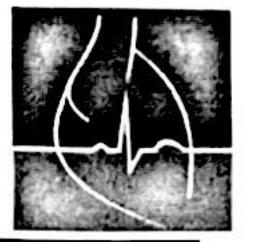


## KARACHI INSTITUTE OF HEART DISEASES

### KARACHI METROPOLITAN CORPORATION





Subject: R.F.Q. Injectable Medicine at KIHD on Quotation Basis.

M/s			n No. ED/KIH Published: _ ሮ	D/ 607 /24 07 / 11 /24	
Reques	SRB No	Date of 0 wing material/so	Opening: 19 ervices for K	/ 11 /24 arachi Institute o	
submis 000878 downlo	uotation document can be collected sion of bank deposit receipt in \$7900473303) at HBL, payment of Reposit from KIHD website https://www.sion.	favor of KIHD s. 300 (Non-Re	General C fundable). S	o. (A/c # HABE ame can also be	
Sealed openin	envelope should reach in the office of g.	of the undersign	ned by at 12	:30pm on date of	
	ocuring agency reserve the right to AC 010 amended time to time.	CEPT or REJECT	any or all of	fers as per SPPRA	
Sr. #	Description or Specification	Quantity	Rate	Amount	
01.	Inj. Nalbuphine 10mg	350 Nos.			
02.	Inj. Adrenaline 1 mg/ml	3500 Nos.			
03.	Inj. Atropine 1 mg	3500 Nos.			
04.	Inj. Dopamine 200 mg	60 Nos.			
05. 06.	Inj. Dobutrex Inj. D/W 25%	50 Nos. 70 Nos.			
07.	Inj. b) vv 25% Inj. Isoket 10mg	140 Nos.			
08.	Inj. Isoket 20116	130 Nos.			
09.	Inj. Kinz	320 Nos.			
10.	Inj. Lasix 20mg	3700 Nos.			
11.	Inj. Levopved 8mg	60 Nos.			
12.	Inj. Lopressor 5mg	70 Nos.			
13.	Inj. Metaclone l0mg	320 Nos.			
14.	Inj. Omeorazole 40mg	150 Nos.			
15.	Inj. Sodabicarb	30 Nos.			
16.	Inj. Tramadol	140 Nos. 450 Nos.			
17.	Inj. Distal Water	tal Amount			
		10	tal Amount		
I, agre	e the condition mentioned below:	Receipt No		Rs. 300/-	
Signat	ure of Contractor with Stamp	Date of Bank Deposited:			
Note: 01. NTN	N and CNIC must be attached otherwise	the guotation	will be co <del>ns</del> id	ered cancelled.	
02 The	total amount of the procurement will	he accented offe	aring the low	est nriff	
				est price.	
	er-writing, cutting, erasing in the docum	ient snould be a	ivoided.	/ M	
	ditional bids will not be considered. Station on any other form will not be co	onsidered.		43	
		ν.	1, 4, 1,		
			Executive D	irector	
		Karach	~	<b>Heart Diseases</b>	

#### Copy to:

- Assistant Director Finance, KIHD
- Main Store, KIHD
- Notice Board

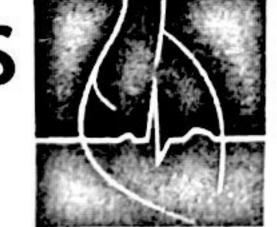
Scanned with

CS CamScanner



# KARACHI INSTITUTE OF HEART DISEASES

## KARACHI METROPOLITAN CORPORATION



ST-15, Block-16, Near UBL Sports Complex, Federal B. Area, Karachi-75950

Subject: R.F.Q. Oral Medicines & Disposables at KIHD on Quotation Basis.

M/s		Quotation No. ED/KIHD/ 606 /24 Date of Published: 07 / 1 /24				
NITAL/S	CDR No	Transport out to destruction	The second secon			
STOCKHOOK THE SINES OF	SRB No.		Date of Opening: 11 / 11 /24			
20 - 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	t for quotation procurement of following	- 100 m		i Institute of Heart		
Disease	s, KMC. Income Tax will be deducted acco	rding to governme	nt rules.			
Each qu	otation document can be collected from t	he Account Depart	ment, KIHD or	submission of bank		
deposit	receipt in favor of KIHD General Co. (A/c	# HABB 000878790	00473303) at	HBL, payment of Rs.		
	on-Refundable). Same can also be down					
	be paid at the time of submission of quota		ressite inteps	.,, www.kiiia.caa.pk		
	envelope should reach in the office of the		12:30pm on c	late of opening.		
The pro	curing agency reserve the right to ACCEP	T or REJECT any or	all offers as p	er SPPRA rules 2010		
- D	ed time to time.					
Sr. #	Description or Specification	Quantity	Rate	Amount		
01.	Tab Disprin 300mg	1100 Nos.				
02.	Tab. Acetopril 25mg	1600 Nos.				
03.	Tab. Angisid	800 Nos.				
04.	Tab. Clopidogrel 75mg	1800 Nos.				
05.	Tab. Rousovastin 20mg	1300 Nos.				
06.	0.9 N/Saline 500ml	520 Nos.				
07.	0.9/Saline 1000 ml	520 Nos.	-			
08.	Cotton Bandage 6"	400 Nos.				
09. 10.	Cotton Roll Drip Set	110 Nos. 1050 Nos.				
11.	D/S 10 cc	900 Nos.				
12.	D/Syringe 5cc	2300 Nos.				
13.	ETT Tube 7.5	110 Nos.				
14.	Foleys Catheter 16"	150 Nos.				
15.	I/V Canula 22g	1000 Nos.				
16.	I/V Stopper	1000 Nos.				
17.	Paper Tape	150 Nos.				
18.	Plaster 4" Zinc	100 Nos.				
19.	Urine Bag	420 Nos.				
20.	Xylocine Jell	150 Nos.				
		Tot	Total Amount			
I, agree the condition mentioned below:		Receipt No		Rs. 300/-		
Signature of Contractor with Stamp		Date of Bank	Deposited:			
Note:						
01. NTN	and CNIC must be attached otherwise the	e quotation will be	considered ca	ancelled.		
02 The	total amount of the procurement will be a	accepted offering t	he lowest pric	e/		
	er-writing, cutting, erasing in the document	,		7		
		i siloulu be avolue	• \ / /	1/2		
04. Conditional bids will not be considered.						
05. Quo	tation on any other form will not be consi	dered.	MI	, ,		
			Executive D			
		Karach	i institute of	<b>Heart Diseases</b>		

### Copy to:

- Assistant Director Finance, KIHD
- Main Store, KIHD
- Notice Board