

भारत सरकार / GOVERNMENT OF INDIA
अंतरिक्ष विभाग / DEPARTMENT OF SPACE
विक्रम साराभाई अंतरिक्ष केंद्र / VIKRAM SARABHAI SPACE CENTRE
तिरुवनंतपुरम / THIRUVANANTHAPURAM – 695 022

विज्ञा. सं. वीएसएससी/पी/विज्ञा./366/2023 दि. 04.12.2023
ADVT. NO. VSSC/P/ADVT/366/2023 DT. 04.12.2023

भारत के राष्ट्रपति के लिए तथा उनकी ओर से वरिष्ठ प्रधान, क्रय एवं भंडार, विक्रम साराभाई अंतरिक्ष केंद्र (वीएसएससी), तिरुवनंतपुरम, निम्नलिखित के लिए मोहरबंद निविदाएं आमंत्रित करता है।

For & on behalf of the President of India, the Sr. Head Purchase & Stores, Vikram Sarabhai Space Centre (VSSC), Thiruvananthapuram invites Sealed Tender for the following :-

क्रम सं. Sl. No	निविदा सं. Tender No.	वर्णन / Description	मात्रा Qty.	निविदा शुल्क Tender Fee
01.	8082-2023003977-01 [दो भाग / TWO PART]	दवाओं/औषधियों (अर्बुद की दवाएं सहित) और चिकित्सा संबंधी उपभोज्य वस्तुओं के लिए दर संविदा Rate Contract for Medicines / Drugs (including Oncology medicines) and Medical consumables	1 लॉट/ Lot	रु. 560/-
नोट:- विनिर्देशन तथा विस्तृत निबंधन एवं शर्तें निविदा दस्तावेज़ के अनुसार Note :- Specification and detailed terms & conditions as per Tender document				

निविदा प्राप्त करने की अंतिम तिथि / Due Date for Receipt of Tender	02/01/2024 up to 16:00 Hrs.
निविदा खोलने की तिथि / Tender Opening Date	03/01/2024 at 11:00 Hrs.

विवरण हमारे वेबसाइट www.vssc.gov.in / www.isro.gov.in में उपलब्ध है।

Details are available in our websites : www.vssc.gov.in / www.isro.gov.in

शुद्धिपत्र, यदि कोई हो तो, हमारे वेबसाइट में मात्र प्रकाशित किया जाएगा।

Corrigendum, if any will be published in our websites only.

हस्ताक्षरित/Sd/-

वरि. प्रधान, क्रय एवं भंडार / Sr. Head, Purchase & Stores

भारत सरकार
अंतरिक्ष विभाग (अं.वि.)
विक्रम साराभाई अन्तरिक्ष केन्द्र
तिरुवनन्तपुरम -695022
क्रय एवं भंडार



GOVERNMENT OF INDIA
DEPARTMENT OF SPACE (DOS)
VIKRAM SARABHAI SPACE CENTRE
THIRUVANANTHAPURAM 695022
PURCHASE UNIT-I,MAIN PURCHASE,RFF AREA
Ph No. 0471-2563139,3676,3522,3523 Fax. 0471-2705092 / 2562065
e-mail :spsd_psd@vssc.gov.in

निविदा आमंत्रण
INVITATION TO TENDER

मैसर्स
M/s

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हमारी संदर्भ सं

Our Ref. No. 8082 2023-003977-01

निविदा अंतिम तिथि

Tender Due at 16:00 hrs IST on 02/01/2024

महोदय

Dear Sirs,

कृपया निम्नलिखित मदों की आपूर्ति के लिए अनुलग्नक (फार्म सं. संलग्न) में उल्लिखित निबंधन एवं शर्तों के अनुसार संलग्न निविदा प्रपत्र में वर्णनात्मक सूचीपत्र/पैम्फलेट/साहित्य सहित हमारी संदर्भ सं. एवं अंतिम तिथि (मोटे अक्षरों में) ऊपर लिखते हुए अपनी मुहरबंद निविदा प्रस्तुत करें।

Please submit your sealed quotation , in the Tender Form enclosed here along with the descriptive catalogues /pamphlets /literature ,superscribed with Our Ref.No. and Due Date for the supply of the following items as per the terms & conditions mentioned in Annexure(Form No. AS PER ANNEXURE)

क्र.सं. Sl. No.	विनिर्देशों सहित मद का विवरण Description of items with Specifications	इकाई Unit	मात्रा Quantity
1	RATE CONTRACT FOR MEDICINES/DRUGS (INCLUDING ONCOLOGY MEDICINES) AND MEDICAL CONSUMABLES	LOT	1

सुपुर्दगी स्थल

Delivery At RPP MEDICAL STORES, VSSC, TVM

प्रेषण की विधि

Mode of Despatch ON SITE

शुल्क छूट

Duty Exemptions N/A

विशेष अनुदेश

Special Instructions NIL

विशेष निबंधन

Specific Terms AS PER ANNEXURE

निविदाकारों को अनुदेश

Instructions to Tenderers

- (1) Terms & Conditions are detailed in Annexures.
- (2) Please send your quotation in sealed cover only. Our reference number and due date shall be clearly indicated in your offer and on the cover.
- (3) This is a Two Part Tender. Part-I contains Techno-Commercial Bid and Part-II contains Price Bid.
- (4) All Technical and Commercial Terms and Conditions shall be furnished in the Techno-Commercial Bid (Part-I) while Price shall be indicated only in the Price Bid (Part-II) in the prescribed format
- (5) Offers not meeting the above condition will be summarily rejected.
- (6) Fax offers, email offers, late offers and delayed offers will not be considered.

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भारत के राष्ट्रपति के लिए एवं ओर से
For and on behalf of the President of India
क्रेता / The Purchaser

TERMS & CONDITIONS FOR TENDER NO.8082 2023003977-01

➤ **VIKRAM SARABHAI SPACE CENTRE (VSSC), Thiruvananthapuram/Indian Space Research Organisation proposes to enter into a Rate Contract for the supply of quality pharmaceutical products as listed in the tender and solicit valuable competitive discounted offer; subject to the following terms and conditions. Any Pharmaceutical Company or Authorized Distributors, who are either Class I or Class II Local Suppliers as per Make-In-India Policy, can participate in the tender process.**

➤ **TWO-PART TENDER**

- This is a **TWO PART TENDER**. Part-I contains Techno-Commercial bid and Part-II contains Price bid. **All technical and commercial terms and conditions shall be furnished in the techno-commercial bid while price shall be indicated only in the price bid in the prescribed format.**
- PART-I (TECHNO-COMMERCIAL BID) SHALL BE PUT IN ONE SEALED ENVELOPE DULY SUPERSCRIBING **OUR TENDER NO. 8082-2023003977-01 AND DUE DATE AND DUE TIME 02/01/2024 [16:00 HRS.]** WITH DUE MARKING **“PART-I - TECHNO-COMMERCIAL BID”**.
- PART-II (PRICE BID) SHALL BE PUT IN ANOTHER SEALED ENVELOPE DULY SUPERSCRIBING **OUR TENDER NO. 8082-2023003977-01** WITH DUE MARKING **“PART-II- PRICE BID”**.
- BOTH THE SEALED ENVELOPES VIZ., PART-I AND PART-II SHALL BE PUT IN ANOTHER SEALED ENVELOPE SUPERSCRIBING **TENDER NO. 8082-2023003977-01 AND DUE DATE AND DUE TIME 02/01/2024 [16:00 HRS.]** AND SENT TO THE FOLLOWING ADDRESS:

**SR. PURCHASE & STORES OFFICER
PURCHASE UNIT-I (MAIN PURCHASE)
PURCHASE & STORES DIVISION, RFF AREA
VIKRAM SARABHAI SPACE CENTRE
ISRO P.O., THIRUVANANTHAPURAM-695 022**

- **IF ANY PRICE DETAILS ARE INCLUDED IN THE PART-I TECHNO-COMMERCIAL BID, YOUR OFFER WILL BE SUMMARILY REJECTED. PRICE BID OF THE TECHNO-COMMERCIALY QUALIFIED OFFERS ONLY WILL BE OPENED.**
- **FAX/EMAIL OFFERS AND LATE & DELAYED OFFERS WILL NOT BE CONSIDERED.**

➤ **TENDER FEE**

Tender Documents can be downloaded from our websites: www.vssc.gov.in / www.isro.gov.in. Tender Fee (Rs. 560/-) shall be paid through Non-tax & Revenue Receipts Portal (NTRP) (URL:<https://bharatkosh.gov.in>). Payment receipt shall be submitted along with the quotation. Other mode of payment is not acceptable. [The tender fee is NON-REFUNDABLE]. Government Departments, PSUs (both Central and State), Small Scale Industries units borne in the list of NSIC and MSME are exempted from submission of tender fee subject to submission of documentary evidence for the same.

➤ **EARNEST MONEY DEPOSIT (EMD)**

- a) Registered Vendors and Vendors who have already applied for renewal of registration, Central PSUs, PSEs, Autonomous Bodies, Micro and Small Enterprises, KVIC, National Small Industries Corporation etc., are exempted from the payment of EMD.
- b) EMD or Bid Security is obtained to ensure the earnestness of the vendor in the procurement process. Other Vendors participating in the tender process have to furnish EMD through NTRP for Rs. 5,00,000/- (Rupees Five Lakh Only). EMD will be interest free. EMD may also be furnished in the form of Fixed Deposit Receipts or Bank Guarantee from any of the Scheduled Banks executed on non-judicial stamp paper of value Rs.200/-. In case of Bank Guarantee, it shall be valid for a period of 45 days beyond the final tender validity date.
- c) Any tender not accompanied with EMD shall be treated as invalid tender and rejected. Vendors seeking exemption from payment of EMD shall submit necessary proof for exemptions.
- d) EMD of vendor shall be forfeited if the tenderer/contractor withdraws or amends his tender or deviates from the tender in any respect within the period of the validity of the tender. Failure to furnish Security Deposit/Performance Bond by a successful vendor within the specified period shall also result in forfeiture of EMD.
- e) EMD shall be refunded to all the unsuccessful vendors within thirty days after placement of the Purchase Order. EMD shall be refunded to the successful tenderer / contractor after payment of the Security Deposit. EMD shall be refunded to all the participants in cases where the tender is cancelled or withdrawn by the Centre, within thirty days from the date of such cancellation or withdrawal.

➤ **BID VALIDITY** – Offer shall be valid for a minimum period of 180 days from the date of opening of Part-I: Techno-Commercial Bid.

➤ VSSC has a right to cancel the tender without assigning any reason.

➤ VSSC reserves the right of acceptance of the whole or any part of the tender or portions of the quantity offered and the tenderers shall supply the same at the rates quoted.

➤ Interested parties can participate in the tender opening process and such parties shall provide the details of their Authorized Representatives to SPSO, Purchase Unit-I (Main Purchase), by email to spso_main_pur@vssc.gov.in.

- **DOCUMENT CHECKLIST & COMPLIANCE STATEMENT**- Checklist for Documents to be submitted (**Annexure-A**) and the Compliance Statement as at **Annexure-B** are to be duly filled in and attached along with **PART-I TECHNO-COMMERCIAL BID** without fail.

PART-I → TERMS & CONDITIONS FOR TECHNO-COMMERCIAL BID

1.0 Scope of Rate Contract

Scope of Rate Contract is to procure quality pharmaceutical products (**as listed at Annexure-2**) from reputed suppliers.

2.0 Period of Rate Contract

VSSC proposes to enter into a Rate Contract for the supply of quality pharmaceutical products initially for a period of **ONE YEAR** from the date of issue of the Rate contract. This can be extended for a further period of **one year** on mutual consent.

3.0 Termination/Short-closure of Rate Contract

Both the parties reserve the right to terminate/short-close the period of Rate Contract during its currency by giving three months' notice.

4.0 Quality of Medicines

4.1 The Manufacturer / Authorized Dealer must ensure that the products quoted should possess valid WHO – GMP Certificate in respect of the production units and the products quoted. **Copy of the same along with the list of products should be attached.**

4.2 The pharmaceutical company/authorized dealer shall certify that the medicines/drugs quoted for supply are as per the formulation specified/approved under the Drug Control Act and Food & Drug Control Administration Regulations or any similar Regulations. Self-declaration form to be signed by the authorized dealer or manufacturer to be provided in **Annexure-C**. The pharmaceutical company/authorized dealer shall be held responsible for consequences, if any, of supplying spurious, adulterated or sub-standard medicines/drugs not conforming to extant Act/Regulations.

4.3 On receipt of supply orders, the pharmaceutical company/authorized dealer shall furnish a copy of the analytical report for each batch of medicines/drugs based on the formulation submitted by the pharmaceutical company and approved by the Drug Control Authority/Food & Drug Control Administration (FDCA), failing which the medicines/drugs supply shall be rejected. VSSC will be free to get the analytical test done by any of the FDCA approved laboratory.

5.0 Replacement with latest batches for medicines nearing expiry date / Return of unused medicines against credit note

5.1 The medicines/drugs supplied against each requisition should be from the latest batch/batches manufactured during the validity of the WHO GMP certificate. If the full quantity of medicines/drugs supplied could not be dispensed within the expiry date, the supplier shall replace the same from the latest batch/es.

5.2 The Supplier shall also take back any unused medicines and provide credit note for the same for adjusting the amount in the future payments.

6.0 Mode of Operation of this R/C

- 6.1 Supply Orders will be placed periodically against the finalized R/C. Chief Medical Officer, VSSC (CMO) is the authorized official to place Supply Orders.
- 6.2 Supplies shall be made directly by the Manufacturer or through Authorized Dealer/Distributor only. Appropriate details in this respect shall be provided as per **Annexures D & E**. Valid authorization certificate from the Manufacturer shall be submitted wherever applicable.

7.0 Class I & II Local Suppliers as per Make-In-India [MII] Policy

- 7.1 Only Class I and Class II local suppliers as per the provisions of Make in India (MII) Policy issued by the Government of India are eligible to participate in this tender. **A Self-Declaration Certificate shall be compulsorily provided [Annexure-F].**
- 7.2 Non-local suppliers will be considered only in the absence of Class-I/II local suppliers and subject to the approval of competent authority.
- 7.3 In case the pharmaceutical products meant for supply to VSSC is **Rs. 1000 Lakhs and above**, such pharmaceutical companies/their authorized distributors shall submit **the Minimum Local Content Certificate, issued by a Cost Accountant/Chartered Accountant [Annexure-G].**

8.0 Delivery Period of Medicines

- 8.1 Arrangement shall be made to supply quality medicines within the mutually agreed delivery period from the date of issuance of a Supply Order by CMO, VSSC.
- 8.2 **Delivery Period:** Supply of medicines shall be within 45 days from the date of the individual supply order.
- 8.3 Supplier shall maintain adequate quantity of quality medicines in stock to meet the demands of VSSC and there shall be no delays in delivering the ordered medicines in time.

9.0 Liquidated Damages

Delivery is the essence of the Rate Contract. In case of delay in delivery of the items within the stipulated delivery period, the Centre shall recover from the pharmaceutical company/authorized dealer, Liquidated Damages @0.5% (half percent) of the value of the delayed portion of supply per week or part thereof or as mutually agreed, subject to a maximum of 10% of the order value.

10.0 Places of delivery

The medicines are to be supplied at RPP Medical Stores, VSSC, Near SBI Thumba Branch, ISRO PO, Trivandrum, based on Supply Orders issued by CMO, VSSC.

11.0 Passing on Special discounts/ bonus dose etc. offered by drug companies to VSSC

Occasionally, whenever the company offers special discounts/bonus offers, etc. for the medicines/drugs, to popularize such drugs/ treatments, such benefits shall invariably be passed on to VSSC.

12.0 Payment

- 12.1 VSSC shall make all efforts to ensure prompt payment of your bills as detailed below:
- 12.2 The invoices/bills should be drawn in the name of Accounts Officer, Centre Accounts, VSSC and forwarded to Chief Medical Officer (CMO), VSSC.

- 12.3 On receipt of invoice/bills from supplier CMO shall recommend payment bills after scrutiny. Accounts Officer, Centre Accounts, VSSC shall release the payment through RTGS/PFMS within 30 working days from date of receipt of invoice/bills at VSSC.
- 12.4 Supplier's Invoice shall invariably bear the GST Registration No. (GSTIN) & the applicable GST rates with HSN code. In the absence of these, the invoices shall not be processed for payment.
- 12.5 VSSC's GSTIN is 32AAAGV0026J1ZL and our Bankers are State Bank of India, Thumba Branch and IFS Code is SBIN0002279.

13.0 Security Deposit

Upon award of the Rate Contract, Security Deposit (SD) shall be submitted for 3% of the value of the Rate Contract towards satisfactory execution of the Contract. The SD shall be submitted either by Bank Guarantee or Fixed Deposit Receipt or Insurance Surety Bond from a Scheduled/Nationalised Bank on non-judicial stamp paper (Rs.200/-) valid for a period of 60 days beyond the date of the completion of the Rate contract.

14.0 Parallel/Adhoc Rate Contract and Splitting of Orders

VSSC shall reserve the right to enter into parallel/adhoc Rate Contract(s) simultaneously, or at any time during the period of the Rate Contract, with one or more agencies. VSSC reserves the right to split the Contract quantity between the suppliers. In such case, the lowest rate [L-1] accepted will be counter offered to other parties and order will be split based on their acceptance. L1 parties will get 55% of the total orders. L2 and L3 parties will get 22.5% each of the total orders.

15.0 Fall Clause:

The prices charged for the stores supplied under the Contract by the vendor should in no event exceed the lowest price at which the vendor sells the stores of identical description to any other person during the period of the Contract. If at any time, the prices are reduced, the same shall be notified to the Department and shall stand correspondingly reduced.

16.0 Risk Purchase

The Centre shall also reserve the right to procure the medicines/drugs of similar nature/formulation from the open market in case the pharmaceutical company / authorized dealer fails to make the supply by invoking the risk purchase clause and the difference cost, if any, shall be reimbursed or recovered from the Supplier.

17.0 Arbitration:

In the event of any dispute/s, difference/s or claim/s arising out of or relating to the interpretation and application of the Contract, such dispute/s or difference/s or claim/s shall be settled amicably by mutual consultations of the good Offices of the respective Parties and recognizing their mutual interests, attempt to reach a solution satisfactory to both the parties. If such a resolution is not possible, within 30 days from the date of receipt of written notice of the existence of such dispute/s, then the unresolved dispute/s or difference/s or claim/s shall be referred to the Sole Arbitrator appointed by the Parties by mutual consent in accordance with the rules and procedures of Arbitration and Conciliation (Amendment] 2015 Act, as amended from time to time. The arbitration shall be conducted in Bengaluru in the Arbitration and Conciliation Centre – Bengaluru (Domestic and International) as per its rules and regulations. The expenses for the Arbitration shall be shared equally or as may be determined by the Arbitrator. The considered and written decision of the Arbitrator shall be final and binding between the Parties. The applicable language for Arbitration shall be “English” only.

