

WE KNOW

.....**LIFE IS PRECIOUS**



NET PRICE LIST

(with Effective dt. 01.10.2018)

ZODAK HEALTHCARE

(AN ISO 9001:2008 Certified Company)

Plot.No.249, Phase-2, Industrial Area, PANCHKULA (HR.)

TEL.:-+91 172 2595931 2592931, Mob. :-+91 8558080523, Whatsapp:-+91 7888602869

E-Mail : enquirypurchase.daksh@gmail.com , purchase.daksh@gmail.com

NET PRICE LIST 01/10/2018

SR.NO	PRODUCT	PACKING	M.R.P.
1	Tab. CLEZ - 0.5 (Clonazepam 0.5 mg.)	4 X 5 X 10	32.60
2	D. Sup. CLOR - 125 (Clarithromycin 125 mg./5 ml)	30 ml With WFI	118.00
3	Tab. CLOR - 250 (Clarithromycin 250 mg.)	5 X 10 Alu Alu	240.00
4	Tab. CLOR - 500 (Clarithromycin 500 mg.)	10 X 1 X 6 Alu Alu	288.00
5	Inj. DECADOL-25** (Nandrolone Decanoate 25mg)	Amp. with dispo	85.00
6	Inj. DECADOL-50 (Nandrolone Decanoate 50mg)	Amp. with dispo	158.00
7	Syp. DENIL (Anti Renal Calculi (Herbal Syrup) (Ayurvedic Proprietary medicine))	200 ml	120.00
8	Sup. DIGEL - MPS (Magaldrate 400 mg. + Simethicone 60 mg./5 ml)	170 ml	72.00
9	D.Sup. DOXTIL ^(TM) (Cefpodoxime 50 mg. / 5 ml)	30 ml With WFI	68.00
10	D.Susp. DOXTIL ^(TM) - 100 (Cefpodoxime 100 mg./5 ml)	30 ml With WFI	120.00
11	Tab. DOXTIL ^(TM) - 100 (Cefpodoxime 100 mg.)	5 X 10 Alu Alu	118.00
12	Tab. DOXTIL ^(TM) - 200 (Cefpodoxime 200 mg.)	5 X 10 Alu Alu	218.00
13	Tab. DOXTIL ^(TM) - OF (Cefpodoxime 200 mg. + Ofloxacin 200 mg.)	10 X 10 Alu Alu	258.00
14	Tab. DOXZIM [®] - 250 (Cefuroxime 250 mg)	5 X 10 Alu Alu	260.00
15	Tab. DOXZIM [®] - 500 (Cefuroxime 500 mg)	10 X 1 X 6 Alu Alu	288.00
16	Inj. DRM (Drotaverine 40 mg. / 2 ml.)	5 X 2ml	19.00
17	Tab. DRM (Drotaverine 80 mg + Aceclofenac 100 mg)	10 X 10	60.00
18	Tab. DURT ^(TM) - 6 (Deflazacort 6 mg)	10 X 10 Alu Alu	82.00
19	Inj. EMZOLE (Pantoprazole 40mg)	Vial with Try pack	46.80
20	Tab. EMZOLE - 40 (Pantoprazole 40 mg)	10 X 10 Alu Alu	58.00
21	Tab. EMZOLE - D (Pantoprazole 40 mg. + Domperidone 10 mg.)	10 X 10 Alu Alu	64.00

