chloride) (self collapsible bag without requiring any airway) 0.9% 100 ml	item29	I.V. bag 100 ml	Rs.26	12
2.	Normal Saline (Sodium Chloride) double pack Non-PVC bag 0.9% 500ml	item30	I.V. bag 500 ml	Rs. 46	12
3.	Ringer Lactate Solution (Compound Sod. Lactate Injection) (self collapsible bag without requiring any airway) 500ml	item34	I.V. bag 500 ml	Rs. 38	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **11A/H/Drugs/2022-23**

To,

**M/s OTSUKA PHARMACEUTICAL INDIA PRIVATE
LIMITED**
20/21st Floor, Westgate Tower B
Near YMCA Club, SG Highway, Ahmdabad – 380015
Contact No.: 9099989624
Email: instsalessupport.corp-amd@otsukapharma.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Pack Size	Basic Rate Without Tax (INR)	GST %
1.	Mannitol 20% 100ml	item20	Two Port Close system container 100 ml	Rs.29.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 11A/H/Drugs/2022-23

To,

M/s PENTAGON LABS LIMITED

206, Archana Apartment 8-B,

Ratlam Kothi, Indore - 452001

Contact No.: 9752273984

Email: pentagonlabsltd@yahoo.co.in

M/s Medtech Pharma (I) Pvt Ltd.

B-102-B, Ground Floor,

Mayapuri, Industrial Area,

Phase 1, New Delhi-110064

Contact No.: 9811063831

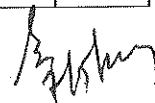
Email: medtechpharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Pack Size	Basic Rate Without Tax (INR)	GST %
1.	Dextrose Saline N/3 (Dex.+Sod. Chloride)(FFS) 5gm+0.33gm/100ml (500 ml)	item13	Plastic 500ml	Rs. 22.03	12
2.	Glycine Irrigation Solution (FFS) 1.5% 3000 ml	item16	Plastic 3000ml	Rs. 104.00	12
3.	Mannitol (FFS) 20% 100 ml	item21	Plastic 100ml	Rs. 25.50	12
4.	Normal saline (Sod. Chloride) (FFS) 0.9% 3 Ltr.	item27	Plastic 3 Litre	Rs. 94	12
5.	Dextrose 5% 500 ml	item39	Glass 500ml	Rs. 27.28	12
6.	Dextrose 50% 100 ml	item41	Glass 100ml	Rs. 19.50	12
7.	Dextrose Saline N/2 (Dex.+Sod.Chloride) 5gm+0.45gm/100ml (500 ml)	item42	Glass 500ml	Rs. 31.50	12
8.	Dextrose Saline N/3 (Dex.+Sod. Chloride) 5gm+0.33gm/100ml (500 ml)	item43	Glass 500ml	Rs. 31.50	12
9.	Dextrose Saline N/5 (Dex.+Sod. Chloride) 5gm+0.20gm/100ml (500 ml)	item44	Glass 500ml	Rs. 31.50	12
10.	DNS (Dex.+ Sod. Chloride) 5gm+0.9gm/100ml (500ml)	item45	Glass 500ml	Rs. 27.28	12
11.	Mannitol 20% 100 ml	item46	Glass 100ml	Rs. 27.50	12



12.	Mannitol 20% 350 ml	item47	Glass 350ml	Rs. 85.00	12
13.	Normal Saline (Hypertonic) 3% 100ml	item48	Glass 100ml	Rs. 16.5	12
14.	Normal saline (Sod. Chloride) 0.9% 100 ml	item49	Glass 100ml	Rs. 13.00	12
15.	Normal Saline (Sod. Chloride) 0.9% 500 ml	item50	Glass 500ml	Rs. 27.28	12
16.	Ringer Lactate Solution (Compound Sod. Lactate Injection) 500ml	item51	Glass 500ml	Rs. 31.07	12
17.	Distilled water 1 Litre	item55	Plastic 1ltr	Rs. 35.59	12
18.	Distilled water 1 Litre	item57	Glass 1ltr	Rs. 43.90	12
19.	Dextrose (FFS) 10% 500ml	item7	Plastic 500ml	Rs. 22.03	12
20.	Dextrose (FFS) 5% 500ml	item8	Plastic 500ml	Rs. 19.77	12
21.	Dextrose Saline N/2 (Dex.+Sod. Chloride) (FFS) 5gm + 0.45gm/100ml (500 ml)	item12	Plastic 500ml	Rs. 22.03	12
22.	DNS (Dex.+ Sod. Chloride)(FFS) 5gm+0.9gm/100ml (500ml)	item15	Plastic 500ml	Rs. 19.77	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


✓ **Store Officer (H)**

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 11A/H/Drugs/2022-23

To,

**M/s SHREE KRISHNA KESHAV LABORATORIES
LIMITED**

Devashish, 3rd Floor Beside Bawarchi restaurant,
Near Samudra Annexe off. C.G. Road,
Ahmedabad-38006
Contact No.: 8826692025
Email: satendrapalsingh@radiffmail.com

Authorized Distributor:

M/s Akshat Health care

shop No. 6 & 7, CSC Ramji Lal complex,
DA Block, Shalimar Bagh, Delhi-110088
Contact No.: 8750091101
Email: akshathealthcare21@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Pack Size	Basic Rate Without Tax (INR)	GST %
1.	Normal saline (Sod. Chloride) 0.45% 500ml	item25	Two Port Close system container 500 ml	Rs.33.61	12
2.	Normal saline (Sod. Chloride) .45% 100ml	item26	Two Port Close system container 100 ml	Rs. 22.31	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

**M/s BOEHRINGER INGELHEIM I PRIVATE
LIMITED**

Unit no. 202 and part unit no. 201, 2nd floor Godrej 2,
Pirojsha Nagar, Eastern Express Highway, Vikhroll(E)
Mumbai-400079

Contact No.: 91-22-26456477

Email: mukul.mishra@boehringer-ingelheim.com

anirudh.sharma@boehringer-ingelheim.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC,

DDA Market, Block B & C,

Phase-IV, Ashok Vihar, Delhi-110052

Tel No. 011-47592000, 8368704158

Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection alteplase tissue plasminogen 50 mg	Item9	Cost/ injection	RS. 30227.40	12
2.	Injection alteplase tissue plasminogen 20 mg	Item10	Cost/ injection	RS. 14477.40	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s GENNOVA BIOPHARMACEUTICALS LIMITED
Block 1, Plot No. P-1 & P-2 I.T.B.T. Park,
Phase-II, M.I.D.C. Hinjawadi, Pune-411057
Contact No.: 8999572266
Email: shreyas.mirajkar@emcure.co.in

Authorized Distributor:
M/s Pharma-Surge Impex
Plot no-4 & 5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Tenecteplase 20mg	item115	Cost/ Injection	Rs. 18900.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s GLAND PHARMA LIMITED
MIG-II, Plot No. 48.49,56,57,
A.P.H.B Colony, opp. I.D.P.L Colony,
Chintal, Hyderabad-500037
Contact No.: 040-69113000
Email: sarada@glandpharma.com
narayanab@glandpharma.com
susheel.orga@glandpharma.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Dalteparin 5000 I.U. 0.2ml	item36	Cost/ Injection	Rs. 330	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway. Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Propranolol 10mg	item83	Cost/ Tablet	Rs. 0.80	12
2.	Tablet Propranolol 40mg	item84	Cost/ Tablet	Rs.1.99	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 12A/H/Drugs/2022-23

To,

M/s IPCA LABORATORIES LIMITED

48, Kandivli Industrial Estate,
Kandivli (west), Mumbai 400067
Contact: 9312947787
Email: mohit.jain@ipca.com
sandesh.parbhu@ipca.com

Authorized Distributor:

M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Chlorthalidone 12.5mg	item1	Cost/ Tablet	Rs. 1.13	12
2.	Tablet Metoprolol+ Amlodipine 50mg+5mg	item67	Cost/ Tablet	Rs. 2.63	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s LUPIN LIMITED

3rd Floor, Kalpatru Inspire,
Off W.E. Highway, Santacruz,
(East), Mumbai-400055
Contact: (91-22) 66402323, 8879967909
Email: manoj Singh4@lupin.com

Authorized Distributor:

M/s M.H.MEDICUS PVT. LTD
160-161, 163-164 & 167, Plot No. 04,
J Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027.
Ph. No. 011-41046660, 9873427505
Email: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Clopidogrel + Asprin ASA 75mg+75mg	item35	Cost/ Tablet	Rs. 2.30	12
2.	Tablet Isosorbide Dinitrite + Hydralazine 20mg+37.5mg	item51	Cost/ Tablet	Rs. 6.49	12
3.	Tablet Ramipril 2.5mg	item85	Cost/ Tablet	Rs. 0.49	12
4.	Tablet Ramipril 5mg	item86	Cost/ Tablet	Rs. 0.89	12
5.	Tablet Rosuvastatin 5mg	item90	Cost/ Tablet	Rs. 0.87	12
6.	Tablet Telmisartan 80mg	item110	Cost/ Tablet	Rs. 2.85	12
7.	Tablet Telmisartan + Hydrochlorthiazide 80mg + 12.5mg	item113	Cost/ Tablet	Rs. 3.15	12
8.	Tablet Atorvastatin 5mg	item142	Cost/ Tablet	Rs. 0.67	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s MANKIND PHARMA LIMITED

208- Okhla Industrial Estate, Phase-III,
New Delhi-110020

Contact: 011-46541382

Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052

Tel No. 011-47592000, 8368704158

Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Losartan + Hycrochlorthiazide 50mg+12.5mg	item2	Cost/ Tablet	Rs. 0.95	12
2.	Tablet Amlodipine 2.5mg	item15	Cost/ Tablet	Rs. 0.42	12
3.	Tab Cilnidipine 10 mg	item140	Cost/ Tab	Rs. 0.69	12
4.	Tablet Bisoprolol 2.5mg	item143	Cost/ Tab	Rs. 0.85	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s MICRO LABS LIMITED

B-29, G.T. Karnal Road,

Industrial Area, Delhi-110033

Email-rakeshsharma_micro@yahoo.co.in

Contact-9350808984, 9999699140

Authorized Distributor:

M/s Sri Sai Vinayaka Enterprises

F-88 basement, maya puri,

industrial area, phase-ii, new delhi-110064

phone no.- 011-28111211, 9818355226

EMAIL: ssvinayakaenterprises1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Amiodarone 100mg	item12	Cost/ Tablet	Rs. 2.40	12
2.	Tablet Atorvastatin 80mg	item23	Cost/ Tablet	Rs. 3.80	12
3.	Tablet Clinidipine 10mg	item29	Cost/ Tablet	Rs. 1.80	12
4.	Tablet Isosorbide Mononitrate SR 30mg	item50	Cost/ Tablet	Rs. 2.30	12
5.	Tablet Ranolazine 500mg	item87	Cost/ Tablet	Rs. 3.10	12
6.	Tablet Risperidone 2mg	item88	Cost/ Tablet	Rs. 0.68	12
7.	Tablet Trimetazidine 20mg	item125	Cost/ Tablet	Rs. 1.05	12
8.	Tablet Clinidipine 5mg	item144	Cost/ Tablet	Rs. 1.55	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED
140, Dhamji Shamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Email: elizabeth@neongroup.com,
smnorth@mkt.neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com
Contact-9891252035, 9911337151

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarckpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Adenosine 6mg 2ml	item8	Cost/ Injection	Rs. 90	12
2.	Injection Clonidine 150 mcg 1ml	item32	Cost/ Injection	Rs. 48.54	12
3.	Injection Dopamine 40mg 5ml	item44	Cost/ Injection	Rs. 12.13	5
4.	Injection Esmolol 100mg 10ml	item46	Cost/ Injection	Rs. 117.98	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s PROTECH TELELINKS

Suketi Road, Ogli, Kala-Amb District,
Sirmour, Himachal Pradesh
Email: protech.tenders@gmail.com
Contact: 9812004830

Authorized Distributor:

M/s Capital Biotech

SCO no. 103, Commercial Complex,
Sector 17, Jagadhri Yamunanagar
Haryana-135003
Email: capitalbiotech01@gmail.com
Contact: 9812004830

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Terlipressin 1mg 10ml	item7	Cost/ Injection	Rs. 19.94	12
2.	Injection Dobutamine hcl 250mg/20ml	item43	Cost/ Injection	Rs. 16.24	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s RELIANCE LIFE SCIENCES PRIVATE LIMITED

R-282, TTC Area of MIDC, Thane

Belapur Road, Rabale, Navi Mumbai

Contact: - 8527597226

Email: - mahesh.kumar@relbio.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA Market,

Block B & C, Phase-IV, Ashok Vihar,

Delhi-110052

Tel No. 011-47592000, 8368704158

Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Tenecteplase 30mg	item114	Cost/ Injection	Rs. 17979.00	12
2.	Injection Tenecteplase 40mg	item116	Cost/ Injection	Rs. 17987.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s RPG LIFE SCIENCES LIMITED
RPG House 463, Dr. Annie
Basant Road Worli, Mumbai- 400030
Contact: - 07738238787, 7428401144
Email: - Smita.bhoir@rpgls.com
Vijay.kumar@rpgls.com

Authorized Distributor:
M/s M.H.MEDICUS PVT. LTD
160-161, 163-164 & 167, Plot No. 04,
J-Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027.
Ph. No. 011-41046660, 9873427505
Email: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Eplerenone 25mg	item45	Cost/ Tablet	Rs. 9.14	12
2.	Tablet Spironolactone + Frusemide 50mg + 20mg	item105	Cost/ Tablet	Rs. 2.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s SERVIER INDIA PRIVATE LIMITED
(formerly known as Serdia Pharmaceuticals (India) Private Limited)
1703, Floor, Parinee-Crescenzo, B-wing,
Plot No. C-38 & 39, G-Block, Behind MCA,
Bandra Kurla Complex,
Bandra (E) Mumbai-400051
Contact: - 9449068957
Email: - servier.sales@servier.com

Authorized Distributor:
M/s M.H.MEDICUS PVT. LTD
160-161, 163-164 & 167, Plot No. 04,
J-Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027.
Ph. No. 011-41046660, 9873427505
Email: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Perindopril 2mg	item77	Cost/ Tablet	Rs. 9.94	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

**M/s SKYMAP PHARMACEUTICALS PRIVATE
LIMITED**

302, Narmada Block-5, Pocket D-6,
Vasant Kunj, New Delhi- 110070
Contact: - 9811792539
Email: - skymaprke@gmail.com

Authorized Distributor:

M/s Royal Care Pharma
203,2nd floor, Anupam Complex,
Opp Jwalaheri Market,
Paschim vihar, New delhi-110063
Contact: 9910238144
Email: rcp.pv99@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Atenolol 50mg	item18	Cost/ Tablet	Rs. 0.37	12
2.	Tablet Atenolol 25mg	item19	Cost/ Tablet	Rs. 0.27	12
3.	Tablet Atorvastatin 10mg	item20	Cost/ Tablet	Rs. 0.52	12
4.	Tablet Atorvastatin 20 mg	item21	Cost/ Tablet	Rs. 0.80	12
5.	Tablet Carvedilol 6.25 mg	item28	Cost/ Tablet	Rs. 0.74	12
6.	Tablet Diltiazem 30mg	item41	Cost/ Tablet	Rs. 0.59	12
7.	Tablet Indapamide SR 1.5mg	item49	Cost/ Tablet	Rs. 0.95	12
8.	Tablet Losartan Potassium 25 mg	item58	Cost/ Tablet	Rs. 0.54	12
9.	Tablet Losartan Potassium 50mg	item59	Cost/ Tablet	Rs. 0.83	12
10.	Tablet Telmisartan 20mg	item109	Cost/ Tablet	Rs. 0.66	12
11.	Tablet Telmisartan + Hydrochlorthiazide 40mg +12.5mg	item112	Cost/ Tablet	Rs. 1.09	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s THEON PHARMACEUTICALS LIMITED
Plot No. 400, industrial Area,
Phase-I, Panchkula- 134113, Haryana
Contact No.- +91-1725210200
E-mail: spsingh@theonpharma.com,
tender@theonpharma.com

Authorized Distributor:

M/s Pharmaskil
B-1/1, Rajouri Garden, New Delhi-110027
Warehouse Address: A-35/3, Mayapuri
Industrial Area, Ph-I, New Delhi
Phone No. 011-45523488, 9911311110,
8860511063
Contact person: Mr. Prateek Bhasin
Email: pharmaskil@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Telmisartan 40mg	item111	Cost/ Tablet	Rs. 0.85	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s TORRENT PHARMACEUTICALS LIMITED
Torrent House, Ahmadabad- 380009
Gujarat (India)
Contact No.- 9999129792/9310153033
E-mail: atulshah@torrentpharma.com

Authorized Distributor:
M/s M.H. Medicus Pvt. Ltd.
160-161,163-164 & 167, PLOT NO. 04,
J Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi- 110027
Ph. NO. 011-41046660
Email ID: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items –reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Nicorandil 5mg	item70	Cost/ Tablet	Rs. 1.74	12
2.	Tablet Torsemide 10mg	item121	Cost/ Tablet	Rs. 1.09	12
3.	Tablet Nifedepin SR 10MG	item132	Cost/ Tablet	Rs. 1.17	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s TROIKAA PHARMACEUTICALS LIMITED

Commerce house-1, Satya Marg,
Bodakdev, Ahmedabad- 380054
Gujarat
Contact No.- 9879615617
E-mail: institution@troikaapharma.com,
tendersupport@troikaapharma.com
sanaul.karim01@gmail.com

Authorized Distributor:

M/s Basal Healthcare India pvt. Ltd.
P-11, second floor, Pandav
Nagar, Mayurvihar phase-1,
Delhi-110091
ph:9717040799, 8130492280
Email:Sanjay.basalhealthcare@gmail.com,
sanaul.karim01@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items –reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Labetalol 20mg 4ml	item55	Cost/ Injection	Rs. 45.45	12
2.	Tablet Nitroglycerine 2.6mg	item74	Cost/ Tablet	Rs. 1.70	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **12A/H/Drugs/2022-23**

To,

M/s USV PRIVATE LIMITED

C-2, Community Centre, Naraina Vihar,
New Delhi-110028
Contact No.: 9871594946
Email: mahender.chawla@usv.in
Rajiv.vashisht@usv.in

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items –reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Aspirin ASA 150mg	item16	Cost/ Tablet	Rs. 0.58	12
2.	Tablet Aspirin ASA 75mg	item17	Cost/ Tablet	Rs. 0.32	12
3.	Tablet Nimodipine 30 mg	item71	Cost/ Tablet	Rs. 5.56	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway. Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Amitriptyline 25 mg	item3	Cost/ Tablet	Rs. 1.60	12
2.	Tablet Amitryptline 10mg	item4	Cost/ Tablet	Rs. 1.11	12
3.	Tablet Haloperidol 1.5 mg	item31	Cost/ Tablet	Rs. 0.93	12
4.	Tablet Haloperidol 5mg	item32	Cost/ Tablet	Rs. 2.89	12
5.	Tablet Lorazepam 1mg	item42	Cost/ Tablet	Rs. 1.16	12
6.	Tablet Atomoxetine 25mg	item82	Cost/ Tablet	Rs. 14.94	12
7.	Tablet Modafinil 100mg	item109	Cost/ Tablet	Rs. 8.65	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s IPCA LABORATORIES LIMITED

48, Kandivli Industrial Estate,
Kandivli (west), Mumbai 400067
Contact: 9312947787
Email: mohit.jain@ipca.com
sandesh.parbhu@ipca.com

Authorized Distributor:

M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Quetiapine 25mg	item62	Cost/ Tablet	Rs. 1.25	12
2.	Tablet Quetiapine 50mg	item63	Cost/ Tablet	Rs. 2.05	12
3.	Tablet Zolpidem 5mg	item98	Cost/ Tablet	Rs. 1.75	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s LUPIN LIMITED

3rd Floor, Kalpatru Inspire,
Off W.E. Highway, Santacruz,
(East), Mumbai-400055
Contact: (91-22) 66402323, 8879967909
Email: manojsingh4@lupin.com

Authorized Distributor:

M/s M.H.MEDICUS PVT. LTD
160-161, 163-164 & 167, Plot No. 04,
J-Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027.
Ph. No. 011-41046660, 9873427505
Email: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Capsule Flupirtine Maleate 100mg	item27	Cost/ Capsule	Rs. 3.49	12
2.	Bottle Levetiracetam 100mg/ml (100ml)	item40	Cost/ Bottle	Rs. 189.00	12
3.	Tablet Escitalopram 5mg	item107	Cost/ Tablet	Rs. 0.89	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s MANKIND PHARMA LIMITED
208- Okhla Industrial Estate, Phase-III,
New Delhi-110020
Contact: 011-46541382
Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:
M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Betahistine 8mg	item5	Cost/ Tablet	Rs. 0.55	12
2.	Capsule D-penicillamine 250mg	item22	Cost/ Capsule	Rs. 12.00	12
3.	Tablet Pregabalin +Methylcobalamine 75mg+750mg	item58	Cost/ Tablet	Rs. 2.25	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 13A/H/Drugs/2022-23

To,

M/s MICRO LABS LIMITED

B-29, G.T. Karnal Road,
Industrial Area, Delhi-110033
Email-rakeshsharma_micro@yahoo.co.in
Contact-9350808984, 9999699140

Authorized Distributor:

M/s Sri Sai Vinayaka Enterprises

F-88 basement, maya puri,
industrial area, phase-ii, new delhi-110064
phone no.- 011-28111211, 9818355226
EMAIL: ssvinayakaenterprises1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Clonazepam 0.5mg	item16	Cost/ Tablet	Rs. 0.68	12
2.	Tablet Piracetam 400mg	item55	Cost/ Tablet	Rs. 2.80	12
3.	Tablet Sertraline HCL 50mg	item64	Cost/ Tablet	Rs. 1.30	12
4.	Tablet Sodium Valproate + Valproic Acid CR 300mg	item67	Cost/ Tablet	Rs. 2.10	12
5.	Tablet Sodium Valproate + Valproic Acid CR 500mg	item68	Cost/ Tablet	Rs. 2.80	12
6.	Tablet Trihexyphenidyl Benzhexol 2mg	item72	Cost/ Tablet	Rs. 0.72	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED

140, Dhamji Shamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Email: elizabeth@neongroup.com,
smnorth@mkt.neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com
Contact-9891252035, 9911337151

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Fosphenytoin 150mg 2ml	item28	Cost/ Injection	Rs. 28.09	12
2.	Injection Sodium Valproate 100 mg/ml (5ml)	item65	Cost/ Injection	Rs. 16.85	12
3.	Injection Tramadol 100mg 2ml	item96	Cost/ Injection	Rs. 6.80	12
4.	Injection Midazolam 5mg/5ml vial	item100	Cost/ Injection	Rs. 21.37	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s TORRENT PHARMACEUTICALS LIMITED

Torrent House, Ahmadabad- 380009
Gujarat (India)
Contact No.- 9999129792/9310153033
E-mail: atulshah@torrentpharma.com

Authorized Distributor:

M/s M.H. Medicus Pvt. Ltd.
160-161,163-164 & 167, PLOT NO. 04,
J Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi- 110027
Ph. NO. 011-41046660
Email ID: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Clozapine 50mg	item19	Cost/ Tablet	Rs. 2.29	12
2.	Tablet Imipramine 25mg	item35	Cost/ Tablet	Rs. 0.69	12
3.	Tablet Olanzapine 5mg	item45	Cost/ Tablet	Rs. 0.70	12
4.	Tablet Pregabalin 75mg	item57	Cost/ Tablet	Rs. 1.63	12
5.	Tablet Venlafaxine 37.5mg	item73	Cost/ Tablet	Rs. 3.56	12
6.	Tablet Topiramate 25mg	item108	Cost/ Tablet	Rs. 1.60	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s UNICURE INDIA LIMITED

C-21,22 & 23, Sector-3 Noida- 201301

Distt. Gautam Budh Nagar, (U.P.)

Contact No.- 9810337912

E-mail: unicure@unicureindia.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Carbamazepine 200 mg	item9	Cost/ Tablet	Rs. 1.55	12
2.	Tablet Tramadol 50mg	item97	Cost/ Tablet	Rs. 0.73	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **13A/H/Drugs/2022-23**

To,

M/s ZYDUS HEALTHCARE LIMITED

Zydus Tower, Satellite Cross Roads,

Ahmedabad- 380015

Contact No.- +91-79-26868100

E-mail: sandeep.sarkar@zyduscadila.com

institution.business@sanofi.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,

Greenpark, Extension (Market),

New Delhi-110016

Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Phenytoin Sodium 100mg	item53	Cost/ Tablet	Rs. 0.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

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ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **14A/H/Drugs/2022-23**

To,

M/s BRAWN LABORATORIES LIMITED

Plot No.- 13, New Industrial Township,

Faridaba- 121001, Haryana, India

Contact: - 0129-4360113, 844830569

Email: inst@brawnlab.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Montelukast 10mg	item34	Cost/ Tablet	Rs. 1.10	12
2.	Tablet Montelukast + Levocetirizine 10mg+5mg	item36	Cost/ Tablet	Rs. 1.20	12

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Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **14A/H/Drugs/2022-23**

To,

**M/s GLAXOSMITHKLINE PHARMACEUTICALS
LIMITED**

252, Dr. Annie Besant Road,

Worli, Mumbai- 400030

Contact: - 9990731210

Email: imran.2.hashmi@gsk.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Inhaler INHALER Salmeterol + Fluticasone 50mcg+250mcg	item27	Cost/ Inhaler	Rs. 368.95	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **14A/H/Drugs/2022-23**

To,

M/s LUPIN LIMITED

202, Agarwal Plaza, Rohini, Sector-14,

New Delhi-110085

Contact No.: 8879967909

Email: manoj Singh4@lupin.com

Authorized Distributor:

M/s M.H.MEDICUS PVT. LTD

160-161, 163-164 & 167, Plot No. 04,

J-Block, Vardhman Location Plaza,

Commercial Centre, Rajouri Garden,

New Delhi-110027.

Ph. No. 011-41046660, 9873427505

Email: info@mhmedicus.com


Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Rotacap Formetrol+fluticasone 6mcg+250mcg	item17	Cost/ Rotacap	Rs. 2.20	12
2.	Inhaler Capsule Indacaterol/ Glycopyrronium 110/50mcg	item19	Cost/ Inhaler Capsule	Rs. 21.90	12
3.	Inhaler INHALER Formoterol + budesonide 6mcg+200mcg	item23	Cost/ Inhaler	Rs. 170	12
4.	Rotacaps Salmeterol+Fluticasone rotacaps 250mcg+50mcg	item47	Cost/ Rotacaps	Rs. 1.29	12
5.	Tablet Pirfenidone 200mg	item63	Cost/ Tablet	Rs. 8.70	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **14A/H/Drugs/2022-23**

To,

M/s MICRO LABS LIMITED

B-29, G.T. Karnal Road,

Industrial Area, Delhi-110033

Email-rakeshsharma_micro@yahoo.co.in

Contact-9350808984, 9999699140

Authorized Distributor:

M/s SRI SAI VINAYAKA ENTERPRISES

F-88 basement, maya puri,

industrial area, phase-ii, new delhi-110064

phone no.- 011-28111211, 9818355226

EMAIL: ssvinayakaenterprises1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Ebastine 10mg	item72	Cost/ Tablet	Rs. 3.20	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 14A/H/Drugs/2022-23

To,

**M/s MIDASCARE PHARMACEUTICALS
PRIVATE LIMITED**

Lotus Corporate Park, B wing, 3rd Floor, Graham Firth
Compound, Jay Coach,
WE Highway, Goregaon (E), Mumbai-400063
Contact No.: 022-42193900, 09013490294
Email: tender@midas-care.com

Authorized Distributor:

M/s Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex
Green Park, Extension (Market)
New Delhi- 110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Inhaler Budesonide 100mcg	item7	Cost/ Inhaler	Rs. 80.50	12
2.	inhaler Formeterol + budesonide 6mcg+ 100mcg	item14	Cost/ inhaler	Rs. 140	12
3.	Inhaler Formeterol + budesonide 6mcg + 400mcg	item15	Cost/ Inhaler	Rs. 145	12
4.	Inhaler Formetrol+fluticasone Inhaler 250 mcg	item18	Cost/ Inhaler	Rs. 175	12
5.	Inhaler INHALER Budesonide 200mcg	item20	Cost/ Inhaler	Rs. 90	12
6.	Inhaler INHALER Fluticasone + Salmeterol 250mcg+25mcg	item21	Cost/ Inhaler	Rs. 119	12
7.	Inhaler INHALER Fluticasone + Salmeterol 125mcg+25mcg	item22	Cost/ Inhaler	Rs. 134	12
8.	Inhaler INHALER Ipratropium 20mcg	item24	Cost/ Inhaler	Rs. 149	12
9.	Inhaler INHALER Ipratropium Br + Levosalbutamol 20mcg+50mcg	item25	Cost/ Inhaler	Rs. 107	12



10.	Inhaler INHALER Salbutamol 100mcg	item26	Cost/ Inhaler	Rs. 70	12
11.	Inhaler INHALER Tiotropium 9mcg	item28	Cost/ Inhaler	Rs. 151	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **14A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED
140, DhamjiShamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Contact-9769562907, 9911337151
Email:elizabeth@neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com

Authorized Distributor:

M/s Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex
Green Park, Extension (Market)
New Delhi- 110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection N-Acetylcysteine 20% 200mg/ml (5ml)	item6	Cost/ Injection	Rs. 32.58	12
2.	Injection N acetyl cysteine 1gm/5ml	item61	Cost/ Injection	Rs. 32.58	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **14A/H/Drugs/2022-23**

To,

M/s SAMARTH LIFE SCIENCES PRIVATE LIMITED

Samarth House, 168, Bangur Nagar,
Off Link Road, Near Ayappa Temple &
Kallol Kali Temple, Goregaon (W), Mumbai-400090.
Contact- 9555601676
Email- abhi-mittal187@yahoo.com

Authorized Distributor:

M/s South Delhi Pharma

60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Acetylcysteine 600mg	item5	Cost/ Tablet	Rs. 4.95	12
2.	Injection Isoprenaline 2 mg 1ml	item32	Cost/ Injection	Rs. 33.27	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

M/s BAL PHARMA LIMITED

5th floor, Laxmi Narayan complex,
10/1, Palace Road, Near Mount
Carmel College, Bangalore-560052
Contact No.: +91-9449840587, 08041379580,
Email- institutionalsales@balpharma.com,
rajesh@balpharma.com

Authorized Distributor:

M/s Speciality Pharma

17/24, main market, Yusuf sarai,
New Delhi 110016
Mobile number - 9717050360
Landline number- 011-26191541
Email id-
specialitypharma1234@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Metformin 500mg	item17	Cost/ Tablet	Rs. 0.44	12
2.	Tablet Acarbose 50mg	item33	Cost/ Tablet	Rs. 2.97	12
3.	Tablet Glimipride 2mg	item37	Cost/ Tablet	Rs. 0.39	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

M/s BIOCON BIOLOGICS LIMITED
Biocon House, Tower 3, Semicon Park,
Electronic City, Phase-II, Hosur Road,
Bengaluru -560100
Contact no.: 8067756775
Email: bbl@biocon.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Human Biphasic Isophane Insulin 30/70 vial 10 ml	item6	Cost/ Injection	Rs. 67.39	5
2.	Injection Human Neutral soluble insulin vial 40 IU (10ml)	item9	Cost/ Injection	Rs. 67.39	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

**M/s BOEHRINGER INGELHEIM I PRIVATE
LIMITED**

Unit no. 202 and part unit no. 201, 2nd floor Godrej
2, Pirojsha Nagar, Eastern Express Highway,
Vikhroll(E) Mumbai-400079
Contact No.: 91-22-26456477
Email: mukul.mishra@boehringer-ingelheim.com
anirudh.sharma@boehringer-ingelheim.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC,
DDA Market, Block B & C,
Phase-IV, Ashok Vihar, Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Linagliptin 5 mg	item16	Cost/ Tablet	Rs. 23.10	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

M/s BRAWN LABORATORIES LIMITED
Plot No.- 13, New Industrial Township,
Faridaba- 121001, Haryana, India
Contact: - 0129-4360113, 844830569
Email: inst@brawnlab.com

Authorized Distributor:
M/s Brawn Biotech Ltd.,
Plot no.44, Pace city-1, sector-37,
Gurgaon-122001, India

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Sitagliptin 100mg	item25	Cost/ Tablet	Rs. 4.79	12
2.	Tablet Sitagliptin 50mg	item26	Cost/ Tablet	Rs. 2.57	12
3.	Tablet Sitagliptin + Metformin 50mg+1000mg	item28	Cost/ Tablet	Rs. 3.93	12
4.	Tablet Sitagliptin + Metformin 50mg+500mg	item29	Cost/ Tablet	Rs. 3.59	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway, Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Dapagliflozin 10mg	item40	Cost/ Tablet	Rs. 8.20	12
2.	Tablet Dapagliflozin + Metformin 10mg + 500mg	item41	Cost/ Tablet	Rs. 8.04	12
3.	Tablet Dapagliflozin + Metformin 10 mg+ 1000mg	item42	Cost/ Tablet	Rs. 9.2	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

M/s MICRO LABS LIMITED
B-29, G.T. Karnal Road, .
Industrial Area, Delhi-110033
Email-rakeshsharma_micro@yahoo.co.in
Contact-9350808984, 9999699140

Authorized Distributor:
M/s Sri Sai Vinayaka Enterprises
F-88 basement, maya puri,
industrial area, phase-ii, new delhi-110064
phone no.- 011-28111211, 9818355226
EMAIL: ssvinayakaenterprises1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Gliclazide 80mg	item34	Cost/ Tablet	Rs. 1.40	12
2.	Tablet Gliclazide moderate release 30mg	item35	Cost/ Tablet	Rs. 1.35	12
3.	Tablet Gliclagide MR 30mg	item44	Cost/ Tablet	Rs. 1.35	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

**M/s SKYMAP PHARMACEUTICALS PRIVATE
LIMITED**

302, Narmada Block-5, Pocket D-6,
Vasant Kunj, New Delhi- 110070
Contact: - 9811792539
Email: - skymaprke@gmail.com

Authorized Distributor:

M/s Royal Care Pharma

203,2nd floor, Anupam Complex,
Opp Jwalaheri Market,
Paschim vihar, New delhi-110063
Contact: 9910238144
Email: rcp.pv99@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Glibenclamide 5mg	item1	Cost/ Tablet	Rs. 0.21	12
2.	Tablet Pioglitazone 15mg	item46	Cost/ Tablet	Rs. 0.43	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **15A/H/Drugs/2022-23**

To,

M/s WOCKHARDT LIMITED

Wockhardt towers ,Bandra Kurla complex,,
Bandra (E) Mumbai-400051
Contact No.: 022-26534444,9820407013
Email:jlade@wockhardt.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Human Biphasic Isophane Insulin 30/70 pen (Disposable) &penfill. 300 IU (3ml)	item4	Cost/ Injection	Rs. 245.00	5
2.	Injection Human Isophane Insulin 40 IU (10ml)	item7	Cost/ Injection	Rs. 69.0	5
3.	Injection Human Neutral soluble insulin penfill 100IU/ml (3ml)	item8	Cost/ Injection	Rs. 105.00	5
4.	Injection Insulin Glargin Pen 300 IU (3ml)	item13	Cost/ Injection	Rs. 314.00	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **16A/H/Drugs/2022-23**

To,

M/s ALLERGAN INDIA PRIVATE LIMITED

Level 6 & 7 Prestige Obelisk No.3, Kasturba

Road, Bangalore-560001

Contact No.: 6266558326

Email: in-institutions@abbvie.com

Palanisamy.s@abbvie.com

Nishigandha.nirgun@abbvie.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Eye Drop Cyclosporin emulsion with glycerin castor oil polysorbate 80 carbomer 1342 preservative free 0.05% 0.4ml	item51	Cost/ Eye Drop	Rs. 1400	12
2.	Eye Drop Bimatoprost with BAK 0.01% w/v + 0.02% 3ML	item53	Cost/ Eye Drop	Rs. 370	12
3.	Intra-Vitreal Implant Dexamethasone Intravitreal Implant 0.7mg	item61	Cost/ Intra-Vitreal Implant	Rs. 19380	12

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **16A/H/Drugs/2022-23**

To,

M/s CIPLA LIMITED

Cipla House ,Peninsula Business Park , Ganpatrao

Kadam Marg, Lower Panel,Mumbai-400013

Contact No.: 9820273567

Email:Prashant.Gupta1@cipla.com

Fazeel.ahmad@cipla.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Eye Drop Dorzolamide 2.0% (5ml)	item15	Cost/ Eye Drop	Rs. 279.08	12

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Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **16A/H/Drugs/2022-23**

To,

M/s MICRO LABS LIMITED

B-29, G.T. Karnal Road,
Industrial Area, Delhi-110033
Email-rakeshsharma_micro@yahoo.co.in
Contact-9350808984, 9999699140

Authorized Distributor:

M/s SRI SAI VINAYAKA ENTERPRISES

F-88 basement, maya puri,
industrial area, phase-ii, new delhi-110064
phone no.- 011-28111211, 9818355226
EMAIL: ssvinayakaenterprises1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Eye Drop Dorzolamide Hydrochloride + Timolol Maleate Combination 2%+0.5% (5ml)	item16	Cost/ Eye Drop	Rs. 137	12
2.	Eye Drop Flurbiprofen 0.03%	item20	Cost/ Eye Drop	Rs. 20.20	12
3.	Eye Drop Travoprost 0.004% 2.5ml	item47	Cost/ Eye Drop	Rs. 190	12
4.	Tablet Acetazolamide 250 mg	item77	Cost/ Tablet	Rs. 1.68	5

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Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **16A/H/Drugs/2022-23**

To,

M/s PROTECH TELELINKS

Suketi Road, Ogli, Kala-Amb District,
Sirmour, Himachal Pradesh
Email: protech.tenders@gmail.com
Contact: 9812004830

Authorized Distributor:

M/s Capital Biotech

SCO no. 103, Commercial Complex, Sector 17,
Jagadhri Yamunanagar Haryana-135003
Email: capitalbiotech01@gmail.com
Contact: 9812004830

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Eye Drop Carboxymethy cellulose 0.5% 10ml	item11	Cost/ Eye Drop	Rs. 7.44	12
2.	Eye Drop Nepafenac 0.1%w/v 5ml	item29	Cost/ Eye Drop	Rs. 14.94	12
3.	Eye Drop Olopatadine 0.1% 5ml	item34	Cost/ Eye Drop	Rs. 14.94	12
4.	Eye Drop Timolol Eye Drop 0.5% 10ml	item45	Cost/ Eye Drop	Rs. 8.74	12
5.	Eye drops Moxifloxacin 0.5 %, 5 ml	item75	Cost/ Eye drops	Rs. 8.74	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **16A/H/Drugs/2022-23**

To,

**M/s RELIANCE LIFE SCIENCES PRIVATE
LIMITED**

R-282, TTC Area of MIDC, Thane
Belapur Road, Rabale, Navi Mumbai
Contact: - 8527597226
Email: - maresh.kumar@relbio.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA
Market, Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Inj. Ranibizumab 10mg/ml	item60	Cost/ Injection	Rs. 8229	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **16A/H/Drugs/2022-23**

To,

M/s SANDOZ PRIVATE LIMITED

MIDC Plot No. 8-A/2,8-B
TTC Industrial Area, Kalwe Block
Village Dighe, Navi Mumbai-400708
Contact No.: 011 23486800, 9555934997
Email: vikas.ranjan@novartis.com

Authorized Distributor:

M/s. Albino Lifesciences Pvt. Ltd.

B-167, G.F., East Of Kailash,
New Delhi – 110065
Contact Person : Mr. Bibhuti Biswal,
Mob. No. : 9910486269,
Mr. Dinesh Daga, Mob. No. : 9810033890
Email Id: mail@albino91.com,
dinesh@albino91.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Solution for intravitreal injection- pre-filled Syringe Brolucizumab 6mg/0.05ml(120mg/ml)	item59	Cost/ Injection	Rs. 21031	12

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Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s APEX LABORATORIES PRIVATE LIMITED
SIDCO Garment Complex, III Floor Guindy, Chennai-
600032, Tamilnadu
Contact No.: 99999669263
Email: vijay.salesadmin@apexlab.com
distribution@apexlab.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Bottle Oral iron preparations containing Ferrous sulphate/Ferrous fumarate/Ferrous gluconate/Ferrous ammonium citrate 200ml	item44	Cost/ Bottle	Rs. 69	12

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(Store Officer (H))

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s BAXTER INDIA PRIVATE LIMITED

5th Floor, Building No. 9, Tower A,

DLF Cyber City, DLF Phase-III,

Gurgaon-122002

Contact: 9810592367

Email: baxsolutions_india@baxter.com,

rahul_gupta@baxter.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Biological Tissue Glue 2 ml	item1	Cost/ Injection	Rs. 8400	5
2.	Injection Biological Tissue Glue 4 ml	item2	Cost/ Injection	Rs. 13545	5
3.	Injection Hemostatic Matrix - in prefilled syringe with calcium chloride & thrombin in vials (Hemostatic matrix) 5ml	item3	Cost/ Injection	Rs. 13125	5
4.	Fluid Icodextrin 7.5% 2lt	item10	Cost/ Fluid	Rs. 640	12

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 17A/H/Drugs/2022-23

To,

**M/s BDR PHARMACEUTICALS INTL
PRIVATE LIMITED**

Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004
Email: manoj.kapoor@bdrpharma.com,
dharmesh@bdrpharma.com
Contact: 9811383631, 022-40560560

Authorized Distributor:

M/s Unitas Pharmaceuticals Pvt. Ltd.

R-28, Inderpuri,
New Delhi- 110012
Telno.-25833497, 5836245,9811044701
Email.com: vandana_unitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Sevelamer Carbonate 800mg	item53	Cost/ Tablet	Rs. 6.93	12

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Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s FRESENIUS KABI INDIA PRIVATE LIMITED

5th Floor, A Wing, Ashoka Plaza, Pune-Nagar
Road, Survey No. 32/2, Vadgaon Sheri,
Viman Nagar, Pune-411014
Contact: 9212592921, 9899079101
Email: nitin.kamra@fresenius-kabi.com,
amit.sharma@fresenius-kabi.com

Authorized Distributor:

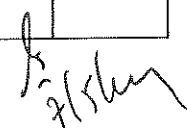
M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Total parenteral nutrition solution in three chambered beg for central infusion containing glucose, lipids and amino acids; Volume 1850-2100 ml, total calories at least 1800 Kcal, osmolality 1000-1500 mOsm/Kg. 1850-2100 ml,	item7	Cost/ Injection	Rs. 3412.5	12
2.	Injection Total parenteral nutrition solution in three chambered beg for peripheral infusion containing glucose, lipids and amino acids; Volume 1000-1250ml, total calories at least 750 Kcal, Osmolality/Osmolarity 600-1000mOsm/Kg 1000-1250 ml	item8	Cost/ Injection	Rs. 1120	12
3.	Injection Dipeptide of N2 Alanyl glutamin 20gm 50 ml	item26	Cost/ Injection	Rs. 689	5
4.	Injection Intralipid phospholipids & fat emulsion solution 100ml 20%	item35	Cost/ Injection	Rs. 350	5
5.	Injection Intravenous Amino acid solution 500 ml 10%	item36	Cost/ Injection	Rs. 550	5



6.	Injection Omega-3-fatty acid 50ml	item43	Cost/ Injection	Rs. 690	5
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This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED

Corporate House, Near Sola Bridge,
S.G. Highway. Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Erthropoietin Beta 5000 I.U.Pfs	item28	Cost/ Injection	Rs. 450.00	12
2.	Injection Erythropoietin Alpha 4000IU 1ml	item29	Cost/ Injection	Rs. 123	12
3.	Tablet Sevelamer Hydrochloride 400mg	item54	Cost/ Tablet	Rs. 10.67	12

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Store Officer (H)

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s MANKIND PHARMA LIMITED

208- Okhla Industrial Estate, Phase-III,

New Delhi-110020

Contact: 011-46541382

Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA Market,

Block B & C, Phase-IV, Ashok Vihar,

Delhi-110052

Tel No. 011-47592000, 8368704158

Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Capsule Mecobalamin+Calcitriol+ Calcium Carbonate+ Ecosapentaenoic Acid+ Docosahexaenoic Acid+Folic Acid +Boron	item16	Cost/ Capsule	Rs. 9.30	12
2.	Drops Vitamin D3 400 IU /ml	item79	Cost/ Drops	Rs. 22.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED

140, Dhamji Shamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Email: elizabeth@neongroup.com,
smnorth@mkt.neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com
Contact-9891252035, 9911337151

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Potassium Chloride 10 ml	item56	Cost/ Injection	Rs. 14.66	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s NOVO NORDISK INDIA PRIVATE LIMITED

Plot No. 32, 47-50 EPIP Area,

Whitefield, Bangalore

Contact: - 080-30713268, 9934300408

Email- surj@novonordisk.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,

Greenpark, Extension (Market),

New Delhi-110016

Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Recombinant Factor VIII 250 IU	item4	Cost/ Injection	Rs. 1755	5
2.	Injection Recombinant Factor VII 1mg	item49	Cost/ Injection	Rs. 39310	5
3.	Injection Recombinant Factor VII 2mg	item50	Cost/ Injection	Rs. 78620	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 17A/H/Drugs/2022-23

To,

M/s PROTECH TELELINKS

Suketi Road, Ogli, Kala-Amb District,
Sirmour, Himachal Pradesh
Email: protech.tenders@gmail.com
Contact: 9812004830

Authorized Distributor:

M/s Capital Biotech

SCO no. 103, Commercial Complex,
Sector 17, Jagadhri Yamunanagar
Haryana-135003
Email: capitalbiotech01@gmail.com
Contact: 9812004830

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Thiamine 100mg 2ml	item55	Cost/ Injection	Rs. 4.24	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **17A/H/Drugs/2022-23**

To,

M/s ZUVENTUS HEALTHCARE LIMITED

Plot Y2, CTS No. 358/A2, Near Nahur Railway Station,

Nahur (West) Mumbai-400078

CONTACT No.: 9312589159

Email: Deepak.thukral@zuventus.com

Authorized Distributor:

M/s Unitas Pharmaceuticals Pvt. Ltd.,

R-28, Inderpuri, New Delhi- 110012

Tel no.- 25833497, 25836245,

9811044701

Email.com: vandana_units@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Bottle Multivitamins & Minerals Combination Oral preparations containing Vit.B Complex, C with or without Vit. A, D. Minerals & trace elements 200ml	item66	Cost/ Bottle	Rs. 80	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **18A/H/Drugs/2022-23**

To,

M/s CIPLA LIMITED

Cipla House ,Peninsula Business Park , Ganpatrao

Kadam Marg, Lower Panel,Mumbai-400013

Contact No.: 9820273567

Email:Prashant.Gupta1@cipla.com

Fazeel.ahmad@cipla.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Acyclovir 400mg	item10	Cost/ Tablet	Rs. 10.94	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **18A/H/Drugs/2022-23**

To,

M/s HETERO HEALTHCARE LIMITED

Hetero Corporate, 7-2-A2,
Industrial Estates, Sanathnagar,
Hyderabad, Telangana- 500018
Contact No.- 9704404547
E-mail: santhoshreddy.v@heterohealthcare.com,
tenders@heterohealthcare.com

Authorized Distributor:

M/s Pharma-Surge Impex

Plot no-4 & 5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Declatasvir 60mg	item1	Cost/ Tablet	Rs 19.57	12
2.	Tablet Ledipasvir+ Sofosbuvir 90mg+400mg	item4	Cost/ Tablet	Rs 81.67	12
3.	Tablet Tenofovir 300mg	item8	Cost/ Tablet	Rs 6.9	12
4.	Tablet Tenofovir Alafenamide 25mg	item13	Cost/ Tablet	Rs. 19.56	12
5.	Tablet Oseltamavir 75mg	item16	Cost/ Tablet	Rs. 21.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **18A/H/Drugs/2022-23**

To,

M/s MYLAN LABORATORIES LIMITED

11th Floor, Block 3 ,Prestige

Platina,Kadubisanahalli,Bangalore-560087

Contact No.: 9717714579

Email:mamta.bhatt@vitaris.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Sofosbuvir 400mg	item7	Cost/ Tablet	Rs 42.00	12
2.	Tablet Sofosbuvir + Velpatasvir 400mg+ 100mg	item12	Cost/ Tablet	Rs. 80.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **18A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED
140, DhamjiShamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Contact-9769562907, 9911337151
Email:elizabeth@neongroup.com,
rsmcdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com

Authorized Distributor:

M/s Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex
Green Park, Extension (Market)
New Delhi- 110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Injection Acyclovir 250mg 10ml	item9	Cost/ Injection	Rs 81	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **18A/H/Drugs/2022-23**

To,

M/s PHARMA CHEMICO LABORATORIES
Devghat, P.O Saproon, Solan, -173211,
Himachal Pradesh
Contact No.: 91-1792-227169, 7042699038
Email: tenderspcl@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Syrup Methadone 5mg/ml	item20	Cost/ Syrup	Rs. 669	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 18A/H/Drugs/2022-23

To,

M/s ZYDUS LIFESCIENCES LIMITED
Zydus Corporate Park, Scheme no.63
Survey no. 536,Khoraj (Gandhinagar)
S.G.Highway, Ahmedabad - 382481
Contact no.: 7971800000

Authorized Distributor:
M/s Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex
Green Park, Extension (Market)
New Delhi- 110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tablet Entecavir 1 mg	item2	Cost/ Tablet	Rs. 30	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 19A/H/Drugs/2022-23

To,

**M/s BDR PHARMACEUTICALS INTL
PRIVATE LIMITED**

Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004

Email: manoj.kapoor@bdrpharma.com,
dharmesh@bdrpharma.com

Contact: 9811383631

Authorized Distributor:

M/s Uritas Pharmaceuticals pvt.

Ltd. R-28, Inderpuri,

New Delhi- 110012

Telno.-25833497, 5836245,9811044701

Email.com: vandana_uitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Capsule Acitretin 10MG	item40	Cost/ Capsule	Rs. 6.98	12
2.	Capsule Acitretin 25MG	item41	Cost/ Capsule	Rs.16.49	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


✓ **Store Officer (H)**

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **19A/H/Drugs/2022-23**

To,

**M/s GLAXOSMITHKLINE PHARMACEUTICALS
LIMITED**

252, Dr. Annie Besant Road,

Worli, Mumbai- 400030

Contact: - 9990731210

Email: imran.2.hashmi@gsk.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Ointment Betamethasone valerate 0.12% (20gm)	item26	Cost/ Ointment	Rs.14.87	12
2.	Ointment Betamethasone valerate + neomycin 0.12% + 0.5% (20gm)	item27	Cost/ Ointment	Rs.35.93	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **19A/H/Drugs/2022-23**

To,

**M/s GLENMARK PHARMACEUTICALS
LIMITED**
Corporate Enclave, B.D. Sawant, Chakala,
Andheri ,East Mumbai-400099
Contact No.: 91-2240888999,9820437095
Email: govt.tenders@glenmarkpharma.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

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Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Tube Adaplene gel 0.1% (15gm)	item5	Cost/ Tube	Rs. 39.77	12
2.	Ointment Fluocinolone 0.1% (20gm)	item29	Cost/ Ointment	Rs. 85	12
3.	Ointment Fluocinolone 0.025% (15gm)	item30	Cost/ Ointment	Rs. 67	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 19A/H/Drugs/2022-23

To,

**M/s NANZ MED SCIENCE PHARMA
PRIVATE LIMITED**
Rampur Ghat, Paonta Sahib-173025
District Sirmour, Himachal Pradesh, India
Contact: 9805070502
Email: admin@nanzpharma.com,
nanzmedscience@gmail.com

Authorized Distributor:
M/s Pharma-Surge Impex
Plot no-4 & 5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Ointment Silver Sulphadiazine 1%w/w (25gm)	item3	Cost/ Ointment	Rs. 15	12
2.	Ointment Silver Sulphadiazine 1%w/w (250gm)	item4	Cost/ Ointment	Rs. 133	12
3.	Tube Clotrimazole 1%w/w (15gm)	item6	Cost/ Tube	Rs. 8.40	12
4.	Ointment Sodium fusidate 2% 10gm	item13	Cost/ Ointment	Rs. 24	12
5.	Lotion Ketoconazole lotion 2% (60ml)	item19	Cost/ Lotion	Rs. 21	12
6.	Solution Minoxidil Solution 60ml 2%	item23	Cost/ Solution	Rs. 118	12
7.	Solution Minoxidil Solution 60ml 5%	item24	Cost/ Solution	Rs.133	12
8.	Ointment Polymyxin B Sulph.equivalent to neomycin 5000IU + 3400IU per gm (20gm-30gm)	item33	Cost/ Ointment	Rs. 42	12
9.	Ointment Silver Sulphadiazine+Chlorhexidine 1% + 0.2% (25gm)	item34	Cost/ Ointment	Rs. 30	12



10.	Tube Povidone Iodine 5%w/w (15gm)	item48	Cost/ Tube	Rs. 9.60	12
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This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **19A/H/Drugs/2022-23**

To,

**M/s WALLACE PHARMACEUTICALS
PRIVATE LIMITED**

A-303/312, Floral Deck Plaza.
Off. M.I.D.C. Central Road,
Andheri- East, Mumbai- 400093
Contact No. - 9224597962, +91-22-29261100
E-mail: institution@wallacepharma.net,
institution@wallacepharma.net

Authorized Distributor:
Unitas Pharmaceuticals Pvt. Ltd.,
R-28, Inderpuri,
New Delhi-110012,
Tel.Nos.:25833497,25836245,
9811044701
Email: vandana_unitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

Sr. no.	Item Name	Tender serial no.	Units	Basic Rate Without Tax (INR)	GST %
1.	Ointment Tacrolimus 0.1%	item44	Cost/ Ointment	Rs. 75	12
2.	Ointment Tacrolimus 0.03%	item45	Cost/ Ointment	Rs. 39	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s BAL PHARMA LIMITED

5th floor, Laxmi Narayan complex,
10/1, Palace Road, Near Mount
Carmel College, Bangalore-560052
Contact No.: +91-9449840587, 08041379580,
Email- institutionalsales@balpharma.com,
rajesh@balpharma.com

Authorized Distributor:

M/s Speciality Pharma
17/24, main market, Yusuf sarai,
New Delhi 110016
Mobile number - 9717050360
Landline number- 011-26191541
Email id-
specialitypharma1234@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Metronidazole 400mg	item22	Cost/ Tablet	Rs. 0.79	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway. Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Capsule Lansoprazole 15 mg	item6	Cost/ Capsule	Rs. 3.76	12
2.	Tablet Lansaprazole 30mg	item66	Cost/ Tablet	Rs. 7.52	12
3.	Tablet Mozapride 5MG	item72	Cost/ Tablet	Rs. 4.92	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s IPCA LABORATORIES LIMITED

48, Kandivli Industrial Estate,
Kandivli (west), Mumbai 400067
Contact: 9312947787
Email: mohit.jain@ipca.com
sandesh.parbhu@ipca.com

Authorized Distributor:

M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Sulfasalazine 500mg	item10	Cost/ Tablet	Rs. 2.44	12
2.	Tablet Metoclopramide 10mg	item21	Cost/ Tablet	Rs. 0.49	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s MANKIND PHARMA LIMITED
208- Okhla Industrial Estate, Phase-III,
New Delhi-110020
Contact: 011-46541382
Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:
M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Ondansetron 4mg	item32	Cost/ Tablet	Rs. 0.66	12
2.	Tablet Trypsin + Bromelain + Rutoside 48mg+90mg+100mg	item45	Cost/ Tablet	Rs. 4.85	12
3.	Powder Ispaghula Husk & Lactulose 3.5gm+ 10gm (80-100gm)	item60	Cost/ Powder	Rs. 200.69	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 20A/H/Drugs/2022-23

To,

M/s TABLETS (INDIA) LIMITED

#72, Marshalls Road, 'Jhaver Centre' RA Building,

4th Floor, Egmore, Chennai-600008

Contact No.: 9600152152

Email: tenders@tabletsindia.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Ondansetron 8mg 4ml	item36	Cost/ Injection	Rs. 4.71	12
2.	(Colonic Preparation) Polyethylene Glycol 3350	item38	Cost/ (Colonic Preparation)	Rs. 150	12
3.	capsule Billion cfu of L.rhamnous GR-1 and L.reuteri- probiotic capsule	item47	Cost/ capsule	Rs. 44.24	12
4.	sachet polyethylene glycol, activated dimethicone with electrolytes for oral solution 17.1gm	item48	Cost/ sachet	Rs. 22.87	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
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5. Officer In-charge (Medicine Store)

6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s MICRO LABS LIMITED

B-29, G.T. Karnal Road,

Industrial Area, Delhi-110033

Email-rakeshsharma_micro@yahoo.co.in

Contact-9350808984, 9999699140

Authorized Distributor:

M/s Sri Sai Vinayaka Enterprises

F-88 basement, maya puri,

industrial area, phase-ii, new delhi-
110064

phone no.- 011-28111211, 9818355226

EMAIL:

ssvinayakaenterprises1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Ursodeoxycholic Acid 150mg	item44	Cost/ Tablet	Rs. 5.50	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s PROTECH TELELINKS

Suketi Road, Ogli, Kala-Amb District,
Sirmour, Himachal Pradesh
Email: protech.tenders@gmail.com
Contact: 9812004830

Authorized Distributor:

M/s Capital Biotech

SCO no. 103, Commercial Complex,
Sector 17, Jagadhri Yamunanagar
Haryana-135003
Email: capitalbiotech01@gmail.com
Contact: 9812004830

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Pantoprazole 40mg	item13	Cost/ Injection	Rs. 5.94	12
2.	Injection Esmoprazole 40 mg	item64	Cost/ Injection	Rs. 11.44	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

**M/s SKYMAP PHARMACEUTICALS PRIVATE
LIMITED**

302, Narmada Block-5, Pocket D-6,
Vasant Kunj, New Delhi- 110070
Contact: - 9811792539
Email: - skymaprke@gmail.com

Authorized Distributor:

M/s Royal Care Pharma
203,2nd floor, Anupam Complex,
Opp Jwalaheri Market,
Paschim vihar, New delhi-110063
Contact: 9910238144
Email: rcp.pv99@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Bottle Lactulose sugar free 10gm/15ml 100ml	item5	Cost/ Bottle	Rs. 42.90	5
2.	Capsule Omeprazole 20 mg	item8	Cost/ Capsule	Rs. 0.53	12
3.	Tablet Ranitidine 150mg	item16	Cost/ Tablet	Rs. 0.55	12
4.	Tablet Ondansetron 8mg	item33	Cost/ Tablet	Rs. 0.54	12
5.	Tablet Domperidone 10mg.	item35	Cost/ Tablet	Rs. 0.28	12
6.	Bottle Ondansetron 2mg/5ml	item37	Cost/ Bottle	Rs. 10.98	12
7.	Tablet Drotaverine 40mg	item73	Cost/ Tablet	Rs. 0.89	12
8.	Tablet Drotaverine 80mg	item74	Cost/ Tablet	Rs. 1.39	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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3. Store Accounts Section
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s TORRENT PHARMACEUTICALS LIMITED

Torrent House, Ahmadabad- 380009

Gujarat (India)

Contact No.- 9999129792/9310153033

E-mail: atulshah@torrentpharma.com

Authorized Distributor:

M/s M.H. Medicus Pvt. Ltd.

160-161,163-164 & 167, PLOT NO. 04,

J Block, Vardhman Location Plaza,

Commercial Centre, Rajouri Garden,

New Delhi- 110027

Ph. NO. 011-41046660

Email ID: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Esmoprazole 40mg	item7	Cost/ Tablet	Rs. 0.99	12
2.	Tablet Levosulpiride 25mg	item67	Cost/ Tablet	Rs. 4.37	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **20A/H/Drugs/2022-23**

To,

M/s ZYDUS HEALTHCARE LIMITED Zydus Tower, Satellite Cross Roads, Ahmedabad- 380015 Contact No.- +91-79-26868100 E-mail: sandeep.sarkar@zyduscadila.com institution.business@sanofi.com	Authorized Distributor: M/s. Aark Pharmaceuticals S-14, 1st Floor, Uphar Complex, Greenpark, Extension (Market), New Delhi-110016 Tel: 9643606201 Email: tender@aarkpharma.co.in
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Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Tinidazole 500 mg	item41	Cost/ Tablet	Rs. 5	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

**M/s BDR PHARMACEUTICALS INTL
PRIVATE LIMITED**

Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004
Email: manoj.kapoor@bdrpharma.com,
dharmesh@bdrpharma.com
Contact: 9811383631, 022-40560560

Authorized Distributor:

M/s Unitas Pharmaceuticals Pvt. Ltd.
R-28, Inderpuri,
New Delhi- 110012
Telno.-25833497, 5836245,9811044701
Email.com: vandana_unitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Rivaroxaban 2.5mg	item23	Cost/ Tablet	Rs. 2.50	12
2.	Tablet Rivaroxaban 10mg	item24	Cost/ Tablet	Rs. 1.53	12
3.	Tablet Rivaroxaban 15mg	item25	Cost/ Tablet	Rs. 1.80	12
4.	Tablet Rivaroxaban 20mg	item26	Cost/ Tablet	Rs. 2.16	12
5.	Tablet Deferasirox 250mg	item29	Cost/ Tablet	Rs. 5.40	12
6.	Tablet Deferasirox 400mg	item31	Cost/ Tablet	Rs. 8.67	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s BRAWN LABORATORIES LIMITED

Plot No.- 13, New Industrial Township,

Faridaba- 121001, Haryana, India

Contact: - 0129-4360113, 844830569

Email: inst@brawnlab.com

Authorized Distributor:

M/s Brawn Biotech Ltd.,

Plot no.44, Pace city-1, sector-37,

Gurgaon-122001, India

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Apixaban 2.5mg	item27	Cost/ Tablet	Rs. 0.74	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s GLAND PHARMA LIMITED

MIG-II, Plot No. 48.49,56,57,

A.P.H.B Colony, opp. I.D.P.L Colony,

Chintal, Hyderabad-500037

Contact No.: 040-69113000

Email: sarada@glandpharma.com

narayanab@glandpharma.com

susheel.org@glandpharma.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,

Greenpark, Extension (Market),

New Delhi-110016

Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Heparin Lock Flush solution 10 IU/ml vial of 10.0 ml	item10	Cost/ Injection	Rs. 26.40	12
2.	Injection Protamine Suplhate Note: Injection Heparin 25000 IU and Inj Protamine will be purchased from single firm who are quoting both the items and selection shall be made on overall lowest (composite) basis after adding total cost of both the items. 50mg 5 ml amp	item12	Cost/ Injection	Rs. 29.70	5
3.	Injection Tirofiban 5mg/100ml	item13	Cost/ Injection	Rs. 720.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

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1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s HETERO HEALTHCARE LIMITED

Hetero Corporate, 7-2-A2,
Industrial Estates, Sanathnagar,
Hyderabad, Telangana- 500018
Contact No.- 9704404547
E-mail: santhoshreddy.y@heterohealthcare.com,
tenders@heterohealthcare.com

Authorized Distributor:

M/s Pharma-Surge Impex
Plot no-4 &5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Inj (PFS) Darbepoietin Alpha 60 mcg	item43	Cost/ Inj (PFS)	Rs. 1047	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway. Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Fenofibrate 160mg	item5	Cost/ Tablet	Rs. 9.20	12
2.	Inj (PFS) Pegylated Recombinant erythropoietin 100 mcg	item44	Cost/ Inj (PFS)	Rs. 3950	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer/(H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s LUPIN LIMITED

3rd Floor, Kalpatru Inspire,
Off W.E. Highway, Santacruz,
(East), Mumbai-400055
Contact: (91-22) 66402323, 8879967909
Email: manoj Singh4@lupin.com

Authorized Distributor:

M/s M.H.MEDICUS PVT. LTD
160-161, 163-164 & 167, Plot No. 04,
J-Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027.
Ph. No. 011-41046660, 9873427505
Email: info@mhmedicus.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Iron Isomaltoside 1000 5ml vial	item45	Cost/ Injection	Rs. 1569	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer - In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s ROCHE PRODUCTS (INDIA) PRIVATE LIMITED
146-B, 166A, Unit no. 7.8.9, 8th floor, R city office, R city
Mall, Lal Bahadur Shastri Marg, Ghatkopar, Mumbai-
400086
Contact No.: 91-2250457300
Email: institutional.business@roche.com
Hemelin.karekar@roche.com
Rajenderan.krishnamurthy@roche.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Emicizumab 60mg/0.4ml	item34	Cost/ Injection	Rs. 81437.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s MSN LABORATORIES PRIVATE LIMITED
Plot No. C-24, Industrial Estate,
Sanathnagar, Hyderabad-500018
Contact: 7331135495, 9867341164
Email: tenders@msnlabs.com

Authorized Distributor:
M/s. Health N Care
A 8, Block B1, ground floor,
Mohan Cooperative Industrial Estate
Mathura Road, New Delhi-110044
Contact: 8826569386
Email: healthncare.delhi@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Capsule Dabigatran 75mg	item35	Cost/ Capsule	Rs. 9.89	12
2.	Capsule Dabigatran 150mg	item36	Cost/ Capsule	Rs. 12.20	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED

140, Dhamji Shamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Email: elizabeth@neongroup.com,
smnorth@mkt.neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com
Contact-9891252035, 9911337151

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Inj. Menandione	item11	Cost/ Injection	Rs. 11.94	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 21A/H/Drugs/2022-23

To,

M/s PROTECH TELELINKS
Suketi Road, Ogli, Kala-Amb District,
Sirmour, Himachal Pradesh
Email: protech.tenders@gmail.com
Contact: 9812004830

Authorized Distributor:
M/s Capital Biotech
SCO no. 103, Commercial Complex,
Sector 17, Jagadhri Yamunanagar
Haryana-135003
Email: capitalbiotech01@gmail.com
Contact: 9812004830

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Inj. Heparin 5000IU 5ml	item7	Cost/ Injection	Rs. 47.44	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s RELIANCE LIFE SCIENCES PRIVATE LIMITED

R-282, TTC Area of MIDC, Thane
Belapur Road, Rabale, Navi Mumbai
Contact: - 8527597226
Email: - mahesh.kumar@relbio.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Fibrinogen Concentrate 1gm	item33	Cost/ Injection	Rs. 10476.00	5
2.	Inj (PFS) Darbepoietin Alpha 40 mcg	item42	Cost/ Inj (PFS)	Rs. 649.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s VIM MEDITECH PRIVATE LIMITED

Survey No. 253, N.H.8, Opp. Kerela GIDC,

Village-kerela, Ta-Bavla, Dist,

Ahemdabad-382220 (Gujrat)

Contact No.: 9099942735

Email: aashit.modi@vimmeditech.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Enoxaparin, PF Syringe 80mg/0.8ml	item46	Cost/ Injection	Rs. 172.80	5
2.	Inj. Enoxaparin, PF Syringe 40mg /0.4ml	item47	Cost/ Injection	Rs. 118.80	5
3.	Inj. Enoxaparin, PF Syringe 60mg/ 0.6ml	item48	Cost/ Injection	Rs. 145.80	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **21A/H/Drugs/2022-23**

To,

M/s ZUVENTUS HEALTHCARE LIMITED

Plot Y2, CTS No. 358/A2, Near Nahur Railway Station,
Nahur (West) Mumbai-400078

CONTACT No.: 9312589159

Email: Deepak.thukral@zuventus.com

Authorized Distributor:

M/s Uritas Pharmaceuticals Pvt. Ltd.,

R-28, Inderpuri, New Delhi- 110012

Tel no.- 25833497, 25836245,

9811044701

Email.com:vandana_uitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Nicoumalone 1mg	item50	Cost/ Tablet	Rs. 1.70	12
2.	Tablet Nicoumalone 2mg	item51	Cost/ Tablet	Rs. 2.50	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s ABBOTT INDIA LIMITED
3, Corporate Park, Sion Trombay Road,
Mumbai-400071
Contact No.: 91-2238161000
Email: institution.business@abott.com ,
upkar.sheel@abott.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Ibuprofen 400mg	item38	Cost/ Tablet	Rs. 0.92	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s APEX LABORATORIES PRIVATE LIMITED
SIDCO Garment Complex, III Floor Guindy, Chennai-
600032, Tamilnadu
Contact No.: 99999669263
Email: vijay.salesadmin@apexlab.com
distribution@apexlab.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Paracetamol + Tramadol 325 mg + 37.5mg	item23	Cost/ Tablet	Rs. 3.10	12
2.	Suspension(Drops) Paracetamol 100mg	item24	Cost/ Suspension(Drops)	Rs. 16	12
3.	Tablet Paracetamol (Dispersible) 125mg	item28	Cost/ Tablet	Rs.0.58	12
4.	Tablet Paracetamol (Dispersible) 250mg	item29	Cost/ Tablet	Rs. 0.75	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s BAL PHARMA LIMITED

5th floor, Laxmi Narayan complex,
10/1, Palace Road, Near Mount
Carmel College, Bangalore-560052
Contact No.: +91-9449840587, 08041379580,
Email- institutionalsales@balpharma.com,
rajesh@balpharma.com

Authorized Distributor:

M/s Speciality Pharma
17/24, main market, Yusuf sarai,
New Delhi 110016
Mobile number - 9717050360
Landline number- 011-26191541
Email id-
specialitypharma1234@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Paracetamol 500 mg	item27	Cost/ Tablet	Rs. 0.57	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s FRESINIUS KABI INDIA PRIVATE LIMITED
5th Floor, A Wing, Ashoka Plaza, Pune-Nagar
Road, Survey No. 32/2, Vadgaon Sheri,
Viman Nagar, Pune-411014
Contact: 9212592921, 9899079101
Email: nitin.kamra@fresenius-kabi.com,
amit.sharma@fresenius-kabi.com

Authorized Distributor:

M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Paracetamol I.V. 500 mg 50ml	item30	Cost/ Injection	Rs. 95	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s GENO PHARMACEUTICALS PRIVATE LIMITED
Pharmaceutical Complex. Tivim Industrial Estate,
Karaswada, Mapusa, Goa-403526
Contact No.: 8888733200
Email: genogoa@genopharma.com
pshirodkar@genopharma.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Paracetamol 650mg	item26	Cost/ Tablet	Rs. 0.67	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway, Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Naproxen+Domperidone 500mg+10mg	item35	Cost/ Tablet	Rs. 6.30	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s MICRO LABS LIMITED

B-29, G.T. Karnal Road,
Industrial Area, Delhi-110033
Email-rakeshsharma_micro@yahoo.co.in
Contact-9350808984, 9999699140

Authorized Distributor:

M/s Sri Sai Vinayaka Enterprises

F-88 basement, maya puri,
industrial area, phase-ii, new delhi-
110064
phone no.- 011-28111211, 9818355226
EMAIL:
ssvinayakaenterprises1@gmail.com


Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Indomethacin 75mg	item41	Cost/ Tablet	Rs. 2.70	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

**M/s MIDASCARE PHARMACEUTICALS
PRIVATE LIMITED**
Lotus Corporate Park, B wing, 3 rd Floor,
Graham Firth Compound, Jay Coach,
WE Highway, Goregaon (E), Mumbai-400063
Contact No.: 022-42193900, 09013490294
Email: tender@midas-care.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Spray DICLOFENAC + LINSEED + MENTHOL+ METHYL SALICYLATE 1.16%W/V + 3%W/V +5%W/V + 10%W/V	item25	Cost/ Spray	Rs. 71	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED

140, Dhamji Shamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Email: elizabeth@neongroup.com,
smnorth@mkt.neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com
Contact-9891252035, 9911337151

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Suppository Paracetamol 80mg	item31	Cost/ Suppository	Rs. 4.76	12
2.	Injection Diclofenac 25mg/ 3 ml Vial	item44	Cost/ Injection	Rs. 3.57	12
3.	suppository Paracetamol suppository 170 mg	item52	Cost/ suppository	Rs. 5.96	12
4.	Injection Paracetamol 300mg 2ml	item55	Cost/ Injection	Rs. 5.91	12

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Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **22A/H/Drugs/2022-23**

To,

M/s TROIKAA PHARMACEUTICALS LIMITED

Commerce house-1, Satya Marg,
Bodakdev, Ahmedabad- 380054
Gujarat
Contact No.- 9879615617
E-mail: institution@troikaapharma.com,
tendersupport@troikaapharma.com
sanaul.karim01@gmail.com

Authorized Distributor:

M/s Basal Healthcare India Pvt. Ltd.
P-11, second floor, Pandav
Nagar, Mayurvihar phase-1,
Delhi-110091
ph:9717040799, 8130492280
Email: Sanjay.basalhealthcare@gmail.com,
sanaul.karim01@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Injection Diclofenac (without Cremophor &Transcutol-P) 75 mg/1ml	item34	Cost/ Injection	Rs. 17	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

**M/s BDR PHARMACEUTICALS INTL
PRIVATE LIMITED**
Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004
Email: manoj.kapoor@bdrpharma.com,
dharmesh@bdrpharma.com
Contact: 9811383631, 022-40560560

Authorized Distributor:
M/s Uritas Pharmaceuticals Pvt. Ltd.
R-28, Inderpuri,
New Delhi- 110012
Telno.-25833497, 5836245,9811044701
Email.com: vandana_uitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Inj. Liposomal Amphotericin-B (dextrose) 50mg/50ml	item9	Cost/ Injection	Rs. 1080	5
2.	Injection Anidulafungin 100mg	item10	Cost/ Injection	Rs. 2070	5
3.	Injection Micafungin Sod. 50mg	item19	Cost/ Injection	Rs. 1080	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s CONCORD BIOTECH LIMITED
1601-1602, B-wing
Mondeal Heights, Iskon Cross road
SG Highway, Ahmadabad-380015, Gujrat
Contact: 07968138721
Email:

Authorized Distributor:
M/s M.H.MEDICUS PVT. LTD
160-161, 163-164 & 167, Plot No. 04,
J-Block, Vardhman Location Plaza,
Commercial Centre, Rajouri Garden,
New Delhi-110027
Ph. No. 011-41046660, 9873427505

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Mycophenolate Mofetil 750mg	item40	Cost/ Tablet	Rs. 16.35	5
2.	Tablet Tacrolimus 2 mg	item50	Cost/ Tablet	Rs. 10.75	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad) & Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED

Corporate House, Near Sola Bridge,
S.G. Highway. Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Methoxy PolyethyleneglycolEpoietin Beta 50mcg 0.3ml	item53	Cost/ Injection	Rs. 1930	12
2.	Injection Methoxy PolyethyleneglycolEpoietin Beta 100mcg 0.3ml	item54	Cost/ Injection	Rs. 3950	12
3.	Tablet Tamsulosin 0.2mg	item58	Cost/ Tablet	Rs. 4.01	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s IPCA LABORATORIES LIMITED

48, Kandivli Industrial Estate,
Kandivli (west), Mumbai 400067
Contact: 9312947787
Email: mohit.jain@ipca.com
sandesh.parbhu@ipca.com

Authorized Distributor:

M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Tolteridene 4mg	item61	Cost/ Tablet	Rs. 11	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s JOHNSON AND JOHNSON PRIVATE LIMITED
L.B.S. Marg, Mulund (W),
Mumbai -400080
Contact No.: 9315146546
Email: tenderspharma@its.jnj.com

Authorized Distributor:

M/s Adarsh Distributor
203, 2nd Floor, Shri Mahavir Bhawan,
C-2, Karampura, New Delhi 110015
Ph: 9810164557

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Infliximab 100mg	item35	Cost/ Injection	Rs. 14158.11	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s MANKIND PHARMA LIMITED
208- Okhla Industrial Estate, Phase-III,
New Delhi-110020
Contact: 011-46541382
Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:
M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Sirolimus 1mg	item48	Cost/ Tablet	Rs. 18	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

**M/s NANZ MED SCIENCE PHARMA PRIVATE
LIMITED**

Rampur Ghat, Paonta Sahib-173025
District Sirmour, Himachal Pradesh, India
Contact: 9805070502
Email: admin@nanzpharma.com,
nanzmedscience@gmail.com

Authorized Distributor:

M/s Pharma-Surge Impex

Plot no-4 &5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com


Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Powder Clotrimazole Powder 1% (30gm)	item4	Cost/ Pack	Rs. 15	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s NOVARTIS INDIA LIMITED
3RD Floor, Vatika Business Centre,
Thapar House, 124 Janapath Road,
New Delhi-110001
Contact No.: 9873558222
Email:dinesh.dinkar@novartis.com

Authorized Distributor:
M/s. Albino Lifesciences Pvt. Ltd.
B-167,G.F., East Of Kailash,
New Delhi – 110065
Contact Person : Mr. Bibhuti Biswal,
Mob. No. : 9910486269,
Mr. Dinesh Daga, Mob. No. :9810033890
Email Id: mail@albino91.com,
dinesh@albino91.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Basilliximab 20 mg	item32	Cost/ Injection	Rs. 48000	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s PFIZER PRODUCTS INDIA PRIVATE LIMITED
1802/1901 Plot No. C-70, G Block
Bandra Kurla Complex, Bandra, Mumbai
Contact: - 9760289797, 9910065011
Email: - deepakkumar.jha@pfizer.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Capsule Isovconazole 100mg	item1	Cost/ Capsule	Rs. 2189.90	12
2.	Injection Isavuconazole 200mg injection	item3	Cost/ Injection	Rs. 8029.00	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s PROTECH TELELINKS

Suketi Road, Ogli, Kala-Amb District,
Sirmour, Himachal Pradesh
Email: protech.tenders@gmail.com
Contact: 9812004830

Authorized Distributor:

M/s Capital Biotech

SCO no. 103, Commercial Complex,
Sector 17, Jagadhri Yamunanagar
Haryana-135003
Email: capitalbiotech01@gmail.com
Contact: 9812004830

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Caspofungin 50mg	item11	Cost/ Injection	Rs. 1039.94	5
2.	Injection Caspofungin 70mg	item12	Cost/ Injection	Rs. 1194.94	5
3.	Injection Hydrocortisone Succinate 100mg/vial	item34	Cost/ Injection	Rs. 10.44	5
4.	Injection Methyl Prednisolone Acetate 40mg 1ml	item36	Cost/ Injection	Rs. 22.44	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s RELIANCE LIFE SCIENCES PRIVATE LIMITED

R-282, TTC Area of MIDC, Thane
Belapur Road, Rabale, Navi Mumbai
Contact: - 8527597226
Email: - mahesh.kumar@relbio.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Omalizumab 150mg	item43	Cost/ Injection	Rs. 8800	5

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s SAMARTH LIFE SCIENCES PRIVATE LIMITED

Samarth House, 168, Bangur Nagar,
Off Link Road, Near Ayappa Temple &
Kallol Kali Temple, Goregaon (W),
Mumbai-400090.
Contact- 9555601676
Email- abhi-mittal187@yahoo.com

Authorized Distributor:

M/s South Delhi Pharma
60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Hydrocortisone 5mg	item33	Cost/ Tablet	Rs. 2.43	5
2.	Capsule Tamsulosin 0.4 mg	item59	Cost/ Capsule	Rs. 3.87	12
3.	Tablet Tamsulosin+ Dutasteride 0.4+0.5 mg	item60	Cost/ Tablet	Rs.3.42	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s TROIKAA PHARMACEUTICALS LIMITED

Commerce house-1, Satya Marg,
Bodakdev, Ahmedabad- 380054
Gujarat
Contact No.- 9879615617
E-mail: institution@troikaapharma.com,
tendersupport@troikaapharma.com
sanaul.karim01@gmail.com

Authorized Distributor:

M/s Basal Healthcare India Pvt. Ltd.
P-11, second floor, Pandav
Nagar, Mayurvihar phase-1,
Delhi-110091
ph:9717040799, 8130492280
Email: Sanjay.basalhealthcare@gmail.com,
sanaul.karim01@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Pralidoxime (PAM chloride) 1 gm	item29	Cost/ Injection	Rs. 54	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **23A/H/Drugs/2022-23**

To,

M/s VERVE HUMAN CARE LABORATORIES

Plot No.- 15-A, Pharmacy,
Selaqui, Dehradun, uttrakhand- 248011
Contact No.- 9212409003
E-mail: sushil@vervehumancare.com,
admin@vervehealth.in

Authorized Distributor:

M/s Verve Health Care Limited

A-43, Basement, G.T Karnal Road
Industrial Area Delhi- 110033
Contact No.: 9212409003, 7042699038
E-mail: sushil@vervehumancare.com
Info@vervehumancare.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Naloxone 400 mcg	item28	Cost/ Injection	Rs. 65	12

This letter may also be considered as a Letter of Intent W.e.f. 07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s ABBOTT INDIA LIMITED

3, Corporate Park, Sion Trombay Road,
Mumbai-400071

Contact No.: 91-2238161000

Email: institution.business@abott.com ,
upkar.sheel@abott.com

Authorized Distributor:

M/s Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex

Green Park, Extension (Market)

New Delhi- 110016

Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Capsule Pancreatic Enzyme Supplement Lipase 10000 units	item 19	Cost/ Capsule	Rs. 22.55	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s APEX LABORATORIES PRIVATE LIMITED
SIDCO Garment Complex, III Floor Guindy, Chennai-
600032, Tamilnadu
Contact No.: 99999669263
Email: vijay.salesadmin@apexlab.com
distribution@apexlab.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Syrup Elemental iron, Folic acid 200ml	item27	Cost/ Syrup	Rs. 74	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

**M/s BDR PHARMACEUTICALS INTL PRIVATE
LIMITED**

Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004

Email: manoj.kapoor@bdrpharma.com,

dharmesh@bdrpharma.com,

Contact: 9811383631, 022-40560560

Authorized Distributor:

M/s Unitas Pharmaceuticals Pvt.Ltd.

R-28, Inderpuri,

New Delhi- 110012

Telno.-25833497, 5836245,9811044701

Email.com: vandana_unitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Iron Carboxymaltose 100mg/2ml 100mg/2ml	item158	Cost/ Injection	Rs. 270	12
2.	Injection Sugammadex	item166	Cost/ Injection	Rs. 600	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s CIPLA LIMITED

Cipla House ,Peninsula Business Park , Ganpatrao

Kadam Marg, Lower Panel,Mumbai-400013

Contact No.: 9820273567

Email:Prashant.Gupta1@cipla.com

Fazeel.ahmad@cipla.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Spray Fluticasone nasal spray 100mcg	item50	Cost/ Spray	Rs. 298.69	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

**M/s FERRING PHARMACEUTICALS
PRIVATE LIMITED**
The Capital, 509/510, A wing, 5th Floor,
Bandra Kurla Complex,
Bandra East, Mumbai-400051
Contact No.: 7718844717
Email: inst.sales@ferring.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Suppository for topical therapy Mesalamine suppository 1gm	item107	Cost/ Suppository for topical therapy	Rs. 84.38	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s HETERO HEALTHCARE LIMITED

Hetero Corporate, 7-2-A2,
Industrial Estates, Sanathnagar,
Hyderabad, Telangana- 500018
Contact No.- 9704404547
E-mail: santhoshreddy.y@heterohealthcare.com,
tenders@heterohealthcare.com

Authorized Distributor:

M/s Pharma-Surge Impex

Plot no-4 &5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Alfuzosin 10mg	item132	Cost/ Tablet	Rs. 2.37	12

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Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED
Corporate House, Near Sola Bridge,
S.G. Highway. Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Albumin 20% Bottle 100ml 20%	item16	Cost/ Injection	Rs. 3300	5
2.	PFS Filgrastim 150 mcg	item75	Cost/ PFS	Rs. 400	12
3.	Oral Tablet Tofacitinib 5mg	item105	Cost/ Oral Tablet	Rs. 17.50	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s MANKIND PHARMA LIMITED
208- Okhla Industrial Estate, Phase-III,
New Delhi-110020
Contact: 011-46541382
Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:
M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Methylcobalamine + Gabapentin 500mg+300mg	item7	Cost/ Tablet	Rs. 2.80	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

**M/s NANZ MED SCIENCE PHARMA PRIVATE
LIMITED**

Rampur Ghat, Paonta Sahib-173025
District Sirmour, Himachal Pradesh, India
Contact: 9805070502
Email: admin@nanzpharma.com,
nanzmedscience@gmail.com

Authorized Distributor:

M/s Pharma-Surge Impex
Plot no-4 &5, GI Block,
GT Karnal Road Industrial Area,
Delhi 110033
Contact: 9811020172
Email: info@pharmasurgeimpex.com
Pharmasurge1@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

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Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Mouth Wash Chlorhexidine 0.2% 150-160ml	item46	Cost/ Bottle	Rs. 39.00	12
2.	Liquid Clotrimazole mouth paint 1% 15ml	item48	Cost/ Bottle	Rs. 12.60	12
3.	Mouth Wash Povidone-Iodine Mouthwash/Gargle 2% 100 ml	item53	Cost/ Bottle	Rs. 24.00	12
4.	Solution Cetrimide+Chlorhexidine 15%+7.5%(500ml)	item59	Cost/ Solution	Rs. 135	12
5.	Solution Cetrimide+Chlorhexidine 15%+7.5%(1000ml)	item60	Cost/ Bottle	Rs. 258	12

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Store Officer (H)

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s NEON LABORATORIES LIMITED
140, Dhamji Shamji Indl. Complex,
Mahakali Caves Road, Andheri (East)
Mumbai-400093
Email: elizabeth@neongroup.com,
smnorth@mkt.neongroup.com,
rsmdelhi@mkt.neongroup.com,
asmccdelhi1@mkt.neongroup.com
Contact-9891252035, 9911337151

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market),
New Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Human Chorionic Gonadotrophin Recombinant HCG 2000 IU/ml	item1	Cost/ Injection	Rs. 121.83	5
2.	Injection Caffeine Citrate 20mg 1ml	item56	Cost/ Injection	Rs. 126.29	12
3.	Injection Ephedrine 30mg 1ml	item63	Cost/ Injection	Rs. 25.13	12
4.	Suppository Rectal Diclofenac 100mg	item106	Cost/ Suppository	Rs. 10.10	12
5.	Injection Neostigmine + Glycopyrolate 2.5mg + 0.5mg	item117	Cost/ Injection	Rs. 56.11	12
6.	Injection Piracetam 200mg	item121	Cost/ Injection	Rs. 41.62	12
7.	Suppository Paracetamol Suppository 250mg	item122	Cost/ Suppository	Rs. 11.84	12
8.	Injection Buprenorphine 0.3 mg 1ml	item143	Cost/ Injection	Rs. 17.09	12

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Store Officer (H)

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s ROCHE PRODUCTS (INDIA) PRIVATE LIMITED
146-B, 166A, Unit no. 7.8.9, 8th floor ,
R city office, R city Mall, Lal Bahadur Shastri Marg,
Ghatkopar, Mumbai-400086
Contact No.: 91-2250457300
Email: institutional.business@roche.com
Hemelin.karekar@roche.com
Rajenderan.krishnamurthy@roche.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Tocilizumab 400mg	item 118	Cost/ Injection	Rs. 28000	5

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s NOVARTIS INDIA LIMITED
3RD Floor, Vatika Business Centre,
Thapar House, 124 Janapath Road,
New Delhi-110001
Contact No.: 9873558222
Email:dinesh.dinkar@novartis.com

Authorized Distributor:
M/s. Albino Lifesciences Pvt. Ltd.
B-167,G.F., East Of Kailash,
New Delhi - 110065
Contact Person : Mr. Bibhuti Biswal,
Mob. No. : 9910486269,
Mr. Dinesh Daga, Mob. No. :9810033890
Email Id: mail@albino91.com,
dinesh@albino91.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Octreotide Long Acting Release 20mg	item88	Cost/ Injection	Rs. 26925.00	5

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s RELIANCE LIFE SCIENCES PRIVATE LIMITED

R-282, TTC Area of MIDC, Thane
Belapur Road, Rabale, Navi Mumbai
Contact: - 8527597226
Email: - mahesh.kumar@relbio.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

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SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Etenarcept 25mg 0.5ml	item14	Cost/ Injection	Rs. 1638.00	12
2.	Injection Etanercept 50mg/ml	item97	Cost/ Injection	Rs. 3285.00	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

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**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s SAMARTH LIFE SCIENCES PRIVATE LIMITED

Samarth House, 168, Bangur Nagar,
Off Link Road, Near Ayappa Temple &
Kallol Kali Temple, Goregaon (W), Mumbai-400090.
Contact- 9555601676
Email- abhi-mittal187@yahoo.com

Authorized Distributor:

M/s South Delhi Pharma

60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Megestrol Acetate 40 mg	item114	Cost/ Tablet	Rs. 6.93	12
2.	Tablet Megestrol Acetate 160 mg	item115	Cost/ Tablet	Rs. 39.96	12
3.	Injection Alprostadil 500mcg 1ml	item120	Cost/ Injection	Rs. 1700.01	5
4.	Injection Leucovarin Calcium Foline 50mg	item159	Cost/ Injection	Rs. 30.51	5

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s VERVE HUMAN CARE LABORATORIES

Plot No.- 15-A, Pharmacy,
Selaqui, Dehradun, uttrakhand- 248011
Contact No.- 9212409003
E-mail: sushil@vervehumancare.com,
admin@vervehealth.in

Authorized Distributor:

M/s Verve Health Care Limited

A-43, Basement, G.T Karnal Road
Industrial Area Delhi- 110033
Contact No.: 9212409003, 7042699038
E-mail: sushil@vervehumancare.com
Info@vervehumancare.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Naltrexone 50 mg	item66	Cost/ Tablet	Rs. 29.38	12
2.	Tablet Buprenorphine 0.4mg	item142	Cost/ Tablet	Rs. 1.89	12
3.	Tablet Buprenorphine +Naloxene 2mg+0.5mg	item144	Cost/ Tablet	Rs. 4.63	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **24A/H/Drugs/2022-23**

To,

M/s ZUVENTUS HEALTHCARE LIMITED

Plot Y2, CTS No. 358/A2, Near Nahur Railway Station,
Nahur (West) Mumbai-400078
CONTACT No.: 9312589159
Email: Deepak.thukral@zuventus.com

Authorized Distributor:

M/s Unitas Pharmaceuticals Pvt. Ltd.
R-28, Inderpuri, New Delhi- 110012
Tel no.- 25833497, 25836245,
9811044701
Email.com: vandana_unitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f.07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Zinc Acetate 50mg	item147	Cost/ Tablet	Rs. 2.70	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

**M/s BDR PHARMACEUTICALS INTL PRIVATE
LIMITED**

Engineering Centre, 6th Floor,
9 Matthew Road, Opera House,
Mumbai-40004
Email: manoj.kapoor@bdrpharma.com,
dharmesh@bdrpharma.com
Contact: 9811383631, 022-40560560

Authorized Distributor:

M/s Unitas Pharmaceuticals pvt.

Ltd. R-28, Inderpuri,
New Delhi- 110012
Telno.-25833497, 5836245,9811044701
Email.com: vandana_unitas@yahoo.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Cetrorelix Acetate GnRH Antagonist 0.25 mg	item93	Cost/ Injection	RS. 161.96	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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4. Billing Section
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

**M/s BOEHRINGER INGELHEIM PRIVATE
LIMITED**

Unit no. 202 and part unit no. 201, 2nd floor Godrej 2,
Pirojsha Nagar, Eastern Express Highway, Vikhrol(E)
Mumbai-400079

Contact No.: 91-22-26456477

Email: mukul.mishra@boehringer-ingelheim.com

anirudh.sharma@boehringer-ingelheim.com

Authorized Distributor:

M/s Prime Agencies

Unit No.6, First Floor, CSC, DDA
Market, Block B & C, Phase-IV, Ashok
Vihar, Delhi-110052

Tel No. 011-47592000, 8368704158

Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Empagliflozin 25mg	item68	Cost/ Tablet	RS. 35.06	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

M/s CIPLA LIMITED

Cipla House ,Peninsula Business Park , Ganpatrao
Kadam Marg, Lower Panel,Mumbai-400013
Contact No.: 9820273567
Email:Prashant.Gupta1@cipla.com
Fazeel.ahmad@cipla.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Darifenacin 7.5mg	item47	Cost/ Tablet	RS. 23.43	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

**M/s ELI LILLY AND COMPANY (INDIA) PRIVATE
LIMITED**

Plot No. 92, Sector 32,
Gurgaon-122001, Haryana
Contact No.: 9958494567
Email: Sharma_vivek@lilly.com
tendersinfo@lilly.com
singh_inderpal@lilly.com

Authorized Distributor:

M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Teriparatide (PFS) 600mcg/2.4ml	item37	Cost/ Injection	RS. 13900	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

**M/s FERRING PHARMACEUTICALS PRIVATE
LIMITED**

The Capital, 509/510, A wing, 5th Floor,
Bandra Kurla Complex,
Bandra East, Mumbai-400051
Contact No.: 7718844717
Email: inst.sales@ferring.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection ACTH 1ml/60IU	item60	Cost/ Injection	RS. 1631.44	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

**M/s GLAXOSMITHKLINE PHARMACEUTICALS
LIMITED**

252, Dr. Annie Besant Road,
Worli, Mumbai- 400030
Contact: - 9990731210
Email: imran.2.hashmi@gsk.com

Authorized Distributor:

M/s Speciality Pharma

17/24, main market, Yusuf sarai,
New Delhi 110016
Mobile number - 9717050360
Landline number- 011-26191541
Email id- specialitypharma1234@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Calcium Citrate Maleate 250mg + folic acid 250mg+50mcg	item45	Cost/ Tablet	Rs. 4.85	12
2.	Tablet Thyroxine 100mcg	item87	Cost/ Tablet	Rs. 0.76	12
3.	Tablet Thyroxine 25mcg	item88	Cost/ Tablet	Rs. 0.82	12
4.	Tablet Thyroxine 50mcg	item89	Cost/ Tablet	Rs. 0.46	12

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Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

M/s INTAS PHARMACEUTICALS LIMITED

Corporate House, Near Sola Bridge,
S.G. Highway, Thaltej, Ahmedabad-380054
Tel: 9910065011, 8745051010
Email: ketanshah@intaspharma.com,
abhishek_nigam@intasian.com

Authorized Distributor:

M/s. Aark Pharmaceuticals

S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201

Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Estradiol Valerate 2mg	item13	Cost/ Tablet	Rs. 4.46	12
2.	Injection Teriparatide (Cartridge) 250mcg/ml (3ml)	item36	Cost/ Injection	Rs. 2500	12
3.	Tablet Baclofen 25 mg	item48	Cost/ Tablet	Rs. 21.70	5
4.	Injection Urinary Gonadotropin (Urofollitropin) 75 IU	item58	Cost/ Injection	Rs. 322	5
5.	Injection Urinary Gonadotropin Menotrophin 75 IU	item59	Cost/ Injection	Rs. 200	5
6.	Tablet Cinacalcet 30mg	item62	Cost/ Tablet	Rs. 38	12
7.	Injection Human Chorionic Gonadotropin HCG Urinary highly purified 5000 IU	item96	Cost/ Injection	Rs. 278	5
8.	Injection Recombinant FSH Follitropin a b M.D. 1200 IU- 1500 IU (1.75ml)	item100	Cost/ Injection	Rs. 8098.25	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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- CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

M/s IPCA LABORATORIES LIMITED

48, Kandivli Industrial Estate,
Kandivli (west), Mumbai 400067
Contact: 9312947787
Email: mohit.jain@ipca.com
sandesh.parbhu@ipca.com

Authorized Distributor:

M/s South Delhi Pharma

60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis – Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Artesunate+Sulphadoxine+Pyrimethamine 200mg+500mg+25mg	item10	Cost/ Tablet	Rs. 95	12
2.	Tablet Atremether+Lumefantrine 80mg+480mg	item11	Cost/ Tablet	Rs. 9.17	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

M/s MANKIND PHARMALIMITED
208- Okhla Industrial Estate, Phase-III,
New Delhi-110020
Contact: 011-46541382
Email: abhishek.bajaj@mankindpharma.com

Authorized Distributor:
M/s Prime Agencies
Unit No.6, First Floor, CSC, DDA Market,
Block B & C, Phase-IV, Ashok Vihar,
Delhi-110052
Tel No. 011-47592000, 8368704158
Email: tarunk_prime@yahoo.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Syrup Hydroxyzine 10mg/5ml	item18	Cost/ Syrup	Rs. 34.50 + GST	12
2.	Tablet Alfacalcidol 0.25mcg	item42	Cost/ Tablet	Rs. 0.70 + GST	12
3.	Tablet Misoprostol (Prostoglandine E1) 200 mcg.	item77	Cost/ Tablet	Rs. 2.75 + GST	12
4.	Tablet Norethisterone 5mg	item81	Cost/ Tablet	Rs. 0.89 + GST	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

M/s MERCK SPECIALITIES PRIVATE LIMITED

Godrej one, 8th floor, Pirojshah Nagar, Eastern Express

Highway, Vikhroli(E) Mumbai-400079

Contact No.: 91-2262109000 , 9810273673

Email: sunil.kaul@merckgroup.com

Nitesh.sharma@merckgroup.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Recombinant FSH Follitropin a b M.D. 900 IU-1100 IU (1.75ml)Multi dose	item55	Cost/ Injection	Rs. 14410	12
2.	Injection Recombinant LH 75 IU	item56	Cost/ Injection	Rs. 1550	12
3.	Injection Human Chorionic Gonadotropin HCG (Recombinant) 250 IU	item95	Cost/ Injection	Rs. 1347.63	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer – In charge of CRHSP Ballabgarh
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3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
6. Store Keeper (Medicine Store Main)

CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

M/s MSN LABORATORIES PRIVATE LIMITED

Plot No. C-24, Industrial Estate,

Sanathnagar, Hyderabad-500018

Contact: 7331135495, 9867341164

Email: tenders@msnlabs.com

Authorized Distributor:

M/s Health N Care

A 8, Block B1, ground floor,

Mohan Cooperative Industrial Estate

Mathura Road, New Delhi-110044

Contact: 8826569386

Email: healthncare.delhi@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Solifenacin 10mg	item26	Cost/ Tablet	Rs. 11.20	12
2.	Tablet Mirabegron 25mg	item27	Cost/ Tablet	Rs. 7.70	12
3.	Tablet Mirabegron 50mg	item28	Cost/ Tablet	Rs. 13.20	12
4.	Tablet Febuxostat 40 mg	item35	Cost/ Tablet	Rs. 0.88	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

1. All chiefs of the centers: (CNC, Dr. RPC, Dr. BRAICH & NCI Jhajjar, CDER, JPNAATC, NDDTC Ghaziabad)& Officer - In charge of CRHSP Ballabgarh
2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
3. Store Accounts Section
4. Billing Section
5. Officer In-charge (Medicine Store)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: 25A/H/Drugs/2022-23

To,

M/s SAMARTH LIFE SCIENCES PRIVATE LIMITED

Samarth House, 168, Bangur Nagar,
Off Link Road, Near Ayappa Temple &
Kallol Kali Temple, Goregaon (W), Mumbai-400090.
Contact- 9555601676
Email- abhi-mittal187@yahoo.com

Authorized Distributor:

M/s South Delhi Pharma

60/4, Lower Ground Floor, Inside
IOC Building Compound
Yusuf Sarai, New Delhi-110016
Contact: 9891296838
Email: southdelhipharma@gmail.com

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Injection Phenylephrine 10mg 1ml	item32	Cost/ Injection	Rs. 19.98	12
2.	Tablet Calcium Acetate 667mg	item43	Cost/ Tablet	Rs. 1.08	12
3.	Tablet Baclofen 10 mg	item50	Cost/ Tablet	Rs. 3.51	5

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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CC to: Medical Superintendent (For Information Please)

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI - 110029
HOSPITAL STORES**

Date: 07.05.2024

Rate Contract No.: **25A/H/Drugs/2022-23**

To,

M/s ZYDUS HEALTHCARE LIMITED
Zydus Tower, Satellite Cross Roads,
Ahmedabad- 380015
Contact No.- +91-79-26868100
E-mail: sandeep.sarkar@zyduscadila.com
institution.business@sanofi.com

Authorized Distributor:
M/s. Aark Pharmaceuticals
S-14, 1st Floor, Uphar Complex,
Greenpark, Extension (Market), New
Delhi-110016
Tel: 9643606201
Email: tender@aarkpharma.co.in

Subject: Purchase of drugs/medicines/ IV Fluids on two years rate contract basis - Letter of Acceptance for supply of items -reg.

Dear Sir,

Regarding your quotation on the subject cited above, the undersigned is directed to inform you that your quotation/rates for the supply of items as under have been considered for awarding of rate contract for two years w.e.f 07.05.2024 to 06.05.2026.

SR. NO.	ITEM NAME	TENDER SERIAL NO.	UNITS	BASIC RATE WITHOUT TAX (INR)	GST %
1.	Tablet Progesterone 200mg	item2	Cost/ Tablet	Rs. 5	12
2.	Tablet Hydroxychloroquine 200mg	item109	Cost/ Tablet	Rs. 2.78	12

This letter may also be considered as a Letter of Intent W.e.f.07.05.2024 to 06.05.2026.


Store Officer (H)

Distribution:

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2. Store Officer/Assistant Store Officer (CNC, Dr. RPC, Dr. BRAICH, CDER, JPNATC, NDDTC Ghaziabad, CRHSP Ballabgarh, NCI Jhajjar)
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