Work under the Contract shall be continued by the CONTRACTOR during the pendency of arbitration proceedings, without prejudice to a final adjustment in accordance with the decision of the Arbitrator unless otherwise directed in writing by the DEPARTMENT or unless the matter is such that the works cannot be possibly continued until the decision (whether final or interim) of the Arbitrator is obtained.

PART-II → TERMS & CONDITIONS FOR PRICE BID

18.0 Rates (Firm & Fixed)

- 18.1 The rates for products (as listed at Annexure-2) of this tender document shall be submitted in the prescribed format which can be downloaded from our websites www.vssc.gov.in / www.isro.gov.in. The Price Format shall be submitted as **Annexure - H in Part-II Price Bid**.
- 18.2 The rates offered shall be firm and fixed during the entire currency of the Rate Contract and no escalation shall be entertained. However, in case of any reduction in the rates, the same shall be passed on to VSSC. The rate variations due to statutory levy changes by the State/Central Government shall be allowed as cost hike, as the case may be.
- 18.3 **Annexure - H** shall be submitted in computerized print out form and all the pages of the offer shall be signed and stamped.
- 18.4 On demand, the bidder shall be ready to provide soft copy of the rates quoted as per Annexure-H to VSSC after opening of the Price Bids.

19.0 Trade Discount

Pharmaceutical Companies/Authorized dealers shall offer trade discount in percentage and on slab basis, over and above the offered rate, when the supply order exceeds Rs. 5 lakhs (Format enclosed as **Annexure-I** to be submitted along with Part-II Price bid).

LIST OF PHARMACEUTICAL PRODUCTS

SL. NO.	GENERIC NAME
1	4 - CARBOXYMETHYLAMINO - 4 - AMINO-DIPHENYL SULPHONE + DIBUCAINE + N, N - DIHYDROXYMETHYL CARBAMIDE EAR DROPS
2	ABEMACICLIB 100MG TAB
3	ABEMACICLIB 150MG TAB
4	ABEMACICLIB 200MG TAB
5	ABIRATERONE ACETATE 120MG TAB
6	ABIRATERONE ACETATE 250MG TAB
7	ABIRATERONE ACETATE 500MG TAB
8	ACARBOSE 25MG + METFORMIN 500MG TAB
9	ACARBOSE 25MG TAB
10	ACARBOSE 50MG + METFORMIN 500MG TAB
11	ACARBOSE 50MG TAB
12	ACEBROPHYLLINE 100MG CAP
13	ACEBROPHYLLINE 10MG/5ML SYP
14	ACEBROPHYLLINE 200MG CAP
15	ACEBROPHYLLINE 200MG + MONTELUKAST 10MG + FEXOFENADINE 120MG TAB
16	ACEBROPHYLLINE 200MG + MONTELUKAST 10MG + LEVOCETIRIZINE 5MG TAB
17	ACEBROPHYLLINE 200MG + MONTELUKAST 10MG TAB
18	ACEBROPHYLLINE 50MG/5ML SYP
19	ACECLOFENAC 100MG + SERRATIOPEPTIDASE 15MG TAB
20	ACECLOFENAC 100MG + THIOCOLCHICOSIDE 4MG TAB
21	ACECLOFENAC 100MG + THIOCOLCHICOSIDE 8MG TAB
22	ACECLOFENAC 100MG TAB
23	ACECLOFENAC 100MG+ PARACETAMOL 500MG TAB
24	ACECLOFENAC SR 200MG TAB
25	ACETAZOLAMIDE 250MG TAB
26	ACETYL CYSTEINE 150MG + TAURINE 500MG TAB
27	ACETYLCYSTEINE 5% EYE DROPS
28	ACICLOVIR 200MG TAB
29	ACICLOVIR 400MG TAB
30	ACICLOVIR 5% CREAM
31	ACICLOVIR 800MG TAB
32	ACYCLOVIR 400MG/5ML SYP
33	ACYCLOVIR 5% EYE OINTMENT
34	ADALIMUMAB 20MG INJ PFS
35	ADALIMUMAB 40MG INJ PFS
36	ADENOSINE 4MG/2ML INJ AMP
37	ADENOSINE 6MG/2ML INJ AMP
38	ADO-TRASTUZUMAB EMTANSINE 100MG INJ VIAL
39	ADO-TRASTUZUMAB EMTANSINE 160MG INJ VIAL

SL. NO.	GENERIC NAME
40	AFLIBERCEPT 2MG/0.05ML INJ PFS
41	AFLIBERCEPT 40MG/1ML INJ VIAL
42	ALBENDAZOLE 200MG/5ML SYP
43	ALBENDAZOLE 400MG TAB
44	ALBENDAZOLE 400MG/10ML SYP
45	ALBUMIN BOUND PACLITAXEL 100MG INJ VIAL
46	ALCAFTIDINE 0.25% EYE DROPS
47	ALENDRONATE 35MG TAB
48	ALENDRONATE 70MG + CHOLECALCIFEROL 5600 IU TAB
49	ALENDRONATE 70MG TAB
50	ALFUZOSIN 10MG TAB
51	ALFUZOSIN ER 10MG TAB
52	ALLOPURINOL 100MG TAB
53	ALOGLIPTIN 12.5MG TAB
54	ALOGLIPTIN 25MG TAB
55	ALOGLIPTIN 6.25MG TAB
56	ALPRAZOLAM 0.25MG TAB
57	ALPRAZOLAM 0.5MG TAB
58	ALPRAZOLAM 1MG TAB
59	AMANTADINE 100MG TAB
60	AMBROXOL 15MG + SALBUTAMOL 1MG SYP
61	AMBROXOL 30MG + CETIRIZINE 2.5MG/5ML SYP
62	AMBROXOL 30MG TAB
63	AMBROXOL 30MG/5ML SYP
64	AMBROXOL 60MG + LEVOCETIRIZINE 5MG TAB
65	AMBROXOL 75MG + LEVOCETIRIZINE 5MG TAB
66	AMIKACIN 500MG INJ VIAL
67	AMILORIDE 2.5MG + HYDROCHLOROTHIAZIDE 25MG TAB
68	AMILORIDE 5MG + FUROSEMIDE 40MG TAB
69	AMILORIDE 5MG + HYDROCHLOROTHIAZIDE 50MG TAB
70	AMIODARONE 100MG TAB
71	AMIODARONE 150MG/3ML INJ AMP
72	AMIODARONE 200MG TAB
73	AMISULPRIDE 100MG TAB
74	AMISULPRIDE 200MG TAB
75	AMISULPRIDE 25MG TAB
76	AMISULPRIDE 50MG TAB
77	AMITRYPTILINE 10MG TAB
78	AMITRYPTILINE 25MG TAB
79	AMITRYPTILINE 50MG TAB
80	AMITRYPTILINE 75MG TAB
81	AMLODIPINE 10MG TAB
82	AMLODIPINE 2.5MG + ATENOLOL 25MG TAB
83	AMLODIPINE 2.5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
84	AMLODIPINE 2.5MG + METOPROLOL 25MG TAB
85	AMLODIPINE 2.5MG TAB

SL. NO.	GENERIC NAME
86	AMLODIPINE 5MG + ATENOLOL 50MG TAB
87	AMLODIPINE 5MG + BISOPROLOL 2.5MG TAB
88	AMLODIPINE 5MG + BISOPROLOL 5MG TAB
89	AMLODIPINE 5MG + CHLORTHALIDONE 12.5MG TAB
90	AMLODIPINE 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
91	AMLODIPINE 5MG + INDAPAMIDE 1.5MG TAB
92	AMLODIPINE 5MG + METOPROLOL 25MG TAB
93	AMLODIPINE 5MG + METOPROLOL 50MG TAB
94	AMLODIPINE 5MG + NEBIVOLOL 5MG TAB
95	AMLODIPINE 5MG TAB
96	AMOROLFINE 5% NAIL LACQUER
97	AMOXAPINE 100MG TAB
98	AMOXAPINE 50MG TAB
99	AMOXYCILLIN + CLAVULANIC ACID 1200MG INJ VIAL
100	AMOXYCILLIN + CLAVULANIC ACID 228.5MG DT TAB
101	AMOXYCILLIN + CLAVULANIC ACID 228.5MG/5ML SYP
102	AMOXYCILLIN + CLAVULANIC ACID 375MG TAB
103	AMOXYCILLIN + CLAVULANIC ACID 457MG TAB
104	AMOXYCILLIN + CLAVULANIC ACID 457MG/5ML SYP
105	AMOXYCILLIN 100MG/1ML ORAL DROPS
106	AMOXYCILLIN 125MG + CLOXACILLIN 125MG CAP
107	AMOXYCILLIN 125MG CAP
108	AMOXYCILLIN 125MG DT TAB
109	AMOXYCILLIN 125MG/5ML SYP
110	AMOXYCILLIN 250MG (2 TABS) + TINIDAZOLE 500MG (2 TABS) + OMEPRAZOLE 20MG (2 CAPS) KIT
111	AMOXYCILLIN 250MG + CLOXACILLIN 250MG CAP
112	AMOXYCILLIN 250MG CAP
113	AMOXYCILLIN 250MG CAP
114	AMOXYCILLIN 250MG DT TAB
115	AMOXYCILLIN 250MG TAB
116	AMOXYCILLIN 250MG/5ML SYP
117	AMOXYCILLIN 500MG + CLAVULANATE 125MG CAP
118	AMOXYCILLIN 500MG + CLAVULANATE 125MG TAB
119	AMOXYCILLIN 500MG CAP
120	AMOXYCILLIN 500MG TAB
121	AMOXYCILLIN 80MG + CLAVULANIC ACID 11.4MG/1ML ORAL DROPS
122	AMOXYCILLIN 875MG + CLAVULANATE 125MG CAP
123	AMOXYCILLIN 875MG + CLAVULANATE 125MG TAB
124	AMPICILLIN 100MG/1ML ORAL DROPS
125	AMPICILLIN 125MG + CLOXACILLIN 125MG DT TAB
126	AMPICILLIN 125MG + CLOXACILLIN 125MG/5ML SYP
127	AMPICILLIN 125MG/5ML SYP
128	AMPICILLIN 250MG + DICLOXACILLIN 250MG CAP
129	AMPICILLIN 250MG CAP
130	AMPICILLIN 500MG CAP

SL. NO.	GENERIC NAME
131	ANASTRAZOLE 1MG TAB
132	APIXABAN 2.5MG TAB
133	APIXABAN 5MG TAB
134	ARIPIPRAZOLE 10MG TAB
135	ARIPIPRAZOLE 15MG TAB
136	ARIPIPRAZOLE 20MG TAB
137	ARIPIPRAZOLE 2MG TAB
138	ARIPIPRAZOLE 30MG TAB
139	ARIPIPRAZOLE 5MG TAB
140	ASPIRIN 100MG TAB
141	ASPIRIN 150MG + ATORVASTATIN 10MG CAP
142	ASPIRIN 150MG + ATORVASTATIN 20MG CAP
143	ASPIRIN 150MG + CLOPIDOGREL 75MG TAB
144	ASPIRIN 150MG + ROSUVASTATIN 10MG CAP
145	ASPIRIN 150MG + ROSUVASTATIN 10MG TAB
146	ASPIRIN 150MG + ROSUVASTATIN 20MG CAP
147	ASPIRIN 150MG + ROSUVASTATIN 20MG TAB
148	ASPIRIN 150MG TAB
149	ASPIRIN 325MG TAB
150	ASPIRIN 50MG TAB
151	ASPIRIN 75MG + ATORVASTATIN 10MG CAP
152	ASPIRIN 75MG + ATORVASTATIN 20MG CAP
153	ASPIRIN 75MG + ATORVASTATIN 40MG CAP
154	ASPIRIN 75MG + CLOPIDOGREL 150MG TAB
155	ASPIRIN 75MG + CLOPIDOGREL 75MG + ATORVASTATIN 10MG CAP
156	ASPIRIN 75MG + CLOPIDOGREL 75MG + ROSUVASTATIN 10MG CAP
157	ASPIRIN 75MG + CLOPIDOGREL 75MG + ROSUVASTATIN 20MG CAP
158	ASPIRIN 75MG + CLOPIDOGREL 75MG + ATORVASTATIN 20MG CAP
159	ASPIRIN 75MG + CLOPIDOGREL 75MG TAB
160	ASPIRIN 75MG + ROSUVASTATIN 10MG CAP
161	ASPIRIN 75MG + ROSUVASTATIN 10MG TAB
162	ASPIRIN 75MG + ROSUVASTATIN 20MG CAP
163	ASPIRIN 75MG + ROSUVASTATIN 20MG TAB
164	ASPIRIN 75MG TAB
165	ATENOLOL 100MG TAB
166	ATENOLOL 25MG + CHLORTHALIDONE 12.5MG TAB
167	ATENOLOL 25MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
168	ATENOLOL 25MG TAB
169	ATENOLOL 50MG + CHLORTHALIDONE 12.5MG TAB
170	ATENOLOL 50MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
171	ATENOLOL 50MG + INDAPAMIDE 1.5MG TAB
172	ATENOLOL 50MG + INDAPAMIDE 2.5MG TAB
173	ATENOLOL 50MG TAB
174	ATEZOLIZUMAB 1200MG INJ VIAL
175	ATOMOXETINE 10MG TAB
176	ATOMOXETINE 18MG TAB

SL. NO.	GENERIC NAME
177	ATOMOXETINE 25MG TAB
178	ATORVASTATIN 10MG + EZETIMIBE 10MG TAB
179	ATORVASTATIN 10MG + FENOFIBRATE 145MG TAB
180	ATORVASTATIN 10MG + FENOFIBRATE 160MG TAB
181	ATORVASTATIN 10MG TAB
182	ATORVASTATIN 20MG + EZETIMIBE 10MG TAB
183	ATORVASTATIN 20MG + FENOFIBRATE 160MG TAB
184	ATORVASTATIN 20MG TAB
185	ATORVASTATIN 40MG TAB
186	ATORVASTATIN 5MG + EZETIMIBE 10MG TAB
187	ATORVASTATIN 5MG + FENOFIBRATE 145MG TAB
188	ATORVASTATIN 5MG + FENOFIBRATE 160MG TAB
189	ATORVASTATIN 5MG TAB
190	ATORVASTATIN 80MG TAB
191	ATROPINE SULPHATE 1% EYE DROPS
192	ATROPINE SULPHATE 1% EYE OINTMENT
193	AXITINIB 1MG TAB
194	AXITINIB 5MG TAB
195	AZACITIDINE 100MG INJ VIAL
196	AZATHIOPRINE 25MG TAB
197	AZATHIOPRINE 50MG TAB
198	AZELASTINE 140MCG + FLUTICASONE 50MCG NASAL SPRAY
199	AZELASTINE HYDROCHLORIDE. 0.05% EYE DROPS
200	AZILSARTAN 20MG TAB
201	AZILSARTAN 40MG TAB
202	AZILSARTAN 80MG TAB
203	AZITHROMYCIN 1% EYE DROPS
204	AZITHROMYCIN 1% EYE OINTMENT
205	AZITHROMYCIN 1000MG TAB + ORNIDAZOLE (750MG x 2) TAB +
206	AZITHROMYCIN 1000MG TAB + SECNIDAZOLE 1000MG TAB +
207	AZITHROMYCIN 100MG DT TAB
208	AZITHROMYCIN 100MG/5ML SYP
209	AZITHROMYCIN 200MG/5ML SYP
210	AZITHROMYCIN 250MG DT TAB
211	AZITHROMYCIN 250MG TAB
212	AZITHROMYCIN 500MG TAB
213	B COMPLEX TAB
214	BACLOFEN 10MG TAB
215	BECLOMETHASONE DIPROPIONATE 0.025% + NEOMYCIN SULPHATE 0.5% + CLOTRIMAZOLE 1% OINT
216	BENDAMUSTINE 100MG INJ VIAL
217	BENIDIPINE 4MG TAB
218	BENIDIPINE 8MG TAB
219	BENZTHIAZIDE 25MG TAB
220	BEPOTASTINE BESILATE 1.5% EYE DROPS
221	BESIFLOXACIN 0.6% EYE DROPS

SL. NO.	GENERIC NAME
222	BETAHISTINE 16MG TAB
223	BETAHISTINE 24MG TAB
224	BETAHISTINE 32MG TAB
225	BETAHISTINE 8MG TAB
226	BETAMETASONE DIPROPIONATE + SALICYLIC ACID + ZINC OXIDE OINT
227	BETAMETHASONE DIPROPIONATE OINT
228	BETAMETHASONE 0.5MG TAB
229	BETAMETHASONE 0.5MG/1ML ORAL DROPS
230	BETAMETHASONE 4MG/1ML INJ AMP
231	BETAXOLOL 0.5% EYE DROPS
232	BEVACIZUMAB 100MG INJ VIAL
233	BEVACIZUMAB 300MG INJ VIAL
234	BEVACIZUMAB 400MG INJ VIAL
235	BEZAFIBRATE 200MG TAB
236	BEZAFIBRATE 400MG TAB
237	BICALUTAMIDE 150MG TAB
238	BICALUTAMIDE 50MG TAB
239	BILASTINE 10MG TAB
240	BILASTINE 20MG TAB
241	BIMATOPROST 0.01% EYE DROPS
242	BIMATOPROST 0.03% + TIMOLOL MALEATE 0.5% EYE DROPS
243	BIMATOPROST 0.03% EYE DROPS
244	BISACODYL 10MG SUPPOSITORY
245	BISACODYL 5MG SUPPOSITORY
246	BISACODYL 5MG TAB
247	BISOPROLOL 1.25MG TAB
248	BISOPROLOL 2.5MG + HYDROCHLOROTHIAZIDE 6.25MG TAB
249	BISOPROLOL 2.5MG TAB
250	BISOPROLOL 5MG + HYDROCHLOROTHIAZIDE 6.25MG TAB
251	BISOPROLOL 5MG TAB
252	BLEOMYCIN INJ 15 UNITS/VIAL
253	BLEOMYCIN INJ 30 UNITS/VIAL
254	BORTEZOMIB 2MG INJ VIAL
255	BRIMONIDINE TARTARATE 0.2% EYE DROPS
256	BRIMONIDINE TARTARATE + TIMOLOL MALEATE EYE DROPS
257	BRIMONIDINE TARTARATE 0.1% EYE DROPS
258	BRIMONIDINE TARTARATE 0.5% EYE DROPS
259	BRINZOLAMIDE 1% + BRIMONIDINE TARTARATE EYE DROPS
260	BRINZOLAMIDE 1% + TIMOLOL MALEATE 0.5% EYE DROPS
261	BRINZOLAMIDE 1% EYE DROPS
262	BROLUCIZUMAB 120MG/ML INJ VIAL
263	BROMFENAC SODIUM 0.09% EYE DROPS
264	BROMHEXINE 4MG TAB
265	BROMHEXINE 4MG/5ML SYP
266	BROMHEXINE 8MG TAB

SL. NO.	GENERIC NAME
267	BROMOCRIPTINE 1.25MG TAB
268	BROMOCRIPTINE 2.5MG TAB
269	BUDESONIDE 0.5MG NEBULIZER SOLUTION
270	BUDESONIDE 100MCG MDI
271	BUDESONIDE 100MCG RC
272	BUDESONIDE 1MG NEBULIZER SOLUTION
273	BUDESONIDE 200MCG MDI
274	BUDESONIDE 200MCG RC
275	BUDESONIDE 400MCG MDI
276	BUDESONIDE 400MCG RC
277	BUSPIRONE 10MG TAB
278	BUSPIRONE 5MG TAB
279	CABAZITAXEL 60MG INJ VIAL
280	CABERGOLINE 0.25MG TAB
281	CABERGOLINE 0.5MG TAB
282	CABERGOLINE 1MG TAB
283	CALAMINE + DIPHENHYDRAMINE LOTION
284	CALCIUM 1000MG + VITAMIN D 250 IU TAB
285	CALCIUM 1000MG TAB
286	CALCIUM 250MG TAB
287	CALCIUM 500MG + VITAMIN D 250 IU TAB
288	CALCIUM 500MG + VITAMIN D 500 IU TAB
289	CALCIUM 500MG TAB
290	CALCIUM CARBONATE + SODIUM BICARBONATE + SODIUM ALGINATE SUSP
291	CALCIUM DOBESILATE 0.25% + LIGNOCAINE 3% + HYDROCORTISONE 0.25% + ZINC 5% CREAM
292	CALCIUM DOBESILATE 500MG CAP
293	CALCIUM DOBESILATE 500MG TAB
294	CANAGLIFOZIN 100MG TAB
295	CANDESARTAN 16MG TAB
296	CANDESARTAN 4MG TAB
297	CANDESARTAN 8MG TAB
298	CAPECITABINE 500MG TAB
299	CAPMATINIB 150MG TAB
300	CAPMATINIB 200MG TAB
301	CAPTOPRIL 12.5MG TAB
302	CAPTOPRIL 25MG TAB
303	CARBEMAZEPINE 100MG TAB
304	CARBEMAZEPINE 100MG/5ML SYP
305	CARBEMAZEPINE 200MG TAB
306	CARBEMAZEPINE 400MG TAB
307	CARBIDOPA 10MG + LEVODOPA 100MG TAB
308	CARBIDOPA 25MG + LEVODOPA 100MG TAB
309	CARBIDOPA 25MG + LEVODOPA 250MG TAB
310	CARBIMAZOLE 10MG TAB

SL. NO.	GENERIC NAME
311	CARBIMAZOLE 20MG TAB
312	CARBIMAZOLE 5MG TAB
313	CARBOMER 980 + HYDROXY PROPYLMETHYL CELLULOSE EYE OINTMENT
314	CARBOPLATIN 150MG INJ VIAL
315	CARBOPLATIN 450MG INJ VIAL
316	CARBOXY METHYL CELLULOSE 1% EYE DROPS
317	CARBOXY METHYL CELLULOSE 0.5% EYE DROPS
318	CARFILZOMIB 60MG INJ VIAL
319	CARMELLOSE SODIUM + GYCERINE EYE DROPS
320	CARVEDILOL PHOSPHATE XR 10MG TAB
321	CARVEDILOL PHOSPHATE XR 20MG TAB
322	CARVEDILOL PHOSPHATE XR 40MG TAB
323	CEFACLOR 125MG DT TAB
324	CEFACLOR 125MG/5ML SYP
325	CEFACLOR 250MG DT TAB
326	CEFACLOR 500MG TAB
327	CEFACLOR 50MG/1ML ORAL DROPS
328	CEFADROXIL 500MG TAB
329	CEFADROXYL 100MG/1ML ORAL DROPS
330	CEFADROXYL 125MG DT TAB
331	CEFADROXYL 125MG/5ML DRY SYP
332	CEFADROXYL 250MG DT TAB
333	CEFADROXYL 250MG/5ML DRY SYP
334	CEFAPERAZONE 1000MG + SULBACTAM 500MG INJ VIAL
335	CEFDINIR 100MG DT TAB
336	CEFDINIR 125MG/5ML DRY SYP
337	CEFDINIR 300MG CAP
338	CEFDINIR 300MG TAB
339	CEFIXIME 100MG + CLAVULANIC ACID 62.5MG TAB
340	CEFIXIME 100MG DT TAB
341	CEFIXIME 100MG INJ VIAL
342	CEFIXIME 100MG/5ML DRY SYP
343	CEFIXIME 200MG + CLAVULANATE 125MG TAB
344	CEFIXIME 200MG + ORNIDAZOLE 500MG TAB
345	CEFIXIME 200MG DT TAB
346	CEFIXIME 200MG TAB
347	CEFIXIME 25MG/1ML ORAL DROPS
348	CEFIXIME 50MG + CLAVULANIC ACID 31.25MG/5ML SYP
349	CEFIXIME 50MG/5ML DRY SYP
350	CEFPODOXIME 100MG + CLAVULANIC ACID 62.5MG DT TAB
351	CEFPODOXIME 100MG + CLAVULANIC ACID 62.5MG/5ML DRY SYP
352	CEFPODOXIME 100MG DT TAB
353	CEFPODOXIME 100MG/5ML DRY SYP
354	CEFPODOXIME 200MG + CLAVULANATE 125MG TAB
355	CEFPODOXIME 200MG TAB

SL. NO.	GENERIC NAME
356	CEFPODOXIME 25MG/1ML ORAL DROPS
357	CEFPODOXIME 50MG + CLAVULANIC ACID 31.25 MG DT TAB
358	CEFPODOXIME 50MG DT TAB
359	CEFPODOXIME 50MG/5ML DRY SYP
360	CEFTRIAZONE 1GM INJ VIAL
361	CEFUROXIME 250MG + CLAVULANIC ACID 125MG TAB
362	CEFUROXIME 500MG + CLAVULANATE 125MG TAB
363	CEFUROXIME AXETIL 125MG TAB
364	CEFUROXIME AXETIL 125MG/5ML SYP
365	CEFUROXIME AXETIL 250MG TAB
366	CEFUROXIME AXETIL 500MG TAB
367	CEFUROXIME AXETIL 750MG INJ VIAL
368	CEPHALEXIN 100MG/1ML ORAL DROPS
369	CEPHALEXIN 125MG DT TAB
370	CEPHALEXIN 125MG/5ML SYP
371	CEPHALEXIN 250MG CAP
372	CEPHALEXIN 250MG DT TAB
373	CEPHALEXIN 375MG TAB
374	CEPHALEXIN 500MG CAP
375	CEPHALEXIN 750MG CAP
376	CETIRIZINE 10MG + PHENYLEPHRINE 10MG TAB
377	CETIRIZINE 5MG + PHENYLEPHRINE 10MG + PARACETAMOL 325MG TAB
378	CETIRIZINE HYDROCHLORIDE 10MG TAB
379	CETIRIZINE HYDROCHLORIDE 10MG/1ML ORAL DROPS
380	CETIRIZINE HYDROCHLORIDE 5MG TAB
381	CETIRIZINE HYDROCHLORIDE 5MG/5ML SYP
382	CHLORAMPHENICOL 0.5% EYE DROPS
383	CHLORAMPHENICOL 1% + HYDROCORTISONE ACETATE 0.5% EYE OINTMENT
384	CHLORAMPHENICOL 1% + POLYMYXIN B SULPHATE EYE OINTMENT
385	CHLORAMPHENICOL 1% EYE OINTMENT
386	CHLORDIAZEPOXIDE 10MG TAB
387	CHLORDIAZEPOXIDE 12.5MG + AMITRYPTILINE 5MG TAB
388	CHLORDIAZEPOXIDE 25MG + AMITRYPTILINE 10MG TAB
389	CHLORDIAZEPOXIDE 25MG TAB
390	CHLORDIAZEPOXIDE 5MG + CLIDINIUM BROMIDE 2.5MG TAB
391	CHLORPHENIRAMINE MALEATE 1MG + PHENYLEPHRINE 2.5MG/1ML ORAL DROPS
392	CHLORPHENIRAMINE MALEATE 0.01% EYE DROPS
393	CHLORPHENIRAMINE MALEATE 2MG + PHENYLEPHRINE 10MG + PARACETAMOL 500MG TAB
394	CHLORPHENIRAMINE MALEATE 2MG + DEXTROMETHORPHAN 10MG + PHENYLEPHRINE 5MG/5ML SUGARFREE SYP

SL. NO.	GENERIC NAME
395	CHLORPHENIRAMINE MALEATE 2MG + DEXTROMETHORPHAN 10MG + PHENYLEPHRINE 5MG/5ML SYP
396	CHLORPHENIRAMINE MALEATE 2MG + DEXTROMETHORPHAN 15MG + PHENYLEPHRINE 5MG/5ML SUGARFREE SYP
397	CHLORPHENIRAMINE MALEATE 2MG + DEXTROMETHORPHAN 15MG + PHENYLEPHRINE 5MG/5ML SYP
398	CHLORPHENIRAMINE MALEATE 2MG + PHENYLEPHRINE 10MG TAB
399	CHLORPHENIRAMINE MALEATE 4MG + DEXTROMETHORPHAN 10MG/5ML SUGARFREE SYP
400	CHLORPHENIRAMINE MALEATE 4MG + DEXTROMETHORPHAN 10MG/5ML SYP
401	CHLORPHENIRAMINE MALEATE 4MG TAB
402	CHLORPROMAZINE 100MG TAB
403	CHLORPROMAZINE 200MG TAB
404	CHLORPROMAZINE 25MG TAB
405	CHLORPROMAZINE 50MG TAB
406	CHLORTHALIDONE 12.5MG TAB
407	CHLORTHALIDONE 6.25MG TAB
408	CHOLECALCIFEROL 2000 IU CAP
409	CHOLECALCIFEROL 400 IU/ML ORAL DROPS
410	CHOLECALCIFEROL 60000 IU CAP
411	CHOLECALCIFEROL 60000 IU/5ML SYP
412	CHOLINE SALICYLATE 8.7% + LIDOCAINE 2% ORAL GEL
413	CILNIDIPINE 10MG + CHLORTHALIDONE 12.5MG TAB
414	CILNIDIPINE 10MG + CHLORTHALIDONE 6.25MG TAB
415	CILNIDIPINE 10MG + METOPROLOL 25MG TAB
416	CILNIDIPINE 10MG + METOPROLOL 50MG TAB
417	CILNIDIPINE 10MG TAB
418	CILNIDIPINE 20MG TAB
419	CILNIDIPINE 5MG TAB
420	CILOSTAZOLE 100MG TAB
421	CILOSTAZOLE 50MG TAB
422	CIMETIDINE 200MG TAB
423	CIMETIDINE 400MG TAB
424	CINITAPRIDE 3MG + PANTOPRAZOLE 40MG TAB
425	CINNARIZINE 20MG + DIMENHYDRINATE 40MG TAB
426	CINNARIZINE 25MG TAB
427	CIPROFLOXACIN 0.3% + DEXAMETHASONE 0.1% EYE/EAR DROPS
428	CIPROFLOXACIN 0.3% EYE OINTMENT
429	CIPROFLOXACIN 0.3% EYE/EAR DROPS
430	CIPROFLOXACIN 200MG/100ML INJ BOTTLE
431	CIPROFLOXACIN 250MG + TINIDAZOLE 300MG TAB
432	CIPROFLOXACIN 250MG TAB
433	CIPROFLOXACIN 500MG + ORNIDAZOLE 500MG TAB
434	CIPROFLOXACIN 500MG + TINIDAZOLE 600MG TAB
435	CIPROFLOXACIN 500MG TAB

SL. NO.	GENERIC NAME
436	CISPLATIN 10MG INJ VIAL
437	CISPLATIN 50MG INJ VIAL
438	CITALOPRAM 10MG TAB
439	CITALOPRAM 20MG TAB
440	CITALOPRAM 40MG TAB
441	CLARITHROMYCIN 125MG DT TAB
442	CLARITHROMYCIN 125MG/5ML SYP
443	CLARITHROMYCIN 250MG TAB
444	CLARITHROMYCIN 250MG/5ML DRY SYP
445	CLARITHROMYCIN 500MG (2 TABS) + AMOXYCILLIN 750MG (2 TABS) + PANTOPRAZOLE 40MG (2 TABS) KIT
446	CLARITHROMYCIN 500MG TAB
447	CLINDAMYCIN 150MG TAB
448	CLINDAMYCIN 300MG TAB
449	CLINDAMYCIN OINT
450	CLOBAZAM 10MG TAB
451	CLOBAZAM 5MG TAB
452	CLOBETASOL PROPIONATE 0.05% CREAM
453	CLOBETASOL PROPIONATE 0.5% + SALICYLIC ACID 3% CREAM
454	CLOBETASOL PROPIONATE 0.5% + SALICYLIC ACID 3% LOTION
455	CLOBETASONE 0.05% + MICONAZOLE 2% CREAM
456	CLOBETASONE 0.05%+ MICONAZOLE 2% OINT
457	CLOBETASONE CREAM
458	CLOMIPHENE CITRATE 100MG TAB
459	CLOMIPHENE CITRATE 25MG TAB
460	CLOMIPHENE CITRATE 50MG TAB
461	CLOMIPRAMINE 10MG TAB
462	CLOMIPRAMINE 25MG TAB
463	CLOMIPRAMINE 50MG TAB
464	CLOMIPRAMINE 75MG TAB
465	CLONAZEPAM 0.25MG TAB
466	CLONAZEPAM 0.5MG TAB
467	CLONAZEPAM 1MG TAB
468	CLONAZEPAM 2MG TAB
469	CLONIDINE 0.1MG TAB
470	CLOPIDOGREL 150MG TAB
471	CLOPIDOGREL 300MG TAB
472	CLOPIDOGREL 75MG + ATORVASTATIN 10MG TAB
473	CLOPIDOGREL 75MG + ATORVASTATIN 20MG TAB
474	CLOPIDOGREL 75MG + ROSUVASTATIN 10MG CAP
475	CLOPIDOGREL 75MG + ROSUVASTATIN 20MG CAP
476	CLOPIDOGREL 75MG TAB
477	CLOTRIMAZOLE 1% + LIGNOCAINE 2% EAR DROPS
478	CLOTRIMAZOLE 1% CREAM
479	CLOTRIMAZOLE 1% ORAL PAINT
480	CLOTRIMAZOLE 1%+BECLOMETHASONE 0.025% OINT

SL. NO.	GENERIC NAME
481	CLOTRIMAZOLE 100MG + CLINDAMYCIN 100MG + TINIDAZOLE 100MG VAGINAL SUPPOSITORY
482	CLOTRIMAZOLE 100MG + CLINDAMYCIN 100MG VAGINAL SUPPOSITORY
483	CLOTRIMAZOLE 100MG EXTENDED RELEASE VAGINAL SUPPOSITORY
484	CLOTRIMAZOLE 200MG + CLINDAMYCIN 100MG VAGINAL SUPPOSITORY
485	CLOTRIMAZOLE 200MG VAGINAL SUPPOSITORY
486	CLOTRIMAZOLE 500MG VAGINAL SUPPOSITORY
487	CLOTRIMAZOLE EYE DROPS
488	CLOXACILLIN 250MG CAP
489	CLOXACILLIN 250MG TAB
490	CLOXACILLIN 500MG CAP
491	CLOXACILLIN 500MG TAB
492	CLOZAPINE 100MG TAB
493	CLOZAPINE 25MG TAB
494	CLOZAPINE 50MG TAB
495	CODIENE 10MG + CHLORPHENIRAMINE MALEATE 4MG/5ML SYP
496	COLCHICINE 0.5MG TAB
497	COLOSTOMY BAG
498	CYCLOPENTOLATE HYDROCHLORIDE 1% EYE DROPS
499	CYCLOPHOSPHAMIDE 1000MG INJ VIAL
500	CYCLOPHOSPHAMIDE 200MG INJ VIAL
501	CYCLOPHOSPHAMIDE 500MG INJ VIAL
502	CYCLOSPORINE 0.05% EYE DROPS
503	CYCLOSPORINE 0.1% EYE DROPS
504	CYCLOSPORINE 100MG CAP
505	CYCLOSPORINE 25MG CAP
506	CYCLOSPORINE 50MG CAP
507	CYPROHEPTADINE 2MG/5ML SYP
508	CYPROHEPTADINE 4MG TAB
509	CYPROHEPTIDINE HYDROCHLORIDE 2MG + TRICHOLINE CITRATE 275MG/5ML SYP
510	DABIGATRAN 110MG CAP
511	DABIGATRAN 150MG CAP
512	DABIGATRAN ETEXILATE MESYLATE 110MG CAP
513	DABIGATRAN ETEXILATE MESYLATE 150MG CAP
514	DABRAFENIB 50MG CAP
515	DABRAFENIB 75MG CAP
516	DACARBAZINE 100MG INJ VIAL
517	DACARBAZINE 200MG INJ VIAL
518	DACARBAZINE 500MG INJ VIAL
519	DACLATASVIR 60MG TAB
520	DAPAGLIFOZIN 10MG + METFORMIN 1000MG TAB
521	DAPAGLIFOZIN 10MG + METFORMIN 500MG TAB

SL. NO.	GENERIC NAME
522	DAPAGLIFOZIN 10MG TAB
523	DAPAGLIFOZIN 5MG + METFORMIN 1000MG TAB
524	DAPAGLIFOZIN 5MG + METFORMIN 500MG TAB
525	DAPAGLIFOZIN 5MG TAB
526	DARATUMUMAB 900MG INJ VIAL
527	DARBIPOIETIN 40MCG INJ PFS
528	DARIFENACIN 15MG TAB
529	DARIFENACIN 7.5MG TAB
530	DEFLAZACORT 12MG TAB
531	DEFLAZACORT 6MG TAB
532	DEFLAZACORT 6MG/5ML SUSP
533	DEGARELIX 120MG INJ VIAL
534	DEGARELIX 80MG INJ VIAL
535	DENOSUMAB 120MG INJ VIAL
536	DENOSUMAB 60MG INJ PFS
537	DESLORATIDINE 10MG TAB
538	DESLORATIDINE 5MG TAB
539	DESMOPRESSIN 0.1MG TAB
540	DESOGESTREL 0.15MG + ETHINYL OESTRADIOL 0.02MG TAB
541	DESOGESTREL 0.15MG + ETHINYL OESTRADIOL 0.03MG TAB
542	DESONIDE 0.05% CREAM
543	DESONIDE 0.05% LOTION
544	DESVENLAFAXINE 100MG TAB
545	DESVENLAFAXINE 50MG + CLONAZEPAM 0.5MG TAB
546	DESVENLAFAXINE 50MG TAB
547	DEXAMETHASONE 0.5MG TAB
548	DEXAMETHASONE 0.7MG INTRAVITREAL IMPLANT
549	DEXAMETHASONE 1MG TAB
550	DEXAMETHASONE 4MG/1ML INJ AMP
551	DEXAMETHASONE SODIUM PHOSPHATE 0.1% + CHLORAMPHENICOL + ATROPINE SULPHATE EYE DROPS
552	DEXAMETHASONE SODIUM PHOSPHATE 0.1% + CHLORAMPHENICOL EYE DROPS
553	DEXAMETHASONE SODIUM PHOSPHATE 0.1% + GATIFLOXACIN EYE DROPS
554	DEXAMETHASONE SODIUM PHOSPHATE 0.1% + MOXIFLOXACIN 0.5% EYE DROPS
555	DEXAMETHASONE SODIUM PHOSPHATE 0.1% + OFLOXACIN 0.3% EYE DROPS
556	DEXAMETHASONE SODIUM PHOSPHATE 0.1% + TOBRAMYCIN 0.3% EYE DROPS
557	DEXAMETHASONE SODIUM PHOSPHATE 0.1% EYE DROPS
558	DEXTROMETHORPHAN 15MG/5ML SYP
559	DEXTROMETHORPHAN 5MG + CHLORPHENIRAMINE MALEATE 2MG + PHENYLEPHRINE 10MG TAB
560	DEXTROMETHORPHAN 5MG LOZENGES

SL. NO.	GENERIC NAME
561	DEXTROMETHORPHAN 5MG TAB
562	DIACERIN 50MG + GLUCOSAMINE 750MG + METHYL SULFONYL METHYL 250MG TAB
563	DIACERIN 50MG TAB
564	DIAZEPAM 10MG TAB
565	DIAZEPAM 10MG/2ML INJ AMP
566	DIAZEPAM 2.5MG SUPPOSITORY
567	DIAZEPAM 2MG TAB
568	DIAZEPAM 2MG/5ML SYP
569	DIAZEPAM 5MG SUPPOSITORY
570	DIAZEPAM 5MG TAB
571	DICLOFENAC 1.16% + MENTHOL 4%+METHYL SALICYLATE 10% LINIMENT
572	DICLOFENAC 100MG SUPPOSITORY
573	DICLOFENAC 4% GEL
574	DICLOFENAC 50MG + METAXALONE 400MG TAB
575	DICLOFENAC 50MG TAB
576	DICLOFENAC IM 75MG INJ AMP
577	DICLOFENAC IV 75MG INJ AMP
578	DICLOXACILLIN 500MG CAP
579	DICLOXACILLIN 500MG TAB
580	DICLOXACILLIN 250MG CAP
581	DICLOXACILLIN 250MG TAB
582	DICYCLOMINE 10MG + MEFENAMIC ACID 250MG TAB
583	DICYCLOMINE 10MG + MEFENAMIC ACID 40MG/1ML ORAL DROPS
584	DICYCLOMINE 10MG + MEFENAMIC ACID 40MG/5ML SYP
585	DICYCLOMINE 10MG + SIMETHICONE 40MG/1ML ORAL DROPS
586	DICYCLOMINE 10MG + SIMETHICONE 40MG/5ML SYP
587	DICYCLOMINE 10MG TAB
588	DICYCLOMINE 20 MG + PARACETAMOL 500 TAB
589	DICYCLOMINE 20MG + MEFENAMIC ACID 500MG TAB
590	DICYCLOMINE 20MG TAB
591	DICYCLOMINE 20MG/2ML AMP INJ
592	DICYCLOMINE 5MG + PARACETAMOL 125MG/5ML SUSP
593	DICYCLOMINE HYDROHLORIDE 10MG + SIMETHICONE 40MG/5ML SUSP
594	DIETHYL CARBAMAZINE 100MG TAB
595	DIETHYL CARBAMAZINE 120MG/5ML SYP
596	DIETHYL CARBAMAZINE 50MG/5ML SYP
597	DIFLUPREDNATE 0.05% EYE DROPS
598	DIGOXIN 0.25MG TAB
599	DILTIAZEM 30MG TAB
600	DILTIAZEM 60MG TAB
601	DILTIAZEM ER 120MG TAB
602	DILTIAZEM ER 180MG TAB
603	DILTIAZEM ER 240MG TAB

SL. NO.	GENERIC NAME
604	DILTIAZEM ER 90MG TAB
605	DIMETHYL FUMARATE 120MG CAP
606	DIMETHYL FUMARATE 120MG CAP
607	DIMETHYL FUMARATE 240MG CAP
608	DIMETHYL FUMARATE 240MG CAP
609	DIOSMIN 150MG TAB
610	DIOSMIN 300MG TAB
611	DIOSMIN 450MG TAB
612	DIOSMIN 900MG TAB
613	DIPYRIDAMOLE 200MG TAB
614	DISODIUM HYDROGEN CITRATE 1.53GM/5ML SYP
615	DIVALPROEX SODIUM 250MG CAP
616	DIVALPROEX SODIUM 250MG TAB
617	DIVALPROEX SODIUM 500MG CAP
618	DIVALPROEX SODIUM 500MG TAB
619	DOCETAXEL 120MG INJ VIAL
620	DOCETAXEL 20MG INJ VIAL
621	DOCETAXEL 80MG INJ VIAL
622	DOMPERIDONE 5MG/5ML SUSP
623	DOMPERIDONE 10MG DT TAB
624	DOMPERIDONE 10MG TAB
625	DOMPERIDONE 10MG/1ML ORAL DROPS
626	DOMPERIDONE 5MG DT TAB
627	DOMPERIDONE 5MG TAB
628	DONEPEZIL 10MG TAB
629	DONEPEZIL 5MG + MEMANTINE 10MG TAB
630	DONEPEZIL 5MG + MEMANTINE 5MG TAB
631	DONEPEZIL 5MG TAB
632	DORZOLAMIDE 2% + TIMOLOL MALEATE 0.5% EYE DROPS
633	DORZOLAMIDE 2% EYE DROPS
634	DOTHIEPIN HYDROCHLORIDE 25MG TAB
635	DOTHIEPIN HYDROCHLORIDE 50MG TAB
636	DOTHIEPIN HYDROCHLORIDE 75MG TAB
637	DOXEPIN 10MG TAB
638	DOXEPIN 25MG TAB
639	DOXEPIN 75MG TAB
640	DOXOPHYLLINE 200MG TAB
641	DOXOPHYLLINE 400MG + AMBROXOL 30MG TAB
642	DOXOPHYLLINE 400MG + MONTELUKAST 10MG TAB
643	DOXOPHYLLINE 400MG TAB
644	DOXORUBICIN 10MG LYOPHILISED INJ VIAL
645	DOXORUBICIN 10MG/5ML INJ VIAL
646	DOXORUBICIN 150MG/75ML INJ VIAL
647	DOXORUBICIN 200MG/100ML INJ VIAL
648	DOXORUBICIN 20MG/10ML INJ VIAL
649	DOXORUBICIN 50MG LYOPHILISED INJ VIAL

SL. NO.	GENERIC NAME
650	DOXORUBICIN 50MG/25ML INJ VIAL
651	DOXYCYCLINE 100MG TAB
652	DOXYCYCLINE 200MG TAB
653	DOXYLAMINE 10MG + PYRIDOXINE 10MG TAB
654	D-PANTHENOL 5% EYE OINTMENT
655	DULAGLUTIDE 0.75MG INJ PEN
656	DULAGLUTIDE 1.5MG INJ PEN
657	DULOXETINE 20MG CAP
658	DULOXETINE 30MG CAP
659	DULOXETINE 40MG CAP
660	DULOXETINE 50MG CAP
661	DULOXETINE 60MG CAP
662	DUTASTERIDE 0.5MG + ALFUZOSIN 10MG CAP
663	DUTASTERIDE 0.5MG TAB
664	DYDROGESTERONE 10MG TAB
665	EBASTINE 10MG TAB
666	EBASTINE 20MG TAB
667	EBASTINE 5MG/5ML SYP
668	EFNODIPINE 20MG TAB
669	EFNODIPINE 40MG TAB
670	ELTROMBOPAG 25MG TAB
671	ELTROMBOPAG 50MG TAB
672	EMPAGLIFOZIN 10MG TAB
673	EMPAGLIFOZIN 12.5MG + METFORMIN 1000MG TAB
674	EMPAGLIFOZIN 12.5MG + METFORMIN 500MG TAB
675	EMPAGLIFOZIN 25MG + METFORMIN 1000MG TAB
676	EMPAGLIFOZIN 25MG + METFORMIN 500MG TAB
677	EMPAGLIFOZIN 25MG TAB
678	ENALAPRIL 10MG + HYDROCHLOROTHIAZIDE 25MG TAB
679	ENALAPRIL 10MG TAB
680	ENALAPRIL 2.5MG TAB
681	ENALAPRIL 5MG + AMLODIPINE 5MG TAB
682	ENALAPRIL 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
683	ENALAPRIL 5MG TAB
684	ENOXAPARIN 40MG/0.4ML INJ PFS
685	ENOXAPARIN 60MG/0.6ML INJ PFS
686	ENTECAVIR 0.5MG TAB
687	ENTECAVIR 1MG TAB
688	ENZALUTAMIDE 160MG CAP
689	ENZALUTAMIDE 160MG TAB
690	ENZALUTAMIDE 40MG CAP
691	ENZALUTAMIDE 40MG TAB
692	ENZALUTAMIDE 80MG CAP
693	ENZALUTAMIDE 80MG TAB
694	EPIRUBICIN 100MG INJ VIAL
695	EPIRUBICIN 10MG INJ VIAL

SL. NO.	GENERIC NAME
696	EPIRUBICIN 50MG INJ VIAL
697	EPLERENONE 25MG TAB
698	EPLERENONE 50MG TAB
699	ERIBULIN 0.5MG INJ VIAL
700	ERIBULIN 1MG INJ VIAL
701	ERLOTINIB 100MG TAB
702	ERLOTINIB 150MG TAB
703	ERTAPENAM 1GM INJ VIAL
704	ERYTHRITYL TETRANITRATE 15MG TAB
705	ERYTHRITYL TETRANITRATE 5MG TAB
706	ERYTHROMYCIN 0.5% EYE OINTMENT
707	ERYTHROMYCIN 100MG/1ML ORAL DROPS
708	ERYTHROMYCIN 125MG TAB
709	ERYTHROMYCIN 125MG/5ML SYP
710	ERYTHROMYCIN 500MG TAB
711	ERYTHROMYCIN OINT
712	ERYTHROPOIETIN 10000 IU INJ PFS
713	ERYTHROPOIETIN 2000 IU INJ PFS
714	ERYTHROPOIETIN 4000 IU INJ PFS
715	ERYTHROPOIETIN 5000 IU INJ PFS
716	ERYTHROPOIETIN 6000 IU INJ PFS
717	ERYTHROPOIETIN 8000 IU INJ PFS
718	ESCITALOPRAM 10MG + CLONAZEPAM 0.25MG TAB
719	ESCITALOPRAM 10MG + CLONAZEPAM 0.5MG TAB
720	ESCITALOPRAM 10MG TAB
721	ESCITALOPRAM 20MG + CLONAZEPAM 0.5MG TAB
722	ESCITALOPRAM 20MG TAB
723	ESCITALOPRAM 5MG + CLONAZEPAM 0.5MG TAB
724	ESCITALOPRAM 5MG TAB
725	ESOMEPRAZOLE 20MG + DOMPERIDONE 30MG SR TAB
726	ESOMEPRAZOLE 20MG CAP
727	ESOMEPRAZOLE 20MG TAB
728	ESOMEPRAZOLE 40MG CAP
729	ESOMEPRAZOLE 40MG TAB
730	ESTRADIOL CREAM
731	ESTRADIOL GEL
732	ETHAMSYLATE 125MG/1ML INJ AMP
733	ETHAMSYLATE 250MG TAB
734	ETHAMSYLATE 500MG TAB
735	ETHINYL ESTRADIOL 0.035MG + CYPROTERONE ACETATE 2MG TAB
736	ETOPHYLLINE 115MG + THEOPHYLLINE 35MG PR TAB
737	ETOPHYLLINE 231MG + THEOPHYLLINE 69MG + MONTELUKAST 10MG TAB
738	ETOPHYLLINE 231MG + THEOPHYLLINE 69MG PR TAB
739	ETOPHYLLINE 77MG + THEOPHYLLINE 33MG TAB

SL. NO.	GENERIC NAME
740	ETOPHYLLINE 84.7MG + THEOPHYLLINE 25.3MG/1ML INJ AMP
741	ETOPOSIDE 100MG CAP
742	ETOPOSIDE 100MG/5ML INJ VIAL
743	ETOPOSIDE 50MG CAP
744	ETORICOXIB 120MG TAB
745	ETORICOXIB 60MG + THIOLCHOSIDE 4MG TAB
746	ETORICOXIB 90MG TAB
747	EZETIMIBE 10MG TAB
748	FAMOTIDINE 20MG TAB
749	FAMOTIDINE 40MG TAB
750	FARMORUBICIN 10MG INJ VIAL
751	FARMORUBICIN 50MG INJ VIAL
752	FAROPENAM 200MG TAB
753	FEBUXOSTAT 20MG TAB
754	FEBUXOSTAT 40MG TAB
755	FEBUXOSTAT 80MG TAB
756	FELODIPINE 10MG TAB
757	FELODIPINE 5MG TAB
758	FENOFIBRATE 145MG TAB
759	FENOFIBRATE 160MG TAB
760	FENOFIBRATE 200MG TAB
761	FERROUS BISGLYCINATE 60MG + FOLIC ACID 1MG + ZINC 15MG + METHYL COBALAMINE 500MCG TAB
762	FERROUS FUMARATE 100MG + FOLIC ACID 1.5MG CAP
763	FERROUS FUMARATE 100MG + FOLIC ACID 1.5MG TAB
764	FERROUS FUMARATE 165MG + FOLIC ACID 750MCG + DOCUSATE SODIUM 50MG CAP
765	FERROUS FUMARATE 50MG + FOLIC ACID 1.5MG CAP
766	FERROUS FUMARATE 50MG + FOLIC ACID 1.5MG TAB
767	FEXOFENADINE 120MG TAB
768	FEXOFENADINE 180MG TAB
769	FEXOFENADINE 30MG/5ML SUSP
770	FEXOFENADINE 30MG/5ML SUSP
771	FINASTERIDE 1MG TAB
772	FINASTERIDE 2.5MG TAB
773	FINASTERIDE 5MG TAB
774	FLAVOXATE 200MG TAB
775	FLUCONAZOLE 0.3% EYE DROPS
776	FLUCONAZOLE 150MG TAB
777	FLUCONAZOLE 200MG TAB
778	FLUCONAZOLE 400MG TAB
779	FLUNARIZINE 10MG TAB
780	FLUNARIZINE 5MG TAB
781	FLUROMETHALONE 0.1% EYE DROPS
782	FLUROMETHALONE 0.1% EYE OINTMENT
783	FLUOROURACIL 250MG INJ AMP

SL. NO.	GENERIC NAME
784	FLUOROURACIL 500MG INJ AMP
785	FLUPENTHIXOL 0.5MG TAB
786	FLUPENTHIXOL 1MG TAB
787	FLUPENTHIXOL 3MG TAB
788	FLUPHENAZINE 1MG TAB
789	FLUTAMIDE 250MG TAB
790	FLUTICASONE 0.05% CREAM
791	FLUTICASONE 125MCG + FORMOTEROL 6MCG MDI
792	FLUTICASONE 125MCG + FORMOTEROL 6MCG RC
793	FLUTICASONE 250MCG + FORMOTEROL 6MCG MDI
794	FLUTICASONE 250MCG + FORMOTEROL 6MCG RC
795	FLUTICASONE PROPIONATE 110MCG MDI
796	FLUTICASONE PROPIONATE 220MCG MDI
797	FLUVOXAMINE 100MG CAP
798	FLUVOXAMINE 25MG CAP
799	FLUVOXAMINE 50MG CAP
800	FLUVOXETINE 10MG CAP
801	FLUVOXETINE 10MG TAB
802	FLUVOXETINE 20MG CAP
803	FLUVOXETINE 20MG TAB
804	FLUVOXETINE 40MG CAP
805	FLUVOXETINE 40MG TAB
806	FORMOTEROL 100MCG + BUDESONIDE 6MCG MDI
807	FORMOTEROL 100MCG + BUDESONIDE 6MCG RC
808	FORMOTEROL 200MCG + BUDESONIDE 6MCG MDI
809	FORMOTEROL 200MCG + BUDESONIDE 6MCG RC
810	FORMOTEROL 20MCG + BUDESONIDE 0.5MG NEBULIZER SOLUTION
811	FORMOTEROL 20MCG + BUDESONIDE 1MG NEBULIZER SOLUTION
812	FORMOTEROL 400MCG + BUDESONIDE 6MCG MDI
813	FORMOTEROL 400MCG + BUDESONIDE 6MCG RC
814	FOSAPREPITANT 150MG INJ VIAL
815	FOSFOMYCIN 3GM SACHETS
816	FRAMYCETIN OINT
817	FULVESTRANT 250MG INJ PFS
818	FUROSEMIDE 20MG + SPIRONOLACTONE 100MG TAB
819	FUROSEMIDE 20MG + SPIRONOLACTONE 50MG TAB
820	FUROSEMIDE 20MG TAB
821	FUROSEMIDE 20MG/2ML INJ AMP
822	FUROSEMIDE 40MG TAB
823	FUSIDIC ACID + HYDROCORTISONE CREAM
824	FUSIDIC ACID 2% + BECLOMETHASONE 0.025% CREAM
825	FUSIDIC ACID 2% OINT
826	GABAPENTIN 100MG + AMITRYPTILINE 10MG TAB
827	GABAPENTINE 100MG + METHYLCOBALAMINE 500MG TAB
828	GABAPENTINE 100MG + NORTRYPTILINE 10MG TAB

SL. NO.	GENERIC NAME
829	GABAPENTINE 100MG TAB
830	GABAPENTINE 200MG + NORTRYPTILINE 10MG TAB
831	GABAPENTINE 300MG + METHYLCOBALAMINE 500MG TAB
832	GABAPENTINE 300MG TAB
833	GABAPENTINE 400MG + NORTRYPTILINE 10MG TAB
834	GABAPENTINE 450MG TAB
835	GALANTAMINE 12MG TAB
836	GALANTAMINE 4MG TAB
837	GALANTAMINE 8MG TAB
838	GANCYCLOVIR 0.15% OPHTHALMIC GEL PREPARATION
839	GATIFLOXACIN 0.3% EYE DROPS
840	GATIFLOXACIN 0.3% EYE OINTMENT
841	GEFITINIB 250MG TAB
842	GEMCITABINE 1000MG INJ VIAL
843	GEMCITABINE 1400MG INJ VIAL
844	GEMCITABINE 1600MG INJ VIAL
845	GEMCITABINE 200MG INJ VIAL
846	GEMFIBROZIL 600MG TAB
847	GLICAZIDE 30MG + METFORMIN 500MG TAB
848	GLICAZIDE 60MG + METFORMIN 500MG TAB
849	GLICAZIDE 80MG + METFORMIN 500MG TAB
850	GLICLAZIDE 80MG TAB
851	GLICLAZIDE MR 30MG TAB
852	GLICLAZIDE XR 60MG TAB
853	GLIMEPRIDE 1MG TAB
854	GLIMEPRIDE 1MG+METFORMIN 1000MG TAB
855	GLIMEPRIDE 1MG+METFORMIN 500MG TAB
856	GLIMEPRIDE 2MG TAB
857	GLIMEPRIDE 2MG+ METFORMIN 1000MG TAB
858	GLIMEPRIDE 2MG+ METFORMIN 500MG TAB
859	GLIPIZIDE 5MG TAB
860	GLIPIZIDE 10MG TAB
861	GLIPIZIDE 2.5MG TAB
862	GLIPIZIDE 5MG + METFORMIN 500MG TAB
863	GLUCOMETER
864	GLUCOMETER STRIPS
865	GLUCOSAMINE 1500MG TAB
866	GLUCOSAMINE 500MG TAB
867	GLUCOSAMINE 750MG + CHONDROITIN 600MG TAB
868	GLUCOSAMINE 750MG TAB
869	GLYCERIN MAGNESIUM SULPHATE PASTE 400GM
870	GLYCERINE + SODIUM CHLORIDE 20ML ENEMA
871	GLYCERINE + SODIUM CHLORIDE 100ML ENEMA
872	GLYCOPYRROLATE 110MCG + INDACATEROL 50MCG MDI
873	GLYCOPYRROLATE 110MCG + INDACATEROL 50MCG RC
874	GLYCOPYRROLATE 25MCG + FORMOTEROL 120MCG + BUDESONIDE