22	Cap. EMZOLE - DSR (Pantoprazole 40 mg. + Domperidone 30 mg. SR)	10 X 10 Alu Alu	96.00
23	Cap. EMZOLE - LS (Pantoprazole 40 mg + Levosulpiride 75 mg SR)	10 X 10 Alu Alu	138.00
24	Sup. ENZOPEP ^(TM) (Fungal diastase 18.75 mg+ pepsin 12.5mg sorbitol solution)	200 ml	94.00
25	Tab. ENZOPEP ^(TM) (Pancreatin 175 mg + Activated Dimethicone 50 mg + Charcoal 50 mg)	10 X 10	65.00
26	Tab. ETOZ - 90 (Etoricoxib 90 mg.)	10 X 10 Alu Alu	78.00
27	Tab. ETOZ - P (Etoricoxib 60 mg. + Paracetamol 325 mg.)	10 X 10 Alu Alu	78.00
28	Tab. ETOZ - T (Etoricoxib 60 mg. + Thiocolchicoside 4 mg.)	10 X 10 Alu Alu	198.00
29	Tab. HEP - ZO (L-Ornithine + L-Aspartate 150 mg)	10 X 10 Alu Alu	82.00
30	Inj. HEP - ZO** (L-Ornithine + L-Aspartate 5gm/10 ml)	5 X 10 ml	198.00
31	Sup. KUFNIL - A (Ambroxol 15 mg + Bromhexine Hcl. 2 mg + Guaiphenesin 50 mg + Menthol 1 mg/5ml)	100 ml	78.00
32	Sup. KUFNIL - A (Ambroxol 15 mg + Bromhexine Hcl. 2 mg + Guaiphenesin 50 mg + Menthol 1 mg/5ml)	60 ml	46.00
33	Sup. KUFNIL - D (Dextromethorphan Hbr. 5 mg + Guaiphenesin 25 mg + Chlorpheniramine Maleate 2 mg + Ammonium Chloride 60 mg + Sodium Citrate 60 mg + Menthol 2.5 mg/5 ml)	100 ml	78.00
34	Sup. KUFNIL - D (Dextromethorphan Hbr. 5 mg + Guaiphenesin 25 mg + Chlorpheniramine Maleate 2 mg + Ammonium Chloride 60 mg + Sodium Citrate 60 mg + Menthol 2.5 mg/5 ml)	60 ml	46.00
35	Syp. KUFNIL - DX (Phenylephrine HCl 5 mg + Dextromethorphan Hydrobromide 10 mg + Chlorpheniramine Maleate 2 mg/ 5 ml)	100 ml	68.00
36	Sup. KUFNIL-LS (Ambroxol 30 mg+ Levosalbutamol 1 mg + Gualphenesin 50 mg + Menthol 2.5 mg/5 ml)	100 ml	78.00
37	Tab. LEVODAK - 500 (Levofloxacin 500 mg)	5 X 10 Alu Alu	84.00
38	Tab. LEVODAK - 500 LB (Levofloxacin 500 mg + Lactic Acid Bacillus 60 M.S.)	5 X 10 Alu Alu	89.00
39	Tab. LEVODAK - 750 (Levofloxacin 750 mg)	10 X 10 Alu Alu	114.50
40	Tab. LEVODAK - 750 LB (Levofloxacin 750 mg + Lactic Acid Bacillus 60 M.S.)	10 X 10 Alu Alu	136.00
41	Tab. LORZIN - 10** (Loratadine 10 mg.)	10 X 10 Alu Alu	32.00
42	Cap. LYZOVIT (Lycopene, Vita. A, Vita. C, a-Tocopherol Acetate, Zinc & Selenium)	3 X 10 Alu Alu	92.00
43	Tab. OSTEOZ - PLUS (Calcitriol 0.25 mg + Calcium Citrate 750 mg + Zinc 7.5 mg + Magnesium Hydroxide 100 mg)	5 X 10 Alu Alu	74.00
44	SYP. OSTEOZ (Calcium Citrate 100 mg + Magnesium Hydroxide 60 mg + Zinc Sulphate Monohydrate 6.7 mg + Vitamin D3 200 IU / 5 ml)	200 ml	84.00
45	Tab. OSTEOZ (Calcium Carbonate 500 mg + Vit.D3 250 I.U.)	10 X 15	60.00

