



✓ INJECTION RANGE

| RINOCEF - 1GM VIAL | CEFTRIAXONE 1GM VIAL (WITH W.F.I) | OUTER CARTON | 1Gm |
|----------------------|---|--------------|---------|
| RINOCEF - SB INJ. | CEFTRIAXONE - 1GM + SULBACTUM 500 MG INJ. (WITH W.F.I) | OUTER CARTON | 1.5 GM |
| RINOTHER INJ | A - B ARTEETHER 150MG/2ML | OUTER CARTON | 3X2ML |
| REEZON 1GM INJ | CEFOPERAZONE 500 MG + SULBACTUM 500 MG (WITH W.F.I) | OUTER CARTON | 1 GM |
| RINOMIK - 250 MG INJ | AMIKACIN 250 MG INJ (2ML) | OUTER CARTON | VIAL |
| RINOMIK - 500 INJ | AMIKACIN 500 MG VIAL | OUTER CARTON | VIAL |
| RINSID INJ. | ONDANSETRON 2MG/ML | OUTER CARTON | 10X2 ML |

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