



**ODISHA STATE MEDICAL CORPORATION LTD.**  
(A Govt. of Odisha Undertaking)  
(Assuring Quality, Saving lives)

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Notification No. 3980

Date: 09-06-2023

**NOTICE**

**Sub : OSMCL –E- Tender for Supply of Drugs and Medical Consumables  
(Group-I) for the year 2023-24– Technical Bid Evaluation –status–  
Published – regarding.**

**Bid Ref. No. OSMCL/2023-24/DRUGS-DHS-GEN-I/02 dtd. 20.01.2023**

Technical bids submitted in response to the e-tender referred above for **Supply of Drugs and Medical Consumables (Group-I) for the year 2023-24** were opened on 28.02.2023 and scrutinized. The **provisional** list of eligible and rejected bidders with their items after technical bid evaluation is published at Annex – I , list of rejected bidders as a whole and not considered for evaluation is published at Annex – II and List of items not considered for evaluation is published at Annex – III. Representations, if any, on this notice should be submitted to the Tender Inviting Authority on or before **Dt: 13.06.2023, 5.00PM** from the publication of this notice through e-mail ([drugs-osmcl@gov.in](mailto:drugs-osmcl@gov.in)), after that no representation from any bidder will be taken for consideration.

**N.B.:** No new documents will be entertained /taken for consideration. Only the Bidder has to mention the **page No.** if already uploaded the document in the e-tender portal regarding the representation.

**Encl:** Annex – I  
Annex – II  
Annex – III

  
**GM Operations (D & S)**  
**OSMC Ltd., Odisha**

**Provisional list of Eligible and Rejected Bidders with their items  
for Drugs & Medical Consumables (Group - I) 2023 - 24.**

**Bid Reference No. : OSMCL/2023-24/DRUGS-DHS-GEN-GR-I/02**

**Annexure I**

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
<b>1</b>	<b>1 M/s. BIOLOGICAL E. LIMITED ,Hyderabad(Telangana)</b>			
1	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
2	D16035 Inj. Enoxaparin	40mg/(Amp./PFS)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
3	D23002 Inj. Snake Venom AntiSerum (Polyvalent) with diluents	10 ml/Vial (Lyphillised, Powder form)		Qualified.
4	D23005 Inj. Tetanus Toxoid (Adsorbed)	0.5 ml/Amp		Qualified.
5	D23020 Inj. Hepatitis B-Vaccine	20 mcg /ml		Qualified.
<b>2</b>	<b>2 M/s. BAXTER (INDIA) PVT. LTD. ,Gurgaon (Haryana)</b>			
1	D01023 Sevoflurane	99.97%		Qualified.
<b>3</b>	<b>3 M/s. SREE RAYALASEEMA HI-STRENGTH HYPO LTD. ,Kurnool (AP)</b>			
1	D31014 Bleaching Powder	Not Less than 30% w/v available Chlorine	Not considered for Evaluation as per Notification No. MSME-PFS-MISC-0018-2023-3116/MSME,BBSR Dt. 29/04/2023.	Not Qualified
<b>4</b>	<b>4 M/s. ASPEN LABORATORIES PVT. LTD. ,Delhi</b>			
1	S02110 Bivalent Rapid Diagnostic Test Kit	As per tender specification		Qualified.
<b>5</b>	<b>5 M/s. SWISS GARNIER LIFESCIENCES ,Chennai(Tamilnadu)</b>			
1	D07004 Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
2	D07016 Tab. Clobazam (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
3	D17032 Tab. Telmisartan (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
4	D17082 Tab. Fenofibrate (Aluminium foil/Blister pack)	160mg/Tab Micronised Tablet	No Drug Endorsement (Specification not matching as Micronised Tab.)	Not Qualified.
5	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
<b>6</b>	<b>6 M/s. GRIFOLS INDIA HEALTHCARE PRIVATE LIMITED ,Gurgoan (Haryana)</b>			
1	D16032 Factor VIII (with diluents in plastic or glass container)	250 IU / Vial (As per EDL Specification)	No Market Standing (T8 signed by DI instead of DC) as per clause No. 5.2.9.	Not Qualified.
2	D16033 Factor VIII (with diluents in plastic or glass container)	500 IU / Vial (As per EDL Specification)	No Market Standing (T8 signed by DI instead of DC) as per clause No. 5.2.9.	Not Qualified.
3	D16034 Factor IX (with diluents in plastic or glass container)	600 IU / Vial (As per EDL Specification)	No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 5.2.1., 5.2.2. & 5.2.9. respectively.	Not Qualified.
4	D40002 Inj. Human Albumin IV	20%	No Market Standing (T8 signed by DI instead of DC) as per clause No. 5.2.9.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**7 M/s. ZYDUS HEALTHCARE LIMITED ,Mumbai (Maharashtra)**

1	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
2	D16002	Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab	No Drug Endorsement (License No differ in DE & T8) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
3	D17015	Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
4	D17052	Tab. Nifedipine Sustained Release (SR) (Aluminium foil/Blister pack)	20mg/SR Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
5	D20013	Tab. Metolazone (Aluminium foil/Blister pack)	2.5mg / Tab.		Qualified.
6	D26008	Tab. Norethisterone IP (Aluminium foil/Blister pack)	5mg/ Tab	No Drug Endorsement (License No differ in DE & T8) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
7	D28003	Tab. Theophylline and Etophylline (Aluminium foil/Blister pack)	Theophylline 23 mg and Etophylline 77 mg/Tab		Qualified.
8	D28019	Budesonide Inhaler 200 metered doses	100mcg / puff		Qualified.
9	D28032	Inhaler Budesonide + Formoterol 120 metered doses	200 mcg Budesonide + 6 mcg Formoterol / puff		Qualified.
10	D33183	Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.

**8 M/s. BOEHRINGER INGELHEIM INDIA PVT. LTD. ,Mumbai**

1	D22040	Tab. Empagliflozin (Aluminium foil/Blister pack)	25mg/Tab.		Qualified.
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**9 M/s. SANOFI INDIA LTD. ,Mumbai**

1	D22057	Insulin Glargine	100 IU/ ml, 3 ml prefilled pen		Qualified.
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**10 M/s. BHAT BIO-TECH INDIA (P) LTD ,Bangalore (Karnataka)**

1	S02111	NS1 Elisa Kit For Dengue Test	As per tender specification		Qualified.
2	S02113	Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION		Qualified.
3	S02394	Dual HIV & Syphilis Rapid Diagnosis Test Kits	AS PER TENDER SPECIFICATION	No Market Standing as per clause No. 5.2.9.	Not Qualified.

**11 M/s. UNIVERSUS PHOTO IMAGINGS LTD. ,New Delhi**

1	D31008	X-Ray Photo Films 8" x 10"	8" x 10"	CE & ISO Certificate Expired.	Not Qualified.
2	D31009	X-Ray Photo Films 10" x 12"	10" x 12"	CE & ISO Certificate Expired.	Not Qualified.
3	D31010	X-Ray Photo Films 12" x 12"	12" x 12"	CE & ISO Certificate Expired.	Not Qualified.
4	D31011	X-Ray Photo Films 12" x 15"	12" x 15"	CE & ISO Certificate Expired.	Not Qualified.

**12 M/s. SD BIOSENSOR HEALTHCARE PVT. LTD. ,Gurugram (Haryana)**

1	S02110	Bivalent Rapid Diagnostic Test Kit	As per tender specification	No Performance Certificate from end user.	Not Qualified.
2	S02111	NS1 Elisa Kit For Dengue Test	As per tender specification		Qualified.
3	S02113	Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION		Qualified.
4	S02394	Dual HIV & Syphilis Rapid Diagnosis Test Kits	AS PER TENDER SPECIFICATION		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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## 13 M/s. NESTOR PHARMACEUTICALS LTD. ,Gurgaon (Haryana)

1	D04004	Inj. Paracetamol	150 mg/ml		Qualified.
2	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
3	D04010	Inj. Diclofenac Sodium	25 mg/ml		Qualified.
4	D05001	Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)		Qualified.
5	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
6	D05007	Inj. Pheniramine Maleate	22.75 mg/ml		Qualified.
7	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
8	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
9	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
10	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
11	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
12	D09004	Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial		Qualified.
13	D09009	Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml		Qualified.
14	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)		Qualified.
15	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
16	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
17	D09026	Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
18	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
19	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
20	D09051	Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)		Qualified.
21	D09053	Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial		Qualified.
22	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
23	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
24	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
25	D09093	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
26	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
27	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
29	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
30	D09150 Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
31	D09162 Inj. Ampicillin + Cloxacilline (with diluents in plastic container)	Ampicillin 250 mg + Cloxacilline 250 mg / Vial		Qualified.
32	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
33	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
34	D16002 Tab. Folic Acid (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
35	D16011 Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid		Qualified.
36	D16038 Tab. Ferrous Sulphate + Folic Acid(Enteric Coated, Red Colour) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron + Folic Acid 0.5mg (500mcg) / Enteric Coated Tablet	Red Colour not mentioned in DE & T8.	Not Qualified.
37	D16044 Tab. Ferrous Sulphate + Folic Acid (Small) (Sugar Coated and Pink coloured) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal lacquer) IFA (Sma)	Each Tblet Contains:Equivalent to 45 mg of Elemental Iron + Folic Acid 0.4mg (400mcg)	Pink Colour not mentioned in DE & T8.	Not Qualified.
38	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)		Qualified.
39	D16049 Tab. Ferrous Sulphate + Folic Acid(Sugar Coated, Red Colour) (Aluminium foil/Blister pack)	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet	Red Colour not mentioned in DE & T8.	Not Qualified.
40	D16050 Tab. Ferrous Sulphate + Folic Acid (Large) (Sugar Coated and blue coloured-Indigo caramine) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal l	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet	Blue Colour not mentioned in DE & T8.	Not Qualified.
41	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
42	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
43	D18016 Tab. Acyclovir (Alluminium Foil/Blister Pack)	400 mg/ Tab (Scored)		Qualified.
44	D18027 Cream Clotrimazole	1% w/w		Qualified.
45	D20001 Tab. Frusemide (Aluminium Foil/Blister pack)	40 mg/Tab		Qualified.
46	D20002 Inj. Frusemide	10 mg/ 1 ml		Qualified.
47	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
48	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
49	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab		Qualified.
50	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
51	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
52	D21032 Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
53	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
54	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
55	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml		Qualified.
56	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.

14 **14 M/s. RAMAN & WEIL PVT LTD ,Mumbai (Maharashtra)**

1	D01020 Isoflurane	100%		Qualified.
2	D01021 Isoflurane	100%		Qualified.

15 **15 M/s. BIODEAL PHARMACEUTICALS PVT. LTD. ,Noida**

1	D18032 Mupirocin Ointment	2 % w/w		Qualified.
2	D22007 Tab. Carbimazole (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
3	D22051 Tab. Teneiglipitin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
4	D25057 Fluticasone Nasal Spray	0.05 % w/w		Qualified.
5	D25075 Mometasone nasal spray	50 mcg x 1 puff, 140 metered doses		Qualified.

16 **16 M/s. ZIM LABORATORIES LIMITED ,Nagpur (Maharashtra)**

1	D08004 Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB		Qualified.
2	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
3	D09091 Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
4	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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17 **17 M/s. WALLACE PHARMACEUTICALS PVT. LTD. ,Mumbai (Maharashtra)**

1	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
2	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
3	D12007	Tab Fluconazole (Dispersible Tab.) (Aluminium foil/ Blister pack)	50 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
4	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
5	D21047	Tab. Sulphasalazine (Aluminium foil/Blister pack)	500 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
6	D22004	Tab. Glipizide (Aluminium foil/Blister pack)	5 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
7	D33183	Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.

18 **18 M/s. INDIAN IMMUNOLOGICALS LTD. ,Hyderabad**

1	D23005	Inj. Tetanus Toxoid (Adsorbed)	0.5 ml/Amp		Qualified.
2	D23009	Inj. Anti Rabies Vaccine for Human Use with diluents	1 ml (ID),AS PER TENDER SPECIFICATION		Qualified.

19 **19 M/s. VERVE HUMAN CARE LABORATORIES ,Delhi**

1	D04011	Inj. Morphine Sulphate	10 mg/ml	Financial Statement submitted by the Bidder in the name of M/s. Unit of Venor Pharma Ltd. for the year 2020-21 & 2021-22.	Not Qualified.
2	D04046	Inj. Fentanyl Citrate	50 mcg/ml	Financial Statement submitted by the Bidder in the name of M/s. Unit of Venor Pharma Ltd. for the year 2020-21 & 2021-22.	Not Qualified.
3	D04047	Tab. Morphine Sulphate	10 mg/Tab.	Financial Statement submitted by the Bidder in the name of M/s. Unit of Venor Pharma Ltd. for the year 2020-21 & 2021-22.	Not Qualified.
4	D05025	Inj. Noradrenaline	1mg/ml	Financial Statement submitted by the Bidder in the name of M/s. Unit of Venor Pharma Ltd. for the year 2020-21 & 2021-22.	Not Qualified.
5	D33202	Tab. Morphine Sulphate (Aluminium foil/Blister pack)	30 mg/Tab.	Financial Statement submitted by the Bidder in the name of M/s. Unit of Venor Pharma Ltd. for the year 2020-21 & 2021-22.	Not Qualified.
6	D33203	Tab. Morphine Sulphate CR (Aluminium foil/Blister pack)	30 mg/Tab.	Financial Statement submitted by the Bidder in the name of M/s. Unit of Venor Pharma Ltd. for the year 2020-21 & 2021-22.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**20 M/s. THEMIS MEDICARE LIMITED ,Mumbai (Maharashtra)**

1	D01001 Inj. Ketamine HCl	57.7 mg of Ketamine HCl Equivalent to 50 mg of Ketamine		Qualified.
2	D01007 Inj. Midazolam	1 mg/ml		Qualified.
3	D01008 Inj. Atracurium Besylate	10 mg/ ml		Qualified.
4	D02001 Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg		Qualified.
5	D02003 Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml		Qualified.
6	D02006 Inj. Bupivacaine	5 mg/ml		Qualified.
7	D02008 Inj. Bupivacaine (Heavy)	Bupivacaine 5mg/ml + Dextrose 80mg / ml		Qualified.
8	D03005 Inj. Dexmedetomidine	200mcg/2ml		Qualified.
9	D04008 Inj. Pentazocine Lactate	30 mg/ml (equivalent of 30 mg of pentazocine) /ml		Qualified.
10	D04021 Inj. Tramadol HCl	50 mg/ml		Qualified.
11	D04046 Inj. Fentanyl Citrate	50 mcg/ml		Qualified.
12	D05025 Inj. Noradrenaline	1mg/ml		Qualified.
13	D24006 Inj. Neostigmine Methylsulphate	0.5 mg/ml		Qualified.
14	D24008 Inj. Neostigmine Methylsulphate + Glycopyrrolate	Neostigmine Methylsulphate 2.5 mg + Glycopyrrolate 0.5mg /ml		Qualified.
15	D24011 Inj. Succinyl Choline Chloride	50 mg/ml		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
21	<b>21 M/s. NAVKAR LIFESCIENCES ,Chandigarh</b>			
1	D04003 Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D04026 Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml		Qualified.
4	D04032 Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
5	D05013 Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
6	D05016 Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
7	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
8	D05024 Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab		Qualified.
9	D05033 Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
10	D07026 Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
11	D08003 Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
12	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
13	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
14	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
15	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
16	D09122 Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
17	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
18	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
19	D12004 Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
20	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
21	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
22	D12020 Cream Terbinafine	1% w/w		Qualified.
23	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
24	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)		Qualified.
25	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
26	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
27	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
28	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
29	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
30	D17037 Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
31	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
32	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
33	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
34	D18024 Povidone Iodine Oint.	5 % w/w		Qualified.
35	D18027 Cream Clotrimazole	1% w/w		Qualified.
36	D18028 Clindamycin Cream or gel	1% w/w		Qualified.
37	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w	No Drug Endorsement & No Market Standing (Pack size differ) as per clause No. 5.2.9.	Not Qualified.
38	D18032 Mupirocin Ointment	2 % w/w		Qualified.
39	D18046 Fusidic Acid Cream	0.02 w/w		Qualified.
40	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
41	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
42	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
43	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
44	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
45	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
46	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
47	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
48	D30044 Syp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc	Pack size differ in T8 & Mfg. License.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
22	<b>22 M/s. ARION HEALTHCARE ,Chandigarh</b>			
1	D04004 Inj. Paracetamol	150 mg/ml		Qualified.
2	D04010 Inj. Diclofenac Sodium	25 mg/ml	No Market Standing (1 ml Amp instead of 3ml in T8) as per clause No. 5.2.9.	Not Qualified.
3	D05001 Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)		Qualified.
4	D05002 Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
5	D05023 Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial		Qualified.
6	D05029 Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
7	D09009 Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml		Qualified.
8	D09019 Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin	No Market Standing (Lable claim in T8 5mg/2ml) as per clause No. 5.2.9.	Not Qualified.
9	D09046 Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
10	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
11	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
12	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
13	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
14	D21001 Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.
15	D21013 Inj. Dicyclomine HCl	10 mg/ml		Qualified.
16	D21025 Inj. Rabeprazole (I.V) (with diluents in plastic container)	20mg / Vial		Qualified.
17	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
18	D21036 Inj. Drotaverine	20 mg/ml		Qualified.
19	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
20	D25034 Moxifloxacin Eye Drop	0.5% w/v		Qualified.
21	D25045 Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)		Qualified.
22	D25050 Xylometazoline Nasal Drop	0.05% w/v (FFS / BFS Plastic Container)	No Market Standing (pack size 5ml instead of 10 ml in T8) as per clause No. 5.2.9.	Not Qualified.
23	D25056 Carboxymethyl Cellulose Eye drop	0.5% w/v		Qualified.
24	D29015 Saline Nasal Drop	0.65 % w/v (FFS / BFS Plastic Container)		Qualified.
25	D30025 Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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23

**24 M/s. MEDSOURCE OZONE BIOMEDICALS PVT. LTD. ,Faridabad (Haryana)**

1	S02053	VDRL Rapid Test Kit, (RPR) Rapid Plasma Regime.	AS PER TENDER SPECIFICATION		Qualified.
2	S02110	Bivalent Rapid Diagnostic Test Kit	As per tender specification	No scientific report from ICMR Lab.	Not Qualified.
3	S02111	NS1 Elisa Kit For Dengue Test	As per tender specification		Qualified.
4	S02113	Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
24	<b>25 M/s. MICRON PHARMACEUTICALS ,Vapi (Gujarat)</b>			
1	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
2	D05004 Tab. Prednisolone (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
3	D05015 Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
4	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
5	D05032 Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.		Qualified.
6	D08008 Tab. Ivermectin(Aluminium foil/Blister pack)	6mg/Tab		Qualified.
7	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
8	D09026 Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
9	D09051 Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)		Qualified.
10	D09122 Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
11	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
12	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
13	D09137 Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
14	D12004 Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
15	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
16	D12020 Cream Terbinafine	1% w/w		Qualified.
17	D12027 Lotion Ketoconazole	2% w/v		Qualified.
18	D16015 Cap. Hydroxyurea (Aluminium foil/ Blister pack)	500mg/Cap.		Qualified.
19	D16022 Tab. Deferasirox (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
20	D16023 Tab. Deferasirox (Aluminium foil/Blister pack)	400 mg/Tab		Qualified.
21	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)		Qualified.
22	D18027 Cream Clotrimazole	1% w/w		Qualified.
23	D18028 Clindamycin Cream or gel	1% w/w		Qualified.
24	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
25	D18052 Benzyl Peroxide gel	5 % w/w		Qualified.
26	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab		Qualified.
27	D20005 Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab		Qualified.
28	D22004 Tab. Glipizide (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
29	D27001 Tab. Diazepam (Aluminium Foil / Blister pack)	5 mg/Tab		Qualified.
30	D27006 Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
31	D27013 Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab		Qualified.
32	D27015 Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
33	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
34	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab		Qualified.
35	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
36	D28003 Tab. Theophylline and Etophylline (Aluminium foil/Blister pack)	Theophylline 23 mg and Etophylline 77 mg/Tab		Qualified.
37	D30027 Tab. Pyridoxine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
38	D33020 Tab. Prednisolone (Aluminium foil/Blister pack)	20 mg/Tab		Qualified.
39	D33021 Tab. Prednisolone (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
40	D37007 RTI/STI Kit 7	Each Kit contains:Cap. Doxycycline (100 mg) IP - 42 Caps.Tab. Azithromycin (1 gm) IP - 1 Tab.		Qualified.
41	D38001 RTI / STI Kit 1	Each Kit contains:Tab. Azithromycin (1 gm) IP - 1 Tab.Tab. Cefixime (400 mg) IP - 1 Tab.		Qualified.
42	D38002 RTI / STI Kit 2	Each Kit contains:Tab. Secnidazole (1gm) IP - 2 Tabs.Tab. Fluconazole 150 mg - 1 Tab.	No Market Standing (Secnidazole 1 mg instead of 1gm in T8) as per clause No. 5.2.9.	Not Qualified.
43	D38004 RTI / STI Kit 4	Each Kit contains:Cap / Tab. Doxycycline (100 mg) IP - 30 Tab./Cap.Tab. Azithromycin (1 gm) IP - 1 Tab.		Qualified.
44	D38005 RTI / STI Kit 5	Each Kit contains:Tab. Acyclovir 400mg - 21 Tabs.		Qualified.
45	D38006 RTI / STI Kit 6	Each Kit contains:Tab. Cefixme (400 mg) IP - 1 Tab. andTab. Metronidazole (400 mg) IP - 28 Tab. andTab. / Cap. Doxycycline (100 mg) IP- 28 Cap./Tab.		Qualified.

25

**26 M/s. WILCURE REMEDIES PVT. LTD. ,Indore**

1	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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26

27 M/s. CADILA PHARMACEUTICALS LTD. ,Ahmedabad

1	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
2	D05001	Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)		Qualified.
3	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)		Qualified.
4	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
5	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
6	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
7	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
8	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
9	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
10	D17025	Inj. Streptokinase	1.5 million U/10 ml Vial		Qualified.
11	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
12	D17052	Tab. Nifedipine Sustained Release (SR) (Aluminium foil/Blister pack)	20mg/SR Tab.		Qualified.
13	D17071	Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
14	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
15	D21001	Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.
16	D21002	Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab	Blacklisted by TSMSIDC up to 30/12/2025.	Not Qualified.
17	D21018	Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
18	D21026	Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
19	D22002	Inj. Human Soluble Insulin	40 IU/ml		Qualified.
20	D22012	Inj. Human Premixed Insulin (30/70)	40 units/ml (Biphasic, 30/70)		Qualified.
21	D43002	Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
22	D49002	Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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27 **28 M/s. ACCENT PHARMACEUTICALS & DIAGNOSTICS ,Solon (Himanchal Pradesh)**

1	D21037	Tab. Promethazine (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
2	D22031	Tab. Medroxyprogesterone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
3	D26007	Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab		Qualified.
4	D26012	Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.		Qualified.
5	D26046	MMA Kit	Each Combi pack (MMA Kit) contains : Tab. Mifepristone - 200mg (1 Tabs ) and Tab. Misoprostol 200mcg (4 Tab.)		Qualified.

28 **29 M/s. POLESTAR POWER INDUSTRIES ,Solon (H. P)**

1	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
2	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg		Qualified.
3	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
4	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
5	D09165	Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavunnic Acid (57 mg)/ 5ml		Qualified.
6	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
7	D09173	Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml		Qualified.

29 **30 M/s. PLASMAGEN BIOSCIENCES ,Bangalore (Karnatak)**

1	D23014	Inj. Human Rabies Immunoglobuline	300 IU / 2ML		Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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30

**31 M/s. GLOBELA PHARMA PVT. LTD. ,Surat (Gujrat)**

1	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	DE for Export & T8 for 180 mg as per clause No. 5.2.9.	Not Qualified.
2	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
3	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
4	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
5	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
6	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
7	D16015	Cap. Hydroxyurea (Aluminium foil/ Blister pack)	500mg/Cap.		Qualified.
8	D16022	Tab. Deferasirox (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
9	D16023	Tab. Deferasirox (Aluminium foil/Blister pack)	400 mg/Tab		Qualified.
10	D17015	Tab. Amlodipine Besylate (Aluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
11	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
12	D27049	Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
13	D43002	Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.

31

**32 M/s. VENUS REMEDIES LIMITED ,Panchkula (Haryana)**

1	D09019	Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
2	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
3	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
4	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
5	D09119	Inj. Ceftazidime(with diluents in plastic container)	1gm/vial		Qualified.
6	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm	No Drug Endorsement (diluents 20 ml mentioned instead of 10 ml).	Not Qualified.
7	D09141	Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
8	D09172	Inj. Clindamycin	300mg/(Vial/Amp)		Qualified.
9	D16018	Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
10	D16035	Inj. Enoxaparin	40mg/(Amp./PFS)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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## 33 M/s. MEDIPOL PHARMACEUTICALS INDIA PVT. LTD. ,Noida (UP)

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
2	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
3	D04022	Tab. Paracetamol Kid (Disp. Tab.) (Aluminium foil/Blister pack)	125 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
4	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
5	D04026	Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
6	D04032	Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
7	D04048	Tab. Tramadol (Prolonged Release) (Aluminium foill/ Blister pack)	50 mg/Tab	No Market Standing as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
8	D04061	Tab. Naproxen (Aluminium foil/Blister pack)	500 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
9	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
10	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
11	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
12	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
13	D05032	Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
14	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
15	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
16	D07008	Susp. Phenytoin Sodium (With Measuring Cap & Palatable, Plastic container as per IP)	25 mg/ ml	No Drug Endorsement & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
17	D07011	Phenobarbitone Oral Solution (Palatable, with measuring cap and plastic container as per I.P)	20mg/5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
18	D07012	Sodium Valproate Oral Solution IP (Palatable, with measuring cap and plastic container as per I.P)	200 mg / 5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
19	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
20	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
21	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
22	D08008	Tab. Ivermectin(Aluminium foil/Blister pack)	6mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
23	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
24	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
25	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
26	D09043 Syp. Diethylcarbamazine Citrate (with measuring cap and palatable,plastic container as per I.P)	50 mg /5 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
27	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
28	D09066 Tab. Norfloxacin (Disp. Tab.) (Aluminium foil/ Blister pack)	100mg / Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
29	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
30	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
31	D09122 Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
32	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
33	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
34	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
35	D09135 Susp. Linezolid (Palatable, plastic container as per I.P with Dropper)	100mg/5ml	No Market Standing as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
36	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
37	D12004 Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
38	D12007 Tab Fluconazole (Dispersible Tab.) (Aluminium foil/ Blister pack)	50 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
39	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
40	D12012 Clotrimazole Lotion (Plastic Container)	Clotrimazole 1% w/v or w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
41	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
42	D12020 Cream Terbinafine	1% w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
43	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
44	D12027 Lotion Ketoconazole	2% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
45	D13002 Susp. Tinidazole (Oral Susp.) (Palatable, with measuring cap and plastic container as per I.P)	150 mg/5 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
46	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
47	D13008 Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
48	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
49	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
50	D16011 Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid	No Market Standing as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
51	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
52	D16019 Iron drop(Palatable, with dropper and plastic container as per I.P)	Elemental Iron 50 mg / ml.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
53	D16020 Tab. Iron (Sugar Coated) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
54	D16027 Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
55	D16038 Tab. Ferrous Sulphate + Folic Acid(Enteric Coated, Red Colour) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron + Folic Acid 0.5mg (500mcg) / Enteric Coated Tablet	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
56	D16044 Tab. Ferrous Sulphate + Folic Acid (Small) (Sugar Coated and Pink coloured) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal lacquer) IFA (Sma	Each Tblet Contains:Equivalent to 45 mg of Elemental Iron + Folic Acid 0.4mg (400mcg)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
57	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)	No Market Standing(Folic Acid 100 mg instead of 100 mcg) as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
58	D16049 Tab. Ferrous Sulphate + Folic Acid(Sugar Coated, Red Colour) (Aluminium foil/Blister pack)	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
59	D16050 Tab. Ferrous Sulphate + Folic Acid (Large) (Sugar Coated and blue coloured-Indigo caramine) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal 1	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet	No Drug Endorsement (Film coated instead of sugar coated) , No Market Standing as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
60	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
61	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
62	D17026 Tab. Hydrochlorothiazide (Aluminium Foil/Blister Pack)	12.5 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
63	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
64	D17037 Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
65	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
66	D17055 Tab. Carvedilol (Aluminium foil/Blister pack)	3.125mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
67	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
68	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
69	D18003 Silver Sulphadiazine Cream	1% w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
70	D18007 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
71	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
72	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
73	D18019 Lotion Fluocinolone Acetonide (Plastic Container as per IP)	Fluocinolone Acetonide 0.01mg/ml	Strength mismatch in (DE & T8) and Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
74	D18020 Cream Silver Sulphadiazine	1% w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
75	D18021 Clotrimazole Mouth Paint (Plastic Container as per IP)	1% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
76	D18023 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
77	D18024 Povidone Iodine Oint.	5 % w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
78	D18027 Cream Clotrimazole	1% w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
79	D18028 Clindamycin Cream or gel	1% w/w	No Drug Endorsement (Vaginal Cream instead of cream) ,No Market Standing as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
80	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
81	D18032 Mupirocin Ointment	2 % w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
82	D18033 Cream or Oint Betamethasone Valerate	0.1% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
83	D18044 Gamma Benzene Hexa Chloride + Bensocaine	Gamma Benzene Hexa Chloride 1% + Bensocaine 2%	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
84	D18045 Cream Fluocinolone Acetonide	Fluocinolone Acetonide 0.1% w/w (Anhydrous) in cream base	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
85	D18046 Fusidic Acid Cream	0.02 w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
86	D18048 Povidone Iodine Scrub	7.5% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
87	D18049 Silver Nitrate Ointment	0.2% w/w	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
88	D18054 Povidone Iodine Solution (Plastic container as per I.P)	10% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
89	D19006 Surgical Spirit IP (Plastic container as per I.P)	.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
90	D19008 Chloroxylenol Solution (Plastic Container as per IP)	5% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
91	D19009 Soln. Chlorohexidine Gluconate + Cetrimide + Isopropyl Alcohol	Chlorohexidine Gluconate 0.3% w/v + Cetrimide 0.6% w/v + Isopropyl Alcohol 4% v/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
92	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
93	D21006 Syp. Promethazine (Palatable, with measuring cap and plastic container as per I.P)	5 mg/5 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
94	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
95	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
96	D21014 Oral Solution or Syp. Dicyclomine (Palatable, with measuring cap and plastic container as per I.P)	10 mg/5 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
97	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
98	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
99	D21021 Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
100	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
101	D21028 Dicyclomine Drop (Palatable, with dropper and plastic container as per I.P)	Dicyclomine HCl 10mg + Activated Dimethicone 40mg / ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
102	D21031 Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
103	D21032 Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
104	D21035 Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
105	D21037 Tab. Promethazine (Aluminium foil/Blister pack)	25 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
106	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
107	D22004 Tab. Glipizide (Aluminium foil/Blister pack)	5 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
108	D22013 Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
109	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
110	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
111	D24012 Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
112	D25022 Clotrimazole & Lignocaine Ear Drop	(Clotrimazole IP 1% w/v + Lignocaine HCl 2% w/v) (FFS / BFS Plastic Container) As per Pack Sample Approved	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
113	D25026 Lidocaine + Ofloxacin Ear Drop	Lidocaine 1.73% w/v+ Ofloxacin 0.3% w/v	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
114	D25045 Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
115	D25050 Xylometazoline Nasal Drop	0.05% w/v (FFS / BFS Plastic Container)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
116	D26047 Tab. Doxylamine Succinate (Aluminium foil/Blister pack)	10 mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
117	D27013 Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
118	D27014 Tab. Clonazepam (Aluminium foil/ Blister pack)	2 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
119	D27015 Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
120	D27031 Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
121	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
122	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
123	D28003 Tab. Theophylline and Etophylline (Aluminium foil/Blister pack)	Theophylline 23 mg and Etophylline 77 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
124	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
125	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
126	D29006 Oral Soln. of Potassium Chloride (with measuring cap, plastic container/ Glass Bottel as per I.P)	10 % to 15 % w/v Soln.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
127	D29015 Saline Nasal Drop	0.65 % w/v (FFS / BFS Plastic Container)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
128	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
129	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
130	D30006 Tab. Vitamin C (Aluminium foil/Blister pack)	100 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
131	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
132	D30015 Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
133	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab	No Drug Endorsement (Chewable not mentioned) ,No Market Standing as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
134	D30020 Syp. Vitamin B-Complex (Palatable, with measuring cap and plastic container as per I.P)	(Thiamine HCl IP- 2mg, Riboflavin Sod. Phosp. IP-2.54mg, Pyridoxine HCl IP-2mg, Nicotinamide IP-20mg, D-Panthenol IP-6mg, Ascorbic Acid IP 75mg) / 5 ml	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
135	D30026 Tab. Pyridoxine(Aluminium foil/Blister pack)	40 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
136	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet	No Market Standing as per clause No. 5.2.9. & Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
137	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
138	D30044 Syp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
139	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
140	D33021 Tab. Prednisolone (Aluminium foil/Blister pack)	40 mg/Tab	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.
141	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)	Blacklisted by GMSD DGHS(Govt. of India) up to 23/10/2024.	Not Qualified.

33

**34 M/s. AGIO PHARMACEUTICALS LIMITED ,Pune(Mahashtra)**

1	D17015 Tab. Amlodipine Besylate (Aluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
2	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
3	D18003 Silver Sulphadiazine Cream	1% w/w		Qualified.
4	D18027 Cream Clotrimazole	1% w/w		Qualified.
5	D18046 Fusidic Acid Cream	0.02 w/w		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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34

**35 M/s. OSCAR MEDICARE PVT. LTD. ,New Delhi**

1	S02110 Bivalent Rapid Diagnostic Test Kit	As per tender specification	No Performance Certificate from end user. & No scientific report from ICMR Lab.	Not Qualified.
2	S02111 NS1 Elisa Kit For Dengue Test	As per tender specification		Qualified.
3	S02113 Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION	No Compliance report in part A format of Bid.	Not Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**36 M/s. WINGS BIOTECH LLP ,West Delhi**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
3	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
4	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
5	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
6	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
7	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
8	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
9	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
10	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
11	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
12	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
13	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
14	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
15	D09138	Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
16	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
17	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
18	D12027	Lotion Ketoconazole	2% w/v		Qualified.
19	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
20	D17007	Tab. Metoprolol Tartarate ER (Alluminium Foil/Blister Pack)	50 mg/Tab		Qualified.
21	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
22	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
23	D18024	Povidone Iodine Oint.	5 % w/w		Qualified.
24	D21002	Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
25	D21018	Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
26	D21020	Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
27	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
28	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
29	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
30	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
31	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
32	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
33	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
34	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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36

## 37 M/s. STALLION LABORATORIES PVT. LTD. ,Ahmedabad

1	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
2	D07003	Tab. Carbamazepine (Controlled Release/Sustained Release/ Prolonged Release/ Extended Release) (Aluminium foil/Blister pack)	200 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
3	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
4	D07005	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
5	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
6	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
7	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
8	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
9	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
10	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
11	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
12	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
13	D17008	Tab. Propranolol	40 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
14	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
15	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
16	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
17	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
18	D18016	Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
19	D21010	Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
20	D22003	Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
21	D22014	Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
22	D27046	Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
23	D30003	Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
24	D30016	Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
25	D46005	Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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37 **38 M/s. BIOLINE DIAGNOSTICS LLP ,Delhi**

1	S02110	Bivalent Rapid Diagnostic Test Kit	As per tender specification	No Market Standing as per clause No. 5.2.9. & Performance Certificate from end user less than 5 Years.	Not Qualified.
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38 **39 M/s. KEMECOS INDIA PRIVATE LIMITED ,Kolkata (West Bengal)**

1	D18007	Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
2	D18020	Cream Silver Sulphadiazine	1% w/w	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
3	D18023	Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
4	D18027	Cream Clotrimazole	1% w/w	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
5	D18032	Mupirocin Ointment	2 % w/w	No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.
6	D18033	Cream or Oint Betamethasone Valerate	0.1% w/v	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
7	D18048	Povidone Iodine Scrub	7.5% w/v	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
8	D19009	Soln. Chlorhexidine Gluconate + Cetrimide + Isopropyl Alcohol	Chlorohexidine Gluconate 0.3% w/v + Cetrimide 0.6% w/v + Isopropyl Alcohol 4% v/v	No Drug Endorsement , No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.

39 **40 M/s. ASOJ SOFT CAPS PVT. LTD. ,Vadodara (Gujrat)**

1	D30007	Cap. Vit A.D (Therapeutic) (Aluminium foil/Blister pack)	Vit. A 5000 IU+Vit. D3 400 IU/Cap		Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
40	<b>41 M/s. SALUD CARE I PVT. LTD. ,Haridwar (UK)</b>			
1	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
2	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
3	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
4	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
5	D09122 Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
6	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
7	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
8	D12020 Cream Terbinafine	1% w/w		Qualified.
9	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
10	D12027 Lotion Ketoconazole	2% w/v		Qualified.
11	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
12	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
13	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
14	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
15	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
16	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
17	D18021 Clotrimazole Mouth Paint (Plastic Container as per IP)	1% w/v		Qualified.
18	D18024 Povidone Iodine Oint.	5 % w/w		Qualified.
19	D18027 Cream Clotrimazole	1% w/w		Qualified.
20	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
21	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
22	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
23	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
24	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
25	D30022 Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.		Qualified.
26	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
27	D30043 Drop Vit. D3 (Cholecalciferol)	400 IU/ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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41 **42 M/s. VINS BIOPRODUCTS LIMITED ,Hyderabad(Telangana)**

1	D23002	Inj. Snake Venom AntiSerum (Polyvalent) with diluents	10 ml/Vial (Lyophilised, Powder form)	Qualified.
2	D23010	Equine Rabies Immunoglobulin	1500 IU / 5 ml (Rabies Immunoserum)	Qualified.

42 **44 M/s. PASCHIM BANGA PHARMACEUTICAL ,Darjeeling(West Bangal)**

1	D04033	Inj. Paracetamol I.V	1000 mg/ 100ml	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
2	D09007	Inj. Ciprofloxacin I.V.	200mg/100ml (FFS Plastic Container)		Qualified.
3	D09073	Inj. Ofloxacin I.V	200mg/100ml Bottle (FFS Plastic Container)	No Market Standing as per clause No. 5.2.9.	Not Qualified.
4	D13003	Metronidazole Injection ( Metronidazole Intravenous Infusion)	500 mg/100 ml Bottle (FFS Plastic Container)		Qualified.
5	D20004	Inj. Mannitol (Mannitol Intravenous Infusion)	20% w/v (FFS Plastic container)		Qualified.
6	D29001	I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
7	D29002	I.V Dextrose and Sodium Chloride (DNS)	5% w/v Dextrose, 0.9% w/v Sodium Chloride (FFS Plastic Container)		Qualified.
8	D29003	I.V Compound Sodium Lactate (RingerS Lactate) RL	Lactic Acid-0.24w/v equivalent to 0.32% w/v of sodium lactate sodium chloride-0.6% w/v, potassium chloride-0.04% w/v, calcium chloride-0.027% w/v (FFS Plastic Container)		Qualified.
9	D29004	I.V Dextrose 5% (5D)	5% w/v (FFS Plastic Container)		Qualified.
10	D29005	I.V Dextrose 10% (10D)	10% w/v (FFS Plastic Container)		Qualified.
11	D29009	Multi Electrolyte AND Dextrose Inj. Type 1 IP (Paediatric Maintenance Solution Type 1)	Each 100ml contains Dextrose Anhydrous 5gm, Potassium Chloride 0.130 gm, Sodium Acetate 0.320gm, Diabasic Potassium Phosphate 0.026gm, Magnesium Chloride 0.031gm. (FFS Plastic Container)		Qualified.
12	D29012	I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
13	D29018	Inj. Sodium Chloride (Normal Saline)	3% w/v (FFS Plastic Container)	Less Market Standing as per clause No. 5.2.9.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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43 **45 M/s. VIDHYASHA PHARMACEUTICAL ,Sirmour (HP)**

1	D17026	Tab. Hydrochlorothiazide (Aluminium Foil/Blister Pack)	12.5 mg/Tab		Qualified.
2	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
3	D17082	Tab. Fenofibrate (Aluminium foil/Blister pack)	160mg/Tab Micronised Tablet	No Drug Endorsement (Specification not matching as Micronised Tab.)	Not Qualified
4	D18016	Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)		Qualified.
5	D18035	Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.		Qualified.
6	D18056	Tab. Entecavir (Aluminium foil/Blister pack)	1 mg/Tab.		Qualified.
7	D20012	Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
8	D21031	Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
9	D27100	Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.

44 **46 M/s. GENETEK LIFESCIENCES PVT. LTD. ,Nagpur (Maharashtra)**

1	D01022	Inj. Propofol (1%)	10mg / ml		Qualified.
2	D03001	Inj. Atropine Sulphate	0.6 mg/ml		Qualified.
3	D04010	Inj. Diclofenac Sodium	25 mg/ml		Qualified.
4	D06002	Inj. Pralidoxime Chloride / Iodide (with diluent in plastic container if required)	500 mg/20 ml		Qualified.
5	D16004	Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
6	D16018	Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
7	D17041	Inj. Potassium Chloride	7.5% (Potassium Chloride 1.91gm is equiv. to 1gm of Potassium)	No Market Standing as per clause No. 5.2.9.	Not Qualified.
8	D20002	Inj. Frusemide	10 mg/ 1 ml		Qualified.
9	D21001	Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.
10	D21039	Inj. Ondansetron	2 mg/ml		Qualified.
11	D26006	Inj. Magnesium Sulphate	500 mg/ml		Qualified.

45 **47 M/s. PREMIUM SERUMS & VACCINES PVT. LTD. ,Mumbai (Maharashtra)**

1	D23002	Inj. Snake Venom AntiSerum (Polyvalent) with diluents	10 ml/Vial (Lyophilised, Powder form)		Qualified.
2	D23010	Equine Rabies Immunoglobulin	1500 IU / 5 ml (Rabies Immunoserum)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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46 **48 M/s. UNIMARCK HEALTHCARE LTD. ,New Delhi**

1	D16007	Inj. Ethamsylate	125 mg/ml		Qualified.
2	D17037	Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
3	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
4	D17043	Inj. Labetalol	20mg/4ml Amp.		Qualified.
5	D17085	Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
6	D20005	Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab		Qualified.
7	D21013	Inj. Dicyclomine HCl	10 mg/ml		Qualified.
8	D21031	Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
9	D21036	Inj. Drotaverine	20 mg/ml		Qualified.
10	D22051	Tab. Teneligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
11	D26007	Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab	Blacklisted by TSMSIDC up to 06/09/2024.	Not Qualified.
12	D26008	Tab. Norethisterone IP (Aluminium foil/Blister pack)	5mg/ Tab		Qualified.
13	D26012	Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.		Qualified.
14	D27015	Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab		Qualified.
15	D27037	Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
16	D27068	Tab. Donepezil(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
17	D27124	Tab. Fluvoxamine (Aluminium Foil/Blister pack)	100mg / Tab.		Qualified.
18	D30025	Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.
19	D33183	Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.
20	D46004	Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.

47 **49 M/s. DEBUKA INDUSTRIES PRIVATE LIMITED ,East Singhbhum**

1	D31014	Bleaching Powder	Not Less than 30% w/v available Chlorine	Not considered for Evaluation as per Notification No. MSME-PFS-MISC-0018-2023-3116/MSME,BBSR Dt. 29/04/2023.	Not Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
48	<b>50 M/s. INTAS PHARMACEUTICALS LTD. ,Ahmedabad</b>			
1	D07003 Tab. Carbamazepine (Controlled Release/Sustained Release/ Prolonged Release/ Extended Release) (Aluminium foil/Blister pack)	200 mg/Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
2	D07005 Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)	Annual audited Financial Statements not uploaded.	Not Qualified.
3	D07022 Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)	Annual audited Financial Statements not uploaded.	Not Qualified.
4	D09100 Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.	Annual audited Financial Statements not uploaded.	Not Qualified.
5	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
6	D16032 Factor VIII (with diluents in plastic or glass container)	250 IU / Vial (As per EDL Specification)	Annual audited Financial Statements not uploaded.	Not Qualified.
7	D16033 Factor VIII (with diluents in plastic or glass container)	500 IU / Vial (As per EDL Specification)	Less Market Standing as per clause No. 5.2.9. & Annual audited Financial Statements not uploaded.	Not Qualified.
8	D16034 Factor IX (with diluents in plastic or glass container)	600 IU / Vial (As per EDL Specification)	Annual audited Financial Statements not uploaded.	Not Qualified.
9	D16035 Inj. Enoxaparin	40mg/(Amp./PFS)	Less Market Standing as per clause No. 5.2.9. & Annual audited Financial Statements not uploaded.	Not Qualified.
10	D16047 Inj. Erythropoietin (EPO)	4000 IU/PFS	Annual audited Financial Statements not uploaded.	Not Qualified.
11	D20012 Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
12	D21031 Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
13	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
14	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
15	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No Market Standing as per clause No. 5.2.9. & Annual audited Financial Statements not uploaded.	Not Qualified.
16	D22051 Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
17	D27006 Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
18	D27015 Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
19	D27017 Tab. Fluoxetine (Aluminium foil/ Blister pack)	20mg/ Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
20	D27028 Tab. Amitriptyline + Chlordiazepoxide (Aluminium foil/Blister pack)	Amitriptyline 25 mg + Chlordiazepoxide 10 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
21	D27031 Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
22	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
23	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
24	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
25	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
26	D27068 Tab. Donepezil(Aluminium foil/ Blister pack)	5 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
27	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
29	D27121 Tab. Quetiapine SR (Aluminium foil/Blister pack)	100 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
30	D27122 Tab. Buspirone (Aluminium foil/Blister pack)	10mg / Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
31	D27124 Tab. Fluvoxamine (Aluminium Foil/Blister pack)	100mg / Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
32	D33191 Inj. Ranibizumab	10mg/(PFS/Vial)	Annual audited Financial Statements not uploaded.	Not Qualified.
33	D40002 Inj. Human Albumin IV	20%	Annual audited Financial Statements not uploaded.	Not Qualified.
34	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
35	D43003 Tab. Tofacitinib (Aluminium foil/Blister pack)	5mg / Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
36	D45008 Inj. Etanercept	50 mg/PFS	Annual audited Financial Statements not uploaded.	Not Qualified.
37	D45009 Tab. Tacrolimus (Aluminium foil/Blister pack)	1 mg / Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
38	D46003 Cap. Dutasteride (Aluminium foil/Blister pack)	0.5mg/Cap.	No Drug Endorsement & No Market Standing as per clause no. 5.2.9. & Annual audited Financial Statements not uploaded.	Not Qualified.
39	D46005 Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.	Annual audited Financial Statements not uploaded.	Not Qualified.
40	D46006 Tab. Darifenacin (Aluminium foil/Blister pack)	7.5 mg / Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
41	D46009 Tab. Mycophenolate (Aluminium foil/Blister pack)	250 mg/ Tab	Annual audited Financial Statements not uploaded.	Not Qualified.
42	D46011 Cap. Tacrolimus (Aluminium foil/Blister pack)	0.25mg/ Cap.	Annual audited Financial Statements not uploaded.	Not Qualified.

49 **51 M/s. NATCO PHARMA LIMITED ,Hyderabad (Telangana)**

1	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
2	D09160 Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
3	D12021 Inj. Amphotericine B Liposomal (with diluents in plastic container)	50 mg/Vial	No Market Standing as per clause No. 5.2.9.	Not Qualified.
4	D43003 Tab. Tofacitinib (Aluminium foil/Blister pack)	5mg / Tab.	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
5	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
6	D44005 Tab. Daclatasvir	60 mg		Qualified.
7	D44006 Tab. Sofosbuvir + Velpatasvir	Sofosbuvir 400 mg + Velpatasvir 100 mg		Qualified.
8	D44007 Tab. Sofosbuvir	400 mg		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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52 M/s. MANNEQUIN PHARMACEUTICALS PVT. LTD. ,Bhubaneswar

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D05032	Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.		Qualified.
3	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
4	D12007	Tab Fluconazole (Dispersible Tab.) (Aluminium foil/ Blister pack)	50 mg/Tab		Qualified.
5	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
6	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
7	D16027	Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
8	D21035	Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.
9	D28017	Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**53 M/s. BHARAT PARENTERALS LIMITED ,Vadodara (Gujarat)**

1	D01001 Inj. Ketamine HCl	57.7 mg of Ketamine HCl Equivalent to 50 mg of Ketamine		Qualified.
2	D01007 Inj. Midazolam	1 mg/ml	No Drug Endorsement(10 ml written in hand)	Not Qualified.
3	D01008 Inj. Atracurium Besylate	10 mg/ ml		Qualified.
4	D02008 Inj. Bupivacaine (Heavy)	Bupivacaine 5mg/ml + Dextrose 80mg / ml		Qualified.
5	D04003 Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
6	D04008 Inj. Pentazocine Lactate	30 mg/ml (equivalent of 30 mg of pentazocine) /ml		Qualified.
7	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
8	D05002 Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
9	D05023 Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial		Qualified.
10	D05029 Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
11	D06002 Inj. Pralidoxime Chloride / Iodide (with diluent in plastic container if required)	500 mg/20 ml		Qualified.
12	D07005 Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)		Qualified.
13	D07022 Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)		Qualified.
14	D08004 Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
15	D09003 Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml		Qualified.
16	D09004 Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial		Qualified.
17	D09012 Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)		Qualified.
18	D09019 Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
19	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
20	D09026 Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
21	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
22	D09046 Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
23	D09051 Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)		Qualified.
24	D09060 Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
25	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
26	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
27	D09091 Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
28	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
29	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
30	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
31	D09112 Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavunic Acid 200mg / Vial		Qualified.
32	D09113 Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg		Qualified.
33	D09119 Inj. Cefazidime(with diluents in plastic container)	1gm/vial		Qualified.
34	D09126 Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
35	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
36	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
37	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
38	D09150 Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
39	D09165 Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavunic Acid (57 mg)/ 5ml		Qualified.
40	D09170 Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
41	D09172 Inj. Clindamycin	300mg/(Vial/Amp)		Qualified.
42	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
43	D09176 Cap. Cefdinir (Aluminium foil/Blister pack)	300 mg/Cap		Qualified.
44	D11024 Tab. Ethionamide (Aluminium foil/Blister pack)	250 mg/Tab		Qualified.
45	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
46	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
47	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
48	D16035 Inj. Enoxaparin	40mg/(Amp./PFS)		Qualified.
49	D17013 Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
50	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
51	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
52	D18024 Povidone Iodine Oint.	5 % w/w		Qualified.
53	D18027 Cream Clotrimazole	1% w/w		Qualified.
54	D18032 Mupirocin Ointment	2 % w/w		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
55	D18035 Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.		Qualified.
56	D18046 Fusidic Acid Cream	0.02 w/w		Qualified.
57	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
58	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
59	D26002 Inj. Oxytocin	5 IU/1ml		Qualified.
60	D26007 Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab		Qualified.
61	D27035 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	500 mg / Tab		Qualified.
62	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)		Qualified.
63	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 IU / 1ml		Qualified.
64	D30015 Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc		Qualified.
65	D30021 Inj. Phytomenadione (Vit-K1)	1mg/0.5ml		Qualified.
66	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.
67	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

52 **54 M/s. UNIVERSAL CHEMICALS & PHARMACEUTICAL INDUSTRIES ,Cuttack**

1	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
2	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.

53 **55 M/s. VIRCHOW BIOTECH PVT. LTD. ,Mumbai**

1	D16035 Inj. Enoxaparin	40mg/(Amp./PFS)		Qualified.
2	D16062 Inj. Fondaparinux Sod.	2.5 mg/ 0.5 ml PFS		Qualified.

54 **56 M/s. VIVIMED LABS LTD. ,Hyderabad**

1	D12012 Clotrimazole Lotion (Plastic Container)	Clotrimazole 1% w/v or w/w	No Drug Endorsement (Solution instead of lotion) & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
2	D18021 Clotrimazole Mouth Paint (Plastic Container as per IP)	1% w/v	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
3	D18050 Sertaconazole Vaginal Tablet	500 mg/Tab. (with applicator)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
4	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

55 **57 M/s. JOHNSON \$ JOHNSON PVT. LTD. ,Gurgaon (Haryana)**

1	D22038 Tab. Canagliflozin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**58 M/s. SERUM INSTITUTE OF INDIA PVT. LTD. ,Mumbai**

1	D23009 Inj. Anti Rabies Vaccine for Human Use with diluents	1 ml (ID),AS PER TENDER SPECIFICATION		Qualified.
2	D23020 Inj. Hepatitis B-Vaccine	20 mcg /ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**59 M/s. HEALTHY LIFE PHARMA PVT. LTD. ,Mumbai (Maharashtra)**

1	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D05004	Tab. Prednisolone (Aluminium foil/Blister pack)	5 mg/Tab	No Market Standing as per clause No. 5.2.9(for Export).	Not Qualified.
3	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
4	D05022	Tab. Dexamethasone(Aluminium foil/Blister pack)	4 mg/Tab	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
5	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
6	D07016	Tab. Clobazam (Aluminium foil/Blister pack)	5mg/Tab	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
7	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
8	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
9	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
10	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
11	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
12	D14006	Tab. Primaquin Phosphate (Coated) (Aluminium foil/ Blister pack)	7.5 mg/Tab,13 mg of primaquin phosphate equivalent to 7.5 mg of primaquin		Qualified.
13	D14023	Tab. Anti-Malarial Combipack (Blister Pack) Infant less than 1 year	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 25mg) and one tablet of Sulphadoxine and Pyrimethamine (250mg + 12.5mg) Second Row (Day 2): one tablet of Artesunate 25mg Third Row (Day 3): one tablet of Artesunate 25mg.	No Mfg. License , No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause No. 5.2.1., 5.2.2., 5.2.9. & 5.2.10 respectively.	Not Qualified.
14	D14024	Tab. Anti-Malarial Combipack (Blister Pack) Children 1 - 4 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 50mg) and one tablet of Sulphadoxine and Pyrimethamine (500mg + 25mg) Second Row (Day 2): one tablet of Artesunate 50mg Third Row (Day 3): one tablet of Artesunate 50mg.	No Mfg. License , No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause No. 5.2.1., 5.2.2., 5.2.9. & 5.2.10 respectively.	Not Qualified.
15	D14025	Tab. Anti-Malarial Combipack (Blister Pack) Children 5 - 8 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 100mg) and one tablet of Sulphadoxine and Pyrimethamine (750mg + 37.5mg) Second Row (Day 2): one tablet of Artesunate 100mg Third Row (Day 3): one tablet of Artesunate 100mg.	No Market Standing as per clause No. 5.2.9.	Not Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
16	D14026 Tab. Anti-Malarial Combipack (Blister Pack) Children 9 - 14 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 150mg) and two tablets of Sulphadoxine and Pyrimethamine (500mg + 25mg) each Second Row (Day 2): one tablet of Artesunate 150mg Third Row (Day 3): one tablet of Artesunate 150mg.	No Mfg. License , No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause No. 5.2.1., 5.2.2., 5.2.9. & 5.2.10 respectively.	Not Qualified.
17	D14035 Tab. Primaquin Phosphate (coated) (Aluminium foil/ Blister pack)	2.5mg/Tab.		Qualified.
18	D16038 Tab. Ferrous Sulphate + Folic Acid(Enteric Coated, Red Colour) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron + Folic Acid 0.5mg (500mcg) / Enteric Coated Tablet		Qualified.
19	D16044 Tab. Ferrous Sulphate + Folic Acid (Small) (Sugar Coated and Pink coloured) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal lacquer) IFA (Sma	Each Tblet Contains:Equivalent to 45 mg of Elemental Iron + Folic Acid 0.4mg (400mcg)		Qualified.
20	D16049 Tab. Ferrous Sulphate + Folic Acid(Sugar Coated, Red Colour) (Aluminium foil/Blister pack)	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coated Tablet		Qualified.
21	D16050 Tab. Ferrous Sulphate + Folic Acid (Large) (Sugar Coated and blue coloured-Indigo caramine) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal l	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coated Tablet		Qualified.
22	D17001 Tab. Isosorbide Dinitrate (Alluminium Foil/Blister Pack)	5 mg/Tab	No Market Standing as per clause No. 5.2.9. & Format T10 (B) not Submitted.	Not Qualified.
23	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
24	D17049 Tab. Enalapril Maleate (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
25	D17052 Tab. Nifedipine Sustained Release (SR) (Aluminium foil/Blister pack)	20mg/SR Tab.		Qualified.
26	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab		Qualified.
27	D20005 Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
28	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
29	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab		Qualified.
30	D22010 Tab. Levo Thyroxin Sodium (Aluminium Foil/ Blister Pack)	50 mcg/Tab		Qualified.
31	D22015 Tab. Levo Thyroxine Sodium	25 mcg/Tab		Qualified.
32	D27001 Tab. Diazepam (Aluminium Foil / Blister pack)	5 mg/Tab	No Market Standing as per clause No. 5.2.9(for Export).	Not Qualified.
33	D27006 Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab	No Market Standing as per clause No. 5.2.9(for Export).	Not Qualified.
34	D27015 Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab		Qualified.
35	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab		Qualified.
36	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
37	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)		Qualified.
38	D30015 Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**60 M/s. REGENT AJANTA BIOTECH ,Haridwar (Uttarakhand)**

1	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
2	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
3	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab	No Market Standing as per clause No. 5.2.9. & Format T10 (B) not Submitted.	Not Qualified.
4	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
5	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab		Qualified.
6	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
7	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
8	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
9	D09100	Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.		Qualified.
10	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
11	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
12	D09135	Susp. Linezolid (Palatable, plastic container as per I.P with Dropper)	100mg/5ml		Qualified.
13	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
14	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
15	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
16	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
17	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
18	D17015	Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
19	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
20	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
21	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
22	D17071	Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
23	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
24	D20012	Tab. Toremide (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
25	D21024	Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
26	D21031	Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
27	D21038	Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
28	D21051	Tab. Hydroxyzine (Aluminium foil/Blister pack)	25 mg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
29	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
30	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
31	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
32	D24012 Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
33	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
34	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
35	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab		Qualified.
36	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
37	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
38	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
39	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
40	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
41	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
42	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
43	D46005 Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
59	<b>61 M/s. CIPCO PHARAMCEUTICALS ,Indore (MP)</b>			
1	D04003 Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D04032 Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
4	D05016 Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
5	D09017 Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
6	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
7	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
8	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
9	D11005 TAB. INH (Aluminium foil/Blister pack)	300 mg/Tab		Qualified.
10	D16044 Tab. Ferrous Sulphate + Folic Acid (Small) (Sugar Coated and Pink coloured) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal lacquer) IFA (Sma	Each Tblet Contains:Equivalent to 45 mg of Elemental Iron + Folic Acid 0.4mg (400mcg)	No Drug Endorsement & No Market Standing (colour of coating not mentioned) as per clause No. 5.2.9.	Not Qualified.
11	D16049 Tab. Ferrous Sulphate + Folic Acid(Sugar Coated, Red Colour) (Aluminium foil/Blister pack)	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet	No Drug Endorsement & No Market Standing (colour of coating not mentioned) as per clause No. 5.2.9.	Not Qualified.
12	D16050 Tab. Ferrous Sulphate + Folic Acid (Large) (Sugar Coated and blue coloured-Indigo caramine) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal l	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet		Qualified.
13	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
14	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab	No Drug Endorsement ,No WHO GMP certificate, No T8 for SR & Non Conviction certificate not submitted as per clause No. 5.2.2., 5.2.9. & 5.2.10 respectively.	Not Qualified.
15	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
16	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
17	D22051 Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
18	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
19	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
20	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)	No Market Standing as per clause No. 5.2.9.	Not Qualified.
21	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml		Qualified.
22	D30020 Syp. Vitamin B-Complex (Palatable, with measuring cap and plastic container as per I.P)	(Thiamine HCl IP- 2mg, Riboflavin Sod. Phosp. IP-2.54mg, Pyridoxine HCl IP-2mg, Nicotinamide IP-20mg, D-Panthenol IP-6mg, Ascorbic Acid IP 75mg) / 5 ml	No Drug Endorsement, No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause no. 5.2.2, 5.2.9 & 5.2.10 respectively.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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62 M/s. VIVEK PHARMACHEM (INDIA) LTD. ,Jaipur

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04004	Inj. Paracetamol	150 mg/ml		Qualified.
3	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
4	D04010	Inj. Diclofenac Sodium	25 mg/ml		Qualified.
5	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
6	D05023	Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial		Qualified.
7	D05029	Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
8	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
9	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB		Qualified.
10	D09003	Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml		Qualified.
11	D09004	Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial		Qualified.
12	D09009	Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml		Qualified.
13	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)		Qualified.
14	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
15	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Blacklisted by TNMSC up to 28/11/2024.	Not Qualified.
16	D09026	Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
17	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
18	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
19	D09051	Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)	No Drug Endorsement for DT, No WHO GMP certificate, & Non Conviction certificate not submitted as per clause no. 5.2.2& 5.2.10 respectively.	Not Qualified.
20	D09053	Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial		Qualified.
21	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
22	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
23	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
24	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
25	D09093	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
26	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
27	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
28	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
29	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
30	D09112 Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavulanic Acid 200mg / Vial		Qualified.
31	D09119 Inj. Ceftazidime(with diluents in plastic container)	1gm/vial		Qualified.
32	D09129 Inj. Cefepime (with diluents in plastic container)	500mg/vial	No Market Standing as per clause No. 5.2.9.	Not Qualified.
33	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
34	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
35	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
36	D09162 Inj. Ampicillin + Cloxacilline (with diluents in plastic container)	Ampicillin 250 mg + Cloxacilline 250 mg / Vial	No Market Standing as per clause No. 5.2.9.	Not Qualified.
37	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
38	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
39	D14002 Syp. Chloroquin Phosphate (Palatable, with measuring cap and plastic container as per I.P)	80 mg of Chloroquin phosphate/5ml(with measuring cap and palatable) OR Chloroquine 50mg/5ml		Qualified.
40	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
41	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)	No Drug Endorsement, No WHO GMP certificate, No Market Standing(Strength not matching) & Non Conviction certificate not submitted as per clause no. 5.2.2, 5.2.9 & 5.2.10 respectively.	Not Qualified.
42	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
43	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
44	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
45	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
46	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
47	D18003 Silver Sulphadiazine Cream	1% w/w		Qualified.
48	D18020 Cream Silver Sulphadiazine	1% w/w		Qualified.
49	D18024 Povidone Iodine Oint.	5 % w/w		Qualified.
50	D18027 Cream Clotrimazole	1% w/w		Qualified.
51	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
52	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
53	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
54	D25034 Moxifloxacin Eye Drop	0.5% w/v		Qualified.
55	D25035 Dorzolamide HCl Eye Drop	2% w/v or 20 mg/ml		Qualified.
56	D26007 Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab		Qualified.
57	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)		Qualified.
58	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml		Qualified.
59	D31034 Sterile Water For Injection (Plastic Container as per IP)	10ml/Vial/Amp. (FFS / BFS Plastic Container)		Qualified.
60	D32015 Cap. Oseltamivir (Aluminium foil/Blister pack)	75 mg/Cap		Qualified.

61 **63 M/s. D R PAINT AND CHEMICALS ,Raipur (Chhattisgarh)**

1	D19006 Surgical Spirit IP (Plastic container as per I.P)	.	No WHO GMP certificate & Less Turnover Rs. 2 Crores for the Year 2019-20 as per clause No. 5.2.2. & 5.2.5. respectively.	Not Qualified.
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62 **64 M/s. NOVO NORDISK INDIA PRIVATE LIMITED ,Bangalore (Karnataka)**

1	D16048 Inj. Factor VII (Recombinant) (with diluents in plastic or glass container)	Each unit packet shall contain the following: i) 1 Vial/ 1mg. ii) 1 Vial Sterilized required diluents. iii) 1 Transfer / Filler Set. iv) 1 Disposable Syringe: 5ml, v) 1 Disposable Needle, vii) Alcohol Swab.		Qualified.
2	D16058 Recombinant Factor VIII (Plasma Free, Human Albumin Free)	250 IU / Vial (As per EDL Specification)		Qualified.
3	D16059 Recombinant Factor VIII (Plasma Free, Human Albumin Free)	500 IU / Vial (As per EDL Specification)		Qualified.
4	D16060 Recombinant Factor VIII (Plasma Free, Human Albumin Free)	1000 IU / Vial (As per EDL Specification)		Qualified.
5	D22035 Insulin Lispro/ Aspart	100 units/ml		Qualified.
6	D22045 Inj. Liraglutide	6mg/1ml pre-filled pen (rDNA origin)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**65 M/s. SUPERMAX DRUGS & PHARMACEUTICALS PVT. LTD. ,Narela (Delhi)**

1	D04010	Inj. Diclofenac Sodium	25 mg/ml		Qualified.
2	D04021	Inj. Tramadol HCl	50 mg/ml		Qualified.
3	D04061	Tab. Naproxen (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
4	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
5	D05022	Tab. Dexamethasone(Aluminium foil/Blister pack)	4 mg/Tab		Qualified.
6	D05023	Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial		Qualified.
7	D05029	Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
8	D07005	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)		Qualified.
9	D07008	Susp. Phenytoin Sodium (With Measuring Cap & Palatable, Plastic container as per IP)	25 mg/ ml		Qualified.
10	D07012	Sodium Valproate Oral Solution IP (Palatable, with measuring cap and plastic container as per I.P)	200 mg / 5ml		Qualified.
11	D07019	Inj. Levetiracetam	100mg/ml		Qualified.
12	D07022	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)		Qualified.
13	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
14	D09004	Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial		Qualified.
15	D09019	Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin	No Drug Endorsement (Amp. instead of Vial)	Not Qualified.
16	D09046	Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
17	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
18	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
19	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml	No Market Standing(100 mg /5 ml instead of 200 mg/5 ml) as per clause no. 5.2.9.	Not Qualified.
20	D09099	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
21	D09100	Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.		Qualified.
22	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
23	D09112	Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavunic Acid 200mg / Vial		Qualified.
24	D09119	Inj. Ceftazidime(with diluents in plastic container)	1gm/vial		Qualified.
25	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
26	D09135	Susp. Linezolid (Palatable, plastic container as per I.P with Dropper)	100mg/5ml		Qualified.
27	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D09137 Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
29	D09141 Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
30	D09160 Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
31	D09162 Inj. Ampicillin + Cloxacilline (with diluents in plastic container)	Ampicillin 250 mg + Cloxacilline 250 mg / Vial		Qualified.
32	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
33	D09176 Cap. Cefdinir (Aluminium foil/Blister pack)	300 mg/Cap		Qualified.
34	D09177 Tab. Minocycline (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
35	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
36	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)		Qualified.
37	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
38	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
39	D16014 Inj. Hydroxocobalamine	1mg / ml		Qualified.
40	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
41	D16022 Tab. Deferasirox (Aluminium foil/Blister pack)	100 mg/Tab	No Market Standing(for 500 mg instead of 100 mg) as per clause no. 5.2.9.	Not Qualified.
42	D21025 Inj. Rabeprazole (I.V) (with diluents in plastic container)	20mg / Vial		Qualified.
43	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
44	D21035 Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.
45	D21036 Inj. Drotaverine	20 mg/ml		Qualified.
46	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
47	D27034 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foil/ Blister pack)	250 mg / Tab		Qualified.
48	D27035 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foil/ Blister pack)	500 mg / Tab	No Market Standing(for Film coated) as per clause no. 5.2.9.	Not Qualified.
49	D28001 Inj. Theophylline & Etophylline	(Theophylline 50.6 mg + Etophylline 169.4 mg)/2ml		Qualified.
50	D29008 Inj. Sodium Bi-Carbonate	7.5% w/v		Qualified.
51	D30021 Inj. Phytomenadione (Vit-K1)	1mg/0.5ml	No Drug Endorsement & No Market Standing as per clause no. 5.2.9.	Not Qualified.
52	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
53	D30046 Tab. Alpha Ketoanalogue (Aluminium foil/Blister pack)	As per tender specification		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
54	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
55	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.
56	D46009 Tab. Mycophenolate (Aluminium foil/Blister pack)	250 mg/ Tab		Qualified.
57	D46011 Cap. Tacrolimus (Aluminium foil/Blister pack)	0.25mg/ Cap.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**66 M/s. INNOVA CAPTAB LTD. ,Solan (HP), Ph: 173205**

1	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
2	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Qualified.
3	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	Qualified.
4	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
5	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab	Qualified.
6	D05032	Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.	Qualified.
7	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Qualified.
8	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	Qualified.
9	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB	Qualified.
10	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab	Qualified.
11	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Qualified.
12	D09026	Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab	Qualified.
13	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
14	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab	Qualified.
15	D09051	Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)	Qualified.
16	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Qualified.
17	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab	Qualified.
18	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.	Qualified.
19	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Qualified.
20	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.	Qualified.
21	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored	Qualified.
22	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored	Qualified.
23	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	Qualified.
24	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
25	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.	Qualified.
26	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)	Qualified.
27	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.	Qualified.
28	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	Qualified.
29	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab	Qualified.
30	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
31	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
32	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
33	D17085 Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
34	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)		Qualified.
35	D20012 Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
36	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
37	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
38	D21032 Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
39	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
40	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
41	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
42	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
43	D22051 Tab. Teneligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
44	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
45	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
46	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
47	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
48	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
49	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**67 M/s. JPEE DRUGS ,Haridwar (Uttarakhand)**

1	D02001 Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg		Qualified.
2	D04004 Inj. Paracetamol	150 mg/ml		Qualified.
3	D04010 Inj. Diclofenac Sodium	25 mg/ml		Qualified.
4	D04021 Inj. Tramadol HCl	50 mg/ml		Qualified.
5	D04022 Tab. Paracetamol Kid (Disp. Tab.) (Aluminium foil/Blister pack)	125 mg/Tab		Qualified.
6	D04025 Tab. Aceclofenac(Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
7	D05001 Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)		Qualified.
8	D05002 Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
9	D05007 Inj. Pheniramine Maleate	22.75 mg/ml		Qualified.
10	D05013 Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
11	D05015 Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
12	D05016 Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml	No Drug Endorsement (Susp. instead of Syp.) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
13	D05029 Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
14	D05032 Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.		Qualified.
15	D09003 Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml		Qualified.
16	D09004 Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial		Qualified.
17	D09009 Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml		Qualified.
18	D09019 Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
19	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
20	D09026 Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
21	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
22	D09046 Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
23	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
24	D09051 Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)		Qualified.
25	D09053 Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial		Qualified.
26	D09060 Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
27	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
28	D09086 Inj. Cefoperazone & Sulbactam (with diluents in plastic container)	250mg Cefoperazone + 250mg Sulbactam/vial		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
29	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
30	D09091 Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
31	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
32	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
33	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
34	D09112 Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavulanic Acid 200mg / Vial		Qualified.
35	D09122 Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
36	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
37	D09126 Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
38	D09129 Inj. Cefepime (with diluents in plastic container)	500mg/vial		Qualified.
39	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
40	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
41	D09137 Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
42	D09150 Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
43	D09170 Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
44	D09173 Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml		Qualified.
45	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
46	D12007 Tab Fluconazole (Dispersible Tab.) (Aluminium foil/ Blister pack)	50 mg/Tab		Qualified.
47	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
48	D12012 Clotrimazole Lotion (Plastic Container)	Clotrimazole 1% w/v or w/w		Qualified.
49	D12020 Cream Terbinafine	1% w/w		Qualified.
50	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
51	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)		Qualified.
52	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
53	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
54	D16011 Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
55	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
56	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
57	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
58	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)		Qualified.
59	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
60	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
61	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
62	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)		Qualified.
63	D18021 Clotrimazole Mouth Paint (Plastic Container as per IP)	1% w/v		Qualified.
64	D18027 Cream Clotrimazole	1% w/w		Qualified.
65	D18028 Clindamycin Cream or gel	1% w/w		Qualified.
66	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
67	D18032 Mupirocin Ointment	2 % w/w		Qualified.
68	D18033 Cream or Oint Betamethasone Valerate	0.1% w/v		Qualified.
69	D18044 Gamma Benzene Hexa Chloride + Bensocaine	Gamma Benzene Hexa Chloride 1% + Bensocaine 2%		Qualified.
70	D18045 Cream Fluocinolone Acetonide	Fluocinolone Acetonide 0.1% w/w (Anhydrous) in cream base		Qualified.
71	D20002 Inj. Frusemide	10 mg/ 1 ml		Qualified.
72	D21001 Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.
73	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
74	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
75	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab		Qualified.
76	D21013 Inj. Dicyclomine HCl	10 mg/ml		Qualified.
77	D21014 Oral Solution or Syp. Dicyclomine (Palatable, with measuring cap and plastic container as per I.P)	10 mg/5 ml		Qualified.
78	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
79	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
80	D21021 Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
81	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
82	D21025 Inj. Rabeprazole (I.V) (with diluents in plastic container)	20mg / Vial		Qualified.
83	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
84	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
85	D21032 Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
86	D21036 Inj. Drotaverine	20 mg/ml		Qualified.
87	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
88	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
89	D21049 Susp. / Syp. Drotaverine (With Measuring Cap and Dropper, Palatable) (plastic container as per I.P)	20 mg / 5ml		Qualified.
90	D21050 Tab. Esomeprazole (Aluminium foil/Blister pack)	20mg / Tab. (Enteric Coated)		Qualified.
91	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
92	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
93	D25034 Moxifloxacin Eye Drop	0.5% w/v		Qualified.
94	D25056 Carboxymethyl Cellulose Eye drop	0.5% w/v		Qualified.
95	D26002 Inj. Oxytocin	5 IU/1ml		Qualified.
96	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
97	D28001 Inj. Theophylline & Etophylline	(Theophylline 50.6 mg + Etophylline 169.4 mg)/2ml		Qualified.
98	D28003 Tab. Theophylline and Etophylline (Aluminium foil/Blister pack)	Theophylline 23 mg and Etophylline 77 mg/Tab		Qualified.
99	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
100	D28030 Dextromethorphan + Phenylepherin + Triprolidine	Dextromethorphan 10mg + Phenylepherin 5mg + Triprolidine 1.25mg / 5ml		Qualified.
101	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)		Qualified.
102	D30006 Tab. Vitamin C (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
103	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml		Qualified.
104	D30020 Syp. Vitamin B-Complex (Palatable, with measuring cap and plastic container as per I.P)	(Thiamine HCl IP- 2mg, Riboflavin Sod. Phosp. IP-2.54mg, Pyridoxine HCl IP-2mg, Nicotinamide IP-20mg, D-Panthenol IP-6mg, Ascorbic Acid IP 75mg) / 5 ml		Qualified.
105	D30021 Inj. Phytomenadione (Vit-K1)	1mg/0.5ml		Qualified.
106	D30022 Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.		Qualified.
107	D30025 Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
108	D30028 Inj. Vitamin B Complex (Therapeutic)	Each ml contains B1=10 mg, B2=4mg, B6=4mg, B12=8mcg, Nicotinamide=40mg, D-Panthenol=6mg		Qualified.
109	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet		Qualified.
110	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
111	D30043 Drop Vit. D3 (Cholecalciferol)	400 IU/ml		Qualified.
112	D30044 Syp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc		Qualified.
113	D30047 Tab./Cap. Multivitamin & Multimineral	Each Tab./Cap. Contain :Vitamin A 900 mcg, Vitamin B2(riboflavin) 2.7mg, Vitamin B6(pyridoxine) 2.3mg, Vitamin B9(folate) 570 mcg, VitaminB12(cobalamin) 2.45 mcg, Vitamin C 80mg, Vitamin D 600I.U. , Vitamin E 7.5 to 10mg, Copper 2mg, Zinc 14.5mg		Qualified.
114	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

66 **68 M/s. NOVARTIS INDIA LTD. ,Mumbai**

1	D46015 Cap./Tab. Everolimus	0.25 mg/(Cap./Tab.)		Qualified.
2	D46016 Cap./Tab. Everolimus	0.5 mg/(Cap./Tab.)		Qualified.

67 **69 M/s. BHARAT SERUMS AND VACCINES LTD. ,Navi Mumbai**

1	D12021 Inj. Amphotericine B Liposomal (with diluents in plastic container)	50 mg/Vial		Qualified.
2	D22054 Inj. HMG with diluents	75 IU/Vial		Qualified.
3	D22055 Inj. Leuprolide Depot with diluent	3.75 mg/vial		Qualified.
4	D23002 Inj. Snake Venom AntiSerum (Polyvalent) with diluents	10 ml/Vial (Lyphillised, Powder form)		Qualified.
5	D23010 Equine Rabies Immunoglobulin	1500 IU / 5 ml (Rabies Immunoserum)		Qualified.
6	D23011 Inj. Human Anti-D Immunoglobuline	300mcg/ (2ml/1ml) Amp/Vial		Qualified.
7	D23012 Inj. Tetanus Immunoglobulin / Human Tetanus Immunoglobulin	250 IU/Vial		Qualified.
8	D23014 Inj. Human Rabies Immunoglobuline	300 IU / 2ML		Qualified.
9	D26005 Inj. Carboprost Tromethamine	250 mcg/ml		Qualified.
10	D45014 Inj. ATG Horse	250 mg/Vial		Qualified.

68 **70 M/s. MED MANOR ORGANICS PVT. LTD. ,Hyderabad**

1	D18032 Mupirocin Ointment	2 % w/w	Annual audited Financial Statements not uploaded.	Not Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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69 **71 M/s. AGRON REMEDIES PVT. LTD. ,Kashipur**

1	D04004	Inj. Paracetamol	150 mg/ml		Qualified.
2	D09009	Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml		Qualified.
3	D21001	Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.
4	D21039	Inj. Ondansetron	2 mg/ml		Qualified.
5	D25045	Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)		Qualified.
6	D25056	Carboxymethyl Cellulose Eye drop	0.5% w/v	No Drug Endorsement (10 ml instead of 5 ml)	Not Qualified.
7	D28001	Inj. Theophylline & Etophylline	(Theophylline 50.6 mg + Etophylline 169.4 mg)/2ml		Qualified.

70 **72 M/s. SAMARTH LIFE SCIENCES PVT. LTD. ,Mumbai**

1	D01008	Inj. Atracurium Besylate	10 mg/ ml		Qualified.
2	D02006	Inj. Bupivacaine	5 mg/ml		Qualified.
3	D03002	Inj. Glycopyrrolate	0.2 mg/ml		Qualified.
4	D03005	Inj. Dexmedetomidine	200mcg/2ml		Qualified.
5	D07002	Inj. Phenobarbitone	200 mg/ml		Qualified.
6	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
7	D09141	Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
8	D09160	Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
9	D16012	Inj. Tranexamic Acid	500mg/5ml		Qualified.
10	D16039	Inj. Vassopressin	20 Units/ml		Qualified.
11	D17013	Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
12	D17039	Inj. Amiodarone	50mg/ml		Qualified.
13	D17040	Inj. Dobutamine HCl	50mg / ml		Qualified.
14	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
15	D17043	Inj. Labetalol	20mg/4ml Amp.		Qualified.
16	D17050	Inj. Esmolol Hydrochloride	10mg/ml		Qualified.
17	D17054	Inj. Adenosine	3mg/ml		Qualified.
18	D18034	Inj. Acyclovir (with diluents in plastic container)	250mg/vial		Qualified.
19	D21042	Inj. Octreotide	50mcg / ml		Qualified.
20	D24005	Inj. Vecuronium Bromide	4mg /2ml		Qualified.
21	D30021	Inj. Phytomenadione (Vit-K1)	1mg/0.5ml	No EMD Cost submitted & No Market Standing as per clause no. 6.5.1. & 5.2.9. respectively.	Not Qualified.
22	D46005	Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
71	<b>73 M/s. COOPER PHARMA LTD. ,Delhi</b>			
1	D04010 Inj. Diclofenac Sodium	25 mg/ml		Qualified.
2	D04021 Inj. Tramadol HCl	50 mg/ml		Qualified.
3	D05004 Tab. Prednisolone (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
4	D05015 Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab	No Drug Endorsement, No WHO GMP certificate, & Non Conviction certificate not submitted as per clause no. 5.2.2& 5.2.10 respectively.	Not Qualified.
5	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
6	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
7	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
8	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml	No Drug Endorsement	Not Qualified.
9	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
10	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
11	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
12	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
13	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
14	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
15	D31052 Tab. Tadalafil (Aluminium foil/Blister pack)	20 mg / Tab.	No Drug Endorsement, No WHO GMP certificate, & Non Conviction certificate not submitted as per clause no. 5.2.2& 5.2.10 respectively.	Not Qualified.

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
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## 74 M/s. NANZ MEDSCIENCE PHARMA PVT. LTD. ,Paonta Sahib (HP)

1	D12027	Lotion Ketoconazole	2% w/v		Qualified.
2	D18007	Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
3	D18011	Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
4	D18021	Clotrimazole Mouth Paint (Plastic Container as per IP)	1% w/v		Qualified.
5	D18023	Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
6	D18024	Povidone Iodine Oint.	5 % w/w		Qualified.
7	D18028	Clindamycin Cream or gel	1% w/w		Qualified.
8	D18029	Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
9	D18032	Mupirocin Ointment	2 % w/w		Qualified.
10	D18046	Fusidic Acid Cream	0.02 w/w		Qualified.
11	D18048	Povidone Iodine Scrub	7.5% w/v		Qualified.
12	D18054	Povidone Iodine Solution (Plastic container as per I.P)	10% w/v		Qualified.
13	D19009	Soln. Chlorohexidine Gluconate + Cetrimide + Isopropyl Alcohol	Chlorohexidine Gluconate 0.3% w/v + Cetrimide 0.6% w/v + Isopropyl Alcohol 4% v/v	No Market Standing as per clause No. 5.2.9.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**75 M/s. ZEST PHARMA ,Indore**

1	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D04032	Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
4	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
5	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
6	D09026	Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
7	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
8	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
9	D09051	Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)		Qualified.
10	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
11	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
12	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
13	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
14	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
15	D09134	Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
16	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
17	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
18	D13008	Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab		Qualified.
19	D14024	Tab. Anti-Malarial Combipack (Blister Pack) Children 1 - 4 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 50mg) and one tablet of Sulphadoxine and Pyrimethamine (500mg + 25mg) Second Row (Day 2): one tablet of Artesunate 50mg Third Row (Day 3): one tablet of Artesunate 50mg.		Qualified.
20	D14025	Tab. Anti-Malarial Combipack (Blister Pack) Children 5 - 8 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 100mg) and one tablet of Sulphadoxine and Pyrimethamine (750mg + 37.5mg) Second Row (Day 2): one tablet of Artesunate 100mg Third Row (Day 3): one tablet of Artesunate 100mg.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
21	D14026 Tab. Anti-Malarial Combipack (Blister Pack) Children 9 - 14 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 150mg) and two tablets of Sulphadoxine and Pyrimethamine (500mg + 25mg) each Second Row (Day 2): one tablet of Artesunate 150mg Third Row (Day 3): one tablet of Artesunate 150mg.		Qualified.
22	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
23	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
24	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
25	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
26	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
27	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.	No Drug Endorsement (Film coated instead of Dispersible) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
28	D21038 Symp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
29	D38001 RTI / STI Kit 1	Each Kit contains: Tab. Azithromycin (1 gm) IP - 1 Tab. Tab. Cefixime (400 mg) IP - 1 Tab.		Qualified.
30	D38002 RTI / STI Kit 2	Each Kit contains: Tab. Secnidazole (1gm) IP - 2 Tabs. Tab. Fluconazole 150 mg - 1 Tab.	No Drug Endorsement, No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause no. 5.2.2, 5.2.9 & 5.2.10 respectively.	Not Qualified.
31	D38005 RTI / STI Kit 5	Each Kit contains: Tab. Acyclovir 400mg - 21 Tabs.		Qualified.
32	D38006 RTI / STI Kit 6	Each Kit contains: Tab. Cefixime (400 mg) IP - 1 Tab. and Tab. Metronidazole (400 mg) IP - 28 Tab. and Tab. / Cap. Doxycycline (100 mg) IP- 28 Cap./Tab.		Qualified.
33	D38013 Tab. Anti-Malarial Combipack (Blister Pack) (Adults 15 year and above)	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 200mg) and two tablets of Sulphadoxine and Pyrimethamine (750mg + 37.5mg) each Second Row (Day 2): one tablet of Artesunate 200mg Third Row (Day 3): one tablet of Artesunate 200mg		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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76 M/s. ACULIFE HEALTHCARE PVT. LTD. ,Ahmedabad(Gujarat)

1	D01008	Inj. Atracurium Besylate	10 mg/ ml		Qualified.
2	D01022	Inj. Propofol (1%)	10mg / ml		Qualified.
3	D02001	Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg		Qualified.
4	D02007	Lidocaine Hydrochloride gel 2%	30 gm/Tube		Qualified.
5	D02008	Inj. Bupivacaine (Heavy)	Bupivacaine 5mg/ml + Dextrose 80mg / ml		Qualified.
6	D04033	Inj. Paracetamol I.V	1000 mg/ 100ml		Qualified.
7	D09007	Inj. Ciprofloxacin I.V.	200mg/100ml (FFS Plastic Container)		Qualified.
8	D09073	Inj. Ofloxacin I.V	200mg/100ml Bottle (FFS Plastic Container)		Qualified.
9	D09121	Inj. Linezolid I.V	600mg/300ml		Qualified.
10	D13003	Metronidazole Injection ( Metronidazole Intravenous Infusion)	500 mg/100 ml Bottle (FFS Plastic Container)		Qualified.
11	D20004	Inj. Mannitol (Mannitol Intravenous Infusion)	20% w/v (FFS Plastic container)		Qualified.
12	D29001	I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
13	D29002	I.V Dextrose and Sodium Chloride (DNS)	5% w/v Dextrose, 0.9% w/v Sodium Chloride (FFS Plastic Container)		Qualified.
14	D29003	I.V Compound Sodium Lactate (RingerS Lactate) RL	Lactic Acid-0.24w/v equivalent to 0.32% w/v of sodium lactate sodium chloride-0.6% w/v, potassium chloride-0.04% w/v, calcium chloride-0.027% w/v (FFS Plastic Container)		Qualified.
15	D29005	I.V Dextrose 10% (10D)	10% w/v (FFS Plastic Container)		Qualified.
16	D29009	Multi Electrolyte AND Dextrose Inj. Type 1 IP (Paediatric Maintenance Solution Type 1)	Each 100ml contains Dextrose Anhydrous 5gm, Potassium Chloride 0.130 gm, Sodium Acetate 0.320gm, Diabasic Potassium Phosphate 0.026gm, Magnesium Chloride 0.031gm. (FFS Plastic Container)		Qualified.
17	D29012	I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
18	D31001	Sterile Water For Injection (Plastic Container as per IP)	5ml/Amp, (FFS / BFS Plastic Container)		Qualified.
19	D31034	Sterile Water For Injection (Plastic Container as per IP)	10ml/Vial/Amp. (FFS / BFS Plastic Container)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**77 M/s. MICROPURE PARENTERALS PVT LTD ,Mumbai (Maharashtra)**

1	D02001 Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg	No Drug Endorsement( Lignocaine 20 mg instead of 21.3 mg) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
2	D02003 Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml	No Drug Endorsement( Lignocaine 20 mg instead of 21.3 mg) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
3	D09019 Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
4	D09046 Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
5	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
6	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.

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**78 M/s. PINNACLE LIFE SCIENCE PRIVATE LIMITED ,Mumbai (Maharashtra)**

1	D04005 Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
4	D09017 Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
5	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
6	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
7	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
8	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
9	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
10	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
11	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.

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**79 M/s. LUPIN LIMITED ,Cuttack (Odisha)**

1	D07019 Inj. Levetiracetam	100mg/ml	Non Conviction certificate not submitted as per clause No. 5.2.10.	Not Qualified.
2	D11023 Cap. Cycloserine(Aluminium foil/Blister pack)	250 mg/Cap		Qualified.
3	D16051 Inj. Ferric Carboxy Maltose	1000 mg/Vial		Qualified.
4	D16054 Inj. Ferric Carboxymaltose (FCM)	500 mg/Vial		Qualified.
5	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
6	D28027 Indacaterol + Glycopyrronium	Indacaterol 110mg + Glycopyrronium 50mcg/ Cap. with inhaler		Qualified.
7	D33191 Inj. Ranibizumab	10mg/(PFS/Vial)	Less EMD Cost submitted & Invalid WHO GMP i.e. expired from 19/11/2022. as per clause No. 6.5.1. & 5.2.2. respectively.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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78 **80 M/s. FERTIN INDIA PRIVATE LIMITED ,Goa**

1	D31049	Nicotine Gum (Nicotine Polacrilex)	4 mg ( Palatable Base)	Qualified.
2	D31050	Nicotine Gum (Nicotine Polacrilex)	2 mg ( Palatable Base)	Qualified.

79 **81 M/s. AKUMS DRUGS & PHARMACEUTICALS LTD. ,New Delhi**

1	D04021	Inj. Tramadol HCl	50 mg/ml	Qualified.
2	D04033	Inj. Paracetamol I.V	1000 mg/ 100ml	Qualified.
3	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml	Qualified.
4	D07012	Sodium Valproate Oral Solution IP (Palatable, with measuring cap and plastic container as per I.P)	200 mg / 5ml	Qualified.
5	D07019	Inj. Levetiracetam	100mg/ml	Qualified.
6	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml	Qualified.
7	D09004	Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial	Qualified.
8	D09019	Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin	Qualified.
9	D09046	Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin	Qualified.
10	D09073	Inj. Ofloxacin I.V	200mg/100ml Bottle (FFS Plastic Container)	Qualified.
11	D09112	Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavunic Acid 200mg / Vial	Qualified.
12	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored	Qualified.
13	D16004	Inj. Heparin Sodium	5000 IU/(Amp or Vial)	Qualified.
14	D16012	Inj. Tranexamic Acid	500mg/5ml	Qualified.
15	D16018	Inj Iron Sucrose	50 mg/ 2.5 ml	Qualified.
16	D16035	Inj. Enoxaparin	40mg/(Amp./PFS)	Qualified.
17	D18032	Mupirocin Ointment	2 % w/w	Qualified.
18	D21038	Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml	Qualified.
19	D21039	Inj. Ondansetron	2 mg/ml	Qualified.
20	D22031	Tab. Medroxyprogesterone (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
21	D25045	Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)	Qualified.
22	D25050	Xylometazoline Nasal Drop	0.05% w/v (FFS / BFS Plastic Container)	Qualified.
23	D26007	Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab	Qualified.
24	D26017	Tab./Cap. Micronised Progesteron (Aluminium Foil/Blister pack)	200 mg	Qualified.
25	D30022	Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.	Qualified.
26	D30043	Drop Vit. D3 (Cholecalciferol)	400 IU/ml	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**82 M/s. PURE & CURE HEALTHCARE PVT. LTD. ,New Delhi**

1	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Qualified.
2	D04048	Tab. Tramadol (Prolonged Release) (Aluminium foil/ Blister pack)	50 mg/Tab	Qualified.
3	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	Qualified.
4	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab	Qualified.
5	D05032	Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.	Qualified.
6	D07005	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)	Qualified.
7	D07022	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)	Qualified.
8	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	Qualified.
9	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB	Qualified.
10	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Qualified.
11	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
12	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab	Qualified.
13	D09100	Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.	Qualified.
14	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.	Qualified.
15	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Qualified.
16	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	Qualified.
17	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.	Qualified.
18	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)	Qualified.
19	D14018	Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)	Qualified.
20	D16002	Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab	Qualified.
21	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.	Qualified.
22	D17006	Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab	Qualified.
23	D17007	Tab. Metoprolol Tartarate ER (Alluminium Foil/Blister Pack)	50 mg/Tab	Qualified.
24	D17015	Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab	Qualified.
25	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	Qualified.
26	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.	Qualified.
27	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab	Qualified.
28	D17049	Tab. Enalapril Maleate (Aluminium foil/Blister pack)	5 mg/Tab	Qualified.
29	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
30	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
31	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
32	D17085 Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
33	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)		Qualified.
34	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
35	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
36	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
37	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
38	D21025 Inj. Rabeprazole (I.V) (with diluents in plastic container)	20mg / Vial		Qualified.
39	D21026 Tab. Rabeprazole (Enteric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
40	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
41	D21031 Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
42	D21050 Tab. Esomeprazole (Aluminium foil/Blister pack)	20mg / Tab. (Enteric Coated)		Qualified.
43	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
44	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
45	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
46	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
47	D22039 Tab. Dapagliflozin (Aluminium foil/Blister pack)	10mg/Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
48	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
49	D22051 Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
50	D27034 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	250 mg / Tab		Qualified.
51	D27035 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	500 mg / Tab		Qualified.
52	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
53	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
54	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
55	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
56	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
57	D27121 Tab. Quetiapine SR (Aluminium foil/Blister pack)	100 mg / Tab		Qualified.
58	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
59	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
60	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet		Qualified.
61	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
62	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
63	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**83 M/s. UNICURE INDIA LTD. ,Noida**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
3	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
4	D04026	Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml		Qualified.
5	D04032	Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
6	D04044	Tab. Mephenamic Acid (Disp. Tab.) (Aluminium foil/Blister pack)	100 mg/ D.T		Qualified.
7	D04048	Tab. Tramadol (Prolonged Release) (Aluminium foill/ Blister pack)	50 mg/Tab		Qualified.
8	D04061	Tab. Naproxen (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
9	D05004	Tab. Prednisolone (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
10	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
11	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
12	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
13	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
14	D05022	Tab. Dexamethasone(Aluminium foil/Blister pack)	4 mg/Tab		Qualified.
15	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab		Qualified.
16	D05032	Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.		Qualified.
17	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
18	D07003	Tab. Carbamazepine (Controlled Release/Sustained Release/ Prolonged Release/ Extended Release) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
19	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
20	D07005	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)		Qualified.
21	D07008	Susp. Phenytoin Sodium (With Measuring Cap & Palatable, Plastic container as per IP)	25 mg/ ml		Qualified.
22	D07011	Phenobarbitone Oral Solution (Palatable, with measuring cap and plastic container as per I.P)	20mg/5ml		Qualified.
23	D07012	Sodium Valproate Oral Solution IP (Palatable, with measuring cap and plastic container as per I.P)	200 mg / 5ml		Qualified.
24	D07016	Tab. Clobazam (Aluminium foil/Blister pack)	5mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
25	D07022 Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)		Qualified.
26	D07026 Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
27	D07028 Oral solution or Syp. Levetiracetam (Palatable, with measuring cap and plastic container as per I.P)	100 mg/ 1ml		Qualified.
28	D08003 Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
29	D08004 Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
30	D09003 Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml		Qualified.
31	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
32	D09026 Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
33	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
34	D09043 Syp. Diethylcarbamazine Citrate (with measuring cap and palatable,plastic container as per I.P)	50 mg /5 ml		Qualified.
35	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
36	D09051 Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)		Qualified.
37	D09060 Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
38	D09066 Tab. Norfloxacin (Disp. Tab.) (Aluminium foil/ Blister pack)	100mg / Tab	Blacklisted by GMSD up to 25/04/2025.	Not Qualified.
39	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
40	D09091 Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
41	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
42	D09100 Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.		Qualified.
43	D09122 Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
44	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
45	D09126 Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
46	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
47	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
48	D09135 Susp. Linezolid (Palatable, plastic container as per I.P with Dropper)	100mg/5ml		Qualified.
49	D09137 Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
50	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
51	D09150 Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
52	D09170 Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
53	D09176 Cap. Cefdinir (Aluminium foil/Blister pack)	300 mg/Cap		Qualified.
54	D11007 Tab. Ethambutol (Coated) (Aluminium Foil/Blister Pack)	400 mg/Tab	No Drug Endorsement(uncoated Tab. instead of coated) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
55	D11010 Tab. Pyrazinamide (Coated) (Aluminium Foil/Blister Pack)	750 mg/Tab	No Drug Endorsement(uncoated Tab. instead of coated) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
56	D11026 Tab. Pyrazinamide (Coated) (Aluminium foil/Blister pack)	500 mg/Tab	No Drug Endorsement(uncoated Tab. instead of coated) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
57	D12004 Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
58	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
59	D12009 Clotrimazole Vaginal Pessaries with applicator	100mg/ Pessary		Qualified.
60	D12012 Clotrimazole Lotion (Plastic Container)	Clotrimazole 1% w/v or w/w		Qualified.
61	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
62	D12020 Cream Terbinafine	1% w/w		Qualified.
63	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
64	D12027 Lotion Ketoconazole	2% w/v		Qualified.
65	D13002 Susp. Tinidazole (Oral Susp.) (Palatable, with measuring cap and plastic container as per I.P)	150 mg/5 ml		Qualified.
66	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)		Qualified.
67	D13008 Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab		Qualified.
68	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
69	D14002 Syp. Chloroquin Phosphate (Palatable, with measuring cap and plastic container as per I.P)	80 mg of Chloroquin phosphate/5ml(with measuring cap and palatable) OR Chloroquine 50mg/5ml	No Drug Endorsement(Susp. instead of Syp.) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
70	D14023 Tab. Anti-Malarial Combipack (Blister Pack) Infant less than 1 year	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 25mg) and one tablet of Sulphadoxine and Pyrimethamine (250mg + 12.5mg) Second Row (Day 2): one tablet of Artesunate 25mg Third Row (Day 3): one tablet of Artesunate 25mg.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
71	D14024 Tab. Anti-Malarial Combipack (Blister Pack) Children 1 - 4 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 50mg) and one tablet of Sulphadoxine and Pyrimethamine (500mg + 25mg) Second Row (Day 2): one tablet of Artesunate 50mg Third Row (Day 3): one tablet of Artesunate 50mg.		Qualified.
72	D14025 Tab. Anti-Malarial Combipack (Blister Pack) Children 5 - 8 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 100mg) and one tablet of Sulphadoxine and Pyrimethamine (750mg + 37.5mg) Second Row (Day 2): one tablet of Artesunate 100mg Third Row (Day 3): one tablet of Artesunate 100mg.		Qualified.
73	D14026 Tab. Anti-Malarial Combipack (Blister Pack) Children 9 - 14 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 150mg) and two tablets of Sulphadoxine and Pyrimethamine (500mg + 25mg) each Second Row (Day 2): one tablet of Artesunate 150mg Third Row (Day 3): one tablet of Artesunate 150mg.		Qualified.
74	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
75	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
76	D16019 Iron drop(Palatable, with dropper and plastic container as per I.P)	Elemental Iron 50 mg / ml.		Qualified.
77	D16021 Syp. Iron(Palatable, with measuring cap and plastic container as per I.P)	Each 5ml Contains 30mg of Elemental Iron		Qualified.
78	D16022 Tab. Deferasirox (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
79	D16023 Tab. Deferasirox (Aluminium foil/Blister pack)	400 mg/Tab		Qualified.
80	D16038 Tab. Ferrous Sulphate + Folic Acid(Enteric Coated, Red Colour) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron + Folic Acid 0.5mg (500mcg) / Enteric Coated Tablet		Qualified.
81	D16044 Tab. Ferrous Sulphate + Folic Acid (Small) (Sugar Coated and Pink coloured) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal lacquer) IFA (Sma	Each Tblet Contains:Equivalent to 45 mg of Elemental Iron + Folic Acid 0.4mg (400mcg)		Qualified.
82	D16046 Glucose for Screening of GDM	75 gm per Packet Box with hermetically sealed in high-density polyethylene (HDPE) inner lining.		Qualified.
83	D16049 Tab. Ferrous Sulphate + Folic Acid(Sugar Coated, Red Colour) (Aluminium foil/Blister pack)	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet		Qualified.
84	D16050 Tab. Ferrous Sulphate + Folic Acid (Large) (Sugar Coated and blue coloured-Indigo caramine) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal l	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coatted Tablet		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
85	D17001 Tab. Isosorbide Dinitrate (Alluminium Foil/Blister Pack)	5 mg/Tab		Qualified.
86	D17006 Tab. Atenolol (Alluminium Foil/Blister Pack)	50 mg/Tab		Qualified.
87	D17008 Tab. Propranolol	40 mg/Tab		Qualified.
88	D17015 Tab. Amlodipine Besylate (Alluminium Foil/Blister Pack)	5 mg/Tab		Qualified.
89	D17024 Tab. Aspirin (Enteric Coated) (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
90	D17026 Tab. Hydrochlorothiazide (Aluminium Foil/Blister Pack)	12.5 mg/Tab		Qualified.
91	D17037 Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
92	D17042 Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
93	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
94	D17049 Tab. Enalapril Maleate (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
95	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
96	D17052 Tab. Nifedipine Sustained Release (SR) (Aluminium foil/Blister pack)	20mg/SR Tab.		Qualified.
97	D17055 Tab. Carvedilol (Aluminium foil/Blister pack)	3.125mg/Tab		Qualified.
98	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
99	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
100	D17085 Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
101	D18007 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
102	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
103	D18016 Tab. Acyclovir (Alluminium Foil/Blister Pack)	400 mg/ Tab (Scored)		Qualified.
104	D18019 Lotion Fluocinolone Acetonide (Plastic Container as per IP)	Fluocinolone Acetonide 0.01mg/ml	No Drug Endorsement(0.01% instead of 0.01mg/ml) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
105	D18021 Clotrimazole Mouth Paint (Plastic Container as per IP)	1% w/v		Qualified.
106	D18023 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
107	D18024 Povidone Iodine Oint.	5 % w/w		Qualified.
108	D18027 Cream Clotrimazole	1% w/w		Qualified.
109	D18028 Clindamycin Cream or gel	1% w/w		Qualified.
110	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
111	D18032 Mupirocin Ointment	2 % w/w		Qualified.
112	D18033 Cream or Oint Betamethasone Valerate	0.1% w/v		Qualified.
113	D18035 Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.		Qualified.
114	D18044 Gamma Benzene Hexa Chloride + Bensocaine	Gamma Benzene Hexa Chloride 1% + Bensocaine 2%		Qualified.
115	D18045 Cream Fluocinolone Acetonide	Fluocinolone Acetonide 0.1% w/w (Anhydrous) in cream base		Qualified.
116	D18046 Fusidic Acid Cream	0.02 w/w		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
117	D18048 Povidone Iodine Scrub	7.5% w/v		Qualified.
118	D18050 Sertaconazole Vaginal Tablet	500 mg/Tab. (with applicator)	No Market Standing as per clause No. 5.2.9.	Not Qualified.
119	D18052 Benzyl Peroxide gel	5 % w/w		Qualified.
120	D18054 Povidone Iodine Solution (Plastic container as per I.P)	10% w/v		Qualified.
121	D18056 Tab. Entecavir (Aluminium foil/Blister pack)	1 mg/Tab.		Qualified.
122	D19008 Chloroxylenol Solution (Plastic Container as per IP)	5% w/v		Qualified.
123	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab		Qualified.
124	D20005 Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab		Qualified.
125	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
126	D21006 Syp. Promethazine (Palatable, with measuring cap and plastic container as per I.P)	5 mg/5 ml		Qualified.
127	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
128	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab		Qualified.
129	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
130	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
131	D21021 Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml	No Drug Endorsement (1 gm/5ml instead of 1 gm/10ml)	Not Qualified.
132	D21026 Tab. Rabeprazole (Enteric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
133	D21028 Dicyclomine Drop (Palatable, with dropper and plastic container as per I.P)	Dicyclomine HCl 10mg + Activated Dimethicone 40mg / ml		Qualified.
134	D21031 Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
135	D21032 Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
136	D21035 Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.
137	D21037 Tab. Promethazine (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
138	D21049 Susp. / Syp. Drotaverine (With Measuring Cap and Dropper, Palatable) (plastic container as per I.P)	20 mg / 5ml		Qualified.
139	D21050 Tab. Esomeprazole (Aluminium foil/Blister pack)	20mg / Tab. (Enteric Coated)		Qualified.
140	D21051 Tab. Hydroxyzine (Aluminium foil/Blister pack)	25 mg/Tab.		Qualified.
141	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
142	D22004 Tab. Glipizide (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
143	D22010 Tab. Levo Thyroxin Sodium (Aluminium Foil/ Blister Pack)	50 mcg/Tab		Qualified.
144	D22013 Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
145	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
146	D22015 Tab. Levo Thyroxine Sodium	25 mcg/Tab		Qualified.
147	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
148	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
149	D22031 Tab. Medroxyprogesterone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
150	D22047 Tab. Pioglitazone (Aluminium foil/Blister pack)	15mg / Tab.		Qualified.
151	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
152	D24012 Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
153	D25079 Wax Softner	Paradichlorobenzene 2%, benzocaine 2.7%, turpentine oil 15%, chlorbutol 5% (FFS / BFS Plastic Container)		Qualified.
154	D26003 Tab. Methylethergometrine Maleate (Aluminium foil/ Blister pack)	0.125 mg/Tab		Qualified.
155	D26008 Tab. Norethisterone IP (Aluminium foil/Blister pack)	5mg/ Tab		Qualified.
156	D26047 Tab. Doxylamine Succinate (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
157	D27001 Tab. Diazepam (Aluminium Foil / Blister pack)	5 mg/Tab		Qualified.
158	D27006 Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
159	D27013 Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab		Qualified.
160	D27014 Tab. Clonazepam (Aluminium foil/ Blister pack)	2 mg/Tab		Qualified.
161	D27028 Tab. Amitriptyline + Chlordiazepoxide (Aluminium foil/Blister pack)	Amitriptyline 25 mg + Chlordiazepoxide 10 mg / Tab		Qualified.
162	D27031 Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab		Qualified.
163	D27034 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	250 mg / Tab		Qualified.
164	D27035 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	500 mg / Tab		Qualified.
165	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
166	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
167	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
168	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab		Qualified.
169	D27068 Tab. Donepezil(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
170	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
171	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
172	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
173	D27104 Tab. Nitrazepam(Aluminium foil/Blister pack)	5 mg / Tab		Qualified.
174	D27117 Tab. Zolpidem (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
175	D27118 Syp. Baclofen (Palatable, with measuring cap and plastic container as per I.P)	5 mg / 5ml	No Drug Endorsement(Oral Solution instead of Syp.) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
176	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
177	D27121 Tab. Quetiapine SR (Aluminium foil/Blister pack)	100 mg / Tab		Qualified.
178	D28003 Tab. Theophylline and Etophylline (Aluminium foil/Blister pack)	Theophylline 23 mg and Etophylline 77 mg/Tab		Qualified.
179	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
180	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
181	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
182	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)		Qualified.
183	D30006 Tab. Vitamin C (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
184	D30015 Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc		Qualified.
185	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
186	D30022 Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.		Qualified.
187	D30026 Tab. Pyridoxine(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
188	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet		Qualified.
189	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
190	D30043 Drop Vit. D3 (Cholecalciferol)	400 IU/ml		Qualified.
191	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
192	D30047 Tab./Cap. Multivitamin & Multimineral	Each Tab./Cap. Contain :Vitamin A 900 mcg, Vitamin B2(riboflavin) 2.7mg, Vitamin B6(pyridoxine) 2.3mg, Vitamin B9(folate) 570 mcg, VitaminB12(cobalamin) 2.45 mcg, Vitamin C 80mg, Vitamin D 600I.U. , Vitamin E 7.5 to 10mg, Copper 2mg, Zinc 14.5mg	No Drug Endorsement(Strength of B6 in Zinc not matching) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
193	D31051 Tab. Tadalafil (Aluminium foil/Blister pack)	10 mg / Tab.		Qualified.
194	D33020 Tab. Prednisolone (Aluminium foil/Blister pack)	20 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
195	D33021 Tab. Prednisolone (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
196	D33183 Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.
197	D37007 RTI/STI Kit 7	Each Kit contains:Cap. Doxycycline (100 mg) IP - 42 Caps.Tab. Azithromycin (1 gm) IP - 1 Tab.		Qualified.
198	D38001 RTI / STI Kit 1	Each Kit contains:Tab. Azithromycin (1 gm) IP - 1 Tab.Tab. Cefixime (400 mg) IP - 1 Tab.		Qualified.
199	D38002 RTI / STI Kit 2	Each Kit contains:Tab. Secnidazole (1gm) IP - 2 Tabs.Tab. Fluconazole 150 mg - 1 Tab.		Qualified.
200	D38004 RTI / STI Kit 4	Each Kit contains:Cap / Tab. Doxycycline (100 mg) IP - 30 Tab./Cap.Tab. Azithromycin (1 gm) IP - 1 Tab.		Qualified.
201	D38005 RTI / STI Kit 5	Each Kit contains:Tab. Acyclovir 400mg - 21 Tabs.		Qualified.
202	D38006 RTI / STI Kit 6	Each Kit contains:Tab. Cefixme (400 mg) IP - 1 Tab. andTab. Metronidazole (400 mg) IP - 28 Tab. andTab. / Cap. Doxycycline (100 mg) IP- 28 Cap./Tab.		Qualified.
203	D38013 Tab. Anti-Malarial Combipack (Blister Pack) (Adults 15 year and above)	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 200mg) and two tablets of Sulphadoxine and Pyrimethamine (750mg + 37.5mg) each Second Row (Day 2): one tablet of Artesunate 200mg Third Row (Day 3): one tablet of Artesunate 200mg	No Market Standing as per clause No. 5.2.9.	Not Qualified.
204	D40008 Tab. Rifaximin (Aluminium foil/Blister pack)	400 mg/Tab.		Qualified.
205	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
206	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.
207	D46003 Cap. Dutasteride (Aluminium foil/Blister pack)	0.5mg/Cap.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
208	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
209	D46005 Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.
210	D46009 Tab. Mycophenolate (Aluminium foil/Blister pack)	250 mg/ Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
211	D46011 Cap. Tacrolimus (Aluminium foil/Blister pack)	0.25mg/ Cap.		Qualified.
212	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
82	<b>84 M/s. MANKIND PHARMA LIMITED ,Delhi</b>			
1	D09137 Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
2	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
3	D12007 Tab Fluconazole (Dispersible Tab.) (Aluminium foil/ Blister pack)	50 mg/Tab	No Dispersible Tab. In DE & T8.	Not Qualified.
4	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
5	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
6	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
7	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
8	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
9	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
10	D17085 Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
11	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
12	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
13	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
14	D21036 Inj. Drotaverine	20 mg/ml		Qualified.
15	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
16	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.		Qualified.
17	D30025 Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**85 M/s. HEALERS LAB ,Lucknow (UP)**

1	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
2	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
3	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
4	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
5	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
6	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
7	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
8	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
9	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
10	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
11	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
12	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
13	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
14	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
15	D13008	Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab		Qualified.
16	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
17	D17006	Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
18	D17007	Tab. Metoprolol Tartarate ER (Alluminium Foil/Blister Pack)	50 mg/Tab	No Drug Endorsement for ER. & No Market Standing as per clause no. 5.2.9. respectively.	Not Qualified.
19	D17015	Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
20	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
21	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
22	D17071	Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
23	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
24	D21018	Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
25	D21024	Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
26	D21032	Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
27	D22003	Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
28	D22016	Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
29	D27013	Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab		Qualified.
30	D27015	Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
31	D27017 Tab. Fluoxetine (Aluminium foil/ Blister pack)	20mg/ Tab		Qualified.
32	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
33	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
34	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
35	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab		Qualified.
36	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
37	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
38	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
39	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet		Qualified.
40	D40008 Tab. Rifaximin (Aluminium foil/Blister pack)	400 mg/Tab.		Qualified.
41	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**86 M/s. MARC LABORATORIES LIMITED ,Lucknow (UP)**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04021	Inj. Tramadol HCl	50 mg/ml		Qualified.
3	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
4	D09019	Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
5	D09046	Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
6	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
7	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
8	D09099	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
9	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
10	D09112	Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavunic Acid 200mg / Vial		Qualified.
11	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg		Qualified.
12	D09119	Inj. Ceftazidime(with diluents in plastic container)	1gm/vial		Qualified.
13	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
14	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
15	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
16	D09173	Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml		Qualified.
17	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
18	D14018	Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
19	D16012	Inj. Tranexamic Acid	500mg/5ml		Qualified.
20	D16018	Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
21	D21021	Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
22	D21030	Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
23	D21039	Inj. Ondansetron	2 mg/ml		Qualified.
24	D24012	Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
25	D27119	Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
26	D49002	Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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87 M/s. UNITED BIOTECH PVT. LTD., New Delhi

1	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
2	D05023	Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial	No Drug Endorsement, No WHO GMP certificate & No Market Standing as per clause no. 5.2.2 & 5.2.9 respectively.	Not Qualified.
3	D05025	Inj. Noradrenaline	1mg/ml		Qualified.
4	D05029	Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
5	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
6	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
7	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
8	D09112	Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavulanic Acid 200mg / Vial		Qualified.
9	D09119	Inj. Ceftazidime(with diluents in plastic container)	1gm/vial		Qualified.
10	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
11	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
12	D09141	Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
13	D09160	Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
14	D09171	Tab./Cap. Clindamycin (Aluminium foil/Blister pack)	150 mg		Qualified.
15	D09172	Inj. Clindamycin	300mg/(Vial/Amp)		Qualified.
16	D09175	Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
17	D11024	Tab. Ethionamide (Aluminium foil/Blister pack)	250 mg/Tab		Qualified.
18	D12021	Inj. Amphotericine B Liposomal (with diluents in plastic container)	50 mg/Vial		Qualified.
19	D12026	Inj. Caspofungin (with 10ml diluents in plastic container)	50 mg/Vial		Qualified.
20	D16004	Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
21	D16035	Inj. Enoxaparin	40mg/(Amp./PFS)		Qualified.
22	D16039	Inj. Vassopressin	20 Units/ml		Qualified.
23	D17013	Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
24	D17040	Inj. Dobutamine HCl	50mg / ml		Qualified.
25	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
26	D17043	Inj. Labetalol	20mg/4ml Amp.		Qualified.
27	D21030	Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
28	D21042	Inj. Octreotide	50mcg / ml		Qualified.
29	D46014	Inj. Terlipressin	1mg/10ml vial		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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86 **88 M/s. SAFE PARENTERALS PRIVATE LIMITED ,Palnadu (AP)**

1	D02006 Inj. Bupivacaine	5 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
2	D02008 Inj. Bupivacaine (Heavy)	Bupivacaine 5mg/ml + Dextrose 80mg / ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
3	D04021 Inj. Tramadol HCl	50 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
4	D05025 Inj. Noradrenaline	1mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
5	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
6	D09172 Inj. Clindamycin	300mg/(Vial/Amp)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
7	D17029 Inj. Mephenteramine Sulphate	15 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

87 **89 M/s. NAPROD LIFE SCIENCES PVT. LTD. ,Mumbai (Maharashtra)**

1	D01001 Inj. Ketamine HCl	57.7 mg of Ketamine HCl Equivalent to 50 mg of Ketamine		Qualified.
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88 **90 M/s. DANO VACCINES & BIOLOGICALS PRIVATE LIMITED ,Hyderabad**

1	D23005 Inj. Tetanus Toxoid (Adsorbed)	0.5 ml/Amp		Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**91 M/s. JACKSON LABORATORIES P LTD. ,Amritsar(Punjab)**

1	D01001 Inj. Ketamine HCl	57.7 mg of Ketamine HCl Equivalent to 50 mg of Ketamine	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
2	D01002 Inj. Thiopentone Sodium	500 mg/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
3	D01007 Inj. Midazolam	1 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
4	D03001 Inj. Atropine Sulphate	0.6 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
5	D03002 Inj. Glycopyrrolate	0.2 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
6	D04004 Inj. Paracetamol	150 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
7	D04008 Inj. Pentazocine Lactate	30 mg/ml (equivalent of 30 mg of pentazocine) /ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
8	D04021 Inj. Tramadol HCl	50 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
9	D04022 Tab. Paracetamol Kid (Disp. Tab.) (Aluminium foil/Blister pack)	125 mg/Tab	No Drug Endorsement for DT, No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.
10	D04025 Tab. Aceclofenac(Aluminium foil/Blister pack)	100mg/Tab.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
11	D04046 Inj. Fentanyl Citrate	50 mcg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
12	D05002 Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
13	D05005 Inj. Adrenaline Bitartrate	1mg/ml (1:1000)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
14	D05007 Inj. Pheniramine Maleate	22.75 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
15	D05013 Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
16	D05015 Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
17	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
18	D05022 Tab. Dexamethasone(Aluminium foil/Blister pack)	4 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
19	D05023 Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
20	D05024 Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
21	D05029 Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
22	D05032 Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
23	D06004 Inj. Acetylcysteine	200mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
24	D07002 Inj. Phenobarbitone	200 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
25	D07004 Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
26	D07005 Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)	No Drug Endorsement for CR & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
27	D07006 Inj. Diazepam	5 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D07007 Inj. Phenytoin Sodium	50 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
29	D07019 Inj. Levetiracetam	100mg/ml	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
30	D07021 Inj. Sodium Valproate	100mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
31	D07022 Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)	No Drug Endorsement for CR & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
32	D07026 Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
33	D07028 Oral solution or Syp. Levetiracetam (Palatable, with measuring cap and plastic container as per I.P)	100 mg/ 1ml	No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 5.2.1., 5.2.2. & 5.2.9. respectively.	Not Qualified.
34	D09004 Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
35	D09009 Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
36	D09017 Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
37	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
38	D09026 Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2. & Blacklisted by OSMCL up to 01/03/2024.	Not Qualified.
39	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
40	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
41	D09051 Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
42	D09053 Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
43	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
44	D09086 Inj. Cefoperazone & Sulbactam (with diluents in plastic container)	250mg Cefoperazone + 250mg Sulbactam/vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
45	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
46	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
47	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
48	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
49	D09100 Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
50	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
51	D09119 Inj. Ceftazidime(with diluents in plastic container)	1gm/vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
52	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
53	D09129 Inj. Cefepime (with diluents in plastic container)	500mg/vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
54	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
55	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
56	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
57	D09150 Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
58	D09162 Inj. Ampicillin + Cloxacilline (with diluents in plastic container)	Ampicillin 250 mg + Cloxacilline 250 mg / Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
59	D09172 Inj. Clindamycin	300mg/(Vial/Amp)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
60	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
61	D13008 Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
62	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
63	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
64	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
65	D16012 Inj. Tranexamic Acid	500mg/5ml	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
66	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
67	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
68	D16038 Tab. Ferrous Sulphate + Folic Acid(Enteric Coated, Red Colour) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron + Folic Acid 0.5mg (500mcg) / Enteric Coated Tablet	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
69	D16049 Tab. Ferrous Sulphate + Folic Acid(Sugar Coated, Red Colour) (Aluminium foil/Blister pack)	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coated Tablet	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
70	D17008 Tab. Propranolol	40 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
71	D17013 Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
72	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
73	D17040 Inj. Dobutamine HCl	50mg / ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
74	D17042 Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
75	D17043 Inj. Labetalol	20mg/4ml Amp.	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
76	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
77	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
78	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
79	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
80	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
81	D20002 Inj. Frusemide	10 mg/ 1 ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
82	D20005 Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
83	D20012 Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
84	D21001 Inj. Ranitidine HCl	50 mg / 2 ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
85	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
86	D21005 Inj. Promethazine HCl	25 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
87	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
88	D21013 Inj. Dicyclomine HCl	10 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
89	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.	No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 5.2.1., 5.2.2. & 5.2.9. respectively.	Not Qualified.
90	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
91	D21032 Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
92	D21036 Inj. Drotaverine	20 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
93	D21039 Inj. Ondansetron	2 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
94	D21047 Tab. Sulphasalazine (Aluminium foil/Blister pack)	500 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
95	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
96	D22004 Tab. Glipizide (Aluminium foil/Blister pack)	5 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
97	D22013 Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
98	D24006 Inj. Neostigmine Methylsulphate	0.5 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
99	D26004 Tab. Isoxsuprine (Aluminium Foil/ Blister pack)	10 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
100	D26006 Inj. Magnesium Sulphate	500 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
101	D26007 Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
102	D26008 Tab. Norethisterone IP (Aluminium foil/Blister pack)	5mg/ Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
103	D26012 Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
104	D27001 Tab. Diazepam (Aluminium Foil / Blister pack)	5 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
105	D27006 Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
106	D27013 Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
107	D27014 Tab. Clonazepam (Aluminium foil/ Blister pack)	2 mg/Tab	No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.
108	D27015 Tab. Risperidone (Aluminium Foil/ Blister pack)	2 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
109	D27017 Tab. Fluoxetine (Aluminium foil/ Blister pack)	20mg/ Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
110	D27020 Inj. Haloperidol Decanoate (Long Acting)	50 mg/ml	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
111	D27031 Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
112	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
113	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
114	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
115	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
116	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
117	D27125 Inj. Lorazepam	2mg/1ml; 1ml Amp.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
118	D28001 Inj. Theophylline & Etophylline	(Theophylline 50.6 mg + Etophylline 169.4 mg)/2ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
119	D28003 Tab. Theophylline and Etophylline (Aluminium foil/Blister pack)	Theophylline 23 mg and Etophylline 77 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
120	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
121	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
122	D30015 Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc	No Drug Endorsement for DT & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
123	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
124	D30021 Inj. Phytomenadione (Vit-K1)	1mg/0.5ml	No Drug Endorsement & No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
125	D33021 Tab. Prednisolone (Aluminium foil/Blister pack)	40 mg/Tab	No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 5.2.1., 5.2.2. & 5.2.9. respectively.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
90	<b>92 M/s. SALUBRITY &amp; PABULUM HEALTHCARE ,Cuttack</b>			
1	D03004 Potassium Permanganate	100 gm Crystals/Pack	No GMP certificate as per clause No. 5.2.2.	Not Qualified.
2	D04003 Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
3	D04032 Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
4	D08003 Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
5	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
6	D16027 Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
7	D16046 Glucose for Screening of GDM	75 gm per Packet Box with hermetically sealed in high-density polyethylene (HDPE) inner lining.		Qualified.
8	D18007 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
9	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
10	D18023 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
11	D18054 Povidone Iodine Solution (Plastic container as per I.P)	10% w/v		Qualified.
12	D19008 Chloroxylenol Solution (Plastic Container as per IP)	5% w/v		Qualified.
13	D21035 Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.

91 **93 M/s. JAGANNATH CHEMICAL AND PHARMACEUTICAL WORKS PVT. LTD. ,Cuttack**

1	D04005 Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
3	D09017 Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
4	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
5	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
6	D13008 Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab		Qualified.
7	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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92 **94 M/s. ALLIAANCE BIOTECH ,Panchkula (Haryana)**

1	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
2	D05029	Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
3	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
4	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
5	D14018	Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
6	D16018	Inj Iron Sucrose	50 mg/ 2.5 ml	Blacklisted by UPMSCL up to 10/05/2023.	Not Qualified.
7	D21025	Inj. Rabepazole (I.V) (with diluents in plastic container)	20mg / Vial		Qualified.
8	D26007	Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab		Qualified.
9	D26012	Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.		Qualified.

93 **95 M/s. TAKEDA BIOPHARMACEUTICALS INDIA PVT. LTD. ,Gurgaon (Haryana)**

1	D16032	Factor VIII (with diluents in plastic or glass container)	250 IU / Vial (As per EDL Specification)		Qualified.
2	D16033	Factor VIII (with diluents in plastic or glass container)	500 IU / Vial (As per EDL Specification)	No Market Standing as per clause No. 5.2.9.	Not Qualified.
3	D16034	Factor IX (with diluents in plastic or glass container)	600 IU / Vial (As per EDL Specification)		Qualified.
4	D16056	Recombinant Factor IX (Plasma Free, Human Albumin Free)	500IU/Vial (As per EDL Specification)		Qualified.
5	D16057	Recombinant Factor IX (Plasma Free, Human Albumin Free)	1000IU/Vial (As per EDL Specification)		Qualified.
6	D16058	Recombinant Factor VIII (Plasma Free, Human Albumin Free)	250 IU / Vial (As per EDL Specification)		Qualified.
7	D16059	Recombinant Factor VIII (Plasma Free, Human Albumin Free)	500 IU / Vial (As per EDL Specification)		Qualified.
8	D16060	Recombinant Factor VIII (Plasma Free, Human Albumin Free)	1000 IU / Vial (As per EDL Specification)		Qualified.
9	D40002	Inj. Human Albumin IV	20%		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
94	<b>96 M/s. MODERN LABORATORIES ,Indore</b>			
1	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
2	D04026 Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
3	D04048 Tab. Tramadol (Prolonged Release) (Aluminium foil/ Blister pack)	50 mg/Tab	No Drug Endorsement (uncoated Tab. Instead of Prolonged Release) & No Market Standing as per clause no. 5.2.9. & Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
4	D04061 Tab. Naproxen (Aluminium foil/Blister pack)	500 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
5	D05002 Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
6	D05024 Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
7	D05029 Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
8	D08003 Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
9	D08004 Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
10	D08008 Tab. Ivermectin(Aluminium foil/Blister pack)	6mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
11	D09003 Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
12	D09004 Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
13	D09012 Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
14	D09017 Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
15	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
16	D09026 Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
17	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
18	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
19	D09060 Susp. Amoxycillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
20	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
21	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
22	D09091 Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
23	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
24	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
25	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
26	D09112 Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavulanic Acid 200mg / Vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
27	D09113 Tab./Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
28	D09122 Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
29	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
30	D09126 Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
31	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
32	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
33	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
34	D09137 Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
35	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
36	D09150 Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
37	D09162 Inj. Ampicillin + Cloxacilline (with diluents in plastic container)	Ampicillin 250 mg + Cloxacilline 250 mg / Vial	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
38	D09170 Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
39	D09173 Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
40	D12004 Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
41	D12007 Tab Fluconazole (Dispersible Tab.) (Aluminium foil/ Blister pack)	50 mg/Tab	No Drug Endorsement (Dispersible Tab. Not mentioned) & No Market Standing as per clause no. 5.2.9. & Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
42	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
43	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
44	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
45	D13008 Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
46	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
47	D14002 Syp. Chloroquin Phosphate (Palatable, with measuring cap and plastic container as per I.P)	80 mg of Chloroquin phosphate/5ml(with measuring cap and palatable) OR Chloroquine 50mg/5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
48	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
49	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
50	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
51	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
52	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
53	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
54	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
55	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
56	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
57	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
58	D21006 Syp. Promethazine (Palatable, with measuring cap and plastic container as per I.P)	5 mg/5 ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
59	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
60	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
61	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
62	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
63	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
64	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
65	D30006 Tab. Vitamin C (Aluminium foil/Blister pack)	100 mg/Tab	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
66	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 IU / 1ml	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
67	D30015 Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
68	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab	No Drug Endorsement (Chewable not Mentioned) & No Market Standing as per clause no. 5.2.9. & Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
69	D30022 Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.	No Drug Endorsement (Syrup instead of Susp.) & No Market Standing as per clause no. 5.2.9. & Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
70	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
71	D37007 RTI/STI Kit 7	Each Kit contains:Cap. Doxycycline (100 mg) IP - 42 Caps.Tab. Azithromycin (1 gm) IP - 1 Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
72	D38001 RTI / STI Kit 1	Each Kit contains:Tab. Azithromycin (1 gm) IP - 1 Tab.Tab. Cefixime (400 mg) IP - 1 Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
73	D38002 RTI / STI Kit 2	Each Kit contains:Tab. Secnidazole (1gm) IP - 2 Tabs.Tab. Fluconazole 150 mg - 1 Tab.	No Drug Endorsement (Secnidazole 2 gm instead of 1 gm) & No Market Standing as per clause no. 5.2.9. & Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
74	D38003 RTI / STI Kit 3	Each Kit contains:Inj. Benzathine penicillin 2.4 MU IP-1 Vial and Tab. Azithromycin 1gm IP-1 Tab. and Sterilised Disp. syringe with 21G needle (IS No. 12655) (1.5inches) 10 ml-1 No. and Sterile water for injection 10ml-1 No.(in plastic container)	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
75	D38004 RTI / STI Kit 4	Each Kit contains:Cap / Tab. Doxycycline (100 mg) IP - 30 Tab./Cap.Tab. Azithromycin (1 gm) IP - 1 Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
76	D38005 RTI / STI Kit 5	Each Kit contains:Tab. Acyclovir 400mg - 21 Tabs.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.
77	D38006 RTI / STI Kit 6	Each Kit contains:Tab. Cefixime (400 mg) IP - 1 Tab. andTab. Metronidazole (400 mg) IP - 28 Tab. andTab. / Cap. Doxycycline (100 mg) IP- 28 Cap./Tab.	Blacklisted by TNMSC up to 26/06/2027.	Not Qualified.

95 **97 M/s. DIVINE LABORATORIES PVT LTD ,Thane (Maharashtra)**

1	D01008 Inj. Atracurium Besylate	10 mg/ ml		Qualified.
2	D02001 Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg		Qualified.
3	D02003 Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml	No Market Standing as per clause No. 5.2.9.	Not Qualified.
4	D02006 Inj. Bupivacaine	5 mg/ml		Qualified.
5	D03002 Inj. Glycopyrrolate	0.2 mg/ml		Qualified.
6	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
7	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
8	D24008 Inj. Neostigmine Methylsulphate + Glycopyrrolate	Neostigmine Methylsulphate 2.5 mg + Glycopyrrolate 0.5mg /ml		Qualified.
9	D24011 Inj. Succinyl Choline Chloride	50 mg/ml		Qualified.
10	D25034 Moxifloxacin Eye Drop	0.5% w/v		Qualified.
11	D25048 Loteprednol Eye Drop	5mg/1ml		Qualified.
12	D25052 Atropine Eye Drop	1% w/v		Qualified.
13	D25056 Carboxymethyl Cellulose Eye drop	0.5% w/v		Qualified.
14	D25062 Prednisolone eye Drop	1% w/v		Qualified.
15	D25069 Chloramphenicol Eye drop	0.5% w/v (as per IP)		Qualified.
16	D25073 Gatifloxacin Eye drop	0.3 % w/v; 5ml vial		Qualified.
17	D30025 Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**98 M/s. ZYDUS LIFESCIENCES LIMITED ,Ahmedabad(Gujarat)**

1	D16047	Inj. Erythropoietin (EPO)	4000 IU/PFS		Qualified.
2	D18035	Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.		Qualified.
3	D18056	Tab. Entecavir (Aluminium foil/Blister pack)	1 mg/Tab.		Qualified.
4	D23009	Inj. Anti Rabies Vaccine for Human Use with diluents	1 ml (ID),AS PER TENDER SPECIFICATION		Qualified.
5	D43005	Inj. Adalimumab	40 mg/PFS		Qualified.
6	D44004	Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.
7	D44005	Tab. Daclatasvir	60 mg		Qualified.
8	D44007	Tab. Sofosbuvir	400 mg		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
97	<b>99 M/s. MAAN PHARMACEUTICALS LTD. ,Ahmedabad</b>			
1	D02003 Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml		Qualified.
2	D02006 Inj. Bupivacaine	5 mg/ml		Qualified.
3	D03001 Inj. Atropine Sulphate	0.6 mg/ml		Qualified.
4	D04021 Inj. Tramadol HCl	50 mg/ml		Qualified.
5	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
6	D05005 Inj. Adrenaline Bitartrate	1mg/ml (1:1000)		Qualified.
7	D05007 Inj. Pheniramine Maleate	22.75 mg/ml		Qualified.
8	D09019 Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
9	D09046 Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
10	D09053 Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial		Qualified.
11	D09086 Inj. Cefoperazone & Sulbactam (with diluents in plastic container)	250mg Cefoperazone + 250mg Sulbactam/vial		Qualified.
12	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
13	D09091 Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
14	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
15	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
16	D09112 Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavunic Acid 200mg / Vial		Qualified.
17	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
18	D09150 Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
19	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
20	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
21	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)	No Market Standing (5000 IU/ (Amp. or Vial)) as per clause no. 5.2.9.	Not Qualified.
22	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
23	D17029 Inj. Mephenteramine Sulphate	15 mg/ml		Qualified.
24	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
25	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
26	D30025 Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.
27	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
28	D30046 Tab. Alpha Ketoanalogue (Aluminium foil/Blister pack)	As per tender specification		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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98                      **100 M/s. MEDOPHARM ,Chennai(Tamilnadu)**

1	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab	Qualified.
2	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB	Qualified.
3	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Qualified.
4	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
99	<b>101 M/s. ZENITH DRUGS PVT. LTD. ,Indore</b>			
1	D04003 Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04032 Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
3	D05016 Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
4	D08003 Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
5	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
6	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)		Qualified.
7	D16011 Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid	Blacklisted by JKMSCL up to 20/02/2025.	Not Qualified.
8	D16027 Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
9	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)	Blacklisted by JKMSCL up to 20/02/2025.	Not Qualified.
10	D18003 Silver Sulphadiazine Cream	1% w/w		Qualified.
11	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
12	D18024 Povidone Iodine Oint.	5 % w/w		Qualified.
13	D18027 Cream Clotrimazole	1% w/w		Qualified.
14	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
15	D18032 Mupirocin Ointment	2 % w/w	No Drug Endorsement (Cream instead of Ointment)	Not Qualified.
16	D18033 Cream or Oint Betamethasone Valerate	0.1% w/v		Qualified.
17	D18046 Fusidic Acid Cream	0.02 w/w		Qualified.
18	D21014 Oral Solution or Syp. Dicyclomine (Palatable, with measuring cap and plastic container as per I.P)	10 mg/5 ml		Qualified.
19	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
20	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
21	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
22	D30044 Syp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**102 M/s. RAVENBHEL HEALTHCARE PRIVATE LIMITED ,Jammu(Jammu & Kashmir)**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
3	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
4	D04026	Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml	No Drug Endorsement, No WHO GMP certificate, & Non Conviction certificate not submitted as per clause no. 5.2.2& 5.2.10 respectively.	Not Qualified.
5	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
6	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
7	D07003	Tab. Carbamazepine (Controlled Release/Sustained Release/ Prolonged Release/ Extended Release) (Aluminium foil/Blister pack)	200 mg/Tab	No Drug Endorsement(uncoated Tab. Instead of SR) & No Market Standing as as per clause No. 5.2.9.	Not Qualified.
8	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
9	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB	No Drug Endorsement( Chewable not mentioned) & No Market Standing as as per clause No. 5.2.9.	Not Qualified.
10	D09003	Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml	No Market Standing as per clause No. 5.2.9.	Not Qualified.
11	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
12	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
13	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
14	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
15	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
16	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
17	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
18	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
19	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
20	D17071	Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
21	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
22	D21018	Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
23	D22016	Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
24	D22026	Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
25	D22050	Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.		Qualified.
26	D24012	Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
27	D27046	Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
29	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
30	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet		Qualified.
31	D30043 Drop Vit. D3 (Cholecalciferol)	400 IU/ml		Qualified.
32	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
33	D30046 Tab. Alpha Ketoanalogue (Aluminium foil/Blister pack)	As per tender specification		Qualified.
34	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
35	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.

101 **103 M/s. SAAR BIOTECH PVT. LTD. ,Chandigarh**

1	D02007 Lidocaine Hydrochloride gel 2%	30 gm/Tube		Qualified.
2	D18027 Cream Clotrimazole	1% w/w		Qualified.
3	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
4	D21028 Dicyclomine Drop (Palatable, with dropper and plastic container as per I.P)	Dicyclomine HCl 10mg + Activated Dimethicone 40mg / ml		Qualified.
5	D25045 Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)		Qualified.
6	D25050 Xylometazoline Nasal Drop	0.05% w/v (FFS / BFS Plastic Container)		Qualified.
7	D25079 Wax Softner	Paradichlorobenzene 2%, benzocaine 2.7%, turpentine oil 15%, chlorbutol 5% (FFS / BFS Plastic Container)		Qualified.
8	D29015 Saline Nasal Drop	0.65 % w/v (FFS / BFS Plastic Container)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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104 M/s. MASCOT HEALTH SERIES PVT. LTD. ,New Delhi

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
4	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
5	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab		Qualified.
6	D05032	Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.		Qualified.
7	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
8	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
9	D07016	Tab. Clobazam (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
10	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
11	D07028	Oral solution or Syp. Levetiracetam (Palatable, with measuring cap and plastic container as per I.P)	100 mg/ 1ml		Qualified.
12	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
13	D08008	Tab. Ivermectin(Aluminium foil/Blister pack)	6mg/Tab		Qualified.
14	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
15	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
16	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
17	D09100	Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.		Qualified.
18	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
19	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
20	D09135	Susp. Linezolid (Palatable, plastic container as per I.P with Dropper)	100mg/5ml	No Market Standing as per clause No. 5.2.9.	Not Qualified.
21	D09138	Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
22	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
23	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
24	D12009	Clotrimazole Vaginal Pessaries with applicator	100mg/ Pessary		Qualified.
25	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
26	D12020	Cream Terbinafine	1% w/w		Qualified.
27	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D17026 Tab. Hydrochlorothiazide (Aluminium Foil/Blister Pack)	12.5 mg/Tab		Qualified.
29	D17032 Tab. Telmisartan (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
30	D17037 Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
31	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
32	D17065 Tab. Ivabradine (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
33	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
34	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
35	D17082 Tab. Fenofibrate (Aluminium foil/Blister pack)	160mg/Tab Micronised Tablet	No Drug Endorsement (Specification not matching as Micronised Tab.)	Not Qualified.
36	D17085 Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
37	D18016 Tab. Acyclovir (Alluminium Foil/Blister Pack)	400 mg/ Tab (Scored)		Qualified.
38	D18027 Cream Clotrimazole	1% w/w		Qualified.
39	D18028 Clindamycin Cream or gel	1% w/w		Qualified.
40	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
41	D18032 Mupirocin Ointment	2 % w/w		Qualified.
42	D18045 Cream Fluocinolone Acetonide	Fluocinolone Acetonide 0.1% w/w (Anhydrous) in cream base	No Market Standing as per clause No. 5.2.9.	Not Qualified.
43	D18046 Fusidic Acid Cream	0.02 w/w		Qualified.
44	D20012 Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
45	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
46	D21021 Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
47	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.	Film Coated Tab. Instead of Dispersible in T8.	Not Qualified.
48	D21031 Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
49	D21032 Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
50	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
51	D21050 Tab. Esomeprazole (Aluminium foil/Blister pack)	20mg / Tab. (Enteric Coated)		Qualified.
52	D21051 Tab. Hydroxyzine (Aluminium foil/Blister pack)	25 mg/Tab.		Qualified.
53	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab	Uncoated Tab. instead of SR in T8.	Not Qualified.
54	D22013 Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
55	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
56	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
57	D22039 Tab. Dapagliflozin (Aluminium foil/Blister pack)	10mg/Tab.		Qualified.
58	D22047 Tab. Pioglitazone (Aluminium foil/Blister pack)	15mg / Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
59	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.		Qualified.
60	D22051 Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
61	D27035 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foil/ Blister pack)	500 mg / Tab	No Drug Endorsement (Film Coated Tab. mentioned)	Not Qualified.
62	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
63	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
64	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab		Qualified.
65	D27068 Tab. Donepezil(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
66	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
67	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
68	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
69	D27121 Tab. Quetiapine SR (Aluminium foil/Blister pack)	100 mg / Tab	No Drug Endorsement (SR not mentioned)	Not Qualified.
70	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
71	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet	Drug Endorsement (Export only)	Not Qualified.
72	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
73	D30046 Tab. Alpha Ketoanalogue (Aluminium foil/Blister pack)	As per tender specification		Qualified.
74	D40008 Tab. Rifaximin (Aluminium foil/Blister pack)	400 mg/Tab.		Qualified.
75	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
76	D43003 Tab. Tofacitinib (Aluminium foil/Blister pack)	5mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
77	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
78	D46005 Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.
79	D46009 Tab. Mycophenolate (Aluminium foil/Blister pack)	250 mg/ Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
80	D46011 Cap. Tacrolimus (Aluminium foil/Blister pack)	0.25mg/ Cap.		Qualified.
81	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

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**105 M/s. JYOTI CAPSULATIONS PVT. LTD. ,Kanpur (UP)**

1	D25011 Chloramphenicol Eye Ointment (Applicap/Soft Cap)	1%w/w , 250mg/Applicap	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
2	D30002 Cap. Vit A (Alluminium Foil /Blister Pack)	50,000 IU/Cap (Soft Gelatine Capsules)	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.
3	D30007 Cap. Vit A.D (Therapeutic) (Aluminium foil/Blister pack)	Vit. A 5000 IU+Vit. D3 400 IU/Cap	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**106 M/s. MSD PHARMACEUTICALS PVT. LTD. ,Mumbai**

1	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
2	D23022 Inj. Pneumococcal Vaccine	Pneumococcal Polysaccharide vaccine, Polyvalent. 25 mcg/0.5ml	No Drug Endorsement (0.5 ml single dose instead of 10 ml Vial), No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
105	<b>107 M/s. CMG BIOTECH PVT. LTD. ,Ghaziabad(UP)</b>			
1	D04025 Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
2	D05013 Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
3	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
4	D05032 Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.		Qualified.
5	D05033 Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
6	D07016 Tab. Clobazam (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
7	D07026 Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
8	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
9	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
10	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
11	D09100 Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.		Qualified.
12	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
13	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
14	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
15	D16023 Tab. Deferasirox (Aluminium foil/Blister pack)	400 mg/Tab		Qualified.
16	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
17	D17008 Tab. Propranolol	40 mg/Tab		Qualified.
18	D17026 Tab. Hydrochlorothiazide (Aluminium Foil/Blister Pack)	12.5 mg/Tab		Qualified.
19	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
20	D17049 Tab. Enalapril Maleate (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
21	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
22	D17055 Tab. Carvedilol (Aluminium foil/Blister pack)	3.125mg/Tab		Qualified.
23	D17065 Tab. Ivabradine (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
24	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
25	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
26	D17082 Tab. Fenofibrate (Aluminium foil/Blister pack)	160mg/Tab Micronised Tablet	No Drug Endorsement (Specification not matching as Micronised Tab.)	Not Qualified
27	D17085 Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
28	D18035 Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.		Qualified.
29	D18056 Tab. Entecavir (Aluminium foil/Blister pack)	1 mg/Tab.		Qualified.
30	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab		Qualified.
31	D20005 Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
32	D20012 Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
33	D21031 Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
34	D21051 Tab. Hydroxyzine (Aluminium foil/Blister pack)	25 mg/Tab.		Qualified.
35	D22013 Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
36	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
37	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
38	D22047 Tab. Pioglitazone (Aluminium foil/Blister pack)	15mg / Tab.		Qualified.
39	D24012 Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
40	D27031 Tab. Clozapine(Aluminium foil/Blister pack)	100 mg / Tab		Qualified.
41	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
42	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
43	D27056 Tab. Sertraline(Aluminium foil/Blister pack)	50 mg / Tab		Qualified.
44	D27068 Tab. Donepezil(Aluminium foil/Blister pack)	5 mg / Tab		Qualified.
45	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
46	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
47	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
48	D27124 Tab. Fluvoxamine (Aluminium Foil/Blister pack)	100mg / Tab.		Qualified.
49	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
50	D33182 Tab. Azathioprine(Aluminium foil/Blister pack)	50 mg/ Tab		Qualified.
51	D33183 Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.
52	D40008 Tab. Rifaximin (Aluminium foil/Blister pack)	400 mg/Tab.		Qualified.
53	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
54	D45009 Tab. Tacrolimus (Aluminium foil/Blister pack)	1 mg / Tab.		Qualified.
55	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
56	D46009 Tab. Mycophenolate (Aluminium foil/Blister pack)	250 mg/ Tab		Qualified.

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**108 M/s. PIRAMAL PHARMA LTD. ,Mumbai**

1	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml		Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**109 M/s. KRISHNA PHARMA ,Hyderabad**

1	D18007 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	No WHO GMP certificate & Less Turnover Rs. 10 Crores for the Year 2019-20 as per clause No. 5.2.2. & 5.2.5. respectively.	Not Qualified.
2	D18048 Povidone Iodine Scrub	7.5% w/v	No WHO GMP certificate & Less Turnover Rs. 10 Crores for the Year 2019-20 as per clause No. 5.2.2. & 5.2.5. respectively.	Not Qualified.
3	D18054 Povidone Iodine Solution (Plastic container as per I.P)	10% w/v	No WHO GMP certificate & Less Turnover Rs. 10 Crores for the Year 2019-20 as per clause No. 5.2.2. & 5.2.5. respectively.	Not Qualified.
4	D19006 Surgical Spirit IP (Plastic container as per I.P)	.	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
5	D19007 Soln. Formaldehyde (Plastic Container as per IP)	34% to 38% w/v	No Drug Endorsement , No WHO GMP certificate , No Market Standing & Less Turnover Rs. 10 Crores for the Year 2019-20 as per clause No. 5.2.2., 5.2.9. & 5.2.5.respectively.	Not Qualified.
6	D19008 Chloroxylenol Solution (Plastic Container as per IP)	5% w/v	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
7	D19009 Soln. Chlorohexidine Gluconate + Cetrimide + Isopropyl Alcohol	Chlorohexidine Gluconate 0.3% w/v + Cetrimide 0.6% w/v + Isopropyl Alcohol 4% v/v	No Drug Endorsement , No WHO GMP certificate , No Market Standing & Less Turnover Rs. 10 Crores for the Year 2019-20 as per clause No. 5.2.2., 5.2.9. & 5.2.5.respectively.	Not Qualified.

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**110 M/s. OMEGA PHARMA ,Ghaziabad (UP)**

1	D09017 Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
2	D09026 Tab. Cefadroxil (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
3	D09051 Tab. Cefadroxil (Dispersible Tablet)(Aluminium foil/Blister pack)	Equiv. to Anhydrous Cefadroxil 250 mg/Tab. (DT)		Qualified.
4	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
5	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
6	D09126 Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
7	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
8	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
9	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
10	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
11	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	Less Market Standing as per clause No. 5.2.9.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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109                      **111 M/s. MALIK LIFESCIENCES PVT. LTD. ,Rohini(Delhi)**

1	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)	Qualified.
2	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml	Qualified.
3	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg	Qualified.
4	D09165	Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavulanic Acid (57 mg)/ 5ml	Qualified.
5	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Qualified.

110                      **112 M/s. KHANDELWAL LABORATORIES PVT LTD ,Mumbai (Maharashtra)**

1	D16015	Cap. Hydroxyurea (Aluminium foil/ Blister pack)	500mg/Cap.	Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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111

113 M/s. NANDANI MEDICAL LABORATORIES PVT. LTD. ,Indore (MP)

1	D01001 Inj. Ketamine HCl	57.7 mg of Ketamine HCl Equivalent to 50 mg of Ketamine		Qualified.
2	D01007 Inj. Midazolam	1 mg/ml	Blacklisted by GMSCL up to 11/10/2025.	Not Qualified.
3	D01022 Inj. Propofol (1%)	10mg / ml		Qualified.
4	D02001 Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg		Qualified.
5	D02003 Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml		Qualified.
6	D02006 Inj. Bupivacaine	5 mg/ml		Qualified.
7	D03001 Inj. Atropine Sulphate	0.6 mg/ml		Qualified.
8	D04004 Inj. Paracetamol	150 mg/ml		Qualified.
9	D04008 Inj. Pentazocine Lactate	30 mg/ml (equivalent of 30 mg of pentazocine) /ml		Qualified.
10	D04010 Inj. Diclofenac Sodium	25 mg/ml		Qualified.
11	D04021 Inj. Tramadol HCl	50 mg/ml		Qualified.
12	D05001 Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)		Qualified.
13	D05005 Inj. Adrenaline Bitartrate	1mg/ml (1:1000)		Qualified.
14	D05007 Inj. Pheniramine Maleate	22.75 mg/ml		Qualified.
15	D05017 Inj. Betamethasone Sod. Phosphate	4mg / ml		Qualified.
16	D07006 Inj. Diazepam	5 mg/ml		Qualified.
17	D09009 Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml		Qualified.
18	D09019 Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
19	D09046 Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
20	D09053 Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial		Qualified.
21	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
22	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
23	D09129 Inj. Cefepime (with diluents in plastic container)	500mg/vial		Qualified.
24	D09172 Inj. Clindamycin	300mg/(Vial/Amp)		Qualified.
25	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
26	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
27	D16014 Inj. Hydroxocobalamine	1mg / ml		Qualified.
28	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
29	D17013 Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
30	D17040 Inj. Dobutamine HCl	50mg / ml		Qualified.
31	D20002 Inj. Frusemide	10 mg/ 1 ml	Blacklisted by GMSCL up to 12/04/2025.	Not Qualified.
32	D21001 Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
33	D21004 Inj. Metoclopramide	10 mg/2 ml		Qualified.
34	D21005 Inj. Promethazine HCl	25 mg/ml		Qualified.
35	D21013 Inj. Dicyclomine HCl	10 mg/ml		Qualified.
36	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
37	D26001 Inj. Methylergometrine Maleate	0.2 MG/ML		Qualified.
38	D26002 Inj. Oxytocin	5 IU/1ml		Qualified.
39	D26006 Inj. Magnesium Sulphate	500 mg/ml		Qualified.
40	D28001 Inj. Theophylline & Etophylline	(Theophylline 50.6 mg + Etophylline 169.4 mg)/2ml		Qualified.
41	D30021 Inj. Phytomenadione (Vit-K1)	1mg/0.5ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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112

114 M/s. RAVIAN LIFE SCIENCE PVT. LTD. ,Haridwar

1	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Qualified.
2	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	Qualified.
3	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab	Qualified.
4	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Qualified.
5	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB	Qualified.
6	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Qualified.
7	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
8	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Qualified.
9	D09171	Tab./Cap. Clindamycin (Aluminium foil/Blister pack)	150 mg	Qualified.
10	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	Qualified.
11	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)	Qualified.
12	D17007	Tab. Metoprolol Tartarate ER (Aluminium Foil/Blister Pack)	50 mg/Tab	Qualified.
13	D17008	Tab. Propranolol	40 mg/Tab	Qualified.
14	D17015	Tab. Amlodipine Besylate (Aluminium Foil/ Blister Pack)	5 mg/Tab	Qualified.
15	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	Qualified.
16	D17037	Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab	Qualified.
17	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab	Qualified.
18	D17052	Tab. Nifedipine Sustained Release (SR) (Aluminium foil/Blister pack)	20mg/SR Tab.	Qualified.
19	D17053	Tab. Ramipril (Aluminium foil/Blister pack)	5mg/Tab	Qualified.
20	D17071	Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
21	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
22	D17085	Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
23	D20012	Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.	Qualified.
24	D21018	Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab	Qualified.
25	D21024	Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.	Qualified.
26	D21026	Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.	Qualified.
27	D22003	Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab	Qualified.
28	D22013	Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab	Qualified.
29	D22016	Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab	Qualified.
30	D22026	Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
31	D22047 Tab. Pioglitazone (Aluminium foil/Blister pack)	15mg / Tab.		Qualified.
32	D22051 Tab. Teneligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
33	D27014 Tab. Clonazepam (Aluminium foil/ Blister pack)	2 mg/Tab		Qualified.
34	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
35	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
36	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
37	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
38	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
39	D46005 Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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113

**115 M/s. RIVPRA FORMULATION PRIVATE LIMITED ,Ghaziabad(UP)**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
4	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
5	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
6	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
7	D09100	Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.		Qualified.
8	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
9	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
10	D09177	Tab. Minocycline (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
11	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
12	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
13	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
14	D16027	Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
15	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
16	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
17	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
18	D17085	Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
19	D17089	Tab. Tolvaptan (Aluminium foil/Blister pack)	15 mg/Tab.		Qualified.
20	D18032	Mupirocin Ointment	2 % w/w		Qualified.
21	D20012	Tab. Toremide (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
22	D21020	Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
23	D21021	Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
24	D21024	Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
25	D21032	Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
26	D22003	Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
27	D22014	Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
29	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
30	D22039 Tab. Dapagliflozin (Aluminium foil/Blister pack)	10mg/Tab.		Qualified.
31	D22051 Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
32	D27034 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	250 mg / Tab		Qualified.
33	D27035 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	500 mg / Tab		Qualified.
34	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
35	D30022 Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.		Qualified.
36	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
37	D30046 Tab. Alpha Ketoanalogue (Aluminium foil/Blister pack)	As per tender specification		Qualified.
38	D33182 Tab. Azathioprine(Aluminium foil/Blister pack)	50 mg/ Tab		Qualified.
39	D33185 Syp. Cyclosporine	100 mg/ml		Qualified.
40	D45005 Tab. Sirolimus (Aluminium foil/Blister pack)	1 mg/Tab		Qualified.
41	D45009 Tab. Tacrolimus (Aluminium foil/Blister pack)	1 mg / Tab.		Qualified.
42	D46011 Cap. Tacrolimus (Aluminium foil/Blister pack)	0.25mg/ Cap.		Qualified.
43	D46015 Cap./Tab. Everolimus	0.25 mg/(Cap./Tab.)		Qualified.
44	D46016 Cap./Tab. Everolimus	0.5 mg/(Cap./Tab.)		Qualified.
45	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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114

116 M/s. THEON PHARMACEUTICALS LTD. ,Panchkula(Haryana)

1	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Qualified.
2	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	Qualified.
3	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab	Qualified.
4	D05032	Tab. Montelukast (Aluminium foil/Blister pack)	5 mg/Tab.	Qualified.
5	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Qualified.
6	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)	Qualified.
7	D09053	Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial	Qualified.
8	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml	Qualified.
9	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Qualified.
10	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial	Qualified.
11	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab	Qualified.
12	D09093	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial	Qualified.
13	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial	Qualified.
14	D09099	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial	Qualified.
15	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg	Qualified.
16	D09119	Inj. Ceftazidime(with diluents in plastic container)	1gm/vial	Qualified.
17	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Qualified.
18	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.	Qualified.
19	D09129	Inj. Cefepime (with diluents in plastic container)	500mg/vial	Qualified.
20	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm	Qualified.
21	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored	Qualified.
22	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	Qualified.
23	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Qualified.
24	D09173	Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml	Qualified.
25	D09175	Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial	Qualified.
26	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.	Qualified.
27	D12020	Cream Terbinafine	1% w/w	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
28	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
29	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
30	D17032 Tab. Telmisartan (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
31	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
32	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
33	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
34	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
35	D18032 Mupirocin Ointment	2 % w/w		Qualified.
36	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
37	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
38	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
39	D22051 Tab. Teneligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
40	D24012 Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
41	D27119 Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.
42	D28017 Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
43	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
44	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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115

117 M/s. SUPER FORMULATIONS PVT. LTD. ,Ujjain (MP)

1	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
4	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
5	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
6	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
7	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
8	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
9	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
10	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
11	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
12	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
13	D09134	Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
14	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
15	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
16	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
17	D12020	Cream Terbinafine	1% w/w		Qualified.
18	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
19	D14006	Tab. Primaquin Phosphate (Coated) (Aluminium foil/ Blister pack)	7.5 mg/Tab,13 mg of primaquin phosphate equivalent to 7.5 mg of primaquin		Qualified.
20	D16002	Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
21	D17006	Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
22	D17015	Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
23	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
24	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
25	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
26	D18003	Silver Sulphadiazine Cream	1% w/w		Qualified.
27	D18020	Cream Silver Sulphadiazine	1% w/w		Qualified.
28	D18024	Povidone Iodine Oint.	5 % w/w		Qualified.
29	D18027	Cream Clotrimazole	1% w/w		Qualified.
30	D18028	Clindamycin Cream or gel	1% w/w		Qualified.
31	D18029	Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
32	D18032 Mupirocin Ointment	2 % w/w		Qualified.
33	D18033 Cream or Oint Betamethasone Valerate	0.1% w/v	Blacklisted by TNMSC up to 20/10/2024.	Not Qualified
34	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab		Qualified.
35	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
36	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
37	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab		Qualified.
38	D22004 Tab. Glipizide (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
39	D22007 Tab. Carbimazole (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
40	D22014 Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
41	D26007 Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab		Qualified.
42	D27015 Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab		Qualified.
43	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)		Qualified.

116 **118 M/s. GENNOVA BIOPHARMACEUTICALS LTD. ,Pune (Maharashtra)**

1	D16047 Inj. Erythropoietin (EPO)	4000 IU/PFS		Qualified.
2	D17086 Inj. Teneceplase (with diluents in plastic container)	40 mg/vial		Qualified.

117 **119 M/s. EMCURE PHARMACEUTICALS LTD. ,Pune (Maharashtra)**

1	D16051 Inj. Ferric Carboxy Maltose	1000 mg/Vial		Qualified.
2	D16054 Inj. Ferric Carboxymaltose (FCM)	500 mg/Vial		Qualified.
3	D18035 Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.		Qualified.
4	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
118	<b>120 M/s. RELIANCE LIFE SCIENCES PVT. LTD ,Navi Mumbai (Maharashtra)</b>			
1	D16032 Factor VIII (with diluents in plastic or glass container)	250 IU / Vial (As per EDL Specification)		Qualified.
2	D16033 Factor VIII (with diluents in plastic or glass container)	500 IU / Vial (As per EDL Specification)		Qualified.
3	D16047 Inj. Erythropoietin (EPO)	4000 IU/PFS		Qualified.
4	D17086 Inj. Tenecteplase (with diluents in plastic container)	40 mg/vial		Qualified.
5	D23015 Inj. Hepatitis B Immunoglobulin (HBIG)	100 IU/0.5ml or 1ml Each unit packet shall contain the following : i) 1Vial/ (0.5ml or 1ml/Vial) ii) 1 Eclipse Needle (21G) All blood products should be Test Negative for HBsAg, HIV I and II, HCV Anti bodies which will be printed on each unit packet		Qualified.
6	D23016 Inj. Hepatitis B Immunoglobulin (HBIG)	200 IU/0.5 or 1ml Each unit pKt (200 IU/1ml)shall contain the follow:i) 1 Vial or PFS (0.5/1 ml./Vial or PFS)ii)1 Eclipse Needle (21G)All blood products should be"Test Negative for HBsAg,HIV I and II,HCV Antibodies"which will be printed on each unit p		Qualified.
7	D33191 Inj. Ranibizumab	10mg/(PFS/Vial)		Qualified.
8	D40002 Inj. Human Albumin IV	20%		Qualified.
9	D43005 Inj. Adalimumab	40 mg/PFS		Qualified.
10	D45008 Inj. Etanercept	50 mg/PFS		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
119	<b>121 M/s. SYNMEDIC LABORATORIES ,Jaipur</b>			
1	D08004 Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
2	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
3	D09124 Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
4	D09133 Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
5	D12009 Clotrimazole Vaginal Pessaries with applicator	100mg/ Pessary		Qualified.
6	D17015 Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
7	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
8	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
9	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
10	D18003 Silver Sulphadiazine Cream	1% w/w		Qualified.
11	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)		Qualified.
12	D18020 Cream Silver Sulphadiazine	1% w/w		Qualified.
13	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab		Qualified.
14	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
15	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
16	D22007 Tab. Carbimazole (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
17	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
18	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**122 M/s. RELIEF BIOTECH PVT. LTD. ,Haridwar(Uttarakhand)**

1	D04022	Tab. Paracetamol Kid (Disp. Tab.) (Aluminium foil/Blister pack)	125 mg/Tab		Qualified.
2	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab		Qualified.
4	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
5	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
6	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
7	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
8	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
9	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
10	D09134	Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
11	D13008	Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab		Qualified.
12	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
13	D16002	Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
14	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
15	D17015	Tab. Amlodipine Besylate (Aluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
16	D17037	Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
17	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
18	D21032	Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
19	D22003	Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
20	D22014	Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab		Qualified.
21	D28017	Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
22	D30001	Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
23	D30016	Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
24	D30042	Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
121	<b>123 M/s. HINDUSTAN LABORATORIES LTD. ,Mumbai</b>			
1	D04032 Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
2	D05013 Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
3	D05021 Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
4	D08003 Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
5	D08004 Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB		Qualified.
6	D09017 Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
7	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
8	D09033 Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
9	D09049 Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
10	D09077 Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
11	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
12	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
13	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
14	D12020 Cream Terbinafine	1% w/w		Qualified.
15	D12027 Lotion Ketoconazole	2% w/v		Qualified.
16	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)		Qualified.
17	D13009 Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
18	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
19	D16038 Tab. Ferrous Sulphate + Folic Acid(Enteric Coated, Red Colour) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron + Folic Acid 0.5mg (500mcg) / Enteric Coated Tablet		Qualified.
20	D16044 Tab. Ferrous Sulphate + Folic Acid (Small) (Sugar Coated and Pink coloured) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal lacquer) IFA (Sma	Each Tblet Contains:Equivalent to 45 mg of Elemental Iron + Folic Acid 0.4mg (400mcg)		Qualified.
21	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)		Qualified.
22	D16049 Tab. Ferrous Sulphate + Folic Acid(Sugar Coated, Red Colour) (Aluminium foil/Blister pack)	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coated Tablet		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
23	D16050 Tab. Ferrous Sulphate + Folic Acid (Large) (Sugar Coated and blue coloured-Indigo caramine) (The thickness of Aluminium foil: 40micron with LDPE 25 micron coating/ heat seal l	Each Tblet Contains:Equivalent to 60 mg of Elemental Iron +Folic Acid 0.5mg (500mcg) / Sugar Coated Tablet		Qualified.
24	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
25	D18007 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
26	D18023 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
27	D18024 Povidone Iodine Oint.	5 % w/w		Qualified.
28	D18048 Povidone Iodine Scrub	7.5% w/v		Qualified.
29	D18054 Povidone Iodine Solution (Plastic container as per I.P)	10% w/v		Qualified.
30	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
31	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
32	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
33	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
34	D21028 Dicyclomine Drop (Palatable, with dropper and plastic container as per I.P)	Dicyclomine HCl 10mg + Activated Dimethicone 40mg / ml		Qualified.
35	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
36	D22003 Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
37	D22004 Tab. Glipizide (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
38	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
39	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
40	D30003 Tab./Cap. Vitamin B Complex (Therapeutic) (Aluminium Foil/Blister Pack)	Vit.B1=5mg, B2=5mg, B6=2mg, Niacinamide=50mg, Calcium Pantothenate 5mg/ (Tab./Cap.)		Qualified.
41	D30006 Tab. Vitamin C (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
42	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml		Qualified.
43	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
44	D30022 Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.		Qualified.
45	D30044 Syp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
46	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

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**124 M/s. ARCO LIFESCIENCES (I) PVT. LTD. ,Nagpur (Maharashtra)**

1	D02006 Inj. Bupivacaine	5 mg/ml		Qualified.
2	D05025 Inj. Noradrenaline	1mg/ml		Qualified.
3	D07007 Inj. Phenytoin Sodium	50 mg/ml		Qualified.
4	D09172 Inj. Clindamycin	300mg/(Vial/Amp)		Qualified.
5	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
6	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
7	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
8	D17013 Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
9	D17043 Inj. Labetalol	20mg/4ml Amp.		Qualified.
10	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
11	D26006 Inj. Magnesium Sulphate	500 mg/ml		Qualified.
12	D29008 Inj. Sodium Bi-Carbonate	7.5% w/v		Qualified.
13	D29011 Inj. Pottasium Chloride	Each ml contains Potassium Chloride 150mg (supply with type I and II Glass bottle)		Qualified.
14	D29013 Inj. Calcium Gluconate	10% w/v		Qualified.
15	D49001 Inj. Caffeine Citrate	20 mg / 1 ml		Qualified.

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**125 M/s. GUFIC BIOSCIENCES LTD. ,Mumbai (Maharashtra)**

1	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial	No Market Standing (Submitted in different Lic. No) as per clause No. 5.2.9.	Not Qualified.
2	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
3	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm	No Market Standing (Submitted in different Lic. No) as per clause No. 5.2.9.	Not Qualified.
4	D09141 Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
5	D09160 Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
6	D12021 Inj. Amphotericine B Liposomal (with diluents in plastic container)	50 mg/Vial		Qualified.
7	D12026 Inj. Caspofungin (with 10ml diluents in plastic container)	50 mg/Vial		Qualified.
8	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
9	D16035 Inj. Enoxaparin	40mg/(Amp./PFS)	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
10	D22053 Inj. HCG with diluents	2000 IU/Vial		Qualified.
11	D22054 Inj. HMG with diluents	75 IU/Vial		Qualified.
12	D22055 Inj. Leuprolide Depot with diluent	3.75 mg/vial	No Market Standing as per clause No. 5.2.9.	Not Qualified.
13	D24005 Inj. Vecuronium Bromide	4mg /2ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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126 M/s. HAB PHARMACEUTICALS &amp; RESEARCH LTD. ,Mumbai

1	D02007	Lidocaine Hydrochloride gel 2%	30 gm/Tube		Qualified.
2	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
3	D08008	Tab. Ivermectin(Aluminium foil/Blister pack)	6mg/Tab		Qualified.
4	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
5	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
6	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
7	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
8	D12020	Cream Terbinafine	1% w/w		Qualified.
9	D14006	Tab. Primaquin Phosphate (Coated) (Aluminium foil/ Blister pack)	7.5 mg/Tab,13 mg of primaquin phosphate equivalent to 7.5 mg of primaquin		Qualified.
10	D14035	Tab. Primaquin Phosphate (coated) (Aluminium foil/ Blister pack)	2.5mg/Tab.		Qualified.
11	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
12	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab	No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 5.2.1., 5.2.2. & 5.2.9. respectively	Not Qualified
13	D17051	Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
14	D18011	Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
15	D18024	Povidone Iodine Oint.	5 % w/w		Qualified.
16	D18028	Clindamycin Cream or gel	1% w/w		Qualified.
17	D18029	Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
18	D18032	Mupirocin Ointment	2 % w/w		Qualified.
19	D22016	Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
20	D22056	Tab. Cabergoline	0.25 mg		Qualified.
21	D24012	Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
22	D25034	Moxifloxacin Eye Drop	0.5% w/v		Qualified.
23	D25056	Carboxymethyl Cellulose Eye drop	0.5% w/v		Qualified.
24	D25075	Mometasone nasal spray	50 mcg x 1 puff, 140 metered doses		Qualified.
25	D27037	Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
26	D27046	Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
27	D27049	Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
28	D28017	Tab. Doxofylline (Aluminium foil/Blister pack)	400mg/Tab.		Qualified.
29	D31051	Tab. Tadalafil (Aluminium foil/Blister pack)	10 mg / Tab.		Qualified.
30	D31052	Tab. Tadalafil (Aluminium foil/Blister pack)	20 mg / Tab.		Qualified.
31	D33183	Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
125	<b>128 M/s. SHAMSHREE LIFESCIENCES LIMITED ,Chandigarh</b>			
1	D09053 Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial		Qualified.
2	D09086 Inj. Cefoperazone & Sulbactam (with diluents in plastic container)	250mg Cefoperazone + 250mg Sulbactam/vial		Qualified.
3	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
4	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
5	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
6	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
7	D09119 Inj. Ceftazidime(with diluents in plastic container)	1gm/vial		Qualified.
8	D09129 Inj. Cefepime (with diluents in plastic container)	500mg/vial		Qualified.
9	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
10	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**129 M/s. PROCHEM PHARMACEUTICALS PVT. LTD. ,Indore (MP)**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
3	D04026	Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml		Qualified.
4	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
5	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
6	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
7	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
8	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
9	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
10	D09138	Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
11	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
12	D16002	Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
13	D16027	Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
14	D18027	Cream Clotrimazole	1% w/w		Qualified.
15	D18029	Clobetasol Propionate Ointment or Cream	0.05% w/w	No Mfg. License, No WHO GMP certificate ,Non Conviction certificate not submitted & No Market Standing as per clause No. 5.2.1., 5.2.2, 5.2.10.& 5.2.9. respectively.	Not Qualified.
16	D21002	Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
17	D21010	Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
18	D21020	Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
19	D21024	Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
20	D21038	Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**130 M/s. AFFY PARENTERALS ,Noida(UP)**

1	D04010	Inj. Diclofenac Sodium	25 mg/ml	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
2	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
3	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
4	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
5	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
6	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
7	D09112	Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavulanic Acid 200mg / Vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
8	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
9	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
10	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
11	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
12	D09160	Inj. Tigecycline (with diluents in plastic container)	50mg/vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
13	D09165	Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavulanic Acid (57 mg)/ 5ml	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
14	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
15	D09173	Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
16	D09175	Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
17	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
18	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
19	D12018	Inj. Amphotericine B(with diluents in plastic container)	25 mg/Vial	No Drug Endorsement(50 mg Vial instead of 25 mg vial) & No Market Standing as per clause no. 5.2.9. & Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
20	D12020	Cream Terbinafine	1% w/w	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
21	D12026	Inj. Caspofungin (with 10ml diluents in plastic container)	50 mg/Vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
22	D12027	Lotion Ketoconazole	2% w/v	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
23	D14018	Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
24	D16018	Inj Iron Sucrose	50 mg/ 2.5 ml	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
25	D18028	Clindamycin Cream or gel	1% w/w	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
26	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
27	D18032 Mupirocin Ointment	2 % w/w	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
28	D21001 Inj. Ranitidine HCl	50 mg / 2 ml	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
29	D21025 Inj. Rabeprazole (I.V) (with diluents in plastic container)	20mg / Vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
30	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
31	D21039 Inj. Ondansetron	2 mg/ml	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
32	D25058 Inj. Hyaluronidase (with diluent)	1500 IU	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
33	D30025 Inj. Methylcobalamine	1500 mcg / Amp.	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
34	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.
35	D33188 Tab. Cyclosporine (Aluminium foil/Blister pack)	50mg	Turnover figure in T6 mismatched with Financial Statement.	Not Qualified.

128 **131 M/s. MEDICLONE BIOTECH PRIVATE LIMITED ,Chennai(Tamilnadu)**

1	S02053 VDRL Rapid Test Kit, (RPR) Rapid Plasma Regime.	AS PER TENDER SPECIFICATION	No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.
2	S02110 Bivalent Rapid Diagnostic Test Kit	As per tender specification	No EMD Cost submitted , No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 6.5.1, 5.2.1., 5.2.2. & 5.2.9. respectively. & Format T10 (B) not Submitted.	Not Qualified.
3	S02113 Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION	No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.

129 **132 M/s. ABICEE PHARMACEUTICALS PRIVATE LIMITED ,Khurda(Odisha)**

1	D04003 Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D09020 Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
3	D16027 Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.

130 **133 M/s. JOHNSON & SMITH CO. ,Bangalore (Karnataka)**

1	D04022 Tab. Paracetamol Kid (Disp. Tab.) (Aluminium foil/Blister pack)	125 mg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
2	D05015 Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
3	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
4	D16046 Glucose for Screening of GDM	75 gm per Packet Box with hermetically sealed in high-density polyethylene (HDPE) inner lining.	Pack size 75 gm not mentioned.	Not Qualified.
5	D17024 Tab. Aspirin (Enteric Coated) (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
6	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**134 M/s. HEALTH BIOTECH LIMITED ,Union Territory**

1	D01002	Inj. Thiopentone Sodium	500 mg/Vial		Qualified.
2	D01008	Inj. Atracurium Besylate	10 mg/ ml		Qualified.
3	D01022	Inj. Propofol (1%)	10mg / ml		Qualified.
4	D02001	Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg	No Drug Endorsement (Strength of Lignocaine not matching)	Not Qualified.
5	D02003	Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml	No Drug Endorsement (Strength of Lignocaine not matching)	Not Qualified.
6	D02007	Lidocaine Hydrochloride gel 2%	30 gm/Tube		Qualified.
7	D02008	Inj. Bupivacaine (Heavy)	Bupivacaine 5mg/ml + Dextrose 80mg / ml		Qualified.
8	D03001	Inj. Atropine Sulphate	0.6 mg/ml		Qualified.
9	D03002	Inj. Glycopyrrolate	0.2 mg/ml		Qualified.
10	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
11	D04004	Inj. Paracetamol	150 mg/ml		Qualified.
12	D04010	Inj. Diclofenac Sodium	25 mg/ml	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
13	D05001	Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)	Format T10 (B) not Submitted.	Not Qualified.
14	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
15	D05005	Inj. Adrenaline Bitartrate	1mg/ml (1:1000)		Qualified.
16	D05017	Inj. Betamethasone Sod. Phosphate	4mg / ml		Qualified.
17	D05023	Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial		Qualified.
18	D05025	Inj. Noradrenaline	1mg/ml		Qualified.
19	D05029	Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
20	D06004	Inj. Acetylcysteine	200mg/ml		Qualified.
21	D07007	Inj. Phenytoin Sodium	50 mg/ml		Qualified.
22	D07019	Inj. Levetiracetam	100mg/ml		Qualified.
23	D09003	Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml		Qualified.
24	D09004	Inj. Ampicillin Sodium (with diluents in plastic container)	Equivalent to 500 mg of anhydrous Ampicillin/Vial		Qualified.
25	D09009	Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml	Format T10 (B) not Submitted.	Not Qualified.
26	D09019	Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
27	D09046	Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
28	D09053	Inj. Cefotaxime Sodium (with diluents in plastic container)	Equiv. to Cefotaxime 250 mg/Vial		Qualified.
29	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml	Format T10 (B) not Submitted.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
30	D09087 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial	No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.
31	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
32	D09094 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
33	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
34	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
35	D09112 Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavulanic Acid 200mg / Vial		Qualified.
36	D09119 Inj. Ceftazidime(with diluents in plastic container)	1gm/vial		Qualified.
37	D09129 Inj. Cefepime (with diluents in plastic container)	500mg/vial		Qualified.
38	D09136 Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
39	D09141 Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
40	D09160 Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
41	D09165 Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavulanic Acid (57 mg)/ 5ml		Qualified.
42	D09172 Inj. Clindamycin	300mg/(Vial/Amp)		Qualified.
43	D09174 Inj. Netilmicin Sulphate (with 10ml diluents in plastic container)	300 mg/vial		Qualified.
44	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
45	D12026 Inj. Caspofungin (with 10ml diluents in plastic container)	50 mg/Vial		Qualified.
46	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)	Format T10 (B) not Submitted.	Not Qualified.
47	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)		Qualified.
48	D16007 Inj. Ethamsylate	125 mg/ml		Qualified.
49	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
50	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
51	D16035 Inj. Enoxaparin	40mg/(Amp./PFS)		Qualified.
52	D16039 Inj. Vassopressin	20 Units/ml		Qualified.
53	D17013 Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
54	D17025 Inj. Streptokinase	1.5 million U/10 ml Vial		Qualified.
55	D17026 Tab. Hydrochlorothiazide (Aluminium Foil/Blister Pack)	12.5 mg/Tab	No Mfg. License, No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause No. 5.2.1., 5.2.2., 5.2.9. & 5.2.10respectively and Format T10 (B) not Submitted.	Not Qualified.
56	D17039 Inj. Amiodarone	50mg/ml		Qualified.
57	D17040 Inj. Dobutamine HCl	50mg / ml		Qualified.
58	D17043 Inj. Labetalol	20mg/4ml Amp.		Qualified.
59	D17050 Inj. Esmolol Hydrochloride	10mg/ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
60	D17054 Inj. Adenosine	3mg/ml		Qualified.
61	D18007 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
62	D18023 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v		Qualified.
63	D18032 Mupirocin Ointment	2 % w/w		Qualified.
64	D18034 Inj. Acyclovir (with diluents in plastic container)	250mg/vial		Qualified.
65	D18054 Povidone Iodine Solution (Plastic container as per I.P)	10% w/v		Qualified.
66	D20002 Inj. Frusemide	10 mg/ 1 ml		Qualified.
67	D21001 Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.
68	D21004 Inj. Metoclopramide	10 mg/2 ml		Qualified.
69	D21005 Inj. Promethazine HCl	25 mg/ml		Qualified.
70	D21013 Inj. Dicyclomine HCl	10 mg/ml	No Mfg. License, No WHO GMP certificate & Non Conviction certificate not submitted as per clause No. 5.2.1.,5.2.2. & 5.2.10 respectively.	Not Qualified.
71	D21021 Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml	No Drug Endorsement(1gm/5ml instead of 1gm/10 ml) & No Market Standing as per clause no. 5.2.9.	Not Qualified.
72	D21025 Inj. Rabeprazole (I.V) (with diluents in plastic container)	20mg / Vial		Qualified.
73	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
74	D21036 Inj. Drotaverine	20 mg/ml		Qualified.
75	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
76	D21042 Inj. Octreotide	50mcg / ml		Qualified.
77	D22053 Inj. HCG with diluents	2000 IU/Vial		Qualified.
78	D22054 Inj. HMG with diluents	75 IU/Vial	No Mfg. License, No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause No. 5.2.1., 5.2.2., 5.2.9. & 5.2.10 respectively	Not Qualified.
79	D24005 Inj. Vecuronium Bromide	4mg /2ml		Qualified.
80	D24006 Inj. Neostigmine Methylsulphate	0.5 mg/ml		Qualified.
81	D24011 Inj. Succinyl Choline Chloride	50 mg/ml		Qualified.
82	D25024 Tropicamide + Phenylephrine Eye Drop	Tropicamide 0.8% + Phenylephrine 5% (FFS / BFS Plastic Container)		Qualified.
83	D25028 Timolol Eye Drop	0.5% (FFS / BFS Plastic Container)		Qualified.
84	D25034 Moxifloxacin Eye Drop	0.5% w/v		Qualified.
85	D25039 Natamycin Eye Drop	5% w/v	No Mfg. License, No WHO GMP certificate & Non Conviction certificate not submitted as per clause No. 5.2.1.,5.2.2. & 5.2.10 respectively.	Not Qualified.
86	D25045 Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)		Qualified.
87	D25050 Xylometazoline Nasal Drop	0.05% w/v (FFS / BFS Plastic Container)		Qualified.
88	D25079 Wax Softner	Paradichlorobenzene 2%, benzocaine 2.7%, turpentine oil 15%, chlorbutol 5% (FFS / BFS Plastic Container)		Qualified.
89	D26001 Inj. Methylergometrine Maleate	0.2 MG/ML		Qualified.

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
90	D26002 Inj. Oxytocin	5 IU/1ml		Qualified.
91	D26005 Inj. Carboprost Tromethamine	250 mcg/ml		Qualified.
92	D26011 Inj. Isoxsuprine HCl	5mg / ml		Qualified.
93	D26048 Inj. Medroxyprogesterone	150 mg/Amp		Qualified.
94	D28001 Inj. Theophylline & Etophylline	(Theophylline 50.6 mg + Etophylline 169.4 mg)/2ml		Qualified.
95	D29008 Inj. Sodium Bi-Carbonate	7.5% w/v		Qualified.
96	D29011 Inj. Pottasium Chloride	Each ml contains Potassium Chloride 150mg (supply with type I and II Glass bottle)		Qualified.
97	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 I.U / 1ml	Format T10 (B) not Submitted.	Not Qualified.
98	D30021 Inj. Phytomenadione (Vit-K1)	1mg/0.5ml	Format T10 (B) not Submitted.	Not Qualified.
99	D30025 Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.
100	D46014 Inj. Terlipressin	1mg/10ml vial		Qualified.
101	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**135 M/s. MACLEODS PHARMACEUTICALS LIMITED ,Mumbai (Maharashtra)**

1	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
2	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
3	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
4	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
5	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
6	D09093	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
7	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
8	D09099	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
9	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg		Qualified.
10	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
11	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
12	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
13	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
14	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
15	D09165	Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavulanic Acid (57 mg)/ 5ml		Qualified.
16	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
17	D11023	Cap. Cycloserine(Aluminium foil/Blister pack)	250 mg/Cap		Qualified.
18	D17053	Tab. Ramipril (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
19	D17065	Tab. Ivabradine (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
20	D22010	Tab. Levo Thyroxin Sodium (Aluminium Foil/ Blister Pack)	50 mcg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
21	D22015	Tab. Levo Thyroxine Sodium	25 mcg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
22	D22050	Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
23	D22051	Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
24	D27049	Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
25	D43002	Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.

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**136 M/s. PAVIOUR PHARMACEUTICALS PVT. LTD. ,New Delhi**

1	D49005	Inj. Porcine Surfactant (Poractant alfa)	80mg/ml		Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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134 **137 M/s. EASTERN CHEMICAL INDUSTRIES PVT LTD ,Cuttack (Odisha)**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
3	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
4	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
5	D16027	Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
6	D21035	Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.

135 **138 M/s. FRESENIUS KABI INDIA PVT. LTD. ,Pune (Maharashtra)**

1	D01022	Inj. Propofol (1%)	10mg / ml		Qualified.
2	D04033	Inj. Paracetamol I.V	1000 mg/ 100ml		Qualified.
3	D09121	Inj. Linezolid I.V	600mg/300ml		Qualified.
4	D29026	Total Parenteral Nutrition Injection	1026ml/Pouch		Qualified.
5	D30046	Tab. Alpha Ketoanalogue (Aluminium foil/Blister pack)	As per tender specification	Total nitrogen content per tablet 36mg, Calcium content per tablet 1.25 mmol=0.05 gm not mentioned in DE & COPP.	Not Qualified.

136 **139 M/s. ALKEM LABORATORIES LIMITED ,Mumbai (Maharashtra)**

1	D43005	Inj. Adalimumab	40 mg/PFS	Mfg. License, WHO GMP & Market Standing & Non Conviction Certificate submitted for M/s. Enzene Biosciences Ltd.	Not Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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137                    **140 M/s. BDR PHARMACEUTICALS INTERNATIONAL PVT. LTD. ,Mumbai  
(Maharashtra)**

1	D07019	Inj. Levetiracetam	100mg/ml		Qualified.
2	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
3	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
4	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
5	D09141	Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
6	D09160	Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
7	D12021	Inj. Amphotericin B Liposomal (with diluents in plastic container)	50 mg/Vial	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
8	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
9	D12026	Inj. Caspofungin (with 10ml diluents in plastic container)	50 mg/Vial		Qualified.
10	D16018	Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
11	D16022	Tab. Deferasirox (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
12	D16023	Tab. Deferasirox (Aluminium foil/Blister pack)	400 mg/Tab		Qualified.
13	D16035	Inj. Enoxaparin	40mg/(Amp./PFS)		Qualified.
14	D16054	Inj. Ferric Carboxymaltose (FCM)	500 mg/Vial	No Market Standing as per clause No. 5.2.9.	Not Qualified.
15	D46015	Cap./Tab. Everolimus	0.25 mg/(Cap./Tab.)		Qualified.
16	D46016	Cap./Tab. Everolimus	0.5 mg/(Cap./Tab.)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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141 M/s. CIPLA LTD. ,Mumbai

1	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
2	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
3	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	No Market Standing as per clause No. 5.2.9. & Format T10 (B) not Submitted.	Not Qualified.
4	D09177	Tab. Minocycline (Aluminium foil/Blister pack)	100mg/Tab.	No WHO GMP certificate, No Market Standing & Non Conviction certificate not submitted as per clause No. 5.2.2., 5.2.9. & 5.2.10 respectively.	Not Qualified.
5	D17015	Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab	Format T10 (B) not Submitted.	Not Qualified.
6	D17053	Tab. Ramipril (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
7	D20012	Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.		Qualified.
8	D25024	Tropicamide + Phenylephrine Eye Drop	Tropicamide 0.8% + Phenylephrine 5% (FFS / BFS Plastic Container)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
9	D25035	Dorzolamide HCl Eye Drop	2% w/v or 20 mg/ml		Qualified.
10	D28011	Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
11	D28013	Salbutamol Inhaler, 200 metered doses	100 mcg/puff		Qualified.
12	D28018	Soln. Salbutamol Sulphate	Nebulized Soln. for Nebulizers 5mg/ml		Qualified.
13	D28019	Budesonide Inhaler 200 metered doses	100mcg / puff		Qualified.
14	D28020	Respules Salbutamol	2.5mg/dose	No WHO GMP certificate & No Market Standing as per clause No. 5.2.2. & 5.2.9. respectively.	Not Qualified.
15	D28025	Repsule Budesonide	1mg/2ml		Qualified.
16	D28027	Indacaterol + Glycopyrronium	Indacaterol 110mg + Glycopyrronium 50mcg/ Cap. with inhaler		Qualified.
17	D28029	Inhaler Tiotropium Bromide 200 metered doses	9mcg / puff		Qualified.
18	D28031	Inhaler Salmeterol + Fluticasone (120 metered dose)	Salmeterol 25 mcg + Fluticasone 250 mcg / puff		Qualified.
19	D28032	Inhaler Budesonide + Formoterol 120 metered doses	200 mcg Budesonide + 6 mcg Formoterol / puff		Qualified.
20	D46004	Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
21	D46005	Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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142 M/s. HASEEB PHARMACEUTICALS PVT. LTD. ,Nagpur(Maharashtra)

1	D09007 Inj. Ciprofloxacin I.V.	200mg/100ml (FFS Plastic Container)		Qualified.
2	D13003 Metronidazole Injection ( Metronidazole Intravenous Infusion)	500 mg/100 ml Bottle (FFS Plastic Container)		Qualified.
3	D29001 I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
4	D29002 I.V Dextrose and Sodium Chloride (DNS)	5% w/v Dextrose, 0.9% w/v Sodium Chloride (FFS Plastic Container)		Qualified.
5	D29003 I.V Compound Sodium Lactate (RingerS Lactate) RL	Lactic Acid-0.24w/v equivalent to 0.32% w/v of sodium lactate sodium chloride-0.6% w/v, potassium chloride-0.04% w/v, calcium chloride-0.027% w/v (FFS Plastic Container)		Qualified.
6	D29004 I.V Dextrose 5% (5D)	5% w/v (FFS Plastic Container)		Qualified.
7	D29012 I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
8	D31034 Sterile Water For Injection (Plastic Container as per IP)	10ml/Vial/Amp. (FFS / BFS Plastic Container)	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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140 **143 M/s. HETERO HEALTHCARE LTD. ,Hyderabad**

1	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
2	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
3	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.	Format T10 (B) not Submitted.	Not Qualified.
4	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
5	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
6	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
7	D17032	Tab. Telmisartan (Aluminium foil/Blister pack)	40mg/Tab.	Format T10 (B) not Submitted.	Not Qualified.
8	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
9	D18035	Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.	Format T10 (B) not Submitted.	Not Qualified.
10	D21018	Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
11	D21026	Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
12	D21052	Cap. Racecadotril (Aluminium foil/Blister pack)	100mg / Cap.		Qualified.
13	D22051	Tab. Teneligliptin (Aluminium foil/Blister pack)	20mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
14	D32015	Cap. Oseltamivir (Aluminium foil/Blister pack)	75 mg/Cap		Qualified.
15	D40008	Tab. Rifaximin (Aluminium foil/Blister pack)	400 mg/Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
16	D43005	Inj. Adalimumab	40 mg/PFS	WHO GMP Export only.	Not Qualified.
17	D44004	Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab	Format T10 (B) not Submitted.	Not Qualified.
18	D44005	Tab. Daclatasvir	60 mg	Format T10 (B) not Submitted.	Not Qualified.
19	D44006	Tab. Sofosbuvir + Velpatasvir	Sofosbuvir 400 mg + Velpatasvir 100 mg	Format T10 (B) not Submitted.	Not Qualified.
20	D44007	Tab. Sofosbuvir	400 mg	Format T10 (B) not Submitted.	Not Qualified.
21	D46005	Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.

141 **144 M/s. THE SWASTIK PHARMACEUTICALS ,Vijayawada**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D19006	Surgical Spirit IP (Plastic container as per I.P)	.		Qualified.
3	D19009	Soln. Chlorohexidine Gluconate + Cetrimide + Isopropyl Alcohol	Chlorohexidine Gluconate 0.3% w/v + Cetrimide 0.6% w/v + Isopropyl Alcohol 4% v/v	Strength not matching in DE & T8.	Not Qualified

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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142 **145 M/s. RPG LIFE SCIENCES LTD. ,Mumbai**

1	D04061	Tab. Naproxen (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
2	D20005	Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab		Qualified.
3	D27006	Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
4	D33182	Tab. Azathioprine(Aluminium foil/Blister pack)	50 mg/ Tab		Qualified.
5	D33185	Syp. Cyclosporine	100 mg/ml		Qualified.
6	D33188	Tab. Cyclosporine (Aluminium foil/Blister pack)	50mg		Qualified.
7	D45009	Tab. Tacrolimus (Aluminium foil/Blister pack)	1 mg / Tab.		Qualified.
8	D46009	Tab. Mycophenolate (Aluminium foil/Blister pack)	250 mg/ Tab		Qualified.

143 **147 M/s. M.J. BIOPHARMA PVT. LTD. ,Raigad (Maharashtra)**

1	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
2	D22002	Inj. Human Soluble Insulin	40 IU/ml		Qualified.
3	D22003	Tab. Metformin HCl (SR) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
4	D22012	Inj. Human Premixed Insulin (30/70)	40 units/ml (Biphasic, 30/70)		Qualified.
5	D22051	Tab. Teneligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
6	D22052	Inj. Insulin (NPH intermediate acting)	40 IU/ml		Qualified.
7	S02423	Insulin Therapy Kit	AS PER TENDER SPECIFICATION	No DE & T8 for Insulin Pen and Needle or Kit.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
144	<b>148 M/s. SAMKEM ,Indore</b>			
1	D02007 Lidocaine Hydrochloride gel 2%	30 gm/Tube	No Market Standing as per clause No. 5.2.9. & In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
2	D03004 Potassium Permanganate	100 gm Crystals/Pack	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
3	D04003 Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
4	D04026 Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml	No Market Standing as per clause No. 5.2.9. & In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
5	D04032 Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
6	D05016 Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
7	D08003 Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
8	D09003 Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
9	D09095 Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
10	D09138 Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	No Market Standing as per clause No. 5.2.9. & In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
11	D13002 Susp. Tinidazole (Oral Susp.) (Palatable, with measuring cap and plastic container as per I.P)	150 mg/5 ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
12	D13007 Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)	No Market Standing as per clause No. 5.2.9. & In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
13	D14002 Syp. Chloroquin Phosphate (Palatable, with measuring cap and plastic container as per I.P)	80 mg of Chloroquin phosphate/5ml(with measuring cap and palatable) OR Chloroquine 50mg/5ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
14	D16011 Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
15	D16027 Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
16	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.



Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
17	D16046 Glucose for Screening of GDM	75 gm per Packet Box with hermetically sealed in high-density polyethylene (HDPE) inner lining.	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
18	D18007 Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
19	D18024 Povidone Iodine Oint.	5 % w/w	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
20	D21006 Symp. Promethazine (Palatable, with measuring cap and plastic container as per I.P)	5 mg/5 ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
21	D21014 Oral Solution or Symp. Dicyclomine (Palatable, with measuring cap and plastic container as per I.P)	10 mg/5 ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
22	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
23	D21028 Dicyclomine Drop (Palatable, with dropper and plastic container as per I.P)	Dicyclomine HCl 10mg + Activated Dimethicone 40mg / ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
24	D21038 Symp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
25	D28011 Symp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
26	D29006 Oral Soln. of Potassium Chloride (with measuring cap, plastic container/ Glass Bottel as per I.P)	10 % to 15 % w/v Soln.	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
27	D30044 Symp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.
28	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)	In T6 CA Certificate Turnover for 2021-22 is Rs. 47.46 Crore, but Financial Statement not submitted.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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145 **149 M/s. BIOSYNERGY LIFECARE PRIVATE LIMITED ,Moradabad (UP)**

1	D04033 Inj. Paracetamol I.V	1000 mg/ 100ml	No Market Standing(2gm instead of 1 gm) as per clause No. 5.2.9.	Not Qualified.
2	D09007 Inj. Ciprofloxacin I.V.	200mg/100ml (FFS Plastic Container)		Qualified.
3	D09073 Inj. Ofloxacin I.V	200mg/100ml Bottle (FFS Plastic Container)		Qualified.
4	D13003 Metronidazole Injection ( Metronidazole Intravenous Infusion)	500 mg/100 ml Bottle (FFS Plastic Container)		Qualified.
5	D20004 Inj. Mannitol (Mannitol Intravenous Infusion)	20% w/v (FFS Plastic container)		Qualified.
6	D29001 I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
7	D29002 I.V Dextrose and Sodium Chloride (DNS)	5% w/v Dextrose, 0.9% w/v Sodium Chloride (FFS Plastic Container)		Qualified.
8	D29003 I.V Compound Sodium Lactate (RingerS Lactate) RL	Lactic Acid-0.24w/v equivalent to 0.32% w/v of sodium lactate sodium chloride-0.6% w/v, potassium chloride-0.04% w/v, calcium chloride-0.027% w/v (FFS Plastic Container)		Qualified.
9	D29004 I.V Dextrose 5% (5D)	5% w/v (FFS Plastic Container)		Qualified.
10	D29005 I.V Dextrose 10% (10D)	10% w/v (FFS Plastic Container)		Qualified.
11	D29009 Multi Electrolyte AND Dextrose Inj. Type 1 IP (Paediatric Maintenance Solution Type 1)	Each 100ml contains Dextrose Anhydrous 5gm, Potassium Chloride 0.130 gm, Sodium Acetate 0.320gm, Diabasic Potassium Phosphate 0.026gm, Magnesium Chloride 0.031gm. (FFS Plastic Container)		Qualified.
12	D29012 I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.

146 **150 M/s. STANEX DRUGS AND CHEMICALS PRIVATE LIMITED ,Hyderabad(Telangana)**

1	D09160 Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
2	D12026 Inj. Caspofungin (with 10ml diluents in plastic container)	50 mg/Vial		Qualified.
3	D16004 Inj. Heparin Sodium	5000 IU/(Amp or Vial)	No EMD Cost submitted , No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 6.5.1, 5.2.1., 5.2.2. & 5.2.9. respectively.	Not Qualified.

147 **151 M/s. RAPTAKOS, BRETT AND COMPANY LIMITED ,Mumbai (Maharashtra)**

1	D16021 Syp. Iron(Palatable, with measuring cap and plastic container as per I.P)	Each 5ml Contains 30mg of Elemental Iron	No Drug Endorsement, No Market Standing & Invalid WHO GMP Certificate as per clause No. 5.2.9. & 5.2.2. respectively.	Not Qualified.
2	D18047 Choline Salicylate + Benzalkonium Chloride	Choline Salicylate 9% w/v + Benzalkonium Chloride 0.02% w/v	Invalid WHO GMP Certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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148 **152 M/s. TROIKAA PHARMACEUTICALS LIMITED ,Ahmedabad(Gujarat)**

1	D01020	Isoflurane	100%		Qualified.
2	D01021	Isoflurane	100%		Qualified.
3	D01022	Inj. Propofol (1%)	10mg / ml		Qualified.
4	D01023	Sevoflurane	99.97%		Qualified.
5	D02006	Inj. Bupivacaine	5 mg/ml		Qualified.
6	D17043	Inj. Labetalol	20mg/4ml Amp.		Qualified.
7	D21042	Inj. Octreotide	50mcg / ml		Qualified.

149 **153 M/s. MIDAS CARE PHARMACEUTICALS PVT. LTD. ,Mumbai**

1	D28013	Salbutamol Inhaler, 200 metered doses	100 mcg/puff	Less EMD amount submitted as per clause no. 5.2.11.	Not Qualified.
2	D28019	Budesonide Inhaler 200 metered doses	100mcg / puff		Qualified.
3	D28028	Inhaler Salbutamol + Ipratropium Bromide (200 metered dose)	Salbutamol 100mcg + Ipratropium Bromide 20mcg / puff		Qualified.
4	D28029	Inhaler Tiotropium Bromide 200 metered doses	9mcg / puff		Qualified.
5	D28031	Inhaler Salmeterol + Fluticasone (120 metered dose)	Salmeterol 25 mcg + Fluticasone 250 mcg / puff		Qualified.
6	D28032	Inhaler Budesonide + Formoterol 120 metered doses	200 mcg Budesonide + 6 mcg Formoterol / puff		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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154 M/s. SYNOKEM PHARMACEUTICALS LIMITED ,Punjabi Bagh(New Delhi)

1	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
2	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
3	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
4	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
5	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
6	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored		Qualified.
7	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
8	D12015	Tab. Terbinafine (Aluminium foil/Blister pack)	250mg/Tab.		Qualified.
9	D16002	Tab. Folic Acid (Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
10	D16013	Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
11	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
12	D17071	Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
13	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
14	D17085	Tab. Cilnidipine (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
15	D21021	Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
16	D21032	Tab. Drotaverine HCl(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
17	D22026	Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
18	D22039	Tab. Dapagliflozin (Aluminium foil/Blister pack)	10mg/Tab.		Qualified.
19	D22050	Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
20	D22051	Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
21	D24012	Tab./Cap. Thiocolchicoside	4mg/(Tab./Cap.)		Qualified.
22	D26007	Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab		Qualified.
23	D26008	Tab. Norethisterone IP (Aluminium foil/Blister pack)	5mg/ Tab		Qualified.
24	D26012	Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.		Qualified.
25	D26017	Tab./Cap. Micronised Progesteron (Aluminium Foil/Blister pack)	200 mg		Qualified.
26	D27017	Tab. Fluoxetine (Aluminium foil/Blister pack)	20mg/ Tab		Qualified.
27	D27037	Tab. Escitalopram(Aluminium foil/Blister pack)	10 mg / Tab		Qualified.
28	D27049	Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
29	D27056	Tab. Sertraline(Aluminium foil/Blister pack)	50 mg / Tab		Qualified.
30	D27100	Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
31	D27119	Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
32	D30042 Tab. Methylcobalamin (Aluminium foil/Blister pack)	1500 mcg/Tab.		Qualified.
33	D30043 Drop Vit. D3 (Cholecalciferol)	400 IU/ml		Qualified.
34	D30044 Syp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc		Qualified.
35	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
36	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
37	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

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**155 M/s. LYKA LABS LTD ,Mumbai (Maharashtra)**

1	D09106 Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
2	D09141 Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
3	D09160 Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
4	D12021 Inj. Amphotericine B Liposomal (with diluents in plastic container)	50 mg/Vial		Qualified.
5	D24005 Inj. Vecuronium Bromide	4mg /2ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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156 M/s. SIGNATURE PHYTOCHEMICAL INDUSTRIES ,Mumbai (Maharashtra)

1	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	Qualified.
2	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab	Qualified.
3	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Qualified.
4	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB	Qualified.
5	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)	Qualified.
6	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Qualified.
7	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab	Qualified.
8	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg	Qualified.
9	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.	Qualified.
10	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Qualified.
11	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.	Qualified.
12	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	Qualified.
13	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
14	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab	Qualified.
15	D12027	Lotion Ketoconazole	2% w/v	Qualified.
16	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.	Qualified.
17	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
18	D18011	Lotion Permethrin (Plastic Container as per IP)	5%w/v	Qualified.
19	D18027	Cream Clotrimazole	1% w/w	Qualified.
20	D18046	Fusidic Acid Cream	0.02 w/w	Qualified.
21	D18051	Azelaic Acid Ointment	10 % w/w	Qualified.
22	D21002	Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab	Qualified.
23	D22026	Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	Qualified.
24	D22039	Tab. Dapagliflozin (Aluminium foil/Blister pack)	10mg/Tab.	Qualified.
25	D22051	Tab. Tenecligiptin (Aluminium foil/Blister pack)	20mg / Tab.	Qualified.
26	D27119	Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg	Qualified.
27	D30045	Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.	Qualified.
28	D33183	Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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153 **157 M/s. RENOWN PHARMACEUTICALS PVT. LTD. ,Vadodara (Gujarat)**

1	D17016	Cap. Nifedipine (Soft gelatin capsule) (Aluminium foil/Blister pack)	5 mg/Cap		Qualified.
2	D30002	Cap. Vit A (Alluminium Foil /Blister Pack)	50,000 IU/Cap (Soft Gelatine Capsules)		Qualified.

154 **158 M/s. SURGIPLAST (INDIA) ,Ganjam(Odisha)**

1	D16046	Glucose for Screening of GDM	75 gm per Packet Box with hermetically sealed in high-density polyethylene (HDPE) inner lining.	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
2	D18003	Silver Sulphadiazine Cream	1% w/w	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
3	D18007	Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
4	D18011	Lotion Permethrin (Plastic Container as per IP)	5%w/v	No Market Standing as per clause No. 5.2.9. & Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
5	D18020	Cream Silver Sulphadiazine	1% w/w	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
6	D18023	Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
7	D18024	Povidone Iodine Oint.	5 % w/w	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
8	D18027	Cream Clotrimazole	1% w/w	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
9	D19006	Surgical Spirit IP (Plastic container as per I.P)	.	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
10	D19008	Chloroxylenol Solution (Plastic Container as per IP)	5% w/v	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
11	D19009	Soln. Chlorohexidine Gluconate + Cetrimide + Isopropyl Alcohol	Chlorohexidine Gluconate 0.3% w/v + Cetrimide 0.6% w/v + Isopropyl Alcohol 4% v/v	No Drug Endorsement(Strength not matching) & Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
12	D19013	Oint Nitrofurazone (Polyglycol Base, Tube)	0.2% w/v	No Market Standing as per clause No. 5.2.9. & Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.
13	D34003	Handloom Cotton Cloth for Plaster of Paris Bandages, Variety-1 Bleached	Min.Mass 40gm / Sq.mtr, Confirming to IS:6237 / 71, Ends(Column)-130, Picks(Row)-75 / 10Sq.cm (Each unit in plastic cover)	Turnover Furnished In T6 but Financial Statements not submitted for 2019-20, 2020-21&2021-22	Not Qualified.

155 **159 M/s. BIOGENIX INC. PVT. LTD. ,Lucknow(UP)**

1	S02110	Bivalent Rapid Diagnostic Test Kit	As per tender specification	No Performance Certificate from end user.	Not Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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156 **160 M/s. MESMER PHARMACEUTICALS ,Chennai (Tamil Nadu)**

1	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab		Qualified.
2	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
3	D27015	Tab. Risperidone (Aluminium Foil/ Blister pack)	2 mg/Tab		Qualified.
4	D27017	Tab. Fluoxetine (Aluminium foil/ Blister pack)	20mg/ Tab		Qualified.
5	D27031	Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab		Qualified.
6	D27037	Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
7	D27046	Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
8	D27075	Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
9	D27121	Tab. Quetiapine SR (Aluminium foil/Blister pack)	100 mg / Tab		Qualified.
10	D27124	Tab. Fluvoxamine (Aluminium Foil/Blister pack)	100mg / Tab.		Qualified.
11	D30045	Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.

157 **161 M/s. SUPERMAX LABORATORIES ,Dehradun (Uttarakhand)**

1	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)		Qualified.
2	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
3	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
4	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg		Qualified.
5	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
6	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
7	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
8	D09165	Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavulanic Acid (57 mg)/ 5ml		Qualified.
9	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
10	D09173	Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml		Qualified.

158 **162 M/s. PFIZER PRODUCTS INDIA PRIVATE LIMITED ,Mumbai (Maharashtra)**

1	D16058	Recombinant Factor VIII (Plasma Free, Human Albumin Free)	250 IU / Vial (As per EDL Specification)		Qualified.
2	D16059	Recombinant Factor VIII (Plasma Free, Human Albumin Free)	500 IU / Vial (As per EDL Specification)		Qualified.
3	D16060	Recombinant Factor VIII (Plasma Free, Human Albumin Free)	1000 IU / Vial (As per EDL Specification)		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
159	<b>163 M/s. AKRON HEALTHCARE PVT. LTD. ,Delhi</b>			
1	D31041 Soda Lime	Medical Grade, Granular Form		Qualified.
160	<b>164 M/s. BHARAT BIOTECH INTERNATIONAL LIMITED ,Medchal-Malkajiri</b>			
1	D23009 Inj. Anti Rabies Vaccine for Human Use with diluents	1 ml (ID),AS PER TENDER SPECIFICATION		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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166 M/s. MARTIN &amp; BROWN BIO-SCIENCES ,Soaln (H.P)

1	D02001	Inj. Lignocaine HCl	Lignocaine HCl 21.3mg + NaCl 6mg	Qualified.
2	D02003	Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml	Qualified.
3	D03001	Inj. Atropine Sulphate	0.6 mg/ml	Qualified.
4	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml	Qualified.
5	D04004	Inj. Paracetamol	150 mg/ml	Qualified.
6	D04010	Inj. Diclofenac Sodium	25 mg/ml	Qualified.
7	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.	Qualified.
8	D04026	Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml	Qualified.
9	D05001	Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)	Qualified.
10	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial	Qualified.
11	D05004	Tab. Prednisolone (Aluminium foil/Blister pack)	5 mg/Tab	Qualified.
12	D05007	Inj. Pheniramine Maleate	22.75 mg/ml	Qualified.
13	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
14	D05017	Inj. Betamethasone Sod. Phosphate	4mg / ml	Qualified.
15	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab	Qualified.
16	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foill/ Blister pack)	400 MG/TAB	Qualified.
17	D09003	Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml	Qualified.
18	D09009	Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml	Qualified.
19	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab	Qualified.
20	D09019	Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin	Qualified.
21	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
22	D09046	Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin	Qualified.
23	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Qualified.
24	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml	Qualified.
25	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Qualified.
26	D09138	Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
27	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
28	D14002 Syp. Chloroquin Phosphate (Palatable, with measuring cap and plastic container as per I.P)	80 mg of Chloroquin phosphate/5ml(with measuring cap and palatable) OR Chloroquine 50mg/5ml		Qualified.
29	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
30	D16018 Inj Iron Sucrose	50 mg/ 2.5 ml		Qualified.
31	D16027 Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
32	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
33	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
34	D20002 Inj. Frusemide	10 mg/ 1 ml		Qualified.
35	D21001 Inj. Ranitidine HCl	50 mg / 2 ml		Qualified.
36	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
37	D21004 Inj. Metoclopramide	10 mg/2 ml		Qualified.
38	D21005 Inj. Promethazine HCl	25 mg/ml		Qualified.
39	D21006 Syp. Promethazine (Palatable, with measuring cap and plastic container as per I.P)	5 mg/5 ml		Qualified.
40	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
41	D21013 Inj. Dicyclomine HCl	10 mg/ml		Qualified.
42	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
43	D21020 Susp. Domperidone (With Measuring Cap AND Dropper, Palatable) (plastic container as per I.P)	1 mg/ml		Qualified.
44	D21021 Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
45	D21025 Inj. Rabeprazole (I.V) (with diluents in plastic container)	20mg / Vial		Qualified.
46	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
47	D21028 Dicyclomine Drop (Palatable, with dropper and plastic container as per I.P)	Dicyclomine HCl 10mg + Activated Dimethicone 40mg / ml	No Drug Endorsement(15 ml Bottle instead of 10 ml)	Not Qualified.
48	D21030 Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
49	D21035 Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.
50	D21036 Inj. Drotaverine	20 mg/ml		Qualified.
51	D21038 Syp. Ondansetron (Palatable, with measuring cap and plastic container as per I.P)	2 mg/5ml		Qualified.
52	D21039 Inj. Ondansetron	2 mg/ml		Qualified.
53	D25034 Moxifloxacin Eye Drop	0.5% w/v		Qualified.
54	D25069 Chloramphenicol Eye drop	0.5% w/v (as per IP)		Qualified.
55	D26001 Inj. Methylergometrine Maleate	0.2 MG/ML		Qualified.
56	D28001 Inj. Theophylline & Etophylline	(Theophylline 50.6 mg + Etophylline 169.4 mg)/2ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
57	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
58	D29008 Inj. Sodium Bi-Carbonate	7.5% w/v		Qualified.
59	D29011 Inj. Pottasium Chloride	Each ml contains Potassium Chloride 150mg (supply with type I and II Glass bottle)		Qualified.
60	D29013 Inj. Calcium Gluconate	10% w/v		Qualified.
61	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

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**167 M/s. PENTA KRAFT ,Haridwar(Uttarakhand)**

1	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
2	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
3	D18016 Tab. Acyclovir (Alluminium Foil/ Blister Pack)	400 mg/ Tab (Scored)		Qualified.
4	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab		Qualified.
5	D33182 Tab. Azathioprine(Aluminium foil/Blister pack)	50 mg/ Tab		Qualified.
6	D33183 Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.
7	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.

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**168 M/s. BAJAJ HEALTHCARE LTD. ,Thane (Maharashtra)**

1	D09134 Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
2	D16022 Tab. Deferasirox (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
3	D16023 Tab. Deferasirox (Aluminium foil/Blister pack)	400 mg/Tab		Qualified.
4	D17024 Tab. Aspirin (Enteric Coated) (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
5	D22013 Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
6	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab		Qualified.
7	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
8	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.		Qualified.
9	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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164 **169 M/s. CONCORD BIOTECH LIMITED ,Ahmedabad(Gujarat)**

1	D33185	Syp. Cyclosporine	100 mg/ml	No WHO GMP certificate & Non Conviction certificate not submitted as per clause No. 5.2.2. & 5.2.10. respectively.	Not Qualified.
2	D33188	Tab. Cyclosporine (Aluminium foil/Blister pack)	50mg	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
3	D45009	Tab. Tacrolimus (Aluminium foil/Blister pack)	1 mg / Tab.		Qualified.
4	D46009	Tab. Mycophenolate (Aluminium foil/Blister pack)	250 mg/ Tab		Qualified.
5	D46011	Cap. Tacrolimus (Aluminium foil/Blister pack)	0.25mg/ Cap.		Qualified.
6	D46015	Cap./Tab. Everolimus	0.25 mg/(Cap./Tab.)	Less Market Standing as per clause No. 5.2.9.	Not Qualified.
7	D46016	Cap./Tab. Everolimus	0.5 mg/(Cap./Tab.)	Less Market Standing as per clause No. 5.2.9.	Not Qualified.

165 **170 M/s. SANDOZ PVT. LTD. ,Mumbai (Maharashtra)**

1	D33191	Inj. Ranibizumab	10mg/(PFS/Vial)		Qualified.
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166 **171 M/s. ESKAG PHARMA PVT. LTD ,Kolkate (West Bengal)**

1	D21021	Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
2	D26008	Tab. Norethisterone IP (Aluminium foil/Blister pack)	5mg/ Tab		Qualified.
3	D26012	Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.		Qualified.

167 **172 M/s. BRIYOSIS SOFT CAPS PVT. LTD. ,Vadodara (Gujrat)**

1	D26017	Tab./Cap. Micronised Progesteron (Aluminium Foil/Blister pack)	200 mg		Qualified.
2	D30002	Cap. Vit A (Alluminium Foil /Blister Pack)	50,000 IU/Cap (Soft Gelatine Capsules)		Qualified.
3	D30007	Cap. Vit A.D (Therapeutic) (Aluminium foil/Blister pack)	Vit. A 5000 IU+Vit. D3 400 IU/Cap		Qualified.
4	D46003	Cap. Dutasteride (Aluminium foil/Blister pack)	0.5mg/Cap.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**173 M/s. CENTURION REMEDIES PVT. LTD. ,Vadodara (Gujrat)**

1	D05015	Tab. Prednisolone (Aluminium foil/Blister pack)	10 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
2	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
3	D07003	Tab. Carbamazepine (Controlled Release/Sustained Release/ Prolonged Release/ Extended Release) (Aluminium foil/Blister pack)	200 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
4	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
5	D07016	Tab. Clobazam (Aluminium foil/Blister pack)	5mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
6	D09176	Cap. Cefdinir (Aluminium foil/Blister pack)	300 mg/Cap		Qualified.
7	D11003	Cap. Rifampicin (Aluminium foil/ Blister pack)	450 mg/Cap	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
8	D11007	Tab. Ethambutol (Coated) (Aluminium Foil/Blister Pack)	400 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
9	D11026	Tab. Pyrazinamide (Coated) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
10	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
11	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
12	D14023	Tab. Anti-Malarial Combipack (Blister Pack) Infant less than 1 year	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 25mg) and one tablet of Sulphadoxine and Pyrimethamine (250mg + 12.5mg) Second Row (Day 2): one tablet of Artesunate 25mg Third Row (Day 3): one tablet of Artesunate 25mg.		Qualified.
13	D14024	Tab. Anti-Malarial Combipack (Blister Pack) Children 1 - 4 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 50mg) and one tablet of Sulphadoxine and Pyrimethamine (500mg + 25mg) Second Row (Day 2): one tablet of Artesunate 50mg Third Row (Day 3): one tablet of Artesunate 50mg.		Qualified.
14	D14025	Tab. Anti-Malarial Combipack (Blister Pack) Children 5 - 8 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 100mg) and one tablet of Sulphadoxine and Pyrimethamine (750mg + 37.5mg) Second Row (Day 2): one tablet of Artesunate 100mg Third Row (Day 3): one tablet of Artesunate 100mg.		Qualified.
15	D14026	Tab. Anti-Malarial Combipack (Blister Pack) Children 9 - 14 years	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 150mg) and two tablets of Sulphadoxine and Pyrimethamine (500mg + 25mg) each Second Row (Day 2): one tablet of Artesunate 150mg Third Row (Day 3): one tablet of Artesunate 150mg.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
16	D14035 Tab. Primaquin Phosphate (coated) (Aluminium foil/ Blister pack)	2.5mg/Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
17	D16022 Tab. Deferasirox (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
18	D17007 Tab. Metoprolol Tartarate ER (Aluminium Foil/Blister Pack)	50 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
19	D17042 Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
20	D17049 Tab. Enalapril Maleate (Aluminium foil/Blister pack)	5 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
21	D18035 Tab. Entecavir (Aluminium foil/Blister pack)	0.5mg/Tab.		Qualified.
22	D18051 Azelaic Acid Ointment	10 % w/w		Qualified.
23	D20001 Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
24	D20005 Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
25	D20012 Tab. Torsemide (Aluminium foil/Blister pack)	10 mg/Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
26	D21037 Tab. Promethazine (Aluminium foil/Blister pack)	25 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
27	D22016 Tab. Voglibose (Aluminium foil/Blister pack)	0.2 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
28	D22047 Tab. Pioglitazone (Aluminium foil/Blister pack)	15mg / Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
29	D22051 Tab. Tenecligiptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
30	D22051 Tab. Tenecligiptin (Aluminium foil/Blister pack)	20mg / Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
31	D26007 Tab. Misoprostol (Aluminium foil/Blister pack)	200mcg/ Tab		Qualified.
32	D26012 Tab. Mifepristone (Aluminium Foil/Blister pack)	200mg/Tab.		Qualified.
33	D27013 Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
34	D27015 Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
35	D27031 Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
36	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
37	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
38	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
39	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
40	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
41	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
42	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
43	D30006 Tab. Vitamin C (Aluminium foil/Blister pack)	100 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
44	D30016 Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
45	D30026 Tab. Pyridoxine(Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
46	D30035 Tab. Vit. D3 (Aluminium foil/Blister pack)	60,000 IU / Tablet	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
47	D30043 Drop Vit. D3 (Cholecalciferol)	400 IU/ml		Qualified.
48	D33185 Syp. Cyclosporine	100 mg/ml		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
49	D38013 Tab. Anti-Malarial Combipack (Blister Pack) (Adults 15 year and above)	(Day 1): One tablet of Artesunate (i.e. 1 tablet of 200mg) and two tablets of Sulphadoxine and Pyrimethamine (750mg + 37.5mg) each Second Row (Day 2): one tablet of Artesunate 200mg Third Row (Day 3): one tablet of Artesunate 200mg		Qualified.
50	D44004 Tab. Tenofovir Disoproxil Fumarate	300 mg/Tab		Qualified.
51	D45004 Tab. Sirolimus (Aluminium foil/Blister pack)	0.5 mg/Tab		Qualified.
52	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
53	D46005 Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.	No EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
54	D46015 Cap./Tab. Everolimus	0.25 mg/(Cap./Tab.)		Qualified.

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**174 M/s. GALPHA LABORATORIES LIMITED ,Mumbai (Maharashtra)**

1	D09060 Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
2	D09113 Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg		Qualified.
3	D16011 Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid		Qualified.
4	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)		Qualified.
5	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
6	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.

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**175 M/s. HIND PHARMA ,Bhopal (MP)**

1	D31015 Tab. Halazone for solution	4 mg/Tab	No WHO GMP certificate as per clause No. 5.2.2. & Financial Statement not submitted.	Not Qualified.
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SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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171 **176 M/s. AGOG PHARMA LTD. ,Palghar(Maharashtra)**

1	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
3	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
4	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Blacklisted by OSMCL up to 01/03/2024.	Not Qualified
5	D09100	Tab./ Cap. Nitrofurantoin (Aluminium foil/ Blister pack)	100mg /Tab./Cap.		Qualified.
6	D09134	Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
7	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
8	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
9	D14004	Tab. Quinine Sulphate (Coated) (Aluminium foil/ Blister pack)	300 mg/Tab		Qualified.
10	D16002	Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
11	D17006	Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
12	D17015	Tab. Amlodipine Besylate (Alluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
13	D18003	Silver Sulphadiazine Cream	1% w/w		Qualified.
14	D18020	Cream Silver Sulphadiazine	1% w/w		Qualified.
15	D18027	Cream Clotrimazole	1% w/w		Qualified.
16	D20001	Tab. Frusemide (Aluminium Foil/ Blister pack)	40 mg/Tab		Qualified.
17	D20005	Tab. Spiranolactone (Aluminium Foil/ Blister Pack)	25 mg/tab	Blacklisted by OSMCL up to 01/03/2024.	Not Qualified
18	D27006	Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
19	D27043	Tab. Lithium Carbonate(Aluminium foil/ Blister pack)	300 mg / Tab		Qualified.
20	D30006	Tab. Vitamin C (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
21	D30015	Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc		Qualified.
22	D30016	Tab. Vitamin C (Chewable) (Aluminium foil/Blister pack)	500 mg/Tab		Qualified.
23	D33183	Tab. Hydroxy Chloroquine(Aluminium foil/Blister pack)	200 mg/ Tab		Qualified.

172 **177 M/s. ABBOTT INDIA LIMITED ,Mumbai (Maharashtra)**

1	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D49002	Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
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**178 M/s. PUNISKA INJECTABLES PVT. LTD. ,Ahmedabad**

1	D29001 I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.
2	D29002 I.V Dextrose and Sodium Chloride (DNS)	5% w/v Dextrose, 0.9% w/v Sodium Chloride (FFS Plastic Container)		Qualified.
3	D29003 I.V Compound Sodium Lactate (RingerS Lactate) RL	Lactic Acid-0.24w/v equivalent to 0.32% w/v of sodium lactate sodium chloride-0.6% w/v, potassium chloride-0.04% w/v, calcium chloride-0.027% w/v (FFS Plastic Container)		Qualified.
4	D29004 I.V Dextrose 5% (5D)	5% w/v (FFS Plastic Container)		Qualified.
5	D29005 I.V Dextrose 10% (10D)	10% w/v (FFS Plastic Container)		Qualified.
6	D29009 Multi Electrolyte AND Dextrose Inj. Type 1 IP (Paediatric Maintenance Solution Type 1)	Each 100ml contains Dextrose Anhydrous 5gm, Potassium Chloride 0.130 gm, Sodium Acetate 0.320gm, Diabasic Potassium Phosphate 0.026gm, Magnesium Chloride 0.031gm. (FFS Plastic Container)		Qualified.
7	D29012 I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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179 M/s. TALENT HEALTHCARE ,Ahmedabad(Gujarat)

1	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB	Qualified.
2	D05023	Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial	Qualified.
3	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab	Qualified.
4	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Qualified.
5	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab	Qualified.
6	D07005	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)	Qualified.
7	D07022	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)	Qualified.
8	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	Qualified.
9	D09012	Tab. Amoxicillin Trihydrate(Dispersible) (Aluminium Foil/ Blister Pack)	Equivalent to 250 mg/Tab of Amoxicillin (Dispersible Tablet)	Qualified.
10	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Qualified.
11	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
12	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml	Qualified.
13	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab	Qualified.
14	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial	Qualified.
15	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab	Qualified.
16	D09093	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial	Qualified.
17	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial	Qualified.
18	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.	Qualified.
19	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored	Qualified.
20	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.	Qualified.
21	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored	Qualified.
22	D09135	Susp. Linezolid (Palatable, plastic container as per I.P with Dropper)	100mg/5ml	Qualified.
23	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm	Qualified.
24	D09137	Tab. Moxifloxacin(Aluminium foil/Blister pack)	400mg / Tab.Scored	Qualified.
25	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	Qualified.
26	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
27	D09173 Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml		Qualified.
28	D09175 Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial	No Mfg. License, No WHO GMP certificate & No Market Standing as per clause No. 5.2.1., 5.2.2. & 5.2.9. respectively	Not Qualified.
29	D09176 Cap. Cefdinir (Aluminium foil/Blister pack)	300 mg/Cap		Qualified.
30	D12004 Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
31	D12008 Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
32	D12015 Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
33	D12025 Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
34	D13008 Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab		Qualified.
35	D14018 Inj. Artesunate	60 mg/Vial (with Sodium Bi-carbonate 1 ml+5ml NaCl)		Qualified.
36	D16002 Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.
37	D16013 Tab. Tranexamic Acid (Aluminium foil/Blister pack)	500mg/Tab.		Qualified.
38	D17007 Tab. Metoprolol Tartarate ER (Aluminium Foil/Blister Pack)	50 mg/Tab		Qualified.
39	D17008 Tab. Propranolol	40 mg/Tab		Qualified.
40	D17015 Tab. Amlodipine Besylate (Aluminium Foil/ Blister Pack)	5 mg/Tab		Qualified.
41	D17032 Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
42	D17037 Tab. Metoprolol Tartarate (Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
43	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
44	D17051 Tab. Losartan Potassium (Aluminium foil/Blister pack)	50 mg/Tab		Qualified.
45	D17065 Tab. Ivabradine (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
46	D17071 Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
47	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
48	D21018 Tab. Pantoprazole Gastro resistant (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
49	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
50	D21026 Tab. Rabeprazole (Entric coated) (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
51	D21052 Cap. Racecadotril (Aluminium foil/Blister pack)	100mg / Cap.		Qualified.
52	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
53	D22051 Tab. Teneligliptin (Aluminium foil/Blister pack)	20mg / Tab.		Qualified.
54	D26045 Tab. Isoxsuprine SR (Aluminium foil/Blister pack)	40 mg/Tab (Sustended Release Tablet)		Qualified.
55	D27013 Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab		Qualified.
56	D27014 Tab. Clonazepam (Aluminium foil/ Blister pack)	2 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
57	D27015 Tab. Resperidone (Aluminium Foil/ Blister pack)	2 mg/Tab		Qualified.
58	D27017 Tab. Fluoxetine (Aluminium foil/ Blister pack)	20mg/ Tab		Qualified.
59	D27028 Tab. Amitriptyline + Chlordiazepoxide (Aluminium foil/Blister pack)	Amitriptyline 25 mg + Chlordiazepoxide 10 mg / Tab		Qualified.
60	D27031 Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab		Qualified.
61	D27034 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	250 mg / Tab		Qualified.
62	D27035 Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	500 mg / Tab		Qualified.
63	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
64	D27046 Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
65	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
66	D27056 Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab		Qualified.
67	D27068 Tab. Donepezil(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
68	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
69	D27094 Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab		Qualified.
70	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
71	D27124 Tab. Fluvoxamine (Aluminium Foil/Blister pack)	100mg / Tab.		Qualified.
72	D30045 Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.		Qualified.
73	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
74	D46004 Tab. Flavoxate Hydrochloride (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
75	D46005 Cap./Tab. Tamsulosin (Aluminium foil/Blister pack)	0.4mg/Cap./Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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175

180 M/s. INTEGRATED LABORATORIES PVT. LTD. ,Sirmour (HP)

1	D02003 Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml		Qualified.
2	D05001 Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)		Qualified.
3	D09009 Inj. Gentamycin Sulphate	Equiv. to Gentamicin 40 mg/ml		Qualified.
4	D09019 Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin	Less EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
5	D09093 Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial		Qualified.
6	D09099 Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
7	D16007 Inj. Ethamsylate	125 mg/ml		Qualified.
8	D16012 Inj. Tranexamic Acid	500mg/5ml		Qualified.
9	D25034 Moxifloxacin Eye Drop	0.5% w/v		Qualified.
10	D25045 Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)		Qualified.
11	D25050 Xylometazoline Nasal Drop	0.05% w/v (FFS / BFS Plastic Container)		Qualified.
12	D25056 Carboxymethyl Cellulose Eye drop	0.5% w/v		Qualified.
13	D29015 Saline Nasal Drop	0.65 % w/v (FFS / BFS Plastic Container)		Qualified.
14	D30025 Inj. Methylcobalamine	1500 mcg / Amp.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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176

181 M/s. GNOSIS PHARMACEUTICALS PVT. LTD. ,New Delhi

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D05024	Tab. Methylprednisolone(Aluminium foil/Blister pack)	8mg/Tab		Qualified.
3	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.		Qualified.
4	D07005	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)		Qualified.
5	D07022	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)		Qualified.
6	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab		Qualified.
7	D07028	Oral solution or Syp. Levetiracetam (Palatable, with measuring cap and plastic container as per I.P)	100 mg/ 1ml		Qualified.
8	D09060	Susp. Amoxicillin (Palatable, with measuring cap and plastic container as per I.P)	125 mg / 5ml		Qualified.
9	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
10	D09091	Tab. Cefixime (Disp.Tab./Film Coated) (Aluminium Foil/Blister pack)	200mg/Tab		Qualified.
11	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
12	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg		Qualified.
13	D09122	Tab. Linezolid(Aluminium foil/Blister pack)	600mg / Tab.		Qualified.
14	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.		Qualified.
15	D09133	Tab. Clarithromycin(Aluminium foil/Blister pack)	500mg / Tab.Scored		Qualified.
16	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB		Qualified.
17	D09165	Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavulanic Acid (57 mg)/ 5ml		Qualified.
18	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
19	D09173	Syp. Or suspension Cefpodoxime (Dry) (Palatable, with measuring cap and plastic container as per I.P)	100mg / 5ml		Qualified.
20	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
21	D12015	Tab. Terbinafine (Aluminium foil/ Blister pack)	250mg/Tab.		Qualified.
22	D12020	Cream Terbinafine	1% w/w		Qualified.
23	D12025	Tab./Cap. Itraconazole (Aluminium foil/Blister pack)	200 mg/(Cap./Tab.)		Qualified.
24	D12027	Lotion Ketoconazole	2% w/v		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
25	D17048 Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
26	D17053 Tab. Ramipril (Aluminium foil/Blister pack)	5mg/Tab		Qualified.
27	D17081 Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
28	D18011 Lotion Permethrin (Plastic Container as per IP)	5%w/v		Qualified.
29	D18027 Cream Clotrimazole	1% w/w		Qualified.
30	D18028 Clindamycin Cream or gel	1% w/w		Qualified.
31	D18029 Clobetasol Propionate Ointment or Cream	0.05% w/w		Qualified.
32	D18032 Mupirocin Ointment	2 % w/w		Qualified.
33	D18046 Fusidic Acid Cream	0.02 w/w		Qualified.
34	D21021 Susp. Sucralfate (Palatable, with measuring cap and plastic container as per I.P)	1gm/10ml		Qualified.
35	D21024 Tab. Ondansetron (Dispersible Tablet) (Aluminium foil/Blister pack)	4mg / Tab.		Qualified.
36	D21031 Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab		Qualified.
37	D21035 Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.
38	D21050 Tab. Esomeprazole (Aluminium foil/Blister pack)	20mg / Tab. (Enteric Coated)		Qualified.
39	D27037 Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab		Qualified.
40	D27043 Tab. Lithium Carbonate(Aluminium foil/ Blister pack)	300 mg / Tab		Qualified.
41	D27049 Tab. Oxcarbazepine(Aluminium foil/Blister pack)	300 mg / Tab		Qualified.
42	D27068 Tab. Donepezil(Aluminium foil/ Blister pack)	5 mg / Tab		Qualified.
43	D27075 Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.		Qualified.
44	D27100 Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab		Qualified.
45	D27121 Tab. Quetiapine SR (Aluminium foil/Blister pack)	100 mg / Tab		Qualified.
46	D27124 Tab. Fluvoxamine (Aluminium Foil/Blister pack)	100mg / Tab.		Qualified.
47	D40008 Tab. Rifaximin (Aluminium foil/Blister pack)	400 mg/Tab.		Qualified.
48	D43002 Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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177 **182 M/s. OSCAR REMEDIES PVT. LTD. ,Yamuna Nagar(Haryana)**

1	D09093	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 250mg / vial	Less Turnover Rs. 15 Crores as per clause No. 5.2.5.	Not Qualified.
2	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial	Less Turnover Rs. 15 Crores as per clause No. 5.2.5.	Not Qualified.
3	D09099	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial	Less Turnover Rs. 15 Crores as per clause No. 5.2.5.	Not Qualified.
4	D09112	Inj. Amoxicillin + Clavulanic acid (1.2gm) (with diluents in plastic container)	Amoxicillin 1gm + Clavulanic Acid 200mg / Vial		Qualified.
5	D09119	Inj. Ceftazidime(with diluents in plastic container)	1gm/vial	Less Turnover Rs. 15 Crores as per clause No. 5.2.5.	Not Qualified.
6	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm	Less Turnover Rs. 15 Crores as per clause No. 5.2.5.	Not Qualified.
7	D09162	Inj. Ampicillin + Cloxacilline (with diluents in plastic container)	Ampicillin 250 mg + Cloxacilline 250 mg / Vial		Qualified.
8	D09175	Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.

178 **183 M/s. HALEWOOD LABORATORIES PVT. LTD. ,Ahmedabad**

1	D16046	Glucose for Screening of GDM	75 gm per Packet Box with hermetically sealed in high-density polyethylene (HDPE) inner lining.		Qualified.
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179 **184 M/s. BIOCON BIOLOGICS LTD. ,Bangalore**

1	D22002	Inj. Human Soluble Insulin	40 IU/ml		Qualified.
2	D22012	Inj. Human Premixed Insulin (30/70)	40 units/ml (Biphasic, 30/70)		Qualified.
3	D22052	Inj. Insulin (NPH intermediate acting)	40 IU/ml		Qualified.
4	D22057	Insulin Glargine	100 IU/ ml, 3 ml prefilled pen	Invalid WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

180 **185 M/s. RK LABORATORIES PVT. LTD. ,Solan (HP)**

1	D04033	Inj. Paracetamol I.V	1000 mg/ 100ml		Qualified.
2	D09121	Inj. Linezolid I.V	600mg/300ml		Qualified.
3	D20004	Inj. Mannitol (Mannitol Intravenous Infusion)	20% w/v (FFS Plastic container)		Qualified.
4	D25034	Moxifloxacin Eye Drop	0.5% w/v		Qualified.
5	D25045	Xylometazoline Hydrochloride Nasal Drop	0.1% w/v (FFS / BFS Plastic Container)		Qualified.
6	D25050	Xylometazoline Nasal Drop	0.05% w/v (FFS / BFS Plastic Container)		Qualified.
7	D25056	Carboxymethyl Cellulose Eye drop	0.5% w/v		Qualified.
8	D29009	Multi Electrolyte AND Dextrose Inj. Type 1 IP (Paediatric Maintenance Solution Type 1)	Each 100ml contains Dextrose Anhydrous 5gm, Potassium Chloride 0.130 gm, Sodium Acetate 0.320gm, Diabasic Potassium Phosphate 0.026gm, Magnesium Chloride 0.031gm. (FFS Plastic Container)		Qualified.
9	D29015	Saline Nasal Drop	0.65 % w/v (FFS / BFS Plastic Container)		Qualified.

Sl No.	Name of the Item	Specification	Reason for Rejection	Remarks
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181 **186 M/s. BROOKS LABORATORIES LTD. ,Baddi(HP)**

1	D01007	Inj. Midazolam	1 mg/ml		Qualified.
2	D04021	Inj. Tramadol HCl	50 mg/ml		Qualified.
3	D05023	Inj. Methylprednisolone(with diluents in plastic container)	40mg/Vial		Qualified.
4	D06004	Inj. Acetylcysteine	200mg/ml		Qualified.
5	D07007	Inj. Phenytoin Sodium	50 mg/ml		Qualified.
6	D09106	Inj. Vancomycin(with diluents in plastic container)	500 mg/Vial		Qualified.
7	D09172	Inj. Clindamycin	300mg/(Vial/Amp)		Qualified.
8	D16007	Inj. Ethamsylate	125 mg/ml		Qualified.
9	D17013	Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
10	D17040	Inj. Dobutamine HCl	50mg / ml		Qualified.
11	D18034	Inj. Acyclovir (with diluents in plastic container)	250mg/vial		Qualified.
12	D21036	Inj. Drotaverine	20 mg/ml		Qualified.
13	D21042	Inj. Octreotide	50mcg / ml		Qualified.
14	D25073	Gatifloxacin Eye drop	0.3 % w/v; 5ml vial		Qualified.

182 **187 M/s. MERIL DIAGNOSTIC PVT. LTD. ,Mumbai (Maharashtra)**

1	S02110	Bivalent Rapid Diagnostic Test Kit	As per tender specification	Performance Certificate from end user less than 5 Years.	Not Qualified.
2	S02111	NS1 Elisa Kit For Dengue Test	As per tender specification		Qualified.
3	S02113	Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION		Qualified.
4	S02394	Dual HIV & Syphilis Rapid Diagnosis Test Kits	AS PER TENDER SPECIFICATION		Qualified.

183 **188 M/s. BABU RAM OM PRAKASH ,Mumbai**

1	D18007	Povidone Iodine Solution (Plastic container as per I.P)	5% w/v	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.
2	D18024	Povidone Iodine Oint.	5 % w/w	No WHO GMP certificate as per clause No. 5.2.2.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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184 **189 M/s. MSN LABORATORIES PVT. LTD. ,Hyderabad**

1	D17007	Tab. Metoprolol Tartarate ER (Alluminium Foil/Blister Pack)	50 mg/Tab		Qualified.
2	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
3	D17048	Tab. Clopidogrel (Aluminium foil/Blister pack)	75 mg/Tab		Qualified.
4	D17071	Tab. Rosuvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
5	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab		Qualified.
6	D17088	Tab. Ambrisentan (Aluminium foil/Blister pack)	5mg/Tab.		Qualified.
7	D17089	Tab. Tolvaptan (Aluminium foil/Blister pack)	15 mg/Tab.		Qualified.
8	D22026	Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab	No Market Standing as per clause No. 5.2.9.	Not Qualified.
9	D22039	Tab. Dapagliflozin (Aluminium foil/Blister pack)	10mg/Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
10	D22050	Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
11	D31052	Tab. Tadalafil (Aluminium foil/Blister pack)	20 mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
12	D43002	Tab. Febuxostat (Aluminium foil/Blister pack)	40mg/Tab.		Qualified.
13	D43003	Tab. Tofacitinib (Aluminium foil/Blister pack)	5mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.

185 **190 M/s. INDASI LIFESCIENCE PVT. LTD. ,Daman (UT)**

1	D05029	Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
2	D09141	Inj. Teicoplanin (with diluents in plastic container)	400mg/vial		Qualified.
3	D09160	Inj. Tigecycline (with diluents in plastic container)	50mg/vial		Qualified.
4	D12026	Inj. Caspofungin (with 10ml diluents in plastic container)	50 mg/Vial		Qualified.
5	D18034	Inj. Acyclovir (with diluents in plastic container)	250mg/vial	No Market Standing as per clause No. 5.2.9.	Not Qualified.

186 **191 M/s. PHYTO PHARMACEUTICALS PVT. LTD. ,Cuttack (Odisha)**

1	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
2	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.

187 **192 M/s. RUSAN PHARMA LTD ,Mumbai (Maharashtra)**

1	D01007	Inj. Midazolam	1 mg/ml		Qualified.
2	D02008	Inj. Bupivacaine (Heavy)	Bupivacaine 5mg/ml + Dextrose 80mg / ml		Qualified.
3	D04011	Inj. Morphine Sulphate	10 mg/ml		Qualified.
4	D04021	Inj. Tramadol HCl	50 mg/ml		Qualified.
5	D04046	Inj. Fentanyl Citrate	50 mcg/ml		Qualified.
6	D04047	Tab. Morphine Sulphate	10 mg/Tab.		Qualified.
7	D05025	Inj. Noradrenaline	1mg/ml		Qualified.
8	D33202	Tab. Morphine Sulphate (Aluminium foil/Blister pack)	30 mg/Tab.		Qualified.
9	D33203	Tab. Morphine Sulphate CR (Aluminium foil/Blister pack)	30 mg/Tab.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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188

193 M/s. SHIVALIK REMEDIES PVT. LTD. ,Haridwar

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04032	Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
3	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
4	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
5	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
6	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
7	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
8	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
9	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
10	D09124	Tab. Levofloxacin(Aluminium foil/Blister pack)	500mg / Tab. Scored		Qualified.
11	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
12	D16011	Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid		Qualified.
13	D16027	Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
14	D17032	Tab. Telmisartan (Aluminium foil/ Blister pack)	40mg/Tab.		Qualified.
15	D28011	Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
16	D30001	Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
17	D30022	Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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189                      **194 M/s. WELCURE REMEDIES ,Sirmour(HP)**

1	D09113	Tab/Cap. Amoxicillin and Clavulanic Acid (Aluminium foil/Blister pack)	Amoxicillin 500 mg + Clavulanic acid 125mg	Qualified.
2	D09126	Tab. Cefpodoxime (Aluminium foil/Blister pack)	200mg / Tab.	Qualified.
3	D09150	Tab. Cefuroxime Axetil (Aluminium foil/Blister pack)	500 mg/TAB	Qualified.
4	D09165	Syp. Or suspension Amoxicillin + Clavulanic (Palatable, with measuring cap and plastic container as per I.P)	Amoxicillin 400 mg + Clavulanic Acid (57 mg)/ 5ml	Qualified.
5	D09170	Syp. Or suspension Cefixime (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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190

**195 M/s. GENTECH HEALTHCARE PVT. LTD. ,Sonepat (HR)**

1	D05033	Tab. Deflazacort (Aluminium foil/Blister pack)	6mg / Tab.	Qualified.
2	D07004	Tab. Phenytoin Sodium(Aluminium foil/Blister pack)	100 mg/Tab	Qualified.
3	D07005	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/Blister pack)	200 mg/Tab (Controlled Release)	Qualified.
4	D07016	Tab. Clobazam (Aluminium foil/Blister pack)	5mg/Tab	Qualified.
5	D07022	Tab. Sodium Valproate (Controlled Release) (Aluminium foil/ Blister pack)	500 mg/Tab(Controlled Release)	Qualified.
6	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	Qualified.
7	D21031	Tab. Levosulpiride(Aluminium foil/Blister pack)	25 mg/Tab	Qualified.
8	D27006	Tab. Haloperidol (Aluminium foil/ Blister pack)	5 mg/Tab	Qualified.
9	D27013	Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab	Qualified.
10	D27015	Tab. Risperidone (Aluminium Foil/ Blister pack)	2 mg/Tab	Qualified.
11	D27017	Tab. Fluoxetine (Aluminium foil/ Blister pack)	20mg/ Tab	Qualified.
12	D27031	Tab. Clozapine(Aluminium foil/ Blister pack)	100 mg / Tab	Qualified.
13	D27034	Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	250 mg / Tab	Qualified.
14	D27037	Tab. Escitalopram(Aluminium foil/ Blister pack)	10 mg / Tab	Qualified.
15	D27046	Tab. Olanzapine(Aluminium foil/ Blister pack)	5 mg / Tab	Qualified.
16	D27056	Tab. Sertraline(Aluminium foil/ Blister pack)	50 mg / Tab	Qualified.
17	D27068	Tab. Donepezil(Aluminium foil/ Blister pack)	5 mg / Tab	Qualified.
18	D27075	Tab. Baclofen(Aluminium foil/Blister pack)	10 mg /Tab.	Qualified.
19	D27094	Tab. Trihexyphenidyl (Aluminium foil/ Blister pack)	2mg/Tab	Qualified.
20	D27100	Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab	Qualified.
21	D27104	Tab. Nitrazepam(Aluminium foil/Blister pack)	5 mg / Tab	Qualified.
22	D27117	Tab. Zolpidem (Aluminium foil/Blister pack)	5 mg/Tab	Qualified.
23	D27119	Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg	Qualified.
24	D27124	Tab. Fluvoxamine (Aluminium Foil/Blister pack)	100mg / Tab.	Qualified.
25	D30045	Tab. Gabapentin (Aluminium foil/Blister pack)	100mg/Tab.	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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191 **196 M/s. BRILLIANT LIFESCIENCES PVT. LTD. ,Ahmedabad (Gujarat)**

1	D07026	Tab. Levetiracetam (Aluminium foil/Blister pack)	500 mg/ Scored Tab	Qualified.
2	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
3	D12007	Tab Fluconazole (Dispersible Tab.) (Aluminium foil/ Blister pack)	50 mg/Tab	Qualified.
4	D17008	Tab. Propranolol	40 mg/Tab	Qualified.
5	D21050	Tab. Esomeprazole (Aluminium foil/Blister pack)	20mg / Tab. (Enteric Coated)	Qualified.
6	D27013	Tab. Lorazepam (Aluminium foil/ Blister pack)	2 mg/Tab	Qualified.
7	D27014	Tab. Clonazepam (Aluminium foil/ Blister pack)	2 mg/Tab	Qualified.
8	D27035	Tab. Divalproex Sodium Gastro Resistant/Enteric Coated / Prolonged Release/sustained Release/ Extended Release/Controlled Release Tablets (Aluminium foill/ Blister pack)	500 mg / Tab	Qualified.
9	D27100	Tab. Amisulpride (Aluminium foil/Blister pack)	100 mg/Tab	Qualified.
10	D27119	Tab./Cap. Pregabalin (Aluminium foil/Blister pack)	75 mg	Qualified.

192 **197 M/s. OLCARE LABORATORIES ,Surendranagar (Gujrat)**

1	D17042	Tab. Labetalol (Aluminium foil/Blister pack)	100mg/Tab.	Financial Statement not submitted for the year 2021-22 as per clause No. 5.2.5 and also Declaration format not submitted in T5 as per clause No.5.2.13 .	Not Qualified.
2	D22015	Tab. Levo Thyroxine Sodium	25 mcg/Tab	Financial Statement not submitted for the year 2021-22 as per clause No. 5.2.5 and also Declaration format not submitted in T5 as per clause No.5.2.13 .	Not Qualified.

193 **198 M/s. PHAROSE REMEDIES LTD. ,Samba (J&K)**

1	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
2	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab	Qualified.
3	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab	Qualified.
4	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab	Qualified.
5	D17006	Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab	Qualified.
6	D17081	Tab. Atorvastatin (Aluminium foil/Blister pack)	10 mg/Tab	Qualified.
7	D21011	Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab	Qualified.
8	D22014	Tab. Glimepiride (Aluminium foil/Blister pack)	2 mg/Tab	Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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194 **200 M/s. BAL PHARMA LIMITED ,Banglore (Karnataka)**

1	D12004	Tab. Ketoconazole (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
2	D22013	Tab. Gliclazide (Aluminium foil/Blister pack)	40 mg/Tab		Qualified.
3	D22050	Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.
4	D22051	Tab. Teneeligliptin (Aluminium foil/Blister pack)	20mg / Tab.	No Market Standing as per clause No. 5.2.9.	Not Qualified.

195 **201 M/s. SWISS PARENTERALS LTD. ,Ahmedabad**

1	D02003	Inj. Lignocaine HCl and Adrenaline Bitartrate	Lignocaine HCl - 21.3 mg / ml + Adrenaline 0.005 mg / ml		Qualified.
2	D02008	Inj. Bupivacaine (Heavy)	Bupivacaine 5mg/ml + Dextrose 80mg / ml	Blacklisted by MPPHSCL up to 09/08/2023.	Not Qualified.
3	D03001	Inj. Atropine Sulphate	0.6 mg/ml		Qualified.
4	D04021	Inj. Tramadol HCl	50 mg/ml		Qualified.
5	D05001	Inj. Dexamethasone Sodium Phosphate	4 mg/ml (4.4 mg of Dexamethasone sodium phosphate is equivalent to 4 mg. of Dexamethasone Phosphate)		Qualified.
6	D05002	Inj. Hydrocortisone Sodium Succinate (with diluents in plastic container)	100 mg/Vial		Qualified.
7	D05029	Inj. Methylprednisolone Sodium Succinate (with diluents in plastic container)	1gm/Vial		Qualified.
8	D07007	Inj. Phenytoin Sodium	50 mg/ml		Qualified.
9	D09019	Inj. Amikacin Sulphate	500 mg/2ml equivalent of Amikacin		Qualified.
10	D09046	Inj. Amikacin Sulphate	100 mg/2ml equivalent of Amikacin		Qualified.
11	D09087	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 4gm + Tazobactam 500mg/vial		Qualified.
12	D09094	Inj. Ceftriaxone (with diluents in plastic container)	Equiv. to Ceftriaxone 1gm / vial		Qualified.
13	D09099	Inj. Piperacillin + Tazobactam (with diluents in plastic container as per I.P)	Piperacillin 1gm + Tazobactam 125mg/vial		Qualified.
14	D09136	Inj. Meropenem (with 10ml diluents in plastic container)	1gm		Qualified.
15	D09175	Inj. Cefoperazone & Sulbactam (with 10ml diluents in plastic container)	1000mg Cefoperazone + 1000mg Sulbactam / vial		Qualified.
16	D16007	Inj. Ethamsylate	125 mg/ml		Qualified.
17	D16012	Inj. Tranexamic Acid	500mg/5ml		Qualified.
18	D17013	Inj. Dopamine HCl (Intravenous Infusion)	40 mg/ml		Qualified.
19	D21030	Inj. Pantoprazole (with diluents in plastic container)	40 mg/vial		Qualified.
20	D21036	Inj. Drotaverine	20 mg/ml		Qualified.
21	D26001	Inj. Methylergometrine Maleate	0.2 MG/ML		Qualified.
22	D26002	Inj. Oxytocin	5 IU/1ml		Qualified.



SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
196	<b>202 M/s. ALPINE BIOMEDICALS PVT. LTD. ,Ambala(Haryana)</b>			
1	S02110 Bivalent Rapid Diagnostic Test Kit	As per tender specification	Invalid Mfg. License & No WHO GMP certificate as per clause No. 5.2.1. & 5.2.2. Respectively.	Not Qualified.
2	S02113 Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION	No Compliance report in part A format of Bid.	Not Qualified.
197	<b>203 M/s. BHARTI MILK FOODS PVT. LTD. ,Karnal (Haryana)</b>			
1	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)	Less EMD Cost submitted as per clause no. 6.5.1.	Not Qualified.
198	<b>204 M/s. INFUNEX HEALTHCARE PVT. LTD. ,Kolkata (West Bengal)</b>			
1	D29001 I.V Sodium Chloride (Normal Saline)	0.9% w/v (FFS Plastic Container)	No EMD Cost submitted as per clause no. 6.5.1, 6.7.2 & 6.7.3.	Not Qualified.
2	D29002 I.V Dextrose and Sodium Chloride (DNS)	5% w/v Dextrose, 0.9% w/v Sodium Chloride (FFS Plastic Container)	No EMD Cost submitted as per clause no. 6.5.1, 6.7.2 & 6.7.3.	Not Qualified.
3	D29003 I.V Compound Sodium Lactate (RingerS Lactate) RL	Lactic Acid-0.24w/v equivalent to 0.32% w/v of sodium lactate sodium chloride-0.6% w/v, potassium chloride-0.04% w/v, calcium chloride-0.027% w/v (FFS Plastic Container)	No EMD Cost submitted as per clause no. 6.5.1, 6.7.2 & 6.7.3.	Not Qualified.
4	D29004 I.V Dextrose 5% (5D)	5% w/v (FFS Plastic Container)	No EMD Cost submitted as per clause no. 6.5.1, 6.7.2 & 6.7.3.	Not Qualified.
5	D29005 I.V Dextrose 10% (10D)	10% w/v (FFS Plastic Container)	No EMD Cost submitted as per clause no. 6.5.1, 6.7.2 & 6.7.3.	Not Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
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199 **205 M/s. BIOGENETIC DRUGS PVT. LTD. ,Jaipur**

1	D04003	Paracetamol Paediatric Syrup (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	125 mg/5 ml		Qualified.
2	D04005	Tab. Ibuprofen (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
3	D04025	Tab. Aceclofenac(Aluminium foil/ Blister pack)	100mg/Tab.		Qualified.
4	D04026	Paracetamol Drop (Palatable, with dropper and plastic container as per I.P)	100 mg/ 1 ml		Qualified.
5	D04032	Susp. Ibuprofen (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	100mg / 5ml		Qualified.
6	D05013	Tab. Fexofenadine HCl (Aluminium foil/Blister pack)	120 MG/TAB		Qualified.
7	D05016	Syp. Levocetirizine (Palatable, with measuring cap and plastic container as per I.P)	2.5mg/5ml		Qualified.
8	D05021	Tab. Levocetirizine Dihydrochloride(Aluminium foil/Blister pack)	5 mg/Tab		Qualified.
9	D08003	Susp. Albendazole (with measuring cap and palatable plastic container as per I.P)	200 mg/5ml		Qualified.
10	D08004	Tab. Albendazole IP (as per IP 2018 addendum 2019) (Aluminium foil/ Blister pack)	400 MG/TAB		Qualified.
11	D09003	Susp. Cotrimoxazole (Palatable, with measuring cap and plastic container as per I.P)	(Trimethoprim 40mg + Sulphamethoxazole 200mg)/5 ml		Qualified.
12	D09017	Tab. Norfloxacin (Aluminium Foil/ Blister Pack)	400 mg/Tab		Qualified.
13	D09020	Tab. Ciprofloxacin HCl (Aluminium Foil/Blister Pack)	500 mg/Tab		Qualified.
14	D09033	Tab. Ofloxacin (Scored) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
15	D09049	Tab. Ciprofloxacin HCl (Aluminium Foil/ Blister Pack)	250 mg/Tab		Qualified.
16	D09077	Tab. Azithromycin (Scored) (Aluminium Foil/Blister pack)	500 mg/Tab		Qualified.
17	D09095	Azithromycin Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottle as per I.P)	200mg / 5ml		Qualified.
18	D09134	Tab. Cotrimoxazole (Aluminium foil/Blister pack)	TMP 160mg + SMZ 800mg / Tab		Qualified.
19	D09138	Susp. Ofloxacin (Palatable, with measuring cap and plastic container as per I.P)	50mg / 5ml		Qualified.
20	D12008	Tab. Fluconazole (Aluminium Foil/Blister Pack)	150 mg/Tab		Qualified.
21	D13007	Metronidazole Oral Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	200 mg/5 ml(100 mg of Metronidazole Benzoate is equivalent of 62.5 mg of Metronidazole)		Qualified.
22	D13008	Tab. Ornidazole (Coated) (Aluminium foil/ Blister pack)	500 mg/Tab		Qualified.
23	D13009	Tab. Metronidazole (Coated) (Aluminium foil/Blister pack)	200 mg/Tab		Qualified.
24	D16002	Tab. Folic Acid (Aluminium foil/ Blister pack)	5 mg/Tab		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
25	D16011 Syp. Ferrous Sulphate + Folic Acid (Palatable with measuring cap, dropper and plastic container/ Glass Bottel as per I.P)	Each 5ml contains 100mg of Elemental Ferrous Iron and 0.5 mg of Folic Acid	Blacklisted by RMSCL up to 06/01/2024.	Not Qualified
26	D16027 Solution Disodium Hydrogen Citrate(Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	1.38 gm to 1.5gm / 5 ml		Qualified.
27	D16038 Tab. Ferrous Sulphate + Folic Acid(Enteric Coated, Red Colour) (Aluminium foil/Blister pack)	Equivalent to 100 mg of Elemental Iron + Folic Acid 0.5mg (500mcg) / Enteric Coated Tablet		Qualified.
28	D16045 Syp. Ferrous Sulphate + Folic Acid (Palatable with dropper and plastic container as per I.P, Auto-dispensing bottle)	Each 1ml contains 20mg of Elemental Iron and 0.1 mg (100mcg) of Folic Acid (Auto-dispensing bottle so that only 1ml can be dispensed at a time)	Blacklisted by RMSCL up to 06/01/2024.	Not Qualified
29	D17006 Tab. Atenolol (Alluminium Foil/ Blister Pack)	50 mg/Tab		Qualified.
30	D21002 Tab. Ranitidine (coated) (Aluminium foil/ Blister pack)	150 mg/Tab		Qualified.
31	D21010 Tab. Domperidone (Aluminium foil/ Blister pack)	10 mg/Tab		Qualified.
32	D21011 Tab. Dicyclomine HCl(Aluminium foil/ Blister pack)	20 mg/Tab		Qualified.
33	D21035 Susp./Gel Antacid (Palatable, with measuring cap and plastic container as per I.P)	(Magaldrate 400mg + Simethicone 20mg) / 5ml (Suitable Flavour)		Qualified.
34	D22026 Tab. Vildagliptin (Aluminium foil/Blister pack)	50mg/Tab		Qualified.
35	D22039 Tab. Dapagliflozin (Aluminium foil/Blister pack)	10mg/Tab.		Qualified.
36	D22050 Tab. Sitagliptin (Aluminium foil/Blister pack)	50mg / Tab.		Qualified.
37	D28011 Syp. Salbutamol Sulphate (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	2.41mg Salbutamol Sulphate equivalent to 2mg of Salbutamol / 5ml		Qualified.
38	D30001 Tab. Calcium and Vit. D3 (Aluminium foil/Blister pack)	500mg Elemental Calcium + Vitamin D3 250IU /Tab		Qualified.
39	D30012 Vitamin A Solution (Concentrated) (Orange Flavour, palatable with plastic container as per I.P, measuring spoon of 2ml with 1ml marking and measuring cap)	1,00,000 IU / 1ml		Qualified.
40	D30015 Tab. Zinc Acetate / Sulphate (Dispersible Tablets)	Equivalent to 20mg of Elemental Zinc		Qualified.
41	D30022 Calcium and Vit. D3 Suspension (Palatable, with measuring cap and plastic container/ Glass Bottel as per I.P)	Elemental Calcium 250 mg + Vitamin D3 125IU / 5 mL.		Qualified.
42	D30043 Drop Vit. D3 (Cholecalciferol)	400 IU/ml		Qualified.
43	D30044 Syp. Or Susp. Zinc Acetate / Zinc Sulphate (Palatable, with measuring cap and plastic container as per I.P)	Each 5ml contains 20mg of elemental zinc		Qualified.
44	D40008 Tab. Rifaximin (Aluminium foil/Blister pack)	400 mg/Tab.		Qualified.
45	D49002 Lactulose Solution (Palatable, with measuring cap and plastic container as per I.P)	10gm/15ml (3.335gm/5ml)		Qualified.

SI No.	Name of the Item	Specification	Reason for Rejection	Remarks
200	<b>206 M/s. SIDAK LIFE CARE PVT. LTD. ,Jhajjar(Haryana)</b>			
1	S02053 VDRL Rapid Test Kit, (RPR) Rapid Plasma Regime.	AS PER TENDER SPECIFICATION	Copy of Mfg. License not submitted, No EMD Cost submitted & No Market Standing as per clause no. 6.5.1. & 5.2.9. respectively.	Not Qualified.
2	S02110 Bivalent Rapid Diagnostic Test Kit	As per tender specification	Copy of Mfg. License not submitted & No Market Standing as per clause no. 5.2.9.	Not Qualified.
3	S02113 Whole Blood Finger Prick Test Kit	AS PER TENDER SPECIFICATION	No Mfg. License, No Market Standing & Non Conviction certificate not submitted as per clause no. 5.2.1., 5.2.9. & 5.2.10. respectively.	Not Qualified.
4	S02394 Dual HIV & Syphilis Rapid Diagnosis Test Kits	AS PER TENDER SPECIFICATION	No EMD Cost submitted, No Mfg. License, No Market Standing & Non Conviction certificate not submitted as per clause no. 6.5.1., 5.2.1., 5.2.9. & 5.2.10. respectively.	Not Qualified.

**Annexure -II****Provisional list of Rejected Bidders and not Considered for Evaluation for Drugs & Medical Consumables (Group - I) 2023 - 24.****Bid Reference No. : OSMCL/2023-24/DRUGS-DHS-GEN-GR-I/02**

<b>Sl No.</b>	<b>Tender Doc No.</b>	<b>Tenderer Name</b>	<b>Reason for Rejection</b>	<b>Remarks</b>
1	23	M/s. SUNRISE REMEDIES PVT. LTD. Block # 2244 Opp. Shah Alloys Ltd Tal: Kalol, At&Po: SANTEJ-382721 ,Gandhi Nagar (Gujarat) - 382721 Ph. +91-9218685028 Email. accounts@sunriseremedies.in	Bid Document Cost & EMD Cost not submitted as per clause no. 6.5, 6.6 & 6.7 respectively.	Not Qualified.
2	43	M/s. UNIBIOTECH FORMULATIONS Plot No. 76 J.L.P.L., Industrial Area Sector 82 ,Mohali (Punjab) - 140306 Ph. 0172-2244500 Email. ajay4104@yahoo.co.in, am.unibiotechformulations.in	Bid Document Cost & EMD Cost not submitted as per clause no. 6.5, 6.6 & 6.7 respectively.	Not Qualified.
3	127	M/s. MARTINS HEALTHCARE PVT. LTD. Plot No.10 Sector 5 Sidcul ,Haridwar(Uttarakhand) - 249403 Ph. 9810121951 Email. matinshealthcare@gmail.com	Bid Document Cost & EMD Cost not submitted as per clause no. 6.5, 6.6 & 6.7 respectively.	Not Qualified.
4	146	M/s. GANDHI AGENCIES 1st Floor, 589/F Binapani Kutira,Glass And Glass Lane Mahatab Road ,Cuttack(Odisha) - 753001	Bid Document Cost & EMD Cost not submitted as per clause no. 6.5, 6.6 & 6.7 respectively.	Not Qualified.
5	165	M/s. ULTRA DRUGS PRIVATE LIMITED Plot No.1315-1318, Village-Manpura Tehsil Nalagarh ,Solan (Himanchal) - 174101 Ph. 7876892767 Email. ultradrugs1988@gmail.com	Bid Document Cost & EMD Cost not submitted as per clause no. 6.5, 6.6 & 6.7 respectively.	Not Qualified.
6	199	M/s. TIRUMAL SALES AND SERVICES	Bid Document Cost & EMD Cost not submitted as per clause no. 6.5, 6.6 & 6.7 respectively.	Not Qualified.

**List of Item which are not Considered for Evaluation  
for Drugs & Medical Consumables (Group - I) 2023 - 24.**

**Bid Reference No. : OSMCL/2023-24/DRUGS-DHS-GEN-GR-I/02**

<b>Sl No.</b>	<b>Drug Code</b>	<b>Item SI No.</b>	<b>Name of the Item</b>	<b>Specification</b>	<b>Unit / Pack Size</b>	<b>Remarks</b>
1	D31014	507	Bleaching Powder	Not Less than 30% w/v available Chlorine	25 kg/Packet	Not considered for Evaluation as per DEPM Notification No. MSME-PFS-MISC-0018-2023-3116/MSME,BBSR Dt. 29/04/2023.
2	D31035	512	Bleaching Powder	Not Less than 30% w/v Available Chlorine	1 kg / Packet 10 Packs/Box	Not considered for Evaluation as per DEPM Notification No. MSME-PFS-MISC-0018-2023-3116/MSME,BBSR Dt. 29/04/2023.