



MAHATMA GANDHI MISSION TRUST
MGM INSTITUTE OF HEALTH SCIENCES, CENTRAL PURCHASE DEPARTMENT (CPD)

Plot 1 &2, Sector -1 Kamothe, Navi Mumbai 410209

7 H). E-Tender for Medicines(Respiratory product /Nasal Spray)

Tender invited from reputed manufacturers of Medicines (Respiratory Product) MGM Group of Hospitals at Navi Mumbai & Aurangabad in the format given below :

Name & Address of Manufacturer /Vendor :- _____

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval /DCGA CERTIFICATION if available)
RESPULES							
1	AMBROXOL HCL 15 MG						
2	ARFORMOTEROL 15 MCG						
3	BUDESONIDE 0.5 MG						
4	BUDESONIDE 0.5 MG + LEVOSALBUTAMOL 1.25MG						
5	BUDESONIDE 1MG + LEVOSALBUTAMOL 1.25MG						
6	BUDESONIDE 400 MCG +GLYCOPYRRONIUM 25MCG +FORMOTEROL FUMARATE DIHYDRATE 12 MCG						
7	FLUTICASONE 0.5 MG						
8	FLUTICASONE 2 MG						
9	FORMOTEROL FUMARATE 20 MCG + BUDESONIDE 0.5 MG						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
10	FORMOTEROL FUMARATE 20 MCG + BUDESONIDE 1 MG						
11	GLYCOPYRROLATE IP 25MCG						
12	IPRATROPIUM BROMIDE 250 MCG/ML						
13	IPRATROPIUM BROMIDE (ANHYDROUS) 500 MCG + LEVOSALBUTAMOL 1.25 MG						
14	IPRATROPIUM BROMIDE (ANHYDROUS) 500 MCG + LEVOSALBUTAMOL 1.25 MG						
15	IPRATROPIUM BROMIDE (ANHYDROUS) 500MCG + LEVOSALBUTAMOL 0.63MG						
16	LEVOSALBUTAMOL 0.31 MG						
17	LEVOSALBUTAMOL 0.63 MG						
18	LEVOSALBUTAMOL 1.25 MG						
19	SALBUTAMOL 2.5 MG						
20	SODIUM CHLORIDE INHALATION SOLUTION USP 3% W/V						
21	SODIUM CHLORIDE INHALATION SOLUTION USP 7% W/V						
22	TOBRAMYCIN 300 MG						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
23	TOBRAMYCIN 300 MG						
METER DODE INHELARS (MDI)							
24	BECLOMETHASONE 200 MCG						
25	BECLOMETHASONE 400 MCG						
26	BECLOMETHASONE 50 MCG + LEVOSALBUTAMOL 50 MCG						
27	BECLOMETHASONE DIPROPIONATE 100MCG + FORMOTEROL FUMARATE DIHYDRATE 6MCG						
28	BUDESONIDE 100 MCG						
29	BUDESONIDE 100 MCG						
30	BUDESONIDE 200 MCG						
31	BUDESONIDE 200MCG + FORMOTEROL 6MCG						
32	BUDESONIDE 400MCG + FORMOTEROL 6MCG						
33	CICLESONIDE 160MCG						
34	CICLESONIDE 80 MCG						
35	FLUTICASONE PROPIONATE 125MCG + FORMOTEROL FUMARATE 6MCG						
36	FLUTICASONE PROPIONATE 250 MCG + FORMOTEROL FUMARATE 6MCG						
37	FLUTICASONE PROPIONATE 125MCG + FORMOTEROL FUMARATE 6MCG						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	
38	FLUTICASONE PROPIONATE 250MCG + FORMOTEROL FUMARATE 6MCG						
39	FORMOTEROL 12 MCG + BUDESONIDE 400 MCG						
40	FORMOTEROL FUMARATE 6 MCG + BUDESONIDE 100 MCG						
41	FORMOTEROL FUMARATE 6 MCG + BUDESONIDE 200 MCG						
42	FORMOTEROL FUMARATE 6 MCG + BUDESONIDE 400 MCG						
43	IPRATROPIUM BROMIDE 20 MCG + LEVOSALBUTAMOL 50 MCG						
44	IPRATROPIUM BROMIDE 40 MCG + LEVOSALBUTAMOL 50 MCG						
45	LEVOSALBUTAMOL 50 MCG						
46	LEVOSALBUTAMOL TARTRATE 50MCG						
47	SALBUTAMOL 100 MCG						
48	SALMETEROL 50 MCG + FLUTICASONE 250 MCG						
49	SALMETEROL 25 MCG + FLUTICASONE 250 MCG						
50	SALMETEROL 25 MCG + FLUTICASONE PROPIONATE 125 MCG SYNCROBREATHE						
51	SALMETEROL 25 MCG + FLUTICASONE PROPIONATE 125 MCG						
52	SALMETEROL 25 MCG + FLUTICASONE PROPIONATE 50 MCG						
53	SALMETEROL 50MCG + FLUTICASONE 500MCG						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
54	TIOTROPIUM 9 MCG						
55	TIOTROPIUM BROMIDE 9 MCG						
56	TIOTROPIUM 9 MCG + FORMOTEROL 6 MCG + CICLESONIDE 200 MCG						
57	TIOTROPIUM 9 MCG + FORMOTEROL FUMARATE 6 MCG						
ROTACAPS							
58	BECLOMETHASONE 200 MCG						
59	BECLOMETHASONE 100 MCG + LEVOSALBUTAMOL 100 MCG						
60	BECLOMETHASONE 100 MCG + LEVOSALBUTAMOL 100 MCG						
61	BECLOMETHASONE 200 MCG + LEVOSALBUTAMOL 100 MCG						
62	BUDESONIDE 1 MG						
63	BUDESONIDE 200 MCG						
64	BUDESONIDE 400 MCG						
65	FLUTICASONE FUROATE.. 100MCG + VILANTEROL 25 MCG						
66	FLUTICASONE PROPIONATE 100 MCG + FORMOTEROL FUMARATE 6MCG						
67	FLUTICASONE PROPIONATE 250 MCG + FORMOTEROL FUMARATE 6MCG						
68	FLUTICASONE PROPIONATE 500 MCG + FORMOTEROL FUMARATE 12MCG						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	
69	FORMOTEROL 12 MCG + BUDESONIDE 400 MCG						
70	FORMOTEROL 6 MCG + BUDESONIDE 100 MCG						
71	FORMOTEROL 6 MCG + BUDESONIDE 200 MCG						
72	FORMOTEROL 6 MCG + BUDESONIDE 400 MCG						
73	FORMOTEROL FUMARATE DIHYDRATE 6 MCG + BECLOMETHASONE DIPROPIONATE 200 MCG (POTACAB)						
74	FORMOTEROL FUMARATE DIHYDRATE 6 MCG + BECLOMETHASONE DIPROPIONATE 400 MCG (POTACAB)						
75	Glycopyrronium Ph. Eur 25mcg+Formoterol fumarate IP 12mcg+Budesonide IP 400mcg						
76	GLYCOPYRRONIUM...25MCG + FORMOROL FUMARATE DIHYDRATE...12MCG						
77	INDACATEROL.....110 MCG +GLYCOPYRRONIUM 50 MCG						
78	IPRATROPIUM BROMIDE 40 MCG						
79	LEVOSALBUTAMOL 100 MCG + IPRATROPIUM BROMIDE 40 MCG						
80	LEVOSALBUTAMOL 100 MCG						
81	LEVOSALBUTAMOL ...100MCG + IPRATROPIUM BROMIDE (ANHYDROUS)80MCG						
82	LEVOSALBUTAMOL 100 MG						
83	NINTEDANIB 100 MG						
84	NINTEDANIB 200 MG						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
85	SALBUTAMOL 200 MCG						
86	SALMETEROL 50 MCG + FLUTICASONE 100 MCG						
87	SALMETEROL 50 MCG + FLUTICASONE 500 MCG						
88	Salmeterol 50 mcg+ Fluticasone propionate BP 250 mcg						
89	Salmeterol 50 mcg+Fluticasone Propionate BP 500 mcg						
90	SALMETEROL 50MCG + FLUTICASONE 250MCG						
91	TIOTROPIUM 18 MCG + FORMOTEROL 12 MCG + CICLESONIDE 400 MCG						
92	TIOTROPIUM 18 MCG + FORMOTEROL FUMERATE 12 MCG						
93	TIOTROPIUM 18 MCG						
94	TIOTROPIUM 18 MCG + FORMOTEROL FUMARATE 12.5 MCG						
95	VILANTEROL 40 MG + GLYCOPYRRONIUM 63 MCG						
96	VILANTEROL25 MCG+FLUTICASONE FUROATE 100 MCG+GLYCOPYRRONIUM 50 MCG						
NASAL SPRAY							
97	AZELASTINE HCL 140 MCG + FLUTICASONE FUROATE 27.5 MCG						
98	AZELASTINE HCL 140 MCG + FLUTICASONE PROPIONATE 50 MCG						
99	FLUTICASONE 0.05% W/V						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
100	FLUTICASONE FUORATE 27.5 MCG						
101	FLUTICASONE FUROATE (27.5MCG) + AZELASTINE (140MCG)						
102	FLUTICASONE FUROATE 27.5MCG						
103	FLUTICASONE PROPINATE 50 MCG						
104	MOMETASONE FUROATE 50 MCG						
105	MOMETASONE FUROATE 50 MCG + AZELASTINE 140 MCG						
106	XYLOMETAZOLINE HCL 0.1 % W/V						
SOLUTION							
107	ARFOMOTERO15 MCG						
108	SALBUTAMOL SOLUTION						
109	IPRATROPIUM BROMIDE 250 MCG/ML						
SYNCRORBREATHE							
110	SALMETEROL 25 MCG + FLUTICASONE 250 MCG						
TABLET							
111	PIDOTIMOD 400 MG						
112	PIDOTIMOD 800 MG						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
SATCHET							
113	SODIUM CHLORIDE 4.0 G+ SODIUM BICARBONATE 0.4 G						
DEVICES							
114	ASTHMA DEVICE (BREATHE-O-METER)						
115	AIRWAYS-SPIROFY AIRWAYS						
116	ASTHMA DEVICE - REVOLIZER						
117	ASTHMA DEVICE - (MINI ZEROSTAT SPACER)						
118	ASTHMA DEVICE - ROTAHALER						
119	ASTHMA DEVICE - ZEROSTAT VT SPACE						
120	ASTHMA DEVICE (INFANT MASK)						
121	ASTHMA DEVICE HUF PUF KIT						
122	ASTHMA DEVICE (BABAY MASK)						
123	INDAFLO INHALER DPI DEVICE MEDICAL DEVICE						
124	TELEMETRIC DIAGNOSTIC SPIROMETER (KIT)						
125	TRANSPACER - V						
126	LUPIHALER						

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
127	LUPIHALER T						
128	ADHERO						
129	TRANSPACER G						
130	NEBSTER						
131	NEBSTER DISPOSABLE MESH						
132	NEW TRANSPACER VM (WITH PLASTIC BOX)						
133	AEROBIKA						
134	MACHALER						

Note: • GST will be applicable as per prevailing rate at the time of supply.

- The CPD reserves the right to reject any tender for any reason during the procurement process.
- Please enclose all applicable valid licences,WHO/GMP/DCGA /FDA /US FDA approvals wherever applicable.
- Rates once approved, shall remain valid for at least two years as per rate contract applicable for MGM Hospital Navi Mumbai and Sambhajinagar.
- Please enclose authorised distributors detail

Date :-

Seal

Signature of Tenderer:	
Name :-	
Designation :-	
Email ID :-	
Mobile No :-	
Drug Licence Nos :-	
Full Address :-	
GST No :-	
PAN/TAN No :-	

Sr.No	Composition Name	Brand Name of Medicines (Respiratory product / Nasal Spray)					
		Name of Manufacturer	Brand Name	Unit & Strength Offered	Quoted Rate Per Unit	MRP Per Unit	WHO GMP (Central) / US FDA approval / DCGA CERTIFICATION if available)
• LIST OF AUTHORISED DISTRIBUTORS AT NAVI MUMBAI AND AURANGABAD							
Sr. No.	<u>NAVI MUMBAI</u>			<u>SAMBHAJINAHGAR</u>			
1	Supplier Name:			Supplier Name:			
	Drug Lic No. :			Drug Lic No. :			
	GST No. :			GST No. :			
	Pan No. :			Pan No. :			
	Address :			Address :			
	Email. Id :			Email. Id :			
	Cont No.:			Cont No.:			
Sr. No.	<u>NAVI MUMBAI</u>			<u>SAMBHAJINAHGAR</u>			
2	Supplier Name:			Supplier Name:			
	Drug Lic No. :			Drug Lic No. :			
	GST No. :			GST No. :			
	Pan No. :			Pan No. :			
	Address :			Address :			
	Email. Id :			Email. Id :			
	Cont No.:			Cont No.:			