TECHNICAL SPECIFICATIONS

Bidding for the Procurement of various Drugs and Medicines

with Identification No. R2TMC-BAC1-2023-05

	ANTI-ANEMICS				
1	Epoetin Beta (recombinant erythropoetin) 5000IU/0.3ml	500	prefilled syringe	IV/SC	
	ANTI-ASTHMA			**ANTI-ASTHMA**	
2	Indacaterol (as maleate) + Glycopyrronium (as	250	inhaler	inhalation powder in hard capsule	
	ANTI-CONVULSANT			**ANTI-CONVULSANT**	
3	Phenytoin 125mg/5ml	40	bottle	120ml suspension	
	ANTIHYPERLIPIDAEMIC			**ANTIHYPERLIPIDAEMIC**	
4	Cefixime 100mg/5ml	200	bottle	Granules for Suspension, 60ml	
5	Cefixime 20mg/ml	100	bottle	Granules for Drops, 10ml	
6	Cefuroxime 250mg/5ml	300	bottle	Granules for Suspension, 50ml	
7	Chlorhexidine (as gluconate) 0.12%	100	bottle	Oral Solution, 120ml	
8	Clindamycin (as palmitate HCl) 75mg/5ml	100	bottle	Granules for Suspension), 60ml	
	ANTIPROTOZOAL			**ANTIPROTOZOAL**	
9	Diloxanide (as furoate) 125mg/5ml	50	bottle	60ml Suspension	
	CARDIOVASCULAR DRUGS			**CARDIOVASCULAR DRUGS**	
10	Nimodipine 30mg	500	tablet	tablet	
	CYTOTOXIC CHEMOTHERAPY			**CYTOTOXIC CHEMOTHERAPY**	
11	Carboplatin 450mg	100	vial	vial	
12	Docetaxel 10mg/ml, solution for infusion	100	vial	8ml (IV)	
13	Docetaxel 20mg/ml	100	vial	1ml (IV Infusion)	
14	Leucovorin Calcium 50mg	200	vial	IM/IV (Calcium Folinate)	
15	Paclitaxel 6mg/ml, 25ml	100	vial	IV, IV Infusion	
16	Rituximab 10mg/ml, 10ml	100	vial	IV	
17	Rituximab 10mg/ml, 50ml	100	vial	IV	
18	Tamoxifen (as citrate) 20mg	2000	tablet	tab	
19	Trastuzumab 600mg/5ml	50	vial	120mg/ml, solution for injection (SC), 5ml	
	ELECTROLYTE OR IV ADDITIVE SOLN.			**ELECTROLYTE OR IV ADDITIVE SOLN.**	
20	Amino Acid 5%	50	bottle	500ml	
21	Lipids 20%	50	bottle	250ml IV Infusion	
	LAXATIVES			**LAXATIVES**	
22	Bisacodyl 5mg	300	pieces	pedia suppository	
	LOCAL ANAESTHESIA			**LOCAL ANAESTHESIA**	
23	Lidocaine 10%	10	bottle	50ml Spray	
	OPIOID			**OPIOID**	
24	Remifentanil 2mg	30	vial	lyophilized powder (IV Infusion)	
25	Oxycodone (as hydrochloride) 5mg	200	capsule	capsule	
26	Oxycodone (as hydrochloride) 10mg	200	tablet	Extended Release	
	RADIO CONTRAST MEDIA			**RADIO CONTRAST MEDIA**	
27	Barium Sulfate powder	30	pouch/ba	USP grade suspended in water 340g	

	SERA & IMMUNOGLOBULINS			**SERA & IMMUNOGLOBULINS**	
28	Rabies Immunoglobulin (human) 150 IU/ml	50	vial	2ml (IM)	
29	Hepatitis B Immunoglobulin (human)	50	vial	0.5ml IM	
	SURFACTANT			**SURFACTANT**	
30	Beractant 25mg/ml Suspension, 4ml	3	vial	vial	
31	Beractant 25mg/ml Suspension, 8ml	3	vial	vial	
	THROMBOLYTIC AGENT			**THROMBOLYTIC AGENT**	
32	Human Recombinant Tissue Type Plasminogen-Activator(Alteplase	5	vial	50mg powder for IV infusion	
	TROPHIC HORMONES			**TROPHIC HORMONES**	
33	Octreotide (as acetate)100mcg/ml	30	ampule	1ml (IV Infusion)	

[Bidders must state in the *Statement of Compliance column* either "Comply" or "Not Comply" against each of the individual parameters of each Specification stating the corresponding performance parameter of the equipment offered. Statements of "Comply" or "Not Comply" must be supported by evidence in a Bidders Bid and cross-referenced to that evidence. Evidence shall be in the form of manufacturer's un-amended sales literature, unconditional statements of specification and compliance issued by the manufacturer, samples, independent test data etc., as appropriate. A statement that is not supported by evidence or is subsequently found to be contradicted by the evidence presented will render the Bid under evaluation liable for rejection. A statement either in the Bidder's statement of compliance or the supporting evidence that is found to be false either during Bid evaluation, post-qualification or the execution of the Contract may be regarded as fraudulent and render the Bidder or supplier liable for prosecution.]

Note:
Presentation/submission of sample/s (properly labelled with the name of company, item # and description) to the BAC Office is required for evaluation purposes. Bidders are required to secure a certification that sample/s was/were presented/submitted for evaluation to be issued by the Technical Working Group.

No. of samples - 1 piece

Name of Company: _____

Name of Representative: _____

Signature of Representative: _____

Date: _____