SL. NO.	GENERIC NAME
875	GLYCOPYRROLATE 25MCG NEBULIZER SOLUTION
876	GOSERELINE ACETATE 10.8MG INJ PFS
877	GOSERELINE ACETATE 3.6MG INJ PFS
878	GRANISETRON 1MG/5ML SYP
879	GRANISETRON 1MG/ML AMP INJ
880	GRANISETRON 1MG TAB
881	GRANISETRON 2MG TAB
882	GUAIPHENESIN 50MG + AMBROXOL 15MG + TERBUTALINE 1.25MG + MENTHOL 2.5MG/5ML SYP
883	GUAIPHENESIN 50MG + AMBROXOL 15MG + TERBUTALINE 1.25MG/5ML SUGARFREE SYP
884	GUAIPHENESIN 50MG + AMBROXOL 15MG + TERBUTALINE 1.25MG/5ML SYP
885	GUAIPHENESIN 50MG + AMBROXOL 30MG + LEVOSALBUTAMOL 1MG/5ML SUGARFREE SYP
886	GUAIPHENESIN 50MG + AMBROXOL 30MG + LEVOSALBUTAMOL 1MG/5ML SYP
887	GUAIPHENESIN 50MG + AMBROXOL 50MG + SALBUTAMOL 1MG/5ML SYP
888	GUAIPHENESIN 50MG + BROMHEXINE 2MG + TERBUTALINE 1.25MG + MENTHOL 0.5MG/5ML SYP
889	GUAIPHENESIN 50MG + BROMHEXINE 2MG + TERBUTALINE 1.25MG/5ML SUGARFREE SYP
890	GUAIPHENESIN 50MG + BROMHEXINE 2MG + TERBUTALINE 1.25MG/5ML SYP
891	GUAIPHENESIN 50MG + BROMHEXINE 4MG + TERBUTALINE 1.25MG + MENTHOL 0.5MG/5ML SYP
892	GUAIPHENESIN 50MG + BROMHEXINE 4MG + TERBUTALINE 1.25MG/5ML SUGARFREE SYP
893	GUAIPHENESIN 50MG + BROMHEXINE 4MG + TERBUTALINE 1.25MG/5ML SYP
894	HALOPERIDOL 0.25MG TAB
895	HALOPERIDOL 0.5MG TAB
896	HALOPERIDOL 1.5MG TAB
897	HALOPERIDOL 10MG TAB
898	HALOPERIDOL 20MG TAB
899	HALOPERIDOL 5MG TAB
900	HALOPERIDOL 5MG/ML INJ AMP
901	HOMATROPINE HYDROBROMIDE 2% EYE DROPS
902	HUMAN ALBUMIN 20GM/100ML INJ BOTTLE
903	HYDRALAZINE 25MG TAB
904	HYDRALAZINE 50MG TAB
905	HYDROCHLOROTHIAZIDE 12.5MG TAB
906	HYDROCHLOROTHIAZIDE 25MG TAB
907	HYDROCORTISONE 1% CREAM
908	HYDROCORTISONE 100MG INJ VIAL

SL. NO.	GENERIC NAME
909	HYDROXY CHLOROQUINE 200MG TAB
910	HYDROXY CHLOROQUINE 400MG TAB
911	HYDROXY PROGESTERONE CAPROATE 250MG INJ AMP
912	HYDROXY PROGESTERONE CAPROATE 500MG INJ AMP
913	HYDROXY PROPYLMETHYL CELLULOSE + DEXTRAN + GLYCERINE EYE DROPS
914	HYDROXY PROPYLMETHYL CELLULOSE 0.3% EYE OINTMENT
915	HYDROXY PROPYLMETHYL CELLULOSE 0.7% EYE DROPS
916	HYDROXYZINE 10MG TAB
917	HYDROXYZINE 10MG TAB
918	HYDROXYZINE 10MG/5ML SYP
919	HYDROXYZINE 10MG/5ML SYP
920	HYDROXYZINE 25MG TAB
921	HYDROXYZINE 25MG TAB
922	HYDROXYZINE 50MG TAB
923	HYDROXYZINE 6MG/1ML ORAL DROPS
924	HYDROXYZINE 6MG/1ML ORAL DROPS
925	HYOSCINE 10MG SUPPOSITORY
926	HYOSCINE 10MG TAB
927	HYOSCINE 20MG/2ML AMP INJ
928	HYPERMELLOSE + DEXTRANE EYE DROPS
929	HYPERMELLOSE 3% EYE DROPS
930	I.V.FLUID 0.9% NS 100ML
931	I.V.FLUID 0.9% NS 500ML
932	I.V.FLUID 10% DEXTROSE 500ML
933	I.V.FLUID 25% DEXTROSE 100ML
934	I.V.FLUID 3% NS 100ML
935	I.V.FLUID 5% DEXTROSE 500ML
936	I.V.FLUID DNS 500ML
937	I.V.FLUID ELECTROLYTE-P 500ML
938	I.V.FLUID RL 100ML
939	I.V.FLUID RL 500ML
940	IBANDRONIC ACID 150MG TAB
941	IBUPROFEN 100MG + PARACETAMOL 162.5MG/5ML SYP
942	IBUPROFEN 100MG + PARACETAMOL 162.5MG/5ML SYP
943	IBUPROFEN 100MG/5ML SYP
944	IBUPROFEN 200MG TAB
945	IBUPROFEN 200MG/5ML SYP
946	IBUPROFEN 350MG/5ML SYP
947	IBUPROFEN 400MG + PARACETAMOL 325MG TAB
948	IBUPROFEN 400MG TAB
949	IFOSFAMIDE 1GM INJ VIAL
950	IFOSFAMIDE 2GM INJ VIAL
951	IMATINIB 100MG TAB
952	IMATINIB 400MG TAB
953	IMIDAPRIL 5MG TAB

SL. NO.	GENERIC NAME
954	IMIPRAMINE 25MG TAB
955	IMIPRAMINE 75MG TAB
956	INDAPAMIDE 1.5MG TAB
957	INDAPAMIDE 2.5MG TAB
958	INDAPAMIDE SR 1.5MG TAB
959	INDOMETHACIN 50MG TAB
960	INDOMETHACIN SR 75MG TAB
961	INSULIN 30/70 INJ CART
962	INSULIN 30/70 INJ VIAL
963	INSULIN ASPART + NPH 30/70 INJ CART
964	INSULIN ASPART + NPH 50/50 INJ CART
965	INSULIN ASPART INJ CART
966	INSULIN DEGLUDEC + INSULIN ASPART INJ CART
967	INSULIN DEGLUDEC INJ CART
968	INSULIN FAST ACTING ASPART INJ CART
969	INSULIN GLARGINE 100 UNITS IN 1ML INJ CART
970	INSULIN GLARGINE 300 UNITS IN 1ML INJ PEN
971	INSULIN LISPRO + NPH 25/75 INJ CART
972	INSULIN LISPRO + NPH 50/50 INJ CART
973	INSULIN LISPRO INJ CART
974	INSULIN NEEDLES
975	INSULIN REGULAR INJ CART
976	INSULIN REGULAR INJ VIAL
977	IPILIMUMAB 50MG INJ VIAL
978	IPRATROPIUM BROMIDE 20MCG + LEVOSALBUTAMOL 50MCG MDI
979	IPRATROPIUM BROMIDE 20MCG MDI
980	IPRATROPIUM BROMIDE 500MCG + LEVOSALBUTAMOL 1.25MG NEBULIZER SOLUTION
981	IRBESARTAN 150MG TAB
982	IRBESARTAN 300MG TAB
983	IRINOTECAN 100MG INJ VIAL
984	IRON 50MG + VIT D3 125 IU SYP
985	IRON ORAL DROPS
986	IRON SUCROSE 20MG/1ML INJ VIAL
987	IRON SYRUP
988	IRON TAB
989	ISABGOL HUSK GRANULES
990	ISABGOL HUSK GRANULES + LACTITOL MONOHYDRATE POWDER
991	ISOSORBIDE DINITRATE 10MG TAB
992	ISOSORBIDE DINITRATE 20MG + HYDRALAZINE 37.5MG TAB
993	ISOSORBIDE DINITRATE 5MG TAB
994	ISOSORBIDE MONONITRATE 10MG TAB
995	ISOSORBIDE MONONITRATE 20MG TAB
996	ISOSORBIDE MONONITRATE 40MG TAB
997	ISOSORBIDE MONONITRATE SR 30MG TAB
998	ISOSORBIDE MONONITRATE SR 60MG TAB

SL. NO.	GENERIC NAME
999	ITOPRIDE 150MG + PANTOPRAZOLE 40MG TAB
1000	ITOPRIDE 50MG TAB
1001	ITRACONAZOLE 100MG TAB
1002	ITRACONAZOLE 200MG TAB
1003	IVABRADINE 5MG TAB
1004	IVABRADINE 7.5MG TAB
1005	IVERMECTIN 1.5MG + ALBENDAZOLE 200MG/5ML SYP
1006	IVERMECTIN 12MG + ALBENDAZOLE 400MG TAB
1007	IVERMECTIN 12MG TAB
1008	IVERMECTIN 6MG + ALBENDAZOLE 400MG TAB
1009	IVERMECTIN 6MG TAB
1010	IVERMECTIN 9MG TAB
1011	KETOCONAZOLE 2% + ZINC PYRITHRONE 1% LOTION
1012	KETOCONAZOLE 2% CREAM
1013	KETOCONAZOLE 2% LOTION
1014	KETOROLAC 10MG TAB
1015	KETOROLAC 30MG/ML INJ AMP
1016	KETOROLAC TROMETHAMINE 0.4% EYE DROPS
1017	KETOTIFEN 1MG TAB
1018	KETOTIFEN EYE DROPS
1019	LABETALOL 100MG TAB
1020	LABETALOL 20MG INJ AMP
1021	LABETALOL 50MG TAB
1022	LACOSAMIDE 100MG TAB
1023	LACOSAMIDE 10MG/1ML INJ AMP
1024	LACOSAMIDE 150MG TAB
1025	LACOSAMIDE 200MG TAB
1026	LACOSAMIDE 300MG TAB
1027	LACOSAMIDE 400MG TAB
1028	LACOSAMIDE 50MG TAB
1029	LACOSAMIDE 600MG TAB
1030	LACTIC ACID BACILLUS + VITAMIN B-COMPLEX SYP
1031	LACTIC ACID BACILLUS SACHET
1032	LACTIC ACID BACILLUS SYP
1033	LACTIC ACID BACILLUS TAB
1034	LACTULOSE 2% N/V ENEMA
1035	LACTULOSE 10MG/15ML SOLUTION
1036	LAMOTRIGINE 100MG TAB
1037	LAMOTRIGINE 150MG TAB
1038	LAMOTRIGINE 200MG TAB
1039	LAMOTRIGINE 25MG TAB
1040	LAMOTRIGINE 50MG TAB
1041	LANZOPRAZOLE 15MG DT TAB
1042	LANZOPRAZOLE 30MG CAP
1043	LANZOPRAZOLE 30MG TAB
1044	LAPATINIB 250MG TAB

SL. NO.	GENERIC NAME
1045	LATANOPROST 0.005% + TIMOLOL MALEATE 0.5% EYE DROPS
1046	LATANOPROST 0.005% EYE DROPS
1047	LEFLUNOMIDE 10MG TAB
1048	LEFLUNOMIDE 20MG TAB
1049	LENALIDOMIDE 10MG TAB
1050	LENALIDOMIDE 15MG TAB
1051	LENALIDOMIDE 25MG TAB
1052	LENVATINIB 10MG CAP
1053	LENVATINIB 4MG CAP
1054	LETROZOLE 2.5MG TAB
1055	LEUCOVORIN CALCIUM 15MG INJ VIAL
1056	LEUCOVORIN CALCIUM 15MG TAB
1057	LEUCOVORIN CALCIUM 50MG INJ VIAL
1058	LEUPROLIDE ACETATE 11.25MG INJ DEPOT
1059	LEUPROLIDE ACETATE 22.5MG INJ DEPOT
1060	LEVETIRACETAM 1000MG TAB
1061	LEVETIRACETAM 100MG/1ML SYP
1062	LEVETIRACETAM 100MG/5ML INJ VIAL
1063	LEVETIRACETAM 250MG TAB
1064	LEVETIRACETAM 500MG TAB
1065	LEVETIRACETAM 750MG TAB
1066	LEVOCETIRIZINE HYDROCHLORIDE 10MG TAB
1067	LEVOCETIRIZINE HYDROCHLORIDE 2.5MG/5ML SYP
1068	LEVOCETIRIZINE HYDROCHLORIDE 5MG TAB
1069	LEVOCLOPERASTINE FENDIZOATE 20MG/5ML SYP
1070	LEVOFLOXACIN 250MG TAB
1071	LEVOFLOXACIN 500MG TAB
1072	LEVOFLOXACIN 750MG TAB
1073	LEVOSALBUTAMOL 0.25MG + AMBROXOL 7.5MG + GUAIPHENESIN 12.5MG/1ML ORAL DROPS
1074	LEVOSALBUTAMOL 0.31MG NEBULIZER SOLUTION
1075	LEVOSALBUTAMOL 0.5MG + AMBROXOL 15MG + GUAIPHENESIN 50MG/5ML SYP
1076	LEVOSALBUTAMOL 0.63MG NEBULIZER SOLUTION
1077	LEVOSALBUTAMOL 1.25MG NEBULIZER SOLUTION
1078	LEVOSALBUTAMOL 1MG TAB
1079	LEVOSALBUTAMOL 1MG/5ML SYP
1080	LEVOSALBUTAMOL 1MG/5ML SYP
1081	LEVOSALBUTAMOL 2MG TAB
1082	LEVOSALBUTAMOL 50MCG MDI
1083	LEVOSULPIRIDE 25MG TAB
1084	LEVOSULPIRIDE 75MG + PANTOPRAZOLE 40MG TAB
1085	LEVOSULPIRIDE 75MG TAB
1086	LEVOSULPRIDE 25MG AMP INJ
1087	LEVOSULPRIDE 25MG TAB
1088	LEVOTHYROXINE 100MCG TAB

SL. NO.	GENERIC NAME
1089	LEVOTHYROXINE 112MCG TAB
1090	LEVOTHYROXINE 12.5MCG TAB
1091	LEVOTHYROXINE 125MCG TAB
1092	LEVOTHYROXINE 150MCG TAB
1093	LEVOTHYROXINE 25MCG TAB
1094	LEVOTHYROXINE 37.5MCG TAB
1095	LEVOTHYROXINE 50MCG TAB
1096	LEVOTHYROXINE 62.5MCG TAB
1097	LEVOTHYROXINE 75MCG TAB
1098	LEVOTHYROXINE 88MCG TAB
1099	LIDOCAINE 1.5% + NIFEDIPINE 0.3% CREAM
1100	LIGNOCAINE 2% INJ 30ML BOTTLE
1101	LIGNOCAINE 2% JELLY
1102	LIGNOCAINE 2% WITH ADRENALINE 1:80000 INJ 30ML BOTTLE
1103	LINAGLIPTIN 2.5MG + METFORMIN 1000MG TAB
1104	LINAGLIPTIN 2.5MG + METFORMIN 500MG TAB
1105	LINAGLIPTIN 5MG + EMPAGLIFOZIN 10MG TAB
1106	LINAGLIPTIN 5MG + EMPAGLIFOZIN 25MG TAB
1107	LINAGLIPTIN 5MG TAB
1108	LINEZOLID 100MG/5ML SUSP
1109	LINEZOLID 600MG TAB
1110	LIQUID PARAFFIN 2.5ML + MAGNESIUM HYDROXIDE + SODIUM PICOSULPHATE SYP
1111	LIQUID PARAFFIN 5ML + MAGNESIUM HYDROXIDE + SODIUM PICOSULPHATE SYP
1112	LIQUID PARAFFIN BOTTLE
1113	LIRAGLUTIDE 0.6MG INJ PEN
1114	LIRAGLUTIDE 1.2MG INJ PEN
1115	LIRAGLUTIDE 1.8MG INJ PEN
1116	LISINOPRIL 10MG TAB
1117	LISINOPRIL 2.5MG TAB
1118	LISINOPRIL 5MG + AMLODIPINE 5MG TAB
1119	LISINOPRIL 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1120	LISINOPRIL 5MG TAB
1121	LITHIUM CARBONATE 300MG TAB
1122	LITHIUM CARBONATE 400MG SR TAB
1123	LITHIUM CARBONATE 450MG SR TAB
1124	LORATIDINE 10MG TAB
1125	LORAZEPAM 1MG TAB
1126	LORAZEPAM 2MG TAB
1127	LORAZEPAM 2MG/1ML INJ AMP
1128	LOSARTAN 100MG TAB
1129	LOSARTAN 25MG + AMLODIPINE 5MG TAB
1130	LOSARTAN 25MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1131	LOSARTAN 25MG TAB

SL. NO.	GENERIC NAME
1132	LOSARTAN 50MG + AMLODIPINE 5MG + CHLORTHALIDONE 12.5MG TAB
1133	LOSARTAN 50MG + AMLODIPINE 5MG + CHLORTHALIDONE 6.25MG TAB
1134	LOSARTAN 50MG + AMLODIPINE 5MG TAB
1135	LOSARTAN 50MG + ATENOLOL 50MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1136	LOSARTAN 50MG + CHLORTHALIDONE 12.5MG TAB
1137	LOSARTAN 50MG + CHLORTHALIDONE 6.25MG TAB
1138	LOSARTAN 50MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1139	LOSARTAN 50MG + ATENOLOL 50MG TAB
1140	LOSARTAN 50MG TAB
1141	LOTEPREDNOL ETABONATE 0.5% + GATIFLOXACIN 0.3% EYE DROPS
1142	LOTEPREDNOL ETABONATE 0.5% + MOXIFLOXACIN EYE DROPS
1143	LOTEPREDNOL ETABONATE 0.5% EYE DROPS
1144	LOTEPREDNOL ETABONATE 0.5% EYE OINTMENT
1145	LOTEPREDNOL ETABONATE 0.5% + TOBRAMYCIN 0.3% EYE DROPS
1146	LOVASTATIN 10MG TAB
1147	LOVASTATIN 20MG TAB
1148	LOZAPINE 10MG CAP
1149	LOZAPINE 10MG TAB
1150	LOZAPINE 25MG CAP
1151	LOZAPINE 25MG TAB
1152	LOZAPINE 50MG CAP
1153	LOZAPINE 50MG TAB
1154	LULICONAZOLE 5% LOTION
1155	LULICONAZOLE CREAM
1156	MAGNESIUM HYDROXIDE SUSP
1157	MAGNESIUM SULPHATE + ALUMINIUM SULPHATE + CALCIUM CARBONATE + SODIUM BICARBONATE SUSP
1158	MAGNESIUM SULPHATE + ALUMINIUM SULPHATE + CALCIUM CARBONATE + SODIUM BICARBONATE TAB
1159	MAGNESIUM SULPHATE + ALUMINIUM SULPHATE + SIMETHICONE SUSP
1160	MAGNESIUM SULPHATE + ALUMINIUM SULPHATE + SIMETHICONE TAB
1161	MEBENDAZOLE 100MG TAB
1162	MEBENDAZOLE 100MG/5ML SYP
1163	MECLIZINE 25MG TAB
1164	MECLIZINE 50MG TAB
1165	MEDROXYPROGESTERONE ACETATE 10MG TAB
1166	MEFENAMIC ACID 100MG + PARACETAMOL 125MG/5ML SUSP
1167	MEFENAMIC ACID 100MG + PARACETAMOL 250MG/5ML SUSP
1168	MEFENAMIC ACID 100MG/5ML SYP
1169	MEFENAMIC ACID 100MG/5ML SYP

SL. NO.	GENERIC NAME
1170	MEFENAMIC ACID 250MG TAB
1171	MEFENAMIC ACID 500MG TAB
1172	MERCAPTOPYRINE 50MG TAB
1173	MESNA 1G/10ML INJ VIAL
1174	MESNA 200MG/2ML INJ VIAL
1175	METALAZONE 10MG TAB
1176	METALAZONE 2.5MG TAB
1177	METALAZONE 5MG TAB
1178	METFORMIN 1000MG TAB
1179	METFORMIN 500MG TAB
1180	METFORMIN SR 1000MG TAB
1181	METFORMIN SR 500MG TAB
1182	METHIMAZOLE 10MG TAB
1183	METHIMAZOLE 5MG TAB
1184	METHOTREXATE 10MG TAB
1185	METHOTREXATE 15MG TAB
1186	METHOTREXATE 2.5MG TAB
1187	METHOTREXATE 20MG TAB
1188	METHOTREXATE 5MG TAB
1189	METHOTREXATE 7.5MG TAB
1190	METHYLDOPA 250MG TAB
1191	METHYLDOPA 500MG TAB
1192	METHYLPHENIDATE 10MG TAB
1193	METHYLPHENIDATE 25MG TAB
1194	METHYLPHENIDATE 5MG TAB
1195	METHYLPREDNISOLONE 16MG TAB
1196	METHYLPREDNISOLONE 4MG TAB
1197	METHYLPREDNISOLONE 8MG TAB
1198	METOCLOPRAMIDE 5MG/5ML SYP
1199	METOCLOPRAMIDE 10MG TAB
1200	METOCLOPRAMIDE 5MG TAB
1201	METOCLOPRAMIDE 5MG/ML AMP INJ
1202	METOPROLOL 100MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1203	METOPROLOL 100MG TAB
1204	METOPROLOL 12.5MG TAB
1205	METOPROLOL 25MG + CHLORTHALIDONE 6.25MG TAB
1206	METOPROLOL 25MG TAB
1207	METOPROLOL 50MG + CHLORTHALIDONE 12.5MG TAB
1208	METOPROLOL 50MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1209	METOPROLOL 50MG TAB
1210	METOPROLOL XL 25MG TAB
1211	METOPROLOL XL 50MG TAB
1212	METOPROLOL XR 100MG TAB
1213	METOPROLOL XR 25MG TAB
1214	METOPROLOL XR 50MG TAB
1215	METRONIDAZOLE 100MG + NALIDIXIC ACID 150MG/5ML SYP

SL. NO.	GENERIC NAME
1216	METRONIDAZOLE 10MG DENTAL GEL
1217	METRONIDAZOLE 2% + POVIDONE IODINE 10% OINT
1218	METRONIDAZOLE 200MG TAB
1219	METRONIDAZOLE 200MG TAB
1220	METRONIDAZOLE 200MG/5ML SYP
1221	METRONIDAZOLE 400MG TAB
1222	METRONIDAZOLE 500MG/100ML INJ BOTTLE
1223	MIANSERIN 10MG TAB
1224	MIANSERIN 20MG TAB
1225	MIANSERIN 30MG TAB
1226	MICONAZOLE 2% GEL
1227	MIDAZOLAM 5MG/0.1ML NASAL SPRAY
1228	MINOCYCLINE 100MG TAB
1229	MIRABEGRON 25MG TAB
1230	MIRABEGRON ER 50MG TAB
1231	MIRTAZEPINE 15MG TAB
1232	MIRTAZEPINE 30MG TAB
1233	MIRTAZEPINE 7.5MG TAB
1234	MODAFINIL 100MG TAB
1235	MODAFINIL 200MG TAB
1236	MOMETASONE 0.1% CREAM
1237	MOMETASONE 50MCG NASAL SPRAY
1238	MONTELUKAST 10MG + BILASTINE 20MG TAB
1239	MONTELUKAST 10MG + DESLORATIDINE 5MG TAB
1240	MONTELUKAST 10MG + FEXOFENADINE 120MG TAB
1241	MONTELUKAST 10MG + LEVOCETIRIZINE 5MG TAB
1242	MONTELUKAST 10MG TAB
1243	MONTELUKAST 10MG+ EBASTINE 10MG TAB
1244	MONTELUKAST 2.5MG + LEVOCETRIZINE 5MG/5ML SYP
1245	MONTELUKAST 2.5MG + LEVOCETRIZINE 4MG/5ML SYP
1246	MONTELUKAST 4MG + LEVOCETIRIZINE 2.5MG TAB
1247	MONTELUKAST 4MG + LEVOCETIRIZINE 2.5MG/5ML SYP
1248	MONTELUKAST 4MG TAB
1249	MONTELUKAST 5MG TAB
1250	MOXIFLOXACIN + KETOROLAC EYE DROPS
1251	MOXIFLOXACIN 0.5% EYE DROPS
1252	MOXIFLOXACIN 0.5% EYE OINTMENT
1253	MOXIFLOXACIN 400MG TAB
1254	MOXONIDINE 0.2MG TAB
1255	MOXONIDINE 0.3MG TAB
1256	MUPIROCIN 2% OINT
1257	MYCOPHENOLATE MOFETIL 500MG TAB
1258	MYCOPHENOLATE MOFETIL 750MG TAB
1259	MYCOPHENOLATE SODIUM 180MG TAB
1260	MYCOPHENOLATE SODIUM 360MG TAB
1261	N- ACETYL CYSTEINE 600MG TAB

SL. NO.	GENERIC NAME
1262	NAB PACLITAXEL 100MG INJ VIAL
1263	N-ACETYL CYSTEINE 600MG + ACEBROPHYLLINE 100MG TAB
1264	NAPHAZOLINE HYDROCHLORIDE 0.1% + METHYL CELLULOSE 0.1% + CHLORPHENIRAMINE MALEATE 0.01% EYE DROPS
1265	NAPHAZOLINE HYDROCHLORIDE 0.1% + PHENYLEPHRINE + HYDROXY PROPYLMETHYL CELLULOSE EYE DROPS
1266	NAPHAZOLINE HYDROCHLORIDE 0.1% EYE DROPS
1267	NAPROXEN 250MG TAB
1268	NAPROXEN 500MG TAB
1269	NATAMYCIN 0.5% EYE DROPS
1270	NATURAL PROGESTERONE 100MG CAP
1271	NATURAL PROGESTERONE 100MG TAB
1272	NATURAL PROGESTERONE 100MG/2ML INJ AMP
1273	NATURAL PROGESTERONE 200MG CAP
1274	NATURAL PROGESTERONE 200MG TAB
1275	NATURAL PROGESTERONE 300MG CAP
1276	NATURAL PROGESTERONE 300MG TAB
1277	NATURAL PROGESTERONE 400MG CAP
1278	NATURAL PROGESTERONE 400MG TAB
1279	NEBIVOLOL 10MG TAB
1280	NEBIVOLOL 2.5MG TAB
1281	NEBIVOLOL 5MG TAB
1282	NEBIVOLOL 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1283	NEOMYCIN OINT
1284	NEPAFENAC 0.1% EYE DROPS
1285	NETARSUDIL 0.02% EYE DROPS
1286	NICORANDIL 10MG TAB
1287	NICORANDIL 5MG TAB
1288	NICOTINIC ACID 375MG TAB
1289	NICOTINIC ACID 500MG TAB
1290	NIFEDIPINE 10MG TAB
1291	NIFEDIPINE 5MG TAB
1292	NIFEDIPINE SR 10MG TAB
1293	NIFEDIPINE SR 20MG TAB
1294	NIFEDIPINE SR 30MG TAB
1295	NILOTINIB 200MG TAB
1296	NILOTINIB 400MG TAB
1297	NIMOTUZUMAB 50MG INJ VIAL
1298	NITRAZEPAM 10MG TAB
1299	NITRAZEPAM 5MG TAB
1300	NITROFURANTOIN 100MG TAB
1301	NITROFURANTOIN 50MG TAB
1302	NITROGLYCERIN 1.5MG S/L TAB
1303	NITROGLYCERIN 2.6MG TAB

SL. NO.	GENERIC NAME
1304	NITROGLYCERIN 6.4MG TAB
1305	NIVOLUMAB 100MG INJ VIAL
1306	NIVOLUMAB 40MG INJ VIAL
1307	NORETHISTERONE 10MG TAB
1308	NORETHISTERONE 15MG TAB
1309	NORETHISTERONE 5MG TAB
1310	NORFLOXACIN 100MG + METRONIDAZOLE 100MG/5ML SYP
1311	NORFLOXACIN 100MG DT TAB
1312	NORFLOXACIN 200MG TAB
1313	NORFLOXACIN 200MG TAB
1314	NORFLOXACIN 400MG TAB
1315	NORTRYPTILINE 10MG TAB
1316	NORTRYPTILINE 25MG TAB
1317	NORTRYPTILINE 50MG TAB
1318	OCTREOTIDE 100MCG INJ AMP
1319	OCTREOTIDE 20MG INJ DEPOT
1320	OCTREOTIDE 30MG INJ DEPOT
1321	OCTREOTIDE 50MCG INJ AMP
1322	OFLOXACIN 0.3% EYE DROPS
1323	OFLOXACIN 0.3% EYE OINTMENT
1324	OFLOXACIN 100MG TAB
1325	OFLOXACIN 100MG TAB
1326	OFLOXACIN 200MG + ORNIDAZOLE 500MG TAB
1327	OFLOXACIN 200MG + TINIDAZOLE 600MG TAB
1328	OFLOXACIN 200MG TAB
1329	OFLOXACIN 400MG TAB
1330	OFLOXACIN 50MG + METRONIDAZOLE 100MG/5ML SYP
1331	OFLOXACIN 50MG + ORNIDAZOLE 125MG/5ML SYP
1332	OFLOXACIN 50MG + TINIDAZOLE 150MG/5ML SYP
1333	OFLOXACIN 50MG/5ML SUSP
1334	OLANZEPINE 10MG TAB
1335	OLANZEPINE 2.5MG TAB
1336	OLANZEPINE 20MG TAB
1337	OLANZEPINE 5MG TAB
1338	OLANZEPINE 7.5MG TAB
1339	OLAPARIB 100MG TAB
1340	OLAPARIB 150MG TAB
1341	OLAPARIB 50MG TAB
1342	OLMESARTAN 20MG + AMLODIPINE 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1343	OLMESARTAN 20MG + AMLODIPINE 5MG TAB
1344	OLMESARTAN 20MG + CHLORTHALIDONE 12.5MG TAB
1345	OLMESARTAN 20MG + CHLORTHALIDONE 6.25MG TAB
1346	OLMESARTAN 20MG + HYDROCHLOROTHIAZIDE 12.5MG TAB

SL. NO.	GENERIC NAME
1347	OLMESARTAN 20MG + INDAPAMIDE 1.5MG TAB
1348	OLMESARTAN 20MG + METOPROLOL 25MG TAB
1349	OLMESARTAN 20MG + METOPROLOL 50MG TAB
1350	OLMESARTAN 20MG TAB
1351	OLMESARTAN 40 MG + AMLODIPINE 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1352	OLMESARTAN 40MG + AMLODIPINE 5MG TAB
1353	OLMESARTAN 40MG + CHLORTHALIDONE 12.5MG TAB
1354	OLMESARTAN 40MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1355	OLMESARTAN 40MG + INDAPAMIDE 1.5MG TAB
1356	OLMESARTAN 40MG TAB
1357	OLOPATADINE HYDROCHLORIDE + KETOROLAC TROMETHAMINE EYE DROPS
1358	OLOPATADINE HYDROCHLORIDE 0.1% EYE DROPS
1359	OMALIZUMAB 150MG INJ PFS
1360	OMEPRAZOLE 20MG + DOMPERIDONE 30MG SR TAB
1361	OMEPRAZOLE 20MG CAP
1362	ONDANSETRON 2MG/5ML SYP
1363	ONDANSETRON 2MG/ML -2 ML INJ AMP
1364	ONDANSETRON 2MG/ML- 4 ML INJ AMP
1365	ONDANSETRON 4MG DT TAB
1366	ONDANSETRON 4MG ORAL DISINTEGRATING STRIP
1367	ONDANSETRON 4MG TAB
1368	ONDANSETRON 4MG/5ML SYP
1369	ONDANSETRON 8MG ORAL DISINTEGRATING STRIP
1370	ONDANSETRON 8MG TAB
1371	ORAL REHYDRATION SALT SACHET (ORS SACHET)
1372	ORNIDAZOLE 500MG TAB
1373	OSELTAMIVIR 12MG/5ML SYP
1374	OSELTAMIVIR 75MG CAP
1375	OSIMERTINIB 80MG TAB
1376	OXALIPLATIN 100MG INJ VIAL
1377	OXALIPLATIN 50MG INJ VIAL
1378	OXAZEPAM 10MG TAB
1379	OXAZEPAM 15MG TAB
1380	OXAZEPAM 30MG TAB
1381	OXCARBAZEPINE 150MG TAB
1382	OXCARBAZEPINE 300MG TAB
1383	OXCARBAZEPINE 450MG TAB
1384	OXCARBAZEPINE 600MG TAB
1385	OXETACAINE 10MG + ALUMINIUM HYDROXIDE 0.2MG + MAGNESIUM HYDROXIDE 96MG SUSP
1386	OXYMETAZOLINE 0.05% NASAL SPRAY
1387	OXYMETAZOLINE 0.01% NASAL SPRAY

SL. NO.	GENERIC NAME
1388	OXYMETOZOLINE 0.025% NASAL SPRAY
1389	PACLITAXEL 100MG INJ VIAL
1390	PACLITAXEL 260MG INJ VIAL
1391	PACLITAXEL 30MG INJ VIAL
1392	PALANOSETRON 0.25MG/5ML AMP INJ
1393	PALBOCICLIB 100MG CAP
1394	PALBOCICLIB 125MG CAP
1395	PALBOCICLIB 75MG CAP
1396	PANITUMUMAB 100MG/5ML INJ VIAL
1397	PANITUMUMAB 400MG/20ML INJ VIAL
1398	PANTOPRAZOLE 20MG + DOMPERIDONE 10MG TAB
1399	PANTOPRAZOLE 40MG + DOMPERIDONE 10MG SR TAB
1400	PANTOPRAZOLE 40MG + DOMPERIDONE 10MG TAB
1401	PANTOPRAZOLE 40MG + DOMPERIDONE 30MG TAB
1402	PANTOPRAZOLE 40MG INJ VIAL
1403	PANTOPRAZOLE 40MG TAB
1404	PARACETAMOL 100MG/1ML ORAL DROPS
1405	PARACETAMOL 100MG/ML ORAL DROPS
1406	PARACETAMOL 120MG/5ML SYP
1407	PARACETAMOL 125MG + PHENYLEPHRINE 2.5MG + CHLORPHENIRAMINE MALEATE 1MG/5ML SYP
1408	PARACETAMOL 125MG SUPPOSITORY
1409	PARACETAMOL 125MG/5ML SYP
1410	PARACETAMOL 125MG/5ML SYP
1411	PARACETAMOL 170MG SUPPOSITORY
1412	PARACETAMOL 1GM INJ IV INFUSION
1413	PARACETAMOL 250MG + PHENYLEPHRINE 5MG + CHLORPHENIRAMINE MALEATE 2MG/5ML SYP
1414	PARACETAMOL 250MG SUPPOSITORY
1415	PARACETAMOL 250MG TAB
1416	PARACETAMOL 250MG/5ML SYP
1417	PARACETAMOL 250MG/5ML SYP
1418	PARACETAMOL 300MG/2ML INJ AMP
1419	PARACETAMOL 325MG + DOMPERIDONE 10MG TAB
1420	PARACETAMOL 500MG SUPPOSITORY
1421	PARACETAMOL 500MG TAB
1422	PARACETAMOL 60MG SUPPOSITORY
1423	PARACETAMOL 650MG TAB
1424	PARACETAMOL 80MG SUPPOSITORY
1425	PARADICHLOROBENZENE + BENZOCAINE + CHLORBUTOL EAR DROPS
1426	PAROXETINE 12.5MG TAB
1427	PAROXETINE 25MG TAB
1428	PAROXETINE 37.5MG TAB
1429	PAZOPANIB 200MG TAB

SL. NO.	GENERIC NAME
1430	PAZOPANIB 400MG TAB
1431	PEMBROLIZUMAB 100MG INJ VIAL
1432	PEMBROLIZUMAB 200MG INJ VIAL
1433	PEMBROLIZUMAB 50MG INJ VIAL
1434	PEMETREXED 100MG INJ VIAL
1435	PEMETREXED 500MG INJ VIAL
1436	PEN FOR TERIPARATIDE INJ
1437	PENICILLIN G POTASSIUM 4 LAKH UNITS TAB
1438	PENICILLIN G POTASSIUM 8 LAKH UNITS TAB
1439	PENICILLIN V 250MG TAB
1440	PENTOXIFYLLINE ER 400MG TAB
1441	PERINDOPRIL 2MG TAB
1442	PERINDOPRIL 4MG + AMLODIPINE 10MG TAB
1443	PERINDOPRIL 4MG + AMLODIPINE 5MG TAB
1444	PERINDOPRIL 4MG + INDAPAMIDE 1.25MG TAB
1445	PERINDOPRIL 4MG TAB
1446	PERINDOPRIL 8MG + AMLODIPINE 10MG TAB
1447	PERINDOPRIL 8MG + AMLODIPINE 5MG TAB
1448	PERINDOPRIL 8MG + INDAPAMIDE 2.5MG TAB
1449	PERINDOPRIL 8MG TAB
1450	PERMETHRIN 1% LOTION
1451	PERMETHRIN 5% CREAM
1452	PERMETHRIN 5% LOTION
1453	PERTUZUMAB 1200MG + TRASTUZUMAB 600MG/15ML INJ VIAL
1454	PERTUZUMAB 1200MG INJ VIAL
1455	PERTUZUMAB 420MG INJ VIAL
1456	PERTUZUMAB 600MG + TRASTUZUMAB 600MG/10ML INJ VIAL
1457	PERTUZUMAB 600MG INJ VIAL
1458	PHENIRAMINE MALEATE 22.75MG/1ML INJ AMP
1459	PHENIRAMINE MALEATE 25MG TAB
1460	PHENIRAMINE MALEATE 50MG TAB
1461	PHENOBARBITONE 20MG/5ML SYP
1462	PHENOBARBITONE 30MG TAB
1463	PHENOBARBITONE 60MG TAB
1464	PHENYLEPHRINE 0.1% + BECLOMETHASONE 0.25% + LIDOCAINE 2.5% CREAM
1465	PHENYLEPHRINE 5MG + CHLORPHENIRAMINE MALEATE 2MG/5ML SYP
1466	PHENYTOIN 100MG TAB
1467	PHENYTOIN 300MG TAB
1468	PHENYTOIN 30MG/5ML SYP
1469	PHENYTOIN 50MG TAB
1470	PHENYTOIN 50MG/1ML INJ AMP
1471	PILOCARPINE HYDROCHLORIDE 4% EYE DROPS
1472	PILOCARPINE NITRATE 2% EYE DROPS
1473	PIMOZIDE 10MG TAB

SL. NO.	GENERIC NAME
1474	PIMOZIDE 2MG TAB
1475	PIMOZIDE 4MG TAB
1476	PIOGLITAZONE 15MG TAB
1477	PIOGLITAZONE 30MG TAB
1478	PIRACETAM 200MG/1ML INJ AMP
1479	PIRACETAM 200MG/1ML INJ VIAL
1480	PIRACETAM 800MG TAB
1481	PIROXICAM 20MG TAB
1482	PIROXICAM 20MG/ML INJ AMP
1483	POLYMYXIN B + BACITRACIN + HYDROCORTISONE ACETATE 0.5% EYE OINTMENT
1484	POLYMYXIN B + BACITRACIN EYE OINTMENT EYE OINTMENT
1485	POLYVINYL ALCOHOL + POVIDONE EYE DROPS
1486	POLYVINYL ALCOHOL 0.4% EYE DROPS
1487	POMALIDOMIDE 1MG CAP
1488	POMALIDOMIDE 2MG CAP
1489	POMALIDOMIDE 4MG CAP
1490	POTASSIUM CHLORIDE 1.5GM/15ML SYP
1491	POTASSIUM CITRATE 1100MG + MAGNESIUM CITRATE 375MG/5ML SYP
1492	POVIDONE IODINE 400GM OINT
1493	POVIDONE IODINE 5% OINT
1494	POVIDONE IODINE SOLUTION 500ML
1495	PRAMIPREXOLE 0.125MG TAB
1496	PRAMIPREXOLE 0.25MG TAB
1497	PRAMIPREXOLE 0.375MG TAB
1498	PRAMIPREXOLE 0.5MG TAB
1499	PRAMIPREXOLE 0.75MG TAB
1500	PRAMIPREXOLE 1.5MG TAB
1501	PRAMIPREXOLE 1MG TAB
1502	PRASUGREL 10MG TAB
1503	PRASUGREL 5MG TAB
1504	PRAVASTATIN 10MG TAB
1505	PRAVASTATIN 20MG TAB
1506	PRAZOSIN 1MG TAB
1507	PRAZOSIN 2MG TAB
1508	PRAZOSIN XR 2.5MG TAB
1509	PRAZOSIN XR 5MG TAB
1510	PREDNISOLONE 10MG TAB
1511	PREDNISOLONE 15MG/5ML SYP
1512	PREDNISOLONE 20MG TAB
1513	PREDNISOLONE 5MG TAB
1514	PREDNISOLONE 5MG/5ML SYP
1515	PREDNISOLONE ACETATE 1% + MOXIFLOXACIN EYE DROPS
1516	PREDNISOLONE ACETATE 1% EYE DROPS
1517	PREGABALIN 100MG CAP

SL. NO.	GENERIC NAME
1518	PREGABALIN 100MG TAB
1519	PREGABALIN 150MG + METHYLCOBALAMINE 750MCG TAB
1520	PREGABALIN 150MG CAP
1521	PREGABALIN 150MG TAB
1522	PREGABALIN 25MG CAP
1523	PREGABALIN 25MG TAB
1524	PREGABALIN 300MG CAP
1525	PREGABALIN 300MG TAB
1526	PREGABALIN 35MG CAP
1527	PREGABALIN 35MG TAB
1528	PREGABALIN 75MG + AMITRYPTILINE 10MG TAB
1529	PREGABALIN 75MG + METHYLCOBALAMINE 1500MCG TAB
1530	PREGABALIN 75MG + METHYLCOBALAMINE 750MCG TAB
1531	PREGABALIN 75MG + NORTRYPTILINE 10MG TAB
1532	PREGABALIN 75MG CAP
1533	PREGABALIN 75MG TAB
1534	PREGABALIN ER 50MG CAP
1535	PREGABALIN ER 75MG CAP
1536	PRIMIDONE 50MG TAB
1537	PRIMIDONE 25MG TAB
1538	PROBENACID 500MG TAB
1539	PROCHLORPERAZINE 25MG TAB
1540	PROCHLORPERAZINE 12.5MG/1ML INJ AMP
1541	PROCHLORPERAZINE 5MG TAB
1542	PROCYCLIDINE 2.5MG TAB
1543	PROCYCLIDINE 5MG TAB
1544	PROMETHAZINE 10MG TAB
1545	PROMETHAZINE 10MG TAB
1546	PROMETHAZINE 25MG TAB
1547	PROMETHAZINE 25MG TAB
1548	PROMETHAZINE 25MG/1ML INJ AMP
1549	PROMETHAZINE 25MG/2ML AMP INJ
1550	PROMETHAZINE 5MG/5ML SYP
1551	PROMETHAZINE 5MG/5ML SYP
1552	PROPARACAINE HYDROCHLORIDE 0.5% EYE DROPS
1553	PROPRANOLOL 10MG CAP
1554	PROPRANOLOL 10MG TAB
1555	PROPRANOLOL 20MG CAP
1556	PROPRANOLOL 20MG TAB
1557	PROPRANOLOL 40MG CAP
1558	PROPRANOLOL 40MG TAB
1559	PROPRANOLOL XR 20MG CAP
1560	PROPRANOLOL XR 20MG TAB
1561	PROPRANOLOL XR 40MG CAP
1562	PROPRANOLOL XR 40MG TAB
1563	PROPRANOLOL XR 80MG TAB

SL. NO.	GENERIC NAME
1564	PROPRANOLOL XR 80MG TAB
1565	PROPYL THIOURACIL 100MG TAB
1566	PROPYL THIOURACIL 50MG TAB
1567	PROPYLENE GLYCOL + POLYETHYLENE GLYCOL EYE DROPS
1568	PROTEIN BOUND PACLITAXEL 100MG INJ VIAL
1569	PYRANTEL PALMOATE 250MG TAB
1570	PYRANTEL PALMOATE 250MG/5ML SYP
1571	PYRITINOL 100MG TAB
1572	PYRITINOL 100MG/5ML SUSP
1573	PYRITINOL 200MG TAB
1574	QUETIAPINE 100MG TAB
1575	QUETIAPINE 200MG TAB
1576	QUETIAPINE 25MG TAB
1577	QUETIAPINE 50MG TAB
1578	RABEPRAZOLE 20MG + DOMPERIDONE 30MG SR TAB
1579	RABEPRAZOLE 20MG TAB
1580	RAMIPRIL 1.25MG + AMLODIPINE 2.5MG TAB
1581	RAMIPRIL 1.25MG CAP
1582	RAMIPRIL 1.25MG TAB
1583	RAMIPRIL 10MG CAP
1584	RAMIPRIL 10MG TAB
1585	RAMIPRIL 2.5MG + AMLODIPINE 5MG TAB
1586	RAMIPRIL 2.5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1587	RAMIPRIL 2.5MG CAP
1588	RAMIPRIL 2.5MG TAB
1589	RAMIPRIL 5MG + AMLODIPINE 5MG TAB
1590	RAMIPRIL 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1591	RAMIPRIL 5MG CAP
1592	RAMIPRIL 5MG TAB
1593	RAMUCIRUMAB 100MG INJ VIAL
1594	RAMUCIRUMAB 500MG INJ VIAL
1595	RANIBIZUMAB 10MG/ML INJ PFS
1596	RANIBIZUMAB 10MG/ML INJ VIAL
1597	RANITIDINE 150MG + DOMPERIDONE 10MG TAB
1598	RANITIDINE 150MG TAB
1599	RANITIDINE 300MG TAB
1600	RANITIDINE 50MG/2ML INJ AMP
1601	RANITIDINE 75MG/5ML SYP
1602	RANOLAZINE 500MG TAB
1603	RASAGILINE 0.5MG TAB
1604	RASAGILINE 1MG TAB
1605	REBAMIPIDE 2% EYE DROPS
1606	REGORAFENIB 40MG TAB
1607	REPAGLINIDE 1MG TAB
1608	REPAGLINIDE 2MG TAB
1609	RIBOCICLIB 200MG TAB

SL. NO.	GENERIC NAME
1610	RIFAXIMIN 200MG TAB
1611	RIFAXIMIN 400MG TAB
1612	RISPERIDONE 1MG TAB
1613	RISPERIDONE 2MG TAB
1614	RISPERIDONE 3MG TAB
1615	RISPERIDONE 4MG TAB
1616	RITUXIMAB 100MG INJ VIAL
1617	RITUXIMAB 500MG INJ VIAL
1618	RIVAROXABAN 2.5MG TAB
1619	RIVAROXABAN 5MG TAB
1620	RIVASTIGMINE 1.5MG CAP
1621	RIVASTIGMINE 1.5MG TAB
1622	RIVASTIGMINE 3MG CAP
1623	RIVASTIGMINE 3MG TAB
1624	RIVASTIGMINE 4.5MG CAP
1625	RIVASTIGMINE 4.5MG TAB
1626	RIVASTIGMINE 6MG CAP
1627	RIVASTIGMINE 6MG TAB
1628	ROPINIROLE 0.25MG TAB
1629	ROPINIROLE 0.5MG TAB
1630	ROPINIROLE 1MG TAB
1631	ROPINIROLE 2MG TAB
1632	ROSUVASTATIN 10MG + FENOFIBRATE 160MG TAB
1633	ROSUVASTATIN 10MG + FENOFIBRATE 67MG TAB
1634	ROSUVASTATIN 10MG TAB
1635	ROSUVASTATIN 20MG + FENOFIBRATE 160MG TAB
1636	ROSUVASTATIN 20MG TAB
1637	ROSUVASTATIN 5MG + FENOFIBRATE 145MG TAB
1638	ROSUVASTATIN 5MG + FENOFIBRATE 160MG TAB
1639	ROSUVASTATIN 5MG + FENOFIBRATE 67MG TAB
1640	ROSUVASTATIN 5MG TAB
1641	ROTAHALERS
1642	ROXITHROMYCIN 150MG TAB
1643	ROXITHROMYCIN 50MG DT TAB
1644	ROXITHROMYCIN 50MG/5ML DRY SYP
1645	RUCAPARIB 200MG TAB
1646	RUCAPARIB 250MG TAB
1647	RUCAPARIB 300MG TAB
1648	RUXOLITINIB 10MG TAB
1649	RUXOLITINIB 10MG TAB
1650	RUXOLITINIB 15MG TAB
1651	RUXOLITINIB 15MG TAB
1652	RUXOLITINIB 20MG TAB
1653	RUXOLITINIB 20MG TAB
1654	RUXOLITINIB 5MG TAB
1655	RUXOLITINIB 5MG TAB

SL. NO.	GENERIC NAME
1656	S- AMLODIPINE 2.5MG + ATENOLOL 50MG TAB
1657	S- AMLODIPINE 5MG + ATENOLOL 50MG TAB
1658	SALBUTAMOL 100MCG + IPRATROPIUM BROMIDE 20MCG MDI
1659	SALBUTAMOL 100MCG MDI
1660	SALBUTAMOL 2.5MG NEBULIZER SOLUTION
1661	SALBUTAMOL 2MG + THEOPHYLLINE 100MG TAB
1662	SALBUTAMOL 2MG/5ML SYP
1663	SALBUTAMOL 4MG TAB
1664	SALBUTAMOL 5MG/1ML NEBULIZER SOLUTION
1665	SALBUTAMOL 8MG TAB
1666	SALICYLIC ACID 12% OINT
1667	SALICYLIC ACID 6% OINT
1668	SALINE 133 ML ENEMA
1669	SALINE NASAL DROPS
1670	SALMETEROL 25MCG + FLUTICASONE 125MCG MDI
1671	SALMETEROL 25MCG + FLUTICASONE 125MCG RC
1672	SALMETEROL 25MCG + FLUTICASONE 250MCG MDI
1673	SALMETEROL 25MCG + FLUTICASONE 250MCG RC
1674	S-AMLODIPINE 1.25MG TAB
1675	S-AMLODIPINE 2.5MG TAB
1676	S-AMLODIPINE 5MG TAB
1677	SAROGLITAZAR 4MG TAB
1678	SAXAGLIPTIN 2.5MG TAB
1679	SAXAGLIPTIN 5MG +METFORMIN 1000MG TAB
1680	SAXAGLIPTIN 5MG TAB
1681	SAXAGLIPTIN 5MG+ METFORMIN 500MG TAB
1682	SECUKINUMAB 150MG/1ML INJ VIAL
1683	SELEGILINE 5MG TAB
1684	SEMAGLUTIDE 2MG TAB
1685	SERTRALINE 100MG TAB
1686	SERTRALINE 25MG TAB
1687	SERTRALINE 50MG TAB
1688	SILICON URINARY CATHETER NO:16
1689	SILICON URINARY CATHETER NO:18
1690	SILODOSIN 4MG CAP
1691	SILODOSIN 8MG + DUTASTERIDE 0.5MG CAP
1692	SILODOSIN 8MG CAP
1693	SILVER IONIC GEL
1694	SILVER SULFADIAZINE CREAM
1695	SILVER SULPHADIAZINE 1% +CHLORHEXIDINE 0.2% OINT
1696	SIMVASTATIN 10MG + EZETIMIBE 10MG TAB
1697	SIMVASTATIN 10MG TAB
1698	SIMVASTATIN 20MG + EZETIMIBE 10MG TAB
1699	SIMVASTATIN 5MG TAB
1700	SITAGLIPTIN 100MG TAB
1701	SITAGLIPTIN 50MG + METFORMIN 1000MG TAB

SL. NO.	GENERIC NAME
1702	SITAGLIPTIN 50MG TAB
1703	SITAGLIPTIN 50MG+METFORMIN 500MG TAB
1704	SODIUM BICARBONATE 500MG TAB
1705	SODIUM BICARBONATE 500MG TAB
1706	SODIUM CARBOXY METHYL CELLULOSE + N-ACETYLCYSTEINE EYE DROPS
1707	SODIUM CARBOXY METHYL CELLULOSE 0.5% + GLYCERINE 0.5% EYE DROPS
1708	SODIUM CARBOXY METHYL CELLULOSE 1% EYE OINTMENT
1709	SODIUM CHROMOGLYCAT 4% EYE DROPS
1710	SODIUM CITRATE 200MG + CITRIC ACID 40MG ORAL LIQUID
1711	SODIUM CITRATE 70MG + CITRIC ACID 35MG ORAL LIQUID
1712	SODIUM HYALURONATE + CARBOMER + GLYCERINE EYE DROPS
1713	SODIUM HYALURONATE + CARBOMER EYE DROPS
1714	SODIUM HYALURONATE + D-PANTHENOL EYE DROPS
1715	SODIUM HYALURONATE + SODIUM CARBOXY METHYL CELLULOSE EYE DROPS
1716	SODIUM HYALURONATE + TREHELOSE 3% EYE DROPS
1717	SODIUM HYALURONATE 0.1% EYE DROPS
1718	SODIUM PICOSULPHATE 10MG TAB
1719	SODIUM PICOSULPHATE 2.5MG/5ML SUSP
1720	SODIUM VALPROATE 1000MG TAB
1721	SODIUM VALPROATE 134MG + VALPROIC ACID 58MG CAP
1722	SODIUM VALPROATE 134MG + VALPROIC ACID 58MG TAB
1723	SODIUM VALPROATE 200MG + VALPROIC ACID 87MG CAP
1724	SODIUM VALPROATE 200MG + VALPROIC ACID 87MG TAB
1725	SODIUM VALPROATE 200MG/5ML SYP
1726	SODIUM VALPROATE 250MG TAB
1727	SODIUM VALPROATE 333MG + VALPROIC ACID 145MG CAP
1728	SODIUM VALPROATE 333MG + VALPROIC ACID 145MG TAB
1729	SODIUM VALPROATE 500MG TAB
1730	SODIUM VALPROATE 750MG TAB
1731	SODIUM VALPROATE CR 100MG TAB
1732	SODIUM VALPROATE CR 200MG TAB
1733	SODIUM VALPROATE CR 300MG TAB
1734	SODIUM VALPROATE CR 400MG TAB
1735	SODIUM VALPROATE CR 500MG TAB
1736	SODIUM VALPROATE CR 600MG TAB
1737	SOFOBUVIR 400MG TAB
1738	SOLIFENACIN 10MG TAB
1739	SOLIFENACIN 5MG TAB
1740	SORAFENIB 200MG TAB
1741	SPACER FOR INHALERS
1742	SPIRONOLACTONE 100MG TAB
1743	SPIRONOLACTONE 25MG TAB
1744	SPIRONOLACTONE 50MG TAB

