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|  | <p style="text-align: center;"><b>महाराष्ट्र शासन</b><br/> <b>सर ज.जी. समुह रुग्णालये, भायखळा, मुंबई - 400 008</b><br/> <b>मेडिकल स्टोर/सर्जिकल स्टोर</b><br/> <b>Tel.No. 2373 55 55, 2373 1144 ; Fax No. 2373 55 99;</b><br/> <b>Email id-jjhmedicalstore@gmail.com</b></p> |  |
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No.JJH/MS/B/QTN/ 37 /2026

Date:- 29 / 01 /2026

**Subject : Quotation for the supply of Medicine/ Surgical Dressing items (Open Quotation)**

Sir,

You are requested to submit your lowest bid for medicines / items The quotation should reach this office in a sealed envelope or before 09 / 02 /2026, till 5.00 pm. Quotation is also published on www.ggmciijh.com

The Dean, Sir J J Group of Hospitals, Mumbai reserves the right to Accept ,Recall or Reject any or all quotations without assigning any reason. Other instructions and terms & conditions regarding quotation are mentioned below the drug list.

| Sr no | Name of Drug                                      | Packing | Rate<br>Inclusive<br>GST(Rs) as<br>per unit<br>packing | Mfg by | MRP | Remark |
|-------|---------------------------------------------------|---------|--------------------------------------------------------|--------|-----|--------|
| 1     | Amikacin Inj. 500mg 2ml Vial                      | Vial    |                                                        |        |     |        |
| 2     | Amphotericin B Inj. 50mg Vial                     | Vial    |                                                        |        |     |        |
| 3     | Anti Rabies vaccine ID (ARV) Inj 0.5ml vial       | Vial    |                                                        |        |     |        |
| 4     | Anti Rabies Serum (ARS) Inj. 300IU/ml 5ml Vial    | Vial    |                                                        |        |     |        |
| 5     | Artesunate Inj. 60 mg Vial with diluent combipack | Vial    |                                                        |        |     |        |
| 6     | Bupivacain Hcl 0.5% Extradural Inj.20ml Vial      | Vial    |                                                        |        |     |        |
| 7     | Calcium Gluconate Inj. 10% w/v, 10ml amp          | Amp     |                                                        |        |     |        |

|    |                                                       |        |  |  |  |  |
|----|-------------------------------------------------------|--------|--|--|--|--|
| 8  | Fluconazole Inj. IV<br>200mg, 100 ml bottle           | Bottle |  |  |  |  |
| 9  | Glycopyrrolate Inj.<br>0.2mg/ml, 1ml amp              | Amp    |  |  |  |  |
| 10 | Hyoscine Butyl Bromide<br>Inj. 20 mg/ml, 1ml amp      | Amp    |  |  |  |  |
| 11 | Insulin (plain) Inj. 40IU,<br>10ml Vial               | Vial   |  |  |  |  |
| 12 | Methyl Ergometrin Inj.<br>0.2mg/ml, 1ml amp           | Amp    |  |  |  |  |
| 13 | Mephenteramine<br>Sulphate Inj. 30mg/ml,<br>10ml Vial | Vial   |  |  |  |  |
| 14 | Midazolam Inj. 1mg/ml,<br>10ml Vial                   | Vial   |  |  |  |  |
| 15 | Pheniramine malate Inj.<br>22.75mg/ml                 | Amp    |  |  |  |  |
| 16 | Pentazocaine lactate Inj.<br>30 mg/ml 1ml Amp         | Amp    |  |  |  |  |
| 17 | Streptomycin Inj.<br>0.75gm Vial                      | Vial   |  |  |  |  |
| 18 | Succinyl choline Inj. 50<br>mg/ml , 10 ml vial        | Vial   |  |  |  |  |
| 19 | Tetanus Toxide Inj.1ml<br>amp                         | Amp    |  |  |  |  |
| 20 | Tetanus Toxide Inj.5ml<br>Vial                        | Vial   |  |  |  |  |
| 21 | Vancomycin Inj. 500 mg<br>Vial                        | Vial   |  |  |  |  |
| 22 | Vancomycin Inj. 1 gm<br>Vial                          | Vial   |  |  |  |  |
| 23 | Ciprofloxacin Tab. 500<br>mg                          | Strip  |  |  |  |  |
| 24 | Fluconazole Tab. 150Mg                                | Strip  |  |  |  |  |
| 25 | Thyroxine Tab. 25 mcg,<br>120 tab Bottle              | Bottle |  |  |  |  |

