



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

Subject: Supply of Medicine and Surgical Items

Central University of South Bihar Gaya invites proposals for Gaya Campus for **Supply of Medicine and Surgical Items** as per details mentioned below (**Annexure-A**) from the reputed shops/ establishments. You are requested to kindly send the quotations/ proposals latest by **02/02/2024 till 4:00 PM** to the below mentioned address **by registered post / speed post /in drop box (Tender Box):**

To,
The Registrar (Tender Document)
Central University of South Bihar
SH-7, Gaya- Panchanpur Road,
Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar)
PIN- 824 236

Email- registrar@cub.ac.in

Website- www.cusb.ac.in

Contact – 0631-2229519

CPP Portal web site:

www.eprocure.gov.in/epublish/app/epublish/app



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

Index for Tender Form

Sl. No.	Details	:	Deadline
1.	Tender Notice No.	:	CUSB/PSD/MEDICINE/T/14/2023-24, Date: 12/01/2024
2.	Name of work	:	Supply of Medicine and Surgical Items
3.	Tender Fee	:	Rs. 500/- in shape of DD
4.	Earnest Money Deposit	:	Rs. 25,000/- in shape of DD in favour of Central University of South Bihar payable at GAYA.
5.	Start of submission of Bids	:	12/01/2024
6.	Last date and time for receipt of Bids	:	02/02/2024 by 4:00 PM
7.	Place of opening of Bids	:	CUSB Panchanpur, Gaya

Tender documents will be on **single-bid system** and must be accompanied by the Bid Security Fee/Earnest Money Deposit (Refundable). The Earnest Money Deposit is to be paid in the form of Bank Draft in favour of the Central University of South Bihar payable at Gaya.

Price Bid: The bidder has to quote the rate in '**Financial Bid Proforma**' as the item list given in **Annexure-A**. The rate quoted should be inclusive of all taxes, freight charges, etc. in figure as well as in words for total amount. The University reserves the right to cancel the tender, if any false information is furnished.



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

NIT BID

Sl. No	Description of Goods	Estimated Cost (Rs.)	Earnest Money to be Deposited	Last date & time of submission of Tender document	Time & date of opening of Tender	Time allowed for completion of delivery and installation
1.	Supply of Medicine and Surgical Items at Central University of South Bihar, Gaya.	8.75 Lakh	Rs. 25,000/-	25/02/2024 by 4:00 PM	Shall be intimated on University website.	30 days after issue of Purchase Order/Work Order

Terms & Conditions:

1. Bid/ Quotation will be sent by courier/ registered post/ speed post/ by hand (to be submitted in Tender Box) and will not be accepted after last date of submission.
2. The relevant papers in regards to eligibility criteria along with Tender Fee/EMD should be in sealed envelope. Bidders should clearly mentioned NIT reference on envelop **CUSB/PSD/MEDICINE/T/14/2023-24, Dated: 12/01/2024. EMD should be in favour of “Central University of South Bihar” Payable at Gaya.**
3. The rate offered should be quoted **F.O.R CUSB Gaya Campus.**
4. In case of Ex-Godown terms the amount of packaging forwarding freight etc. should clearly be mentioned by percentage or lump sum amount. Current rate of tax as and other statutory levels must be mentioned.
5. The firms are requested to give detailed description and specification together with detailed drawings and printed leaflets and literature of the articles quoted.
6. Quotation should have validity of at least 90 days from the date of opening.
7. The right to reject all or any of the quotations and to split up the requirements or relax any or all of the above conditions without assigning any reason is reserved.
8. **Medicines/ Surgical Items supplied should not be obsolete /used/old stock but should be of requisite brand with standard**



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

expiry but not less than one year.

9. Delivery period for supply of material within 04 weeks, F.O.R. CUSB Gaya from the date of issuance of Purchase Order.
10. The penalty @ 1% per week subject to a maximum of 10% of the delivery price will be deducted from the balance payment if supply is not completed within stipulated period.
11. Our standard payment terms & condition is 100% against delivery and successful satisfactory report by Medical Officer.
EMD of unsuccessful bidders shall be refunded once order is placed but the same of Successful bidder shall be refunded after completion of one year period.
12. Unless otherwise stated delivery of goods at **CUSB Gaya Campus** as per conditions as specified in Purchase Order.
13. Copies of GST registration certificate of the firm, with the TIN number clearly indicated therein will have to accompany the quotation to be submitted.
14. The bid documents are not transferrable and the seal and signature of the authorised official of firms must appear on all the papers and envelopes submitted.
15. The quotation should be complete in all respects and duly signed wherever required. Incomplete and unsigned offer will not be accepted.
16. The quotations are liable to be rejected if the fore going conditions are not complied with.
17. Printed conditions of the firm, if any, will not be binding on us.
18. Late and delayed tender will not be considered.
19. All disputes are subject to exclusive jurisdiction of Competent Court and Forum in Gaya, India only.
20. CUSB reserves the right to cancel the tender at any stage.
21. Compliance sheet about the specification asked must be enclosed with the proposal.
22. The bidders to submit the signed copy of tender document with the proposal.



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

Special Terms and condition relevant to Medicine and Surgical Items

1. Items having expiry period of less than ONE YEAR from the date of supply will not normally be accepted, the successful tenderer must submit an undertaking of guarantee in writing that such medicines, if not consumed before the date of expiry will be replaced with fresh stock at no cost.
2. Prospective bidder shall quote rate for all items listed in Annexure-‘A’. Partial quotation shall not be accepted.
3. Required Quantity mentioned in number of individual tablets or capsules or ampules only.

**Sd/-
Registrar**



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SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

CHECKLIST

We hereby declare that the following requirements have been fulfilled by us –

Sl. No.	Particulars	Yes/No
1	Tender Fee Rs. 500/- in form of Demand Draft in favour of “Central University of South Bihar”, Payable at Gaya.	
2	Earnest Money Deposit (EMD) of Rs. 25000/- in form of Demand Draft in favour of “Central University of South Bihar”, Payable at Gaya.	
3	Copy of PAN Card	
4	Copy of GST No.	
5	Copy of ITR of the last two years.	
6	Documentary evidence for the turnover of last financial year.	
7	Experience certificate of job in related areas. At least one copy of Purchase Order of related work experience be attached with the tender document.	
8	Duly filled in ‘PRICE BID PROFORMA’	
9	<i>Certificate of at least one year of Expiry of supplied Medicine and Surgical Items.</i>	
10	<i>Non-Blacklisting Certificate</i>	
11	Every page of the tender documents and the enclosed copies of the certificates must be signed with seal.	



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

TECHNICAL BID PROFORMA

NIT No. :		CUSB/PSD/MEDICAL/T/14/2023-24 Dated: 12/01/2024	
Sub.: Supply of Medicine and Surgical Items			
1.	Name of the Organization/Firm		
2.	Head Office / Registered Office		
	Telephone No/mobile No.		
	Fax No.		
	Email		
	Web site (if any)		
	Date of Establishment		
	Branch Office in Gaya , if any		
	(Provide Complete Address)		
	Telephone No.		
	Fax No./Email		
3.	Name of Chief Executive/ Proprietor / Partners with Designation		
	Telephone No./Mobile No.		
	Fax No./ Email		
4.	Name of Contact Person		
	Telephone No./Mobile No		
	Fax No./Email		
5.	Type of Organization	Certified Documents to be enclosed	
a.	Proprietary		Trade License
b.	Partnership		Partnership Deed, Trade License
c.	Private Limited Company		Memorandum of Article
d.	Public Limited Company		Certificate of Registration
e.	Public Sector		Trade License
6.	Nature of Business (tick the relevant)		



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

Manufacturing		Service		Dealership	
Stockiest		Indian Agent		Indian Branch Office	
Others Pl. Specify					
7.	Class / Type of Product / Materials Manufactured / Sold / Serviced/ Fabricated				
Scientific Equipment		Electronics		Lab Consumables & Chemicals	
Electrical Items		Computer Peripherals		Computers	
Laboratory Equipments		Office Automation Product		Electrical Works	
Sport Materials		Water Coolers		Air-conditioners	
AV Equipments		Boards		Other, please specify.....	
Audited Annual Turnover during last 3 years (Rs. In Lakhs) (enclose Chartered Accountant's certification & Income Tax Return Copy)					
Year		Rupees (in Lakhs)		Annexure (Number)	
2022-23					
2021-22					
2020-21					

8.	Commercial Information (enclose Attested Copy wherever Applicable)		
S. No.	Information	Details	Annexure (Number)
a.	GST Registration Number		
b.	Excise Registration Number Trade / Factory License Number		
c.	PAN No.		
d.	Details of Registration Certificate with DGS&D/NCCF		
e.	SSI/NSIC/MSME Certificate		
f.	Current dealership agreement with Principal Letter No. / Date / Valid upto		
g.	Relevant IISI/ SO Certificate, if any		