SL. NO.	GENERIC NAME
1745	SUCRALFATE 500MG + OXETACAINE 10MG SUSP
1746	SULFAMETHOXAZOLE 100MG + TRIMETHOPRIM 20MG/5ML SYP
1747	SULFAMETHOXAZOLE 200MG + TRIMETHOPRIM 40MG/5ML SYP
1748	SULFAMETHOXAZOLE 400MG + TRIMETHOPRIM 80MG TAB
1749	SULFAMETHOXAZOLE 800MG + TRIMETHOPRIM 160MG DS TAB
1750	SULFASALAZINE 1GM TAB
1751	SULFASALAZINE 500MG TAB
1752	TAB CARVEDILOL 12.5MG TAB
1753	TAB CARVEDILOL 25MG TAB
1754	TAB CARVEDILOL 3.125MG TAB
1755	TAB CARVEDILOL 6.25MG TAB
1756	TAB PREGABALIN 75MG + NORTRYPTILINE 10MG + METHYLCOBALAMIN 1500MCG TAB
1757	TACROLIMUS 0.03% EYE OINTMENT
1758	TACROLIMUS 0.1% EYE DROPS
1759	TACROLIMUS 0.1% EYE OINTMENT
1760	TACROLIMUS 0.1% OINT
1761	TACROLIMUS 1MG CAP
1762	TAMOXIFEN 20MG TAB
1763	TAMSULOSIN 0.2MG CAP
1764	TAMSULOSIN 0.2MG TAB
1765	TAMSULOSIN 0.4MG + DUTASTERIDE 0.5MG CAP
1766	TAMSULOSIN 0.4MG CAP
1767	TAMSULOSIN 0.4MG TAB
1768	TAMSULOZIN 0.4MG +FINASTERIDE 5MG CAP
1769	TEGAFUR 100MG + URACIL 224MG CAP
1770	TELMISARTAN 40MG + AMLODIPINE 5MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1771	TELMISARTAN 20MG TAB
1772	TELMISARTAN 40MG + AMLODIPINE 5MG + CHLORTHALIDONE 12.5MG TAB
1773	TELMISARTAN 40MG + AMLODIPINE 5MG TAB
1774	TELMISARTAN 40MG + BISOPROLOL 2.5MG TAB
1775	TELMISARTAN 40MG + BISOPROLOL 5MG TAB
1776	TELMISARTAN 40MG + CHLORTHALIDONE 12.5MG TAB
1777	TELMISARTAN 40MG + CHLORTHALIDONE 6.25MG TAB
1778	TELMISARTAN 40MG + CILNIDIPINE 10MG TAB
1779	TELMISARTAN 40MG + HYDROCHLOROTHIAZIDE 12.5MG
1780	TELMISARTAN 40MG + METOPROLOL 25MG TAB
1781	TELMISARTAN 40MG + METOPROLOL 50MG TAB
1782	TELMISARTAN 40MG + S-AMLODIPINE 2.5MG TAB
1783	TELMISARTAN 40MG + S-AMLODIPINE 5MG TAB
1784	TELMISARTAN 40MG TAB
1785	TELMISARTAN 80MG + AMLODIPINE 5MG TAB

SL. NO.	GENERIC NAME
1786	TELMISARTAN 80MG + CHLORTHALIDONE 12.5MG TAB
1787	TELMISARTAN 80MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1788	TELMISARTAN 80MG TAB
1789	TENEGLIPTIN 20MG TAB
1790	TENOFOVIR ALAFENAMIDE 25MG TAB
1791	TENOFOVIR DISOPROXIL FUMARATE 300MG TAB
1792	TERBINAFINE 1% CREAM
1793	TERBINAFINE 250MG TAB
1794	TERBUTALINE 0.25MG + AMBROXOL 7.5MG + GUAIPHENESIN 12.5MG/1ML ORAL DROPS
1795	TERBUTALINE 1.25MG + BROMHEXINE 4MG + AMMONIUM CHLORIDE 50MG/5ML SYP
1796	TERBUTALINE 2.5MG + BROMHEXINE 8MG/5ML SYP
1797	TERBUTALINE SULPHATE 2.5MG TAB
1798	TERBUTALINE SULPHATE 5MG TAB
1799	TERIPARATIDE 750MCG FLEXPEN
1800	TERIPARATIDE 750MCG/3ML INJ CARTRIDGES
1801	TERIPARATIDE 750MCG/3ML INJ PREFILLED SYRINGES
1802	TETANUS TOXOID INJ AMP
1803	TETRACYCLINE 500MG TAB
1804	TETRACYCLINE OINT
1805	THEOPHYLLINE 400MG CR CAP
1806	THIAMINE HYDROCHLORIDE 2MG + RIBOFLAVIN SODIUM PHOSPHATE 2.54MG + PYRIDOXINE HYDROCHLORIDE 2MG + NIACINAMIDE 20MG + D-PANTHENOL 6MG + ASCORBIC ACID 75MG/5ML SYP
1807	THIORIDAZINE 100MG TAB
1808	THIORIDAZINE 10MG TAB
1809	THIORIDAZINE 25MG TAB
1810	THIORIDAZINE 50MG TAB
1811	TIBOLONE 2.5MG TAB
1812	TICAGRELOR 60MG TAB
1813	TICAGRELOR 90MG TAB
1814	TICLOPIDINE 250MG TAB
1815	TIMOLOL MALEATE 0.5% EYE DROPS
1816	TIMOLOL MALEATE LONG ACTING EYE DROPS
1817	TINIDAZOLE 1000MG TAB
1818	TINIDAZOLE 500MG TAB
1819	TIOTROPIUM BROMIDE 18MCG MDI
1820	TIOTROPIUM BROMIDE 9MCG MDI
1821	TOBRAMYCIN 0.3% EYE DROPS
1822	TOBRAMYCIN 0.3% EYE OINTMENT
1823	TOLTERODINE 2MG TAB

SL. NO.	GENERIC NAME
1824	TOLVAPTAN 15MG TAB
1825	TOPIRAMITE 100MG TAB
1826	TOPIRAMITE 25MG TAB
1827	TOPIRAMITE 50MG TAB
1828	TORSEMIDE 10MG TAB
1829	TORSEMIDE 20MG TAB
1830	TORSEMIDE 5MG TAB
1831	TRABECTIDIN 1MG INJ VIAL
1832	TRAMADOL 100MG CAP
1833	TRAMADOL 100MG TAB
1834	TRAMADOL 18.75MG + PARACETAMOL 162.5MG TAB
1835	TRAMADOL 37.5MG + PARACETAMOL 325MG CAP
1836	TRAMADOL 37.5MG + PARACETAMOL 325MG TAB
1837	TRAMADOL 50MG CAP
1838	TRAMADOL 50MG TAB
1839	TRAMADOL 50MG/1ML INJ AMP
1840	TRAMETINIB 0.5MG TAB
1841	TRAMETINIB 2MG TAB
1842	TRANEXAMIC ACID 250MG TAB
1843	TRANEXAMIC ACID 500MG + MEFENAMIC ACID 250MG TAB
1844	TRANEXAMIC ACID 500MG TAB
1845	TRASTUZUMAB 150MG INJ VIAL
1846	TRASTUZUMAB 440MG INJ VIAL
1847	TRAVOPROST 0.004% + TIMOLOL MALEATE 0.5% EYE DROPS
1848	TRAVOPROST 0.004% EYE DROPS
1849	TRAZODONE 100MG TAB
1850	TRAZODONE 25MG TAB
1851	TRAZODONE 50MG TAB
1852	TRIAMCINOLONE 0.1% ORAL PASTE
1853	TRIAMTERENE 50MG + BENZTHIAZIDE 25MG TAB
1854	TRIAMTERENE 50MG + FUROSEMIDE 20MG TAB
1855	TRICLOFOS SODIUM 500MG/5ML SYP
1856	TRIFLUPERAZINE HYDROCHLORIDE 5MG + TRIHEXIPHENIDYL HYDROCHLORIDE 2MG TAB
1857	TRIHENIPHENEDYL 2MG + RESPERIDONE 4MG TAB
1858	TRIHENIPHENIDYL 2MG TAB
1859	TRIMETAZIDINE 20MG TAB
1860	TRIMETAZIDINE SR 35MG TAB
1861	TRIMETAZIDINE SR 60MG TAB
1862	TRIPTORELIN 11.25MG INJ VIAL
1863	TRIPTORELIN 22.5MG INJ VIAL
1864	TRIPTORELIN 3.75MG INJ VIAL
1865	TROPICAMIDE 1% + PHENYLEPHRINE HYDROCHLORIDE EYE DROPS
1866	TROPICAMIDE 1% EYE DROPS
1867	TWO WAY LATEX FOLEYS CATHETER NO: 16
1868	TWO WAY LATEX FOLEYS CATHETER NO: 18

SL. NO.	GENERIC NAME
1869	UROBAG
1870	URSODEOXYCHOLIC ACID 150MG TAB
1871	URSODEOXYCHOLIC ACID 300MG TAB
1872	VALACICLOVIR 1000MG TAB
1873	VALACICLOVIR 500MG TAB
1874	VALSARTAN + SACUBITRIL 100MG TAB
1875	VALSARTAN + SACUBITRIL 200MG TAB
1876	VALSARTAN + SACUBITRIL 50MG TAB
1877	VALSARTAN 160MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1878	VALSARTAN 160MG + AMLODIPINE 5MG TAB
1879	VALSARTAN 160MG TAB
1880	VALSARTAN 40MG TAB
1881	VALSARTAN 80MG + AMLODIPINE 5MG TAB
1882	VALSARTAN 80MG + HYDROCHLOROTHIAZIDE 12.5MG TAB
1883	VALSARTAN 80MG TAB
1884	VENETOCLAX 100MG TAB
1885	VENETOCLAX 50MG TAB
1886	VENLAFAXINE 150MG CAP
1887	VENLAFAXINE 25MG CAP
1888	VENLAFAXINE 37.5MG CAP
1889	VENLAFAXINE 75MG CAP
1890	VERAPAMIL 120MG TAB
1891	VERAPAMIL 40MG TAB
1892	VERAPAMIL 80MG TAB
1893	VERAPAMIL SR 120MG TAB
1894	VILDAGLIPTIN 100MG TAB
1895	VILDAGLIPTIN 50MG + METFORMIN 1000MG TAB
1896	VILDAGLIPTIN 50MG + METFORMIN 500MG TAB
1897	VILDAGLIPTIN 50MG TAB
1898	VINCRISTINE 1MG INJ VIAL
1899	VINCRISTINE 2MG INJ VIAL
1900	VIT B12 1500MCG TAB
1901	VIT B12 500MCG TAB
1902	VITAMIN C 500MG TAB
1903	VOGLIBOSE 0.2MG + METFORMIN 500MG TAB
1904	VOGLIBOSE 0.2MG TAB
1905	VOGLIBOSE 0.3MG + METFORMIN 500MG TAB
1906	VOGLIBOSE 0.3MG TAB
1907	WARFARIN 1MG TAB
1908	WARFARIN 2MG TAB
1909	WARFARIN 3MG TAB
1910	WARFARIN 5MG TAB
1911	XOVOLTIB 30MG TAB
1912	XYLOMETAZOLINE 0.025% NASAL SPRAY
1913	XYLOMETAZOLINE 0.05% NASAL SPRAY
1914	XYLOMETAZOLINE 0.5% NASAL SPRAY

SL. NO.	GENERIC NAME
1915	ZINC GLUCONATE 20MG/5ML SUSP
1916	ZOLEDRONIC ACID 4MG/5ML INJ VIAL
1917	ZOLPIDEM 10MG TAB
1918	ZOLPIDEM 5MG TAB
1919	ZONISAMIDE 100MG TAB
1920	ZOPICLONE 7.5MG TAB

ANNEXURE-A

CHECKLIST FOR DOCUMENTS TO BE SUBMITTED

No.	Particulars	Annexure	Submitted (Yes/No)
01	Tender Fee - Payment details or Exemption request with documentary proof (as applicable)		
02	EMD - Payment details or Exemption request with documentary proof (as applicable)		
A	PART - I : TECHNO-COMMERCIAL BID		
03	Compliance Statement for T&Cs	B	
04	Declaration regarding Drug Control Act and Food & Drug Control Administration Regulations or any similar regulations as per Clauses 4.2	C	
05	Details of the Bidder as per Clause 6.2	D	
06	Details of Supplier as per Clause 6.2	E	
07	Authorization Letter in respect of Supplier as per Clause 6.2	---	
08	WHO-GMP Certificate as per Clause 4.1	---	
09	Self-Declaration Certificate for Minimum Local Content towards Class I and Class II Supplier as per Clause 7.1	F	
10	Certification for Minimum Local Content towards Class I and Class II Supplier issued by a Cost Accountant/Chartered Accountant, in case the supplies to VSSC is Rs. 1000 Lakhs and more as per Clause 7.3	G	
B	PART - II : PRICE BID		
11	Product & Price details in the prescribed format as per Clause 18.0	H	
12	Trade Discount details as per Clause 19.0	I	

I/We hereby certify that I/we am/are **complying with the above in response to the Tender No. 8082-2023003977-01 dated 04.12.2023 for supply of quality pharmaceutical products to VSSC.**

Date :

Signature of Authorized Person
Name
Designation

Seal

COMPLIANCE STATEMENT FOR TERMS & CONDITIONS

Please indicate compliance to the Terms & Conditions and provide details as per the table below:
(In case of non-compliance of any term or other details, please provide remarks in the corresponding column)

SL. NO.	TERMS & CONDITIONS		COMPLIANCE (Please indicate Yes / No)	REMARKS
1	Delivery Term	FOR - VSSC		
2	Delivery Place	RPP Medical Stores, VSSC		
3	Delivery Period	Within 45 days from the date of issuance of individual Supply Order		
4	Payment Term	100% payment within 30 days after receipt & acceptance of the item at our site.		
5	Validity of the offer	Offer shall be valid for a minimum period of 180 days from the date of opening of the Part-I: Techno-Commercial Bid.		
6	Analytical Report as per clause 4.3	Analytical report for each batch of medicines /drugs supplied		
7	Liquidated Damages (LD)	In case of delay in delivery of material as per the delivery schedule mutually agreed and stipulated in the order, Liquidated Damages @0.5% per week or part thereof on the undelivered portion subject to a maximum of 10% of the contract value shall be levied.		
8	Replacement of date expiring medicines/ Return of unused medicines	Replacement with latest batches for medicines nearing expiry date / Return of unused medicines against credit note		

SL. NO.	TERMS & CONDITIONS		COMPLIANCE (Please indicate Yes / No)	REMARKS
9	Security Deposit	Upon award of the Rate Contract, Security Deposit (SD) shall be submitted for 3% of the value of the Rate Contract towards satisfactory execution of the Contract.		
10	Parallel/Adhoc Rate Contract	VSSC shall reserve the right to enter into parallel/adhoc Rate Contract(s) simultaneously, or at any time during the period of the Rate Contract, with one or more agencies. VSSC reserves the right to split the Contract quantity between the suppliers. In such case the Lowest rate accepted will be counter offered to other parties and order will be split based on their acceptance.		
11	Fall Clause	The prices charged for the stores supplied under the Contract by the vendor should in no event exceed the lowest price at which the vendor sells the stores of identical description to any other person during the period of the Contract. If at any time, the prices are reduced, the same shall be notified to the Department and shall stand correspondingly reduced.		
12	Risk Purchase	The Centre shall also reserve the right to procure the medicines/drugs of similar nature/formulation from the open market in case the pharmaceutical company / authorized dealer fails to make the supply by invoking the risk purchase clause and the difference cost, if any, shall be reimbursed or recovered from the Supplier.		

Signature of Authorized Person
Name
Designation

Seal

FORMAT OF SELF-DECLARATION
**(To be submitted in the Company Letterhead,
signed by the Authorized Dealer / Manufacturer)**

SELF-DECLARATION

Certified that the medicines/drugs quoted for supply are as per the formulation specified/approved under the Drug Control Act and Food & Drug Control Administration Regulations.

Place

Signature of Authorized Person

Name

Date

Designation

Seal

ANNEXURE-D

**PART I
(To be provided with Techno-Commercial Bid)**

DETAILS OF BIDDER

1	Name of Bidder	
2	Address for communication with PINCODE	
3	Land Phone No.	
4	Mobile No.	
5	E-Mail ID	
6	FAX	
7	Name of Authorized Contact Person	
8	Designation	
9	Phone Number	
10	Email ID	
11	GST Registration No.	
12	PAN	

Signature of Authorized Person
Name
Designation

Seal

ANNEXURE - E

PART I
(To be provided with Techno-Commercial Bid)

DETAILS OF SUPPLIER
(TO WHOM PURCHASE ORDER SHOULD BE SENT)

1	Name of Supplier	
2	Address for Communication with PINCODE	
3	Land Phone No.	
4	Mobile Phone No.	
5	E mail Address (for sending Purchase Order)	
6	Fax No.	
7	GST Registration No.	
8	PAN	
9	Bank Details	
10	Bank Account No. (as appearing in the cheque book)	
11	Type of Account (Current/Savings)	
12	Name of Bank	
13	Name of Branch & address	
14	Branch email ID	
15	IFSC	

Signature of Authorized Person with seal
Name
Designation

Signature of Supplier with seal
Name
Designation

ANNEXURE - F

FORMAT OF SELF-DECLARATION

(To be submitted in company letter head
signed by Authorized Dealer/Manufacturer)

SELF-DECLARATION

Certified that the medicines/drugs quoted for supply belong to the category **Class I/ Class II** (tick applicable category) local supplier as per the provisions of Make in India (MII) policy issued by the Government of India.

Place
Date

Signature of Authorized Person
Name
Designation

Seal

ANNEXURE - G

FORMAT OF CERTIFICATE FOR MINIMUM LOCAL CONTENT

(To be certified by Cost Accountant/Chartered Accountant when the pharmaceutical products meant for supply to VSSC is Rs 1000 Lakhs and above)

CERTIFICATE FOR MINIMUM LOCAL CONTENT

Certified that the medicines/drugs quoted for supply by_____ (company) belong to the category Class I/Class II (tick applicable category) local supplier as per the provisions of Make in India (MII) policy issued by the Government of India

Place
Date

Signature of Cost Accountant/Chartered Accountant
Name
Designation

Seal

ANNEXURE - H

(Please download the editable version of this format from our websites www.vssc.gov.in / www.isro.gov.in and fill in the details and use the dropdown menus wherever applicable)

<u>PART - II (PRICE BID)</u>										
NAME OF THE PHARMA COMPANY :					NAME OF THE SUPPLIER :					
<u>LIST OF PRODUCTS QUOTED</u>										
TOTAL NUMBER OF PRODUCTS QUOTED :										
SIGNATURE & SEAL OF THE AUTHORIZED PERSON :										
*NOTE : ONLY PRINTOUT OF THE QUOTED PRODUCTS SHOULD BE SENT TO VSSC. SOFTCOPY OF THE PRICE BID MAY BE SENT LATER TO VSSC ON DEMAND.										
A	B	C	D	E	F	G	H	I	J	K
SL. NO.	GENERIC NAME (Select item from the Drop Down Menu)	BRAND NAME	PHARMA COMPANY NAME (For each item company name should be added)	PACKING UNIT	Select appropriate item from the drop down menu	QUANTITY PER PACKING UNIT Refer left column F (Enter number only)	MRP (For packing unit) Rs.	PRICE OFFERED TO VSSC (For Packing unit) Excluding GST Rs.	% OF GST WHICH IS EXTRA (Select from drop down menu)	REMARKS

ANNEXURE - I

TRADE DISCOUNT

No.	Slab – Rs. in Lakhs	Trade Discount in percentage of the List Price
a	From 5 and upto 10	
b	Above 10 and upto 25	
c	Above 25 and upto 50	
d	Above 50 and upto 100	
e	Above 100	

Signature of Authorized Person
Name
Designation

Seal