

RAJENDRA INSTITUTE OF MEDICAL SCIENCES, RANCHI

LIST OF MEDICINE

Tender No. 6662 Dated 29/09/2015 (2015-16 & 2016-17)

Sl. No.	Name of Generic Medicine (I.V. Fluids - (in plastic bottles only))	APPROX REQUIRED QTY
1	I.V. Aminoacid 5%/10%.	500 bot
2	I.V. Ciprofloxacin 100ml.	25000 bot
3	I.V. D.N.S. 500ml.	120000 bot
4	I.V. Dextran - 40.	As & when required
5	I.V. Dextran - 70.	As & when required
6	I.V. Degraded Gelatin Polymer	As & when required
7	I.V. 5% Dextrose 500ml.	60000 bot
8	I.V. 10% Dextrose 500ml.	30000 bot
9	I.V. 25% Dextrose 25ml. amp.	As & when required
10	I.V. 25% Dextrose 100ml.	25000 bot
11	I.V. 50% Dextrose.	As & when required
12	I.V. Gatifloxacin 200 ml	As & when required
13	I.V. Gelo fusine. 500 ml	As & when required
14	I.V. Glycine. 3 Ltr.	As & when required
15	I.V. Human Albumin. 20%	As & when required
16	I.V. Hydroxy Ethyle starch 3%	8000 bot
17	I.V. Hydroxy Ethyle starch 6%	As & when required
18	I.V. Hypertonic Saline.	As & when required
19	I.V. Intravenous 20% Fat Emulsion 250ml/500ml	As & when required
20	Multiple Electrolytes and Dextrose Injection Type-1P	As & when required
21	Multiple Electrolytes and Dextrose Injection H 500ml.	As & when required
22	Multiple Electrolytes and Dextrose Injection M 500ml.	As & when required
23	Multiple Electrolytes and Dextrose Injection P 500ml.	15000 bot
24	I.V. Isotonic Balanced Colloid Containing Calcium	As & when required
25	I.V. Isotonic Balanced Crystalloid Containing Calcium	As & when required
26	I.V. Levofloxacin 100ml.	As & when required
27	I.V. Linezolid 300ml/ 100ml	As & when required
28	I.V. 20% Mannitol 300 ml. / 350 ml / 100 ml	25000 bot
29	I.V. Metronidazole 100ml.	150000 bot
30	I.V. Moxifloxacin 100ml.	As & when required
31	I.V. N/2 Solution. 500 ml.	20000 bot
32	I.V. N/3 Solution. 500 ml.	As & when required
33	I.V. N/4 Solution. 500 ml	As & when required
34	I.V. Normal Saline 500ml. /100 ml	120000 bot
35	I.V. Ofloxacin 100ml.	As & when required
36	I.V. Paracetamol 1000mg/100ml	As & when required
37	I.V. Peritoneal Fluid.	As & when required

38	I.V. Rabeprazole.	As & when required
39	I.V. Ringer lactate 500ml.	125000 bot
40	I.V. 3% Saline.	As & when required
41	I.V. Ringer lactate 500 ml. In Glass Bottle	500 bot
42	I.V. TPN Chamber Bag 144Qml (Total Parenteral Nutrition)	As & when required
43	I.V. Eesomeprazole 40mg	As & when required
44	I.V. Sevoflurane 250ml	As & when required
45	Water for Injection	As & when required
	INJECTION	
46	Inj. a-b Arteether 150 mg.	5000 amp
47	Inj. Acyclovir 500 mg / 400mg	As & when required
48	Inj. Diclofenace aqous	As & when required
49	Inj. Paracetamol Suppository - 80 mg/170 mg/250 ml	As & when required
50	Inj. Eesomeprozle 40 mg vial	As & when required
51	Inj. Levo Bupivacian 0.25% - 4 ml/10 ml/20 ml	As & when required
52	Inj. Loxicard 2%	As & when required
53	Inj. Vasopressin 40 unit / ml	As & when required
54	Inj. Isolin	As & when required
55	Inj. Protamin	As & when required
56	Inj. Nipress	As & when required
57	Ini. Adenosin.	As & when required
58	Ini. Adrenaline.	5000 amp
59	Inj Adriamycin 50mg.	As & when required
60	Ini. Alteplase	As & when required
61	Ini. Amikacin 100mg.	10000 vial
62	Inj. Amikacin 500mg.	35000 vial
63	Inj. Aminophyllin 125mg/ml	500 vial
64	Inj. Amiodarone-50mg/ml	As & when required
65	Ini. Amoxicillin 500mg.	As when required
66	Ini. Amoxicillin, + Cloxacillin (250 mg.each)	As & when required
67	Ini. Amoxicillin + Clavulanic Acid (1.2gm)	As & when required
68	Ini. Ampicillin + Cloxacillin Neonet.	As & when required
69	Ini. Ampicillin (500mg.)	As & when required
70	Ini. Ampicillin + Cloxacillin (125mg.each)	As & when required
71	Inj. Ampicillin + Cloxacillin (250mg.each)	50000 vial
72	Inj. Ampicillin + Cloxacillin (500mg.each)	25000 vial
73	Inj. Anti Thymocyte Globulin 100 meg.	As & when required
74	Inj. Amrinone 100mg/20ml	As & when required
75	Ini Adrenochrome Monosemi Carbazone	5000 amp
76	Inj. Anti Rabbies Vaccine	2000 vial
77	Ini. Anti Snake Venom Serum.	10000 vial
78	Ini. Anti-D Immunoglobulin 150 / 300mcg	As & when required

79	Ini. Artemether 40mg.	As & when required
80	Ini. Artemether 80mg.	As & when required
81	Inj. Artisunate 60 mg.	15000 vial
82	Inj. Amphotericin B 10 ml.	As & when required
83	Inj. Atracurium Besalate.	500 amp
84	Inj. Atropin Sulphate.	20000 amp
85	Inj. Benzathine Penicillin 12 lac.	As & when required
86	Inj. Betamethasone	As & when required
87	Ini. Bupivacaine 0.25%	As & when required
88	Ini. Bupivacaine 0.5%	500 amp/vial
89	Ini. Bupivacaine 0.5% with Dextrose	10000 amp/vial
90	Ini. Buprinorphine 0.3 mg/ml.	As & when required
91	Ini. Butorphanol. 1 mg/ml.,	As & when required
92	Inj. Butorphanol. 2 mg/ml	2500 amp
93	Ini. Calcium Gluconate.	5000 amp
94	ini. Camylofin di HCL.	As & when required
95	Inj. Carbamazepine 100 mg.	As & when required
96	Inj. Cefoperazone 1 gm.	10000 vial
97	Inj. Cefotaxime 125mg.	5000 vial
98	Inj. Cefotaxime 250mg.	5000 vial
99	Inj. Cefotaxime 500mg.	10000 vial
100	Inj. Cefotaxime 1gm.	100000 vial
101	Inj. Cefotaxime + Sulbactum (1 gm + 500 mg Each)	As & when required
102	Inj. Cefepime 1gm./500mg/250mg	5000 vial
103	Inj. Cefepime +Tazobactum 1.125gm	As & when required
104	Inj. Ceftazidime 1gm.	35000 vial
105	Inj. Ceftriaxone (1gm.)	150000 vial
106	Inj. Ceftriaxone + Sulbactum (1 gm + 500 mg Each)	30000 vial
107	Inj. Ceftriaxone + Tazobactum (1 gm + 500 mg Each)	As & when required
108	Inj. Ceftriaxone 125mg.	5000 vial
109	Inj. Cefuroxime 250mg./ 500mg	As & when required
110	Inj. Cefoperazone + Tazobactum 1.125gm.	As & when required
111	Inj. Ceftriaxone 500mg.	10000 vial
112	Inj. Chloramphenical 1 gm.	As & when required
113	Inj. Cephazolin 250mg/500mg	As & when required
114	Inj. Clonidine	As & when required
115	Inj. Corderan	As & when required
116	Inj. Crystalline Penicillin (10 lac IU)	5000 vial
117	Inj. Carboprost Tromethamine	5000 vial
118	Inj. Chloroquine 40mg/ml	10000 amp
119	Inj. Chlorpromazine	As & when required
120	Inj. Drotaverin	As & when required
121	Inj. Dexmedetomide	As & when required
122	Inj. Droperidol	As & when required

123	Inj. Diltiazem	As & when required
124	Inj. Digoxin 0.5mg/2ml	As & when required
125	Inj. Dicyclomine 10mg/ml	5000 vial
126	Inj. Dexamethasone 8mg./2ml-	50000 vial
127	Inj. Diclofenac Suppository 12.5mg/25mg/50mg/100mg	As & when required
128	Inj. Diazepam.	5000 amp
129	Inj. Diclofenac Sodium 75mg/3ml, 75mg/ml (I.V)	150000 amp
130	Inj. Dobutamm 250mg/5ml	500 amp
131	Inj. Dopafhin Hcl 200mg/5ml	25000 amp
132	Inj. Diatrizole Meglumine & Diatrizoete Sodium 60 %	500 amp
133	Inj. Diatrizole Meglumine & Diatrizoete Sodium 76 %	1000 amp
134	Inj. Equine Anti Rabbits Immunoglobulin	200 vial
135	Inj. Enalapril 2.5mg/5mg/ 10mg	As & when required
136	Inj. Ephedrine.	5000
137	Inj. Etomidate	1200
138	Inj. Epinephrine	As & when required
139	Inj. Electrolytes	As & when required
140	Inj. Esmolol.	As & when required
141	Inj. Etophyllin + Theophyllin.	15000 amp
142	Inj. Fentanyl	As & when required
143	Inj. Fosphenytom	As & when required
144	Inj. Fluconazole	As & when required
145	Inj. Folk Acid	As & when required
146	Inj. Frusermide.	25000 amp
147	Inj. Gadobenate Dimeglumine 10 ml.	As & when required
148	Inj. Gentamycin 40mg.	500 vial
149	Inj. Gentamycin 80mg.	100000 vial
150	Inj. Glycopyrrolate 0.2 mg.	25000 vial
151	Inj. Glycopyrrolate 0.5 mg. + Neostigmine Methyl Sulph 2.5 mg / 5ml	1000
152	Inj. Heparin 25000 IU	2000 vial
153	Inj. Haloperidol 5 ml.	As & when required
154	Inj. Halothane 100 ml	100 bot
155	Inj. Hepatitis B 20 Meg.	As & when required
156	Inj. Hepatitis B Immunoglobulin 200 I.V/ ml	As & when required
157	Inj. Human I V I G "5 mg	As & when required
158	Inj. Hyaluronidase 1500 iu	As & when required
159	Inj. HydrocortisonelOO Mg	25000 vial
160	Inj. 2% Hydroxypropoxy Premethyle Cellulose (Pre-Filled Syringe)	As & when required
161	Inj. Human Anti Rabbits Immunoglobulin.	500 vial
162	Inj. Haemocoagulase.	5000 amp
163	Inj. Imipenam 250mg	As & when required
164	Inj. Insulin Human Actrapid.	100 vial

165	Inj. Insulin Hurxian Mixtard.	100 vial
166	Inj. Regular Insulin 40 IU/ml	500 vial
167	Inj. Intracameral Adrenaline.	As & when required
168	Inj. Intraconazole	As & when required
169	Inj. Intracameral Pilocarpine	As & when required
170	Inj. I.M. Gamaglobulin 10% & 16.5%	As & when required
171	Inj. Introglycerine	As & when required .
172	Inj. Isoflurance 100 ml./250ml	500 ph
173	Inj Iomeron 400, 370, 300,100, 50 Ml.	As & when required
174	Inj. Isoprenalline.	As & when required
175	Inj. Iomeprol 400mg^	As & when required
176	Inj Iohexol 300mg/ml	As & when required
177	Inj Iodixanol 100ml	As & when required
178	Inj. Iron Dextrone	As & when required
179	Inj. Iron Sucrose 100mg	As & when required
180	Inj. Isopline.	As &when required
181	Inj. Kanamycin 0.75 gm.	As & when required
182	Inj. Ketorlac Sodium.	As & when required
183	Inj. Ketamine Hcl 50 Mg / 10ml.	3000 vial
184	Inj. Lorazepam	As & when required
185	Inj. Lignocaine 1%. With Epinephne	As & when required
186	Inj. Lignocaine 2%. With Epinephrine	As & when required
187	Inj. Lignocaine 0.5%.	500 vial
188	Inj. Lignocaine 1%.	300 vial
189	Inj. Lignocaine 2%. 30ml/50ml	10000 vial
190	Inj. Lignocaine 5%. Heavy	As & when required
191	Inj. Lignocaine 2 % Preservative Free 30 ml.	As & when required
192	Inj. Levobupivacame 0.5% - 4ml/20ml	
193	Inj. Lignocaine viscus.	As & when required
194	Inj. 2% Lignocaine with Adrenalin.	5000 vial
195	Inj. Magnesium.Sulphate.	25000 amp
196	Inj. Medroxyprogesteron Acetate.	As & when required
197	Inj. Mephentermine 10 ml.	As & when required
198	Inj. Meropenam 1 gm./500mg/250mg	As & when required
199	Inj. Mesoprostal	As & when required
200	Inj. Methyl Prednisolane 1gm/ 125mg/40mg/500mg	5000 vial
201	Inj. Methyl Ergometrine.	15000 vial
202	Inj. Methylcobal.	As & when required
203	Inj. Metoclopramide.	50000 amp
204	Inj. Metoprolol 5 ml.	As & when required
205	Inj. Midazolam 10 mg /10 ml.	2500 vial
206	Inj. Morphine.	As &when required
207	Inj. Multivitamin.	As & when required *
208	Inj. Nifedipine	As & when required

209	Inj. Neostegmin.	2000 amp
210	Inj. Nikardin.	As & when required
211	Inj. Netilmycin 10mg/25mg/50mg	As & when required
212	Inj. Nikethamide.	1000 amp
213	Inj. Nitroprusside.	As & when required
214	Inj. Nitroglycerin.	500 amp
215	Inj. Nor-adrenaline.	As & when required
216	Inj. Nondrolone Phenyl Propionate 50 mg.	As & when required
217	Inj. Nalbuphine	As & when required
218	Inj. Octreotide 50 meg	As & when required
219	Inj. Ondansetron.	3000 amp
220	Inj. Oxytocin	25000 amp
221	Inj. Pantoprazole 40 mg.	50000 vial
222	Inj. Phenylephrine	As & when required
223	Inj. Paracetamol.	5000 amp
224	Inj. Pentazocine.	10000 amp
225	Inj. Pethidine 100mg.	As & when required
226	Inj. Promethazine	1000 amp
227	Inj. Pheniramine Maleate.	20000 amp
228	Inj. Procaine Penicillin 4 Lacs	As & when required
229	Inj. Phenobarbitone.*	2500 amp
230	Inj. Phenytoin Sodium.	60000 amp
231	Inj. Pilocarpin 2% & 4%	As & when required
232	Inj. Piperacillin + Tazobactam 1.125 gm	As & when required
233	Inj. Piperacillin + Tazobactam 4.5 gm.	15000 vial
234	Inj. Piracetam 200mg/15ml.	As & when required
235	Inj. Piroxicam 20mg/ml	As & when required
236	Inj. Potassium Chloride.	As & when required
237	Inj. Pralidoxime Iodide 500 mg.	As & when required
238	Inj. Pralidoxime.Iodide250 mg.	As & when required
239	Inj. Protamme	As & when required
240	Inj. Propofol 1% 50 ml	200 vial
241	Inj. Propofol 1% 20 ml	500 vial
242	Ini. Propronalol.	As & when required
243	Ini. Prochlorperazine	As & when required
244	Ini. Quinarsol.	As & when required
245	Ini. Quinine Di-Hydrochloride 300mg/ml	20000 amp
246	Ini. Ranitidine.	100000 amp
247	Ini. Rabepazole.	As & when required
248	Ini. Reptilase.	As & when required
249	Ini. Reviparin Sodium.	As & when required
250	Ini. Ropivacaine 2%/7.5%	As & when required
251	Ini • Rocuronium Bromide 5 ml Vial	500 amp
252	Ini. Streptokinase 1500000 IU.	As & when required
253	Ini. Sorbitrate	As & when required

254	Ini. Streptomycine 0.75 mg.	2000 vial
255	Ini. Succinyl choline.	500 vial
256	Ini. Sulbactam 500mg. + Cefoperozone 500mg.	5000 vial
257	Ini. Sodium Nitropruside 50 mg	As & when required
258	Ini. Stibogluconate	As & when required
259	Ini. Salbutamol.	As & when required
260	Ini. Salbutamol + Ipratropium Solution	As & when required
261	In]'. Sodium Valproate 200 mg.	As & when required
262	Ini. Sodium bicarbonate.	5000 amp
263	Ini. Somatostatin 250 meg.	As & when required
264	Ini. Terbutaline.	As & when required
265	Ini Tetnus Antitoxin	1000 amp
266	Ini. Tetnus Immunoglobulin 250 mg.	500 vial
267	Ini. Tetnus Toxoide vaccine.	15000 amp
268	Ini. Ticoplanin 400 mg	As & when required
269	Ini. Tobramycin 20 mg.	As & when required
270	Ini. Thiopentone Sodium 0.5 gm.	2000 vial
271	In]'. Triamcinlone	As & when required
272	Ini. Tramadol Hcl 50mg/ml	5000 amp
273	Ini • Tranexamic Acid	20000 amp
274	Ini. Urokinase 500000 I.U.	As & when required
275	Ini. Vancomycin 500 mg.	5000 vial
276	Ini. Vecuronium Bromide 4 mg.	500 amp
277	Ini. Verapamil 40 mg.	As & when required
278	Ini. Veraeamic	As & when required
279	Ini. Vitamin-A 50000 IU/ml	As & when required
280	Ini. Vasopressin	As & when required
281	Ini. Vitamin-K	As & when required
TABLETS & CAPSULES		
282	Cap. Amoxycillin 250mg.	20000 tab
283	Cap. Amoxycillin 500mg.	50000 tab
284	Tab. / Cap. Amoxycillin + Clavulanate 625mg	As & when required
285	Tab. Acetylsalicylic Acid	As & when required
286	Tab. Adrenochrome Semi Carbozone	As & when required
287	Tab. Albendazole 400mg.	5000 tab
288	Tab. Alprazolam 0.25mg/0.5mg.	500 tab
289	Tab. Ascorbic Acid (Vitamin C)	As & when required
290	Tab. Amytriptilline.	As & when required
291	Tab. Amitryptyline 10 mg/25 mg	As & when required
292	Tab. Ambraxol 15 mg	As & when required
293	Tab. Amlodipine 5 mg/10mg	As & when required
294	Tab. Antacid.	As & when required
295	Tab. Artisunate 50 mg.	As & when required
296	Tab. Artisunate + Sulphadoxim + Pyrimethanuine	As & when required

297	Tab. Asthalin.	As & when required
298	Tab. Atenolol 50 mg.	As & when required
299	Tab. Azathioprine 50mg.	As & when required
300	Tab. Azithromycin 250 mg / 500 mg	As & when required
301	Tab. Keto Conazole 200 mg.	As & when required
302	Cap. Itraconazole 100 mg	As & when required
303	Cap. Ampicillin + Cloxacillin (250mg. each)	50000 cap
304	Cap. Ampicillin + Dicloxacillin (250mg. each)	50000 cap
305	Cap. Ampicillin + cloxacillin kid.	As & when required
306	Cap. Ampicillin 500mg.	As & when required
307	Cap. Axtemether 40mg.	As & when required
308	Cap. Artemether 80mg.	As &, when required
309	Tab. Acetazolamide 250 mg	As & when required
310	Tab. Acyclovir 800 mg.	As & when required
311	Tab. Amiodarone	As & when required
312	Tab. Bicalutamide 50 mg.	As & when required
313	Cap. B-Complex.	25000 tab
314	Tab. Bisacodyl 10 mg	25000 tab
315	Tab. Balcofen 25 mg	As & when required
316	Tab. Beta Histine 16 mg /24 mg	As & when required
317	Cap. Chloramphenicol.	As & when required
318	Cap. Clarithromycin.500mg	As & when required
319	Tab. Calcium Gluconate 500mg.	25000 tab
320	Tab. Carbamazepine 300 mg.	As & when required
321	Tab. Carvidelol 12.5 mg / 25 mg.	As & when required
322	Tab. Cefadroxyl 125mg / 500 mg	As & when required
323	Tab. Cefadroxyl kid.	As & when required
324	Tab. Cephalexin 250 mg. / 500 mg.	As & when required
325	Tab. Cefixime 200 mg / 50 mg	2000 tab
326	Tab. Cetrizine Hcl 10mg.	75000 tab
327	Tab. Cinnarzine 25 mg /50 mg	As & when required
328	Tab. Chlorzoxasone 500 mg + Tab Diclofenac 50 mg+	As & when required
329	Tab. Chloroquine phosphate 150 mg.	10000 tab
330	Tab. Clofagimine	As & when required
331	Tab. Chymoral plus.	As & when required
332	Tab. Ciprofloxacin 500mg + Tinidazol 600mg.	25000 tab
333	Tab. Ciprofloxacin 250mg.	As & when required
334	Tab. Ciprofloxacin 500mg.	60000 tab
335	Tab. Clarithromycin 250 mg.	As & when required
336	Tab. Cefopodoxime 500 mg.	As & when required
337	Tab. Chlordiazepoxide 5mg + Clnidium Bromide 2.5mg.	As & when required
338	Tab. Chlorpheniramine Maleate 25 mg.	As & when required
339	Tab. Clotrimazole Vaginal	As & when required

340	Tab. Clopidogrel 75 mg.	As & when re quire d-
341	Tab. Clonazepam 0.25 mg.	As & when required
342	Tab. Cyclophosphamide 50mg.	As & when required
343	Tab. Cycloserin 250 mg.	As & when required
344	Tab. Dapsone 100 mg.	As & when required
345	Tab. Dexamethasone.	As & when required
346	Tab. Diacobal 1.5	As & when required
347	Tab. Dulcolax	
348	Tab. Diazepam 5 mg.	1000 tab
349	Tab. Diclofenac Sodium 50 / 100 mg.	60000 tab
350	Tab. Dicyclomine Hydrochloride	10000 tab
351	Tab. Di-ethyl Carbazine 100mg.	As & when required
352	Tab. Diloxamide Fureate.	As & when required
353	Tab. Disopyramide.	As & when required
354	Tab. Dicyclomine 100 mg.	10000 tab
355	Tab. Domperidone.	As & when required
356	Cap. Doxy eye line 100mg.	25000 tab
357	Tab. Erythromycin 250mg / 500 mg.	As & when required
358	Tab. Erythromycin kid,	As & when required
359	Tab. Etophyllin + Tneophyllin	As & when required
360	Tab. Ethionamide 250 mg.	As & when required
361	Tab. Ethamsylate 250 mg.	As & when required
362	Tab. Ethambutol 400mg / 800 mg	10000 tab
363	Tab. Famotidine 40mg.	As & when required
364	Tab. Famcyclovir 250 mg.	As & when required
365	Tab. Fexofenadine.	As & when required
366	Tab. Finasperide 5 mg.	As & when required
367	Tab. Fluconazole 150mg.	2000 tab
368	Tab. Fluconazole 200mg./ 400mg	As & when required
369	Tab. Fluconazole 50mg.-	As & when required
370	Tab. Frusemide 10m_g./20mg. /40mg.	As & when required
371	Tab. Flavoxate 200 mg.	As & when required
372	Tab. Gefitinib 250 mg.	As & when required
373	Tab. Gatifloxacin 200 mg.	As & when required
374	Tab. Glibenclamide 5 mg.	As & when required
375	Tab. Glipizide 5mg & Metformin 500mg.	As & when required
376	Tab. Gliclazide 30 mg	As & when required
377	Tab. Glimipride 1 mg /2 mg	As & when required
378	Tab. Griseofluvin 250 mg.	As & when required
379	Tab. Hydrourea 500 mg	As & when required
380	Tab. Hydrochloroquine 200 mg	As & when required
381	Tab. Haloperidol 50 mg	As & when required
382	Tab. Ibuprofen + Paracetamol.	60000 tab

383	Tab. Ibuprofen 400mg.	20000 tab
384	Tab. Isoniazide 300mg.	10000 tab
385	Tab. Itopride 50 mg.	As & when required
386	Cap. Iron+ Folic Acid	50000 tab
387	Tab. Lanoxin 0.25 mg	As & when required
388	Tab. Lansoprazole.	As & when required
389	Tab. Levodopa 100 mg +Carbidopa 10 mg	As & when required
390	Tab. Lo per amide 2 mg	As & when required
391	Tab. Largactil 50mg.	As & when required
392	Tab. Levocetirizine 10mg.	20000 tab
393	Tab. Linozobid.	As & when required
394	Tab. Loratidine.	As & when required
395	Tab. Misoprostol 200mcg/50mcg/25mcg	10000 tab
396	Tab. Methylcobal.	5000 tab
397	Tab. Metformin 500 mg.	As & when required
398	Tab. Methotrexate 2.5 mg	As & when required
399	Tab. Methyl Prednisolone 8 mg. / 16 mg.	As & when required
400	Tab. Methyl dopa.	As & when required
401	Tab. Miglitol 25 mg /50 mg	As & when required
402	Tab. Metoprolol 12.5 & 25 mg	As & when required
403	Tab. Metronidazole 200mg./ 400mg.	100000 tab
404	Tab. Nifedipine 5mg/10mg sublingual	As & when required
405	Tab. Nitro Glycerine 2.6 mg / 6.4 mg.	As & when required
406	Tab. Nebiritol 2.5 Mg / 5 mg.	As & when required
407	Tab. Nitrofurantocin 100 mg	As & when required
408	Tab. Norfloxacin 400mg.	10000 tab
409	Tab. Norfloxacin + Tinidazole.	30000 tab
410	Cap. Nifedipine 10mg.	As & when required
411	Tab. Ofloxacin 200 mg. / 400 mg.	As & when required
412	Tab. Ofloxacin + Ornidazole	As & when required
413	Tab. Carbamazepine	As & when required
414	Tab. Ornidazole 500 mg.	As & when required
415	Tab. Oxytetracycline	As & when required
416	Cap. Omeprazole 20mg.	60000 tab
417	Tab. Pantoprazole 40mg.	60000 tab
418	Tab. Parazocin 5 mg.	As & when required
419	Tab. Paracetamol 500mg.	50000 tab
420	Tab. Promethazine 25 mg.	As & when required
421	Tab. Pheniramine Maleate.50mg	10000 tab
422	Tab. Phenytoin 100 mg	5000 tab
423	Tab. Pioglitazone 15 mg /30 mg	As & when required
424	Tab. Piperazine 500 mg.	As & when required
425	Tab. Prednisolone 10 mg.	50000 tab
426	Tab. Propanolol 40 mg.	As & when required

427	Tab. Primaquine 15 mg.	As & when required
428	Tab. Pyrazinamide 750mg.	20000 tab
429	Tab. Pyridostigmine 60mg.	As & when required
430	Tab. Quinine Hcl 300mg.	As & when required
431	Tab. Ramipril 2.5mg.	As & when required
432	Tab. Ranitidine.	100000 tab
433	Tab. Rabeprazole 20mg	As & when required
434	Tab. Rifampicin kid.	As & when required
435	Tab. Rosiglitazone 2 mg / 4 mg	As & when required
436	Tab. Roxythromycin 150 mg.	As & when required
437	Cap. Rifampicin 450 mg.	10000 tab
438	Cap. Rifampicin 450 mg.+ Isoniazide 300 mg	10000 tab
439	Tab. Salbutamol 2 mg.	As & when required
440	Tab. Serratiopeptidase 10mg + Diclofenac Sodium 50mg.	100000 tab
441	Tab. Serratiopeptidase 10mg.	25000 tab
442	Tab. Sod. Valporate 200mg.	As & when required
443	Tab. Sorbitrate.	As & when required
444	Tab. Spiramycin	As & when required
445	Tab. Spironolactone	As & when required
446	Tab. Sulfasalazine 500 mg	As & when required
447	Tab. Terbutaline.	As & when required
448	Tab. Terbinafm 250 mg.	As & when required
449	Tab. Theophyllin.	As & when required
450	Tab. Thalidomide 100mg	1000 tab
451	Tab. Thyroxine 50 meg.	As & when required
452	Tab. Tinidazole 500 mg.	As & when required
453	Tab. Tramadol Hcl 50mg/ 100mg.	As & when required
454	Tab. Trihexiphenidyl 2mg.	As & when required
455	Tab. Trypsin and Chymotrypsin	As & when required
456	Tab. Verapramil 40mg.	As & when required
457	Tab. Vit-E 400mg.	As & when required
458	Tab. Vit-K 1 ml	As & when required
459	Oral Rehydration WHO recon. formula	As & when required
460	Probiotic and Prebiotic Sacchets	As & when required
461	SYRUP, OINTMENT, DROP, SOLUTION	
462	Drop. Atropin Eye Drop.	400 ph
463	Drop. Aciclovir ye Drop.	As & when required
464	Drop. Amikacin Eye Drop.	As & when required
465	Drop. Betoxolol 0.5%	1000 ph
466	Drop. Brimonodine Tartrate 2 mg.	1000 ph
467	Drop. Bimatoprost 0.3 mg .	1000 ph
468	Drop. Carboxymethyl Cellulose Sodium 0.5%	500 ph
469	Oint Lignocian 5%	As & when required
470	Nitroglycerin Patch	As & when required

471	Recombinant Human Epidermal Growth Factor Gel - 15gm/7.5 gm	As & when required
473	Drop. Camphor 0.01% + Menthol 0.005 % + Naphazoline Hydrochloride 0.05% + Phenylephrin HC 0.12%	500 ph
474	Drop. Chloromycetin + Clotrimazole + Dexamethasone + Lignohydrochloride Ear Drop.	As & when required
475	Drop. Ciprofloxacin Eye/Ear Drop.	As & when required
476	Drop. Ciprofloxacin + Dexamethasone Eye/Ear Drop.	As & when required
477	Drop. Cyclopentolate Eye Drop.	600 ph
478	Drop. Chloramphenicol Eye Drop.	600 ph
479	Drop. Dexamethasone Eye/Ear Drop	500 ph
480	Drop. Epinastine Hcl Eye/Ear Drop	As & when required
481	Drop. Erythromycin 0.6% Eye/Ear Drop	As & when required
482	Drop. Fluorometholone Acetate 1%	500 ph
483	Drop. Fluconazole Eye Drop	200 ph
484	Drop. Flurbiprofen Eye Drop.	200 ph
485	Drop. Gatifloxacin Eye Drop.	As & when required
486	Drop. Gatifloxacin + Prednisolone Acetate	As & when required
487	Drop. Genticyn B Eye/Ear Drop.	As & when required
488	Drop. Gentamicin Eye /Ear Drop.	200 ph
489	Drop. Genticyn HC Eye /Ear Drop.	200 ph
490	Drop. Gatifloxacin + Dexamethasone Eye Drop.	200 ph
491	Drop. Hydroxypropylmethyl Cellulose 2% in Syringe	As & when required
492	Drop. Homatropine Eye Drop	400 ph
493	Drop. Ketorolac Tromethamic Eye Drop	200 ph
494	Drop. Moxifloxacin Eye Drop	As & when required
495	Drop. Natamycin Eye Drop	As & when required
496	Drop. Neomycin + Clotrimazole + Dexamethasone Eye Drop.	As & when required
497	Drop. Neosporin (Neomycin + Polymyxine)	As & when required
498	Drop. Norflox Eye/Ear Drop.	As & when required
499	Drop. 3% Ofloxacin Eye Drop	200 ph
500	Drop. Olorex Ear Drop.	As & when required
501	Drop. Olopatadine. Hydrochloride Eye drop.	As & when required
502	Drop. Ofloxacin + Dexamethasone Eye Drop.	As & when required
503	Drop. Potassium Iodide 3.3% + Sodium Chloride 0.83% + Calcium Chloride 1% + Phenyl Mercuric Nitrate 0.001% Eye Drop.	As & when required
504	Drop. Polymyxin-B Eye Drop	As & when required
505	Drop. Pilocarpine 2 % Eye Drop	100 ph
506	Drop Prednisolone Acetate Susp. 1% Eye drop	500 ph
507	Drop. Tobramycin Eye Drop.	As & when required
508	Drop. Tropicamide 0.8% + Phenylephrine 5% Eye Drop.	As & when required
509	Drop. Tropicamide 1% Eye Drop.	300 ph

510	Drop Timolol Maleate 0.5%	200 ph
511	Drop. Travoprost 0.004%	200 ph
512	Drop. Tropicacyl Plus Eye Drop.	2500 ph
513	Drop. Tobramycin + Dexamethasone Eye Drop.	As & when required
514	Drop. Waxonil Ear Drop.	200 ph
515	Drop. B. Complex	1000 ph
516	Syp. Albendazole.	5000 ph
517	Syp. Alkaline.	As & when required
518	Syp. Amoxicillin.	10000 ph
519	Syp. Ampicillin + Cloxacillin.	As & when required
520	Syp. Antacid.	As & when required
521	Syp. B Complex.	As & when required
522	Syp. Codeine	As & when required
523	Syp. Cefadroxyl.	As & when required
524	Syp. Cefuroxime	As & when required
525	Syp. Calcium	As & when required
526	Syp. Cefixime	As & when required
527	Syp. Chloroquine.	As & when required
528	Syp. Cotrimoxazole.	As & when required
529	Syp. Cremalax	As & when required
530	Syp. Dextromethorphan	As & when required
531	Syp. Erythromycine	As & when required
532	Syp. Ferrous Fumarate/Sulphate	As & when required
533	Syp. Ibuprofen.	As & when required
534	Syp. Lactulose.	As & when required
535	Syp. Liver Tonic.	As & when required
536	Syp. Metronidazole.	10000 ph
537	Syp. Multivitamin.	As & when required
538	Syp. Ofloxacin.	As & when required
539	Syp. Paracetamol.	10000 ph
540	Syp. Phenobarbitone.	As & when required
541	Syp. Promethazine HCL	As & when required
542	Syp. Pyrantel Palmote	As & when required
543	Syp. Quinine. :	As & when required
544	Syp. Salbutamol.	As & when required
545	Syp. Sodium Valporate.	As & when required
546	Syp. Trichlophos.	As & when required
547	Syp. Volporin	As & when required
548	Syp. Vitamin-E	As & when required
549	Nitroglycerin Spray	As & when required
550	Lignocain 10 % Spray	100 bot
551	Butroclot Solution	As & when required
552	10% Ithamal Glycerin	As & when required
553	B.I.P. Peste 500mg	As & when required

554	TMP-SMX DS 160/800mg	As & when required
555	Respules Duoline (Levosalbutamol + Ipratropium Bromide)	As & when required
556	Respules Budacort	As & when required
557	Salmeterol+Budesonide Inhaler (200)	As & when required
558	Formetrol+Corticosteroid Inhaler	As & when required
559	Anaesthetic Ether.	As & when required
560	Gypsona Plaster.	As & when required
561	Plaster of Paris 50kg Tin/Bag.	12000 kg
562	Oint. Atropin Sulphate 1 %	200 ph
563	Oint. Atropin Sulphate 1 % S Eye Ointment	As & when required
564	Oint. Acyclovir Eye Oint.	200 ph
565	Oint. Clotrimazole	As & when required
566	Oint. Chloramphenicol	200 ph
567	Oint. Dexacort 'N' Eye Oint.	200 ph
568	Oint. Erythromycin 0.6% Eye Oint.	As & when required
569	Oint. Gatifloxacin	200 ph
570	Oint. Hydrocortisone 0.5% Skin Cream	As & when required.
571	Oint. Hydroxypropylmethyl Cellulose 2%	100 ph
572	Oint. Intraconazole Eye Oint.	100 ph
573	Oint. Ketoconazole ointment.	100 ph
574	Oint. Neosporin + Hydrocortisone Eye Ointment.	As & when required
575	Oint. Neomycin + Dexamethasone Eye Oint.	100 ph
576	Oint. Neomycin + Polymyxin B Eye Oint.	100 ph
577	Oint. Neosporm Skin/Eye Ointment.	200 ph
578	Oint. Ofloxacin + Dexamethasone	As & when required
579	Oint. Povidine Iodine 15gm. Tube	As & when required
580	Oint. Povidine Iodine Ointment 250gm.	As & when required
581	Oint. Silver Sulphadiazine 500gm./ 1000gm.	2500 kg
582	Oint. Soframycin Skin Ointment.	As & when required
583	Oint. Aminacrine Hydrochloride & Cetrime 500gm/lkg	2000 kg
584	Oint. Mupirocin	As & when required
585	Lignocain Hydrochloride Gel 2%	5000 tube
586	Heparin Tropical Gel	As & when required
587	Hydrogen Peroxide.	5000 bot
588	High density Viscoelastic (for pheco surgery)	As & when required
589	Lignocain 4%	1000 ph
590	Chlorinated Lime and Boric Acid Solution	5000 bot
591	Balanced Salt Solution	As & when required
592	Benzyl Benzoate Lotion.	As & when required
593	Gamma Benzene Hexchloride Lotion.	As & when required
594	Iohexol 'Solution 100ml	As & when required
595	Povidone Iodine Solution 5% w/v 500ml	10000 bot
596	Povidone Iodine Pre Operative Scrub Solution	As & when required
597	Chlorhexidine Pre Operative Scrub Solution	As & when required

598	Povidone Iodine Ophthalmic Solution. 5%	As & when required
599	Solution Feracrylum 1%.	As & when required
600	Gel Feracrylum 1%.	As & when required
601	Diclofenac Patch	As & when required
602	Nitroglycerin Patch	As & when required
603	Gel Dinoprostone 3gm	1000 tube
604	4% Xylocaine Tropical Solution	As & when required
	ANTI CANCER DRUGS	
605	Inj. Docetaxel 20mg/80mg/ 120mg	As & when required
606	Inj. Etoposide 100mg	As & when required
607	Inj. Doxorubicin 10mg/50mg	As & when required
608	Inj. Oxaliplatin 50mg/100mg	As & when required
609	Inj. Pemetrexed 500mg/100mg	As & when required
610	Inj. Zoledronic Acid 4mg	As & when required
611	Inj. Gemcitabine 200mg/lgm	As & when required
612	Inj. Methotrexate 15mg/50mg/250mg	As & when required
613	Inj. Cisplatin 10mg/50mg/vial	As & when required
614	Inj. Cyclophosphamide 500 mg	As & when required
615	Inj. Cytosine arabinoside 100mg/500mg/lgm	As & when required
616	Inj. Carboplatin 50mg/450mg	As & when required
617	Inj. Epirubicin 10mg/50mg	As & when required
618	Inj. 5 Fluorouracil 250mg/5ml	As & when required
619	Inj. Leucovorin Calcium 50mg	As & when required
620	Inj. Mitomycin. C 10 ml	As & when required
621	Inj. Paclitaxel 30mg/100mg/260mg	As & when required
622	Inj. Bortezomib 2mg/3.5mg	As & when required
623	Inj. Vinblastine 10mg/10ml	As & when required
624	Gel Epidermal Growth Factor	As & when required
625	Anastrozole - oral Automatic inheler	As & when required
626	Inj. Typher 2.5ml	As & when required
627	Inj. Typher 5ml	As & when required
628	Inj. Human Chorionic Gonadotropin 2000/ 5000/10000	As & when required
629	Cap. Imatinib Mesylate 100mg/400mg	As & when required
630	Cap. Curcuminlonga 500mg	As & when required
631	Cap. Hydroxy Urea 500mg	As & when required
632	Cap./Tab Anastrozole 1 mg	As & when required
633	Cap./Tab Leucovorin Calcium 15mg	As & when required
634	Cap./Tab Gefipinib 250mg	As & when required
635	Cap. /Tab Capecitabine 500mg	As & when required
636	Cap./Tab Thalidomide 50mg/ 100mg/200mg	As & when required
637	Cap./Tab Etoposide 50mg	As & when required
638	Cap. /Tab Erlotinib 100mg/ 150mg	As & when required
639	Cap./Tab Temozolomide 20mg/100mg	As & when required
640	Cap./Tab Aprepitant 80mg/ 125mg	As & when required

641	Cap. Imatinib Mesylate(400mg)	As & when required
642	Tab. Methotrexate 2.5mg	As & when required
643	Tab. Bicalutamide 50mg.	As & when required
644	Tab. Bu'sulfan	As & when required
645	Tab..Calatanuide 50mg	As & when required
646	Tab. ?61inic Acid	As & when required
647	Tab. Mephalan 2 mg	As & when required
648	Tab. Mercaptopurine 50mg	As & when required
649	Tab. Tamoxiphen 20mg	As & when required
650	Tab. Thioguanine 25mg	As & when required
651	Tab. Tolbutamide (Androgen Ablaton drug)	As & when required
	Drug for Opportunistic Infectionin PLHIV	
652	Nitazoxanide 500 mg	As & when required
653	Fluconazole IV – 200 mg	As & when required
654	Acyclovir IV 250 mg	As & when required
655	Inj Gancyclovir 500 mg	As & when required
656	Valganciclovir 450mg	As & when required
657	Cap. Gancyclovir 250mg	As & when required
658	Clindamycin 300mg	As & when required
659	Sulfadiazine 500mg	As & when required
660	Sulfadiazine 500mg	As & when required
661	Inj. Amphotericin B 50mg	As & when required
662	Levofloxacin 500mg	As & when required
	Drug for Anti Haemophelia Drugs	
663	Factor VIII 250	As & when required
664	Factor VIII 500	As & when required
665	Factor IX 600	As & when required

Note : Above mentioned quantity may vary (change) on as & when basis & as pre requirement of RIMS, Ranchi.