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

h.	<u>Bank Details :</u> Account No.					
i.	Name of Bank & Branch					
j.	IFSC Code					
k.	Details of Tender Fee	Amount:	DD No. & Date	Name of the issuing Bank & Branch		
l.	Details of EMD	Amount:	DD No. & Date	Name of the issuing Bank & Branch		
m.	Details of Previous Supply in Govt. Organisations/ Govt. Educational Institutions	Name of the organization	Item Supplied / Qty.	Total Value (Rs in lakhs)		
9.	MSME Entrepreneur	Comment				
9.1.	Is the bidder MSME Entrepreneur	Y/N				
9.2.	If yes, the category (GEN/OBC/SC/ST/Women)	GEN	OBC	SC	ST	WOMEN
I/ We hereby give an undertaking that the information provided are true to the best of my knowledge and belief. If anything found to be false at any stage my tender will be liable to be rejected and EMD amount will be forfeited.						
Signature of authorized representative:						
Date:.....						
10.	Note					
10.1.	Separate information sheet may be provided for item (s) in case space provided is not adequate.					
10.2.	Affidavit in the enclosed format on Non Judicial stamp paper duly attested by Magistrate/Notary shall also be furnished by the bidder.					

Sd/-

Registrar



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

Annexure-‘A’

(LIST OF ITEMS OF MEDICINE AND SURGICAL ITEMS)

Sl. No.	Name of Medicines (Annexure A)	Requirement number of tab/cap/ injection/ tube/bottle/etc.
1.	Aceclofenac+Paracetamol+Serratopeptidase / Ibugsic ASP	3200
2.	Albendazole tab 400 mg/Noworm	200
3.	Amoxycillin (500mg) + Clavulanic Acid (125mg) / Trimox CV	3600
4.	Pheniramine 25 mg TAB/Avil/ 25 mg	1200
5.	Azithromycin 500 mg tab/Azibest 500 mg	6000
6.	B.complex capsules /Becosule Z Cap	4000
7.	Betahistine 8 mg/Vertin 8 mg	900
8.	Budesonide 0.5 mg 2 ml/ Budate Transpules 2 ml	49
9.	Calamine lotion / Caladryl Lotion 125 ml	36
10.	Cefixime (200mg) + Ofloxacin (200mg) Tab/Zifi O tab	4000
11.	Cefixime 200 mg Tab/ Taxim O 200 mg tab	5000
12.	Cefixime (100mg/5ml) Oral Suspension/Taxim o forte Dry Syp 60 ml	40
13.	Cetirizine 10 mg /Cetiriz 10 mg	9000
14.	Ciprofloxacin (0.3% w/v) + Dexamethasone (0.1% w/v) Ciplox D drop	180
15.	Ciprofloxacin (0.3% w/v) /eye-ear drop 10 ml	720
16.	Deflazacort tab 6 mg /Defla/MAHACORT Dz 6	1800
17.	Dexamethasone (4mg/ml) /Dexona inj 2 ml inj	24
18.	Diclofenac (50mg) + Paracetamol (325mg) / DILONA pLUS Tab	5400
19.	Dicyclomine (10mg) + Simethicone (40mg)/ Mefta spas suspension 60 ml	30
20.	Diethylcarbamazine (100mg) / Banocide forte	10800
21.	Drotaverine 80 mg Tab /Din Ds/ Tab	500
22.	Levosulbutamol+ Ipratropim Br /Duolin Respule 3 ml /	50
23.	Eterocoxib+ Thiocholchicoside/Nucoxia MR	960
24.	Fexofenadine 180 mg /Histakind 180	1000
25.	Trypsin Chymotrypsin (100000AU)/Chymocip/chymapra	1200
26.	Fluconazole 150 mg tab Nuforce	1440
27.	Gas-O-Fast Plus Orange Tablet	480
28.	Ibuprofen (100mg) + Paracetamol (162.5mg)/Ibugesic plus suspension 60 ml	60
29.	Ibuprofen (400mg) + Paracetamol (325mg)/Combiflam Tab	5460



