



GOVERNMENT OF KERALA

Abstract

Health & Family Welfare Department - COVID 19 - Centralised procurement and distribution of Inj Tocilizumab 200 mg, Inj Remdesivir 100 mg, Cap. Favipiravir 400 mg, Cap Favipiravir 200 mg - Sanction accorded - orders issued.

HEALTH & FAMILY WELFARE(F) DEPARTMENT

G.O.(Rt)No.40/2021/H&FWD Dated, Thiruvananthapuram, 05/01/2021

Read Note dated 23.12.2020 from the Managing Director, Kerala Medical Services Corporation Limited, Thiruvananthapuram.

ORDER

As per note read above the Managing Director, Kerala Medical Services Corporation Ltd has informed that considering the prevailing disease scenario of the State, 63rd Board of Directors meeting of Kerala Medical Services Corporation Limited held on 25th November, 2020 had resolved to gather the requirements of Antiviral & other drugs for the active case management & to appraise the Government. Accordingly Kerala Medical Services Corporation Ltd requested both Directors of Medical Education and Health Services to submit the detailed requirements. The details hence gathered are collated in the following tables with current purchase rates.

Requirement for Inj.TOCILIZUMAB 200 mg

Sl.	Name of the District	Category of	Requirement for Inj.TOCILIZUMAB 200 mg		
No	Name of the District	Institution	Jan- March 21	Unit Cost	Total cost
1	TRIVANDRUM	DME	60		943740
		DHS	30		471870
2	KOLLAM	DME	60		943740
		DHS	0		0
3	PATHANAMTHITTA	DHS	0		0

4	ALAPPUZHA	DME	360		5662440
		DHS	24		377496
5	KOTTAYAM	DME	0		0
		DHS	0		0
6	IDUKKI	DHS	0		0
7	ERNAKULAM	DME	100	15729	1572900
		DHS	60	10,25	943740
8	THRISSUR	DME	36		566244
		DHS	0		0
9	PALAKKAD	DME	0		0
		DHS	0		0
10	MALAPPURAM	DME	90		1415610
		DHS	4		62916
11	KOZHIKODE	DME	60		943740
		DHS	0		0
12	WAYANADU	DME	0		0
		DHS	0		0
13	KANNUR	DME	6		94374
		DHS	40	1	629160
	TOTAL		930		1,46,27,970.00

Requirement for Inj. REMDESIVIR 100 mg

Sl.		Catagory of	Requirement for Inj. REMDESIVIR 100 mg			
No	Name of the District	Category of Instn	Jan- March 21	Unit Cost (INR)	Total cost (INR)	
1	TRIVANDRUM	DME	1800		5193216	
		DHS	180		519321.6	
2	KOLLAM	DME	180		519321.6	
		DHS	12		34621.44	
3	PATHANAMTHITTA	DHS	1200		3462144	
4	ALAPPUZHA	DME	5400		15579648	
		DHS	140	2885.12	403916.8	
5	KOTTAYAM	DME	3000		8655360	
		DHS	120		346214.4	

6	IDUKKI	DHS	300	865536
7	ERNAKULAM	DME	3000	8655360
		DHS	1050	3029376
8	THRISSUR	DME	1200	3462144
		DHS	0	0
9	PALAKKAD	DME	0	0
		DHS	900	2596608
10	MALAPPURAM	DME	2250	6491520
		DHS	630	1817625.6
11	KOZHIKODE	DME	270	778982.4
		DHS	0	0
12	WAYANADU	DME	0	0
		DHS	200	577024
13	KANNUR	DME	210	605875.2
		DHS	380	1096345.6
	TOTAL		22422	6,46,90,160.64

Requirement for Cap.Favipiravir 400 mg

			Requirement for Cap.Favipiravir 400 mg			
Sl. No	Name of the District	Category of Institution	Jan-March 21	Unit Cost	Total cost (INR)	
	TDUANDA	D) (E	1020	(INR)	102564.0	
1	TRIVANDRUM	DME	1920		103564.8	
		DHS	2000		107880	
2	KOLLAM	DME	6000		323640	
		DHS	3000		161820	
3	PATHANAMTHITTA	DHS	4000] [215760	
4	ALAPPUZHA	DME	41400] [2233116	
		DHS	1800] [97092	
5	KOTTAYAM	DME	6000] [323640	
		DHS	1500		80910	
6	IDUKKI	DHS	1200		64728	
7	ERNAKULAM	DME	3000] [161820	
		DHS	1700] [91698	
8	THRISSUR	DME	0	53.94	0	
		DHS	500		26970	
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9	PALAKKAD	DME	0	0
		DHS	0	0
10	MALAPPURAM	DME	0	0
		DHS	13500	728190
11	KOZHIKODE	DME	3000	161820
		DHS	4500	242730
12	WAYANADU	DME	0	0
		DHS	400	21576
13	KANNUR	DME	1305	70391.7
		DHS	2100	113274
	TOTAL		98825	53,30,620.5

Requirement for Cap.Favipiravir 200 mg

Sl.		Category	Requirement for Cap.Favipiravir 400 mg			
51.	Name of the District	of	Jan-March 21	Unit Cost	Total cost	
No		Institution		(INR)	(INR)	
1	TRIVANDRUM	DME	30600		861084	
		DHS	1000		28140	
2	KOLLAM	DME	3000		84420	
		DHS	6000		168840	
3	PATHANAMTHITTA	DHS	0		0	
4	ALAPPUZHA	DME	23700		666918	
		DHS	10500		295470	
5	KOTTAYAM	DME	3000		84420	
		DHS	300		8442	
6	IDUKKI	DHS	11000		309540	
7	ERNAKULAM	DME	3000		84420	
		DHS	7500		211050	
8	THRISSUR	DME	9000	28.14	253260	
		DHS	1000		28140	
9	PALAKKAD	DME	0		0	
		DHS	400		11256	
10	MALAPPURAM	DME	11250		316575	
		DHS	20250		569835	

	TOTAL		157510	44,32,331.4
		DHS	5200	146328
13	KANNUR	DME	2610	73445.4
		DHS	200	5628
12	WAYANADU	DME	0	0
		DHS	2000	56280
11	KOZHIKODE	DME	6000	168840

Consolidated Requirements

Sl No	Particulars	Total requirement		Total cost (INR)
1	Inj TOCILIZUMBAB 200 mg	930	15729	1,46,27,970.00
2	Inj. REMDESIVIR 100 mg	22422	2885.12	6,46,90,160.64
3	Cap FAVIPIRAVIR 400mg	98825	53.94	53,30,620.50
4	Cap. FAVIPIRAVIR 200mg	157510	28.14	44,32,331.40
	TOTAL			8,90,81,082.54

- 2. Government have examined the matter and are pleased to accord administrative sanction to the Managing Director, Kerala Medical Services Corporation Ltd for the purchase of Inj Tocilizumab 200 mg, Inj Remdesivir 100 mg, Cap. Favipiravir 400 mg, Cap Favipiravir 200 mg for an amount of Rs. 8,90,81,082.54 (Eight Crore Ninety Lakh Eighty one Thousand Eighty two Rupees and Fifty Four Paisa only) as detailed above.
- 3. Sanction is also accorded to Kerala Medical Services Corporation Ltd to do centralized procurement of above items and distribute among institutions as per the indent submitted.

(By order of the Governor)

RAJAN NAMDEV KHOBRAGADE PRINCIPAL SECRETARY

To:

The Manager, Kerala Medical Services Corporation Ltd, Thiruvananthapuram

The Director of Health Services, Thiruvananthapuram.

The Director of Health Education, Thiruvananthapuram.

The Principal Accountant General (Audit/A&E) Kerala, Thiruvananthapuram.

Health & Family Welfare (B) Department.

Information & Public Relations (Web &New Media) Department Stock File/Office Copy

Forwarded /By order

Section Officer