Award schedule

NHS National Pharmaceuticals - Lenalidomide

Offer reference number: CM/PHG/21/5638

01/09/2022 to 31/08/2023 (12 months) with an option or options to extend (at the Authority's discretion) for a agreement: period or periods up to a total of 48 months. Potential periods of call-offs under the framework agreement:

ALL REGIONS: Lenalidomide - 01/09/2022 to 31/08/2023 (12 months) Shared Award

SUPPLIER Wockhardt UK Limited All the products listed below are Subject to QC

NPC	Description	Pack	QA Risk Category E - Elevated N - Normal	Offer Pack	Brand	EAN Code	Product Licence no. or date expected	List Price	Minimum order quantitiy	Anralmant VI2	Price (to include patient enrolment via a paper-based PPP)	NHS Stores discoun	Product(s) registered on PharmaQC?* (Yes/No)	Digital image of product loaded to Pharmaqc?* (Yes/No)	Is PPP approved by MHRA? (Yes/No)	If PPP not yet approved by MHRA state expected date PPP	ct :al**	via the BGMA
DHA385	Lenalidomide 10mg capsules	21	E	21	Wockhardt	5012727915234	29831/0719											
DHA386	Lenalidomide 15mg capsules	21	E	21	Wockhardt	5012727915241	29831/0720											
DHK054	Lenalidomide 2.5mg capsules	21	E	21	Wockhardt	5012727915203	29831/0716											
DHK053	Lenalidomide 20mg capsules	21	E	21	Wockhardt	5012727915258	29831/0721						Redacted - S	ection 43				
DHB148	Lenalidomide 25mg capsules	21	E	21	Wockhardt	5012727915265	29831/0722											
DHA384	Lenalidomide 5mg capsules	21	E	21	Wockhardt	5012727915210	29831/0717											
DND054	Lenalidomide 7.5mg capsules	21	E	21	Wockhardt	5012727915227	29831/0718											

*Products must be registered and artwork/ documents uploaded onto PharmaQC for an award to be made

** A digital portal is a secure cloud based portal that allows electronic capture and approval of patient authorisation forms.

Additional information

Delivery	
Direct - please	
state contact	
details	
Direct/and or	
Distributor	
Distributor -	
Please list	
Delivery	
charges	Redacted - Section 43
Minimum order	
value	
Delivery	
charges	
E-ordering	
(Yes/No)	
E-Invoicing	
(Yes/No)	

Tender contact details First name Surname Email Telephone Fax Redacted - Section 43