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

30.	Itraconazole (100mg) /Fungikem 100 mg	700
31.	Camphor + Chlorothymol+ Eucalyptol+ Menthol + Terpineol / Kol Q INH Cap	500
32.	Lactobacillus capsules / Vizylac cap	2700
33.	Levofloxacin 750 mgTab / levoflox tab 750 mg	600
34.	Dicyclomine (10mg) + Mefenamic Acid (250mg) tablet/Meftal Spas tab	3600
35.	Metronidazole (200mg/5ml) /Flagyl Suspension 200mg 60 ml bottle	50
36.	Metronidazole 400 tab / Flagyl tab 400mg	7200
37.	Levocetirizine (5mg) + Montelukast (10mg)/Montina L tab	3600
38.	Moxifloxacin0.5 % Eye Drop/Mahaflox	50
39.	Norfloxacin (400mg) + Tinidazole (600mg) /Norflox TZ -RF /	5200
40.	Ofloxacin (200mg) + Ornidazole (500mg) /Zenflox OZ Tab	3600
41.	Ofloxacin 400 mg Tab / Zenflox /400 mg Tab	5400
42.	Granisetron (1mg)/Grandem MD Tablet	2000
43.	Electral 4.4 gm Sachet powder (lemon)	6000
44.	Pantoprazole (40mg) tab / Pan 40 tab	1800
45.	Paracetamol 650 mg tab /Pacimol/ Tab	8100
46.	Paracetamol (250mg/5ml) /P-250/ 60 ml	30
47.	Mefenamic Acid (100mg/5ml) + Paracetamol (250mg/5ml) Suspension/SumoL Plus DS Oral Suspension 100 ML	20
48.	Propranolol tab 10 mg /inderal 10 mg	900
49.	Ranitidine 150 mg /Aciloc 150/ mg , Tab	27000
50.	Racecadotril (100mg) / Redotil Cap	450
51.	Racecadotril+ Saccaromyces Boulardi Sachet /Racigyl Sb	72
52.	Framycetin (1% w/w) / 30 gm cream	100
53.	Caffeine (30mg) + Diphenhydramine (25mg) + Paracetamol (500mg) + Phenylephrine (5mg) / Sumocold Tab	2400
54.	Amylmetacresol (0.6mg) + Dextromethorphan Hydrobromide (5mg) Lozenges /Tusq-D Lozenges Ginger /	720
55.	Telmisartan 40 mg /T Sart 40 mg tab	300
56.	Chlorpheniramine Maleate (2mg) + Paracetamol (250mg) + Phenylephrine (5mg)/ Solvin Cold DS Syrup	30
57.	Azithromycin (200mg/5ml)/ Azithral supension 200 mg , 15 ml	60
58.	Amoxycillin (400mg/5ml) + Clavulanic Acid (57mg/5ml)/ Clavam Forte dry syp 60 ml	30
59.	Levocetirizine (2.5mg/5ml) + Montelukast (4mg/5ml)/ Montecope Suspension 60 ml	40
60.	Phenylephrine (5mg) + Chlorpheniramine Maleate (2mg) + Dextromethorphan Hydrobromide (10mg)/ Ascoril D Plus Syp 100ml	80



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

61.	Fexofenadine (30mg/5ml) suspension / Histakind 30mg/5ml Syrup (60 ml)	30
62.	Domperidone (30mg) + Esomeprazole (40mg) Cap/ Esokem D cap SR	300
63.	Chlorzoxazone (500mg) + Diclofenac (50mg) + Paracetamol (325mg)/Diclotal MR tab	900
64.	Naproxen (500mg) + Domperidone (10mg)/ Naxdom 500 tab	300
65.	Deflazacort (6mg/5ml) / Mahacort DZ syp	30
66.	Loperamide 2 mg / lopamide tab	1500
67.	ClonaZepam 0.25 MD tab/clonafit 0.25	400
68.	Drotaverine 40 mg / Din injection 2 ml	40
69.	Tranexamic Acid (500mg)/Texakind tab	120
70.	Prednisolone (5mg)/ Wysolone 5 mg	1200
71.	Beclomethasone, Clotrimazole, Gentamycin Cream 15 g tubes/ Jan Aushadhi	400
72.	Clobetasol Propionate 0.05 % w/w Cream 15 g tubes / Jan Aushadhi	400
73.	Mometasone Furoate 0.1% w/w cream 15gm/Jan Aushadhi	400
74.	Diclofenac dethylamine BP1.16%, Linseed Oil BP3% w/w, Methylsalicylate IP10% w/w, Menthol IP5% w/w, Spray 35gm /Jan Aushadhi	50
75.	Diclofenac (25mg/ml) / Dilon Inj 3 ml	180
76.	Permethrin Cream 5% w/w / Jan Aushadhi	50

Note: Required Quantity mentioned in number of individual tablets or capsules or ampules only.



