## Rajasthan Medical Services Corporation Ltd.

## Minutes of Pre bid meeting held on 10-06-2011 at 2.30 P.M.

S. No	Name of company/firm	Query/suggestion	Relevant Clause of bid document	Response of RMSC
1.	Reliance life Science	<ul> <li>(i) As per the bid condition, only manufactures or direct importers are eligible to participate in the tender.</li> <li>(ii) No corrections in the price bid should be considered.</li> </ul>	2(a)	RMSC reiterates the bid conditions.
			6.1(i)	No correction in the price bid in whatever manner done, will be accepted.
2.	(i) SELVOK Pharmaceuticals co. (ii) Adroit Pharmaceuticals Pvt. Ltd. (iii) SM Pharmaceuticals (iv) ELCON Drugs and formulations (v) IRIS Health care (P) Ltd	For calculating average annual Turnover, the figures of the year 2010-11 should also be considered.	2(b)	If any company wishes to include the financial turnover of the year 2010-11, then the same will be considered based on the certificate given by a practicing Charted Accountant on the basis of audited annual accounts.
3.	(i) Tagros Chemical India Ltd. (ii) SYNOKEM Pharmaceuticals	The conditions that "The supplier shall take back Drugs which are not utilized by the ordering authority within the shelf period based on mutual agreement.	13(9)	The clause is deleted.
4.	ACME formulations	Packing unit of 10x10 Tablets for Tab Nisoprostol should be changed to "Pack of 4 Tablets	Annexure XII	The packing unit will remain same as specified in the bid document.
5.	(i) NIRLIFE NIRMA LIMITED  (ii) AHLCON Parenterals (INDIA) Ltd. (iii) Akums Drugs & Pharmaceuticals Limited	1.V. Fluids mentioned as BFS/FFS bottle. BFS&FFS are two different technologies and not equivalent to each other. They have requested to amend the packaging unit to 500 ml FFS bottle in place of 500 ml FFS/BFS bottle.  2. BFS technology is obsolete manual and should not be preferred.	Annexure XII	No change in technical specifications.
6.	(i) MOREPEN (ii) V.H. BHAGAT & Co.	In case of imported drugs, the requirement of printing of logo and other matter is not possible. Because changing original labels for pasting labels is an illegal act and hence an offence, therefore affixing rubber stamp on the original labels should be	14	In case of imported drugs affixing rubber stamp on the original label is allowed, with indelible ink on inner and outer packings.

		considered.		
7.	(i) Pure Pharma Limited	The supply period should be of 60-75 days	13.4	No change in supply period.
	(ii) Vivek Pharmachem (INDIA)Ltd	The supply period be of 60 days		
	(iii) Medipol Pharmaceuticals	The supply period be of 60 days		
8.	Pure Pharma Limited	A bidder should be considered who were blacklisted in the past but if that period of blacklisting has already expired.	2(e)	If a company/firm was blacklisted for a specified period then the same becomes eligible after the blacklisting period is over.
9.	(i) Medipol Pharmaceuticals India ltd.	(i) The procedure of selection of batches for testing should be explained to avoid repetitions of testing for same batch.		As provided in bid document.
	(ii) M/s Vivek Pharmachem (INDIA) Ltd			If product is tested in in-house testing lab then testing from approved testing lab is not required.
		(iii)Packing: Please clarify, in certain products of tablets & capsule does not required strip packing Alu/Alu, where as it has been mentioned is specification is strip like few product no. 20,71,72,73,79,80,99,111,128,129,26		Strip/blister
		3,336,370,373390,391 etc. All these capsules and tablets are stable in PVC/Alu blister and available in		
		trade.  Item no. 112:- Please clarify; it is dry syrup and available in trade.		As per pharmacopoeia
		Eye Drops:- Please clarify, can we offer product in while/opaque squeeze vial (three pcs) in which separate dropper is not required. This is more practical, easy in use and have major share in trade. This may be avoiding sterility issue in dropper, separate packed in poly bag can't assurance of sterility.		The product may be offered in squeeze vial.
		Market Standing: Please clarify, market standing certificate (MMC) required for each strength or one strength can be considered for other		Market standing certificate will be required for each strength.

		strength MMC also.		
10.	VIVEK Pharmachem (INDIA) Ltd.	Please clarify what will be the method of Purchase preference.	3	SSI should reduce its price to match with the L1 rates. If this is done, only then they will get order of the 15 % of the quantity required.
11.	VIVEK Pharmachem (INDIA) Ltd.	Regarding certificate indicating that the bidder is fulfilling the requirement of schedule L-1. Please clarify whether bidder is required to submit attested copy of self certificate issued	5(k)	The certificate issued by respective state drug controlling authority will be required to be submitted.
12.	(i) BBRAUN Medical (India) pvt. Ltd	They are importing DEXTRAN from their parent company in Germany and the product bears EUROPEAN Pharmacopoeial standards. On the close examination of the product catalogue (Annexure XII), we came across a number of products wherein the Pharmacopoeial standards have been mentioned as I.P. (Indian Pharmacopoeia), whereas these products are primarily imported and a number of companies are importing and selling these products in the Indian market with their original Pharmacopoeial standards like USP/BP/Er. Ph. etc. The Licensing Authority in case of imported drugs & medicines is Drugs Controller General (India), Government of India and the above mentioned documents are mandatorily issued by DCG(I). The Pharmacopoeial standards that apply to imported products rae international standards like USP/BP/Er. Ph. etc. and not I.P. The products are imported and marketed with their original Pharmacopoeial standards DCG(I) issues the permission to import and market/sell these products as per the original international pharmacopoeial standards. Evan the air way bills and the import documents of last 3 years shall have the original Pharmacopoeial standards and not the Indian Pharmacopoeia.  The tenders have specifically	Annexure XII	

manufacturer/direct importers. This means that imported drugs and medicines for which DCG(I) has issued permissions are eligible to participate in your tenders. But many a places in your document it has been mentioned that the specifications of the offered product has to be in compliance with the product specification given in the Annexure-XII and any deviation shall render the offered item rejected summarily.

Sir, when tenders from Importers are allowed and accepted and rate quotations for Imported Drugs are welcome, then how their Pharmacopoeial standards can be refused and rejected. After all, an imported product cannot have I.P. standards in any case. No where in your tender it has been mentioned that Imported Drugs shall be considered only when they shall comply with I.P. Standards?

We request you to kindly confirm that rate offer for Imported Drugs shall be accepted and considered with their original Pharmacopoeial standards, whatever they may be.

- 1. Imported drugs shall necessarily have different Pharmacopoeial standards prevailing applicable in their country of origin. How your department expects them to comply with I.P. All imported drugs are registered for marketing in India under BP/USP/ErPh by DCGI. A drug might have been included in India in I.P., but if the same is imported in India, it will have different Pharmacopoeial standards.
- The drugs enlisted in your tender which are not manufactured in India at all are:-
  - (a) Human Albumin (175), (b) Anti Hemopilic Facotr VIII (171), (c) Human Anti D Immunoglobulin (302, 303 & 304), (d) Human Anti Rabies

The importer shall get the imported product tested from approved government lab in India if it is official in I.P. For other products which are not official in I.P. respective countries pharmacopeial standards shall be acceptable.

	(ii) V.H. Bhagat & Co.	Immunoglobulin (305), (e) Tetanus Immunoglobulin (309), 3. I.P. has been wrongly mentioned against Human Anti D Immunoglobulin at Sr. No. 302,303 & 304 because in India, not a single product is available with I.P. labeling. This product is not at all manufactured in India. Sticking to I.P. shall render all received offers "INVALID" because no product shall comply with I.P.		Product is official in I.P. 2010.
13.	Punjab Formulations Limited	The two prevailing technologies BFS and FFS for manufacture of IV fluids are essentially packaging technologies and the finished product in the end is the same i.e. conforming to Indian Pharmacopoeia. So it doesn't matter what kind of machines are used to manufacture them. The concern shall be on conformation to Good manufacturing Practices as laid down in Schedule M and the Pharmacopoeal standards. Therefore the suggestion by some of the prospective bidders for segregation of quotations for offer of intravenous fluids based on the type of manufacturing equipment used for producing these products should not be entertained.	Annexure XII  Technical Specifications	No change in packing specifications. Both shall be considered.
14.	B. Braun Medical (India)	(i) It is to inform you that DEXTRAN is internationally available essentially in two different forms which are as under:-  1. Dextran 70 Inj. 6% Solution in 5% Dextrose I.V. Infusion  2. Dextran 70 Inj. 6% in 0.9% Solution Chloride I.V. Infusion  Therefore, it must be made clear in your tenders which one is needed by your department. We feel both are necessarily needed.  (ii) It is extremely important to note here that it is primarily DEXTRAN 40 Inj. I.P. 10% Solution which is of much more general use as Plasma Expander in various blood disclosers like "Hemophilia & Thalassemia" etc. than DEXTRAN 70, which is featuring in your tender while	Item No. 170  Annexure XII  Technical Specifications	In 0.9% sodium chloride I.V. infusion shall be acceptable.

			T	
		Dextran 40 has been completely left out. Dextran 70 has a scarce and very limited use in a few selective disorders only, which is evident form the fact that Medical & health Department has always invited tenders for only Dextran 40 and not for Dextran 70. Even the EDL of Rajasthan State features Dextran 40 and not for Dextran 70. It is not appropriate but essential also to cover all blood disorders by making Dextran 70 & Dextran 40 available in hospitals. Therefore inclusion of Dextran 40 in the list of drugs is absolutely.		
15.	Vinayak Manutrade (P)	The department has missed the	Item Code no. 398	Grade I is replaced by
	Ltd.	highest parameter prevailing in India for Phenyl i.e. ISI Marked. ISI marked is better in all sense because testing under BIS parameter is stronger than schedule "o". Hence it ensure more stability and performance.  Moreover Grade-1 mentioned in your bid is costly product. Qualities for Grade-1 will not give much benefit in terms quality while comparing with quality & rates of Grade-3. Department can check past record also to established the fact that in Medical & Health Services of Rajasthan Phenyl with specification of Grade-3 ISI marked is successfully used from last so many years. Major purchase of Phenyl in Govt. & Private is of Grade -3.  DG&SD, MCD Delhi, Nagar Nigam, Animal Husbandry, Medical Colleges of Rajasthan and many more departments purchase Phenyl with Grade – 3 only.	Annexure XII	Grade III.
16.	Aventis Pharma Limited	(i) We would like to inform you that we are original researcher of the Framycentin Sulpahte item No. 115 in your tender and are marketing the same under the brand name Soframycin Skin Cream though out the world.  Being the largest manufacturers worldwide we believe that we have a cost/quality advantage to offer.  To make your tender more competitive and get better rates and also get world reknowned brands we		Loan licensee will not be considered.

