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E.S.I.C

தொழிலாளர் அரசு காப்பீட்டுக் கழகம்  
(தொழிலாளர் மற்றும் வேலை வாய்ப்புத்துறை  
அமைச்சகம், இந்திய அரசு)  
கர்மசாரி ராஜ கீமா நி஗ம  
(அம ஏவ் ரோஜார மன்னாலய, ஭ாரத ஸர்கார)  
EMPLOYEES' STATE INSURANCE  
CORPORATION  
(Ministry of Labour & Employment, Govt of  
India)



மண்டல அலுவலகம் / கூரிய கார்யாலய / Regional Office  
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No.51/SMO/mIMP SCHEME/E-Chemist/2021-22

Date:

### E-Tender

#### EMpanelment of E-CHEMIST

#### (Under modified Insurance Medical Practitioner (mIMP) Scheme)

1. Employees' State Insurance Corporation (ESIC) is a statutory organization under the Ministry of Labour and Employment, Government of India, providing Social security services to ESI beneficiaries in India as per ESI Act 1948 and provides various benefits which includes Medical Benefit (MB) to its beneficiaries who are registered through their employers.

2. The Additional Commissioner & Regional Director, Regional Office, ESI Corporation, Tamilnadu, who is the Regional Head of the Corporation of the state is interested in entering into tie-up with a Chemist in 15 Districts – 25 locations where ESI does not have its medical establishment or which is newly implemented, for providing medicines to insured persons (IPs) and their families under the modified Insurance Medical Practitioner (m- IMP) Scheme as per ESIC policy /guidelines.

SI.NO	Name of the District	Proposed Location
1	Kanchipuram	Uthiramerur
2	Coimbatore	Ikkarai Boluvampatti
3	Kallakurichi	Sankarapuram
4	Kallakurichi	Ulundurpet
5	Tiruppur	Mulanur
6	Tiruppur	Kunnathur
7	Erode	Kodumudi
8	Ramanathapuram	Thiruvadanai
9	Ramanathapuram	Rameshwaram
10	Nilgiris	Coonoor
11	Nilgiris	Gudalur
12	Nilgiris	Hulikal
13	Nilgiris	Melur
14	Nilgiris	Kotagiri
15	Nilgiris	Kilikundah
16	Dindigul	Palayam / Guziliamparai
17	Madurai	T. Kallupatti
18	Tirunelveli	Valliyoor
19	Tirunelveli	Thisayanvilai
20	Tirunelveli	Cheranmahadev
21	Tenkasi	Alangulam
22	Kanyakumari	Kanyakumari
23	Tirupattur	Tirupattur
24	Villupuram	Tindivanam
25	Pudukkottai	Gandarvakottai

Preference will be given to those chemist based on distance from Insured person's (I.Ps) population concentration in the location, and based on the rebate offered on the MRP printed on the drugs/medicine package. Decision of the Additional Commissioner & Regional Director is final regarding selection of Chemist or area based on number of beneficiaries, other requirement and as per ESI norms. ESI Corporation will take decision to appoint a Chemist in the particular area/location.

3. The Terms & conditions for the chemist is placed as **Annexure 'A'** to this document.
4. Desirous chemist who fulfils the terms and conditions may send their Expression of Interest (EoI) through website esic.nic.in.
5. Date of opening of EoI received through e tender is on 23.10.2024 at 4.00 pm in ESIC, Regional office in the presence of the bidders who wish to be present.
6. The physical copy of the tender document along with the technical bid signed on all pages to be submitted to this office by hand or post to this office on or before Noon in a sealed envelope.
7. **Note:** Financial bid to be submitted online only. No physical copy of Financial bid to be submitted.
8. The selection of chemist will be considered only on fulfilling all conditions and on receipt of satisfactory report from Inspection Committee nominated by The Additional Commissioner & Regional Director, ESIC.
9. The Additional Commissioner & Regional Director will have the sole right to accept or reject any application without assigning any reason thereof.
10. The Schedules are as under

Availability of EOI Form by hand in	Last Date & Time of Submission of Duly filled EOI document	Date and Time of Opening of EOI	Place of submission of EOI form/Opening of EOI.
09.10.2024	22.10.2024 @ 5.00pm	23.10.2024 @ 4.00pm	143 Sterling Road, Panchdeep Bhawan, Nungumbakkam, Chennai- 600034

11. The Application Form may be downloaded from our website [www.esic.nic.in/tenders](http://www.esic.nic.in/tenders) and the application fee of Rs. 500/- (Non refundable) be submitted by way of Demand Draft/Banker Cheque in favour of ESI Fund A/c No.1 payable at Chennai with duly filled in expression of Interest (EOI). Further details are available on the website [www.esic.nic.in/tenders](http://www.esic.nic.in/tenders)

Date:

Sd/-

Place: chennai

Regional Director

**Annexure 'A'**  
**TERMS AND CONDITIONS**

**(a) TERMS / DURATION /TERMINATION:**

- (i) The engagement of Chemist as empanelled Chemist will be purely contractual during the period of this contract and shall be valid for a period of one year, renewable every year on satisfactory services, and extended for a maximum period of five years.
- (ii) If either party seeks to terminate this contract, the terminating party must provide 30 days' notice to the other party or payment @ Rs. 10,000 (Rupees Ten Thousand only) in lieu of the notice period. However, the ESIC reserves the right to terminate the Contract by giving notice of Seven days, if the Chemist is in breach of contract. Also, the ESIC is entitled to rescind the contract by reason of Chemist's misrepresentation, undue influence or duress or where some unforeseen event that may prevent the parties to perform the contract.
- (iii) The contract period as mentioned in agreement will commence with effect from the date of signature by both parties and will be counted only from that date on which after the execution of this agreement by both parties.
- (iv) The Regional Office/DCBO, at the time of empanelment of an eC shall be tagging an IMP Clinic so as to help beneficiaries avail services from these eC. More than one eC can be attached to an IMP Clinic or vice versa to bring in ease of service delivery and competition. There shall be no capping on number of IP-Family units that can be tagged to any eC.

**(b) THE SCOPE OF SERVICES:**

The eC shall provide services to the Beneficiaries and abide by instructions as specified in "**Annexure B**" (the "Services"). However, the instructions are liable for modifications without prior notice.

**(c) LISTED MEDICINES:**

The Chemist shall supply '**Listed Drugs**' as per "**Annexure C**" to the ESI beneficiaries free of cost. Prescribed Drugs and Dressings issued to the beneficiaries outside the Specified List ('**Unlisted Drugs**') shall be charged from the beneficiaries at flat of        (in words                 ) % discount on the MRP printed on the Drug/medicine package, as agreed upon by Chemist and on the basis of quote approved by ESIC.

**(d) OTHER TERMS & CONDITIONS**

- (i) The empanelled Chemist (eC) agrees to supply Allopathic Drugs, Dressings and Consumables to the ESI beneficiaries against the prescription of Insurance Medical Practitioner (IMP) registered under the mIMP Scheme.
- (ii) The eC understands that the MRP of items/drugs on which the rebate offered in percentage is inclusive of all taxes and duties payable during the contract period.
- (iii) The eC should be complying with the statutory rules, regulations and licenses pertaining to trade, including that of the Drugs and Cosmetics Act, 1940 and amendments made

thereafter, and submit copies of relevant document to ESIC.

(iv) The eC shall provide **cashless services** to the ESI Beneficiaries only when the Drugs issued from the ESIC defined '**Listed**' items ("Annexure C") prescribed by the registered IMP Clinic. This amount shall be claimed at the end of the month from ESIC, for reimbursement.

(v) If 'Unlisted drugs' (Drugs outside the items Listed/published by ESIC) is prescribed, the beneficiary shall have either of the two options: One: To pay from pocket at the agreed discounted price to avail the drugs from the eC and later claim reimbursement from ESIC/DCBO producing copies of bills, proof of receipt and prescription written on the Health Passbook by the registered doctor; OR, Two: avail these from DCBO, free of cost. This implies that for unlisted drugs, the eC shall charge the cost from the patient as per the agreed upon rate (Discounted on MRP) upfront when purchased by the beneficiary and issue the Bill and capture information in the relevant fields of Mobile App.

