



INDIAN INSTITUTE OF MANAGEMENT SHILLONG

East Khasi Hills, Umsawli Shillong- 793018

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ENQUIRY NO: IIMS/S&P/NIQ/26-27/025

Dated: 16 Oct 2026

Subject: Notice Inviting Quotation for Rate contract for Various Medicines & consumables required in IIM Shillong.

Quotations are invited on behalf of Director IIM Shillong from registered/ reputed dealer/supplier fortentative requirement of goods/services as per Terms & Conditions mentioned therein **in two packetsystem in two separate sealed covers duly marked “Techno-Commercial Bid” and “Price/ Finance Bid”, placed in another sealed cover/envelope.** The Quotation as per format given beloware to be submitted in **Sealed Envelope**, addressed to the Chief Administrative Officer, IIM Shillongwith the words **“Quotation for Rate contract for Various Medicines & consumables required in IIM Shillong”, with due date boldly superscripted on the top of the envelope.** The offers are to be sent by Speed Post/ Registered Post/ By Hand/Drop in Tender/Quotation Box **on or before 26.10.2026 by 03:00pm.**

Format for Quotation Submission: Kindly provide the rate and other details as per attached Annexures I and II.

Delivery/Supply Time: Required Items should be delivered within 30 Days ofproviding work order.

Rate validity: Quoted Rates should be valid for 1 year from the NIQ submission date

Terms and Conditions

1. This is Notice Inviting Quotation (NIQ) only hence does not bind the Institute in any commitment to place order to any vendor.
2. Tender should be addressed to the Chief Administrative Officer, IIM Shillong. The offers are to be sent by Speed Post/ Registered Post/ By Hand/Drop in Tender/Quotation Box **on or before 26.10.2026 by 03:00 pm** under sealed cover failing which the quotation shall be rejected. Terms and conditions for supply should invariably be indicated otherwise would be taken on its face value. The rates may be quoted on separate sheets failing which the tender(s) will be rejected.
3. The Institute shall have the right to reject any quotation without assigning any reason thereof. No correspondence will be entertained in this regard. Only one best quality item according to Institute approved specification should be quoted against the item.

4. No counter proposal is acceptable to us and conditional/late tenders are liable to be rejected.

Quotation should invariably be submitted in two bid system containing two parts as detailed below:

Part-I: - techno-commercial bid (Annexure- I) in one sealed cover. Part-II:

Part- II- Price bid/Financial bid (annexure-II) in one sealed cover.

Both the sealed envelopes should then be put in outer cover indicating thereon:

i) Reference No. of the Quotation: _____

ii) Tender regarding: _____

iii) Due date for submission of the tender: _____

iv) Name and Address of the firm: _____

Please note that prices should not be indicated in the techno- commercial bid. the pre-qualification documents as required should invariable be accompanied with the techno-commercial bid.

Note: Offers submitted without following two-packet system procedure as mentioned above would be summarily rejected.

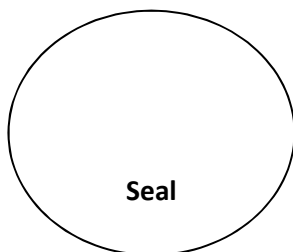
5. Vendors/Suppliers/ Contractor are required to submit copies of valid GST and PAN Registration with all associated spec. sheets and brochures in the Techno-Commercial Bid.
6. The Quotation should be submitted **as per the format given on Official Letter Head** of the vendor indicating GST No. & PAN. The Quotation submitted should be signed, seal of vendor affixed with date. The rate quoted should be Carriage and Insurance Paid (CIP) at Central Store IIM Shillong.
7. **It will be the prerogative of the Institute to place the supply order for the whole lot or in staggered manner depending upon the requirement of the Institute.**
8. The bidder must hold a valid Drug License issued by the respective State Licensing Authority or Central Licensing Approving Authority, wherever applicable.
9. The Institute shall have the right to reject any quotation without assigning any reason thereof. No correspondence will be entertained in this regard. Only one best quality item according to Institute approved specification should be quoted against the item.
10. Medicines supplied should have a validity on at least one year prior to expiry.
11. Quotation will be accepted subject to the verification and inspection by competent authority of IIM Shillong.
12. Quotation will only be entertained when received within the stipulated date and time mentioned in the NIQ.
13. Validity of Quotation, Rate, GST & Delivery Period must be mentioned clearly in the quotation.
14. The NIQ queries (if any) should only be e-mailed on srmgr.stores@iimshillong.ac.in.

