

OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
OFFICER, SUNDARGARH

ଜିଲ୍ଲା ମୁଖ୍ୟ ଚିକିତ୍ସା ଓ ଜନସ୍ୱାସ୍ଥ୍ୟ ଅଧିକାରୀ କା କାର୍ଯ୍ୟାଳୟ, ସୁନ୍ଦରଗଡ଼

Email: npcdcssundargarh@gmail.com ଫୋନ: ୦୬୭୨୨-୨୭୩୬୫୦

Letter No:-.....200..... / NCD Cell-2019-20

Dated:..03./...10../2019

To

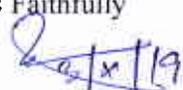
Dy. Director (Advertisement) - cum- Secretary to Govt.
I & PR Deptt., Odisha
Bhubaneswar

Sub:- Advertisement of Tender call notice (ଟେଣ୍ଡର ବିଜ୍ଞାପନ).

Sir,

Please publish the following advertisement using minimum space as per Govt. norms in one Odia & English newspaper for one day & single edition only. The bill will be submitted to the Chief District Medical & Public Health Officer, Sundargarh for payment.

Yours Faithfully


Chief District Medical & Public Health Officer
Sundargarh

Notice No- 200/NCDcell

Date- 03/10/2019

TENDER CALL NOTICE (ଟେଣ୍ଡର ବିଜ୍ଞାପନ)

Sealed Tenders are invited from Registered Manufacturers/Authorized Distributors /Suppliers through Speed Post / Register Post / Courier for supply of **DRUGS & CONSUMABLES FOR DMHP CLINIC AND NCD CLINIC, SUNDARGARH** (ଡି.ଏମ.ଏଚ.ପି ଓ ଏନ.ସି.ଡି ଚିକିତ୍ସା କେନ୍ଦ୍ର, ସୁନ୍ଦରଗଡ଼ ପାଇଁ ଔଷଧ ଏବଂ ଯାବତୀୟ ସାମଗ୍ରୀ ର କ୍ରୟ ନିମନ୍ତେ) for the year 2019-20. The willing reputed supplier/wholesalers /manufacturers are requested to submit sealed tenders to the office of the undersigned on or before 24.10.2019 till 5 P.M. Tender documents can be downloaded/ obtained from the district website www.sundargarh.nic.in /NCD cell, CDM & PHO office, Sundargarh. This office will not entertain any tender after the due date/time fixed for at any circumstances. The undersigned reserves the right to reject any or whole tender without assigning any reason thereof.

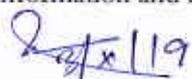
-Sd-

Chief District Medical & Public Health Officer, Sundargarh

Memo No- 202/NCDcell

Date- 03/10/2019

Copy to the DAM/DPM, DPMU, NHM, Sundargarh for information and necessary action.


Chief District Medical & Public Health Officer
Sundargarh

Memo No- 203/NCDcell

Date- 03/10/2019

Copy forwarded to the District Information Officer, NIC, Sundargarh for information and you are requested to upload the details information & publish the same in the aforesaid website.


Chief District Medical & Public Health Officer
Sundargarh

Memo No- 203/NCDcell

Date- 03/10/2019

Copy to the Notice Board, Of the CDMO/ DIPRO/ Collectorate Sundargarh for information


Chief District Medical & Public Health Officer
Sundargarh

OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
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ଓଡ଼ିଶା ମୁଖ୍ୟ ଚିକିତ୍ସା ଓ ଜନସ୍ୱାସ୍ଥ୍ୟ ଅଧିକାରୀ କା କାର୍ଯ୍ୟାଳୟ, ସୁନ୍ଦରଗଡ଼

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TENDER CALL NOTICE

For supply of DRUGS & CONSUMABLES FOR DMHP CLINIC AND NCD CLINIC, SUNDARGARH (ଡି.ଏମ.ଏଚ.ପି ଓ ଏନ.ସି.ଡି ଚିକିତ୍ସା କେନ୍ଦ୍ର, ସୁନ୍ଦରଗଡ଼ ପାଇଁ ଔଷଧ ଏବଂ ଯାବତୀୟ ସାମଗ୍ରୀ ର କ୍ରୟ ନିମନ୍ତେ) for the year 2019-20