46	SAC. OSTEOZ-C (Vitamin D3 (cholecalciferol) 60000 I.U.)	25 X 1 gm	24.00
47	Tab. OSTEOZ-C (Vitamin D3 (cholecalciferol) 60000 I.U.)	10X1X4	97.50
48	Sup. OSTEOZ - FR (Ferrous Gluconate 300 mg + Calcium Gluconate 125 mg + Folic Acid 1.5 mg + Cyanocobalamin 10mcg/15ml)	200 ml	84.00
49	Tab. PARAZO - 650 (Paracetamol 650 mg.)	10 X 10	17.95
50	Inj. PIPZOT (Piperacillin 4 gm + Tazobactam 0.5 gm)	Vial	427.90
51	Cap. PREZO (Pre & Pro Biotic with L-Glutamine) (• FOOD)	10 X 10 Alu Alu	89.00
52	PREZO Sachet (Pre & Pro Biotic) (• FOOD)	25 X 1 gm	15.80
53	CAP. PROZIN - M (Pregabalin 75 mg. + Methylcobalamin 750 mcg.)	3 X 10 Alu Alu	120.00
54	QUDERM - N Cream (Beclomethasone Dipropionate 0.025 % w/w + Neomycin Sul. 0.5 % w/w + Clotrimazole 1.0 % w/w)	10 gm	42.00
55	Cap. RAIZY® (Carbonyl Iron 50 mg. + Zinc Sulphate 61.8 mg. + Vit.B12 5 mcg. + Folic Acid 0.5 mg.)	5 X 2 X 15	78.00
56	Sup. RAIZY® (Carbonyl Iron 60 mg + Zinc Gluconate 11 mg. + Vita. B12 5 mcg + Vita. E 15 i.u. + Sodium Selenite Pentahydrate 60 mcg + Folic Acid 1000 mcg/5ml)	200 ml	86.00
57	Tab. RAIZY® - XT (Ferrous Ascorbate 100 mg + Folic Acid 1.5 mg + Zinc 22.8 mg)	3 X 10 Alu Alu	98.00
58	Syp. RAIZY® - XT (Ferrous Ascorbate 30 mg + Folic Acid 550 mcg)	200ml	114.00
59	Drop. RHINZ** (Xylometazoline)	10 ml	36.00
60	Inj. ROZY (Rabeprazole 20 mg)	Vial	88.00
61	Tab. ROZY - 20 (Rabeprazole Sodium 20 mg)	10 X 10 Alu Alu	54.00
62	Tab. ROZY - D (Rabeprazole Sod. 20 mg + Domperidone 10 mg)	10 X 10 Alu Alu	65.00
63	Cap. ROZY - DSR (Rabeprazole Sod. 20 mg + Domperidone 30 mg SR)	10 X 10 Alu Alu	92.00
64	Cap. ROZY - LS (Rabeprazole Sod. 20 mg (EC) + Levosulpiride 75 mg SR)	10 X 10 Alu Alu	138.00
65	Cap. ROZYDEX ^(TM) - DSR (Dex Rabeprazole Sodium 10mg. + Domperidone 30mg. SR)	10 X 10 Alu Alu	114.00
66	Lot. SCABOZ ^(TM) (Permethrin 5 % w/v)	60 ml	72.45
67	Soap SCABOZ ^(TM) (Permethrin 1.00% w/w)	75 gm	66.00
68	Tab. THIODAK ^(TM) - A (Aceclofenac 100 mg + Thiocolchicoside 4 mg)	10 X 10	170.00

69	Cap. THIODAK ^(TM) - D** (Diclofenac Sodium 50 mg + Thiocolchicoside 4 mg)	10 X 10	178.00
70	Tab. THIODAK ^(TM) - PLUS (Thiocolchicoside 4 mg + Aceclofenac 100 mg + Paracetamol 325 mg)	10 X 10	198.00
71	Inj. TOBAZ - 80 (Tobramycin 80 mg/2ml)	2 ml Vial	78.00
72	Tab. VARZOLE ^(TM) (Ivermectin 6 mg + Albendazole 400 mg)	20 X 1	16.80
73	Tab. VERTIZOX [®] - 16 (Betahistine 16 mg.)	10 X 10 Alu Alu	72.00
74	Tab. VERTIZOX [®] - 8 (Betahistine 8 mg.)	10 X 10 Alu Alu	38.00
75	Tab. XYROX - 150 (Roxithromycin 150 mg.)	10 X 10	76.00
76	Z - GESIC OIL (Pain Reliever Oil) (Ayurvedic Proprietary medicine)	50 ml	84.00
77	Pow. Z - PRO (Protein Powder with Methylcobalamin) (• FOOD)	200 gm	220.00
78	Z - WAX Ear Drop (Paradichlorobenzene + Benzocaine + Chlorbutol + Turpentine Oil Ear Drops)	10 ml	38.00
79	Tab. ZAMOXY - 250 DT** (Amoxicillin 250 mg.DT)	10 X 10	40.00
80	Cap. ZAMOXY - 500 (Amoxicillin 500 mg.)	10 X 10	59.80
81	Cap. ZAZOLE - D (Omeprazole 20 mg. + Domperidone 10 mg.)	10 X 10 Alu Alu	54.00
82	Inj. ZEMAL [®] 1ml (a-b Arteether 75 mg./ml) (with Dispo Pack)	3 X 1 ml	48.00
83	Inj. ZEMAL [®] 2ml (a-b Arteether 75 mg./ml) (with Dispo Pack)	3 X 2 ml	78.00
84	Inj. ZEMAL [®] 2ml (a-b Arteether 75 mg./ml)	3 X 2 ml	78.00
84	D.Sup. ZEMAL [®] (Artemether 40 mg. + Lumefantrine 240 mg./5 ml)	30ml	156.00
85	Tab. ZEMAL [®] FORTE (Artemether 80 mg. + Lumefantrine 480 mg.)	10 X 1 X 6 Alu Alu	135.40
86	Inj. ZESUNATE ^(TM) (Artesunate 60 mg.)	Vial	185.00
87	Tab. ZESUNATE ^(TM) KIT (Sulphadoxine 500 mg. + Pyrimethamine 25 mg. + Artesunate 100mg.)	1 Combikit	189.00
88	Inj. ZETRON (Granisetron 1 gm./ml)	10 X 3 ml	65.00
89	Inj. ZIDE - T (Ceftazidime 1000 mg + Tazobactam 125 mg)	Vial	318.00
90	Sup. ZIFER (Thiamine 2.5 mg. + Riboflavine 2.5 mg. + Pyridoxine 1 mg. + Cyanocobalamin 5 mcg. + Niacinamide 25 mg + L-Lysine 10 mg. + Ferrous Gluconate 10 mg. + L-Glutamin Acid 10 mg./5 ml)	200 ml	82.00
91	Sup. ZIK - 100 (Azithromycin 100 mg./5 ml)	30 ml	56.00
92	Sup. ZIK - 200 (Azithromycin 200 mg./5 ml)	30 ml	81.00

93	Tab. ZIK - 250 (Azithromycin 250 mg.)	10 X 1 X 6	66.00
94	Tab. ZIK - 500 LB (Azithromycin (Anhydrous) 500 mg + Lactic Acid Bacillus 60 m.s.)	10 X 3	75.00
95	Tab. ZIK - 500 (Azithromycin 500 mg.)	10 X 1 X 3	66.00
96	Cap. ZINCOBAL (Methylcobalamin 1500 mcg. + Alpha Lipoic Acid 100 mg. + Folic Acid 1.5 mg. + Pyridoxine Hcl 3 mg. + Thiamine 10 mg.)	5 X 3 X 10 Alu Alu	164.00
97	Inj. ZINCOBAL (Methylcobalamin 1500 mcg. + Benzyl Alcohol 2% v/v.)	5 X 2 ml Tray Pack	28.00
98	Inj. ZINCOBAL - PLUS (Methylcobalamin 1500 mcg.)	2 ml Dispo Pack	68.00
99	Syp. ZINCOBAL PLUS (Methylcobalamin + Co Enzyme + Lycopene with Multi Vitamin)	200 ml	156.00
100	Inj. ZINCOBAL FORTE (Methylcobalamine 2500 mcg.)	2 ml Dispo Pack	76.00
101	Tab. ZINCOBAL - G (Methylcobalamin 500 mcg. + Gabapentin 300 mg.)	3 X 10 Alu Alu	120.00
102	Inj. ZINCOBAL - GF (Methylcobalamin 1000 mcg. + Thiamine 100 mg. + Pyridoxine 100 mg. + Nicotinamide 100 mg. + D-Panthenol 50 mg. + Benzyl Alcohol 2.0% v/v.)	2 ml Dispo Pack	68.00
103	Tab. ZO - CLAV 625 LB (Amoxycillin 500 mg + Potassium Clavulanate 125 mg + Lactic Acid Bacillus 60 m.s)	10 X 10 Alu Alu	253.00
104	Tab. ZO - CLAV 625 (Amoxycillin 500 mg + Clavulanic Acid 125 mg)	10 X 1 X 6 Alu Alu	113.30
105	D.Sup. ZO - CLAV (Amoxycillin 200 mg. + Clavulanic Acid 28.5 mg. / 5 ml)	30 ml	57.10
106	D.Sup. ZO - CLAV 457 (Amoxycillin 400 mg. + Clavulanic Acid 57 mg. / 5 ml)	30 ml	98.00
107	Tab. ZO - CLAV 228.5 (Amoxycillin 200 mg + Clavulanate 28.5 mg)	10 X 10 Alu Alu	95.00
108	Tab. ZOCIP - 500 (Ciprofloxacin 500 mg)	10 X 10	37.90
109	Tab. ZOCIP - TZ (Ciprofloxacin 500 mg + Tinidazole 600 mg)	10 X 10	67.90
110	Inj. ZODIC (Diclofenac Sodium 25 mg/ml)	10 X 3 ml	4.60
111	Inj. ZODIC - AQ (Diclofenac Sodium 75 mg/ml)	10 X 5 X 1 ml	19.40
112	Tab. ZOFEN - MR (Aceclofenac 100 mg. + Paracetamol 500 mg. + Chlorzoxazone 250 mg.)	10 X 10	62.00
113	Syp. ZOFEN - P (Aceclofenac 50 mg + Paracetamol 125 mg/5 ml)	60 ml	44.00
114	Tab. ZOFEN - P (Aceclofenac 100 mg + Paracetamol 325 mg)	10 X 10 Alu Alu 20 X 10 Blister	38.00 38.00
115	Tab. ZOFEN PLUS (Aceclofenac 100 mg. + Paracetamol 325 mg. + Serratiopeptidase 15 mg.)	5 X 2 X 10	78.00
116	D.Sup. ZOFIXI [®] (Cefixime 50 mg / 5ml)	30 ml With WFI	45.60
117	D.Sup. ZOFIXI [®] -50 LB (Cefixime 50 mg + Lactic Acid Bacillus 30 M.S. / 5 ml)	30 ml With WFI	54.00
118	Tab. ZOFIXI [®] - 100 (Cefixime 100 mg)	5 X 10 Alu Alu	86.70

119	Tab. ZOFIXI [®] - 200 LB (Cefixime Anhydrous 200 mg + Lactic Acid Bacillus 60 Million Spores)	10 X 10 Alu Alu	130.00
120	Tab. ZOFIXI [®] - 200 (Cefixime 200 mg)	5 X 10 Alu Alu	100.00
121	Tab. ZOFIXI [®] - CL 325** (Cefixime 200 mg + Clavulanic Acid 125 mg)	10 X 1 X 6 Alu Alu	174.00
122	D. Susp. ZOFIXI [®] - OF (Cefixime 50 mg. + Ofloxacin 50 mg./5 ml)	30 ml	88.00
123	Tab. ZOFIXI [®] - OF (Cefixime 200 mg. + Ofloxacin 200 mg.)	10 X 10 Alu Alu	170.00
124	Tab. ZOFYLIN ^(TM) - 400 (Doxofyline 400 mg)	10 X 10	78.00
125	Sup. ZOLIV (Liver Tonic) (Ayurvedic Proprietary medicine)	200 ml	89.00
126	Tab. ZOLO - 5** (Olanzapine 5 mg)	10 X 10 Alu Alu	32.60
127	Tab. ZOLO - 10 (Olanzapine 10 mg)	10 X 10 Alu Alu	60.00
128	Tab. ZOLO - F (Olanzapine 5 mg + Fluoxetine 20 mg)	10 X 10 Alu Alu	68.00
129	Tab. ZOLOXY - P (Lornoxicam 8mg. + Paracetamol 325mg.)	10 X 10	72.00
130	Inj. ZONEX (Cefoperazone 1000 mg. + Sulbactam 500 mg.)	Vial	240.00
131	Tab. ZOPAP - D (Serratiopeptidase 10 mg + Diclofenac Potassium 50 mg)	10 X 10 Alu Alu	62.00
132	Oint. ZOPID (Diclofenac Diethylamine + Methyl Salicylate + Menthol + Linseed Oil)	30 gm	92.00
133	Oint. ZOPIDIN ^(TM) - O (Povidone- Iodine + Ornidazole)	20 gm	48.00
134	Lot. ZOPIDIN ^(TM) FORT (Povidone-Iodine 10% w/v)	100 ml	102.00
135	Tab. ZOQUINE ^{(TM)**} (Mefloquine 250 mg.)	10 X 1 X 6 Alu Alu	338.00
136	Tab. ZORED ^(TM) - 4 (Methylprednisolone 4 mg)	10 X 10 Alu Alu	52.00
137	Inj. ZOXICAM (Piroxicam 20 mg/ml)	10 X 5 X 2 ml	32.00
138	Tab. ZOXICAM (Piroxicam 20 mg)	10 X 10	44.00
139	Tab. ZOYTIP-PLUS (Trypsin 48 mg + Bromelain 90 mg + Rutoside Trihydrate 100 mg + Diclofenac-50 mg)	10 X 10 Alu Alu	145.00
140	Sup. ZUCET (Levocetirizine 2.5 mg/5 ml)	30 ml	36.00
141	Tab. ZUCET (Levocetirizine 5 mg)	10 X 10 Alu Alu	32.00
142	Syp. ZUCET - AM (Montelukast 4 mg + Levocetirizine 2.5 mg + Ambroxol 30 mg/5 ml)	60 ml	98.00
143	Syp. ZUCET - M (Levocetirizine 2.5 mg. + Montelukast 4 mg./5 ml)	60 ml	64.00
144	Tab. ZUCET - M (Levocetirizine 5mg. + Montelukast 10mg.)	10 X 10 Alu Alu	118.00 150.00