Sd/-
Sr. Mgr (Stores)
IIM Shillong

(To be provided on letter head of the firm)

Technical Bid format (Packet 1)**BIDDER's DETAILS**

Name of the Firm/Agency		
Full address with Pin code, Telephone No/Mobile No.		
Authorized Signatory Details		
Name		
Designation		
Telephone/ Mobile no.:		
Email id:		
a. GSTIN: (Copy to be attached) b. PAN: (Copy to be attached) c. Drug License (if any)		
Bank Details (Please attached a copy of cancelled cheque)	Account Number	
	IFSC Code	
	Bank Name	
	Branch Name	
Acceptance of T&C mentioned in the NIQ Accepted/ Not accepted		
Remarks (if any)		

Date:**Place:****Authorized Signatory****Name:****Contact No.:**

Financial quote Format (Packet 2)

Vendor/Company Name

Sr. No.	Medicine Name	Salt Composition	A/U	Required Number	Offered Medicine Name	Offered Medicine Brand	MRP (per unit i.e. strip/bottle /tube etc.)	Offered Rate (per unit)	GST %	Offered Rate (including all taxes)	Remarks (in the case of Tablets kindly mention the quantity of tabs in one strip)
	Kindly provide the rate of the various mentioned medicines in Annexure II.										

1. The medicine supplied should be of latest manufacturing date not earlier than 12 months from the date of supply.
2. Expiry date of the medicine should be minimum of 2 year from the date of supply.
3. It will be the prerogative of the Institute to place the supply order in staggered manner depending upon the requirement. Only institute approved specification should be supplied.
4. The rates shall be valid for 180 days from the date of this order.

Signature and Seal of Bidder

Date:

LIST OF MEDICINES
Part- 1

Sr No	PRODUCT NAME	SALT COMPOSITION	A/U	QTY
1	TAB. VOVERAN -SR	Diclofenac (100mg)	TAB	100
2	TAB. SARIDON	Paracetamol (250 mg) + Propyphenazone (150 mg)+ Caffeine I.P.(50 mg)	TAB	800
3	TAB. ZERODOL-P	Aceclofenac (100mg) + Paracetamol (325mg)	TAB	700
4	TAB.DROTIN DS	Drotaverine (80mg)	TAB	650
5	TAB. DROTIN- M	Drotaverine (80mg) + Mefenamic Acid (250mg)	TAB	650
6	REFRESH TEARS EYE DROPS / FLOGEL LUBRICATING EYE DROPS	Carboxymethylcellulose (0.5% w/v)	BOTTLE	100
7	TAB. DIGENE	Aluminium Hydroxide (300 mg) + Magnesium Aluminum Silicate (50mg)+ Manesium Hydroxide (25mg)+ Simethicone (25mg)	TAB	50
8	TAB. EMESET	Ondansetron (4mg)	TAB	600
9	TAB. ALLEGRA 180 MG	Fexofenadine (180mg)	TAB	900
10	BETADINE OINTMENT	Povidone Iodine (10% w/w) ointment - 20 gms	TUBE	100
11	T- BACT OINTMENT	Mupirocin (2% w/w) ointment	TUBE	30
12	SILVEREX OINTMENT	Silver Nitrate Gel (0.2%) ointment	TUBE	50
13	TAB SHELICAL HD / CALCIMAX K2	Calcium Carbonate (1250mg)+ Elemental Calcium (500mg)+Vitamin D3 (500IU)	TAB	300
14	TAB. A TO Z / FORTBERRY	Multivitamin , Multiminerals , Antioxidants ,& Methycobalamine	TAB	100
15	BETADINE GARGLE - 100ml	Povidone Iodine (2% w/v) - 100 ML	BOTTLE	250
16	VOLINI SPRAY / OMNI GEL SPRAY / MOOV SPRAY (35 GM)	Diclofenac, Capsaicin, Methyl Salicylate and Menthol (Pain Relief Spray)	BOTTLE	200
17	TAB.KETOROLAC DT	Ketorolac Tromethamine Dispersible Tablets (10mg)	TAB	200

18	BETADINE SOLUTION - 100ml	Povidone Iodine (10% w/v) - 100 ML	BOTTLE	10
19	G-DRESS SWIMPROOF- 10 (8.5 x 6.5 cm)	Sterilised Adhesive badages	PACKET	100
20	INJ.TT	Tetanus Toxoid	AMPULE	100
21	INJ.PANTOP	Pantoprazole (40mg)	VIAL	10
22	INJ.EMESET	Ondansetron (4mg)	AMPULE	20
23	IVF DEXTROSE NORMAL SALINE - (500 ML)	Dextrose (5% w/v) + Sodium Chloride (0.9% w/v) - 500 ML	BOTTLE	30
24	TAB.DULCOFLEX / GERBISA	Bisacodyl (5mg)	TAB	30
25	COFSILS / STREPSILS LOZENGES	Amylmetacresol + 2,4-Dichlorobenzyl alcohol	PIECE	2000
26	HANSAPLAST BANDAID / DETTOL BANDAID	Antiseptic Washproof Medicated Bandaid	PIECE	1000
27	DISPOVAN SYRINGE - 10 ml	Dispovan single use syringe	PIECE	50
28	IV DRIP SET	I/V set	PIECE	30
29	TAB. COMBIFLAM	Ibuprofen (400 mg + Paracetamol 325 mg)	TAB	150
30	KARVOL PLUS INHALATION	Camphor , Menthol , Eucalyptol , Chlorothymol , Terpineol Soft gelatin capsules	TAB	300
31	TAB. VERTIN 8 MG	Betahistine (8mg)	TAB	20
32	ORS Sachet 23gm	Oral Rehydrating Salts IP 23gm	SACHETS	1000
33	LEUKOPLAST ADHESIVE TAPE (10 cm X 5 m)	Adhesive Tap - (10 cm x 5 m)	ROLL	3
34	TAB. LIMCEE	Vitamin C - 500 mg	TAB	2500
35	TAB. CETRIZINE / CETICLIDE / CETZINE	Cetirizine 10 mg	TAB	500
36	MANUAL BP APPARATUS	Manual BP Apparatus (Adult 32-44 cm)	PIECE	1
37	UNSTERILE GLOVES	Unsterile Gloves	BOX	4
38	INJ. MVI- 10 ML	Inj.Multivitamin- 10 ml	AMPULE	30
39	TAB. URISPAS - 200 mg	Flavoxate (200 mg)	TAB	200
40	COTTON ROLL - LARGE	Cotton Roll - Large	ROLL	3

41	PAEDIATRIC NEBULISATION MASK (NEBULIZER MASK)	Nebulisation mask for Paediatrics	PIECE	5
42	THROMBOPHOB OINTMENT	Benzyl Nicotinate 2mg+ Heparin 50 IU	PIECE	5
43	ZINC TABLETS	Zinc Tablets	TAB	1500
44	MOXIFLOXACIN EYE DROPS	Moxifloxacin (0.5 % w/v)	PIECE	30
45	TAB ULTRACET	Paracetamol / Acetaminophen 325 mg + Tramadol 37.5 mg	TAB	30
46	TAB. NORFLOX TZ	Norfloxacin 400 mg + Tinidazole 600 mg	TAB	60
47	TAB AVOMINE	Promethazine 25 mg	TAB	250
48	MOXIFLOXACIN / MOXIZEL EYE OINTMENT	Moxifloxacin (0.5 % w/w)	PIECE	10
49	NEOSPORIN POWDER	Bactracin(400IU)+Neomycin(3400IU)+ Polymyxin B	BOTTLE	10
50	IVF RINGER LACTATE - (500 ML)	Sodium Chloride+Sodium Lactate+Potassium Chloride+Calcium Chloride	BOTTLE	10
51	TAB. LOPARAMIDE	Loperamide Hydrochloride Capsule	CAPSULE	100
52	CORN CAP	Salicylic Acid 40% In Adhesive Mass Q.S,100% W/W	PACKET	5
53	TAB. CLONAZEPAM 0.5 MG	Clonazepam Tablet 0.5mg	TAB	20
54	TAB.STAMLO 2.5MG	Amlodipine Tablet 2.5mg	TAB	30
55	STOCK REGISTER	Stock Register- No 60	PIECE	2
56	STOCK REGISTER	Stock Register - No 40	PIECE	2
57	SOFINOX CREAM / NEOSPORIN SKIN OINTMENT / NEBASPOR OINTMENT	Sodium Fusidate 2% w/w / Bacitracin (400 IU + Neomycin (3400IU+ Polymyxin B (5000 IU) Ointment USP-20GM	PIECE	10
58	DIGITAL WEIGHT MACHINE /WEIGHING SCALE	Weight machine max 150kg	PIECE	1
59	CAP EVION 400MG	Vitamin E Capsule 400mg	CAPSULE	100
60	RABIVAX VACCINE / ABHAYRAB VACCINE	Purified lyophilized Rabies antigen derived from Rabies virus (L Pasteur 2061 / Vero Strain propagated in Vero Cells),Inactivated.	VIAL	15
61	HRIG- ANTI RABIES IMMUNOGLOBULIN	Human Rabies Immunoglobulin- (Berirab P / Plasma Rab)	VIAL	3
62	KNEE HAMMER	Reflex Hammer Neurological Diagnostic Percussion	PIECE	1
63	GLUCOMETER STRIPS FOR ACCUCHEK ACTIVE METER- CODE -333	Glucose monitoring strips	STRIPS	500

64	DETTOL	Sanitisation solution- 100 ml	BOTTLE	30
65	T . METRONIDAZOLE 200MG	Metronidazole 200mg	TAB	150
66	CETIL 500MG / CEFUROXIME 500MG	Cefuroxime 500mg	TAB	100
67	TAB ALBENDAZOLE 400MG	Albendazole 400mg	TAB	50
68	CLEARWAX EAR DROPS / WAXEMPTY EAR DROPS / WAXACTIN EAR DROPS	Benzocaine (2.7% w/v) + Chlorbutol (5% w/v) + Paradichlorobenzene (2% w/v) + Turpentine Oil (15% w/v)	BOTTLE	60
69	TAB. ZERODOL-SP / SIGNOFLAM	Aceclofenac (100mg)+ Paracetamol (325 mg) + Serratiopeptidase (15 mg)	TAB	2200
70	NASIVION SPRAY / OTRIVIN NASAL SPRAY	Oxymetazoline Hydrochloride Nasal solution 0.05%	BOTTLE	150
71	TAB. LERGYCROSS DT / CETCIP - L / TECZINE	Levocetirizine (5mg)	TAB	1000
72	TAB.MONTAIR LC / L -MONTUS	Levocetirizine (5mg) + Montelukast (10mg)	TAB	1600
73	TAB. NIFTAS 100 MG / REZFURAN-100MG / NIFTRAN 100MG	Nitrofurantoin (100 mg)	TAB	300
74	TAB SINGLOFLAM TH8 / MIOFREE 8	Thiocolchicoside (8mg) + Acelofenac (100mg)	TAB	200
75	TAB MONDESLOR / DELOTADINE M / DESLOR M	Desloratadine (5 mg) + Montelukast (10 mg)	PIECE	1300

LIST OF MEDICINES
Part- 2

Sr No	PRODUCT NAME	SALT COMPOSITION	A/U	QTY
1	TAB. SINAREST / SOLVIN COLD / FLUCOLD / SIMILATE	Chlorpheniramine Maleate (2mg) + Paracetamol (500mg) + Phenylephrine (10mg) / Chlorpheniramine Maleate (2mg) + Paracetamol (500mg) + Phenylephrine (10mg) + Caffeine (30mg)	TAB	1800
2	TAB.OFLOX-OZ / O2	Ofloxacin (200mg) + Ornidazole (500mg)	TAB	1000
3	TAB.AMOXYCLAV 625 MG / NOVACLAV- 625MG / OMNICLAV - 625MG / CIPMOX CV - 625MG	Amoxycillin (500mg) + Clavulanic Acid (125mg)	TAB	3200
4	TAB. ZERODOL - MR / HIPHENAC- MR	Aceclofenac (100mg) + Tizanidine (2mg) / Aceclofenac (100mg) + Paracetamol (325mg) + Chlorzoxazone (500mg)	TAB	550
5	TAB.PANTOP	Pantoprazole (40mg)	TAB	3500
6	SURFRAZ SN CREAM / CANDIPRAZ OC CREAM	Beclometasone (0.025% w/w) + Neomycin (3500u/1g) + Clotrimazole (1% w/w) Ointment / Ofloxacin (0.75% w/w) + Ornidazole (2% w/w) + Itraconazole (1% w/w) + Clobetasol (0.05% w/w)	TUBE	60
7	TAB. CALPOL / PARACIP 650 MG	Paracetamol (650mg)	TAB	1000
8	IV CANNULA 22G	Venflon I/v Canula (22G) From ROMSONS	PIECE	60
9	I/V CANULA 20G	Venflon I/v Canula (20G) From ROMSONS	PIECE	20
10	TAB. CALPOL - 500 MG / PARACIP 650 MG	Paracetamol - 500 mg	TAB	800
11	TAB. TAXIM O	Cefixime (200mg)	TAB	300

12	CAP CYRA FLORA / FLORIZAC BV / BIFILAC / COLONISE FORTE	Prebiotic & Probiotics Capsules	TAB	800
13	TAB. NAXDOM - 500 mg	Naproxen (500 mg) + Domeperidone (10 mg)	TAB	500
14	URIKIND KM SACHETS / CITRO - SODA UTI	Sodium Magnesium citrate , D-Mannose with cranberry extract sachets	SACHETS	500
15	TAB M- SOLVIN	Ambroxol 30 mg + Guaifenesin 100 mg + Terbutaline 2.5 mg	TAB	500
16	TAB CHYMORAL FORTE / CHYMORAL -AP	<u>Trypsin Chymotrypsin (100000AU) / Aceclofenac (100mg) + Paracetamol (325mg) + Trypsin Chymotrypsin (50000AU)</u>	TAB	500
17	TAB.EVION LC	Levocarnitine (150mg)+Vitamin E (200mg)	TAB	150
18	ALEX LOZENGES	Dextromethorphan Hydrobromide Loenges	TAB	200
19	MAXMOIST EYE DROP	Sodium Hyaluronate(0.1% w/v) eye drops	PIECE	20
20	TAB. TAXIM OF/ TAB CEFIXIME OF	Cefixime & Ofloxacin (200mg)	TAB	250
21	STANDARD GLUCONAVII GDH GLUCOMETER MACHINE	SD Gluconavii GDH Glucometer machine	PIECE	1
22	STANDARD GLUCONAVII GDH GLUCOMETER STRIP	SD Gluconavii GDH Glucometer 100 Test strips	STRIPS	500
23	TAB BENZ PEARLS	Benzonatate (100mg)	TAB	200
24	REXIDIN-M-FORTE GEL / FLAGYL GEL	Lidocaine (2% w/w) + Chlorhexidine Gluconate (1% w/w) + Metronidazole (1% w/w) oral gel	TUBE	20
25	TAB KOFFSIN-DMR	Dextromethorphan Hydrobromide (15 mg) + Cetirizine Dihydrochloride (5 mg) + Phenylephrine HCL(10 mg) + Ambroxol (HCL 30 mg) +(Guaiphenesin 100 mg)	TAB	1000