TENDER CALL NOTICE NO:- 200/NEOcell Date: 08/10/2019



OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
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NOTICE INVITING PROPOSAL

Notice No-. 200/NCDcell

Dated: 03/10/2019

Sealed Tenders are invited from Registered Manufacturers/Authorized Distributors /Suppliers for supply of **DRUGS & CONSUMABLES FOR DMHP CLINIC AND NCD CLINIC, SUNDARGARH** (ଡି.ଏମ.ଏଚ.ପି ଓ ଏନ.ସି.ଡି ଚିକିତ୍ସା କେନ୍ଦ୍ର, ସୁନ୍ଦରଗଡ଼ ପାଇଁ ଔଷଧ ଏବଂ ଯାବତୀୟ ସାମଗ୍ରୀ ର କ୍ରୟ ନିମନ୍ତେ) for the year 2019-20.

1	Period of Availability of RFP Document	From 03 rd October 2019 to 24 th October 2019 (Downloadable from website: www.sundargarh.nic.in)
2	Pre-bid Meeting	Date : 14 th October 2019, Time : 11:30 AM Address: CDM & PHO Office, Sundargarh.
3	Last date for submission of Proposal	Date: 24 th October 2019, Time: 05.00 PM Address: O/O – CDM & PHO, Sundargarh - 770001 <i>NB : Proposals should be submitted through Speed post / Registered post / Courier.</i>
4	Date, time and place of opening of Proposal and presentation	a) Technical Proposal (Part A) Opening: 25 th October 2019 at 11.30 AM in the Office chamber of the CDM & PHO, Sundargarh. b) Financial Proposal (Part B) Opening: 25 th October 2019 at 11.30 AM in the Office chamber of the CDM & PHO, Sundargarh. (Bidders / authorized representative may remain present at the time of opening of proposal)

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**TERMS & CONDITION FOR SUPPLY OF DRUGS & CONSUMABLES FOR DMHP
AND NCD CLINIC, SUNDARGARH**

- Purchase of Tender Document: Tender document obtained by downloading from the website www.sunderagarh.nic.in/ NCD cell, CDM & PHO office, Sundargarh.
- The bidders downloading the tender document & required to submit the tender fee through Demand Draft along with their tender bid, failing which the tender bid shall be not be considered for qualifying in technical bid
- The bidder(s) are to submit their tenders in separate sealed covered envelops for technical bid and price bid by superscribing Cover "A" (Technical Bid) & Cover "B" (Price Bid) and both the sealed covers should be put into a third outer Cover, which should be superscribed as "Tender for the supply DRUGS & CONSUMABLES FOR DMHP CLINIC AND NCD CLINIC, SUNDARGARH".
- The tenderer or their duly authorized representatives are requested to be present during the opening of the tenders.

TENDER FEE

Tender document fee of Rs.2000/- (Non refundable) in shape of Demand Draft in favour of ZSS Non NRHM , Sundargarh from any Nationalised / Scheduled Bank payable at Sundargarh.

EMD MONEY:-

Earnest Money Deposit of Rs. i.e Rs.20000/- (Refundable) in shape of Demand Draft in favour of ZSS Non NRHM, Sundargarh from any Nationalised / Scheduled Bank payable at Sundargarh.

- The EMD of successful bidder is liable to be forfeited if the tendered, revokes any terms of the tender within the validity period.
- EMDs given by unsuccessful bidders will be refunded after placing of purchase order to the successful bidder.
- EMD of the successful bidder will be forfeited in case the successful bidder fails to accept/execute the order.
- EMD of successful bidder will be returned after receiving of successful completion of terms & condition of supply certificate of all items.
- EMD shall not carry any interest.

ACCEPTANCE OF TENDER AND SUPPLY CONDITIONS:

- The C.D.M & P.H.O, Sundargarh, Odisha reserves the right to reject the tenders or to accept the tenders for the supply of the item tendered without assigning any reason thereof.

**OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
OFFICER, SUNDARGARH**

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- The C.D.M & P.H.O, Sundargarh, Odisha will be at liberty to terminate the contract either wholly or in part without assigning any reasons thereof. The tenderers will not be entitled to any compensation whatsoever for such termination.
- The supply should be completed within 45 days from the date of issue of purchase order unless otherwise specified. If no supply is received even after 45 days or 60 days with liquidated damage from the date of issue of the purchase orders from the C.D.M & P.H.O, Sundargarh, Odisha, such orders will stand cancelled automatically without further notice. Penalties shall also thereafter be applied to the tenderer.
- The approved firm shall also suffer forfeiture of the EMD and Security Deposit. If the approved supplier fails to execute the supply within the stipulated time, the C.D.M & P.H.O, Sundargarh, Odisha is empowered to purchase the same items from L₂ or L₃ tenderer if they match the L₁ rate.
- The C.D.M & P.H.O, Sundargarh, Odisha or his authorised representative (s) has the right to inspect the factory of those company who have quoted for the tender, before accepting the rate quoted by them or before releasing any purchase order (s) or at any point of time during the validity period of tender and has also the right to reject the tender or terminate / cancel the orders issued or not to reorder based on the facts brought out during such inspections.

DELIVERY:-

The items will be delivered to the office of the consignee i.e. SUB- SOTRE, CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, SUNDARGARH

LIQUIDATED DAMAGE:-

- The C.D.M & P.H.O, Sundargarh may allow extension for a maximum period of 2 (two) weeks (14 days), after the stipulated date of supply (i.e. 45 days) with a penalty of 0.5% which will be deducted from the purchase order value as “Liquidated Damage”, for each week (7 days) upto a maximum 2% on the value of the goods.
- If the supplier fails to complete the supply within the extended period, i.e. 60 days after being allowed by the C.D.M & PHO, no further purchase order will be placed to the firm for the said item and the concerned firm will be blacklisted for three (3) years from the date of issue of letter for the said item.

**OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
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TERMS OF PAYMENT:

- No advance payments towards cost of drugs & consumable will be made to the tenderer.
- **100% payment will be made after successful supply of the items to the supplying firm.**
- Payment will only be made after handing over the Agreement, undertaking, of the tender items to the consignee and a letter to this effect should be submitted to the payment authority from the consignee.
- **No claims shall be made against the C.D.M & P.H.O, Sundargarh in respect of interest on earnest money deposit or security deposit or any delayed payment or any other deposit.**
- **Payments in shape of Draft / Pay Order will preferably be dispatched to the supplier by Registered post with A.D or e-payment / on-line transfer or may be handed over to the authorized person of the supplier.**

ELIGIBILITY CRITERIA

Copy of

1. Tender fee of Rs.2000.00 (non-refundable) should be submitted issued from a Nationalised Bank in favour of ZSS Non NRHM, Sundargarh
2. EMD money of Rs.20000.00 (Refundable) in shape of demand draft should be submitted issued from a Nationalised Bank in favour of ZSS Non NRHM, Sundargarh which will be refund after the validity of Tender.
3. Copy of valid GSTN registration certificate & Return filling (Aug-2019) should be submitted with the Tender Document.
4. Copy of income tax return (last two financial years) i.e 2017-18& 2018-19 .
5. Copy of PAN should be submitted with the Tender Document.
6. Copy of Valid Drug Licence should be submitted with the Tender Document.
7. Copy of Valid WHO/GMP/ISO/GLP certificates of the products should be submitted with the Tender Document.
8. Authorized distributors on behalf of the manufacturer are eligible to participate in the tender provided:

OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
OFFICER, SUNDARGARH

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Letter No:-..... / NCD Cell-2019-20

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- (i) They submit manufacturer's authorization letter on behalf of the manufacturer. The authorized distributor may raise bill, if specially authorized by the manufacturer.

Other Term & Conditions

1. The firm will have to submit an **Affidavit** (*On original Stamp Paper of relevant value*) in the technical bid with the following clauses :-
 - a) Our organization has not been blacklisted by any Government Organization.
 - b) Our organization does not have any legal suit / criminal case pending against it for violation of GST/VAT/ST/CST Act or any other law.
 - c) The CDM&PHO-Cum-DMD, NHM, Sundargarh will have no liability regarding transportation, loading and unloading of material and all the material ordered for shall be delivered at the designated place in good condition. The defective or damaged material if any will be replaced by our Organization.
 - d) Our organization agrees to abide by all terms & conditions of tender.

Our organization will quote prices exclusive of all taxes

2. The supply should be completed within 45 days along with test report and the shelf life should be minimum 5/6th of shelf life of drug.
3. The supply should be made in good packaging condition & labelling with "ODISHA GOVT. SUPPLY NOT FOR SALE" in the primary, secondary and tertiary packing.
4. Liquidated damage will be charged @ 0.5% per week beyond 45 days & up to 60 days subject to maximum 2% total from the date of issue of the purchase order. Once the delivery period exceed beyond the extended period with LD, purchase may be considered termination of the contract/Purchase Order.
5. The undersigned/Committee is not bound to accept the lowest tender rate considering the technical and quality aspect.
6. The quoted items will be selected as per the sample produced by the supplier with comparison to L1, L2 and L3 quoted price.
7. The goods should be supplied to the FOR destination and no charge for freight should be claimed.
8. The rates should be mentioned as rate exclusive GSTN and all other taxes cost in the prescribed Performa separately.
9. The tender will not be entertained after due date & time fixed for.
10. If any information or documents furnished by the tender are found to be incorrect or misleading at any stage the tender will be rejected.

**OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
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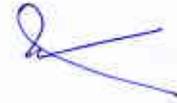
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11. All the documents should be attested by the authorized signatory of the organization in **each page with seal**.
12. The approved rate will be valid for one year from the date of finalisation of the tender.
13. All legal disputes are subject to the jurisdiction of Sundargarh Courts.

-Sd-

Chief District Medical & Public
Health Officer, Sundargarh



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FORWARDING LETTER/SELF DECLARATION FORM

(To be submitted by Bidder's in non-judicial stamp paper)

[To be submitted in Technical Bid]

To,

CDMO-cum-District Mission Director
Sundargarh
At/Po- Sundargarh-77001
Dist- Sundargarh.

Dear Madam/Sir,

Sub: Your Tender Ref. No. _____, Dated _____.

This is with reference to your above mentioned tender for **Supply of Drugs & Consumables for DMHP & NCD Clinic**. Having examined the tender document, we hereby submit our proposal along with the necessary documents. I / We hereby declare that our Organization (registered distributor/ wholesaler/manufacturer) is having unblemished past record and was not under a declaration of ineligibility for corrupt and fraudulent practices issued by Government of India or any State Government/PSU in the country of India.

Further, we agree to abide by all the terms and conditions as mentioned in the tender document. We have also noted that, the authority/purchase committee reserves the right to consider/ reject any or all bids without assigning any reason thereof.

Date: _____ / _____ /2019

Authorized Signatory:

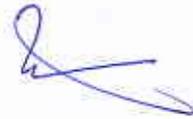
Name:

Designation:

Place:

Phone:

Email:



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Annexure I
TENDER FORMAT

Part -1
(Technical Bid) – Cover A

(To be furnished in Cover A-Technical Bid)

1	Name of the Organization	
2	Address of the Organization	
3	Name of authorized signatory (in capital letters)	
4	Specimen signature of the authorized signatory	
5	Telephone number & e-mail Id of authorized signatory / organization	
6	GSTIN Registration No.	(Photo copy to be attached)
7	GST clearance certificate (Aug-2019)	(Photo copy to be attached)
8	PAN No.	(Photo copy to be attached)
9	Draft number and date of the Tender Document Cost of Rs. 2,000/- (Non-Refundable)	(Draft to be submitted)
10	Draft No. & date of EMD of Rs 20000/-	(Draft to be submitted)
11	Copy of income tax return (last two financial years) i.e 2017-18& 2018-19	(Photo copy to be attached)
12	Declaration of the organization does not have any legal suit / criminal case pending against it for violation of GST/VAT/ST/CST act or any other law and agrees to abide by all terms & conditions of the tender.	(Affidavit in original stamp paper certified by Notary with clauses as mentioned in clause no. 4 of the terms & conditions)
13	Submission of Bank Account Details:- Bank a/c No., Name of the bank, Branch & IFSC code.	(photo copy of Bank account to be attached)
14	Authorization certificate from manufacturer	(photo copy to be attached)
15	If applied by Dealer/Manufacturer/Distributors certificate should be attached.	(Photo copy to be attached)
16	Whether all documents are submitted and signed by the authorized signatory of the organization in each page with seal (Yes/ No)	

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DECLARATION

I / we hereby certify that the terms and conditions, specification etc. given with the tender notice have been read carefully and acceptable to me/us and that the information furnished above is correct to the best of my /our knowledge. I / we understand that in case of any deviation in the above statement / furnishing of forged documents etc. at any stage, our Firm/Agency will be blacklisted and will not have any dealing with your organization in future.

(Signature and seal of the authorized signatory)

Place :

Date :



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OFFICER, SUNDARGARH

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Annexure 2
TENDER FORMAT
Part -2
(Financial Bid) – Cover B
(To be furnished in Cover B-Financial Bid)

Sl. No	Name of the Drugs/ Consumables	Brand Name	Name of the Manufacturer	Unit Price	Percentage of Tax (%)	Rate exclusive all Taxes
DRUGS FOR DMHP						
1.	Tab.Alprazolam 0.5 mg					
2.	Tab.Amitriptyline 25 mg + Chloridesepoxide 10 mg					
3.	Tab.Baclofen 10 mg					
4.	Tab.Bromocryptine 5 mg					
5.	Tab Carbamazepine 300 mg					
6.	Tab.Carbamazepine 400 mg					
7.	Tab.Chlorodiazepoxide 25 mg					
8.	Tab.Chlorpromazine + Trihexyphenidyl 100 mg					
9.	Tab.Clonazepam 0.5 mg					
10.	Tab.Clonazepam 1 mg					
11.	Tab Clonazepam 2 mg					
12.	Tab.Diazepam 2.5 mg					
13.	Tab.Diazepam 5 mg					
14.	Tab.Diazepam 10 mg					
15.	Tab.Disulfiram 250 mg					
16.	Tab Donezil 5 mg					
17.	Tab Donezil 10 mg					
18.	Tab.Dothirpin 25 mg					
19.	Tab.Escitalopram 5 mg					
20.	Tab Escitalopram 10 mg					
21.	Tab.Etizolam 0.25 mg					
22.	Tab Fluoxetine 20 mg					
23.	Tab.Haloperidole 0.25 mg					
25.	TabHaloperidole 1.5 mg					
26.	Tab Haloperidole 5 mg					
27.	TabHaloperidole 10 mg					
28.	Tab.Imipramine 25 mg					
29.	Tab. Lithium Carbonate 300 mg					
30.	Tab.Lorazepam 2 mg					

**OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH
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Email: npcdcssundargarh@gmail.com ଫୋନ: ୦୬୭୨୨-୨୭୩୨୫୦

Letter No:-..... / NCD Cell-2019-20

Dated:...../...../2019

31.	Tab.Mamentine 10 mg				
32.	Tab Nitrazepam 10 mg				
33.	Tab Olanzapine 5 mg				
34.	Tab Olanzapine 10 mg				
35.	Tab Oxcarbazapine 300 mg				
36.	Tab.Paroxetine 20 mg				
37.	Tab Phenobarbitone Sodium 30 mg				
38.	Tab.Phenytoin Sodium 100 mg				
39.	Tab Procyclindine 2.5 mg				
40.	Tab Procyclindine 5 mg				
41.	Tab Promethazine 25 mg				
42.	Tab Propranolol HCI-40 mg				
43.	Tab Propranolol HCI-10 mg				
44.	Tab Resperidone 2 mg				
45.	Tab Resperidone 3 mg				
46.	tab Sertraline 100 mg				
47.	Tab Sertraline 50 mg				
48.	Tab Sodium Valproate 200 mg				
49.	Tab.Sodium Valproate 500 mg				
50.	Tab.Sodium Valproate CR 500 mg				
51.	Tab Tardalafill 10 mg				
52.	Tab Thioridazine 50 mg				
53.	Tab Thyroxine 25 mg				
54.	Tab. Trifluoperazine 5 mg Trihexyphenidyl 2 mg				
55.	Tab. Trihexyphenidyl 2 mg				
56.	Tab Zolpidem 10 mg				
57.	Drop Haloperidol 2 mg				
58.	Syrup.Promethazine 5 mg / ml				
59.	Syrup.Sodium Valproate 200 mg / ml				
60.	Inj.Haloperidol-LA 50 mg / ml				
61.	Inj.Haloperidol 5 mg / ml				
62.	Tab Quetiapine 25 mg				
63.	Tab Quetiapine 100 mg				
64.	Tab Clozapin 100 mg				

