**U.T. ADMINISTRATION OF DADRA & NAGAR HAVELI AND DAMAN & DIU**
**OFFICE OF THE MEDICAL SUPERINTENDENT**
**NAMO HOSPITAL, DAMAN**
**Nani Daman, Daman – 396 210**
**Email: damannamohospital@gmail.com**

**No. NAMO/DMN/INJ- 3MONTH/2026-27/2175** **Date: 27/10/2026**

**Subject: Inviting sealed quotations for obtaining competitive market rates for Injection.**

Sealed quotations are hereby invited by the Office of the Medical Superintendent, NAMO Hospital, Daman from reputed and authorized firms/suppliers for obtaining competitive market rates for the purpose of estimation and assessment of prevailing market prices for the following Injection .

| Sr. No | Name of Item / Description | Required Quantity | Unit Rate (Inclusive of GST) |
|---|---|---|---|
| 1 | Inj.Adrenaline 1 mg/ml | 1 amp. | |
| 2 | Inj.Atropine sulphate 0.6 mg /ml 1 ml | 1 amp. | |
| 3 | Inj. Adrenaline Acid Tartrate I.P 1.8 mg Equivalent to Adrenaline Base 1 mg + Sodium Metabisulphate I.P 0.1 %w/v | 1 amp. | |
| 4 | Inj.Betamethasone Sodium Phosphate 4 mg | 1 Vial | |
| 5 | Inj.Bupivacaine 0.5% 20ml vial | 1 vial | |
| 6 | Inj.Carboprost 250 mg/ml | 1 amp. | |
| 7 | Inj.Ciprofloxacin 200mg (I.V.) 100ml | 1 bottle | |
| 8 | Inj.Dexmedetomidine HCL 100mcg | 1 amp. | |
| 9 | Inj.Dextrose 25% 100ml | 1 bottle | |
| 10 | Inj.Dextrose 5% 500 ml | 1 bottle | |
| 11 | Inj.Dextrose 10% 500 ml | 1 bottle | |

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|---|---|---|---|
| 12 | Inj.Diltiazam 25 mg 5 ml | 1 vial | |
| 13 | Inj.Drotaverine 40mg/2ml | 1 amp. | |
| 14 | Inj.Ethamsylate 125 mg | 1 amp. | |
| 15 | Inj.Ephedrine | 1 amp. | |
| 16 | Inj.Glycopyrolate 0.2 mg/1ml | 1 amp. | |
| 17 | Inj.Heparin Sodium 25000 IU/5ml | 1 vial | |
| 18 | Inj.Heparin Sodium 5000 IU/5ml | 1 vial | |
| 19 | Inj.Haloperidol 5 mg /ml 1 ml | 1 amp. | |
| 20 | Inj.Haemocoagulase 1 ml | 1 amp. | |
| 21 | Inj.Hydroxypropyl Methylcellulose Opthalmic PFS 2 %W/V (HPMC) ( for Cataract use ) | 1 No. | |
| 22 | Inj.Hydroxyethyl Starch 6% 500ml | 1 bottle | |
| 23 | Inj.Iron Sucrose I.V. 2.5ml | 1 amp. | |
| 24 | Inj.ketamin 10 ml | 1 vial | |
| 25 | Inj.Lignocaine 2% plain 30ml | 1 vial | |
| 26 | Inj.Linezolid 300ml | 1 bottle | |
| 27 | Inj.L-Orinithine-L-Aspartate 5mg/10ml | 1 amp. | |
| 28 | Inj.Levetiracetam 100mg /ml 5 ml | 1 Vial | |
| 29 | Inj.Lorazepam 2ml | 1 amp. | |

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|---|---|---|---|
| 30 | Inj.L-Lysine Hydrochloride USP 19.2mg, L-Threonine USP 7mg, l-Methionine USP 6.8mg, L-Tryptophan USP 3mg, L-Leucine USP 10mg, L-Isoleucine USP 6.6mg, L-Phenylalanine USP 9.6mg, L-Valine USP 6.4mg, L-Arginine Hydrochloride USP 10.9mg, L-Histidine Hydrochlorise H2O 4.7mg, Glycine USP 6mg, Sorbitol IP 50mg, Water for Intection IP 200ml | 1 bottle | |
| 31 | Inj.Labetalol 20 mg/ 4 ml | 1 amp | |
| 32 | Inj.Magnesium Sulphate 2ml 50mg | 1 amp. | |
| 33 | Inj.Methyl Prednisolone 1gm | 1 vial | |
| 34 | Inj.Metoprolol 1mg/ml 5ml | 1 amp. | |
| 35 | Inj.Neostigmine 1ml | 1 amp. | |
| 36 | Inj.Oxytocine 5 IU/ ml 1 ml | 1 amp. | |
| 37 | Inj.Ondasteron 2ml | 1 amp. | |
| 38 | Inj.Octride 50 mcg | 1 amp. | |
| 39 | Inj.Phenobarbitone 1ml | 1 amp. | |
| 40 | Inj.Promethazine 2ml | 1 amp. | |
| 41 | Inj.Prochlorperazine 12.5 mg | 1 amp. | |
| 42 | Inj.Pralidoxime 500 mg | 1 amp. | |
| 43 | Inj.Paracetamol 150 mg /ml 30 ml | 1 vial | |
| 44 | Inj.Paracetamol 100ml | 1 bottle | |
| 45 | Inj.Pilocarpine Nitrate 1ml | 1 No. | |
| 46 | Inj.Sildenafile 10 mg /12.5 ml | 1 Vial | |
| 47 | Inj.Succinylechloine Chloride 10ml | 1 vial | |
| 48 | Inj.Tranexamic Acid 500mg 5ml | 1 amp. | |

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|---|---|---|---|
| 49 | Inj.Tetanus Toxoid 0.5 Ml | 1 vial | |
| 50 | Inj.Thiamine Hcl 100mg + Riboflavin sod.Phosphate 5mg + Pyridoxine Hcl 100mcg + Cyanocobalamin 1000mcg + Nicotamide100mg + Dpanthenol 50mg + Benzyl Alcohol 3 ml | 1 amp. | |
| 51 | Inj.Trypan Blue 0.8mg | 1 amp. | |
| 52 | Inj.Vitamin-K 10 mg/ml | 1 amp. | |
| 53 | Inj.Vancomycin 500mg | 1 vial | |
| 54 | Inj.Vasopressine 20 units x 1ml | 1 amp. | |
| 55 | Inj.Valethamate 8 mg/ 1ml | 1 amp. | |
| 56 | Inj.Vitamin-A 1000 IU, IP, Cholecalciferol I.P 100 IU, Alfa Tocopheryl Acetate IP 0.5mg, Thainime Hydrochloride 5mg, Pyridoxine Hydrochloride 5mg, Riboflavine, Phosphate Sodium 1.4mg, Ascorbic Acid IP 50mg, Nicotinamide IP 10mg, D-Panthemol 2.5mg, Benzyl Alcohal 1% v/v 10ml | 1 amp. | |

**Terms and Conditions**

1. The rates quoted shall be inclusive of all applicable taxes, duties, transportation, delivery and all other incidental charges, as applicable.
2. The firm shall quote its rates strictly in the above prescribed format and shall clearly indicate the unit rate and total amount inclusive of GST.
3. The quotation should be submitted in a sealed envelope, duly signed and stamped by the authorized representative of the firm, and addressed to:
   The Medical Superintendent,
   NAMO Hospital, Daman,
   Nani Daman, Daman – 396 210.
4. The sealed quotation should reach the above office on or before 29.10.2026 up to 11:00 A.M.
5. The quotation shall be submitted for the purpose of ascertaining prevailing competitive market rates and preparation of the estimated cost for the proposed procurement.

6. This Notice Inviting Quotation is issued only for obtaining competitive market rates and shall not be construed as an offer, purchase order, or commitment to procure the items from any firm.

7. The Office of the Medical Superintendent, NAMO Hospital, Daman reserves the right to accept or reject any or all quotations without assigning any reason thereof.

8. Any quotation received after the stipulated date and time may not be considered.

9. The quoted rates shall remain valid for a reasonable period from the date of submission, as indicated by the firm in its quotation.

10. The firm shall mention its name, address, contact number, email ID, GSTIN and details of the authorized signatory on the quotation.

11. The supplier shall quote rates against each individual item separately. Incomplete or conditional quotations may not be considered.

**Medical Superintendent**
**NAMO Hospital, Daman**