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

FINANCIAL BID PROFORMA

TENDER NOTICE NO.: CUSB/PSD/MEDICINE/T/14/2023-24, Dated: 12/01/2024

SUB.: Supply of Medicine and Surgical Items.

Name of the Bidder: _____

Sl. No.	Name of Medicines (Annexure A)	Requirement number of tab/cap/ injection/ tube/bottle/etc.	Unit Rate (Rs.)	GST @	Total Amount inclusive of GST (Rs.)
1.	Aceclofenac+Paracetamol+Serratopeptidase / Ibugsic ASP	3200			
2.	Albendazole tab 400 mg/Noworm	200			
3.	Amoxycillin (500mg) + Clavulanic Acid (125mg) / Trimox CV	3600			
4.	Pheniramine 25 mg TAB/Avil/ 25 mg	1200			
5.	Azithromycin 500 mg tab/Azibest 500 mg	6000			
6.	B.complex capsules /Becosule Z Cap	4000			
7.	Betahistine 8 mg/Vertin 8 mg	900			
8.	Budesonide 0.5 mg 2 ml/ Budate Transpules 2 ml	49			
9.	Calamine lotion / Caladryl Lotion 125 ml	36			
10.	Cefixime (200mg) + Ofloxacin (200mg) Tab/Zifi O tab	4000			
11.	Cefixime 200 mg Tab/ Taxim O 200 mg tab	5000			
12.	Cefixime (100mg/5ml) Oral Suspension/Taxim o forte Dry Syp 60 ml	40			
13.	Cetirizine 10 mg /Cetiriz 10 mg	9000			
14.	Ciprofloxacin (0.3% w/v) + Dexamethasone (0.1% w/v) Ciplox D drop	180			
15.	Ciprofloxacin (0.3% w/v) /eye-ear drop 10 ml	720			
16.	Deflazacort tab 6 mg /Defla/MAHACORT Dz 6	1800			
17.	Dexamethasone (4mg/ml) /Dexona inj 2 ml inj	24			
18.	Diclofenac (50mg) + Paracetamol (325mg) / DILONA pLUS Tab	5400			
19.	Dicyclomine (10mg) + Simethicone (40mg)/ Mefta spas suspension 60 ml	30			



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

20.	Diethylcarbamazine (100mg) / Banocide forte	10800			
21.	Drotaverine 80 mg Tab /Din Ds/ Tab	500			
22.	Levosulbutamol+ Ipratropim Br /Duolin Respule 3 ml /	50			
23.	Eterocoxib+ Thiocholchicoside/Nucoxia MR	960			
24.	Fexofenadine 180 mg /Histakind 180	1000			
25.	Trypsin Chymotrypsin (100000AU)/Chymocip/chymapra	1200			
26.	Fluconazole 150 mg tab Nuforce	1440			
27.	Gas-O-Fast Plus Orange Tablet	480			
28.	Ibuprofen (100mg) + Paracetamol (162.5mg)/Ibugesic plus suspension 60 ml	60			
29.	Ibuprofen (400mg) + Paracetamol (325mg)/Combiflam Tab	5460			
30.	Itraconazole (100mg) /Fungikem 100 mg	700			
31.	Camphor + Chlorothymol+ Eucalyptol+ Menthol + Terpineol / Kol Q INH Cap	500			
32.	Lactobacillus capsules / Vizylac cap	2700			
33.	Levofloxacin 750 mgTab / levoflox tab 750 mg	600			
34.	Dicyclomine (10mg) + Mefenamic Acid (250mg) tablet/Meftal Spas tab	3600			
35.	Metronidazole (200mg/5ml) /Flagyl Suspension 200mg 60 ml bottle	50			
36.	Metronidazole 400 tab / Flagyl tab 400mg	7200			
37.	Levocetirizine (5mg) + Montelukast (10mg)/Montina L tab	3600			
38.	Moxifloxacin0.5 % Eye Drop/Mahaflox	50			
39.	Norfloxacin (400mg) + Tinidazole (600mg) /Norflox TZ -RF /	5200			
40.	Ofloxacin (200mg) + Ornidazole (500mg) /Zenfloz OZ Tab	3600			
41.	Ofloxacin 400 mg Tab / Zenfloz /400 mg Tab	5400			
42.	Granisetron (1mg)/Grandem MD Tablet	2000			
43.	Electral 4.4 gm Sachet powder (lemon)	6000			
44.	Pantoprazole (40mg) tab / Pan 40 tab	1800			



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

45.	Paracetamol 650 mg tab /Pacimol/ Tab	8100			
46.	Paracetamol (250mg/5ml) /P-250/ 60 ml	30			
47.	Mefenamic Acid (100mg/5ml) + Paracetamol (250mg/5ml) Suspension/SumoL Plus DS Oral Suspension 100 ML	20			
48.	Propranolol tab 10 mg /inderal 10 mg	900			
49.	Ranitidine 150 mg /Aciloc 150/ mg , Tab	27000			
50.	Racecadotril (100mg) / Redotil Cap	450			
51.	Racecadotril+ Saccaromyces Boulardi Sachet /Racigyl Sb	72			
52.	Framycetin (1% w/w) / 30 gm cream	100			
53.	Caffeine (30mg) + Diphenhydramine (25mg) + Paracetamol (500mg) + Phenylephrine (5mg) / Sumocold Tab	2400			
54.	Amylmetacresol (0.6mg) + Dextromethorphan Hydrobromide (5mg) Lozenges /Tusq-D Lozenges Ginger /	720			
55.	Telmisartan 40 mg /T Sart 40 mg tab	300			
56.	Chlorpheniramine Maleate (2mg) + Paracetamol (250mg) + Phenylephrine (5mg)/ Solvin Cold DS Syrup	30			
57.	Azithromycin (200mg/5ml)/ Azithral supension 200 mg , 15 ml	60			
58.	Amoxycillin (400mg/5ml) + Clavulanic Acid (57mg/5ml)/ Clavam Forte dry syp 60 ml	30			
59.	Levocetirizine (2.5mg/5ml) + Montelukast (4mg/5ml)/ Montecope Suspension 60 ml	40			
60.	Phenylephrine (5mg) + Chlorpheniramine Maleate (2mg) + Dextromethorphan Hydrobromide (10mg)/ Ascoril D Plus Syp 100ml	80			
61.	Fexofenadine (30mg/5ml) suspension / Histakind 30mg/5ml Syrup (60 ml)	30			
62.	Domperidone (30mg) + Esomeprazole (40mg) Cap/ Esokem D cap SR	300			
63.	Chlorzoxazone (500mg) + Diclofenac (50mg) + Paracetamol (325mg)/Diclotal MR tab	900			
64.	Naproxen (500mg) + Domperidone (10mg)/ Naxdom 500 tab	300			



CENTRAL UNIVERSITY OF SOUTH BIHAR

SH-7, Gaya- Panchanpur Road, Village- Karhara, Post- Fatehpur,
P.S- Tekari, District- Gaya (Bihar) PIN- 824 236

65.	Deflazacort (6mg/5ml) / Mahacort DZ syp	30			
66.	Loperamide 2 mg / lopamide tab	1500			
67.	ClonaZepam 0.25 MD tab/clonafit 0.25	400			
68.	Drotaverine 40 mg / Din injection 2 ml	40			
69.	Tranexamic Acid (500mg)/Texakind tab	120			
70.	Prednisolone (5mg)/ Wysolone 5 mg	1200			
71.	Beclomethasone, Clotrimazole, Gentamycin Cream 15 g tubes/ Jan Aushadhi (15Gm)	400			
72.	Clobetasol Propionate 0.05 % w/w Cream 15 g tubes / Jan Aushadhi	400			
73.	Mometasone Furoate 0.1% w/w cream 15gm/Jan Aushadhi	400			
74.	Diclofenac dethylamine BP1.16%, Linseed Oil BP3% w/w, Methylsalicylate IP10% w/w, Menthol IP5% w/w, Spray 35gm /Jan Aushadhi	50			
75.	Diclofenac (25mg/ml) / Dilona Inj 3 ml	180			
76.	Permethrin Cream 5% w/w / Jan Aushadhi (30 gm)	50			
Amount Total (Rs.)					
Basic Amount (Rs.)					
GST Amount (Rs.)					
Amount in words : Rupees					

Note: (i) Required Quantity mentioned in number of individual tablets or capsules or ampules only.

(ii) Above rates are inclusive of all and no other charges shall be paid extra.

(iii) No overwriting or use of whitener is permitted. If done it will be summarily rejected.

Date:

Signature _____

Name: _____

Designation & seal