



महाराष्ट्र शासन

Government Medical College & Hospital, Baramati

Mail ID-medicalstoregmcb@gmail.com

Quotation Form

GMCB / MS / MED / QUOT / 242 / 2026

Date: - 13 / 02 / 2026

Sub: - Quotation for Medicines as given below.

Sir/ Madam

You are requested to furnish your quotation for the following items to the DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI.

| Sr.no. | Name of Drug |
|--------|---|
| 1 | Tab Acetazolamide 250mg |
| 2 | Tab Acyclovir 400mg |
| 3 | Tab Albendazole 400mg |
| 4 | Tab Amiodarone 100mg |
| 5 | Tab Amisulpride 100mg |
| 6 | Tab Amlodipine 5mg |
| 7 | Tab (Amoxicillin + Clavulanic Acid) 625mg |
| 8 | Tab Ascorbic Acid 500mg |
| 9 | Tab Aspirin 75 mg (Enteric Coated) |
| 10 | Tab Atenolol 50mg |
| 11 | Tab Atorvastatin 20mg |
| 12 | Tab Atorvastatin 40mg |
| 13 | Tab Azithromycin 500mg |
| 14 | Tab B-complex NFI |
| 15 | Tab Betahistine 16mg |
| 16 | Tab Bisacodyl 5mg (Enteric coated) |
| 17 | Tab Calcium Carbonate 500mg and Vit D3 250 IU |
| 18 | Tab Carbamazepine 200mg |
| 19 | Tab Carbimazole 10mg |
| 20 | Tab Cefixime 200 mg |
| 21 | Tab Cetirizine 10mg |
| 22 | Tab Chlordiazepoxide 10mg |
| 23 | Tab Chlordiazepoxide 25mg |
| 24 | Tab Chlorthalidone 6.25mg |
| 25 | Tab Clobazam 10mg |
| 26 | Tab Clonazepam 0.25mg |
| 27 | Tab Clonazepam 0.5mg |
| 28 | Tab Clopidogrel 75 mg |
| 29 | Tab Clozapine 50mg |
| 30 | Tab Dapagliflozin 10mg |
| 31 | Tab Deferasirox 250mg |
| 32 | Tab Deferasirox 500mg |
| 33 | Tab Diazepam 5mg |
| 34 | Tab Diclofenac 50mg |
| 35 | Tab Dicyclomine 20mg |
| 36 | Tab Digoxin 0.25 mg |
| 37 | Tab Diltiazem 30 mg |

| Sr.no. | Name of Drug |
|--------|--|
| 38 | Tab Doxycycline 100mg |
| 39 | Tab (Etophylline + Theophylline) 300mg |
| 40 | Tab Etoricoxib 90mg |
| 41 | Tab Fenofibrate 145mg |
| 42 | Tab Fluconazole 150mg |
| 43 | Tab Fluconazole 200mg |
| 44 | Tab Folic acid 5 mg |
| 45 | Tab Frusemide 40mg |
| 46 | Tab Gabapentin 100mg |
| 47 | Tab Glimepiride 1mg |
| 48 | Tab Glimepiride 2mg |
| 49 | Tab Ibuprofen 400mg |
| 50 | Tab Isosorbide Dinitrate 10 mg |
| 51 | Tab Isosorbide Dinitrate 20mg |
| 52 | Tab Lenalidomide 5mg Cap |
| 53 | Tab Levetiracetam 1 gm |
| 54 | Tab Levetiracetam 500mg |
| 55 | Tab Levodopa 100mg + Carbidopa 10mg |
| 56 | Tab Levofloxacin 500mg |
| 57 | Tab Linezolid 300 mg |
| 58 | Tab Linezolid 600mg |
| 59 | Tab Lithium Carbonate 150mg |
| 60 | Tab Loperamide 2mg |
| 61 | Tab Metformin 500mg |
| 62 | Tab Metoprolol 25 mg |
| 63 | Tab Metoprolol 50 mg |
| 64 | Tab Metronidazole 400mg |
| 65 | Tab Naproxen 500mg |
| 66 | Tab Nifedipine 10 mg |
| 67 | Tab Norfloxacin 400mg |
| 68 | Tab Nortriptyline 10mg |
| 69 | Tab Ofloxacin 400mg |
| 70 | Tab Ondansetron 4mg |
| 71 | Tab/Cap Oseltamivir 30mg |
| 72 | Tab/Cap Oseltamivir 75mg |
| 73 | Tab Oxcarbazepine 300mg |
| 74 | Tab Pantoprazole 40mg (Enteric Coated) |
| 75 | Tab Paracetamol 500mg |
| 76 | Tab Paracetamol 650mg |
| 77 | Tab Phenobarbitone 30 mg |
| 78 | Tab Phenobarbitone 60mg |
| 79 | Tab Piroxicam 20mg |
| 80 | Tab Prednisolone 20mg |
| 81 | Tab Prednisolone 5mg |
| 82 | Tab Pregabalin 75mg |

| Sr.no. | Name of Drug |
|---------------|--|
| 83 | Tab Propranolol 10mg |
| 84 | Tab Quetiapine 50mg |
| 85 | Tab Ramipril 2.5mg |
| 86 | Tab Rifaximin 550mg |
| 87 | Tab Risperidone 2mg |
| 88 | Tab Rosuvastatin 20mg |
| 89 | Tab Salbutamol 4mg |
| 90 | Tab Sertraline 50mg |
| 91 | Tab Sodium Bicarbonate 1000mg |
| 92 | Tab Sodium Valproate 200mg |
| 93 | Tab Sodium Valproate 500mg |
| 94 | Tab Spironolactone 50mg |
| 95 | Tab Telmisartan 40mg |
| 96 | Tab Thyroxine 25mcg |
| 97 | Tab Thyroxine 50mcg |
| 98 | Tab Tramadol 50mg |
| 99 | Tab Trifluoperazine 5mg |
| 100 | Tab Trihexyphenidyl 2mg |
| 101 | Tab Trihexyphenidyl 2mg + Trifluoperazine 5mg |
| 102 | Tab Trimethoprim 160mg + Sulphamethoxazole 800mg |
| 103 | Tab Trimethoprim 80mg + Sulphamethoxazole 400mg |
| 104 | Tab Trypsin-Chymotrypsin |
| 105 | Tab Ursodeoxycholic Acid 300mg |
| 106 | Tab Vildagliptin 50mg |
| 107 | Tab Vitamin D3 60000IU |
| 108 | Tab Zinc Sulphate 20mg |

TERMS & CONDITIONS

Note: - 1) Rate should be quoted inclusive of all taxes.

2) **Rates quoted are valid up to Six months.**

3) The delivery of the material must be at MEDICAL STORE within Office hour (10.00 am to 5.00 pm).

4) The Envelope & Quotation should be addressed by the name of **DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI.** It should be submitted within stipulated time at Administrative Office.

5) It is Mandatory to mention quotation reference no. on the envelope of the quotation.

6) Rates must be mentioned in figure & only in **digital printed form and not hand written.**

7) Conditional Quotations will not be accepted.

8) Right to Accept, Recall or Reject above Quotations lies solely with **DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI.**

9) If it is noticed that the mentioned drug is available in local market at the lower rate than the quoted rate, then the claim for the purchase by this quotation will become invalid.

10) Right to Purchase Medicines lies with Dean GMC, Baramati.

11) **Submit following documents with quotation:**

i) Form 20,20F,21 & intimation letter

ii) Non conviction certificate issued from concern FDA.

12) **An undertaking (On the letterhead of your firm or company) regarding the fulfilment of the following documents/certificates (At the time of supply of the medicines) should be submitted along with the quotations.**

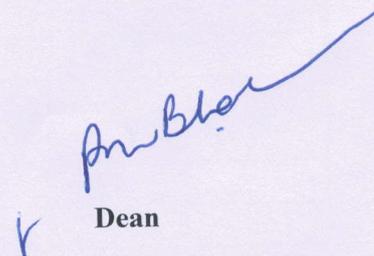
i) Valid WHO GMP certificate and WHO GMP product List or COPP for quoted items.

ii) In House test report for purchased items.

iii) National Accreditation Board for Testing and Calibration Laboratories (NABL test report) Compulsory.

Submission of this undertaking will be mandatory. If the said undertaking is not submitted, your quotation will not be accepted and the said quotations will be rejected.

Last Date to submit Quotation: 20 / 02 / 2026 before 5.00pm


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GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI