

SETH G.S. MEDICAL COLLEGE & K.E.M. HOSPITAL
Acharya Donde Marg, Parel, Mumbai – 400 012.

KEMH/EOI/463/Hemat/2024

date: 07/02/2024

Expression of Interest.

Subject- To Invite Expression of Interest Original Manufacturer/Vendor/Distributor to supply the medicines for patients of rare disease through the NPRD (National Policy for Rare Disease)-2021 fund received in PBCF (Poor Box Charity Fund) Department of K.E.M. Hospital.

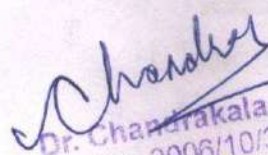
King Edward Memorial Hospital is one of the leading tertiary care, public hospitals in the metropolis of Mumbai that provides basic as well as specialized services to needy patients from all over the country. With a glorious legacy of 98 years and currently catering to over 1.8 million out-patients and 85,000 in-patients annually, the institute is among the top ranked medical institutes in India. KEM Hospital is one of the center of Excellence {CoE} under the NPRD-2021 and provides facilities for diagnosis, prevention and treatment of rare diseases. Through the funds received under NPRD-2021, the KEM Hospital wishes to purchase medicines for patients of rare disease.

For purchase of the above drugs, it is proposed to invite EOI (Expression of Interest) from Original Manufacturer/Vendors/Distributor, to supply the same to KEM Hospital. Original Manufacturer/Vendors/Distributor should collect an application form from Department of Pediatrics, KEM Hospital from 08/02/2024 to 12/02/2024 in working hours and all proposals with the required documents should be submitted on or before 13/02/2024 (by 4:00 pm) in the New MS Building, 10th Floor, Ward No. 42, Department of Clinical Hematology, KEM Hospital, Parel, Mumbai – 400 012 with Three Packet System (i.e. Packet A is Administrative Documents, Packet B is Technical Documents & Packet C is Commercial). Do not disclose the price other than in the commercial packet. All envelopes (Packet A, Packet B & Packet C) are to be packed in single sealed envelopes, all envelopes are to be submitted in sealed form. The packet will be opened in front of KEM Hospital Rare Disease Committee as per schedule decided by committee.

SETH G.S. MEDICAL COLLEGE & K.E.M. HOSPITAL
Acharya Donde Marg, Parel, Mumbai – 400 012.

Specifications For Drug for Department of Clinical Hematology of KEM Hospital

	Description
Name of Disease	- Common Variable Immunodeficiency - X Link Agammaglobulinemia
Name of Drug	I V immunoglobulin
Specification of Drug	Prepared for human plasma, Intravenous IVIg 5% 100ml, Approved for use in Pediatrics and adults.
Quantity with Package	516 vials for one year for 6 patients.


Dr. Chandrakala S.
(Reg. No. 2006/10/3281)
Prof. & Head
Department of Hematology
K.E.M. Hospital, Parel
Mumbai-400 012

SETH G.S. MEDICAL COLLEGE & K.E.M. HOSPITAL
Acharya Donde Marg, Parel, Mumbai – 400 012.

**GENERAL
REQUIRE
MENTS:**

• **Packet A :-**

- A. Administrative Documents (Attested Copies)
- 1) EOI form
 - 2) EOI form fee receipt (if applicable)
 - 3) Signed & Stamp copy of EOI
 - 4) Pan Card with Photograph as applicable
 - 5) GST Registration certificate as applicable
 - 6) Copy of Power of Attorney as applicable
 - 7) Copy of valid sales TAX/VAT/GST registration certificate (whichever is applicable)
 - 8) Authority letter for appointment of Distributor (as applicable)
 - 9) Photograph of individuals, proprietor of all partners as the case may be
 - 10) Taxes bifurcation & HSN code mentioned on letterhead
 - 11) Bidder's Profile

• **Packet B :-**

- B. Technical Documents (Attested Copies)
- 1) Valid Drug Manufacture License/Import License (Form 10)/Repacking License/Medical Devices License with approved product list issued by competent drug authority (as applicable)
 - 2) Valid Drug Selling License issued by FDA (as applicable)
 - 3) Valid Product wise WHO-GMP certificate with approved Product List or Certificate of Pharmaceutical Products (COPP) issued by FDA.
 - 4) Quality Control Test Report /FDA approved Lab/ Govt. aided Lab/In house Test Report form manufacturer as per D & C Act.
 - 5) Rate should be quoted per number (unit should specified)
 - 6) Sample along with Test Report should be submitted as & when asked

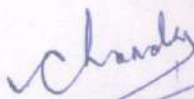
• **Packet C :-**

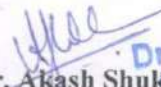
- C. Rate Envelop

SETH G.S. MEDICAL COLLEGE & K.E.M. HOSPITAL
Acharya Donde Marg, Parel, Mumbai – 400 012.

The supplier should be submitting documents mention in check list attached herewith.

If any doubts or any query about above mentioned work, you can contact New MS Building, 10th Floor, Ward No. 42, Department of Clinical Hematology, KEM Hospital, Parel, Mumbai – 400 012.


Dr. Chandrakala S.
(Reg. No. 2006/10/3281)
Prof. & Head
Department of Hematology
Seth GSMC & KEM Hospital
Mumbai-400 012


Dr. Akash Shukla
Professor & Head
Nodal Officer for Rare Diseases
Department of Gastroenterology
Seth GSMC & KEM Hospital
Parel, Mumbai - 400012.


Dr. Ajay Rana
Deputy Dean
Seth GSMC & KEM Hospital.
DY. DEAN
K.E.M. HOSPITAL
PAREL, MUMBAI-400 012.


Dr. Sangeeta Ravat
Dean (Chairperson)
Seth GSMC & KEM Hospital.

Dean, K.E.M.H. & Seth G.S.M.C.,
Parel, Mumbai - 400 012.

SETH G.S. MEDICAL COLLEGE & K.E.M. HOSPITAL
Acharya Donde Marg, Parel, Mumbai – 400 012.

Check list of Documents to be submit with EOI form as per the order given below.

Sr. No.	Administrative Documents	Sr. No.	Technical Documents
1	EOI Form	1	Valid Drug Manufacture License/Import License (Form 10)/Repacking License/Medical Devices License with approved product list issued by competent drug authority (as applicable)
2	EOI Form Fee Receipt (if applicable)	2	Valid Drug Selling License issued by FDA (as applicable)
3	Signed & Stamp copy of EOI	3	Valid Product wise WHO-GMP certificate with approved Product List or Certificate of Pharmaceutical Products (COPP) issued by FDA.
4	Pan Card with Photograph as applicable	4	Quality Control Test Report /FDA approved Lab/ Govt. aided Lab/In house Test Report form manufacturer as per D & C Act.
5	GST Registration certificate as applicable	5	Rate should be quoted per number (unit should specified)
6	Copy of Power of Attorney as applicable	6	Sample along with Test Report should be submitted as & when asked
7	Copy of valid sales TAX/VAT/GST registration certificate (whichever is applicable)		
8	Authority letter for appointment of Distributor (as applicable)		
9	Photograph of individuals, proprietor of all partners as the case may be		
10	Taxes bifurcation & HSN code mentioned on letterhead		
11	Bidder's Profile		

**Authorised Signature of the Bidder
With Official Seal & Address**