(vi) The eC shall submit claims to ESIC (DCBO/BO) for the cashless services provided to the ESI Beneficiaries. Branch Office/DCBO/Regional Office shall reimburse claims through online method(s), deducting any statutory requirements/taxes, as deemed fit.

(vii) The Second Party shall get emoluments only for such of the above period when he/she actually performed his/her assigned work. No other amount shall be admissible to him/her for the work actually rendered by him/her.

(viii) Non-attached IP or his family member and ineligible IP may be treated as a private patient.

(ix) The eC will maintain sufficient stock of the Medicines at all times during the contract period for uninterrupted supply to ESI Beneficiaries and shall arrange supplies in accordance with the nomenclature, specifications.

(x) The eC shall ensure that supplies of Medicines as and when required, to be made in original packing of manufacturer. The eC acknowledges that tampering on the packaging details or alteration in the batch number, expiry date or MRP or any such information is a criminal offence, and eC shall be held responsible and accountable for any or all legal consequences.

(xi) The eC party agrees that, in case of failure or refusal by eC to supply the Medicines to the Beneficiaries during the contract period, the contract is liable to be cancelled at his risk and cost and any extra cost involved in arranging supplies from alternative source will be recovered from his subsequent/pending bills. Irregular supplies/ failure to fulfill the terms of contract may entail for closure of contract.

(xii) The eC acknowledges that supply, storage and distribution of spurious or sub-standard drugs is a criminal offence and agrees not to indulge in any such criminal activities, for which he shall be liable for prosecution by Law.

(xiii) The eC undertakes that under any circumstances if his/her license for executing business is cancelled/ suspended by any authority / Govt., this contract shall be terminated automatically.

(xiv) The eC understands that it shall be liable for administrative action in the event of lapse on his/her part to comply with the terms and conditions and on the supplying/items of sub-standard quality or if proven to have followed unscrupulous practices apart from the liability of penal action for violating the law of the land.

(xv) The eC undertakes that his/her firm is not blacklisted /deregistered currently and has not been Blacklisted /deregistered by any other Govt. institution/ Organization during the last three years for any reason including supplying sub- standard medicines.

(xvi) The eC undertakes that he/she has not been convicted by any court of law in any matter related to supplying sub- standard Medicines/Other items or on any other grounds.

(xvii) The eC undertakes that his/her firm is not convicted in an offence under the prevention of Corruption Act, 1988, or under the Indian Penal Code or any other law for the time being in force, for any cause of life or property or causing a threat to public health as part of execution of a public procurement contract.

**(e) RESPONSIBILITY OF THE SECOND PARTY:**

The ESIC, in all good faith shall pay remuneration, as defined and as agreed, to the Second Party, within 15 days of receipt of complete and correct reimbursement Claim from the Second Party.

**(f) INDEPENDENT CONTRACTOR STATUS:**

The Chemist shall be serving as an independent contractor in providing the Services. Under this Agreement, the Second Party is neither an employee nor a partner of ESIC.

**(g) GOVERNING LAW:**

The laws of the State of India govern all matters arising out of or relating to this Agreement and the transactions it contemplates, including, without limitation, its interpretation, construction, validity, performance, and enforcement.

**"Annexure B"**

**THE SCOPE OF SERVICES FOR EMPANELLED CHEMIST (eC)**

**a. SCOPE OF SERVICES:**

- (i) eChemist will download the ESIC "Dhanwantri" mobile app from Google Playstore into his Android device to log-in with the ESIC issued user credentials (User ID & Password). The SIM Card of the mobile number registered with ESIC must be in the same smartphone device where the Mobile App has been downloaded to authenticate user through OTP.
- (ii) The eC shall ascertain that the Health Passbook (a small booklet containing about 100 pages with system generated beneficiary credentials affixed on it) and the e-Pehchan card is carried by the ESI Beneficiary every time he visits the eChemist for availing medicine/services.
- (iii) At the time of visit by patient (ESI Beneficiary), eChemist will check 'health passbook' where the drugs are prescribed/written by hand by the empanelled IMP and shall ascertain bonafide status of the ESIC beneficiary. The authenticated Health Passbook booklet serves as a tool for identifying the credentials of the ESI beneficiary and meant for viewing consultation/drug advice prescribed by the doctor. The credentials generated from the system contain the demographic details of a member of the IP-family and Unique Health Identification (UHID) Number. In addition, it contains mobile no., passport size colored photograph and QR Code. Each IP-Family unit shall have one common e-Pehchan card but each member of the family including IP shall have separate Health Passbook containing Unique Health Id. Normally, the validity of the Health Passbook is till the last day of the current eligible Benefit Period corresponding to the previous Contribution Period and is recorded on the Health Passbook. In case of doubt, additional government issued photo-identity proof may be sought to verify identity and prevent unethical practices or impersonation.
- (iv) Empanelled Chemist will log-in to ESIC Dhanwantri App, feed-in the beneficiary's credential to ascertain the Check-in number (OPD Number) generated by the IMP Clinic as also mentioned on the prescription page of the Health Passbook, against which services are to be rendered.
- (v) Once the genuineness of ESIC Beneficiary has been ascertained, he shall dispense only the **prescribed** drugs on the Health Passbook. He shall prepare bill/invoice through his own system and obtain beneficiary's signature on the cash memo as proof of delivery while handing over the medicines.
- (vi) Against the Check-in number of a patient in the 'Dhanwantri Mobile App', the eC shall enter the cash memo (bill) number and date, amount/cost of the dispensed drugs taking account of the rebate/discount on MRP as agreed upon. Thereafter, using mobile camera in the Dhanwantri App eC shall take and upload clear and visible photograph(s) (scan and upload function) of:
  - a. cash memo of listed drugs
  - b. cash memo of unlisted drugs, if any, and
  - c. IP/family member holding prescription page of Health Pass book and aforesaid cash memo(s) in hand.

(vii) This process shall be irrespective of whether eChemist has issued "Listed" or unlisted drugs. However, the "Listed" drugs are to be issued cashless without charging anything to the beneficiary and original Bill / Cash memo needs to be retained by the eC for submission to ESIC later to claim reimbursement.

(viii) Original Bill / Cash-memo shall be required to be handed over to the Beneficiary when unlisted prescribed drugs are purchased by the Beneficiary with the agreed upon discounted rate on MRP, paying from his pocket.

(ix) Irrespective of whether purchased by the beneficiary or availed cashless, the original Bill / Cash-memo must contain beneficiaries' signature certifying receipt and uploaded these signed bill in the mobile app through scan function.

(x) eC will also keep the photo/ scanned copy of prescription page(s) of the booklet and Bill and get it signed by patient/ attendant for future claim for reimbursement in case of cashless services.

(xi) At the end of the calendar month in which services rendered, and within 7 days of the next calendar month the eC shall submit claim in the prescribed format to Branch office/ DCBO/Regional Office for processing of payment.

(xii) The eC shall submit a claim in Hard copy to ESIC (DCBO/BO) for the cashless services provided to the ESI Beneficiaries during previous month. It is required to be submitted in prescribed proforma in the 1<sup>st</sup> week of every subsequent month. The claim should be supported with summary statement (may also be generated through mobile app), medicines bill(s) and the proof of receipt of medicines by the patient, on a monthly basis. Branch/DCBO of ESIC will verify claim bills and submit to RO for cashless online payment or through ECS, deducting any statutory requirements/taxes, as deemed fit.

(xiii) Upon submission of monthly or quarterly or annual claims, payment of eligible amount will be made on-line through ECS by Dispensary cum Branch Office (DCBO) in the district/ nearest Branch office/ESIC Office. Hence Bank account and PAN details of eC are required to be submitted mandatorily.

**Annexure 'C'**  
**List of drugs prescribed by ESIC**

Sl. No.	Sub Category Name	Generic Name	Indicative Brand Names
1	CAPS/TAB - ANTI COAGULANTS/ANTI-THROMBOTICS	Acetyl Salicylic Acid (Aspirin) Caps/Tab. 75mg.	Such As: ASA 75mg, Aspirin 75mg, Eprin 75mg, Sprin 75mg, etc.
2	CAPS/TAB - ANTI COAGULANTS/ANTI-THROMBOTICS	Acetyl Salicylic Acid (Aspirin) Caps/Tab. 100mg.	Such As: Aspin Tab. 100mg, Manospirin Tab., Colsprin Tab., Alpyrin Tab., etc.
3	CAPS/TAB - ANTI COAGULANTS/ANTI-THROMBOTICS	Acetyl Salicylic Acid (Aspirin) Caps/Tab. 150mg.	Such As: Ecosprin 150 Tab., Vasoprin Tab., Manosprin ER Tab., Nusprin Tab., etc.
4	CAPS/TAB - NON-OPOID ANALGESIC	Acetyl Salicylic Acid (Aspirin) Caps/Tab. 300mg.	Such As: Aspirin 300mg., etc.
5	CAPS/TAB - NON-OPOID ANALGESIC	Acetyl Salicylic Acid (Aspirin) Caps/Tab. 325mg.	Such As: Ecosprin 325 Tab., Cotasprin Tab., etc.
6	CAPS/TAB - NON-OPOID ANALGESIC	Acetyl Salicylic Acid (Aspirin) Caps/Tab. 500mg.	Such As: Aspirin 500mg, Otaspirin, etc.
7	CAPS/TAB - DRUGS ACTING ON JOINTS	Allopurinol Caps/Tab. 100mg.	Such As: Galoric Tab., Zyloric 100 Tab., Purinol Tab., Ranloric Tab., etc.
8	CAPS/TAB - DRUGS ACTING ON JOINTS	Allopurinol Caps/Tab. 300mg.	Such As: Zyloric 300 Tab., Aloric 300 Tab., Purinol Tab., Alloric Tab., etc.
9	CAPS/TAB - ANTI DEPRESSANTS	Amitriptyline Caps/Tab. 10mg.	Such As: Valine 10 Tab., Amitor 10 Tab., Raitrip 10mg., Amiline Tab., etc.
10	CAPS/TAB - ANTI DEPRESSANTS	Amitriptyline Caps/Tab. 25mg.	Such As: Amitryp 25 Tab., Amoten 25 Tab., Tryptomer 25mg. Tab., etc.
11	CAPS/TAB - ANTI DEPRESSANTS	Amitriptyline Caps/Tab. 50mg.	Such As: Tryp 50mg. Tab., Amypres 50mg. Tab., Tridep Tab., Amitor Tab., etc.
12	CAPS/TAB - ANTI DEPRESSANTS	Amitriptyline Caps/Tab. 75mg.	Such As: Tridep 75mg, Tryp 75mg, Amypres 75mg. Tab., Amitor 75 Tab., etc.
13	CAPS/TAB - ANTI-HYPERTENSIVES	Amlodipine Caps/Tab. 2.5mg.	Such As: Amlokind 2.5mg, Numlo 2.5mg, Ampine Tab., Myodipine Tab., etc.
14	CAPS/TAB - ANTI-HYPERTENSIVES	Amlodipine Caps/Tab. 5mg.	Such As: Amlomay Tab., LAMA 5 Tab., Stamlo 5mg. Tab., Amdep 5 Tab., etc.
15	CAPS/TAB - ANTI-HYPERTENSIVES	Amlodipine Caps/Tab. 10mg.	Such As: Amodep 10mg, Amlokind 10mg, Neocard 10 Tab., Amlokos 10 Tab., etc.
16	CAPS/TAB – ANTIBIOTICS	Amoxycillin Caps/Tab. 250mg.	Such As: Idimox 250 Tab., Remox 250mg, Dynamox 250 Cap., Moxybiotic 250 Tab., etc.
17	CAPS/TAB – ANTIBIOTICS	Amoxycillin Caps/Tab. 500mg.	Such As: Idimox 500 Tab., Delamin 500mg, Mormox 500 Cap., Amoxil 500 Cap., etc.
18	SYRUP/SUSPENSION – ANTIBIOTICS	Amoxycillin Syp/Susp. 250mg./5ml.	Such As: Moxired Syp., Mox 250 Syp., Elmox 250 Syp., etc.
19	CAPS/TAB - BETA BLOCKERS	Atenolol Caps/Tab. 50mg.	Such As: Aten 50mg. Tab., Cardinol Tab., Atekind 50 Tab., Telol 50 Tab., etc.
20	CAPS/TAB - BETA BLOCKERS	Atenolol Caps/Tab. 100mg.	Such As: Beta 100mg, Atcardil 100mg, Atelol 100 Tab., Partenol 100 Tab., etc.
21	CAPS/TAB - HYPOLIPIDAEMIC DRUG	Atorvastatin Caps/Tab. 10mg.	Such As: ATV 10 Tab., Lipicure TZ Tab., Relextor 10 Tab., Rosustat 10 Tab., etc.
22	CAPS/TAB - HYPOLIPIDAEMIC DRUG	Atorvastatin Caps/Tab. 20mg.	Such As: Atorin 20 Tab., Zimostat 20 Tab., Stator 20mg. Tab., Avas 20mg. Tab., etc.
23	CAPS/TAB - HYPOLIPIDAEMIC DRUG	Atorvastatin Caps/Tab. 40mg.	Such As: Stator 40mg, Tonact 40mg, Aztor 40 Tab., Storvas 40 Tab., etc.

Sl. No.	Sub Category Name	Generic Name	Indicative Brand Names
24	CAPS/TAB – ANTIBIOTICS	Azithromycin Caps/Tab. 250mg.	Such As: A Thromicin 250 CapTab., Benzithro 250 CapTab., Rowin 250, Tab., Aziwok 250 Tab., etc.
25	CAPS/TAB – ANTIBIOTICS	Azithromycin Caps/Tab. 500mg.	Such As: A Thromicin 500 CapTab., Rowin 500 Tab., Zithromax Tab., Azyxin 500 Tab., etc.
26	SYRUP/SUSPENSION – ANTIBIOTICS	Azithromycin Syp/Susp. 200mg./5ml.	Such As: Bactrocin Susp., Azest Susp., Azysafe Susp., Azibact Syp., etc.
27	LOTION - SCABICIDES/PEDICULOCIDES & ANTI-DANDRUFF	Benzyl Benzoate Lotion 25% -100ml.	
28	CAPS/TAB – MINERALS	Calcium Carbonate Caps/Tab. 250mg.	Such As: Calcium Sandoz 250mg), Bonycal 250mg, Intacia 250mg., Cal D 250 Tab., etc.
29	CAPS/TAB – MINERALS	Calcium Carbonate Caps/Tab. 500mg.	Such As: Bonycal 500mg, Calcium Sandoz 500mg, Cal D 500 Tab., Rocal 500 Tab., etc.
30	CAPS/TAB - ALLERGIC DISORDERS	Cetirizine Caps/Tab. 10mg.	Such As: Cetizine 10mg Tab., Defal 10mg. Tab., Idicot 10mg. Tab., Cetirizine 10 Tab., etc.
31	SYRUP/SUSPENSION - ALLERGIC DISORDERS	Cetirizine Syp/Susp. 5mg./5ml. -60ml.	
32	CAPS/TAB - ANTI-MALARIAL	Chloroquine Caps/Tab. 150mg.	Such As: Lariago 250mg, Chloroquin 250mg, etc.
33	SYRUP/SUSPENSION - ANTI-MALARIAL	Chloroquine Syp/Susp. 50mg./5ml.	Such As: Hiquine Syp., Mediquine Syp., etc.
34	CAPS/TAB - ALLERGIC DISORDERS	Chlorpheniramine Maleate Caps/Tab. 4mg.	Such As: Cadistin 4mg Tab., CPM 4mg Tab., Piriton 4mg. Tab., Chlorphenermine 4mg Tab., etc.
35	SYRUP/SUSPENSION - ALLERGIC DISORDERS	Chlorpheniramine Maleate Syp/Susp. 2mg./5ml.	Such As: Polaramine 50ml, Trigenic Drops 15ml, etc.
36	CAPS/TAB – VITAMINS	Cholecalciferol (Vit. D3) Caps. 1000IU.	Such As: Uprise D3 Caps., Romical Plus., etc.
37	SACHET – VITAMINS	Cholecalciferol (Vit. D3) Sachet 60,000IU.	Such As: Mcirol 60000U. Sachet, Calcirol 1gm, D3 Up. Sachet., Caldikind Sachet, etc.
38	CAPS/TAB – ANTIBIOTICS	Ciprofloxacin Caps/Tab. 250mg.	Such As: Ciporal 250 Tab., Ciprobid 250mg, Cipropus 250 Tab., Zoxan 250 Tab., etc.
39	CAPS/TAB – ANTIBIOTICS	Ciprofloxacin Caps/Tab. 500mg.	Such As: Cifran 500 Tab., Ciplox 500mg. Tab., Ciporal 500 Tab., Ceplox 500 Tab., etc.
40	SYRUP/SUSPENSION – ANTIBIOTICS	Ciprofloxacin Syp/Susp. 250mg./5ml.	Such As: Ciprodex 60ml., Suncip 50ml., Ziprex 60ml., Rebac Syp., etc.
41	EYE DROPS – EYE	Ciprofloxacin Eye/Ear Drop 0.3%	Such As: Zoxan EyeDrop -5ml., Cifran Eye/Ear Drop, Ciporal Eye/Ear Drop -5ml., Ciprowin Eye/Ear Drop, etc.
42	CREAM/OINT/GEL – EYE	Ciprofloxacin Eye Cream/Oint/Gel. 0.3%	Such As: Ciplox Eye Oint. -5gm., Ciprofloxacin Eye Oint. 0.3%, Daplox Eye Oint. -5gm., Adiflox Eye Oint., etc.
43	CAPS/TAB - LOCAL DRUGS FOR VAGINA AND CERVIX	Clotrimazole VaginalTab. 100mg.	Such As: Clogen 100mg, Nuforce V6 100mg, Clotromin V6 Tab., Fungnil V 100 Tab., etc.
44	CREAM/OINT/GEL - TOPICAL ANTIFUNGAL	Clotrimazole Cream/Oint/Gel. 1%	Such As: Canazole Skin Cream 15gm, Surfaz Skin Cream 15gm, Czole Cream, Imidil Plus Cream, etc.
45	EAR DROPS – EAR	Clotrimazole EarDrop 1%	Such As: Surfaz EarDrop -10ml., , , , etc.
46	CAPS/TAB – ANTIBIOTICS	Cloxacillin Caps/Tab. 250mg.	Such As: Ampoxin 250mg, Clopen 250 Cap., Neoclox 250 Cap., Klox 250 Cap., etc.
47	CAPS/TAB – ANTIBIOTICS	Cloxacillin Caps/Tab. 500mg.	Such As: Nodimox Plus 500mg, Klox 500 Cap., Neoclox 500 Cap., Clopen 500 Cap., etc.
48	SYRUP/SUSPENSION – ANTIBIOTICS	Cloxacillin Dry Syp/Susp. 125mg./5ml.	Such As: Maxclox Dry Syp., Polyklox Dry Syp., Clopen Syp., Klox Syp., etc.
49	CAPS/TAB – ANTIBIOTICS	Cotrimoxazole (Trimethoprim 80mg. and Sulphamethoxazole 400mg.) Caps/Tab.	Such As: Septran Tab., etc.
50	CAPS/TAB – ANTIBIOTICS	Cotrimoxazole (Trimethoprim 160mg. and Sulphamethoxazole 800mg.) Caps/Tab.	Such As: Duocidal DS Tab., Sepmax DS Tab., etc.

<b>Sl. No.</b>	<b>Sub Category Name</b>	<b>Generic Name</b>	<b>Indicative Brand Names</b>
51	SYRUP/SUSPENSION - ANTIBIOTICS	Cotrimoxazole Syp/Susp.- Trimethoprim 40mg., Sulphamethoxazole 200mg. (Per 5ml) -Syp/Susp. -60ml.	Such As: Methoxaprim Susp. ~60ml., etc.
52	CAPS/TAB – CORTICOSTEROIDS	Dexamethasone Caps/Tab. 0.5mg.	Such As: Dexacip 0.5mg, Decicort 0.5mg, Wymesone 0.5mg., Dexasone 0.5mg., etc.
53	CAPS/TAB - NON-OPOID ANALGESIC	Diclofenac Sodium Caps/Tab. 50mg.	Such As: Idinac 50mg. Tab., Voveran 50 Tab., Haloran 50 Tab., Runac 50 Tab., etc.
54	INJ - NON-OPOID ANALGESIC	Diclofenac Sodium Inj. 25mg./ml.	Such As: Dicloveron 25 Inj. -3ml., Dicolab 25 Inj. -3ml., Dicor 25 Inj. -3ml., Voveran Inj. -3ml., etc.
55	CAPS/TAB - ANTI-SPASMODIC/DRUGS MODIFYING INTESTINAL MOTILITY	Dicyclomine HCl. Caps/Tab. 10mg.	Such As: Diopspas Tab. 10mg, Efespas Tab. 10mg, etc.
56	SYRUP/SUSPENSION - ANTI-SPASMODIC/DRUGS MODIFYING INTESTINAL MOTILITY	Dicyclomine HCl. Syp/Susp. 10mg./5ml. - 30ml.	Such As: Meftal Spas Drops 10ml, Cyclopam Susp 30ml, Cymotin Drops., etc.
57	CAPS/TAB - ANTI EMETICS	Domperidone Caps/Tab. 10mg.	Such As: Domstal 10 Tab., Redom 10 Tab., Nudom 10 Tab., Vomidon 10 Tab., etc.
58	SYRUP/SUSPENSION - ANTI EMETICS	Domperidone Syp/Susp. 1mg./ml. -60ml.	Such As: Domstal 30ml, Vomistop 30ml, Tridom 30ml., Normetic 30ml., etc.
59	CAPS/TAB – ANTIBIOTICS	Doxycycline Caps/Tab. 100mg.	
60	SYRUP/SUSPENSION – ANTIBIOTICS	Doxycycline Dry Syp/Susp. 50mg./5ml.	Such As: Doxicip 10ml, Minicycline 30ml, etc.
61	CAPS/TAB - HAEMATINICS/ERYTHROPOIETICS	Ferrous Salt Eqv. To Elem. Iron 60mg. Caps/Tab.	
62	SYRUP/SUSPENSION - HAEMATINICS/ERYTHROPOIETICS	Colloidal Iron Eqv. To Elem. Iron 250mg., Folic Acid 500mg., Vit. B12 5mcg. (Per ml.) - Drops	Such As: Tonoferon Drops, Feritin 150ml, etc.
63	CAPS/TAB - VASO CONSTRICTOR/MIGRAINE	Flunarizine Caps/Tab. 5mg.	Such As: Migrazine 5mg, Migarid 5mg, Nariz 5mg. Tab., Flunarin 5mg. Tab., etc.
64	CAPS/TAB - VASO CONSTRICTOR/MIGRAINE	Flunarizine Caps/Tab. 10mg.	Such As: Fluzin Tab., Migazin Tab., Nariz 10mg. Tab., Flunarin 10mg. Tab., etc.
65	CAPS/TAB – VITAMINS	Folic Acid Caps/Tab. 5mg.	Such As: Folitab 5mg. Tab., Folvite 5 Tab., Facitab 5mg., Neofol 5mg., etc.
66	CREAM/OINT/GEL - ANTI INFECTIVE PREPARATIONS	Framycetin Sulph. Cream/Oint/Gel. 1%	Such As: Soframycin Cream -30gm., Soframycin -20gm., etc.
67	CAPS/TAB – DIURETICS	Furosemide Caps/Tab. 40mg.	Such As: Frunex Tab., Lasix 40 Tab., Lasiwin Tab., etc.
68	SYRUP/SUSPENSION - URINARY SYSTEM	Furosemide Syp/Susp. 10mg./ml.	Such As: Furaped Syp. 10mg./ml. - 30ml., Fursimide Syp. -30ml., etc.
69	INJ – DIURETICS	Furosemide Inj. 10mg./ml.	Such As: Fru 20 Inj. -2ml., Frunex Inj. - 2ml., Frusix Inj. -2ml., Lasix 10mg. Inj. - 2ml., etc.
70	EYE DROPS – EYE	Gentamicin Eye/Ear Drop 0.3%	Such As: Genteye Eye/ear Drop, Meringenta Eye/Ear Drop, Norget EyeDrop, Gentalab Drop, etc.
71	CAPS/TAB - HYPO-GLYCAEMICS	Glimepiride Caps/Tab. 1mg.	Such As: Idiglim 1 Tab., Zimeprid 1 Tab., Prichek 1 Tab., Ziglim 1 Tab., etc.
72	CAPS/TAB - HYPO-GLYCAEMICS	Glimepiride Caps/Tab. 2mg.	Such As: Bryl 2 Tab., Rhypiride 2 Tab., Zimeprid 2 Tab., Ziglim 2 Tab., etc.
73	CAPS/TAB – DIURETICS	Hydrochlorothiazide Caps/Tab. 12.5mg.	Such As: Aquazide 12.5mg. Tab., Xenia 12.5mg. Tab., Hydrazide 12.5 Tab., Hydride 12.5 Tab., etc.
74	CAPS/TAB – DIURETICS	Hydrochlorothiazide Caps/Tab. 25mg.	Such As: Bpzide 25 Tab., Xenia 25mg. Tab., Bezide 25mg. Tab., Hydrazide 25 Tab., etc.
75	CAPS/TAB - ANTI-SPASMODIC/DRUGS MODIFYING INTESTINAL MOTILITY	Hyoscine Butyl Br. Caps/Tab. 10mg.	Such As: Decolic Tab., Buscopan 10 Tab., Hyoswift 10 Tab., Hyospan Tab., etc.
76	CAPS/TAB - NON-OPOID ANALGESIC	Ibuprofen Caps/Tab. 200mg.	Such As: Brufen 200mg. Tab., IBF 200mg. Tab., Ibupal 200 Tab., Rebufen 200 Tab., etc.

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77	CAPS/TAB - NON-OPOID ANALGESIC	Ibuprofen Caps/Tab. 400mg.	Such As: Brufen 400mg. Tab., IBF 400mg. Tab., Ibupal 400 Tab., Rebufen 400 Tab., etc.
78	SYRUP/SUSPENSION - NON-OPOID ANALGESIC	Ibuprofen Syp/Susp. 100mg./5ml. -60ml.	Such As: Brufen Susp. 100mg./5ml. -60ml., Gesic Susp. -60ml., Ibuswiss Susp. -60ml., Ibugesic 60ml., etc.
79	CAPS/TAB - ANTI-ANGINAL DRUGS	Iso Sorbide Dinitrate Tab. 5mg.	Such As: Anzidin 5 Tab., Isordil 5 Tab., Sorbitrate 5mg. Tab., Ditrade 5mg., etc.
80	CAPS/TAB - ANTI-ANGINAL DRUGS	Iso Sorbide Dinitrate Tab. 10mg.	Such As: Anzidin 10 Tab., Sorbitrate 10mg. Tab., Isordil 10 Tab., Ditrade 10mg., etc.
81	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 12.5mcg.	Such As: Thyrox 12.5mcg , Thyronorm 12.5mcg, etc.
82	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 25mcg.	Such As: Eltroxin 25mcg. Tab., Thyrox Tab. 25mcg., Thyrowin 25mcg., Lethyrox 25mcg., etc.
83	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 50mcg.	Such As: Thyrox Tab. 50mcg., Eltroxin 50mcg. Tab., Thyrochek 50 Tab., Lethyrox 50mcg., etc.
84	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 75mcg.	Such As: Eltroxin 75mcg. Tab., Lethyrox 75mcg, Thyroup 75mcg., Thyrofilt 75mcg. Tab., etc.
85	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 62.5mcg	Such As: Thyronorm Tab. 62.5mcg, etc.
86	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps Tab 88mcg	Such As: Lethyrox Tab. 88mcg., etc.
87	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 100mcg.	Such As: Thyrox Tab. 100mcg., Eltroxin 100mcg. Tab., Thyrochek 100 Tab., Lethyrox 100mcg., etc.
88	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 125mcg.	Such As: Eltroxin 125mcg, Thyronorm 125mcg, Thyrox Tab. 125mcg., Thyrosec Tab. 125mcg., etc.
89	CAPS/TAB - THYROID AND ANTI THYROID DRUGS	Thyroxine Sodium Caps/Tab. 150mcg.	Such As: Thyronorm 150mcg, Thyrox 150mcg, etc.
90	CAPS/TAB – ANTHELMINTICS	Mebendazole Caps/Tab. 100mg.	Such As: Idibend 100mg. Tab., Mebex Tab. 100mg., Mebazole 100 Tab., Mendazole 100 Tab., etc.
91	SYRUP/SUSPENSION - ANTHELMINTICS	Mebendazole Syp/Susp. 100mg./5ml.	Such As: Mebex Susp. 30ml, Idibend Susp., Nuzole Susp., Wormin Susp., etc.
92	CAPS/TAB - HYPO-GLYCAEMICS	Metformin Caps/Tab. 500mg.	Such As: Glyciphage (500 mg), Glycomet 500mg, Sertformin 500 Tab., Metlife 500 Tab., etc.
93	CAPS/TAB - HYPO-GLYCAEMICS	Metformin Caps/Tab. 750mg.	Such As: Glycomet 1000mg, Glyrep 1000 Tab., Bigesens 1000 Tab., Metsafe 1000 Tab., etc.
94	CAPS/TAB - HYPO-GLYCAEMICS	Metformin Caps/Tab. 1gm.	Such As: Gluconorm SR 500mg, Glyciphage SR 500mg, Forminal SR 500 Tab., Glyrep XL 500 Tab., etc.
95	CAPS/TAB - HYPO-GLYCAEMICS	Metformin SRCaps/Tab. 500mg.	Such As: Forminal 1000 SRTab., Glycomet 1gm. SRTab., Glyzet SRTab., Zoform SR 1000 Tab., etc.
96	CAPS/TAB - HYPO-GLYCAEMICS	Metformin SRCaps/Tab. 750mg.	Such As: Flagyl 200 Tab., Metrogyl 200 Tab., Metgyl 200 Tab., Ambizol 200 Tab., etc.
97	CAPS/TAB - HYPO-GLYCAEMICS	Metformin SR Caps/Tab. 1gm.	Such As: Flagyl 400 Tab., Metrogyl 400 Tab., Metgyl 400 Tab., Ambizol Forte Tab., etc.
98	CAPS/TAB – ANTIBIOTICS	Metronidazole Caps/Tab. 200mg.	Such As: Metrazole Susp., Metrogyl Paediatric Syp., Metrogyl Susp. -60ml., Metron 200 Susp., etc.
99	CAPS/TAB – ANTIBIOTICS	Metronidazole Caps/Tab. 400mg.	Such As: Furadantin 100mg. Caps., Urifast Caps., Marifur 100 Tab., Urinif 100 Tab., etc.
100	SYRUP/SUSPENSION – ANTIBIOTICS	Metronidazole Syp/Susp. 200mg./5ml.	Such As: Nitrofurantoin Syp/Susp. 25mg./5ml.
101	CAPS/TAB – ANTIBIOTICS	Nitrofurantoin Caps/Tab. 100mg.	
102	SYRUP/SUSPENSION – ANTIBIOTICS	Nitrofurantoin Syp/Susp. 25mg./5ml.	

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103	SACHET - REHYDRATION SALTS	ORS (WHO Formula)- Sodium Chloride 2.6gm., Potassium Chloride 1.5gm., Sodium Citrate 2.9gm., Dextrose (Anhydrous) 13.5gm. - Sachet	Such As: Jeevanjal Sachet, ORS Powder, etc.
104	CAPS/TAB - NON-OPIOID ANALGESIC	Paracetamol Caps/Tab. 500mg.	Such As: Crocin 500 Tab., Calpol 500 Tab., Larkin 500 Tab., Paracin 500 Tab., etc.
105	CAPS/TAB - NON-OPIOID ANALGESIC	Paracetamol Caps/Tab. 650mg.	Such As: Febrex Tab. 650Mg., Dolo 650 Tab., Mormol 650 Tab., Metaplus 650 Tab., etc.
106	SYRUP/SUSPENSION - NON-OPIOID ANALGESIC	Paracetamol Syp/Susp. 125mg./5ml. -60ml.	Such As: Idimol Syp. -60ml. -IDPL, Pyrexil Syp. -60ml. -RDPL, P 125 Syp., Malidens Syp., etc.
107	SYRUP/SUSPENSION - NON-OPIOID ANALGESIC	Paracetamol Syp/Susp. 150mg./ml. -15ml.	Such As: Paracip Paed. Drops 150mg./ml. -15ml., Teplow Syp. 60ml., Medimol Drops., Pyrigesic Drops., etc.
108	CAPS/TAB - ANTI CONVULSANTS	Phenytoin Sodium Caps/Tab. 50mg.	Such As: Epsolin 50mg, C Toin 50mg, Atoin 50 Tab., Stoin 50 Tab., etc.
109	CAPS/TAB - ANTI CONVULSANTS	Phenytoin Sodium Caps/Tab. 100mg.	Such As: Ctoin 100 Tab., Phenytos Tab., Phentium Tab., Eptoин 100 Tab., etc.
110	CAPS/TAB - ANTI CONVULSANTS	Phenytoin Sodium ERCaps/Tab. 300mg.	Such As: Epipres ER (300 mg), C Toin ER (300 mg), Epsolin ER 300 Tab., etc.
111	CAPS/TAB - ANTI CONVULSANTS	Phenytoin Sodium Caps/Tab. 300mg.	Such As: Epsolin 300mg, Stoin 300mg, Phalin 300 Tab., etc.
112	SYRUP/SUSPENSION - ANTI CONVULSANTS	Phenytoin Syp/Susp. 30mg./5ml.	Such As: Eptoин Syp., etc.
113	SYRUP/SUSPENSION - ANTI CONVULSANTS	Phenytoin Sodium Syp/Susp. 25mg./ml. -100ml.	
114	CAPS/TAB – CORTICOSTEROIDS	Prednisolone Caps/Tab. 5mg.	Such As: Wysolone 5mg. Tab., Solon 5 Tab., Pred 5 Tab., Novapred 5 Tab., etc.
115	CAPS/TAB – CORTICOSTEROIDS	Prednisolone Caps/Tab. 10mg.	Such As: Delsone 10 Tab., Nephcorte 10 Tab., Pred 10 Tab., Novapred 10 Tab., etc.
116	CAPS/TAB – CORTICOSTEROIDS	Prednisolone Caps/Tab. 20mg.	Such As: Novapred 20 Tab., Acticort 20 Tab., Pednisol 20 Tab., Monocortil 20 Tab., etc.
117	SYRUP/SUSPENSION - CORTICOSTEROIDS	Prednisolone Syp/Susp. 5mg.	Such As: Omnacortil Srup, Elpred 60ml., Nucort P Syp., Kidpred Syp. 60ml., etc.
118	SYRUP/SUSPENSION - CORTICOSTEROIDS	Prednisolone Syp/Susp. 15mg./5ml.	Such As: Omnacortil Forte Syp. -60ml., Predon Forte Syp., Besone Forte Syp., etc.
119	CAPS/TAB - ANTI-MALARIAL	Primaquine Caps/Tab. 2.5mg.	Such As: Leopprime Kid 2.5 Tab., PMQ 2.5 Tab., Malirid DT 2.5 Tab., etc.
120	CAPS/TAB - ANTI-MALARIAL	Primaquine Caps/Tab. 7.5mg.	Such As: Malarid Tab., Primal 7.5 Tab., Pquine 7.5 Tab., Primax 7.5 Tab., etc.
121	CAPS/TAB - ANTI-MALARIAL	Primaquine Caps/Tab. 15mg.	Such As: Rhyquin 15 Tab., Primax 15 Tab., Pimaquin 15 Tab., Leopprime Forte 15 Tab., etc.
122	CAPS/TAB - BETA BLOCKERS	Propranolol HCl. Caps/Tab. 10mg.	Such As: Ponol Tab. 10mg., Betabloc 10 Tab., Corbeta 10 Tab., Peeler 10 Tab., etc.
123	CAPS/TAB - ANTI-HYPERTENSIVES	Ramipril Caps/Tab. 2.5mg.	Such As: Ramichek 2.5 Tab., Raminor 2.5 Tab., Raptopin 2.5 Tab., Saface 2.5 Tab., etc.
124	CAPS/TAB - ANTI-HYPERTENSIVES	Ramipril Caps/Tab. 5mg.	Such As: Ramipres 5 Tab., Cardace 5 Tab., Hopace 5 Tab., Saface 5 Tab., etc.
125	CAPS/TAB - H2 BLOCKERS AND ULCER HEALING DRUGS	Ranitidine Caps/Tab. 150mg.	Such As: Idiran 150 Tab., Rantac 150mg. Tab., Renit 150 Tab., Lantac 150 Tab., etc.
126	SYRUP/SUSPENSION - H2 BLOCKERS AND ULCER HEALING DRUGS	Ranitidine Syp/Susp. 75mg./5ml.	Such As: Rantac Syp. -30ml., Rantac Syp. -100ml., etc.
127	CAPS/TAB – BRONCHODILATORS	Salbutamol Caps/Tab. 2mg.	Such As: Salmaplon 2 Tab., Salbetol Tab. 2mg., Brosol 2 Tab., Asmanil 2 Tab., etc.

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128	CAPS/TAB – BRONCHODILATORS	Salbutamol Caps/Tab. 4mg.	Such As: Asthalin Tab. 4mg., Salbetol Tab. 4mg., Salnaplon 4 Tab., Brosol 4 Tab., etc.
129	SYRUP/SUSPENSION - BRONCHODILATOR	Salbutamol Syp/Susp. 2mg./5ml.	Such As: Asthawin Syp -100ml., Medisal Syp. -100ml., Hydastha 2 Syp. -100ml., Salbugal Syp. -100ml., etc.
130	INHALER – INHALERS	Salbutamol Inhaler 100mcg.	Such As: Asthalin 100mcg. Inhaler, Bronkonat 100mcg. Inhaler, Vent Inhaler 100mcg. Inhaler, Derihaler 100mcg. Inhaler, etc.
131	CREAM/OINT/GEL - ANTI INFECTIVE PREPARATIONS	Silver Sulphadiazine Cream/Oint/Gel. 1%	Such As: Silvirin Cream 1% -20gm., Silvindon Cream 1% -20gm., Waifel Cream 1% -20gm., Silvular Cream 1% -25gm., etc.
132	CAPS/TAB - ANTI CONVULSANTS	Sodium Valproate Caps/Tab. 200mg.	Such As: Valate 200 Tab., Velze 200 Tab., Epival EC 200 Tab., Torvate 200 Tab., etc.
133	CAPS/TAB - ANTI CONVULSANTS	Sodium Valproate and Valproic Acid Caps/Tab. 300mg.	Such As: Torvate 300 Tab., Valtec 300 Tab., Velze 300 Tab., Napilex 300 Tab., etc.
134	CAPS/TAB - ANTI CONVULSANTS	Sodium Valproate Caps/Tab. 500mg.	Such As: Encorate 500mg. Tab., Epilex 500 Tab., Torvate 500 Tab., Valpro EC 500 Tab., etc.
135	CAPS/TAB - ANTI CONVULSANTS	Sodium Valproate and Valproic Acid CR Caps/Tab. 300mg.	Such As: Valprid CR Tab. 300mg., Encorate Chrono CR 300mg., Valcot CR 300mg., Valric CR 300 Tab., etc.
136	CAPS/TAB - ANTI CONVULSANTS	Sodium Valproate and Valproic Acid CR Caps/Tab. 500mg.	Such As: Valprid CRTab. 500mg., Valpin 500 CRTab., Va. CRTab. 500mg., Valate Chrono 500 CRTab., etc.
137	SYRUP/SUSPENSION - ANTI CONVULSANTS	Sodium Valproate Syp/Susp. 200mg./5ml.	Such As: Valate Syp. -100ml., Valparin 200 Syp. -100ml., Valpor Syp. -100ml., Encorate 200 Syp., etc.
138	CAPS/TAB – DIURETICS	Spironolactone Caps/Tab. 25mg.	Such As: Aldactone 25mg. Tab., etc.
139	CAPS/TAB – DIURETICS	Spironolactone Caps/Tab. 50mg.	Such As: Aldactone 50mg. Tab., etc.
140	EYE DROPS – EYE	Sulphacetamide EyeDrop 10%	Such As: Albucid 10% Eye Drops, Bleph 10% Eye Drop, Suncetamide 10% Eye Drop, Optacid 10% Eye Drop, etc.
141	EYE DROPS – EYE	Sulphacetamide EyeDrop 15%	
142	VACCINE – VACCINE	Vaccine - Tetanus Toxoid (Adsorbed) Inj. -0.5 ml.	Such As: Bett Inj. -0.5 ml., Tetvac vaccine, etc.
143	CAPS/TAB - HAEMOSTATICS/ COAGULANTS	Tranexamic Acid Caps/Tab. 500mg.	Such As: Trasmic 500ng. Tab., Trasmic Tab., Xamic 500 Tab., Texakind 500 Tab., etc.
144	CAPS/TAB – VITAMINS	Vit. A Caps. 5000IU.	
145	CAPS/TAB – VITAMINS	Vit. A Caps. 50000IU.	
146	CAPS/TAB – VITAMINS	Vit. A Caps. 100000IU.	
147	SYRUP/SUSPENSION – VITAMINS	Vit. A Syp/Susp. 100000IU./ml.	
148	NOSE DROPS – NOSE	Xylometazoline NasalDrop 0.05%	Such As: Cirovin 0.05 NasalDrop, Noxyvin 0.05% NasalDrop, Orinase P NasalDrop, Otrivin Paed NasalDrop, etc.
149	NOSE DROPS – NOSE	Xylometazoline NasalDrop 0.1%	Such As: Nasibest NasalDrop, Noxyvin 0.1% NasalDrop, Orinase 0.1% NasalDrop, Xylomet NasalDrop, etc.
150	SYRUP/SUSPENSION - ANTITUSSIVE	Cough Syp/Susp.- Dextromethorphan 10mg., Phenylpropanolamine 12.5mg., Guaiaphenesin 50mg. -Syp/Susp. -100ml.	Such As: Expect D Cough Syp. -100ml., etc.
151	SYRUP/SUSPENSION - ANTITUSSIVE	Cough Syp/Susp.- Dextromethorphan HBr. 10mg., Chlorpheniramine Maleate 4mg., Phenylpropylamine 12.5mg., Guaiaphenesin 100mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Aldex Syp. -100ml., etc.
152	SYRUP/SUSPENSION - ANTITUSSIVE	Cough Syp/Susp.- Dextromethorphan HBr. 10mg., Triprolidine HCl. 1.25mg., Phenylpropanolamine 12.5mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Actifed DM Syp. -100ml., etc.

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153	SYRUP/SUSPENSION - ANTITUSSIVE	Cough Syp/Susp.- Noscapine 1.83mg., Citric Acid 5.8mg., Ammonium Chloride 7mg., Sodium Citrate 0.67mg. (per ml.) -Syp/Susp.	Such As: Hi Scopine Paediatric Syp., etc.
154	SYRUP/SUSPENSION - ANTITUSSIVE	Cough Syp/Susp.- Noscapine 15mg., Chlorpheniramine Meleate 2.5mg., Guaiphenesin 100mg., Sodium Citrate 60mg. -Syp/Susp.	Such As: Apdyl Syp., Cemadil G Syp., Himaleate Syp., etc.
155	SYRUP/SUSPENSION - ANTITUSSIVE	Cough Syp/Susp.- Noscapine 7mg., Chlorpheniramine Maleate 2mg., Ammonium Chloride 28mg., Sodium Citrate 3.25mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Coscopin Linctus Syp. -100ml., etc.
156	SYRUP/SUSPENSION - ANTITUSSIVE	Paediatric Cough Syp/Susp.- Noscapine 1.83mg., Sodium Citrate 0.67mg., Ammonium Chloride 7mg. (per 5ml.) -Syp/Susp. -50ml.	Such As: Conscopin Paed Syp. -50ml., etc.
157	SYRUP/SUSPENSION - ANTITUSSIVE	Paediatric Cough Syp/Susp.- Promethazine HCl. 1.5mg., Pholcodine 1.5mg. (per 5ml.) -Syp/Susp.	Such As: Tixylix Cough Linctus Syp., Coscopin Paediatric Syp. -50ml., etc.
158	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Salbutamol 2mg., Ambroxol HCl. 3mg., Guaiphenesin 100mg., Menthol 5mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Cofsol Syp. -100ml., etc.
159	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Salbutamol 2mg., Bromhexine 4mg. (per 5ml.) -Syp/Susp. -60ml.	Such As: Salmodil Bronchodilator Cough Syp. -60ml., etc.
160	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Salbutamol 2mg., Guaiphenesin 100mg. (per ml.) -Syp/Susp. -100ml.	Such As: Asthalin EXP Syp. -100ml., etc.
161	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline 1.25mg., Ambroxol HCl. 15mg., Guaiphenesin 50mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Arcuf plus Syp. -100ml., etc.
162	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline 1.25mg., Etophylline 50mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Etolin PD Syp. -100ml., etc.
163	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline 2.5mg., Bromhexine 8mg., Guaiphenesin 100mg., Menthol 1mg. (Per 10ml.) -Syp/Susp. -100ml.	Such As: Mucostop Syp. -100ml., etc.
164	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline Sulph. 1.25mg., Ambroxol HCl. 15mg., Guaiphenesin 50mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Suprivent A Syp. -100ml., etc.
165	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline Sulph. 1.25mg., Ambroxol HCl. 30mg., Guaiphenesin 50mg., Menthol 0.5mg. (per 5ml.) -Syp/Susp.	Such As: Ambrolite + S Syp. -100ml., Zen Expectorant Syp. -100ml., etc.
166	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline Sulph. 1.25mg., Bromhexine 400mg., Guaiphenesin 50mg., Menthol 2.5mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Chemidrex E Syp. -100ml., etc.
167	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline Sulph. 4mg., Bromhexine HCl. 8mg., Guaiphenesin 200mg. (Per 10ml.) -Syp/Susp.	Such As: Bromo GX Syp. -100ml., etc.
168	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Terbutaline Sulph. 4mg., Bromhexine HCl. 8mg., Guaiphenesin 200mg. (Per 5ml.) -Syp/Susp.	Such As: Brotaline Syp., Hextacin Syp., etc.

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169	SYRUP/SUSPENSION - BRONCHODILATOR	Bronchodilator Syp/Susp.- Theophylline 80mg., Ephedrine HCl. 12mg., Guaiphenesin 50mg., Alcohol 0.55ml. Absolute Alcohol Content 10.44% -Syp/Susp.	Such As: Hiphylate Elixir Syp., etc.
170	SYRUP/SUSPENSION - DECONGESTANTS/ANTIHISTAMINIC	Chlorpheniramine 4mg., Phenylpropanolamine HCl. 15mg., Paracetamol 500mg., Caffeine Anhyd. 30mg. (per 5ml.) -Syp/Susp. -60ml.	Such As: Decold Syp. -60ml., etc.
171	SYRUP/SUSPENSION - DECONGESTANTS/ANTIHISTAMINIC	Chlorpheniramine Maleate 2mg., Pseudoephedrine HCl. 15mg., Acetaminophen 125mg. (per 5ml.) -Syp/Susp. -60ml.	Such As: Cozymin Syp. -60ml., etc.
172	SYRUP/SUSPENSION - DECONGESTANTS/ANTIHISTAMINIC	Cough Syp/Susp.- Diphenhydramine HCl. Syp/Susp. 12.5mg./5ml. -100ml.	Such As: Benadryl Syp. -100ml., etc.
173	SYRUP/SUSPENSION - EXPECTORANT	Bromhexine Syp/Susp. 4mg./5ml.	Such As: Hibrome Syp. -100ml., Microxine Syp. -100ml., Mukotic Syp., Muku Syp. -100ml., etc.
174	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Ambroxol HCl. 30mg., Cetirizine HCl. 2.5mg. (per 5ml.) -Syp/Susp.	Such As: Tussel PX Syp. -100ml., etc.
175	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Ambroxol HCl. 30mg., Cetirizine HCl. 5mg. (per 5ml.) -Syp/Susp.	Such As: Ambrodex D Syp. -100ml., etc.
176	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Ambroxol HCl. Syp/Susp. 30mg./5ml.	Such As: Ambrodex D Syp. -100ml., etc.
177	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Bromhexine 4mg., Cetirizine Dihydrochloride 2.5mg., Phenylephrine 5mg., Guaiphenesin 50mg., Menthol 1mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Alcodex GC Syp. -100ml., Oxydyne Syp. -100ml., etc.
178	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Bromhexine HCl. 4mg., Terfenadine 30mg., Guaiphenesin 100mg. (per 5ml.) -Syp/Susp.	Such As: Alerpect Syp. -100ml., etc.
179	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Carboxamine Maleate 4mg., Ammonium Chloride 240mg., Sodium Citrate 240mg. (per 10ml.) -Syp/Susp.	Such As: Clistin Expectorant Syp., etc.
180	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Chlorpheniramine Maleate 2mg., Ammonium Chloride 100mg., Sodium Citrate 50mg., Menthol 0.25mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Apiphist Syp. -100ml., etc.
181	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Diphenhydramine 14mg., Ammonium Chloride 135mg., Sodium Citrate 57mg., Menthol 0.9mg. (per 5ml.) -Syp/Susp. -110ml.	Such As: Deacos Expectorant Syp. -110ml., Kofeas Expectorant Syp. -110ml., etc.
182	SYRUP/SUSPENSION - EXPECTORANT	Cough Expectorant- Diphenhydramine HCl. 15mg., Ammonium Chloride 138mg., Sodium Citrate 57.5mg., Menthol 0.75mg. (per 5ml.) -Syp/Susp. -100ml.	Such As: Histanil Syp. -100ml., etc.
183	CAPS/TAB – BRONCHODILATORS	Etophylline 77mg., Theophylline 23mg. - Caps/Tab.	Such As: Deriphylline 100mg. Tab., Duollin Tab., Etholline 100 Tab., Theotabillin 100 Tab., etc.
184	CAPS/TAB – ANTACID	Antacid Tab. -Dried Aluminium 300mg., Mag. Hydroxide 150mg., Simethicone 40mg. - Tab.	Such As: Siloxogel Tab., etc.
185	CAPS/TAB – ANTACID	Antacid Tab. -Dried Aluminium Hydroxide Gel 240mg., Mag. Hydroxide 100mg., Mag. Carbonate 60mg., Activated Dimethylcone 25mg. -Tab.	Such As: Diovol Tab., Alucil C Tab., Antacid D Tab., Litacid Tab., etc.
186	CAPS/TAB – ANTACID	Antacid Tab. -Dried Aluminium hydroxide Gel 250mg., Mag. Hydroxide 250mg., Methylpolysiloxane 50mg. -Tab.	Such As: Alusil Tab., etc.
187	CAPS/TAB – ANTACID	Antacid Tab. -Dried Aluminium Hydroxide Gel 300mg., Mag. Aluminium Silicate 50mg., Mag. Hydroxide 25mg., Simethicone 25mg. - Tab.	Such As: Digene Tab., Gelcid Tab., etc.

**TECHNICAL BID : E-TENDER**

**(Empanelment of CHEMIST under modified Insurance Medical Practitioner(mIMP)Scheme)**

1. Name full of the Chemist in BLOCK letters : \_\_\_\_\_
2. Name of Shop/Establishment : \_\_\_\_\_
3. Registration No : \_\_\_\_\_
4. Full Address: \_\_\_\_\_
  
5. Email ID : \_\_\_\_\_ Phone No : \_\_\_\_\_
  
6. Distance between notified area/District Headquarter and Clinic : \_\_\_\_\_
7. Date from which establish/shop is running in the locality : \_\_\_\_\_
8. Registration number :  
(a) Validity : \_\_\_\_\_  
(b) Name of Issuing Body : \_\_\_\_\_

**DECLARATION**

I, Dr./Shri/Smt. \_\_\_\_\_ (Name and address of the persons with whom MoU has to be signed) hereby declare that all the details/documents furnished above are true to the best of my knowledge. I also declare that my/our firm has not been blacklisted/debarred by any central/State Govt. Institutions/Organizations.

Date :

Place:

(Signature of the person)  
(Name, Designation and Address Stamp)

**ECS Mandate form**

**Chemist Details to receive payment through e-payment**

1. Name of the Chemist:
2. Address of the Chemist:
3. Telephone no of the Chemist:
4. Name of the Account Holder:
5. Bank Account No.:
6. Type of the account (S.B., Current or Cash Credit):
7. Name of the Bank :
8. Name of the branch :
9. Bank Address :
10. Bank Telephone No. :
11. MICR code number of the bank and branch:
12. IFSC code number of the Bank & branch

N. B. Please attach a blank cancelled cheque or photocopy of a cheque or front page of your bank passbook issued by your bank

I, hereby, declare that the particulars given above are correct and complete. If the transaction is delayed or not effected for reason of incomplete or incorrect information given by me as above, I would not hold the ESIC responsible.

Dated \_\_\_\_\_

( \_\_\_\_\_ )  
Signature of the Chemist

**FINANCIAL BID**

**(Empanelment of CHEMISTS under modified Insurance Medical Practitioner(mIMP) Scheme)**

1. \_\_\_\_\_ % rebate on the MRP printed on the Drugs/Medicine Package

**(Please Quote Your rebate in %)**

I, \_\_\_\_\_ hereby agree to accept the \_\_\_\_\_ % rebate on the MRP printed on the Drugs/Medicine Package and also agreed to all terms & conditions thereon.

Date :

Place :

(Signature of the person)

(Name, Designation and Address  
Stamp)



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