PREQUALIFICATION DOCUMENTS

(DRUGS/ MEDICINES)

(PHARMACEUTICAL MANUFACTURING UNITS AND SOLE AGENTS OF FOREIGN PRINCIPALS)

(FINANCIAL YEAR 2024-2025)

Primary & Secondary Healthcare Department
Government of the Punjab

PURCHASE CELL
DIRECTORATE GENERAL HEALTH
SERVICES PUNJAB
24-COOPER ROAD, LAHORE

Primary & Secondary
Healthcare Department

Phone No. +924299201145 Purchase Cell E-mail- pcdghslahore@gmail.com

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INVITATION FOR PREQUALIFICATION
(FINANCIAL YEAR 2024-25)

1. Government of the Punjab is committed to procure and supply quality Drugs / Medicines to patients. Directorate General Health Services (DGHS) Punjab invited applications for prequalification of firms (Pharmaceutical Manufacturers and Sole Agents of Foreign Principals - more specifically described in the prequalification documents) concerning procurement & supply of Drugs/ Medicines items for Financial Year 2024-25. This prequalification shall also be applicable for various procuring agencies likely District Health Authorities (DHAs), Vertical Programs, Punjab Health Facilities Management Company (PHFMC) , Specialized Healthcare & Medical Education Department (SH&MED), Governor House Medical Center, Punjab Emergency Services Rescue 1122, Prison Hospital of Punjab etc. (detail of procuring agencies in documents) who assigned DGHS Punjab to conclude their prequalification process under rule 64-A of Punjab Procurement Rules (PPR), 2014.
2. A complete set of Prequalification Documents in English can be downloaded from the websites [www.ppra.punjab.gov.pk], [www.pshealthpunjab.gov.pk/[www.dghs.punjab.gov.pk]. Pre-application meeting is scheduled to be held on 23-01-2024 at 11:00 A.M in the committee room of this DGHS Punjab. The minutes of Pre-application meeting shall be construed as part of prequalification documents and same shall be uploaded on the official website of procuring agency on or before 26-01-2024. Any amendment shall be made as prescribed in PPR-2014.
3. The firms are required to submit prequalification documents online on following Department's link [http://pqod.pshealthpunjab.gov.pk] or official website of P&SHD. (http://www.pshealthpunjab.gov.pk] related to prequalification application. The last date and time for online submission of Pre-Qualification documents is 14-02-2024 till 11:00 A.M via department's online portal and the signed computerized print of the same online submitted Pre-Qualification documents in hard copy of prequalification application must reach The Purchase Cell, Directorate General Health Services Punjab, 24 Cooper Road, Lahore on 14-02-2024 till 11:00 A.M which shall be opened on the same date at 11:30 AM. In case of any discrepancy & conflict in submitted online prequalification application and hard copy of application, the prequalification application submitted in hard form will prevail.
4. The firms shall pay a non-refundable Prequalification Fee on Challan Form 32-A as mentioned in Pre-qualification documents.
5. Prequalified firm(s) shall be entitled to participate in the subsequent procurement proceedings as per requirement of the procuring agency(s).

In case the date of opening or last date of submission is declared as a public holiday or nonworking day due to any reason, the next official working day shall be deemed to be the date of submission and opening of applications accordingly. The time and venue shall remain the same.

Note: The process shall be governed by the Punjab Procurement Rules, 2014.

Director General Health Services Punjab
DIRECTORATE GENERAL HEALTH SERVICES PUNJAB
Primary & Secondary Healthcare Department,
Government of The Punjab
E-mail: pcdghslahore@gmail.com

IPL-519

Section I: Instructions to Applicants (ITA)

A. General

1. Scope of Application

1.1 In connection with the Invitation for Prequalification "as per PPR 2014" the Director General Health Services Punjab, Primary & Secondary Healthcare Department (P&SHD) Government of the Punjab, issues this Prequalification Document (PQD) to applicants interested to prequalify Pharmaceutical Manufacturing Units & Sole Agents of Foreign Principals for Drugs/Medicines against the list of items contained in the Prequalification Documents. This prequalification will be concluded for DGHS and shall also be applicable for various procuring agencies likely District Health Authorities (DHAs), Vertical Programs, Punjab Health Facilities Management Company (PHFMC) , Specialized Healthcare & Medical Education Department (SH&MED), Governor House Medical Center, Punjab Emergency Services Rescue 1122, Prison Hospital of Punjab etc. who assigned DGHS Punjab to conclude their prequalification process under rule 64-A of Punjab Procurement Rules (PPR), 2014.

Prequalification will be carried only for the items which comes under the definition of drugs under Drugs Act 1976/DRAP Act 2012/Punjab Drugs Rules 2007/ Punjab Drugs Amendment Act 2017 for Drug items & Medical Devices Rules 2017.

DGHS shall through their physical inspection committee(s)/inspector(s) shall verify the facts/claims submitted by the applicant(s). Any forged document(s)/claim(s) shall be dealt under PPR-2014.

2. Fraud and Corruption

2.1 Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab requires that applicant observe the highest standard of ethics during the submission of application for prequalification and further documents required for prequalification.

(a) In pursuance to this, the following terms are defined:

(i) "corrupt practice" is the offering, giving, receiving or soliciting, directly or indirectly, of anything of value to influence improperly the actions of another party;

(ii) "fraudulent practice" is any act or omission, including a misrepresentation, that knowingly or recklessly misleads, or attempts to mislead, a party to obtain a financial or other benefit or to avoid an obligation;

(iii) "collusive practice" is an arrangement between two or more parties designed to achieve an improper purpose, including to influence improperly the actions of another party;

(iv) "coercive practice" is impairing or harming, or threatening to impair or harm, directly or indirectly, any

party or the property of the party to influence improperly the actions of a party;

(v) "obstructive practice" is deliberately destroying, falsifying, altering or concealing of evidence material to the investigation or making false statements to investigators in order to materially impede a Bank investigation into allegations of a corrupt, fraudulent, coercive or collusive practice; and/or threatening, harassing or intimidating any party to prevent it from disclosing its knowledge of matters relevant to the investigation or from pursuing the investigation; or

(b) Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will reject a proposal for prequalification if it determines that the applicant has directly or through an agent, engaged in corrupt, fraudulent, collusive, coercive or obstructive practices in competing for the prequalification in question;

(c) Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will declare ineligible, either indefinitely or for a stated period of time, if it, at any time, determines that the firm has, directly or through an agent, engaged in corrupt, fraudulent, collusive, coercive or obstructive practices in competing for prequalification.

(d) The prequalified firms are required to participate in RFP/bidding process announced by Directorate General Health Services (DGHS) Punjab under administrative control of Primary & Secondary Healthcare Department. All prequalified firms shall participate in subsequent bidding process (RFP) of all the procuring agency(s) who assigned DGHS Punjab to conclude their prequalification process under rule 64-A of Punjab Procurement Rules (PPR), 2014. In case of non-participation, DGHS may suspend/cancel the prequalification status of Firm/Product at any stage as well as debar the firm for future procurement processes.

3. Eligible Applicants

3.1 Local manufacturer or Sole agent of foreign manufacturer can be a private or public entity registered with DRAP and FBR having NTN & SRTN Registration in its own name. Any authorized agent of Local manufacturer and authorized agent of Sole agent of foreign manufacturer shall be ineligible.

3.2 If Government of Pakistan prohibits commercial relations with any Country, the firms dealing with such countries are ineligible to apply.

3.3 A firm declared disqualified / blacklisted / debarred by Directorate General Health Services (DGHS) Punjab shall be ineligible for prequalification

B. Contents of the Prequalification Documents

4. Sections of Prequalification Documents

4.1 The documents for the prequalification of Applicants (hereinafter - "prequalification documents") consists of all the sections indicated below, and should be read in conjunction with any Addendum if issued.

Section I. Instructions to Applicants (ITA)
Section II. Prequalification criteria
Section III. A: Application Form
B: Application affidavit

4.2 The "Invitation for Prequalification Applications" (IPA) issued by the Procuring Agency is part of the prequalification documents.

4.3 Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab accepts no responsibility for the completeness of the prequalification documents and its addenda unless the original receipt of the fee deposit slip is attached with the documents.

4.4 The Applicant is expected to examine all instructions, forms, and terms in the Prequalification Documents and to furnish all information or documentation required by the Prequalification Documents.

5. Clarification of Prequalification Document

5.1 A prospective Applicant requiring any clarification of the Prequalification Documents shall contact the Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab in writing at the address indicated in the **Invitation for Pre-Qualification of Drugs/Medicines.** The Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will respond in writing to any request for clarification provided that such request is received preferably before submission of PQ application. The Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab shall forward copies of its response to all applicants who have acquired the prequalification documents through its official website including a description of the inquiry but without identifying its source. Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab deemed it necessary to amend the prequalification documents as a result of a clarification it shall do under intimation to all the applicants who have obtained the prequalification documents through its official website.

6. Amendment of Prequalification Document

6.1 At any time prior to the deadline for submission of applications, the Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab may amend the Prequalification Documents by issuing addenda/Corrigendum.

6.2 Any addendum/corrigendum/minutes of pre-application conference issued shall be part of the Prequalification Documents and shall be communicated in writing to all who have obtained the prequalification documents from the Primary & Secondary Healthcare Department. The minutes shall also be uploaded on the official websites of Director General Health Services Punjab and Primary & Secondary Healthcare Department Government of the Punjab

	6.3	To give prospective Applicants reasonable time to take an addendum/corrigendum into account in preparing their applications, the Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab may, at its discretion, extend the deadline for the submission of applications
C. Preparation of Applications		
7. Cost of Applications	7.1	The Applicant shall bear all costs associated with the preparation and submission of its application. Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the prequalification process.
	7.2	A non-refundable Prequalification Fee of Rs. 10,000/- on Challan Form 32-A shall be paid in **Account No. C 02871** to defray the cost of documents and physical inspection.
8. Language of Application	8.1	The application as well as all correspondence and documents relating to the prequalification exchanged by the Applicant and Director General Health Services Punjab, Primary & Secondary Healthcare Department Government of the Punjab, shall be written in the language specified in the **Prequalification Documents.** Supporting documents and printed literature that are part of the application may be in another language, provided they are accompanied by an accurate translation of the relevant passages in the language specified in the **Prequalification Documents,** in which case, for purposes of interpretation of the application, the translation shall govern.
9. Documents Comprising the Application (Hard copy)	9.1	The application shall comprise the following: a. Application Submission Form, in accordance with Information To Applicants (ITA); b. Documentary evidence establishing the Applicant's eligibility to prequalify, in accordance with ITA & Prequalification Criteria; c. Documentary evidence establishing the Applicant's qualifications, in accordance with ITA and & Prequalification Criteria d. Any other document required as specified in the Prequalification Documents. **e. All information, statements and description contained in the Application (online and hard copy) are in all respect true, correct and complete to the best of our knowledge and belief and there is no difference in information provided online and submitted in hard copy.**
10.Application Submission Form (Online)	10.1	The Applicant must submit Application via online portal through "**pqod.pshealthpunjab.gov.pk**" or "**www.pshealthpunjab.gov.pk**" before date and time mentioned in invitation for prequalification. All blank fields are mandatory to fill/complete and submit online printed forms along with hard copy of PQD and relevant required documents (Hardcopy) in tape binding with page number mentioned on each page(All the activities related to time period will be calculated from the date of submission of hard copy of PQD documents including all type of applications/Requests to the DGHS as per PPR-2014 and online

process is a parallel activity).Uploading of documents (Scan Copy) in relevant fields will be in PDF format only, except Payment Receipt. Purchase Cell will explain procedure for online submission of application in pre-application conference mentioned in invitation for prequalification.

Note: The application form can be viewed and checked, if any error and can be edited before final submission date and time, however you can edit your filled application till last date and time of submission of application online. After final submission date and time, system will not allow to submit/edit application online and it can neither be submitted manually nor by any other methods of submission. Once Application is submitted online (upto last date and time of submission) then cannot be edited/changed or corrected and any mistake from online submission by the firm will be wholly responsibility of that firm. So it is advised that read carefully and make sure that your application is completed and corrected for each and every aspect before final submission of date and time. (incomplete/Ambiguous/Incorrect) applications and any misleading information provided by the firm may lead to rejection of application either partially (Item wise) or completely.

After completing application, you can print the filled application after the last date and time of submission online mentioned in advertisement by click on the print tab and submitted this print with hardcopy (Tape binding) upto last date and time as per advertisement.

Step.1 Firm will submit request letter (with prequalification category as per requirement for prequalification on firm's original letter head (as per specimen in Annex-1) and copy of Prequalification fee deposited on form 32-A.

Step.2 Firm can go to web online portal "https://pqod.pshealthpunjab.gov.pk/" and click on sign up tab and a registration form will be opened. Enter the required fields as per request letter submitted by the firm i.e. (Company Complete name, Official Email address, NTN, STN, Payment slip (upload), Mobile No must be as per request letter submitted). Then create password and confirm password then enter register tab and wait. A message on system screen will be appeared as:

"PQOD, CONFIRM EMAIL ADDRESS SENT.
Please check your Email Inbox, a confirm Email is sent to given official email address"

Step.3 For account confirmation an email will be received at your given email address as:

"Thank you for your registration, please click on the below link to complete your registration:
"[Link]"

So click this link for confirmation from your given email inbox.

Step.4 Purchase Cell will verify particulars given for registration/Login ID from your request letter and allow for each category in which the firm has to be applied for prequalification.

Login ID will be remained same for future correspondence in Purchase Cell DATA Base and No duplicate Login ID is allowed to be created by any firm. Same login ID can be used for Local Manufacturer (Drugs/Medicines), Sole agent (Drugs/Medicines) and Non-Drugs/Medical Devices as per category applied for prequalification.

Step.5 After verification the firm can sign in by entering official email and password and click sign in tab. PQOD application will be opened.

Step.6 Dashboard with progress bar will be appeared along with category in which firm has applied as:

1. Local Manufacturers (Drugs/Medicines)
2. Sole Agents (Drugs/Medicines)
3. Sole Agents/Local Manufacturer (Medical Devices)
4. Sole Agents/Local Manufacturer (Surgical Dressings)

Step.7 For local manufacturers (Drugs/Medicines)
Click on section A. local manufacturers (Drugs/Medicines)
Step (A-1) General Information (fill the blank fields)
Manufacturing site information (in-house manufacturing or third-party manufacturing-select one category) and add blank fields (however incase if manufacturing units or third-party units are more than one then fill separately for each manufacturing unit DATA and also upload documents as per given number of manufacturing units. Click the save tab. for editing you can select the manufacturing unit and with help of editing tab you can edit manufacturing units DATA.
Then add focal person information and click on the save tab. In case of editing saved tab is disabled and after editing firm will click on update tab always whenever one will be done editing.
Step (A-2) Fill the detail of employees, category wise mentioned in portal. For addition click + tab and for deletion click x Tab.
Step (A-3) Firm's knock down criteria (Fill Yes/No/NA tab). Detail is also mentioned in prequalification documents in Evaluation Criteria for Local Manufacturers (Drugs).
Step (A-4) In attachment section upload files in pdf format only, (Firm's documents and Manufacturing unit wise documents upload).Once file is uploaded the download button will be enabled/showed. You can add multiple pages if pages are more than one.
Step (A-5) Quality Control equipment - One can add equipment name with model number, manufacturer and last date of validation/calibration. Then click save tab. You can edit via editing tab or can delete via x tab. You can add more equipment (if any) that are not mentioned in portal and then add "Others (Specify)" and below this tab you can enter new equipment that is not present in list.
Step (A-6) Drugs/Medicines list with item wise generic is present in system. Fill the blank/unfilled/empty fields appropriately. First item's knock down clauses are mentioned. Then provide information related to quoted item. Fill all the required field and click save tab. You can edit via editing tab or can delete via x tab

Step.8 For Sole Agents (Drugs/Medicines)

Click on section B, Sole Agents (Drugs/Medicines)

Step (B-1) General Information (fill the blank fields)

Manufacturing site information (Direct "Principal's in-house manufacturing" or Indirect "third party manufacturing"-select one category) and add blank fields (however incase if manufacturing units or third-party units are more than one then fill separately for each manufacturing unit DATA and also upload documents as per given number of manufacturing units. Click the save tab. for editing you can select the manufacturing unit and with help of editing tab you can edit manufacturing units DATA.

Then add focal person information and click on the save tab. In case of editing saved tab is disabled and after editing always click on update tab whenever editing is completed.

Step (B-2) Fill the detail of employees, category wise mentioned in portal. For addition click + tab and for deletion click x Tab.

Step (B-3) Firm's knock down criteria (Fill Yes/No/NA tab). Detail is also mentioned in prequalification documents in Evaluation Criteria for Sole Agents (Drugs/Medicines).

Step (B-4) In attachment section upload files in pdf format only, (Firm's documents and Manufacturing unit wise documents upload). Once file is uploaded the download button will be enabled/showed. You can add multiple pages if pages are more than one.

Step (B-5) Drugs/Medicines list with item wise generic is present in system. Fill the blank/unfilled/empty fields appropriately. First item's knock down clauses are mentioned. Then provide information related to quoted item. Fill all the required field and click save tab. You can edit via editing tab or can delete via x tab.

Step.9 For Sole Agents/Local Manufacturers (Medical Devices/Surgical Dressings)

Click on section C/D, Sole Agents/Local Manufacturers (Medical Devices/surgical Dressings)

Step (C-1/D-1) General Information (fill the blank fields)

Manufacturing site information (Direct "Principal's in-house manufacturing" or Indirect "third party manufacturing"-select one category) and add blank fields (however incase if manufacturing units or third-party units are more than one then fills separately for each manufacturing unit DATA and also upload documents as per given number of manufacturing units. Click the save tab. for editing you can select the manufacturing unit and with help of editing tab you can edit manufacturing units DATA.

Then add focal person information and click on the save tab. In case of editing saved tab is disabled and after editing you will click on update tab always whenever you will be done editing.

Step (C-2/D-2) Fill the detail of employees, category wise mentioned in portal. For addition click + tab and for deletion click x Tab.

Step (C-3/D-3) Firm's knock down criteria (Fill Yes/No/NA tab). Detail is also mentioned in prequalification documents in Evaluation Criteria for Sole Agents (Drugs/Medicines).

Step (C-4/D-4) In attachment section upload files in pdf format only, (Firm's documents and Manufacturing unit wise documents upload). Once file is uploaded the download button will be enabled/showed. You can add multiple pages if pages are more than one.

Step (C-5/D-5) Non-Drugs/Medical Devices/Surgical Dressings list with item wise generic is present in system. Fill the blank/unfilled/empty fields appropriately. First item's knock down clauses are mentioned. Then provide information related to quoted item. Fill all the required field and click save tab. You can edit via editing tab or can delete via x tab.

Note: Incase if category of any item is changed from Non-Drug to drug in case of medical devices then the said prequalification category will be considered as per Drugs Act 1976/DRAP Act 2012/Punjab Drugs Rules 2007/ Punjab Drugs Amendment Act 2017/Medical Devices Rules 2017 classification regarding registration of any item and will be amended accordingly as per law.

In case of any discrepancy & conflict in submitted online data of application and hard copy of application, the data submitted in hard form will prevail.

11.Application Submission	11.1	The signed hard copy of online submitted prequalification application must reach The Purchase Cell, Directorate General Health Services Punjab, 24 Cooper Road before closing date and time mentioned in the advertisement.
12. Documents Establishing the Qualifications of the Applicant	12.1	To establish its qualifications the Applicant shall provide the information requested in the corresponding Information Sheets included in Section III, Prequalification Criteria
13. Signing of the Application	13.1	The Applicant shall prepare and submit the application for prequalification as described in ITA & Prequalification Documents. The application shall be typed or written in indelible ink and shall be signed by a person duly authorized to sign on behalf of the Applicant.

D. Submission of Applications

14. Sealing and Identification of Applications	14.1	The Applicant shall enclose the application in a sealed envelope that shall: a. bear the name and address of the Applicant; b. be addressed to the Director General Health Services Punjab, Primary & Secondary Healthcare Department in accordance with ITA; and c. bear the specific identification of this prequalification process indicated in the Prequalification Documents
	14.2	The Procuring Agency will accept no responsibility for not processing any envelope that was not identified as required.
15.Deadline for Submission of Applications	15.1	The signed hard copy of online submitted prequalification application must reach The Purchase Cell, Directorate General Health Services Punjab, 24 Cooper Road before closing date and time mentioned in the advertisement.
	15.2	The Director General of Health Services Punjab Primary & Secondary Healthcare Department may, at its discretion, extend the deadline for the submission of applications by amending the Prequalification Documents in which case all rights and obligations of the Director General of Health Services Punjab, Primary & Secondary Healthcare

Department and the Applicants subject to the previous deadline shall thereafter be subject to the deadline as extended.

16. Late Applications	16.1	Any hard copy of application submitted at the Director General of Health Services Punjab, Primary & Secondary Healthcare Department after the deadline for submission of applications as indicated in the **Invitation for Prequalification** will not be entertained and shall be declared as late submission.
17. Opening of Applications	17.1	The Director General of Health Services Punjab, Primary & Secondary Healthcare Department shall open all Applications at the date, time and place specified in the **Invitation for Prequalification**. Late Applications shall be treated in accordance with ITA.
	17.2	Director General of Health Services Punjab, Primary & Secondary Healthcare Department shall prepare a record of the opening of applications that shall include the name and other details of the Applicant. A copy of the record shall be distributed to all Applicants.

E. Procedures for Evaluation of Applications

18. Confidentiality	18.1	Information relating to the evaluation of applications, and recommendation for prequalification, shall not be disclosed to Applicants or any other persons not officially concerned with such process until the notification of prequalification is made to all Applicants.
	18.2	From the deadline for submission of applications to the time of notification of the results of the prequalification, any Applicant that wishes to contact the Director General of Health Services Punjab, Primary & Secondary Healthcare Department on any matter related to the prequalification process, may do so but only in writing.
19. Clarification of Applications	19.1	To assist in the evaluation of applications, the Director General of Health Services Punjab, Primary & Secondary Healthcare Department may, at its discretion, ask any Applicant for a clarification of its application (both online and hard copy) which shall be submitted within 7 days. Any request for clarification and all clarifications shall be in writing.
	19.2	If an Applicant does not provide clarifications of the information requested by the deadline, the application shall be evaluated based on the information and documents available at the time of evaluation of the application.
20. Responsiveness of Applications	20.1	All applications not responsive to the requirements of the prequalification document shall be rejected.
21. Domestic Bidder Preference	21.1	A margin of preference for domestic bidders shall not apply in the bidding process resulting from this prequalification.

F. Evaluation of Applications and Prequalification of Applicants

22. Evaluation of application

22.1 Prequalification shall be done firm wise and its subsequent item for Drugs/Medicines which the Applicant meets the appropriate requirements of this prequalification document. The information provided in response to the invitation for prequalification will be evaluated as per Prequalification Documents and will also be physically verified by the DGHS through inspection team(s) to inspect the premises of the firm for verification of requirements. Good manufacturing practices and good storage practices as defined under Drugs Act 1976/DRAP Act 2012/ Punjab Drugs Amendment Act 2017 and Punjab Drugs Rules 2007/Medical Devices Rules respectively.

In case of third party manufacturing (TPM) financial turnover of applicant firm having valid drug registration will be considered provided that TPM firm will be compliant of all other advertised criteria of prequalification.

22.2 The Prequalification will be firm wise and its subsequent item, however in case of any addition in the formulary, the qualification against prequalification section will be considered and in certain cases where any principal of procurement will going to be violated, the procuring agency may invite open competitive bidding in best public interests.

23. Right to accept or reject the applications

23.1 The Director General of Health Services Punjab, Primary & Secondary Healthcare Department reserves the right to accept or reject all the applications, and to annul the prequalification process, without thereby incurring any liability to Applicants.

24. Prequalification of applicants

24.1 All Applicants whose applications have met the specified requirements will, to the exclusion of all others, be prequalified by DGHS the Primary & Secondary Healthcare Department.

25. Notification of prequalification

25.1 Director General of Health Services Punjab, after completion of evaluation process of submitted PQ applications shall notify all qualified applicants in writing/through PQOD online Portal and Official websites of DGHS & P&SHD indicating their Item wise status as prequalified.

26. Validity of Pre-Qualification

26.1 The Pre-Qualification shall be valid for Financial Year 2024-25 and may be extendable for next financial year (FY 2025-26) for pre-qualified firms. But it is mandatory that the prequalification process shall be conducted for enhancement of prequalified pool.

Annex-1-(On firm's Original Letter Head)

Request Application for Prequalification Documents (2024-25)
Drugs & Non-Drugs/Medical Devices

Ref.No/ Dated:

The Director General Health Services Punjab,
Primary & Secondary Health Care Department
Govt. of The Punjab.

Subject: **Request Application for Prequalification Documents (2024-25) Drugs & Non-Drugs/Medical Devices**

Dear Sir,

With reference to your advertisement regarding prequalification of Drugs & Non-Drugs/Medical Devices (2024-25) advertised on ---------- in the Daily Newspaper, it is requested to provide the Prequalification Documents against the following categories.

(Tick Appropriate Box)

1. Local Manufacturers (Drugs/Medicines) ☐

2. Sole Agents (Drugs/Medicines) ☐

3. Local Manufacturers (Non-Drugs/Medical Devices) ☐

4. Sole Agents (Non-Drugs/Medical Devices) ☐

5. Local Manufacturers /Sole Agents (Surgical Dressings Only) ☐

M/s_____ hereby authorizes Mr./Ms._____
Designation_____ CNIC No._____

Official Email _____ (**For Login I.D),** Mobile No._____ (for sms alerts) to fill/complete/submit the prequalification application via online portal "pqod.pshealth.punjab.gov.pk".

Firm's NTN: _____ **Firm's STN:** _____

Authorized By

Name_____ Signature _____
Designation _____
Contact No._____
Stamp_____

Section II: PREQUALIFICATION CRITERIA (DRUG/MEDICINE ITEMS)

A- FOR LOCAL MANUFACTURERS
1-KNOCK DOWN CRITERIA (Firm Wise)

Sr. No.	Knock Down Clause	Status
1	Valid Drugs Manufacturing License issued by DRAP.	Yes/No
2	The firm undertakes that currently it is not blacklisted/debarred by Directorate General Health Services (DGHS) Punjab. Firm shall provide undertaking in this regard on legally notarized e-stamp paper of rupees 100/-.	Yes/No
3	Valid GMP Certificate OR Valid Satisfactory GMP Inspection Report issued by DRAP. (Only those Sections & Pharmaceutical Category will be considered for prequalification whose GMP Inspection Report declared satisfactory and/or which are mentioned in the GMP Certificate)	Yes/No
4	Valid ISO 9001(ISO Certificate issuing organization/authority must be approved from Pakistan National Accreditation Council (PNAC) / United Kingdom Accreditation Service (UKAS) / International Accreditation Forum (IAF) / International Accreditation Service (IAS) / Quality Management System documents. The firm will provide valid ISO Certificate or Firm's quality management system SOPs.	Yes/No
5	Valid ISO 14001(ISO Certificate issuing organization/authority must be approved from Pakistan National Accreditation Council (PNAC) / United Kingdom Accreditation Service (UKAS) / International Accreditation Forum (IAF) / International Accreditation Service (IAS) / Environment Protection Agency approval or Firm's (EHS) Policy implementation SOPs.	Yes/No
6	Valid ISO 18001/45001 (ISO Certificate issuing organization/authority must be approved from Pakistan National Accreditation Council (PNAC) / United Kingdom Accreditation Service (UKAS) / International Accreditation Forum (IAF) / International Accreditation Service (IAS) / Firm's (EHS) Policy implementation SOPs.	Yes/No
7	Instruments installed in quality control, quality assurance & microbiological laboratories are calibrated and relevant manufacturing equipment are calibrated & validated. Firm shall provide undertaking in this regard on legally notarized e-stamp paper of rupees 100. (In case of non-compliance, none of the section (s) of the firm will be prequalified.) All such data must be verifiable.	Yes/No
8	The firm undertake on Rs.100 e-stamp paper dully legalized/notarized that it has segregated quality control and microbiological lab.	Yes/No
9	Relevant instruments are installed in quality control lab for analysis for all quoted items available and functional and not deficient to perform official tests of the (quoted) product. Firm shall provide undertaking in this regard on legally notarized e-stamp paper of rupees 100. The applicant shall provide complete method of testing of finished drug (where manufacturer's specifications approved by DRAP). The applicant shall also provide master	Yes/No

	formula of quoted product containing the name of active and inactive materials along with quantities.	
10	Facility is having functional and validated, Heating, Ventilation & Air Conditioning System (HVAC). Firm shall provide undertaking in this regard on legally notarized e-stamp paper of rupees 100.	Yes/No
11	R.O Water/De-ionized water Plant is available and functional (infusions/injectable/oral solutions according to applicability). Firm shall provide undertaking in this regard on legally notarized e-stamp paper of rupees 100.	Yes/No
12	Firm is having minimum two calibrated functional stability chambers. Firm shall provide undertaking in this regard on legally notarized e-stamp paper of rupees 100 along with calibration/validation certificate/record.	Yes/No
13	Firm undertake that the Information provided by the firm is in accordance with the terms & conditions of the prequalification documents on e-stamp paper of Rs.100 dully legalized/notarized.	Yes/No
14	Minimum Annual financial turnover for any of single financial year (i.e. 2020-21/2021-22/2022-23)/calendar year (i.e. 2021/2022/2023) must be 550 Million Rupees or above for medicine of local manufacturer. Firm shall provide FBR income tax return/sales Tax return for the financial year 2020-21, 2021-22 and 2022-23 or in case of calendar year 2021, 2022, and 2023. **Note**: Income Tax/Sales Tax return for the FY 2022-23 shall be supported with bank statement (FY-2022-23) of the title account of the applicant firm only. Both Tax return and Bank statement must be above 550 Million Rupees. (Firm shall attach bank statement signed and stamped from concerned bank along with FBR income tax/sales tax return) and same for calendar year-2023. (Joint venture, consortium and subsidiary shall not be accepted.)	Yes/No
15	The firm shall submit undertaking on Rs.100 e-stamp paper that the firm complies with the labor laws (Including child free labor and minimum wages as per Government policy).	Yes/No
16	The firm shall submit undertaking on Rs.100 e-stamp paper that none of its supplied batch in Public Sector Institutions has been declared Spurious/Adulterated since 01-01-2021 till the closing date of Prequalification Document submission.	Yes/No
17	The firm shall submit SOP`s regarding drug recall.	Yes/No
18	The firm (in case of limited company) shall provide form-A (latest) and certificate of incorporation duly verified by SECP. (Memorandum and article of association of companies). Firm will provide Form C (Registered from registrar of firms) / sole proprietorship.	Yes/No
19	The firm shall submit undertaking on Rs.100 e-stamp paper legalized/notarized that Firm has not been prosecuted by Provincial Quality Control Board (PQCB) on the offense of Spurious/Adulterated Drugs/Medicines since 01-01-2021 till the closing date of Prequalification Document submission.	Yes/No
20	The firm shall submit original receipt of fee with prequalification application.	Yes/No
21	The applicant shall submit an affidavit on Rs. 100/- e-stamp paper (Notarized) stating the applicant accepts all the terms and conditions of the Prequalification Documents.	Yes/No

22	The firm shall submit prequalification application along with all relevant documents on online portal (PQOD) of P&SHD.	Yes/No
2-KNOCK DOWN CRITERIA (Quoted Product/Item Wise)-Drug/Medicine		
	1. Prequalification of quoted item section is compulsory. Only those section shall be prequalified which are mentioned on valid GMP Certificate OR on Valid Satisfactory GMP Inspection Report issued by DRAP. 2. Drug Registration Certificate of each quoted item for quoted pack size/volume issued to applicant by DRAP. 3. At least One-year experience of quoted item of manufacturer from date of registration. (In case of additional pack size, One-year experience shall be calculated from date of approval by DRAP.) 4. Firm maintained of Required storage temperature as per requirement of quoted item. 5. Tested samples of the quoted item declared Substandard (if any) by the DTLs of Punjab (Not over 5%) from 01-01-2023 till the closing date of Prequalification Document submission. 6. For local Manufacturing firms, applicant firm shall declare daily production capacity of each quoted item (Finished Units produced in a single day). The firm shall submit undertaking on Rs.100 e-stamp paper in this regard. (Department may physically verify/inspect manufacturing site to confirm the claim of the firm. Any false claim considered as fraudulent practice and may lead to disqualification/blacklisting of the applicant firm.) 7. For local Manufacturing firms, applicant firm shall submit maximum batch size of quoted item in units. The firm shall submit undertaking on Rs.100 e-stamp paper in this regard. (Department may physically verify/inspect manufacturing site to confirm the claim of the firm. Any false claim considered as fraudulent practice and may lead to disqualification/blacklisting of the applicant firm. 8. Substandard Batch of quoted item Recall History since (01-01-2023) if any. 9. Any Punitive Action Taken by DRAP since (01-01-2023). (Punitive means, suspension/cancelation of Manufacturing License or Drug Registration by DRAP since (01-01-2023) till the closing date of Prequalification Document submission.) 10. Any Punitive Action Taken by PQCB since (01-01-2023). (Punitive means, Prosecuted by PQCB). **NOTE: Firm shall provide undertaking for knock down clause 4,5,6,7,8 ,9, and 10 on legally notarized e-stamp paper of rupees 100/-**	

B- FOR SOLE AGENTS OF FOREIGN PRINCIPAL (DRUGS/MEDICINES)
1-KNOCK DOWN CRITERIA (Firm Wise)

Sr. No.	Knock Down Clause	Status
1	Valid Drugs Sale License issued by Competent Authority for Sole Agents of Foreign Principal.	Yes/No
2	Valid Sole Agency Agreement.	Yes/No
3	The firm undertakes that currently it is not blacklisted &/or debarred by Directorate General Health Services (DGHS) Punjab. Firm shall provide undertaking in this regard on legally notarized e-stamp paper of rupees 100/-.	Yes/No
4	Valid, GMP Certificate issued by Drug Regulatory Authority of Country of Manufacturer/ Certificate of Pharmaceutical Product (COPP).	Yes/No
5	Firm undertake that the Information provided by the firm is in accordance with the terms & conditions of the prequalification documents on e-stamp paper of Rs.100 dully legalized/notarized.	Yes/No
6	Minimum Annual financial turnover for any of single financial year (i.e. 2020-21/2021-22/2022-23)/calendar year (i.e. 2021/2022/2023) must be 330 Million Rupees or above for medicine of Sole Agent Foreign manufacturer. Firm shall provide FBR income tax return/sales Tax return for the financial year 2020-21, 2021-22 and 2022-23 or in case of calendar year 2021, 2022, and 2023. **Note**: Income Tax/Sales Tax return for the FY 2022-23 shall be supported with bank statement (FY-2022-23) of the title account of the applicant firm only. Both Tax return and Bank statement must be above 330 Million Rupees. (Firm shall attach bank statement signed and stamped from concerned bank along with FBR income tax/sales tax return) and same for calendar year-2023. (Joint venture, consortium and subsidiary shall not be accepted.)	Yes/No
7	Firm shall provide undertaking on legally notarized e-stamp paper of rupees 100 That firm (Sole agent) follows Good Distribution and Storage Practices as per requirement. The firm must mention address of storage facility of applicant on undertaking.	Yes/No
8	The firm shall submit undertaking on Rs.100 e-stamp paper that none of its supplied batch in Public Sector Institutions has been declared Spurious/Adulterated since 01-01-2021 till the closing date of Prequalification Document submission.	Yes/No
9	The firm shall submit undertaking on Rs.100 e-stamp paper legalized/notarized that Firm has not been prosecuted by Provincial Quality Control Board (PQCB) on the offense of Spurious/Adulterated Drugs/Medicines since 01-01-2021 till the closing date of Prequalification Document submission.	Yes/No
10	The firm shall submit original receipt of fee with prequalification application.	Yes/No
11	The applicant shall submit an affidavit on Rs. 100/- e-stamp paper (Notarized) stating the applicant accepts all the terms and conditions of the Prequalification Documents.	Yes/No
12	The firm shall submit prequalification application along with all relevant documents on online portal (PQOD) of P&SHD.	Yes/No
2-KNOCK DOWN CRITERIA (Quoted Product/Item Wise)-Sole Agents of Foreign Principal- Drug/Medicine Items		

	1. Drug Registration Certificate of each quoted item for quoted pack size/volume issued to applicant by DRAP. Firm will submit DRC of all registered pack sizes/volume of quoted strength. 2. At least One-year experience of quoted item from the date of registration. (In case of additional pack size One-year experience shall be calculated from date of approval by DRAP.) 3. Quality Compliance Standards (EMA/JMHLW/US FDA/prequalified by WHO (Certificate) of quoted item. 4. Required storage temperature as per product's requirement. 5. Tested samples of the quoted item declared Substandard by the DTLs of Punjab (Not over 5%) from (01-01-2023) if any. 6. Substandard Batch Recall History of quoted item since (01-01-2023) if any. 7. Any Punitive Action Taken by DRAP since (01-01-2023). (Punitive means, suspension/cancelation of Manufacturing License or Drug Registration by DRAP since (01-01-2023) till the closing date of Prequalification Document submission.) 8. Any Punitive Action Taken by PQCB since (01-01-2023). (Punitive means, Prosecuted by PQCB). **NOTE: Firm shall provide undertaking for knock down clause 4,5,6,7,and 8 on legally notarized e-stamp paper of rupees 100/-**

Note:

1. **DGHS shall through their physical inspection committee(s)/inspector(s) shall verify the facts/claims submitted by the applicant(s). Any forged document(s)/claim(s) shall be dealt under PPR-2014.**
2. To establish its qualification, the firm shall provide the information requested in the respective annexures and requirements with documentary proof:
3. The firm will be prequalified for the particular item/ brand.
4. In order to avoid internet connectivity and load shedding issue, applicants are advised to apply online as early as possible without waiting for the due date.
5. In case of any issue during online application submission at PQOD, immediately send email at **pcdghslahore@gmail.com** along with screen short of issue faced by applicant.

"Annex-A"

GENERAL FIRM'S INFORMATION

(Drugs/ Medicines Manufacturer)

I. **Company Profile**.

1. Name of company : _____

Year established : _____

Form of company : [ ] Individual

[ ] Partnership

[ ] Corporation

[ ] Other (specify)

Legal status : _____

Trade registers number : _____

NTN & Sales Tax number (If applicable): :_____

Mfg. License Number : _____

(attach valid copy)

2. Address : _____

Telephone : _____ Telefax:_____ _____

E-mail: : _____

3. Employees:

S.No.	Category	Quantity
1	Management	
2	R &D	
3	Sales	
4	Administrative	
5	Production and quality control	
6	Others (specify)	
	Total	

Please attach the company organizational chart

II. Product Information

Please provide the information as per Annexure-C

1. Are all manufacturing operations (processing, packaging, labeling) carried out internally?

[ ] YES [ ] NO

If "No," attach a list of pharmaceuticals and/or raw materials manufactured by other companies and marketed by you. Please give the names of the companies, for each item.

S.No.	Product Name	Manufacturer	Address
1.			
2.			
3.			

If any products are repackaged, attach a list of such products with the name and address of the manufacturer for each product:

S.No.	Product Name	Manufacturer	Address
1.			
2.			
3.			

III. QUALITY DEPARTMENT

1. Do you maintain your own quality control laboratory?

   [ ] YES [ ] NO (if NO please provide details of alternate arrangements)

2. Number of specialized personnel working in your quality control, quality assurance and microbiological laboratory/ies (excluding administrative personnel). Provide their academic and professional details on a separate sheet.

   Pharmacists : _____

   Chemists : _____

   Others : _____

3. List of Equipment installed in quality control, quality assurance and microbiological laboratory/ies for quality assurance as per BP/USP.

   _____

   _____

4. Are these equipment calibrated & validated.

   [ ] YES [ ] NO

5. Are all raw materials completely tested prior to use or is a Certificate of Analysis accepted?

   [ ] YES [ ] NO [ ] Certificate of Analysis

6. Are control samples of each batch retained?

   [ ] YES [ ] NO

7. Name and title of the authorized person (s) responsible for batch release:
   Name:_____

   Title: _____

   Experience in pharmaceuticals: _____ years

8. Name and qualification of the head of the Quality Control department:

   Name: _____

   Qualification: _____

   Experience in pharmaceuticals: _____ years

9. Describe your storage facilities:
   _____

   _____

   The firm will provide logistics/distribution network in Punjab.

   The firm will provide human resource regarding logistics/distribution network in Punjab.

Annexure "B"

Authorized Sole agent for Foreign Principal's Qualification

(Drug/ Medicines Items)

I. Company Profile.

1. Name of company : _____

Year established : _____

Form of company :
- [ ] Individual
- [ ] Partnership
- [ ] Corporation
- [ ] Other (specify)

Legal status : _____

Trade registers number : _____

NTN & Sales Tax number (If applicable):

Valid sole agency agreement (attach valid copy)

2. Address : _____

Telephone : _____ Telefax: _____

E-mail & Web : _____

Please attach the company organizational chart

3. Type of activity carried out by the company (tick the appropriate category/ies)

- [ ] Manufacturer
- [ ] Branded products
- [ ] Generic products
- [ ] Medical supplies
- [ ] Laboratory reagents

[ ] Other products (specify below)

4. Names and addresses of international pharmaceutical companies, parent companies and/or subsidiaries and associated companies with whom there is collaboration or joint venture, if any:

S.No.	Product Name	Company	Address
1.			
2.			
3.			

5. Employees:

S.No.	Category	Quantity
1	Management	
2	R &D	
3	Sales	
4	Administrative	
5	Production and quality control	
6	Others (specify)	
	Total	

6. Capital value of the company (specify currency)

(a) Authorized capital: _____

(b) Paid up capital: _____

(c) Administration: _____

7. Annual sales turnover in the previous one year. Mention Private Sector and Public Sector sales separately (in Pak Rupees)

(In Million)

Annual turnover	Open market sales	Public Sector Sale	Year

Arbitration History (if any):_____

"Annex-C"

NAME OF APPLICANT FIRM (Local Manufacturer-Draft Form) _____

Item Code	Generic Name	Section	Quoted Brand	D/ Form	Volume (ml)	Quoted strength	Pack Size	Mfg By	Mfg for	MRP fixed by DRAP	Drug Reg.No	Drug Reg. Date	Batch size of quoted item in finished units	Mfg Capacity/ day (quoted item in finished units)	Section (Validation/calibration	Required Storage tempt(quoted item)	Spurious sample (last 3 years)	DTL Substandard (Not over 5%) From(01-01-2023)	Substandard Batch Recall History (01-01-2023)	Punitive Action by DRAP from (01-01-2023)	Punitive Action by PQCB from (01-01-2023)	Convicted by Drug Court from (01-01-2023)
1																						
2																						

"Annex-D"

NAME OF APPLICANT FIRM (Sole Agent-Draft Form)-DRUGS _____

Item Code	Generic Name	Section	Quoted Brand	D/ Form	Volume (ml)	Quoted strength	pack Size	Country of Origin	Mfg By	Mfg for	MRP fixed by DRAP	Drug Reg. No	Drug Reg. Date	Quality Compliance Standards	Required Storage tempt (quoted item)	Spurious sample(last 3 years)	DTL Substandard (Not over 5%) From(01-01-2023)	Substandard Batch Recall History (01-01-2023)	Punitive Action by DRAP from (01-01-2023)	Punitive Action by PQCB from (01-01-2023)	Convicted by Drug Court from (01-01-2023)	Valid Sole Agency Agreement	Verified/Not Verified (Valid sole agency Authorization)
1																							
2																							

Annexure-E

Sr.	Generic Name
1	Acefylline 125mg/5ml + Diphenhydramine 8mg/5ml Syp/Susp
2	Acefylline 125mg/5ml Syp/Susp
3	Acetylsalicylic acid 300mg Tab/Cap
4	Acetylsalicylic acid 75mg enteric coated Tab/Cap
5	Acyclovir 250mg Injection
6	Acyclovir 400mg Tab/Cap
7	Acyclovir 400mg/5ml Syp/Susp
8	Acyclovir 500mg Injection
9	Adrenaline 1mg/ml Injection
10	Albendazole 200mg Tab/Cap
11	Albendazole 200mg/5ml Syp/Susp
12	Allopurinol 300mg Tab/Cap
13	Alprazolam Tab/Cap 0.5mg
14	Amikacin (Sulphate) Injection 100mg
15	Amikacin (Sulphate) Injection 250mg
16	Aminophylline 25mg/ml Injection
17	Amiodarone HCl 150mg/3ml Injection
18	Amiodarone HCl 200 mg Tab/Cap
19	Amitriptyline (hydrochloride) 25mg Tab/Cap
20	Amlodipine 5mg Tab/Cap
21	Ammonium Chloride+ Aminophylline+ other ingredients as expectorant Syp/Susp
22	Amoxicillin (as trihydrate) 250mg + Clavulanic Acid (as Potassium) 125mg Tab/Cap
23	Amoxicillin (as trihydrate) 500mg + Clavulanic Acid (as Potassium) 125mg Tab/Cap
24	Amoxicillin (as trihydrate) 875mg + Clavulanic Acid (as Potassium) 125mg Tab/Cap
25	Amoxicillin (trihydrate) 250mg Tab/Cap
26	Amoxicillin (trihydrate) 500 mg Tab/Cap
27	Amoxicillin (trihydrate) 500mg Dispersible Tablet
28	Amoxicillin + Clavulanic Acid 1.2gm Injection
29	Amoxicillin + Clavulanic Acid 125 mg + 31.25 mg per 5ml Syp/Susp
30	Amoxicillin + Clavulanic Acid 250mg+62.5mg per 5ml Syp/Susp
31	Amoxicillin 125mg/5ml Syp/Susp
32	Amoxicillin 500mg Injection
33	Amoxicillin Syp/Susp 250mg/5ml
34	Ampicillin (as sodium salt) 250mg Injection
35	Antacid containing Magnesium Hydroxides, Aluminum Hydroxide including other relevant ingredients Syp/Susp
36	Anti D immunoglobulin (human) Single dose vial/Prefilled injection
37	Anti-Rabies Vaccine (PVRV) Injection (WHO Pre-Qualified)
38	Anti-Snake venom Serum (ASV)
39	Artemether + Lumefantrine 15mg + 90mg Syp/Susp
40	Artemether + Lumefantrine 20mg + 120mg Tab/Cap
41	Artemether + Lumefantrine 40mg + 240mg Tab/Cap

Sr.	Generic Name
42	Artemether + Lumefantrine 80mg + 480mg Tab/Cap
43	Ascorbic Acid 500mg Tab/Cap
44	Atenolol 50mg Tab/Cap
45	Atorvastatin 20mg Tab/Cap
46	Atracurium (besylate) 10mg/ml Injection
47	Atropine (Sulfate) 1mg/ml Injection
48	Azithromycin 200mg/5ml Syp/Susp
49	Azithromycin 250mg Tab/Cap
50	Azithromycin 500mg Tab/Cap
51	BCG Vaccine WHO pre-qualified
52	Beclomethasone (Dipropionate) 250mcg Inhaler
53	Beclomethasone (Dipropionate) 800mcg/2ml Solution
54	Benzathine penicillin 0.6MIU Injection
55	Benzathine penicillin 1.2MIU Injection
56	Benzyl Benzoate Lotion
57	Betahistine Dihydrochloride 8mg Tab/Cap
58	Betamethasone 0.1% Cream
59	Betamethasone 0.1% w/w + Gentamicin 0.1% w/w Cream
60	Bisoprolol 5mg Tab/Cap
61	BOPV Vaccine WHO pre-qualified
62	Bromazepam 3mg Tab/Cap
63	Bupivacaine (hydrochloride) (spinal) 0.75% Injection (Amp of 2 ml)
64	Bupivacaine (hydrochloride) 0.50% Injection (Amp of 2 ml)
65	Calamine 15% Lotion
66	Calcium Acetate 667mg Tab/Cap
67	Calcium Carbonate Tab/Cap (equivalent to 400-500mg elemental calcium)
68	Calcium Gluconate 100mg/ml Injection
69	Calcium Phosphate 210mg + Vitamin D3 350 units per 5ml Syp/Susp
70	Captopril 25mg Tab/Cap
71	Carbamazepine 100mg/5ml Syp/Susp
72	Carbamazepine 200mg Tab/Cap
73	Carbamazepine 200mg/5ml Syp/Susp
74	Carvedilol 12.5mg Tab/Cap
75	Carvedilol 3.125mg Tab/Cap
76	Carvedilol 6.25mg Tab/Cap
77	Cefixime 100mg/5ml Syp/Susp
78	Cefixime 200mg/5ml Syp/Susp
79	Cefixime 400mg Tab/Cap
80	Cefoperazone+Salbactum 1gm+1gm Injection
81	Ceftazidime 1gm Injection
82	Ceftriaxone (Sodium) 1gm Injection (I.V)
83	Ceftriaxone (Sodium) 250mg Injection (I.V)
84	Ceftriaxone (Sodium) 500 mg Injection (I.V)
85	Cefurexime (Sodium) Injection 750mg
86	Cephradine 125mg/5ml Syp/Susp

Sr.	Generic Name
87	Cephradine 500mg Injection
88	Cephradine 500mg Tab/Cap
89	Cetirizine 10mg Tab/Cap
90	Cetirizine 5mg/5ml Syp/Susp/liquid/solution
91	Charcoal Activated 260mg Tab/Cap/powder
92	Chloramphenicol Ear Drops 1% w/v
93	Chloramphenicol Eye Drops 0.5% w/v
94	Chlorhexidine Gluconate Gel 7.1% w/w Eq.to Chlorhexidine 4% w/w
95	Chloroquine (Phosphate or sulfate) Syp/Susp 200mg/5ml
96	Chloroquine (phosphate or sulfate) Tab/Cap 200/250mg
97	Chlorpheniramine Maleate 10mg/ml Inj
98	Chlorpheniramine maleate Syp/Susp 2mg/5ml
99	Chlorpheniramine maleate Tab/Cap 4mg
100	Ciprofloxacin (Hydrochloride) Tab/Cap 500mg
101	Ciprofloxacin + Dexamethasone Ear drops
102	Ciprofloxacin 250mg/5ml Syp. /Susp
103	Ciprofloxacin Ear Drops 0.3% w/v
104	Ciprofloxacin Eye Drops 0.3% w/v
105	Ciprofloxacin Injection 200mg/100ml
106	Clarithromycin Syp/Susp 125mg/5ml
107	Clarithromycin Tab/Cap 500mg
108	Clobetasol Cream/ointment 0.05% w/w
109	Clomipramine (hydrochloride) Tab/Cap 10mg
110	Clopidogrel Tab/Cap 75mg
111	Clotrimazole Skin cream 1% w/w
112	Clotrimazole Vaginal Cream 10% w/w with applicator
113	Clotrimazole Vaginal Tablet 500mg
114	Combined Oral Contraceptive Pill (21 Tabs Levonorgestrel and Ethinyl Estradiol and 7 Tabs ferrous fumarate Tab/Cap
115	Cyclopentolate Eye drops 0.5%
116	Daclatasvir 60mg Tab/Cap
117	Deferasirox 100mg Tab/Cap
118	Deferasirox 400mg Tab/Cap
119	Desferioxamine 500mg inj.
120	Dexamethasone 0.5mg Tab/Cap
121	Dexamethasone sodium phosphate Injection 4mg/ml, ampoule/vial of 1ml
122	Dextran 40 Infusion 500ml
123	Dextromethorphan + Pseudoephedrine + others Syp/ Susp
124	Dextrose 10% 1000ml
125	Dextrose Infusion 5%, 1000ml)
126	Dextrose Injection 25 % (20ml/25ml) Ampoule
127	Dextrose+Saline (1000ml) Infusion 5%w/v +0.9%w/v
128	Diazepam Injection 10mg
129	Diclofenac (Sodium) Injection 75mg in 3ml Ampoule
130	Diclofenac (Sodium) Tab/Cap 50mg

Sr.	Generic Name
131	Digoxin 0.25mg Tab/Cap
132	Diltiazem 30mg Tab/Cap
133	Diltiazem 60mg Tab/Cap
134	Dimenhydrinate 50mg Tab/Cap
135	Dimenhydrinate 50mg/ml injection
136	Dimenhydrinate Syp/Susp 12.5mg/4ml
137	Dobutamine (hydrochloride) Injection 250mg/5ml
138	Domperidone 10mg Tab/Cap
139	Domperidone 5mg/5ml Syp/Susp
140	Dopamine (hydrochloride) Injection 200mg/5ml
141	Doxycycline (hyclate) Tab/Cap 100mg
142	Drotaverine 40mg/2ml Injection
143	Drotaverine Tab/Cap 40mg
144	DTP Vaccine WHO pre-qualified
145	Emergency Contraceptive Pill (Levonorgestrel 1.5mg Tab/Cap)
146	Empagliflozin 10mg Tab/Cap
147	Enalapril maleate 5mg Tab/Cap
148	Entecavir 0.5mg Tab/Cap
149	Ergometrine (hydrogen maleate) Injection 0.2mg/ml
150	Erythromycin 500mg Tab/Cap
151	Erythropoietin 4000-5000 I.U Injection Vial/Pre-filled syringe
152	Escitalopram Tab/Cap 10mg
153	Ferrous salt + Folic Acid + Vitamin B complex Syp/Susp
154	Ferrous salt + Folic Acid + Vitamin B Complex Tab/Cap
155	Ferrous salt + Folic Acid Tab/Cap
156	Fluconazole 50mg/5ml Syp/Susp
157	Fluconazole Tab/Cap 150mg
158	Fludrocortisone 0.1mg Tab/Cap
159	Flurbiprofen 100mg Tab/Cap
160	Folic Acid 5mg Tab/Cap
161	Furosemide 20mg/2ml Injection
162	Furosemide 40mg + Amiloride 5mg Tab/Cap
163	Furosemide Tab/Cap 40mg
164	Fusidic acid 2% +hydrocrotrisone1% cream
165	Fusidic acid 2% Cream
166	Gentamycin Injection 80mg
167	Glibenclamide 5mg Tab/Cap
168	Glimepiride 2mg Tab/Cap
169	Glycerin Suppositories Pediatrics size
170	Glyceryl Trinitrate (S.R) 2.6mg Tab/Cap
171	Glyceryl Trinitrate (S.R) 6.4mg Tab/Cap
172	Glyceryl Trinitrate 0.5mg Sublingual Tab/Cap (SL)
173	Glycopyrrolate +Neostigmine 0.5 mg/ml Injection
174	Heparin (Sodium) 5000 IU/ml Injection vial of 5ml
175	Hepatitis -B Vaccine Adult dose (doses) WHO pre-qualified

Sr.	Generic Name
176	Hepatitis-B Vaccine Birth dose (doses) WHO pre-qualified
177	Hydralazine 20mg/ml Injection
178	Hydrochlorothiazide 25mg Tab/Cap
179	Hydrocortisone (Sodium succinate) 100mg Injection
180	Hydrocortisone (Sodium succinate) 250mg Injection
181	Hydrocortisone 10mg Tab/Cap
182	Hydrocortisone Cream 1%
183	Hydroxy Chloroquine 200mg Tab/Cap
184	Ibuprofen 100mg/5ml Syp/Susp
185	Ibuprofen 200mg Tab/Cap
186	Ibuprofen 200mg/5ml Syp/Susp
187	Ibuprofen 400mg Tab/Cap
188	Inactivated Influenza Vaccine H1N1 Injection (WHO approved strain)
189	Infusion 1/2 Normal Saline 500ml Infusion
190	Insulin comp 70/30 100IU/ml Injection
191	Insulin NPH 100IU/ml Injection
192	Insulin Regular 100IU/ml Injection
193	Iohexol 350mg/ml, 500ml / Contrast Media
194	Ipratropium Bromide Nebulizing Solution
195	Iron III Hydroxide Polymaltose Syp/Susp
196	Iron Sucrose 100mg/5ml Injection
197	Isoconazole1% + Diflucortolone 0.1% Cream
198	Isoflurane Liquid Inhalation 100ml
199	Isosorbide Dinitrate 10mg/10ml Infusion
200	Ketamine 50mg/ml Injection
201	Ketoconazole Cream 2%
202	Ketorolac 30mg/ml Injection
203	Ketorolac tromethamine 10mg/ml Injection
204	Labetalol 100mg Tab/Cap
205	Labetatol 5mg/ml Injection
206	Lactulose 3.335gm/5ml to 3.35gm/5ml Syp/Susp
207	Levetiracetam 100mg/ml Syp/Susp
208	Levodopa + Carbidopa 250mg + 25mg Tab/Cap
209	Levofloxacin 250mg Tab/Cap
210	Levonorgestrel 75mg Implants (Two Rod)
211	Lignocaine (hydrochloride) 2% Gel Topical forms
212	Lignocaine (hydrochloride) 2% Injection
213	Lignocaine + Adrenaline 2% Ampoule (Amp 10ml)
214	Lignocaine + Epinephrine Dental Cartridge 2% + 1:100 000
215	Lincomycin HCl 500mg Tab/Cap
216	Lisinopril 10mg Tab/Cap
217	Lisinopril 5mg Tab/Cap
218	Loratadine 10mg Tab/Cap
219	Loratadine 5mg/5ml Syp/Susp
220	Losartan Potassium 50mg Tab/Cap

Sr.	Generic Name
221	Magnesium Chloride + Postassium Chloride + Procaine HCL (Cardioplegic Solution)
222	Magnesium Sulphate 500mg/ml Injection
223	Mannitol (500ml) 20% w/v Infusion
224	Measles Vaccine (WHO Prequalified)
225	Mebendazole 100mg Tab/Cap
226	Mebendazole 100mg/5ml Syp/Susp
227	Mebendazole 500mg Chewable Tablet
228	Mecobalamin 500mcg Injection
229	Mecobalamin 500mcg Tab/Cap
230	Medroxyprogesterone acetate 150mg/ml Injection
231	Mefenamic acid 100mg/5ml Syp/Susp
232	Mefenamic acid 500mg Tab/Cap
233	Meglumine Antimoniate Injection
234	Meningococcal conjugate vaccine (WHO Prequalified)
235	Meropenem 1000mg Injection
236	Meropenem 500mg Injection
237	Metformin (hydrochloride) 500mg Tab/Cap
238	Methotrexate 10mg Tab/Cap
239	Methotrexate 2.5mg Tab/Cap
240	Methyldopa 250mg Tab/Cap
241	Metoclopramide (hydrochloride) 10mg Injection
242	Metoclopramide (hydrochloride) 10mg Tab/Cap
243	Metoclopramide (hydrochloride) 5mg/5ml Syp/Susp
244	Metoprolol 1 mg/ml Injection
245	Metronidazole (Benzoate) 200mg /5ml Syp/Susp
246	Metronidazole 200mg Tab/Cap
247	Metronidazole 400mg Tab/Cap
248	Metronidazole 500mg/100ml infusion
249	Miconazole (Nitrate) 2% Oral gel
250	Midazolam 1mg/ml Injection
251	Misoprostol 200mcg Tab/Cap
252	Modified Fluid Gelatin 3.5%/4% Infusion 500ml
253	Montelukast 10mg Tab/Cap
254	Montelukast 4mg Dry Powder sachet
255	Moxifloxacin + Dexamethasone Eye Drops
256	Moxifloxacin 400mg/250ml Injection
257	Moxifloxacin Eye drops 0.5%(5ml)
258	Multivitamins Tab/Cap
259	Nalbuphine HCl 10mg/ml Injection
260	Naloxone HCL 0.4mg/ml Injection
261	Naproxen Sodium 550mg Tab/Cap (equivalent to 500mg Naproxen)
262	Nifedipine 10mg Tab/Cap
263	Norepinephrine 1mg/ml Injection
264	Normal Saline 0.9% Infusion 1000ml

Sr.	Generic Name
265	Normal Saline 0.9% Infusion 100ml
266	Nystatin 100,000IU/ml Drops
267	Octreotide 0.05mg Injection
268	Octreotide 0.5mg Injection
269	Octreotide Injection 0.1mg
270	Ofloxacin 200mg Tab/Cap
271	Olopatadine Eye Drops
272	Omeprazole 20mg Sachet
273	Omeprazole 20mg Tab/Cap
274	Omeprazole 40mg Injection
275	Ondansetron 4mg/2ml Injection
276	ORS Sachet (WHO Formulation)
277	Oseltamivir 75mg Tab/Cap
278	Oseltamivir Syp/Susp
279	Oxytocin 5 IU/ml Injection (1ml)
280	Paracetamol + Orphenadrine citrate (650mg+50mg) Tab/Cap
281	Paracetamol 1 gm/100ml Infusion
282	Paracetamol 160mg/5ml or 120mg/5ml Syp/Susp/Liquid
283	Paracetamol 500mg Tab/Cap
284	Paracetamol 80mg/0.8ml Syp/Susp/solution/drops
285	Parafin Liquid Bottle of 450ml or less
286	Peads Soln Infusion 1/5 Normal Saline infusion (Paeds solution) 500ml
287	Pegylated interferon alfa-2a
288	Pentavalent (single Dose Vial), containing DPT, Hep-B & HIB Vaccine offered with VVM (WHO Prequalified).
289	Permethrin 5% Cream
290	Permethrin 5% Lotion
291	Pheniramine (maleate) 25mg/ml Injection
292	Phenobarbitone 200mg/ml Injection
293	Phenylephrine 10mg/ml Injection
294	Phenytoin (sodium) 100mg Tab/Cap
295	Phenytoin (sodium) 250mg/5ml Injection
296	Phenytoin (sodium) 30mg/5ml Syp/Susp
297	Phenytoin 30mg/ml Injection
298	Phloroglucinol Hydrate 40mg + Trimethyl Phloroglucinol 0.04mg Injection
299	Phloroglucinol Hydrate 80mg + Trimethyl Phloroglucinol 80mg Tab/Cap
300	Pilocarpine Eye Drop
301	Pneumococcal conjugate vaccine (WHO Prequalified)
302	Polygeline 3.5% Infusion 500ml
303	Polymyxin B (Sulphate) + Bacitracin Zinc Eye Ointment 10000IU/g + 500IU/g
304	Polymyxin B (Sulphate) + Bacitracin Zinc Ointment 10000IU/g + 500IU/g
305	Polymyxin B (Sulphate) + Lignocaine HCl Ear Drops
306	Potassium Chloride (KCl) Solution 7.46% in 20/25ml ampoule
307	Potassium Chloride 500mg Tab/Cap
308	Povidone – iodine Scrub 7.5%

Sr.	Generic Name
309	Povidone – iodine Solution 10%
310	Pralidoxime 200mg/10ml Injection
311	Prazosin 1mg Tab/Cap
312	Prednisolone 15mg/5ml Syp/Susp
313	Prednisolone 5mg Tab/Cap
314	Pregabalin 75mg Tab/Cap
315	Primaquine (Phosphate or sulfate) 7.5mg Tab/Cap
316	Promethazine (HCL) 5mg/5ml Syp/Susp/Elixir
317	Propofol 200mg Injection 200mg/20ml
318	Propranolol 10mg Tab/Cap
319	Propranolol 40mg Tab/Cap
320	Prostaglandin E2 3mg Vaginal Tablet
321	Protamine Sulphate 10mg/ml Injection
322	Pyridoxine HCl 50mg Tab/Cap
323	Rifampicin+Isoniazid(RH 150+75) Tab/Cap (Bioavailability/ Bioequivalence study must be attached along with bid and study must be available on WHO Website)
324	Rifampicin+Isoniazid+Ethambutol (RHE 150+75+275) Tab/Cap (Bioavailability/ Bioequivalence study must be attached along with bid and study must be available on WHO Website)
325	Rifampicin+Isoniazid+Pyrazinamide+Ethambutol (RHZE 150+75+400+275) Tab/Cap (Bioavailability/ Bioequivalence study must be attached along with bid and study must be available on WHO Website)
326	Ringer's Lactate (1000ml) Infusion
327	Ringer's Lactate (500ml) Infusion
328	Salbutamol (Sulfate) 100 micrograms and beclomethasone 50mcg inhaler
329	Salbutamol (Sulfate) 100 micrograms Inhaler
330	Salbutamol (Sulfate) 4mg Tab/Cap
331	Salbutamol (Sulfate) Solution for nebulizer 5mg/ml
332	Salbutamol 2mg/5ml Syp/Susp
333	Serratiopeptidase Tab/Cap
334	Sertraline 25mg Tab/Cap
335	Sevoflurane Liquid Inhalation 250ml
336	Silver Sulphadiazine 1% Cream
337	Sitagliptin 50mg Tab/Cap
338	Soda glycerin 5%w/w Ear drops
339	Sodium Bicarbonate (50ml)1.4% isotonic Injection
340	Sodium Bicarbonate 8.4% w/v Injection
341	Sodium Phosphate Enema (Liquid)
342	Sodium Picosulphate Tab/Cap
343	Sofosbuvir 400mg Tab/Cap
344	Spironolactone 100mg Tab/Cap
345	Spironolactone 25mg Tab/Cap
346	Spironolactone 50 mg + Furosemide 20mg Tab/Cap
347	Spironolactone 50 mg + Furosemide 40mg Tab/Cap
348	Streptokinase Powder for injection 1.5 million IU
349	Streptomycin (As Sulphate) 750mg Injection
350	Sulfamethoxazole + trimethoprim D/S 400mg + 80mg/5ml Syp/Susp

Sr.	Generic Name
351	Sulfamethoxazole + Trimethoprim D/S 800mg+160mg Tab/Cap
352	Sulfasalazine 500mg Tab/Cap
353	Sulphadoxine + Pyrimethamine 500 + 25mg Tab/Cap
354	Suxamethonium (chloride) 100 mg/2ml Injection
355	Tamsulosin HCl 0.4mg Tab/Cap
356	Tazobactum+Piperacillin 250mg+2gm Injection
357	Tazobactum+Piperacillin 500mg+4gm Injection
358	Telbivudine 600mg Tab/Cap
359	Tenofovir (disoproxil fumarate) 300mg Tab/Cap
360	Terbinafine 250mg Tab/Cap
361	Terbinafine Cream 1%
362	Terbutaline 0.3mg/ml Syp/Susp
363	Tetanus immunoglobulin (human) Injection
364	Tetanus Toxoid Injection (WHO Prequalified)
365	Theophylline 300mg Tab/Cap
366	Thyroxine 50mcg Tab/Cap
367	Thyroxine Sodium 100mcg Tab/Cap
368	Timolol (hydrogen maleate) Eye Drops 0.5%
369	Tizanidine HCl 2mg Tab/Cap
370	Tobramycin + Dexamethasone Eye Drops
371	Tramadol HCl 100mg/2ml Injection
372	Tramadol HCl 50mg Tab/Cap
373	Tranexamic Acid 500mg Tab/Cap
374	Tranexamic Acid 500mg/5ml Injection
375	Typhoid Conjugate Vaccine WHO Pre-qualified
376	Valproic acid (as sodium) 250mg/5ml Syp/Susp
377	Valproic acid (as sodium) 500mg Tab/Cap
378	Valproic acid (as sodium) 500mg/5ml Injection
379	Vancomycin (HCI) 1000mg Injection
380	Vancomycin (HCI) 500mg Injection
381	Varicella Vaccine WHO pre-qualified
382	Vitamin A 1500mcg/Drop
383	Vitamin B Complex Syp/Susp
384	Vitamin B Complex Tab/Cap
385	Vitamin D 400IU/Drop
386	Vitamin D3 5mg Injection
387	Vitamin K1 2mg/ml Injection
388	Warfarin Tab/Cap
389	Water for injection 10ml Sterile
390	Water for Injection 1ml Sterile
391	Water for injection 20ml Sterile
392	Water for Injection 2ml Sterile
393	Water for Injection 5ml Sterile
394	Xylometazoline Hydrochloride Nasal Spray
395	Zinc Sulphate 20 mg Dispersible Tablet

Sr.	Generic Name
396	Zinc Sulphate 20mg Tab/Cap
397	Zinc Sulphate 20mg/5ml Syp/Susp

NOTE:
1. The applicant may apply for more than one (if any) pack size/volume/strength of the applied item for prequalification subject to compliance of all compulsory parameters of the knockdown criteria of the Prequalification documents. Only the pack size/volume of quoted item notified in the PQ notification shall be considered for subsequent bidding.
2. The firm shall provide all the registration certificate (DRAP Approved) of pack size/volume/strength of the quoted brand against the advertised list of generic Drugs/Medicines items.
   Note: In case of non-provision of Drug Registration Certificate of all pack size/volume/strength or misleading information, the firm shall stand disqualified and/or may be blacklisted.
3. Detailed specification of items shall be advertised at the time of bidding.

Annexure-F

Sr No.	Quoted Item with Brand Name	DRC No.	Quoted strength	Quoted Pack size (Volume in case of liquid dosage form/gram in case of semi solid dosage form & dry powder dosage form/no of units in solid dosage form/total volume in case of inhaler	Pack size other than quoted	Expiry Date of DRC	Renewal applied(if applicable)

Section III: Application Forms

Application Submission Form

Date: _ _ /_ _/*2024*

To

Director General Health Services Punjab
Government of the Punjab
Primary & Secondary Healthcare Department.

I/we, the undersigned, apply to be prequalified for the referenced Pre-qualification and declare that:

(a) I/we have examined and have no reservations to the Prequalification Documents, including Addendum(s). (if any) issued in accordance with Instructions to Applicants (ITA) *[insert the number and issuing date of each addendum].*

(b) I/we, have nationalities from eligible countries, in accordance with ITA *[insert the nationality of the Applicant, including that of all partners in case of a Joint Venture /Consortium if applicable];*

(c) I/we, for any part of the application resulting from this prequalification, do not have any conflict of interest;

(d) I/we for any part of the contract resulting from this prequalification, currently have not been declared disqualified / blacklisted by Directorate General Health Services (DGHS) Punjab

(e) I/we understand that you may cancel the prequalification process at any time, the prequalification does not bound the procuring agency to call for the bids from the prequalified firms.

(f) All information, statements and description contained in the Application (online and hard copy) are in all respect true, correct and complete to the best of our knowledge and belief and there is no difference in information provided online and submitted in hard copy.

Signed *[insert signature(s) of an authorized representative(s) of the*

Applicant] Name [insert full name of person signing the application]

In the Capacity of *[insert capacity of person signing the application]*

Duly authorized to sign the application for and on behalf of: Applicant's Name *[insert full name of Applicant]*

Address *[insert street number/town or city/country/ address]*

Dated on _ -_/_ -_/*2024*

Affidavit

(Pak Rs.100/-)

Applicants signed affidavit on PKR 100 paper confirming not having been declared ineligible by Directorate General Health Services (DGHS) Punjab, as described in the documents.

Signed *[insert signature(s) of an authorized representative(s) of the Applicant] Name [insert full name of person signing the application]*

In the Capacity of *[insert capacity of person signing the application]*

Duly authorized to sign the application for and on behalf of: Applicant's Name *[insert full name of Applicant]*

Address *[insert street number/town or city/country/ address]*

Dated on _ -_/_ -_/*2024*

Physical Inspection of Applicants

Part A:

As per evaluation criteria, eligibility of applicants and other terms and conditions specified in PQ Documents.

Part B:

To inspect/evaluate any violation or critical/major non-compliance of cGMP.

Note: Non-compliances/violations of any parameter(s) of Part A or Part B will lead to "Non-prequalification" of the applicant