17.	Sanofi Pasture India	request you to allow loan Licensees to bid under certain conditions like turnover of the manufacturer as well as the Loan Licensees, Period of their presence in the market, their Market share etc.  (ii) The item no. 279 relating to premix insulins mentions only one fix dose of 30 % soluble and 70% Isophane insuline which eliminates us from quoting our premix insulin available as 25% and 75% combination, since both the premixes cane be use interchangeably, I request you to allow 25/75 combination which ultimately will offer more competitive scenario resulting into getting batter rates benefiting to your corporation significantly.	No change.  The importer shall get
	Private Limited	(i) Our vaccines are not manufactured in India, Sanofi Pasteur India imports and market these vaccines from its manufacturing facilities in France.  All our vaccine are as per the specification of European Pharmacopeia (Copy Enclosed).  Herein would also like to confirm that the vaccine is imported and not covered under Indian Pharmacopeia.  The eligibility criteria of your tender also encourage the importer to participate in the tender.  (ii) Packing of Item No. 306 specify 1.0 ml vial with 1.0ml diluent which is as per the specification of a particular company. Majority of anti rabies vaccines are in the pack of 0.5ml  The item number 306 and 307 specify 1ml vial whereas the latest and new technology is for the pre filled syringes which offer the convenience and safety.	the imported product tested from approved government lab in India if it is official in I.P. For other products which are not official in I.P. respective countries pharmacopeial standards shall be acceptable.  No change  Prefilled syringes shall also be accepted.
18.	Baxter (India) Pvt. Ltd.	Regarding specification of Anti Hemophilic Factor VIII (item No. 171).	The importer shall get the imported product tested from approved

		ph ac sp In	aported products with USP armacopeia should also be cepted, although the tender ecification are based on dian Pharmacopeia.	government lab in India if it is official in I.P. For other products which are not official in I.P. respective countries pharmacopeial standards shall be acceptable.  Packing specifications
		fro co inj dis ini dis	cking should be amended om 'Vial pack also ntaining water for ection IP 20 ml ampoule, sposable syringe 20ml, 1 fusion set 23G, two G sposable needles' to 'Vial Vial with diluents'	are changed to "Vial with diluent".
19.	Chiron Behring Vaccines Limited	Huma (Intra) packin the iter ml di needle. When to been do why th in 0.5/ unit of vial, th should 2. Code	muscular)2.5IU/dose The g unit mentioned against m is 1 ml vial with 0.5/1.0 luent and syringe with	"2.5 I.U. single dose vial" in place of 1ml vial will be accepted.  "10 ml vial" is replaced by "Vial/Ampoule"
		The pagainst The ab	packing unit mentioned the item is 10 ml Vial. ove packing unit is ct. Instead of 10 ml vial rect packing unit should be	·
20.	Synergy Diagnostic Pvt. Ltd.	Im (p mo sy im ino als	garding human Anti–D Imunoglobulin IP olyclonal) Injection 300 og packaging of Pre-filled ringe /Vial. As ours is ported products please clude "B.P"/"U.S.P"/"E.P" so please specify "I.M." or V."	The importer shall get the imported product tested from approved government lab in India if it is official in I.P. For other products which are not official in I.P. respective countries pharmacopeial standards shall be acceptable. It is for I.M. injection.
		Im pa ha	reagarding Teatnus amunoglobulin 250IU/Vial cking unit of 10ml/Vial s been mentioned in bid cument. As most of	"Vial/Ampoule"

		tetanus 250IU comes in ampoule form, hence please amend packing unit to	
		vial/Ampule.	
21.	Abbott Healthcare Pvt. Ltd.	(i) Regarding item Code. 163 Acenocoumarol 2mg the packing of 10 tablets each has been mentioned. But we offer 20 tablet pack.	No change
		(ii) Regarding item Code 280 Carbimazole 5mg the packing of 10 tablet and film quoted has been asked. But in India & in abroad, packing of 100 tab is only available & our's packing is also in 100 Tab Bottle. Moreover we offer uncoated formulation for better absorption.	No change
22.	Bharat Serums and Vaccines Limited	In the procurement list as per Annexure XII, Human anti immunoglobuluin IP (monoclonal) 150 mcg is listed (code no. 304)  We also manufacture Human anti d immunoglobulin IP (monoclonal) 300 mcg.  Hence, we request you to change the specification to monoclonal in product code 303.	No change

(Sanjay Pareek) (Neelesh Sharma)

Drug Control officer E.D.(Finance), RMSCL

(Dr. P.C. Ranka) (D.K. Shringi)
Addl. Director, RHSDP Drug Controller, Rajasthan