



कर्मचारी राज्य बीमा निगम
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
EMPLOYEES' STATE INSURANCE CORPORATION
(Ministry of Labour & Employment, Govt. of India)



मुख्यालय
Headquarters
पंचदीप भवन सी०आई०जी रोड, नई दिल्ली-110002
PANCHDEEP BHAWAN, C.I.G. MARG, NEW DELHI-110 002
Phone: 011-23604700 Email: dir-gen@esic.nic.in
Website: www.esic.nic.in / www.esic.in

U-25/12/170-174/2024-MedicalV (E-1234667) / Dated : 05/2025

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To
The Dean, ESI PGIMSRT & Medical Colleges
The Medical Superintendent, ESIC Hospitals
DIMS, All States & UT's

Sub: Addition and deletion of drugs in the existing drug schedule of DG-ESIC Rate Contract No. 170, 171, 172 173 and 174-reg.

Sir/Madam,

Reference captioned subject, it is hereby informed that ESIC Hqrs. is in the process of formation of replacement Central Rate Contract for the drugs available in DG-ESIC Rate Contract No. 154,155,156,157 and 158 valid till 09.06.2026.

In this connection, ESI Institutions may give recommendations regarding addition and deletion of drugs as per instructions given below:

A. For recommendations regarding addition of drugs in the existing drug schedule, Dean/Medical Superintendent/DIMS of respective ESI Institution to ensure that:

1. Recommendations should be sought from Heads of respective Departments for generic drugs duly certifying that:

- There is no such generic drug available in the existing drug schedule of DG-ESIC Central Rate Contracts.
- There is no other similar generic substitute available for this drug in the existing DG-ESIC Central Rate Contracts.
- Drug recommended has following advantages over the currently used drugs (advantages to be listed).
- The advantage has been published in books of reference/medical journal / literatures etc. (list of references to be mentioned)

2. The Drug recommended should mandatorily be supported by data of local purchase of that particular drug during last one year i.e. June 2024 to May 2025 duly signed by Medical Store In charge.

B. For recommendations regarding deletion of drugs in the existing drug schedule of DG-ESIC Rate Contract No. 154,155,156,157 and 158, Dean/Medical Superintendent/DIMS of respective ESI Institution will provide the amount of procurement made during last one year from Medical store In charge and with reasons for deletion of drugs from Heads of respective Departments.

Thereafter, the Institution Head (Dean/MS/DIMS) will give final recommendations for **consolidated list of all drugs** received from all departments for addition and deletion of drugs separately after due verification of recommendations of the Heads of respective Departments and store local purchase data. The recommendations should be submitted **before 30.05.2025** through email at **dmc-rc@esic.nic.in**

NOTE: The data of addition and deletion of items should be submitted in pdf and excel both without changing the format as enclosed.

This issues with the approval of Competent Authority.

Encl: Certificate and excel format for addition & deletion of item.

Warm Regards

Dy. Medical Commissioner (RC & PC)

Instructions:

- 1) **Medical superintendents of ESIC Hospitals (Delhi/Noida) will submit the recommendation for addition and deletion of drugs keeping in view the data of their Hospital and their tagged dispensaries separately.**
- 2) **The pdf format for recommendation of addition and deletion of drugs should be signed by Hospital Store In-charge, HOD, Dean & Medical Superintendents of ESIC Hospitals/DIMS of respective states.**
- 3) **DIMS of respective states will submit consolidated data of recommendations for addition and deletion of drugs of all ESIS Hospitals and Dispensaries under their jurisdiction.**
- 4) **No separate data should be sent by individual ESIS Hospital and Dispensaries directly to ESIC HQRS.**
- 5) **Care should be taken while recommending the drug(s) for addition that the recommendations should be broad based, generic and should be helpful in delivery of medical services & treatment to ESI Beneficiaries.**

Digitally signed by
Sanjiv Kochhar
Date: 27-05-2025
12:53:42

Name of ESIC Unit/ESIS State Directorate with Region.....

Certificate of addition of Generic Items in pdf
(One certificate for each Department)

Sl. No.	Name of the Department	Name of the Drugs (only Generic name of the drug)	Strength	Dosages Form (tablet/capsule/injection/ointment etc.)	unit Cost without GST	Expenditure incurred in Local Purchase during last (01) year i. e. June 2024 to May 2025	Remarks, if any whether proprietary/ New Drug as per Drug & Cosmetic Act	Indication for use of drugs
1.	2.	3.	4.	5.	6.	7.	8.	9.

I do hereby certify that:

- a.) There is no such generic item available in the existing Drug schedule of Rate Contracts.
- b.) There is no other similar generic substitute available for this item in the existing Drug schedule of Rate Contracts.
- c.) Item recommended have following advantage over the currently used drugs:
 - i.
 - ii.
 - iii
- d.) The advantage has been published in following books of reference/medical journal/ literatures etc. (list of references to be mentioned and please attach copy of references with details)
 - i.
 - ii.
 - iii.

Signature of Hospital Store In-charge

Name and Signature of HOD
Name of the Department.....

I do hereby recommend for the addition of above listed drug(s)

Name and Signature of Dean & MS of ESIC Hospital
/ DIMS of respective State Directorate.....

NOTE: The consolidated data of addition and deletion for all recommended drugs received from all the departments to be submitted both in pdf and excel without changing the format as enclosed through email at dmc-rc@esic.nic.in.

Name of ESIC Unit/ESIS State Directorate with
Region.....

Certificate for deletion of Drugs from existing drug schedule of DG-ESIC Rate
Contract No. 154,155,156,157 and 158 **in pdf.**

(One certificate for each Department)

Sl. No.	RC No.	Item No.	Particulars of the drugs/formulation in RC	Amount of Procurement during last one year June 2024 to May 2025	Justification	Remarks
1.	2.	3.	4.	5.	6.	7.

Signature of Hospital Store In-charge

Name and Signature of Head of Department

Name of Department.....

I do hereby recommend for deletion of above listed drugs from existing drug schedule of rate contracts

Name and Signature of Dean & MS of ESIC Hospital /DIMS of respective State Directorate.....

NOTE: The consolidated data of addition and deletion for all recommended drugs received from all the departments to be submitted both in pdf and excel without changing the format as enclosed through email at dmc-rc@esic.nic.in

Excel Format for submission of consolidated list of all drugs recommended for addition and deletion.

a. For addition of drugs

Sl. No.	Name of the Department	Name of the Drugs (only Generic name of the drug)	Strength	Dosages Form (tablet/capsule/injection/ointment etc)	unit Cost without GST	Expenditure incurred in Local Purchase during last (01) year i.e. June 2024 to May 2025	Remarks, if any whether proprietary/ New Drug & Cosmetic Act	Indication for use of drugs
1.	2.	3.	4.	5.	6.	7.	8.	9.

b. For deletion of drugs

Sl. No.	RC No.	Item No.	Particulars of the drugs/formulation in RC	Amount of Procurement during last one year i.e. June 2024 to May 2025	Justification	Remarks
1.	2.	3.	4.	5.	6.	7.