|    |                                                                          |                 |  |  |  |  |
|----|--------------------------------------------------------------------------|-----------------|--|--|--|--|
| 26 | Thyroxine Tab. 100 mcg,<br>120 tab Bottle                                | Bottle          |  |  |  |  |
| 27 | Adapalene 0.1% W/W<br>Skin Cream, 15 gm Tube                             | Tube            |  |  |  |  |
| 28 | Heparin with Benyl<br>Nicotinate Cream 20gm<br>Cream                     | Tube            |  |  |  |  |
| 29 | Miconazole Nitrate 2%<br>w/w Skin Cream 15gm<br>Tube                     | Tube            |  |  |  |  |
| 30 | Permethrin Lotion 5%<br>W/V 60ml Bottle                                  | 60 ml<br>Bottle |  |  |  |  |
| 31 | Tacrolimus 0.1% w/w<br>Skin Cream 10 gm Tube                             | Tube            |  |  |  |  |
| 32 | Soda Lime Granules 5kg<br>Jar (Used for Dragger<br>Machine)              | Jar             |  |  |  |  |
| 33 | Carboxy Methyl<br>Cellulose 0.5% w/v Eye<br>drops, 10ml bottle           | Bottle          |  |  |  |  |
| 34 | Moxifloxacin 0.5% w/v<br>Eye drops, 5 ml bottle                          | Bottle          |  |  |  |  |
| 35 | Moxifloxacin 0.5% with<br>Dexamethasone 1% Eye<br>drops, 5ml bottle      | Bottle          |  |  |  |  |
| 36 | Moxifloxacin 0.5% with<br>prednisolone 1% Eye<br>drops, 5ml bottle       | Bottle          |  |  |  |  |
| 37 | Nepafenac 0.1% w/v Eye<br>drops, 5ml bottle                              | Bottle          |  |  |  |  |
| 38 | Proparacain 0.5% w/v<br>Eye drops, 5ml bottle                            | Bottle          |  |  |  |  |
| 39 | Tropicamide 0.8% w/v and<br>Phenylephrin 5% w/v Eye<br>drops, 5ml bottle | Bottle          |  |  |  |  |
| 40 | Trypan Blue opthalmic<br>solution 0.6 mg ,1ml Vial                       | Bottle          |  |  |  |  |



|    |                                        |        |  |  |  |  |
|----|----------------------------------------|--------|--|--|--|--|
| 41 | Timolol 0.5% w/v Eye drops, 5ml bottle | Bottle |  |  |  |  |
| 42 | Atropine 1% w/w Eye ointment 5gm tube  | Tube   |  |  |  |  |
| 43 | Choromphenicol 1% Eye Oint Applicaps   | Bottle |  |  |  |  |

**Instructions and terms & condition regarding Quotation:-**

1. Interested vendors should submit the quotation as per given format only. Vendors need to specify Manufacturer in the quotation and the same supply needs to be supplied. Incomplete information about manufacturer may lead to disqualification of Bidder.
2. Bidders must quote prices for all items listed in the quotation; otherwise, the bidder will be disqualified from the bidding.
3. Quotation must be submitted in a sealed envelope only.
4. The quotation & envelope should be addressed to - **The Dean, Sir J J Group of Hospitals Mumbai and marked Kind attention to- Medical store.**
5. Vendors must write quotation reference no & Last date of submission the quotation on the envelope.
6. Any amendments regarding the quotation will be published on website [www.ggmcejh.in](http://www.ggmcejh.in). Vendors will not be communicated separately regarding the amendments.
7. However if the vendor fails to check any of these amendments on the website then it will be presumed that the vendor has quoted his/ her rates by taking the note of these amendments.
8. Rate should be quoted **inclusive of all taxes, GST, etc.**
9. Rate must be written in both figures & words. Rates should be valid for six months from the date of opening the quotation.
10. Rate must be quoted for official Pharmacopeial standards i.e IP/BP/ USP only & same goods must be supplied.
11. Delivery period is 24 hrs to 03 ( Three) days from the receipt of order, as per vitality of Medicine.
12. **Analysis test reports (Inhouse and NABL )** need to be submitted at the time of goods supply. **along with valid WHO -GMP certificate of Manufacturer.,** failing which goods will not be accepted.
13. The Dean, Sir J. J. Hospital, Mumbai, shall have the right to get samples of any medicines or materials supplied by the supplier tested for quality by a third-party laboratory. The cost incurred towards laboratory testing shall be borne by the supplier and may be recovered or deducted from the supplier's invoice.
14. For goods supplied under MJPJAY/ Other scheme, bills will be passed only after utilization certificate received from the user department.
15. Successful vendors if fails to supply the goods within stipulated delivery period he is liable for the further necessary penal action, which may deem fit.
16. Frequent defaulter bidder will be debarred from participating in the tenders / quotations called by this office. **Bidders need to submit an affidavit that all previous supplies during the past 12 months were made as per orders issued by**

- the Dean, Sir, J. J. Hospital, Mumbai as per Annexure B. Bidder's performance will be verified and evaluated based on the affidavit submitted for previous orders supply status.
17. Payment within 120 Days from the Date of Submission of bills after Delivery of goods.
18. Sample needs to be submitted on or before the last date of quotation submission date as per Annexure C. Non submission within the timeline will lead to disqualification.
19. The Dean, Sir J. J. Hospital, Mumbai, shall have the right to get samples of any medicines or materials supplied by the supplier tested for quality by a third-party laboratory. The cost incurred towards laboratory testing shall be borne by the supplier and may be recovered or deducted from the supplier's invoice.
20. The Quotation Form and other required documents must be submitted in two separate sealed envelopes clearly marked as *Envelope A – Technical Bid Documents* and *Envelope B – Price Bid Quotation Form*. Bidders are requested to place both Envelope A and Envelope B into one single outer envelope, clearly marked with the remark: "Sealed Envelopes A & B Enclosed."
21. The price bid Envelope B will be opened only for those bidders who qualify in the Technical Bid scrutiny. If Quotation form with offer rates is placed in Envelope A, it will lead to disqualification of the bidder.
22. Documents required in Envelope A
- Bidders FDA license [Drug manufacturing license/ Medical Device License OR wholesale stocking & Selling Licence].
  - Authorization Letter from manufacturer
  - Valid No conviction certificate from FDA.
  - GST registration copy.
  - Bidder details as per Annexure A.
  - Adata (अदाता) Registration Number at JJ Hospital Mumbai ( If Adata Registration number is not taken then documents mentioned in Sr.No. 9 of Annexure A to be submitted by bidder on his letter head along with the attested copies.).
  - WHO GMP/ISO 13485 certificate of manufacturer.
  - Affidavit stating that all previous supplies during past 12 months were made as per orders issued by the Dean, Sir, J. J. Hospital, Mumbai, as per Annexure B. Original Copy needs to be submitted on or before the close date of quotation.
  - Sample Submission Report as per Annexure C.
23. Document required in Envelope B
- Offer rates / quotation form on the company letterhead, duly signed and stamped by the authorized signatory.
24. NOTE : Last date of submission of quotation : 09 / 02 / 2026 before 5.00 pm



Dean

Sir J J Group of Hospitals, Mumbai