DRUGS FOR NCD

1	Tab Aspirin 75 mg				
2	Tab.Aspirin 150 mg				
3	Tab.Aspirin 325 mg				
4	Tab .Atenolol 50 mg				
5	Tab .Atenolol 25mg				
6	Tab.Metoprolol 50 mg				



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7	Tab.Metoprolol 25 mg				
8	Tab. Amlodipine 2.5 mg				
9	Tab. Amlodipine 5mg				
10	Tab Hydrochlorthiazide 12.5				
11	Tab Hydrochlorthiazide 25 mg				
12	Tab.Enalapril 2.5 mg				
13	Tab.Enalapril 5mg				
14	Tab. Methyldopa 250 mg				
15	Tab Atorvastatin 10mg				
16	Tab Atorvastatin 20mg				
17	Tab Atorvastatin 40mg				
18	Tab Clopidogrel 75 mg				
19	Tab.Frusemide 40mg				
20	Inj.Streptokinase 7.5 lac vial				
21	Inj.Streptokinase 15 lac vial				
22	Inj.Heparin sod.1000 IU				
23	Tab.Isosorbide Dinitrate (Sorbitrate)				
24	Glyceryl Trinitrate Sub lingual tabs				
25	Glyceryl Trinitrate Inj,				
26	Tab. Diazepam 5 mg				
27	Inj Diazepam 5 mg				
28	Inj.Adrenaline 1:1000				
29	Inj.Atropine sulphate				
30	Inj.Digoxin				
31	Tab.Digoxin				
32	Tab.Verapamil(Isoptin)				
33	Inj.Mephentine				
34	Tab Potassium IP (Penicillin V)				
35	Inj.Insulin Regular 40IU				
36	Inj.Insulin biphasic 30/70				
37	Inj.Insulin biphasic 50/50				
38	Tab Folic Acid 5 mg				
39	Tab Prednisolone 5 mg				
40	Tab Prednisolone 10 mg				
41	Tab Glimeperide 1mg				
42	Tab Glimeperide 2mg				
43	Tab Methformin 500SR				
44	Tab Methformin 1000SR				
45	Tab Pioglitasonone 7.5 mg				
46	Tab Pioglitasonone 15 mg				
47	Tab Gliclazide 80 mg				
48	Tab Gliclazide 160 mg				
49	Tab Telmisetran 40 mg				
50	Tab Telmisetran 80 mg				
51	Tab Omlesetron 10 mg				

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52	Tab Omlesetron 20 mg					
53	Tab Omlesetron 40 mg					
54	Tab Losarton 50 mg					
55	Inj.Insulin Glargine 100 IU/ML Pen Type					
56	Cartridge for Insulin Glargine 100 IU					
57	Tab.Metformin 1000 Mg					
58	Tab.Metformin 500 mg+Glimepiride 1 Mg					
59	Tab.Metformin 500 mg+Glimepiride 2 Mg					
60	Tab.Vildagliptin 50 mg					
61	Tab.Voglibose 0.3 mg					
62	Tab.Voglibose 0.2 mg					
63	Tab.Vildagliptine 50 mg + Metformin 500 mg					
64	Tab.Vildagliptine 50mg + Metformin 500 mg					
65	Tab.Teneglptine 20 mg					
66	Tab.Teneglptine 20 mg+ Metformin 500 mg					
67	Tab.Glipizide 5 mg/Tab					
68	Tab.Rozuvastatin 10 mg					

(Signature and seal of the authorized signatory)

Place :

Date :

