

Date: 27/02/2023

To,
The Deputy Director
National Pharmaceutical Pricing Authority,
5th/3rd Floor, YMCA Cultural Centre Building,
1, Jai Singh Road, New Delhi - 110001.

Kind Attention: Mr. Mahaveer Saini - Deputy Director (Pricing)

Subject: Form V- Price for Ceiling prices notified vides S.O.No. 879(E) dated 24.02.2023

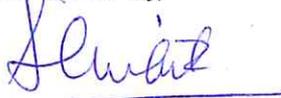
Vide notification no. S.O. 879(E) dated 24.02.2023 , the ceiling prices were revised for the following product marketed by us. We are enclosing price list in Form V for the below mentioned products:-

Sr. No	Name of the Products	Pack Size
1	Isordil 10 Tablets	10's
2	Perinorm 2ml Injection	2ml
3	Valrate CR-200 Tablets	10's
4	Valrate CR-300 Tablets	10's
5	Valrate CR-500 Tablets	10's

We are enclosing price list in Form - V. Kindly provide us acknowledgement of receipt for our records.

Thanking you.

For Ipca Laboratories Ltd;
Yours Sincerely,



Sunil Kamath
(Sr. General Manager)

Enclosed:-

1. Price list of 5 formulation product.

SCHEDULE - II
FORM - V
PROFORMA FOR PRICE LIST
(See paragraphs 2(x),24,25,26)

1. Name & address of the manufacturer / importer / distributor : Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West)

2. Name & address of the marketing company, if any : Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West)

TABLE-A						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Scheduled formulation					
	Own Manufacture Formulation					
1	Isordil 10 Mg Tablet 10(10.00 No) (Isosorbide Dinitrate TABLET)	Isosorbide Dinitrate 10 MG TABLET	10	5.18	5.76	8.06
TABLE-B						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Non-Scheduled formulation					
	Own Manufactured Formulation					
	Purchased/Imported Formulation					

Notes:-In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

The information furnished above is correct and true to the best of my knowledge and belief.

Place : Mumbai

Authorized Signatory : Sunil Kamath

Name : Sunil Kamath

Date : 27-Feb-2023

Designation : Sr General Manager Finance

SCHEDULE - II
FORM - V
PROFORMA FOR PRICE LIST
(See paragraphs 2(x),24,25,26)

1. Name & address of the manufacturer / importer / distributor : Makers Laboratories Limited, Add :Plot No. 54-D, Kandivli Industrial Estate, Charkop, Kandivli (West)
2. Name & address of the marketing company, if any : Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West)

TABLE-A						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Scheduled formulation					
	Purchased/Imported Formulation					
1	Perinorm 5 Mg Injection 2 MI(2.00 MI Ampoule) (Metoclopramide INJECTION)	Metoclopramide 5 MG INJECTION	2	3.43	3.81	5.33

TABLE-B						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Non-Scheduled formulation					
	Own Manufactured Formulation					
	Purchased/Imported Formulation					

Notes:-In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

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SCHEDULE - II
FORM - V
PROFORMA FOR PRICE LIST
(See paragraphs 2(x),24,25,26)

1. Name & address of the manufacturer / importer / distributor : Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West)

2. Name & address of the marketing company, if any : Ipca Laboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West)

TABLE-A						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Scheduled formulation					
	Purchased/Imported Formulation					
1	Perinorm 5 Mg Injection 2 MI(2.00 MI Ampoule) (Metoclopramide INJECTION)	Metoclopramide 5 MG INJECTION	2	3.43	3.81	5.33

TABLE-B						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Non-Scheduled formulation					
	Own Manufactured Formulation					
	Purchased/Imported Formulation					

Notes:-In case of purchased/imported formulation, Name of the manufacturer shall be indicated.

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SCHEDULE - II
FORM - V
PROFORMA FOR PRICE LIST
(See paragraphs 2(x),24,25,26)

1. Name & address of the manufacturer / importer / distributor : Akums Drugs & pharmaceuticals Ltd, Add :304, Mohan Place, Local Shopping Complex, Block - C, Opposite Post Office, Saraswati Vihar
2. Name & address of the marketing company, if any : Ipcalaboratories Limited, Add :Plot No.125, M.G. Road, Kandivli Industrial Estate, Kandivli (West)

TABLE-A						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Scheduled formulation					
	Purchased/Imported Formulation					
1	Valrate Cr 200/87 Mg Tablet Cr 10(10.00 No) (Sodium Valproate + Valproic Acid TABLET CR)	Sodium Valproate + Valproic Acid 200/87 MG TABLET CR	10	39.17	43.52	60.93
2	Valrate Cr 333/145 Mg Tablet Cr 10(10.00 No) (Sodium Valproate + Valproic Acid TABLET CR)	Sodium Valproate + Valproic Acid 333/145 MG TABLET CR	10	59.62	66.24	92.74
3	Valrate Cr-200 Tablets(10.00 No) (Sodium Valproate + Valproic Acid TABLET CR)	Sodium Valproate + Valproic Acid 133/58 MG+135/58 MG TABLET CR	10	23.04	25.60	35.84
TABLE-B						
Sl. No.	Name of the Product(Formulation and its dosage forms)	Composition Approved By Drug Control Authorities	Pack Size	Price to Stockist (inclusive of E.D) (Rs.)	Price to Retailer (inclusive of E.D) (Rs.)	Maximum Retail Price (inclusive of E.D & Taxes) (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Non-Scheduled formulation					
	Own Manufactured Formulation					
	Purchased/Imported Formulation					

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