

क्षेत्रीय शिक्षा संस्थान

(राष्ट्रीय शैक्षिक अनुसंधान और परिक्षण परिषद्)
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REGIONAL INSTITUTE OF EDUCATION
(National Council of Educational Research and Training)
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No. 5096

Date: 14/12/2023

To

M/s _____

Sub: Quotation for supply of Medicines for RIE Dispensary for the session 2023-24 reg.

Dear Sir,

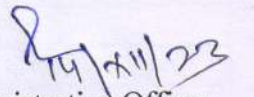
This Institute intends to purchase essential medicines as per the list attached herewith. In case you are interested to supply medicines, you are requested to submit your quotation in a sealed cover mentioning your valid GSTIN No. and PAN No, superscribing the envelope "*Quotation for supply of Medicines for RIE Dispensary for the session 2023-24 reg.*" so as to reach the undersigned by post or by hand to the office on or before **19.12.2023**.

Please quote the rates according to our specification. The rate of taxes in respect of different items may be indicated separately if needed. The rate quoted will be valid upto **31.03.2024**. Rate for the other brands and make should not be quoted. If the firm will be selected then the firm is to submit delivery challan, stamped GST bill with bank details for payment.

The quotations received after due date and in unsealed condition will be rejected. This Institute reserves the right to reject the quotations either in full or part without assigning any reason thereof.

This issues with the approval of the competent authority.

Your's faithfully,


Administrative Officer

Encloser:- List of Medicines for RIE Dispensary of 96 items.

Copy to:

1. I/c CAC with a request to upload a copy in the Institute Website.
2. Office copy.

List of Medicine of RIE Dispensary (2023-24)

Sl. No	Name of the Medicine	Quantity Required	Rate Per Unit (strip/pkt./box etc.)
A. ANTI-PYRETIC, COLD & FLU			
1	Tab. Crocin 650/Pyragesic 650	600Strip	
2	Tab. Crocin 500	800 Strip	
3	Tab.Sinarest	800 Strip	
4	Tab.Montek LC	50 Strip	
5	Tab.Levocettrizine 10mg	200 Strip	
6	Tab.Hicope	20 Strip	
7	Tab.Ab Phyllin SR 200	10 Strip	
8	Syp.Norvent LS	200 Bottle	
9	Syp.Norvent D	200 Bottle	
B. ANALGESIC & SPRAIN			
10	Tab.Ultracet	10 Strip	
11	Tab.Zerodol P	100 Strip	
12	Tab.Zerodol SP	100 Strip	
13	Tab.Combiflam	100 Strip	
14	Nobel Gel (10 gm) /Dolo kind Gel (10 gm)	200 Tube	
C. ANTACID, GASTRITES, LAXATIVE			
15	Cap.Ranidom RD	100 Strip	
16	Cap.Rabekind DSR	20 Strip	
17	Tab.Divol	300 Strip	
18	Tab. Flatu blast	10 Strip	
19	Tab.Vitazyme/Aristozyme	20 Strip	
20	Tab.Volapride Plus	10 Strip	
21	Syp. Duphalac	20 Bottle	
22	Syp. Alkasol	15 Bottle	
D. ANTI-DIARRHOEAL & ANTI-EMITING			
23	Cap.Redotil	10 Strip	
24	Wally powder 22gm	800 Packet	
25	Tab.Vomikind/vomiford (8mg)	20strip	
E. PRO-BIOTICS & ANTI SPASM			
26	Tab. Cyclopam	30 Strip	
27	Tab.Librax	5 Strip	
28	Tab. Drotin-DS	20 Strip	
29	Tab.Sporolac DS	30 Strip	
30	Tab.No worm	10 Strip	
31	Tab.DEC	10 Strip	
F. ANTIBIOTICS			
32	Tab.Cefixime 200	200 Strip	
33	Tab.Augmentin 625/Clavum 625	100 Strip	

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Sl. No	Name of the Medicine	Quantity Required	Rate Per Unit (strip/pkt./box etc.)
34	Tab.Augmentin 375/Clavum 375	20 Strip	
35	Tab.Doxyl	50 Strip	
36	Tab.Roxid 150	50 Strip	
37	Tab.Azithromycin 500	400 Strip	
38	Tab.Azithromycin 250	50 Strip	
39	Tab.Cifran 500	50 Strip	
40	Tab.Levomac 500	20 Strip	
41	Tab.Cefadroxyl 500	20 Strip	
42	Tab.Metrogyl 400	20 Strip	
43	Tab.Metrogyl 200	10 Strip	
44	Tab.Enidazole 200	10 Strip	
45	Tab.Bactrim-DS	20 Strip	
46	Tab. Linezolid 400	50 Strip	
G. VITAMINS & ANTI-DEPRESSANTS			
47	Cap.Becosule Z	200 Strip	
48	Cap Becelac Forte	25 Strip	
49	Tab.Ferrikind	50 Strip	
50	Tab.Shelcal 500	50 Strip	
51	Tab.shelcal XT	25 Strip	
52	Tab.Nurobion forte	20 Strip	
53	Tab. Zincovit	100 Strip	
54	Tab.Ubinext LC	10 Strip	
55	Tab.Limcee	50 Strip	
56	Cap.DV 60 K	20 Strip	
57	Tab. Evion 400	20 Strip	
58	Tab.Solopose	20 Strip	
59	Tab.Paxum	10Strip	
60	Tab.Stemitil MD	5 Strip	
61	Tab.Vertistar MD 8 mg.	20 Strip	
62	Tab. Telmikind 20mg	10 strip	
63	Tab. Tranostat	10 Strip	
H. Anti-Allergic & Anti-Dermatitis			
64	Oraflora gel 10 ml	50 pc	
65	Tab.Candiforce 200	20 Strip	
66	Tab.Allegra 180	10 Strip	
67	Tab.Avil 25 mg	100 Strip	
68	Tab.Syscan 150	40 Strip	
69	Gris ODT Cream	5 Tube	
70	Caladryl Lotion	20 Tube	
71	Candid 3D Cream (15 gm.)	25 Tube	
72	Candid B Cream (10 gm.)	25 Tube	
73	Candid cream	50 tube	

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Sl. No	Name of the Medicine	Quantity Required	Rate Per Unit (strip/pkt./box etc.)
74	Fourderm cream	10 Tube	
75	Surfaz SN cream	10 Tube	
76	Cosvate GM cream	10 Tube	
I. ENT Preparation			
77	Sinarest Vapocap	10 Strip	
78	Otrivin Nasal Drop	20 pc	
79	Gentamycin Eye & Ear Drop	50 pc	
80	zenflox/moxioflox Eye & Ear Drop	50 pc	
81	I-Kul Eye Drop	20 pc	
82	Otogesic Ear Drop	10pc	
83	Ceruklin Ear Drop	10pc	
84	Candibiotic Ear Drop	10 pc	
I. Dressing Material & Injection			
85	Handplast	1 Box	
86	Betadine Solution	2 Bottle	
87	Silverex Ointment	2 Tube	
88	Spirit	2 Bottle	
89	Inj. Titanus toxid	50 ampule	
90	Inj Dynapar/Diclonac/voberan	10ampule	
91	Inj Ranitine	5 ampule	
92	Inj Ondem	5 ampule	
93	Inj Dexona	5 ampule	
94	Volini Spray 100gm	5 nos.	
95	Cotton Roll	02 nos.	
96	Syringes 2.5ml	1 box	

14/11/23
Administrative Officer

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