145	Tab. ZUCET - M KID (Montelukast 4 mg + Levocetirizine 2.5 mg)	10 X 10 Alu Alu	68.00
146	Tab. ZUCET - N (Levocetirizine 5 mg. + Nimesulide 100 mg. ER)	10 X 10	38.00
147	Tab. ZUDOL [®] - P (Tramadol HCL 37.5 mg. + Paracetamol 325 mg.)	10 X 10	78.00
148	Sup. ZUESIC - FORTE (Mefenamic Acid 50 mg. + Paracetamol 250 mg. / 5 ml.)	60 ml	54.00
149	Sup. ZUESIC - P (Mefenamic Acid 50 mg. + Paracetamol 125 mg. / 5 ml.)	60 ml	36.00
150	Tab. ZUESIC - P (Nimesulide 100 mg. + Paracetamol 325 mg.)	10 X 10	29.35
151	Tab. ZULFY - 200 (Ofloxacin 200 mg)	10 X 10 Alu Alu	60.00
152	Sus. ZULFY - M (Ofloxacin 50 mg + Metornidazole 120 mg + Simethicone 10 mg/5 ml)	30 ml	49.00
153	Tab. ZULFY - OZ (Ofloxacin 200 mg + Ornidazole 500 mg)	5 X 10 Alu Alu	76.00
154	Tab. ZULFY - O + (Ofloxacin 200 mg + Ornidazole 500 mg + Lactic Acid Bacillus 120 Million Spores & Saccharomyces Boulardii 2 Million Spores.)	10 X 10	110.00
155	Inj. ZUMIK - 100 (Amikacin 100 mg.)	Vial	24.00
156	Inj. ZUMIK - 500 (Amikacin 500 mg.)	Vial	84.00
157	Inj. ZUTEX - 1000 (Ceftriaxone 1000 mg.)	Vial	56.60
158	Inj. ZUTEX - 250 (Ceftriaxone 250 mg.)	Vial	25.80
159	Inj. ZUTEX - 500 (Ceftriaxone 500 mg.)	Vial	45.80
160	Inj. ZUTEX - S 1500 (Ceftriaxone 1000 mg. + Sulbactam 500 mg.)	Vial	126.00
161	Inj. ZUTEX - S 375 (Ceftriaxone 250 mg. + Sulbactam 125 mg.)	Vial	48.00
162	Inj. ZUTEX - T (Ceftriaxone 1000 mg. + Tazobactam 125 mg.)	Vial	148.00
163	Inj. ZUTEX - TP (Ceftriaxone 250mg. + Tazobactam 31.25mg.)	Vial	56.00
164	Inj. ZUTRAN (Tranexamic Acid 500 mg/ml)	5 X 5 ml	69.70
165	Tab. ZUTRAN - M (Tranexamic Acid 500 mg. + Mefenamic Acid 250 mg.)	10 X 10 Alu Alu	165.00
166	Cap. ZUVITAL ^(TM) (Multivitamin + Minerals + Ginseng +Antioxidant)	5 X 3 X 10 Alu Alu	98.00
167	Pow. ZUVITAL ^(TM) (Protein Hydrolysate 20% 5 gm + Calcium 225 mg + Phosphorous 174 mg + Pyridoxine Hydrochloride 0.5 mg + Cyanocobalamin 1 mcg + Vitamin D3 100 IU + Niacinamide 15 mg + Folic Acid 0.3 mg + Zinc 5 mg + Iron 7.5 mg + Manganese Sulphate 1.5 mcg + Magnesium Oxide 4 mg + Cupric Sulphate 2.5 mg + Chromiun 25 mcg + Selenium Dioxide Monohydrate 20 mcg + Potassium Chloride 5 mg + Sodium Chloride 33 mg + Iodine 100 mcg) (DRUG)	200 gm (Tin pack)	198.00
168	Sup. ZUVITAL ^(TM) (Pyridoxine Hcl. 0.75mg. + Nicotinamide 15mg. + Cyanocobalamin 2mcg. + L-Lysine Hyd. 375mg. + Sorbitol Sodium 70% /5 ml)	200ml	94.00

169	Syp. ZYCOLD - P (Paracetamol 250 mg + Phenylephrine HCL 5 mg + Chlorpheniramine Maleate 2 mg /5 ml)	60 ml	48.00
170	Tab. ZYCOLD - P (Paracetamol 325 mg + Phenylephrine HCl 5 mg + Caffeine (Anhydrous) 30 mg + Diphenhydramine HCl 25 mg)	5 X 2 X 10	51.00
171	Sup. ZYCYP ^(TM) (Cyproheptadine Hcl 2 mg + Tricholine Citrate 275 mg/5 ml)	200 ml	84.00

BANNED PRODUCTS

1	Tab. DOXTIL ^(TM) - AZ (Cefpodoxime 200 mg + Azithromycin 250 mg)	10 X 1 X 6 Alu Alu	138.00
2	Drop. EARLY (Ofloxacin 03.% w/v + Beclomethasone 0.025% w/v + Clotrimazole 1% w/v + Lignocaine Hydrochloride 2% w/v)	10 ml	55.00
3	Tab. LEVODAK - AZ (Levofloxacin 250 mg + Azithromycin 250 mg)	5 X 10 Alu Alu	164.00
4	Cap. ZAMOXY - D (Amoxicillin 250 mg. + Dicloxacillin 250 mg.)	10 X 10	78.00
5	Tab. ZOFIXI [®] - AZ (Cefixime 200 mg + Azithromycin 500 mg)	10 X 10 Alu Alu	265.00
6	Tab. ZUCET - PLUS (Paracetamol 325 mg. + Cetirizine 5 mg. + Phenylephrine 5 mg. + Caffeine 30 mg)	10 X 10 Alu Alu	36.00
7	Sup. ZULFY - OZ (Ofloxacin 50 mg. + Ornidazole 125 mg/5 ml)	30 ml	31.20
8	Sus. ZULFY - OZ (Ofloxacin 50 mg + Ornidazole 125 mg/5 ml)	60ml	56.00
9	Sup. ZULFY - OR (Ofloxacin 50 mg + Ornidazole 125 mg + Racecadotril 15 mg/5 ml)	30 ml	87.00
10	Sup. ZYCOLD (Phenylephrine Hcl 5 mg + CPM 2 mg + Paracetamol 250 mg + Dextromethorphan Hbr. 10 mg/5 ml)	60 ml	54.00

Promotional & New Products

**** ONLY SPECIAL BATCHES ON REQUEST**

TM : TRAD MARK UNDER REGISTRATION

R : TRADE MARK REGISTERED



TERMS & CONDITIONS

1.Changes in prices/wll discount: Daksh Pharmaceuticals reserve all right to change MRP,Trade price, discount, net etc (without any prior notice)

2. Supply : Supplies will be made within 3 working days of placing of order subject to availability of goods. Orders should be placed in written by courier/post/fax. Goods will be supplied in minimum quantities as specified in price-list. Road permit/waybill should be send along with order.

3.Payment : Payment should be given in advance or against delivery only.
Goods send through bank will be through bank approved transporters only

4. Area : franchisee should work in allotted area only. Company may Cancel franchisee forfeit deposit in case of any infiltration outside allotted area.

5.Taxation :G.S.T.Extra

6. Business Volume : Minimum business Rs 30000/- (Thirty Thousand Rupees) per district per month.

7. Breakage/ Expiry : Breakage will be replaced only on presentation of valid transporter's certificate.

8. Promotional Material : Promotional Material, samples and gifts will be at actual cost subject to availability.

9. Special offers/ free goods : Company will provide special offer/ volume discounts or free goods from time to time subject to sole discretion of company.

10.Right to modify terms: Company reserves right to modify/ change terms and condition to franchisee.

11. Noc/ Loc Expense: Noc/Loc expenses should be borne totally by franchisee and Daksh pharmaceuticals will not share any expenses for local Noc or donation to association.

12. Jurisdiction : Subject to Panchkula Jurisdiction only.



Feedback/Information Form

Firm Details:

Name of Firm:

Address of Firm:

Pin Code:

State :

Contact Details

Phone: STD Code 1.

2.

Mobil:

Suitable time to call :

fax:

E-mail:

Firms Details (Necessary):

TIN/GST NO:

Local ST No:

Drug Lic No: 20 B

21B

Banker Name and Address:

Area of operation (Mention each districts) :

Contact Person :

Firm Details:

Transporter :

Nearest Railway Station :

Name, Qualification and Date of Birth - Proprietior / Partner / Directors :

Business Details (optional):

Approx tunover for last 3 year (if applicable):

Other distributorship/ Franshisee held (if applicable):

Brief Background:

Reference :

Feedback / suggestions if any:

Signature with Stamp: