

Schedule of charges						
.	eCode	ServiceName	General	Private	Foreign	NC
1	A001	Registration Fees (Including SmartCard)	92	460	460	9
2	A002	Smart Card for patients (Reissue)	106	106	106	106
3	A003	Charges for printing Reports (per Report)	3	3	3	3
4	A010	Casualty Consultation Charges	0	920	920	0
5	A012	Second Opinion Consult Referral (RF)	0	0	1840	0
6	A100	Charges for Duplicate bill printing (per Bill)	23	23	23	23
7	A101	Travelling Expenses provide to BP patient per package (upto 10 times)	300	0	0	300
8	B001	Room/Bed Charges (Main Building)	239	2383	5819	28
9	B002	Room/Bed Charges (Annexe Building)	239	2383	0	28
10	B003	ICU charges per day	317	1587	2479	32
11	B004	Room/Bed Charges - BMT	529	2645	2645	55
12	B005	Room/Bed Charges (HBB)	0	0	0	0
13	D002	Inpatient Deposit	4600	46000	184000	920
14	D004	Deposit - Bone Marrow Transplant Patients	920000	920000	920000	920000
15	D006	Deposit - Autologous Stem Cell Transplant	460000	460000	460000	460000
16	D008	Unrelated Transplant Programme: Unrelated Donor Search (Non	92000	92000	92000	92000
17	D009	Unrelated Transplant Programme: Phase I Deposit for Identifying Potential Donor (Non Refun	920000	920000	920000	920000
18	D010	Unrelated Transplant Programme: Deposit for Conducting Unrelated Transplants	3680000	3680000	3680000	3680000
19	E003	Day Care Bed Charges	202	1012	1012	18
20	FA01	Sirolimus Drug Level Estimation	1665	3321	5188	1656
21	FA02	G6PDH Estimation (Quantitative)	276	542	855	27
22	FA04	Anti-SARS Cov (Complete Antibodies)	55	294	460	9
23	FA05	Anti-SARS Cov (IgG Antibodies)	147	754	1186	18
24	FA06	IL-6 (interleukin-6)	138	671	1048	18

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	eCode	ServiceName	General	Private	Foreign	NC
25	FA07	NT-Pro BNP	211	1039	1619	18
26	F030	24 hours urine excretion rate for kappa and lambda	143	718	1122	14
27	F033	Thyroid Function Tests (T3,T4,TSH)	101	506	796	9
28	F034	Serum T3 (Thyroid Function)	32	170	267	5
29	F035	Serum T4 (Thyroid Function)	32	170	267	5
30	F036	Serum TSH (Thyroid Function)	32	170	267	5
31	F037	Serum Folate	152	750	1173	14
32	F038	Serum Vitamin B12	92	465	727	9
33	F039	Serum Parathormone (PTH)	92	465	727	9
34	F040	Serum Calcitonin	152	750	1173	14
35	F041	Serum Free Light Chains Kappa	584	2921	4563	60
36	F042	Serum Free Light Chains Lambda	584	2921	4563	60
37	F043	Complete Serum Protein Electrophoresis (SPE)	1398	6983	10911	138
38	F044	Serum Protein Electrophoresis (SPE)	60	308	478	5
39	F045	Serum Immunoglobulins (Ig)	161	796	1242	14
40	F046	Immunoglobulin A (IgA)	55	267	414	5
41	F047	Immunoglobulin M (IgM)	55	267	414	5
42	F048	Immunoglobulin G (IgG)	55	267	414	5
43	F049	Serum Light Chains	202	1017	1587	18
44	F050	Serum Light Chains Kappa	101	506	796	9
45	F051	Serum Light Chains Lambda	101	506	796	9
46	F052	Immuno Fixation Electrophoresis (IFE)	957	4793	7489	97
47	F053	Urine Free Light Chains Kappa	584	2921	4563	60
48	F054	Urine Free Light Chains Lambda	584	2921	4563	60
49	F055	Serum CK	32	170	267	5
50	F056	Serum CK-MB	60	308	478	5
51	F057	Serum Lactate	64	317	497	5
52	F058	Serum Free T3	170	846	1320	18
53	F059	Serum Free T4	170	846	1320	18
54	F060	Serum Vitamin D	290	1458	2282	28
55	F061	Serum BNP	368	1831	2861	37
56	F062	Serum Insulin	51	244	382	5
57	F063	Magnesium (24 Hrs Urine)	92	465	727	9
58	F072	CSF Immunoglobulins (Ig)	202	1007	1573	18
59	F073	CSF Immunoglobulin A (IgA)	74	368	580	9
60	F074	CSF Immunoglobulin M	74	368	580	9
61	F075	CSF Immunoglobulin G	55	267	414	5

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	eCode	SeviceName	General	Private	Foreign	NC
62	F076	CSF Light Chains	202	1017	1587	18
63	F077	CSF Light Chains Kappa	101	506	796	9
64	F078	CSF Light Chains Lambda	101	506	796	9
65	F079	CSF AFP	106	520	810	9
66	F080	CSF CEA	97	478	745	9
67	F081	CSF Beta-HCG	78	391	612	9
68	F082	CSF Total PSA	106	520	810	9
69	F083	CSF Beta2-Microglobulin	253	1270	1983	28
70	F084	CSF CA 15.3	212	1049	1638	23
71	F085	CSF CA 125	189	943	1472	18
72	F086	CSF CA 19.9	212	1049	1638	23
73	F087	Fluid Immunoglobulins (Ig)	161	796	1242	14
74	F088	Fluid Immunoglobulin A	55	267	414	5
75	F089	Fluid Immunoglobulin M	55	267	414	5
76	F090	Fluid Immunoglobulin G	55	267	414	5
77	F091	Fluid Light Chains	202	1017	1587	18
78	F092	Fluid Light Chains Kappa	101	506	796	9
79	F093	Fluid Light Chains Lambda	101	506	796	9
80	F094	Fluid AFP	106	520	810	9
81	F095	Fluid CEA	97	478	745	9
82	F096	Fluid Beta-HCG	78	391	612	9
83	F097	Fluid Total PSA	106	520	810	9
84	F098	Fluid Beta2 Microglobulin	253	1270	1983	28
85	F099	Fluid CA 15.3	212	1049	1638	23
86	F100	Fluid CA 125	189	943	1472	18
87	F108	Fluid CA 19.9	212	1049	1638	23
88	F109	Urine Immunoglobulins (Ig)	166	828	1293	18
89	F110	Urine Immunoglobulin A	55	267	414	5
90	F111	Urine Immunoglobulin M	55	267	414	5
91	F112	Urine Immunoglobulin G	60	294	465	5
92	F113	Urine Light Chains	202	1017	1587	18
93	F114	Urine Light Chains Kappa	101	506	796	9
94	F115	Urine Light Chains Lambda	101	506	796	9
95	F116	Urine AFP	106	520	810	9
96	F117	Urine CEA	97	478	745	9
97	F118	Urine Beta-HCG	78	391	612	9
98	F119	Urine Total PSA	106	520	810	9
99	F120	Urine Beta2 Microglobulin	253	1270	1983	28
100	F121	Urine CA 15.3	212	1049	1638	23
101	F122	Urine CA 125	189	943	1472	18
102	F123	Urine CA 19.9	212	1049	1638	23
103	F124	Urine Osmolality (Random)	32	170	267	5
104	F125	Urine Osmolality (24 Hours)	32	170	267	5
105	F126	Serum Osmolality	32	170	267	5
106	F130	VMA (Urine - Random Sample)	423	2116	3307	41

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.	eCode	SeviceName	General	Private	Foreign	NC
107	F302	Small biopsy/cell block except lymph node & breast	488	2433	3804	51
108	F303	Breast : Small biopsy/outside block	731	3648	5704	74
109	F304	Lymph node : Small biopsy/outside block	851	4260	6652	87
110	F305	Big Specimen except breast	975	4867	7604	97
111	F306	Big specimen breast	1021	5111	7986	101
112	F307	Outside stained slides only	193	975	1523	18
113	F308	Outside unstained slides with or without blocks (except lymphnode & breast)	437	2190	3422	46
114	F309	Frozen section	244	1219	1900	23
115	F314	IHC on smears	915	1831	2861	92
116	F315	P16 IHC	731	1458	2282	74
117	F316	Big Specimen Colorectal resection	1021	5111	7986	101
118	F317	FDA - Cerb B2	488	2433	3804	51
119	F318	Brain : Small Biopsy / cell block	851	4264	6661	87
120	F319	Soft tissue tumour : Small Biopsy / cell block	731	3648	5704	74
121	F320	ISH	1458	7300	11408	147
122	F321	IHC Tests on special request (upto 3 antibodies)	851	1702	2663	87
123	F322	Set of Recut slides (H&E / Unstained)	133	676	1058	14
124	F323	ALK Amplification IHC Test	1242	2484	3882	124
125	F324	Extended IHC Panel (Upto additional 6 markers)	1587	3174	4959	161
126	F325	Big Specimen Whipple's Resection	975	4867	7604	97
127	F326	Big Specimen Post-Chemotherapy Resection	975	4867	7604	97
128	F327	Big Specimen Werdheim's Resection	975	4867	7604	97
129	F328	Big Specimen Esophagectomy Resection	975	4867	7604	97
130	F329	Big Specimen Amputation	1058	5290	8266	106
131	F330	Big Specimen Hemimandibulectomy	1058	5290	8266	106
132	F331	Big Specimen APR	1058	5290	8266	106
133	F332	Big Specimen Radical Prostatectomy	1481	7406	11574	147
134	F333	Big Specimen Radical Cystectomy	1481	7406	11574	147
135	F334	MSI Immunihistochemistry Testing	1426	2852	4462	143

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.	eCode	SeviceName	General	Private	Foreign	NC
136	F335	EGFR Mutation Detection	3910	7820	12236	391
137	F336	DPYD Mutation Detection	4002	8004	12512	403
138	F337	EBV DNA Detection	1748	3496	5428	175
139	F342	PDL1 SP142 - Ventana	809	1619	2530	82
140	F401	Cytology (FNA)	184	911	1421	18
141	F402	Pap Smear Cytology	106	538	842	9
142	F403	Cytology Non-Gynaec	110	552	860	9
143	F404	Sputum Cytology	23	106	166	0
144	F405	Cytopathology: Outside Slides (Out-In)	110	552	860	9
145	F407	Cytopathology: Outside Slides + Block (Out-In)	110	552	860	9
146	F411	Bronchial Lavage + Brushings Cytology	110	552	860	9
147	F412	Pleural / Pericardial / Peritoneal Fluid Cytology	110	552	860	9
148	F413	Urine / Bladder Washing / Ileal Conduit Urine Cytology	110	552	860	9
149	F414	Cerebro Spinal Fluid (CSF) Cytology	110	552	860	9
150	F415	Oesophageal / Gastric / Colon / Ano-Rectal Lavage + Brushings Cytology	110	552	860	9
151	F416	Nipple Discharge Cytology	110	552	860	9
152	F417	Oral Scrapings Cytology	110	552	860	9
153	F418	Bile / CBD Brushing	110	552	860	9
154	F419	Scrapings From Miscellaneous Sites	110	552	860	9
155	F420	USG Guided FNA with adequacy test by Cytologists (Prof charges)	161	791	1242	14
156	F421	CT Guided FNA/biopsy with adequacy test by Cytologists (Prof charges)	170	856	1339	18
157	F422	Immuno-cytochemistry on smears (ICC)	423	2116	3307	41
158	F423	Liquid-based Cytology (LBC)	189	952	1486	18
159	F618	EBER In Situ Hybridisation	1058	2116	3307	106
160	F620	Interphase FISH Test for HER2/Neu	6348	12696	19835	635
161	F621	Interphase FISH Test for EGFR	5819	11638	18184	584
162	F622	Interphase FISH Test for NMYC	4499	8993	14053	451
163	F623	Interphase FISH Test for 1p19q	5819	11638	18184	584
164	F624	Interphase FISH Test for ALK1	4973	9945	15539	497

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.	eCode	SeviceName	General	Private	Foreign	NC
165	F625	Interphase FISH Test for CMYC	3648	7300	11408	363
166	F627	Interphase FISH Test for ROS1	3330	6665	10414	331
167	F628	Interphase FISH Test for	3491	6983	10911	350
168	F629	MLPA testing in Neuroblastoma	4499	8993	14053	451
169	F630	MYD88 L265 Mutation Detection Test	2594	5184	8101	258
170	F631	JAZF1 - Endometrial Stromal Sarcoma Testing	4830	9660	15093	483
171	F632	YWHAЕ - Endometrial Stromal Sarcoma Testing	4692	9384	14665	469
172	F633	Medulloblastoma - molecular Profiling	8280	16560	25875	828
173	F634	DDISH for HER2/neu Gene Amplification	6440	12885	22545	644
174	F635	TERT Promoter Mutation Assay	2668	5341	9347	267
175	F636	Histone Mutation Detection Assay	4264	8533	14932	428
176	F637	RHOA Mutation Detection Assay	2668	5341	9347	267
177	F638	IRFA/DUSP22 gene rearrangement by FISH	5055	10106	17687	506
178	F651	PCR for IgH Gene Rearrangement	3970	7935	12397	396
179	F652	PCR for TCR Gene Rearrangement	4499	8993	14053	451
180	F653	PCR for N-MYC	1164	2328	3639	115
181	F654	Clonality Analysis	8464	16928	26450	846
182	F655	Mycobacterium Tuberculosis Detection	1932	3864	6035	193
183	F660	GENE SEQUENCING FOR C KIT MUTATIONS	5925	11850	18515	593
184	F661	RT-PCR for PAX3-FKHR Translocation	1849	3703	5787	184
185	F662	RT-PCR for EWS-FLI1 Translocation	1849	3703	5787	184
186	F663	RT-PCR for EWS-ERG Translocation	1849	3703	5787	184
187	F664	RT-PCR for EWS-WT1 Translocation	1849	3703	5787	184
188	F665	RT-PCR for SYT-SSX Translocation	1849	3703	5787	184
189	F666	RT-PCR for SYT-SSX1 Translocation	1849	3703	5787	184

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.	eCode	SeviceName	General	Private	Foreign	NC
190	F667	RT-PCR for SYT-SSX2 Translocation	1849	3703	5787	184
191	F682	RAS Mutation Anaysis	2645	5290	8266	267
192	F683	Interphase FISH Test for EWSR1	3436	6877	10746	345
193	F684	MGMT Gene Promoter methylation	3436	6877	10746	345
194	F685	Detection of BRAFV600E Mutation	2645	5290	8266	267
195	F686	Thyroid Panel (BRAF, KRAS, NRAS, HRAS,	5290	10580	16532	534
196	F687	PAX7-FKHR	1849	3703	5787	184
197	F688	Gene Sequencing for IDH1	2645	5290	8266	267
198	F689	Gene Sequencing for IDH2	2645	5290	8266	267
199	F690	TFE-3 FISH	4628	9260	14467	465
200	F691	FISH test for SYT break-apart analysis	3436	6877	10746	345
201	F692	PDGFRA mutation analysis	2962	5925	9255	294
202	F693	NGS based Targeted Panel for Solid Tumors	18400	36708	43148	1840
203	F802	Routine Biochemical Test (Consolidated)	373	1863	2912	37
204	F810	Glucose Tolerance Test	152	750	1173	14
205	F817	Serum AFP	106	520	810	9
206	F818	Serum CEA	97	478	745	9
207	F819	Serum B-HCG	78	391	612	9
208	F820	Serum Total PSA	106	520	810	9
209	F821	Serum B2-Microglobulin	253	1270	1983	28
210	F822	Serum CA-15.3	212	1049	1638	23
211	F823	Serum CA-125	189	943	1472	18
212	F824	Serum CA-19.9	212	1049	1638	23
213	F829	Serum CRP	55	285	446	5
214	F830	Serum Ferritin	133	658	1026	14
215	F831	Serum CYFRA-21	244	1219	1900	23
216	F832	Serum NSE	244	1219	1900	23
217	F833	Cyclosporin	603	3013	4710	60
218	F836	Methotrexate	184	911	1421	18
219	F837	Serum Free PSA	115	584	911	14
220	F838	Serum Testosterone	115	570	892	9
221	F839	Tacrolimus Drug level estimation	603	3013	4710	60
222	F841	Random Blood Glucose	32	170	267	5
223	F842	Fasting Blood Glucose	32	170	267	5
224	F843	Post-Prandial Blood Glucose	32	170	267	5
225	F845	Glycosylated Hemoglobin	106	529	828	9
226	F846	Fasting Urine Glucose	51	244	382	5
227	F847	Post-Prandial Urine Glucose	51	244	382	5

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228	F848	Blood Glucose by Glucometer strip method	41	212	331	5
229	F849	Lipid Profile	156	782	1224	14
230	F850	Serum Cholesterol	32	170	267	5
231	F851	Serum HDL-Cholesterol	32	170	267	5
232	F852	Serum LDL-Cholesterol	51	244	382	5
233	F853	Serum Triglycerides	41	202	313	5
234	F854	Renal Function Tests	101	506	796	9
235	F855	Serum Urea	32	170	267	5
236	F856	Serum Uric Acid	32	170	267	5
237	F857	Serum Creatinine	32	170	267	5
238	F860	Serum Electrolytes	133	676	1058	14
239	F861	Serum Sodium	32	170	267	5
240	F862	Serum Potassium	32	170	267	5
241	F863	Serum Chlorides	32	170	267	5
242	F864	Serum Bicarbonates	32	170	267	5
243	F865	Liver Function Tests	340	1693	2645	32
244	F866	Serum Protein	32	170	267	5
245	F867	Serum Albumin	32	170	267	5
246	F868	Serum Globulin	32	170	267	5
247	F869	Serum Alkaline Phosphatase	32	170	267	5
248	F870	Total Bilirubin	32	170	267	5
249	F871	Direct Bilirubin	32	170	267	5
250	F872	Indirect Bilirubin	32	170	267	5
251	F873	Serum AST	32	170	267	5
252	F874	Serum ALT	32	170	267	5
253	F876	Serum LDH	32	170	267	5
254	F880	Pancreatic Enzymes	92	455	713	9
255	F881	Serum Amylase	78	382	593	9
256	F882	Serum Lipase	64	327	511	5
257	F883	Body Fluid Investigations (CSF)	170	856	1339	18
258	F884	CSF Glucose	32	170	267	5
259	F885	CSF Protein	69	350	547	9
260	F886	CSF Chloride	32	170	267	5
261	F887	CSF LDH	32	170	267	5
262	F888	Serum Calcium	32	170	267	5
263	F890	Serum Phosphorus	32	170	267	5
264	F891	Serum Magnesium	92	465	727	9
265	F893	Serum Iron	55	267	414	5
266	F894	Serum TIBC	55	267	414	5
267	F895	Serum Acid Phosphatase	106	529	828	9
268	F896	Serum Prostatic Acid Phosphatase	161	791	1242	14
269	F897	VMA (24 Hrs Urine)	423	2116	3307	41
270	F898	5HIAA (24 Hrs Urine)	244	1219	1900	23

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271	F915	Sodium (24 Hours Urine)	32	170	267	5
272	F916	Potassium (24 Hours Urine)	32	170	267	5
273	F917	Chloride (24 Hours Urine)	32	170	267	5
274	F918	Urea (24 Hours Urine)	32	170	267	5
275	F919	Uric Acid (24 Hours Urine)	32	170	267	5
276	F920	Creatinine (24 Hours Urine)	32	170	267	5
277	F921	Calcium (24 Hours Urine)	32	170	267	5
278	F922	Phosphorus (24 Hours	32	170	267	5
279	F923	Protein (24 Hours Urine)	78	382	593	9
280	F924	Creatinine Clearance (24 Hours Urine)	32	170	267	5
281	F925	Urea (Random Urine)	32	170	267	5
282	F926	Uric Acid (Random Urine)	32	170	267	5
283	F927	Creatinine (Random Urine)	32	170	267	5
284	F928	Sodium (Random Urine)	32	170	267	5
285	F929	Potassium (Random Urine)	32	170	267	5
286	F930	Chloride (Random Urine)	32	170	267	5
287	F931	Calcium (Random Urine)	32	170	267	5
288	F932	Phosphorus (Random Urine)	32	170	267	5
289	F933	Protein (Random Urine)	69	350	547	9
290	F934	Fluid Urea	32	170	267	5
291	F935	Fluid Uric Acid	32	170	267	5
292	F936	Fluid Creatinine	32	170	267	5
293	F937	Fluid Sodium	32	170	267	5
294	F938	Fluid Potassium	32	170	267	5
295	F939	Fluid Chloride	32	170	267	5
296	F940	Fluid Bilirubin (Total)	32	170	267	5
297	F941	Fluid Bilirubin (Direct)	32	170	267	5
298	F942	Fluid Bilirubin (Indirect)	32	170	267	5
299	F943	Fluid Cholesterol	32	170	267	5
300	F944	Fluid Triglycerides	41	202	313	5
301	F945	Fluid HDL Cholesterol	32	170	267	5
302	F946	Fluid LDL Cholesterol	51	244	382	5
303	F962	Fluid Glucose	32	170	267	5
304	F963	Fluid Protein	32	170	267	5
305	F964	Fluid Albumin	32	170	267	5
306	F965	Fluid Globulin	32	170	267	5
307	F966	Fluid Alkaline Phosphatase	32	170	267	5
308	F967	Fluid AST	32	170	267	5
309	F968	Fluid ALT	32	170	267	5
310	F969	Fluid Calcium	32	170	267	5
311	F970	Fluid Phosphorus	32	170	267	5
312	F971	Fluid Amylase	41	202	313	5
313	F972	Fluid Lipase	64	327	511	5
314	F973	Fluid LDH	32	170	267	5

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315	F974	Serum Creatinine for 24 hrs CCT	32	170	267	5
316	F977	Bence Jones Protein (24 Hours Urine)	143	718	1122	14
317	F999	Serum Gamma Glutamyl Transferase (GGT)	129	635	994	14
318	G101	Urine Examination	23	106	166	0
319	G102	Stool Examination	23	106	166	0
320	G103	Culture & Sensitivity	129	644	1007	14
321	G105	Routine Culture (Fungal)	106	538	842	9
322	G106	CULTURE & SENSITIVITY (AFB)	391	1946	3041	37
323	G107	Routine Culture (Anaerobic)	106	538	842	9
324	G108	Gene Xpert for Detection of MTB and Rifampicin Resistance	423	2116	3307	41
325	G111	Cultures for Helicobacter Pylori	129	644	1007	14
326	G113	Mantoux Test	14	74	115	0
327	G119	AFB Culture only	115	584	911	14
328	G120	Automated Identificaiton & Antibiotic Susceptibility Testing (Bacteria & Yeast)	184	911	1421	18
329	G122	VDRL	23	106	166	0
330	G123	Paul Bunnel Test (Infectious Mononucleosis / E)	92	455	713	9
331	G126	Cytomegalovirus IgG Antibodies	92	455	713	9
332	G127	Cytomegalovirus IgM Antibodies	106	538	842	9
333	G129	Hepatitis B Surface Antigen (HBsAg)	83	414	644	9
334	G130	Hepatitis B 'e' Antigen (HBeAg)	152	750	1173	14
335	G131	Hepatitis B Core IgM Antibodies (HBc IgM)	179	897	1403	18
336	G132	Hepatitis B Core IgG Antibodies (HBc IgG/Total)	120	593	925	14
337	G133	Hepatitis B Surface Antibodies (Anti - HBs)	120	593	925	14
338	G134	Hepatitis C Antibodies (Anti HCV)	207	1035	1619	23
339	G136	Hepatitis B 'e' Antibodies (Anti HBe)	152	750	1173	14
340	G137	Herpex Simplex Virus IgG (HSV IgG)	92	455	713	9
341	G138	Herpex Simplex Virus IgM (HSV IgM)	92	455	713	9

Schedule of charges						
	eCode	SeviceName	General	Private	Foreign	NC
342	G139	Cryptococcus Antigen by Latex Agglutination	179	897	1403	18
343	G140	HPV DNA (Qualitative)	267	1339	2093	28
344	G144	HPV DNA/ Genotype	635	3174	4959	64
345	G151	Fungal Identification & Susceptibility Testing	276	1385	2167	28
346	G161	RA Test	32	161	248	5
347	G162	ASO Titre	32	161	248	5
348	G171	HIV Antibodies	78	400	630	9
349	G201	Gram's Stain	14	74	115	0
350	G202	Ziehl Neelsen (AFB) Stain	14	74	115	0
351	G203	Lactophenol Cotton Blue	14	74	115	0
352	G204	Giemsa Stain for Tzanck Smear	14	74	115	0
353	G205	India Ink Preparation for Cryptococcus	14	74	115	0
354	G206	Staining for Cryptosporidium SPP	14	74	115	0
355	G207	Calcofluor White Stain for Fungus	23	106	166	0
356	G208	KOH Mount for Fungus	14	74	115	0
357	G209	Staining for Pneumocystis Carinii	23	106	166	0
358	G210	Fluorescent Staining	23	106	166	0
359	G251	Stool for Occult Blood	14	74	115	0
360	G252	Fluid for Bile Salts & Bile Pigments	14	74	115	0
361	G253	ADA Level	74	368	580	9
362	G254	Hepatitis A Virus (IgM Antibodies)	235	1164	1817	23
363	G255	Hepatitis E Virus (IgM Antibodies)	152	764	1191	14
364	G256	Urine Pregnancy Test (UPT)	14	74	115	0
365	G258	Automated AFB Culture	294	1472	2300	28
366	G259	Automated AFB Susceptibility (5 Drugs)	874	4379	6845	87
367	G260	Automated Blood Culture	170	856	1339	18
368	G261	Serum Procalcitonin Level	281	1398	2180	28
369	G262	Dengue IgM and IgG Antibodies	92	455	713	9
370	G263	Leptospira IgM Antibody	55	267	414	5
371	G264	Chikangunya IgM Antibody	46	235	363	5
372	G265	Serum Galactomannan Level by ELISA	133	667	1040	14
373	G266	Serum Candidamannan Level by ELISA	133	667	1040	14
374	G267	Malaria Antigen Detection	28	147	230	5

Schedule of charges						
	eCode	ServiceName	General	Private	Foreign	NC
375	G268	Clostridium Difficile Toxin Detection	290	1458	2282	28
376	G269	Antigen detection for virus in stool	557	1113	1734	55
377	G401	RT-PCR (Quantitative) for Hepatitis B Virus DNA	2102	4200	6564	212
378	G402	RT-PCR (Quantitative) for Hepatitis C Virus RNA	2102	4200	6564	212
379	G403	RT-PCR (Quantitative) for HIV RNA	2102	4200	6564	212
380	G404	RT-PCR for CMV DNA	2433	4867	7604	244
381	G405	COVID-19 Testing	1610	3220	4140	165
382	H001	Blood Grouping	92	184	290	9
383	H002	Cross Matching	129	258	258	14
384	H003	Testing for Pheresis Donors	391	782	1224	41
385	H006	Antiglobulin Test (Direct)	83	170	267	9
386	H007	Antiglobulin Test (Indirect)	225	455	713	23
387	H008	Cold Agglutinins	78	161	248	9
388	H009	Secretory Status	225	455	713	23
389	H010	AIHA Work Up	271	538	842	28
390	H206	Whole Blood	483	966	966	51
391	H207	Pack Cells (As per State Govt. rules Rs. 1200 is maximum)	552	1104	1104	55
392	H208	Washed Packed Cells	690	1380	1380	69
393	H210	Platelet Concentrate (RDP)	207	414	414	23
394	H211	Platelet Concentrate (SDP) *** Increase 50% of C for	5060	10120	10120	506
395	H212	PBSC/Leukapheresis	7884	15769	24638	787
396	H213	Bone Marrow Processing on Cell Separator	5874	11748	18359	589
397	H214	Bone Marrow Processing HES Red Cell Separation	3597	7194	11242	359
398	H215	Bone Marrow Processing Plasma Separation	451	897	1403	46
399	H217	Leucoreduced Red Cells	1012	2024	2024	101
400	H218	Leucoreduction of Platelet Concentrates	690	1380	1380	69
401	H219	Irradiation of Blood Products	239	478	745	23
402	H220	CPD Bags	41	83	133	5
403	H221	Blood Bank Deposit	391	782	1224	41
404	H222	Platelet Concentrate	2530	5060	5060	253
405	H224	Processing for Leukoreduction	363	731	1141	37
406	H225	Leucoagglutinins	216	432	676	23
407	H226	HLA-A, B, DRB1 (Sequence Specific Primer - SSP)	4747	9490	14830	474

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
408	H227	HLA-C, DQB1 (Sequence Specific Primer - SSP)	3390	6780	10598	340
409	H228	Pediatic Whole Blood	313	621	621	32
410	H229	Pediatic Packed Cells	405	805	805	41
411	H230	Cryoprecipitate	92	184	184	9
412	H231	FFP/FVIII Def. Plasma/PRP	207	414	414	23
413	H232	Donor Specific Antibodies (DSA)	3680	7360	11500	368
414	H233	Panel Reactive Antibodies (PRA) class I	1380	2760	4315	138
415	H234	Panel Reactive Antibodies (PRA) class II	1380	2760	4315	138
416	H235	Single Antigen Class I	5980	11960	18690	598
417	H236	Single Antigen Class II	5980	11960	18690	598
418	H237	HLA-A, B, DRB1 (Sequence Based Typing - SBT)	4600	9200	14375	460
419	H238	HLA-A, B, C, DRB1, DQB1, DPB1 (Sequence Based Typing - SBT)	6900	13800	21565	690
420	H239	HLA-A, B, DRB1(Sequence Specific Oligonucleotide - SSO)	3588	7176	11215	359
421	H240	HLA-C, DQB1(Seuence Specific Oligonucleotide - SSO)	2392	4784	7475	239
422	H241	Packed Cells NBC	552	966	966	55
423	H500	DMSO for Cryoperservation	3496	6992	10925	350
424	IA04	USG Guided RF Ablation	2774	9246	14449	276
425	IB02	CT Guided RF Ablation	2774	9246	14449	276
426	IC01	MRI Abdomen + MR CP	2351	7829	12231	235
427	I004	Outside Reporting of X-Ray, per Exam	0	97	147	0
428	I005	Outside Reporting of X-Ray Special Procedures	0	626	975	0
429	I006	Outside Reporting of Mammogram	0	391	612	0
430	I007	Outside Reporting of CT	0	1219	1900	0
431	I008	Outside Reporting of MRI	0	1587	2479	0
432	I009	Video Recording of USG / DSA, etc	87	432	676	9
433	I010	Digital Film per Plate	147	147	147	147
434	I011	Outside CD / Film upload	46	46	46	46
435	I021	X-Ray Skull	87	446	695	9
436	I027	X-Ray OPG / Dental	87	446	695	9
437	I030	X-Ray Spine AP	87	446	695	9
438	I031	X-Ray Spine Lateral	87	446	695	9
439	I038	X-Ray Pelvis	87	446	695	9

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
440	I042	X-Ray Neck AP	87	446	695	9
441	I043	X-Ray Neck Lateral	87	446	695	9
442	I050	X-Ray Upper Limb	87	446	695	9
443	I070	X-Ray Lower Limb	87	446	695	9
444	I090	X-Ray Chest	87	446	695	9
445	I092	X-Ray Abdomen	87	446	695	9
446	I095	X-Ray KUB	87	446	695	9
447	I099	X-Ray Skeletal Survey	929	4655	7273	92
448	I100	X-Ray Portable	120	607	948	14
449	I101	X-Ray PNS	92	469	731	9
450	I102	X-Ray Sternum AP	92	469	731	9
451	I103	X-Ray Sternum Oblique	92	469	731	9
452	I104	X-Ray Sternum Lateral	92	469	731	9
453	I121	X-Ray Sialography	262	1311	2052	28
454	I122	X-Ray Barium Swallow	267	1343	2098	28
455	I123	X-Ray Conray Swallow	267	1343	2098	28
456	I124	X-Ray Barium Meal	368	1831	2861	37
457	I125	X-Ray Barium Meal Follow-Through	764	3809	5952	78
458	I126	X-Ray Small Bowel Enema	764	3809	5952	78
459	I127	X-Ray Barium Enema for Colon	764	3809	5952	78
460	I128	X-Ray Tube Cholangiogram	152	750	1173	14
461	I129	X-Ray ERCP	943	4710	7360	92
462	I130	X-Ray IVP	534	2677	4181	55
463	I131	X-Ray Cystogram	262	1311	2052	28
464	I132	X-Ray MCU	391	1960	3059	41
465	I133	X-Ray Retrograde Urethrogram	267	1343	2098	28
466	I134	X-Ray Retrograde	267	1343	2098	28
467	I141	X-Ray Sinogram	193	975	1523	18
468	I142	X-Ray Fistulogram	193	975	1523	18
469	I143	X-Ray Cologram	193	975	1523	18
470	I144	X-Ray Loopogram	193	975	1523	18
471	I145	X-Ray Nephrostogram	193	975	1523	18
472	I146	X-Ray Gastrograhpic Enema (Colon)	764	3809	5952	78
473	I150	Consultation (New Case)	0	920	920	0
474	I151	Fluoroscopy Guided Biopsy	543	1803	2820	55
475	I152	Fluoroscopy Guided Block	543	1803	2820	55
476	I153	Fluoroscopy Guided J Needle Bone Biopsy	543	1803	2820	55
477	I154	Fluoroscopy Guided NGT Insertion	474	1587	2479	46
478	I155	Fluoroscopy Guided Drainage/ Biopsy	1877	6256	9775	189

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
479	I156	Fluoroscopy Guided Indwelling Catheter Placement	800	2668	4168	78
480	I159	Lymphangiography	1132	3777	5902	115
481	I160	Bronchography	915	3045	4761	92
482	I161	Myelography	796	2650	4140	78
483	I162	Myelography with CT	1178	3919	6123	120
484	I163	Venography - Upper Limb	1132	3777	5902	115
485	I164	Venography - Lower Limb	1132	3777	5902	115
486	I165	Venography - Systemic	2263	7544	11785	225
487	I170	Angiography	1352	4508	7043	133
488	I171	Ophthalmic Artery Chemo Infusion	1297	4324	6757	129
489	I180	Angio Embolization	2042	6813	10644	202
490	I191	PTBD	1132	3777	5902	115
491	I192	PTBD Stenting	2774	9246	14449	276
492	I193	PCN (single kidney)	1132	3777	5902	115
493	I194	PCN Stenting	1352	4508	7043	133
494	I195	Trans-Jugular Intrahepatic Porto-Systemic Shunt (TIPS)	1969	6569	10267	198
495	I197	Arterial Stenting	1969	6569	10267	198
496	I198	Thrombolysis / Thrombectomy	1969	6569	10267	198
497	I199	Angioplasty	1969	6569	10267	198
498	I200	Vascular Stenting	1969	6569	10267	198
499	I201	Brush Biopsy	1716	5713	8929	170
500	I202	Vertebroplasty	1716	5713	8929	170
501	I203	PCN (B/L)	1969	6560	10249	198
502	I204	DJ Stenting	1495	4977	7779	147
503	I205	Abdominal Abscess	920	3073	4802	92
504	I206	Percutaneous Gastrostomy / Jejunostomy	2084	6941	10842	207
505	I208	Contrast Study	189	635	994	18
506	I209	Osteoplasty	1900	6325	9885	189
507	I210	Cerebral Angiography	1716	5722	8942	170
508	I211	Chemo Embolisation	5474	18253	28515	547
509	I212	Radio Embolisation	6348	21160	33065	635
510	I213	Stent-Graft Deployment	6348	21160	33065	635
511	I214	Central Venous Access	1113	3708	5791	110
512	I215	IVC Filter Deployment	1900	6325	9885	189
513	I216	IVC Filter Retrieval	1058	3533	5520	106
514	I217	SCLEROTHERAPY	1279	4264	6661	129
515	I218	Test Occlusion	1937	6454	10083	193
516	I219	3D Rotational Angiography	1113	3708	5791	110
517	I220	Foreign Body Retrieval	1900	6325	9885	189
518	I221	Radio Frequency Ablation	2774	9246	14449	276
519	I222	Closure Device Insertion	5520	18400	28750	552

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
520	I223	Tracheo-bronchial stenting	5520	18400	28750	552
521	I224	Image Guided PICC	1899	6325	9885	188
522	I225	DSA Port Placement	8280	28060	43700	828
523	I226	EBUS guided FNA	2773	9246	14448	276
524	I227	Image Guided Endovenous Ablation	2773	9246	14448	276
525	I321	Mammography Single Breast	106	529	828	9
526	I322	Mammography Both Breasts	212	1058	1651	23
527	I324	Mammography - Biopsy	271	1352	2116	28
528	I325	Mammography - Localization	396	1969	3073	41
529	I326	Mammography of Specimen	106	529	828	9
530	I328	Non-Ionic Contrast and Consumable Charges	680	680	680	680
531	I329	Ionic Oral Contrast and Consumable Charges	133	133	133	133
532	I330	Iso-Osmolar Contrast and Consumable Charges	1748	1748	1748	1748
533	I420	USG Abdomen	179	902	1403	18
534	I460	USG Pelvis	179	897	1403	18
535	I461	Transrectal sonography	253	1270	1983	28
536	I462	TRUS Guided biopsy	391	1946	3041	37
537	I463	Trans vaginal sonography	253	1270	1983	28
538	I500	USG Abdomen & Pelvis	340	1702	2663	32
539	I510	USG Neck	179	897	1403	18
540	I550	USG Thorax	179	897	1403	18
541	I560	USG Breast	179	897	1403	18
542	I565	USG Upper Extremity	179	897	1403	18
543	I566	USG Portable Single region	276	1380	2157	28
544	I567	USG Portable Two region	460	2300	3593	46
545	I568	USG Guided Procedure	317	1587	2479	32
546	I569	USG KUB	179	897	1403	18
547	I570	USG Lower Extremity	179	897	1403	18
548	I571	USG Doppler Upper	294	1463	2286	28
549	I572	USG Doppler Lower	294	1463	2286	28
550	I573	USG Doppler Hepatoportal	294	1463	2286	28
551	I574	USG Doppler Renal	294	1463	2286	28
552	I575	USG Doppler Carotid	294	1463	2286	28
553	I576	USG Doppler IVC	294	1463	2286	28
554	I577	USG Targetted	92	460	718	9
555	I578	USG Doppler - portable Single Region	317	1587	2479	32
556	I579	USG Doppler - Single	294	1463	2286	28
557	I580	USG Axilla/ Groin/ Scrotum (Small Parts)	179	897	1403	18
558	I598	USG Guided FNAC	290	1440	2249	28
559	I600	CT Brain Plain and Contrast	1168	3892	6086	115
560	I601	CT Brain Plain	695	2318	3620	69

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
561	I602	CT PNS	1242	4140	6468	124
562	I603	CT Nasopharynx	1242	4140	6468	124
563	I604	CT Sella	1242	4140	6468	124
564	I605	CT Temporal Bone	1242	4140	6468	124
565	I606	CT Orbits	1242	4140	6468	124
566	I607	CT HRCT	1242	4140	6468	124
567	I620	CT Neck	1168	3892	6086	115
568	I630	CT Head & Neck	1900	6325	9885	189
569	I640	CT Neck & Thorax	1826	6081	9504	184
570	I650	CT Thorax	1380	4600	7190	138
571	I670	CT Abdomen	1380	4600	7190	138
572	I680	CT Thorax & Abdomen	2484	8275	12926	248
573	I690	CT Pelvic Region	1352	4508	7043	133
574	I691	S.Creatinine- Point of Care Testing	322	322	322	322
575	I692	Low Dose CT Scan	2116	6992	10902	211
576	I700	CT Abdomen & Pelvis	2594	8643	13506	258
577	I710	CT Thorax & Abdomen & Pelvis	2921	9734	15208	290
578	I720	CT Spine	1380	4600	7190	138
579	I730	CT Upper Limb	1380	4600	7190	138
580	I740	CT Lower Limb	1380	4600	7190	138
581	I741	Digital Scanogram	225	750	1173	23
582	I750	CT Angiogram	2263	7544	11785	225
583	I760	CT 3D Reconstruction	2263	7544	11785	225
584	I781	CT Guided Biopsy FNAC	2157	7194	11242	216
585	I782	CT Guided Truecut Biopsy	2157	7194	11242	216
586	I783	CT Guided Drainage / Localisation	1095	3648	5704	110
587	I784	CT Guided Vertebroplasty	1969	6569	10267	198
588	I785	CT Perfusion (Additional Charge)	658	2190	3422	64
589	I786	CT Defusion (Additional Charge)	658	2190	3422	64
590	I787	CT DIEP	2484	8280	12940	248
591	I788	CT Guided RF Ablation	2774	9246	16183	276
592	I789	CT Dental	1095	3652	5704	110
593	I790	CT Limited	552	1840	2875	55
594	I791	CT 'J' Needle Bone Biopsy	2539	8464	13225	253
595	I792	Planning scon for Hapatic Resection	2484	8280	12939	248
596	I801	MRI BRAIN	1605	5354	8367	161
597	I802	MRI PNS	1605	5354	8367	161
598	I810	MRI Neck	1573	5239	8183	156
599	I820	MRI Head & Neck	2263	7544	11785	225
600	I830	MRI Upper Limb	1573	5239	8183	156
601	I840	MRI Thorax	1573	5239	8183	156

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
602	I841	MRI Breast	1573	5239	8183	156
603	I842	MRI guided breast biopsy	4053	13510	21109	405
604	I860	MRI Abdomen	1573	5239	8183	156
605	I890	MRI Pelvis	1573	5239	8183	156
606	I900	MRI Abdomen & Pelvis	2263	7544	11785	225
607	I910	MRI Spine (One Region)	1573	5239	8183	156
608	I911	MRI Whole Spine	2042	6813	10644	202
609	I920	MRI Lower Limb	1605	5354	8363	161
610	I921	MRI Contrast	791	2650	4140	78
611	I930	MRI Angiogram	1352	4508	7043	133
612	I940	MRI Venography	1656	5520	8625	166
613	I950	MRI Myelogram	1132	3777	5902	115
614	I960	MR Cholangio-Pancreatogram (CP) (Additional Charge)	1132	3777	5902	115
615	I970	MRI Spectroscopy (Additional Charge)	1132	3777	5902	115
616	I971	MRI Brain Tumor Protocal	2562	8538	13345	258
617	I972	MRI Extremity with dynamic contrast	2521	8400	13124	253
618	I973	MRI Extremity with Limb Screening	2521	8400	13124	253
619	I974	MRI Prostate	1707	5695	8896	170
620	I975	MRI Cervix	1707	5695	8896	170
621	I976	MRI Penis	1707	5695	8896	170
622	I977	MRI DTI	1132	3777	5902	115
623	I978	MRI Cardic	1707	5695	8896	170
624	I979	MRI Spine Screening	1132	3777	5902	115
625	I980	MRI Temporal Bone (HRCT cuts)	2208	7360	11500	221
626	I991	MRI Functional (Additional Charge)	1132	3777	5902	115
627	I992	MRI Diffusion (Additional Charge)	695	2318	3620	69
628	I993	MRI Perfusion (Additional Charge)	1132	3777	5902	115
629	I995	MRI Limited	1132	3777	5902	115
630	I996	Whole body MRI	3648	12167	19012	363
631	I997	MRI for Therapy Planning	1095	3648	5704	110
632	J001	Consultation (New Case)	0	920	920	0
633	J002	Cross Consultation (Medical Oncology)	0	552	552	0
634	J003	Follow-Up Evaluation Visit (Medical Oncology)	0	552	552	0
635	J101	Chemotherapy Planning Charges (Full Protocol) (Medical Oncology)	0	5290	8266	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
636	J102	Intravenous Bolus (per	161	796	1242	14
637	J103	Bone Marrow Aspiration/Biopsy	179	897	1403	18
638	J104	Chemotherapy Indoor Charges per Cycle (Medical Oncology)	0	4761	7438	0
639	J105	Chemotherapy Daycare Charge per Day (Medical Oncology)	0	423	662	0
640	J107	Chemotherapy- Intramuscular &	0	129	198	0
641	J108	Induction Chemotherapy Planning & Delivery	0	31740	49593	0
642	J109	Induction Chemotherapy Planning & Delivery (Outpatient)	0	24334	38024	0
643	J110	Lumbar Puncture	138	695	1086	14
644	J111	Intrathecal Chemotherapy	179	897	1403	18
645	J112	Pleural Fluid Tapping	179	897	1403	18
646	J113	Ascitic Tapping	179	897	1403	18
647	J114	Pericardial Tapping	400	2010	3142	41
648	J116	Scalp Cooling Procedure	276	1288	2024	27
649	J201	Bone Marrow Transplant (Allogenic)	0	137540	137540	0
650	J203	Bone Marrow Transplant (Autologous)	0	105800	105800	0
651	J204	Allogenic Matched Unrelated (MUD)/Cord Transplant	0	179860	179860	0
652	J402	First Consultation (ACT Clinic)	0	920	920	0
653	J404	Follow-Up Consultation (ACT Clinic)	0	552	552	0
654	J501	Pre-Insertion +	161	791	1242	14
655	J502	Dressing	64	317	497	5
656	J503	Insertion of PICC	317	1587	2479	32
657	J609	RT-PCR Nested IGH Chain Gene rearrangement	1523	3045	4761	152
658	J610	RT-PCR Nested, TCR Gene Rearrangement	1523	3045	4761	152
659	J611	RT-PCR Hot Start	2130	4264	6661	212
660	J613	Gene rearrangement by Direct Sequencing	3648	7300	11408	363
661	J614	Mutation analysis by ASO PCR	3648	7300	11408	363
662	J615	DIRECT SEQUENCING FOR EGFR MUTATION	3041	6081	9504	304
663	J616	RT-PCR for RAS / BRAF mutation analysis	4867	9734	15208	488

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
664	J617	RT-PCR for EBV analysis	4867	9734	15208	488
665	J618	Direct Sequencing for RAS mutation analysis	4867	9734	15208	488
666	J620	Snap shot PCR for EGFR,RAS, and PTEN	6215	12429	19426	621
667	J621	RT-PCR for EGFR Mutation analysis	4867	9734	15208	488
668	J622	Direct Sequencing for DPD Testing	4867	9734	15208	488
669	J623	NGS Platform - limited Panel (10 genes)	6900	13800	21528	690
670	J624	NGS Platform - extended Panel (> 50 genes)	13800	27600	43125	1380
671	K001	Consultation (General Medicine)	0	920	920	0
672	K002	Cross Consultation (General Medicine)	0	552	552	0
673	K003	Follow-Up Consultation (General Medicine)	0	552	552	0
674	K101	Electrocardiogram	55	285	446	5
675	K107	PFT (Spirometry)	143	708	1109	14
676	K108	Complete PFT with Diffusion and Lung Volume Study	225	1122	1753	23
677	K112	Diffusion Study	97	488	759	9
678	K113	Lung Volume Study	110	561	874	9
679	K116	Echocardiogram Bedside (H)	244	1219	1900	23
680	K117	Echocardiogram Bedside (P)	0	1831	2861	0
681	K118	Echocardiogram + Color Doppler (H)	193	975	1523	18
682	K119	Echocardiogram + Color Doppler (P)	0	975	1523	0
683	K120	Trans Oesophageal Echocardiograph (H)	368	1831	2861	37
684	K121	Trans Oesophageal Echocardiograph (P)	0	1831	2861	0
685	K122	Cardiac Stress Test (H)	124	612	957	14
686	K123	Cardiac Stress Test (P)	0	856	1339	0
687	K124	Cardiopulmonary Stress Test (H)	212	1058	1651	23
688	K125	Cardiopulmonary Stress Test(P)	0	1587	2479	0
689	K301	Cross Consultation (Psychiatry)	0	552	552	0
690	K302	Follow-Up Consultation (Psychiatry)	0	552	552	0
691	K303	Psychometric Testing	74	368	580	9
692	K401	Cross Consultation (Pulmonary Unit)	0	552	552	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
693	K402	Follow-Up Consultation (Pulmonary Unit)	0	552	552	0
694	L101	Cross Consultation (Nephrology)	0	552	552	0
695	L102	Follow-Up Consultation (Nephrology)	0	552	552	0
696	L103	Cross Consultation (Dermatologist)	0	552	552	0
697	L104	Follow up Consultation (Dermatologist)	0	552	552	0
698	L105	Cross Consultation (Endocrinologist)	0	552	552	0
699	L106	Follow up Consultation (Endocrinologist)	0	552	552	0
700	L107	Cross Consultation (Ophthalmologist)	0	552	552	0
701	L108	Follow up Consultation (Ophthalmologist)	0	552	552	0
702	L111	Peritoneal Dialysis	225	1132	1771	23
703	L112	Femoral Vein	92	455	713	9
704	L113	Subclavian Vein Catheterisation	133	676	1058	14
705	L114	CAVH	212	1049	1638	23
706	L115	Renal Biopsy	92	455	713	9
707	L301	Cross Consultation (Neurology)	0	552	552	0
708	L302	Follow-Up Consultation (Neurology)	0	552	552	0
709	L401	Cross Consultation (Neurosurgery)	0	552	552	0
710	L402	Follow-Up Consultation (Neurosurgery)	0	552	552	0
711	L501	Cross Consultation (ENT)	0	552	552	0
712	L502	Follow-Up Consultation	0	552	552	0
713	L601	Cross Consultation (Clinical Haematology)	0	552	552	0
714	L602	Follow-Up Consultation (Clinical Haematology)	0	552	552	0
715	L701	Cross Consultation (Hepatology)	0	552	552	0
716	L702	Follow-Up Consultation (Hepatology)	0	552	552	0
717	M001	First Consultation (Digestive Diseases)	0	920	920	0
718	M002	Cross Consultation (Digestive Diseases)	0	552	552	0
719	M003	Follow-Up Evaluation (Digestive Diseases)	0	552	552	0

Schedule of charges						
.	eCode	ServiceName	General	Private	Foreign	NC
720	M004	Chemotherapy Consultation (Full Protocol) (Digestive Diseases)	0	5290	8266	0
721	M005	Intravenous Bolus (per	0	791	1242	0
722	M006	TPN Therapy (New Plan)	0	3045	4761	0
723	M007	Enteral Nutrition Therapy (New Plan)	0	2318	3620	0
724	M008	Home Enteral Nutrition Care (New Plan)	0	1458	2282	0
725	M009	Home TPN Therapy (New Plan)	0	3045	4761	0
726	M016	Chemotherapy Indoor Charges per Cycle (Digestive Diseases)	0	4761	7438	0
727	M017	Chemotherapy Daycare Charges per Day (Digestive Diseases)	0	423	662	0
728	M018	Dietary Counseling Oral (New Plan)	0	750	1173	0
729	M019	REE Estimation	0	2921	4563	0
730	M020	Body Composition	0	1458	2282	0
731	M022	Inpatient Care (Neutropenia Care/ Hepatitis)	0	3045	4761	0
732	M023	TPN Therapy (Follow-up/ Replan)	0	2139	3340	0
733	M024	TPN Daily Monitoring	0	791	1242	0
734	M025	Enteral Nutrition Therapy (Follow-up/ Replan)	0	1619	2530	0
735	M026	Enteral Nutrition Therapy Daily Monitoring	0	529	828	0
736	M027	Dietary Counseling Oral (Follow-up)	0	529	828	0
737	M051	Endoscopy Room Charges Grade I	262	1311	2052	28
738	M052	Endoscopy Room Charges Grade II	359	1789	2792	37
739	M053	Endoscopy Room Charges Grade III	524	2613	4085	51
740	M054	Endoscopy Room Charges Grade IV	690	3436	5373	69
741	M055	Endoscopy Room Charges Grade V	1044	5226	8165	106
742	M056	Endoscopy Room Charges Grade VI	1587	7944	12415	161
743	M057	Endoscopy Room-Cholangioscopy Probe Charge	18400	18400	18400	18400

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
744	M058	Endoscopy Room- Sedation (NAAS)	124	612	957	14
745	M059	Endoscopy Room- Video Recording	106	212	331	9
746	M060	Endoscopy Room- Color Print Images/ Report	106	212	331	9
747	M061	Helicobacter Pylori Breath Test	290	1458	2282	28
748	M101	Rigid Sigmoidoscopy	0	1578	2461	0
749	M102	Tissue Sampling- Biopsy	0	1578	2461	0
750	M103	Oesophageal ILRT Tube Placement- Over wire only	0	1578	2461	0
751	M104	Peg Tube Removal/ Exchange	0	764	1191	0
752	M105	Ryles Tube Placement	0	1458	2282	0
753	M106	Nasogastric tube Over wire & Non-Fluroscopic	0	1578	2461	0
754	M107	Tissue Sampling- Cytology	0	1458	2282	0
755	M108	Gastric Lavage/ Decompression	0	764	1191	0
756	M109	Asctic Fluid Aspiration (DDCN)	179	897	1403	18
757	M110	Pleural Fluid Tapping	179	897	1403	18
758	M111	Pericardial Tapping (DDCN)	400	2010	3142	41
759	M112	Liver Biopsy	0	2318	3620	0
760	M113	CSF tapping (DDCN)	138	695	1086	14
761	M114	CVP Access (DDCN)	152	764	1191	14
762	M115	Indwelling Peritoneal Catheter Placement (DDCN)	0	1578	2461	0
763	M116	Percutaneous Ethanol Injection	0	2318	3620	0
764	M117	Needle Aspiration (Non USG Guided)	0	764	1191	0
765	M206	Flexible Sigmoidoscopy	0	4623	7222	0
766	M207	Pile Banding / Injection	0	4623	7222	0
767	M208	Flexible Sigmoidoscopy (repeat)	0	3238	5060	0
768	M301	Sideviewing Duodenoscopy	0	5419	8464	0
769	M303	Colonoscopy	0	5419	8464	0
770	M305	Dye Chromoendoscopy (Standard Imaging)	0	5419	8464	0
771	M306	Jejuno-Enteroscopy (Push Type Limited Exam)	0	5419	8464	0
772	M309	EUS of Rectum/Sigmoid Colon	0	5419	8464	0
773	M310	Endosonoprobe Examination	0	5419	8464	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
774	M311	Endoscopic Naso-gastric Tube Placement (Non-Fluroscopic)	0	5419	8464	0
775	M312	Esophageal Dilation (Non-Fluroscopic)- 1 session	0	5419	8464	0
776	M313	Foreign Body Removal (Non-Fluroscopic)	0	5419	8464	0
777	M314	Hemostasis: Variceal	0	5419	8464	0
778	M315	Hemostasis: Clipping	0	5419	8464	0
779	M316	Hemostasis: Glue Injection	0	5419	8464	0
780	M317	Hemostasis: Bicap Coagulation	0	5419	8464	0
781	M318	Hemostasis: Injection	0	5419	8464	0
782	M323	Diagnostic Upper GI Endoscopy	0	4945	7728	0
783	M324	Diagnostic Upper GI Endoscopy (repeat)	0	3786	5920	0
784	M325	Colonoscopy (Repeat)	0	3786	5920	0
785	M326	Clip Marking	0	5419	8464	0
786	M327	Dye Chromoendoscopy: Standard Imaging (repeat)	0	3786	5920	0
787	M328	Esophageal Dilation (Non-Fluroscopic) (partial)	0	3786	5920	0
788	M329	ERCP Diagnostic Non-cholangioscopy (repeat)	0	3786	5920	0
789	M330	Hemostasis: Argon Plasma Coagulation	0	5419	8464	0
790	M331	Hemostasis: Sclerotherapy	0	5419	8464	0
791	M332	Hemostasis: Loop Ligation	0	5419	8464	0
792	M333	Polypectomy Cold Snare / Hot Biopsy	0	5419	8464	0
793	M334	Jejunio-Enteroscopy (Push Type Limited Exam- Repeat)	0	3786	5920	0
794	M401	EUS: Pancreas and Bile Ducts	0	6928	10828	0
795	M403	Esophageal Stenting	0	6928	10828	0
796	M404	Percutaneous Endoscopic Gastrostomy	0	6928	10828	0
797	M405	Percutaneous Endoscopic Jejunostomy	0	6928	10828	0
798	M406	Achalasia Dilatation	0	6928	10828	0
799	M407	Gastric or Pyloric Dilation (Non-Fluroscopic)- 1 session	0	6928	10828	0
800	M408	Rectal or Colonic Dilation (Non-Fluroscopic)- 1 session	0	6928	10828	0
801	M409	Polypectomy (upto 2 polyps and stalked)	0	6928	10828	0
802	M411	Ablation: Laser Therapy	0	6928	10828	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
803	M412	Ablation: Argon Plasma Coagulation	0	6928	10828	0
804	M413	ERCP Sphincterotomy	0	6928	10828	0
805	M414	Endoscopic Cyst Drainage	0	6928	10828	0
806	M415	ERCP Naso-Biliary Drainage	0	6928	10828	0
807	M416	Biliary/ Pancreatic Cytology	0	2700	4214	0
808	M417	Magnification Electronic Chromoendoscopy (NBI/FICE/AFI)	0	6928	10828	0
809	M418	Magnification Dye Chromoendoscopy	0	6928	10828	0
810	M419	Capsule Endoscopy Imaging	0	9246	14449	0
811	M420	Capsule Endoscopy Imaging (Repeat)	0	6477	10115	0
812	M421	Clip Application (Non-Hemostatic, Markers)	0	3703	5787	0
813	M422	Ablation: Cryotherapy/ PDT	0	6031	9421	0
814	M423	Ablation: Cryotherapy/ PDT (Partial)	0	4223	6596	0
815	M424	Ablation: Argon Plasma Coagulation (Partial)	0	4858	7590	0
816	M425	Gastric or Pyloric Dilation-Non-Fluoroscopic (Partial)	0	4858	7590	0
817	M426	Rectal or Colonic Dilation-Non-Fluoroscopic (Partial)	0	4858	7590	0
818	M427	Achalasia Dilatation (Partial)	0	4858	7590	0
819	M428	ERCP Naso-Pancreatic Drainage	0	6928	10828	0
820	M429	Magnification Electronic Chromoendoscopy (NBI/FICE/AFI) (Repeat)	0	4858	7590	0
821	M430	Magnification Dye Chromoendoscopy (Repeat)	0	4858	7590	0
822	M431	EUS Radial Mediastinum and/ or Upper Abdomen	0	6330	9885	0
823	M432	Decompression: NJT placement	0	5419	8464	0
824	M433	Decompression: Colonic tube placement	0	5419	8464	0
825	M434	Stenting: Enteral	0	8823	13786	0
826	M435	Stenting: Colonic	0	8823	13786	0
827	M436	Dilatation Luminal Fluoroscopic	0	6928	10828	0
828	M437	Hemostasis: Post Endoscopic Resection	0	6928	10828	0
829	M438	Foreign Body Removal (Fluoroscopic)	0	6928	10828	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
830	M439	Diagnostic ERCP (Non-cholangioscopic)	0	5419	8464	0
831	M501	ERCP Biliary Stenting	0	9246	14449	0
832	M502	ERCP Pancreatic Stenting (Single)	0	9246	14449	0
833	M503	Multiple Polypectomy (more than 2 polyps and stalked)	0	9246	14449	0
834	M504	EUS Guided FNA	0	9246	14449	0
835	M506	Radiofrequency Ablation	0	9246	14449	0
836	M508	ERCP Biliary Stenting (Multiple Stents)	0	9246	14449	0
837	M510	ERCP Pancreatic Stenting (Multiple)	0	9246	14449	0
838	M512	ERCP Biliary Stone	0	9246	14449	0
839	M514	ERCP Pancreatic Stone extraction	0	9246	14449	0
840	M516	ERCP Biliary Stricture Dilatation	0	9246	14449	0
841	M518	ERCP Pancreatic Stricture Dilatation	0	9246	14449	0
842	M520	ERCP Sphincteroplasty	0	9246	14449	0
843	M522	ERCP in Bilroth II Anatomy	0	9246	14449	0
844	M524	ERCP Extraction: Internally migrated stent	0	9246	14449	0
845	M526	ERCP Mechanical	0	9246	14449	0
846	M528	ERCP Minor Papilla therapy	0	9246	14449	0
847	M530	EUS Guided Colour Doppler	0	9246	14449	0
848	M532	EUS Miniprobe Luminal examination	0	9246	14449	0
849	M534	EUS Guided Celiac Plexus Neurolysis	0	9246	14449	0
850	M536	EUS Linear imaging (No FNAC)	0	9246	14449	0
851	M538	EUS Advanced Imaging: 3D/ Elastography/ CE/ THI	0	9246	14449	0
852	M540	Nasogastric tube placement Fluoroscopic	0	6031	9421	0
853	M542	Nasojejunal tube placement	0	6928	10828	0
854	M544	Stenting: Cervical	0	9246	14449	0
855	M546	Stenting: Gastro-duodenal	0	9246	14449	0
856	M548	Endotherapy post Bariatric surgery	0	9246	14449	0
857	M550	Multiple Polypectomy (> 2 polyps and stalked) - partial	0	6477	10115	0
858	M602	Capsule Biopsy of Small Bowel	0	1578	2461	0
859	M606	EUS Intraductal (Biliary-pancreatic examination)	0	10580	16532	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
860	M608	Cholangioscopy	0	15870	24799	0
861	M610	Device Assisted (Balloon)/ Push Type Enteroscopy	0	15870	24799	0
862	M612	Endoscopic tumor resection (EMR/ESD/Ampullectomy)	0	15870	24799	0
863	M614	Endoscopic Pancreatic Necrosectomy	0	15870	24799	0
864	M616	ERCP Intrahepatic stone removal	0	15870	24799	0
865	M618	EUS: Endobronchial	0	15870	24799	0
866	M620	EUS Guided Pseudocyst Drainage	0	15870	24799	0
867	M622	EUS-ERCP Combined Biliary Drainage	0	15870	24799	0
868	M624	High resolution Anoscopy (HRA)	0	15870	24799	0
869	M626	Percutaneous Endoscopic Colostomy	0	15870	24799	0
870	M628	Myotomy	0	15870	24799	0
871	N001	Consultation (PAC - New case)	0	920	920	0
872	N002	Cross Consultation (Anaesthesiology)	0	552	552	0
873	N003	Follow-Up Evaluation (Anaesthesiology)	0	552	865	0
874	N004	Daily Round/Consultation Charges	0	276	276	0
875	N101	Anesthesia Fees - Grade I	0	2861	4471	0
876	N102	Anesthesia Fees - Grade II	0	5290	8266	0
877	N103	Anesthesia Fees - Grade III	0	8464	13225	0
878	N104	Anesthesia Fees - Grade IV	0	10580	16532	0
879	N105	Anesthesia Fees - Grade V	0	17034	26616	0
880	N106	Anesthesia Fees - Grade VI	0	21901	34219	0
881	N107	Anesthesia Fees - Bone Marrow Transplant	0	9734	15208	0
882	N108	Minor OT Anaesthesia charges	0	1219	1900	0
883	N109	Anaesthesia - RT Single fraction (Pediatric)	0	529	828	0
884	N110	Anaesthesia - RT 2-10 fractions (Pediatric)	0	3174	4959	0
885	N111	Anaesthesia - RT 11-24 fractions (Pediatric)	0	8993	14053	0
886	N112	Anaesthesia - RT 25 and above (Pediatric)	0	13225	20663	0
887	N113	Anesthesia charges for DL Scopy EUA	0	612	957	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
888	N114	Anesthesia charges for BM Aspiration Biopsy	0	612	957	0
889	N115	Anaesthesia charges for Diagnostic CT	0	612	957	0
890	N116	Sedation charges	0	612	957	0
891	N117	Lumbar Puncture	138	695	1086	14
892	N118	Anesthesia charges for Internventional Radiology Grade I	0	975	1523	0
893	N119	Anesthesia charges for Internventional Radiology Grade II	0	1523	2378	0
894	N120	Anesthesia charges for Internventional Radiology Grade III	0	2433	3804	0
895	N121	Anesthesia charges for Internventional Radiology Grade IV	0	3045	4761	0
896	N122	Sedation & Monitoring for Interventional Radiology Gr.I	0	612	957	0
897	N123	Sedation & Monitoring for Interventional Radiology	0	731	1141	0
898	N124	Sedation & Monitoring for Interventional Radiology	0	975	1523	0
899	N125	Sedation & Monitoring for Interventional Radiology	0	1219	1900	0
900	N126	Anesthesia charges for Diagnostic endoscopy (GA)	0	1458	2282	0
901	N127	Anesthesia charges for Endoscopy plus procedure (stent/prosthesis) (GA)	0	2433	3804	0
902	N128	Sedation and monitoring of Diagnostic endoscopy	0	612	957	0
903	N129	Endoscopy plus procedure (stent prosthesis etc) MAC	0	975	1523	0
904	N130	Anesthesia Fees - Grade VII	0	32853	51331	0
905	N131	TEG -Kaolin (Plain) Thrombelastograph	147	727	1136	14
906	N132	TEG -Kaolin (Heparinase) Thrombelastograph Coagulation Test	235	1173	1831	23
907	N133	Anaesthesia charges for Paediatric/Adult patients in MRI	0	975	1522	0
908	N201	ICU Per Day Professional Charges	0	1104	1104	0
909	N202	CVP Access / Dialysis Catheter Insertion	0	764	1191	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
910	N203	Swan Ganz Catheter	0	1513	2364	0
911	N204	Arterial Line	0	382	593	0
912	N205	Therapeutic Bronchoscopy	0	3045	4761	0
913	N206	Transvenous Pacemaker	0	1523	2378	0
914	N207	Percutaneous Tracheostomy	0	1132	1771	0
915	N208	CAVH - 1st Day	0	1132	1771	0
916	N209	Continuous Renal Replacement Therapy Per Day	0	731	1141	0
917	N210	ICU - Intubation and initiation of mechanical	0	488	759	0
918	N211	Advanced haemodynamic monitoring (Flotrac / PiCCo / Volume View etc) for the duration of 1	0	1458	2282	0
919	N212	Intermittent Hemodialysis / SLED per session	0	731	1141	0
920	N301	Minor (Peripheral Nerve Block)	0	538	842	0
921	N302	Major (Neurolytic, Coeliac Plexuses, Epidural)	0	1132	1771	0
922	N304	RT SELECTRON	0	764	1191	0
923	N305	RT Iridium Implant	0	897	1403	0
924	N311	Acute Pain Services(4days consolidated)	0	1831	2861	0
925	N312	Patient Controllre Analgesia(PCA)	0	1831	2861	0
926	N314	Chronic Pain Referral Followup (OPD/Ward)	0	529	828	0
927	N315	Epidural Catheterization	0	1513	2364	0
928	N350	Injection Verfen	14	14	14	14
929	N351	Injection Vermor 10 mg	14	14	14	14
930	N352	INJ PETHIDINE	41	41	41	41
931	N353	Injection Bupragesic 300 mg	18	18	18	18
932	O001	Consultation (New Case)	0	920	920	0
933	O002	Cross Consultation (Surgical Oncology)	0	552	552	0
934	O003	Follow-Up Consultation (Surgical Oncology)	0	552	552	0
935	O004	Chemotherapy Consultation Full Protocol (Surgical Oncology)	0	5290	8266	0
936	O005	Intravenous Bolus per Cycle (Surgical Oncology)	0	791	1242	0
937	O006	Chemotherapy Indoor Charges per Cycle (Surgical Oncology)	0	4761	7438	0

Schedule of charges						
.	eCode	ServiceName	General	Private	Foreign	NC
938	O007	Chemotherapy Daycare Charges per Cycle Day (Surgical Oncology)	0	423	662	0
939	O008	Trucut Biopsy of Breast Lesions (OPD)	0	1472	2300	0
940	O009	Dressing during follow-up	0	308	478	0
941	O111	Major OT - Service Charges Less than 2 Hrs.	1375	6877	10746	138
942	O112	Major OT - Service Charges 2 To 4 Hrs	2751	13754	21491	276
943	O113	Major OT - Service Charges 4 to 6 Hrs	5502	27508	42982	552
944	O116	Major OT - Service Charges 6 to 8 Hrs	6877	34385	53728	690
945	O117	Robotic Surgery Consumable Charges	101200	101200	101200	101200
946	O118	Major OT - Service Charges More than 8 Hrs	7406	37030	57859	741
947	O119	Robotic Surgery Additional Instrument usage Charges	13800	13800	13800	13800
948	O120	Head & Neck Robotic surgery Consumable	46000	46000	46000	46000
949	O121	Robotic Surgery Vessel Scaler Charges	33120	33120	33120	33120
950	O122	Robotic Surgery for Prostate Consumable Charges	115000	115000	115000	115000
951	O123	Trilumen Filtered Tube Set For Airseal	14720	14720	14720	14720
952	O124	Access Port 120mm with Bladeless Optical 120mm	14720	14720	14720	14720
953	O125	Access Port 12mm with Bladeless Optical 100mm	8280	8280	8280	8280
954	O126	Minor OT Service Charges (Without GA)	414	2070	3234	41
955	O127	Minor OT Service Charges (with GA)	478	2392	3740	46
956	O151	Minor OT - Surgery Charges	0	1219	1900	0
957	O161	Grade I Surgery	0	6081	9504	0
958	O162	Grade II Surgery	0	13230	20672	0
959	O163	Grade III Surgery	0	21160	33065	0
960	O164	Grade IV Surgery	0	30420	47527	0
961	O165	Grade V Surgery	0	42587	66539	0
962	O166	Vascular Surgery Cover (Outsourced)	0	37030	57859	0
963	O167	Grade VI Surgery	0	54749	85551	0
964	O168	Prof. charges for Neuro navigation	0	12167	19012	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
965	O169	Prof. charges for fluorescence guided Neurosurgical procedure	0	6081	9504	0
966	O171	Intra Operative Neuro Monitoring Grad1 I Surgery	0	607	952	0
967	O172	Intra Operative Neuro Monitoring Grad1 II Surgery	0	1324	2065	0
968	O173	Intra Operative Neuro Monitoring Grad1 III Surgery	0	2116	3307	0
969	O174	Intra Operative Neuro Monitoring Grad1 IV Surgery	0	3040	4751	0
970	O175	Intra Operative Neuro Monitoring Grad1 V Surgery	0	4259	6656	0
971	O177	Intra Operative Neuro Monitoring Grad1 VI Surgery	0	5474	8556	0
972	P102	Cross Consultation (Dental)	0	552	552	0
973	P103	Follow-Up Consultation (Dental)	0	552	552	0
974	P201	Surgical Maxillary Plate (Temp. Plate)	290	1458	2282	28
975	P202	Interim Maxillary Prosthesis	791	3956	6182	78
976	P203	Permanent Maxillary Prosthesis with Teeth	1219	6081	9504	120
977	P204	Palatal Prosthesis	1049	5239	8183	106
978	P205	Palatal Ext. Prosthesis with Teeth	1049	5239	8183	106
979	P206	Guide Plane Prosthesis	791	3956	6182	78
980	P207	Tongue Prosthesis	1509	7544	11785	152
981	P208	Partial Denture (1 - 3 Teeth)	368	1831	2861	37
982	P209	Partial Denture (4 - 6 Teeth)	451	2254	3519	46
983	P210	Partial Denture (7 - 10	607	3045	4761	60
984	P211	Upper or Lower Complete Denture	902	4508	7043	92
985	P212	Upper and Lower Complete Denture	1509	7544	11785	152
986	P213	Interim Maxillary Prosthesis in Molloplast Cap	1509	7544	11785	152
987	P214	Permanent Maxillary Prosthesis in Molloplast Cap	1799	9002	14067	179
988	P216	Extraction per Tooth	60	308	478	5
989	P217	Surgical Extraction per	124	612	957	14
990	P218	Impaction	377	1881	2944	37
991	P220	Prophylaxis	147	731	1141	14
992	P222	Radiation Protection Pros. (Upper/Lower)	754	3777	5902	74
993	P225	Repair of Prosthesis	152	750	1173	14
994	P226	Fluoride Gel Application (per Sitting)	97	488	759	9

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
995	P227	Inter Maxillary Wiring	290	1458	2282	28
996	P229	Implant Retained Extra Oral Prosthesis / Consolidated	2116	10580	16532	212
997	P230	Implant Retained Intra Oral Fixed Dentures / Consolidated Per Tooth	754	3777	5902	74
998	P231	Implant Retained Intra Oral Removable Dentures/ Consolidated	2116	10580	16532	212
999	P232	Permanent Max. Pros. with Bite Guide Pros.	1021	5111	7986	101
1000	P233	Permanent Max. Pros. with Teeth & GPP	1605	8032	12549	161
1001	P235	Occlusal Guard	147	731	1141	14
1002	P236	Composite Filling	115	570	892	9
1003	P237	Temporary Filling (ZNOE Cement)	28	147	230	5
1004	P238	Ag Filling / GI Filling	74	368	580	9
1005	P239	Occlusal Guard	488	2433	3804	51
1006	P240	Bilateral GPP (Bite guide Prosthesis)	1219	6081	9504	120
1007	P241	Skull implant (medium) (3cm x 3 cm)	1946	9734	15208	193
1008	P242	Custom made eye	975	4867	7604	97
1009	P243	Implant retained - nose orbit, ear	1946	9734	15208	193
1010	P244	Mandible Implant (Full)	2921	14600	22811	290
1011	P245	TEP	607	3045	4761	60
1012	P246	Eye Prosthesis (Relining)	368	1831	2861	37
1013	P247	Root canal treatment	488	2433	3804	51
1014	P248	Interim Maxillary Prosthesis with Molloplast Bulb	3809	19044	29757	382
1015	P249	Permanent Maxillary Prosthesis with Molloplast Bulb	4655	23276	36368	465
1016	Q001	Consultation (New Case)	0	920	920	0
1017	Q002	Cross Consultation (Radiation Oncology)	0	552	552	0
1018	Q003	Follow-Up Consultation (Radiation Oncology)	0	552	552	0
1019	Q004	Chemotherapy Consultation (Full Protocol) (Radiation Oncology)	0	5290	8266	0
1020	Q005	Intravenous Bolus per Cycle (Radiation Oncology)	0	791	1242	0
1021	Q006	Chemotherapy Indoor Charges per Cycle (Radiation Oncology)	0	4761	7438	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1022	Q007	Chemotherapy Daycare Charges per Cycle (Radiation Oncology)	0	1619	2530	0
1023	Q101	25 or More Fractions (Hosp. Charges)	2521	8400	13124	253
1024	Q102	11 To 24 Fractions (Hosp. Charges)	1389	4623	7222	138
1025	Q103	2 To 10 Fractions (Hosp. Charges)	925	3091	4825	92
1026	Q104	Single Fraction/HBI (Hosp. Charges)	465	1546	2415	46
1027	Q105	SRS/SRT (Hosp. Charges)	15695	52316	81747	1569
1028	Q106	IMRT (Hosp. Charges)	12774	42587	66539	1279
1029	Q107	IMRT with IGRT (Hosp. Charges)	15695	52316	81747	1569
1030	Q108	SRS/SRT with IGRT (Hosp. Charges)	18253	60835	95054	1826
1031	Q109	3D-CRT with IGRT (Hosp. Charges)	12774	42587	66539	1279
1032	Q120	4D-CRT Planning (Hosp. Charges)	2190	7300	11408	221
1033	Q121	Simulator	363	1219	1900	37
1034	Q122	TPS	225	750	1173	23
1035	Q123	Mould/Block/Compensators	225	750	1173	23
1036	Q124	Conformal Block/MLC	915	3045	4761	92
1037	Q125	Body Frame	915	3045	4761	92
1038	Q126	CT Simulator	437	1458	2282	46
1039	Q127	3D-CRT Consolidated (Hosp. Charges)	5952	19840	30995	593
1040	Q128	TBI / TSET Consolidated (Hosp. Charges)	5952	19840	30995	593
1041	Q129	Adaptive Radiotherapy (Hosp. Charges)	20475	68195	119421	2047
1042	Q201	25 or More Fractions (Prof. Charges)	0	10106	15787	0
1043	Q202	11 To 24 Fractions (Prof. Charges)	0	7673	11983	0
1044	Q203	2 To 10 Fractions (Prof. Charges)	0	5354	8363	0
1045	Q204	Single Fraction/HBI (Prof. Charges)	0	3045	4761	0
1046	Q205	SRS/SRT (Prof. Charges)	0	30420	47527	0
1047	Q206	IMRT (Prof. Charges)	0	46235	72243	0
1048	Q207	IMRT with IGRT (Prof. Charges)	0	65343	102097	0
1049	Q208	SRS/SRT with IGRT (Prof. Charges)	0	65343	102097	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1050	Q209	3D-CRT with IGRT (Prof. Charges)	0	46235	72243	0
1051	Q227	3D-CRT Consolidated (Prof. Charges)	0	24219	37840	0
1052	Q228	TBI / TSET Consolidated (Prof. Charges)	0	24219	37840	0
1053	Q229	Adaptive Radiotherapy (Hosp. Charges)	0	85229	149150	0
1054	Q303	LDR - Surface Mould/ Eye Plaque (Hosp. Charges)	437	1458	2282	46
1055	Q321	HDR - CVS (Hosp. Charges)	437	1458	2282	46
1056	Q322	HDR - Intracavitary/ILRT/EBRT (Hosp. Charges)	1352	4508	7043	133
1057	Q323	HDR - Surface Mould (Hosp. Charges)	695	2318	3620	69
1058	Q324	HDR - Interstitial/Template (Hosp. Charges)	1983	6610	10332	198
1059	Q325	Radical Brachytherapy HDR (Hosp. Charges)	3022	10074	15737	304
1060	Q403	LDR - Surface Mould/ Eye Plaque (Prof. Charges)	0	1458	2282	0
1061	Q421	HDR - CVS (Prof. Charges)	0	3045	4761	0
1062	Q422	HDR - Intracavitary/ILRT/EBRT (Prof. Charges)	0	4508	7043	0
1063	Q423	HDR - Surface Mould (Prof. Charges)	0	4508	7043	0
1064	Q424	HDR - Interstitial/Template (Prof. Charges)	0	8602	13441	0
1065	Q425	Radical Brachytherapy HDR (Prof. Charges)	0	10874	16992	0
1066	Q426	Brachytherapy with MRI/3D Planning (Prof. charges)	0	2433	3804	0
1067	Q601	Conventional RT (>24#)	0	0	0	0
1068	Q602	Conventional RT (11 - 24#)	0	0	0	0
1069	Q603	Conventional RT(2-10#)	0	0	0	0
1070	Q604	Conventional RT (single # / HBI)	0	0	0	0
1071	Q605	Conformal Conv RT (>24#)	0	0	0	0
1072	Q606	Conformal Conv RT(11-24#)	0	0	0	0
1073	Q607	Conformal Conv RT(2-10#)	0	0	0	0
1074	Q621	3D CRT	0	0	0	0
1075	Q622	3D CRT with IGRT	0	0	0	0
1076	Q631	4D CRT	0	0	0	0
1077	Q632	4D CRT with IGRT	0	0	0	0
1078	Q641	IMRT	0	0	0	0
1079	Q642	IMRT with IGRT	0	0	0	0

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1080	Q651	SRS / SRT	0	0	0	0
1081	Q652	SRS / SRT with IGRT	0	0	0	0
1082	Q661	TBI / TSET	0	0	0	0
1083	Q662	Body frame with sterotaxy	0	0	0	0
1084	Q701	LDR-VSA	0	0	0	0
1085	Q702	LDR- INTRACAVITRAY/ILRT/EBR	0	0	0	0
1086	Q703	LDR-SURFACE MOULD	0	0	0	0
1087	Q704	LDR-INTRSTITAL / TEMPLATE	0	0	0	0
1088	Q721	HDR-CVS	0	0	0	0
1089	Q722	HDR- INTRACAVITRAY/ILRT/EBR	0	0	0	0
1090	Q723	HDR-SURFACE MOULD	0	0	0	0
1091	Q724	HDR-INTRSTITAL / TEMPLATE	0	0	0	0
1092	Q725	RADICAL BRACHYTHERAPY	0	0	0	0
1093	R101	Only Pre-Op. Counseling & Stoma Marking	0	308	478	0
1094	R102	Pre & Post-Op. Counseling of Stoma Care	0	1187	1854	0
1095	R103	Two Stoma Care Including Pre & Post Op. Counseling	0	1205	1886	0
1096	R104	Fixing of Drain Pouches	60	294	465	5
1097	R109	Post Op. Counseling & Single Stoma Care	0	1099	1720	0
1098	R110	Post Op. Counseling & Two Stoma Care	0	1398	2180	0
1099	R111	Wound/Fistula/Incontinence Care (per Sitting)	60	308	478	5
1100	R112	Distal Stoma Wash/Irrigation (per Sitting)	60	308	478	5
1101	R202	Physiotherapy - Electrical Stimulation	32	161	248	5
1102	R203	Physiotherapy General Exercises	51	244	382	5
1103	R204	Transcutaneous Nerve Stimulation	32	161	248	5
1104	R205	Ultrasound Therapy	32	161	248	5
1105	R206	Infrared Rays Therapy	14	74	115	0
1106	R207	Interference Therapy	32	161	248	5
1107	R208	Continuous Passive Movement Exercises	41	212	331	5
1108	R209	Pre-Operative Chest	28	147	230	5
1109	R210	Post-Operative Chest Therapy	55	267	414	5
1110	R211	Postural Drainage	60	294	465	5

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1111	R212	Specialised Exercises	64	317	497	5
1112	R213	Bio Feedback	46	221	345	5
1113	R214	Long Wave Diathermy	28	147	230	5
1114	R215	Post operative Breast class	51	244	382	5
1115	R216	Manual Lymphatic Drainage	64	317	497	5
1116	R217	Pulmonary Rehabilitation	64	317	497	5
1117	R218	Manual Mobilization (Major)	60	308	478	5
1118	R219	Manual Mobilization (Minor)	51	244	382	5
1119	R220	Incontenence Management	37	179	281	5
1120	R221	Multi-layer Bandaging	41	212	331	5
1121	R222	Complete Decongestive Therapy	74	368	580	9
1122	R223	Ambulation	41	212	331	5
1123	R224	Moist Heat	18	83	133	0
1124	R225	Cryotherapy	18	83	133	0
1125	R226	Traction	23	106	166	0
1126	R227	Active-Passive Trainer	64	317	497	5
1127	R228	Consultation (New Case)	0	212	423	0
1128	R229	Follow-Up Consultation	0	106	212	0
1129	R303	Facial Splint	78	161	248	9
1130	R304	Counselling	0	212	331	0
1131	R305	Counselling & Exercise	0	239	373	0
1132	R306	Follow-Up Counselling	0	212	331	0
1133	R307	Splinting Accessories	106	212	331	9
1134	R308	Manual Lymphatic Drainage	64	317	497	5
1135	R309	Multi-layer Bandaging	41	212	331	5
1136	R310	Complete Decongestive Therapy	74	368	580	9
1137	R316	MRM Bras	152	308	478	14
1138	R324	Lymphedema - Accessories	97	189	299	9
1139	R326	Dermagrip (Double Stretch - C)	308	612	957	32
1140	R327	Dermagrip (Double Stretch - D)	377	750	1173	37
1141	R328	Dermagrip (Double Stretch - E)	414	823	1288	41
1142	R329	Dermagrip (Double Stretch - F)	437	879	1371	46
1143	R331	Vaginal Dilatation Procedure	28	129	198	5
1144	R332	Total contact Orfit/Thermoplastic brace making charges (Spinal)	308	612	957	32
1145	R333	Thermoplastic splint making charges (Extremities)	152	308	478	14
1146	R334	Total contact brace (Spinal) 45 x 60 sq cm	2645	5290	8266	267

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1147	R335	Total contact brace (Spinal) 90 x 60 sq cm	5290	10580	16532	529
1148	R345	Orfit Splints - Major	1891	3777	5902	189
1149	R346	Orfit Splints - Minor	294	593	925	28
1150	R363	Silicon Mouth Blocks	78	161	248	9
1151	R372	Modification in Orthosis	69	138	216	5
1152	R376	Neurocognitive Assessment and Intervention	55	267	414	5
1153	R377	Lymphapress	60	294	465	5
1154	R378	Prosthesis / Orthosis Fittings & Measurement	41	212	331	5
1155	R401	Speech Therapy First Consultation	0	368	368	0
1156	R402	Speech Therapy Follow-up Consultation	0	129	129	0
1157	R508	Skin 6 x 4 cm	97	189	377	9
1158	R509	Skin 10 x 4 cm	161	317	635	14
1159	R510	Skin 10 x 8 cm	317	635	1270	32
1160	R512	Cortico-cancellous Bone Block 2 x 2 x 0.5 cm	529	1058	2116	55
1161	R513	Cortico-cancellous Bone Block 2 x 2 x 1 cm	662	1325	2650	64
1162	R516	Rib 8 - 16 cm	368	741	1481	37
1163	R517	Femoral Head >= 20gms	1532	3068	6136	152
1164	R518	Bone Granules per 0.5cc	161	317	635	14
1165	R519	Processing Fess	0	0	4232	0
1166	R522	Struts (Humerus, Femur, Tibia) 5 - 10 cm	1983	3970	7940	198
1167	R523	Struts (Humerus, Femur, Tibia) > 10 cm	2645	5290	10580	267
1168	R525	Courier Handling Charges	0	0	846	0
1169	R526	Demineralised Bone Granules per 0.5 cc	317	635	1270	32
1170	R528	Struts (Fibula, Radius, Ulna) 5 - 10 cm	1058	2116	4232	106
1171	R529	Struts (Fibula, Radius, Ulna) > 10 cm	1325	2645	5290	133
1172	R530	Irradiation of Tissue per	0	0	423	0
1173	R531	Demineralised Cancellous Bone Blocks 2 x 2 x 1 cm	1191	2383	4766	120
1174	R532	Demineralised Cancellous Bone per 10 Strips 2 x 0.5 x 0.5 cm	1849	3703	7406	184
1175	R533	Femoral Head (< 10 gm)	396	791	1582	41
1176	R534	Femoral Head (10 - 14 gm)	662	1325	2650	64
1177	R535	Femoral Head (15 - 19 gm)	1191	2383	4766	120
1178	R536	Tibial Slices (< 10 gm)	267	529	1058	28
1179	R537	Tibial Slices (10 - 14 gm)	529	1058	2116	55

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1180	R538	Tibial Slices (15 - 19 gm)	1058	2116	4232	106
1181	R539	Tibial Slices (>= 20 gm)	1375	2751	5502	138
1182	R540	Metatarsal	354	708	1417	37
1183	R541	Calcaneum	1481	2962	5925	147
1184	R542	Talus	727	1449	2898	74
1185	R543	Amnion 4-9 sq cm	55	106	212	5
1186	R544	Amnion 10-45 sq cm	78	161	322	9
1187	R545	Amnion 46-99 sq cm	110	221	442	9
1188	R546	Amnion > 100 sq cm	147	294	589	14
1189	R547	Demineralised Cancellous Bone Block 2 x 1 x 1	791	1587	3174	78
1190	R549	Demineralised Bone Block 0.5x0.5x0.5	290	584	1168	28
1191	R550	Chorion 4-9 sqcm	55	106	212	5
1192	R551	Chorion 10-45 sq cm	78	161	322	9
1193	R552	Demineralised Cancellous Bone Block 1x1x1 cm	529	1058	2116	55
1194	R553	Cortico- Cancellous Bone Block 0.5 X 0.5 X 0.5 cm	161	317	635	14
1195	R554	Cortico- Cancellous Bone Block 1 X 1 X 0.5 cm	317	635	1270	32
1196	R555	Cortico- Cancellous Bone Block 1 X 1 X 1 cm	396	791	1582	41
1197	R556	Tendon 0-15 cm	396	791	1582	41
1198	R557	Tendon 15-30 cm	662	1325	2650	64
1199	R611	Nose Prosthesis	2190	4379	8758	221
1200	R612	Nose Implant	2190	4379	8758	221
1201	R613	Ear Prosthesis	2190	4379	8758	221
1202	R614	Ear Implant	2190	4379	8758	221
1203	R615	Skull Implant (Small)	2190	4379	8758	221
1204	R616	Skull Implant (Large)	3105	6210	12420	313
1205	R617	Orbital Prosthesis	2190	4379	8758	221
1206	R618	Ocular Implant (Conformer)	1523	3045	6090	152
1207	R619	Chin Implant	2190	4379	8758	221
1208	R620	Mandible Implant	2190	4379	8758	221
1209	R621	Testicular Implant	2190	4379	8758	221
1210	R622	Vaginal Mould 3 Sizes	2190	4379	8758	221
1211	R623	Breast Prosthesis	2985	5966	11932	299
1212	R624	Breast Impressions	575	1155	2309	60
1213	R625	Finger and Toe Prosthesis	2070	4135	8271	207
1214	R626	Finger Joint Implants (10 Size 0 - 3)	1279	2562	5124	129
1215	R627	Finger Joint Implants (10 Size 4 - 8)	2190	4379	8758	221
1216	R628	Metacarpal Small	1159	2318	4637	115
1217	R629	Metacarpal Large	1826	3648	7296	184
1218	R630	Silastic Tendon Rod	1826	3648	7296	184

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1219	R631	Silastic Block	2314	4623	9246	230
1220	R632	Sternum	3225	6454	12908	322
1221	R633	Trachea Implant	2314	4623	9246	230
1222	R634	Face Mask	575	1155	2309	60
1223	R635	Ear Impression	575	1155	2309	60
1224	R636	Skull Impression	575	1155	2309	60
1225	R637	Orbital Impression	575	1155	2309	60
1226	R638	Finger Impression	575	1155	2309	60
1227	R639	Conformer Impression	322	644	1288	32
1228	R640	Custom-Made Nasal Implant	4623	9246	18492	465
1229	R641	Custom-Made Maxillary Implant	4623	9246	18492	465
1230	R642	Custom-Made Patch Prosthesis (More than 3 cm x 2 cm)	4623	9246	18492	465
1231	R643	Custom-Made Patch Prosthesis (Up To 3 cm x 2 cm)	2130	4264	8528	212
1232	R644	Silastic Ring	731	1458	2916	74
1233	R701	Consultation (New Case)	0	920	920	0
1234	R702	Cross Consultation	0	552	552	0
1235	R703	Follow-Up Consultation	0	552	552	0
1236	S001	Routine Examination of Female Patients	635	1270	1983	64
1237	S002	Routine Examination of Male Patients	529	1058	1651	55
1238	T001	Consultation (New Case)	0	920	920	0
1239	T002	Cross Consultation	0	552	552	0
1240	T003	Follow-Up Consultation	0	552	552	0
1241	T004	GENETIC COUNSELLING	0	1587	1587	0
1242	T005	PCR + Sanger Sequencing per Amplicon	391	782	1196	138
1243	T006	Fluorescent PCR + fragment length analysis per Amplicon	161	322	483	92
1244	T007	MLPA per gene	1840	3680	4600	690
1245	T008	Multigene NGS Germline Panel	11040	16560	18400	5520
1246	T250	A, B, DR Molecular Typing PCR - SSP	4747	9489	14830	473
1247	T251	HLA C, DQB Molecular Typing PCR - SSP	3390	6780	10598	340
1248	T252	Donor Specific Antibodies (DSA)	3680	7360	11500	368
1249	T253	Panel Reactive Antibodies (PRA) class I	1380	2760	4314	138
1250	T254	Panel Reactive Antibodies (PRA) class II	1380	2760	4314	138

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1251	T255	Single Antigen Class I	5980	11960	18689	598
1252	T256	Single Antigen Class II	5980	11960	18689	598
1253	T257	HLA-A, B, DRB1 (Sequence Based Typing - SBT)	4600	9200	14375	460
1254	T258	HLA-A, B, C, DRB1, DQB1, DPB1 (Sequence Based Typing - SBT)	6900	13800	21564	690
1255	T259	HLA-A, B, DRB1(Sequence Specific Oligonucleotide - SSO)	3588	7176	11214	358
1256	T260	HLA-C, DQB1(Seuence Specific Oligonucleotide - SSO)	2392	4784	7475	239
1257	T261	KIR Typing	4600	4600	7187	4600
1258	T301	Ph: t(9;22) karyotyping	1822	3639	5686	184
1259	T302	CML Blast Crisis karyotyping	2548	5101	7967	253
1260	T303	Acute Myeloid Leukemia karyotyping	2548	5101	7967	253
1261	T304	Lymphoproliferative disorders karyotyping	2548	5101	7967	253
1262	T305	Myelodysplastic Syndromes karyotypin g	2548	5101	7967	253
1263	T306	Myeloproliferative Neoplasms karyotyping	3915	7829	12231	391
1264	T307	Acute Lymphoblastic leukemia karyotyping	2548	5101	7967	253
1265	T308	Lymphoma karyotyping	3284	6569	10267	327
1266	T309	Ploidy analysis	1822	3639	5686	184
1267	T310	Clinical Genetic disorder	2548	5101	7967	253
1268	T311	Constitutional karyotyping	2548	5101	7967	253
1269	T312	Cell line karyotyping	5106	10212	15953	511
1270	T313	Karyotyping in Bone and soft tissue sarcomas	4375	8749	13671	437
1271	T314	Chromosomal breakage (fragility) studies in Fanconis anemia/Aplastic	2548	5101	7967	253
1272	T315	Acute Leukemia karyotyping	2548	5101	7967	253
1273	T401	BCR/ABL Ph: t(9;22)	1601	3206	5009	161
1274	T402	BCR/ABL (Ph) duplication, trisomy 8, trisomy 21, TP53 deletion	2801	5607	8763	281
1275	T403	PML-RARA : t(15;17)	1601	3206	5009	161
1276	T404	PML-RARA t(15;17),	2406	4816	7521	239
1277	T405	RUNX1-RUNX1T1 (AML1-ETO): t(8;21)	1601	3206	5009	161
1278	T406	MLL-MLLT3: t(9;11)	1601	3206	5009	161
1279	T407	MLL-MLLT2: t(4;11)	1601	3206	5009	161
1280	T408	MLL-MLLT4; t(6;11)	1601	3206	5009	161

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1281	T409	MLL-MLLT1: t(11;19)	1601	3206	5009	161
1282	T410	MLL Characterization for B-ALL: t(4;11), t(9;11), t(11;19)	2801	5607	8763	281
1283	T411	MLL Characterization for AML: (4;11), t(6;11), t(9;11),	2801	5607	8763	281
1284	T412	ETO-AML1, MLL	2406	4816	7521	239
1285	T413	ETO-AML1, PML-RARA	2406	4816	7521	239
1286	T414	BCR-ABL, MLL translocation	2406	4816	7521	239
1287	T415	MYH11/CBFB: inv(16)(p13q22)/t(16;16)	1601	3206	5009	161
1288	T416	KMT2A (MLL) rearrangement: 11q23	1601	3206	5009	161
1289	T417	Inversion(16)), MLL translocations	2406	4816	7521	239
1290	T418	MECOM (EVI1) rearrangement: inv(3)(q21.3q26.2)/t(3;3)	2157	4315	6744	216
1291	T419	DEK/NUP214: t(6;9)	1601	3206	5009	161
1292	T420	AML Panel 1	2801	5607	8763	281
1293	T421	AML Panel 2	2516	5037	7871	253
1294	T422	PDGFRA rearrangement: 4q12	2157	4315	6744	216
1295	T423	PDGFRB rearrangement: 5q33	2157	4315	6744	216
1296	T424	PDGFRA (4q12), PDGFRB (5q33), FGFR1 (8p11.2) rearrangement	2801	5607	8763	281
1297	T425	Monosomy 5/deletion 5q	1601	3206	5009	161
1298	T426	Monosomy 7/deletion 7q	1601	3206	5009	161
1299	T427	Trisomy 8	1118	2231	3487	110
1300	T428	PTPRT: Deletion 20q	2157	4315	6744	216
1301	T429	TP53/D17Z1: Monosomy 17/deletion 17p13	1601	3206	5009	161
1302	T430	MDS Panel	3206	6412	10019	322
1303	T431	ETV6-RUNX1:t(12;21)	1601	3206	5009	161
1304	T432	PBX1-TCF3: t(1;19)	1601	3206	5009	161
1305	T433	E2A rearrangement: 19p13	1601	3206	5009	161
1306	T434	Trisomy 21	1118	2231	3487	110
1307	T435	Trisomy 4, 10 & 17	1601	3206	5009	161
1308	T436	B-ALL Panel 1	2516	5037	7871	253
1309	T437	B-ALL Panel 2	2801	5607	8763	281
1310	T438	TCR-A rearrangement:	2157	4315	6744	216
1311	T439	TCR-B rearrangement: 7q34	1601	3206	5009	161
1312	T440	TLX1 rearrangement: 5q35	1601	3206	5009	161
1313	T441	TLX3 rearrangement: 10q24	1601	3206	5009	161
1314	T442	CDKN2A/D9Z1: Monosomy 9/deletion 9p	1601	3206	5009	161

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1315	T443	T-ALL Panel 1	2516	5037	7871	253
1316	T444	T-ALL Panel 2	2801	5607	8763	281
1317	T445	Acute Leukemia Panel I (2 markers)	2516	5037	7871	253
1318	T446	Acute Leukemia Panel II (3-4 markers)	2801	5607	8763	281
1319	T447	IGH rearrangement: 14q32	1601	3206	5009	161
1320	T448	MYC rearrangement: 8q24	1601	3206	5009	161
1321	T449	i(7q) analysis	1601	3206	5009	161
1322	T450	CCND1/IgH: t(11;14)	2157	4315	6744	216
1323	T451	IgH/BCL2 :t(14;18)	2157	4315	6744	216
1324	T452	BCL6 rearrangement: 3q27	1601	3206	5009	161
1325	T453	BIRC3/MALT1: t(11;18)	1601	3206	5009	161
1326	T454	MYC/IgH: t(8;14)	1601	3206	5009	161
1327	T455	IgH/BCL3: t(14;19)	1601	3206	5009	161
1328	T456	Lymphoma Panel	3206	6412	10019	322
1329	T457	ALK rearrangement: 2p23	2157	4315	6744	216
1330	T458	CLL Panel 1	2801	5607	8763	281
1331	T459	CLL Panel 2	2516	5037	7871	253
1332	T460	DLEU/LAMP: Monosomy 13/deletion 13q	1601	3206	5009	161
1333	T461	MYB/D6Z1: Monosomy 6/deletion 6q	1601	3206	5009	161
1334	T462	Trisomy 12	1118	2231	3487	110
1335	T463	FGFR3/IgH: t(4;14)	1601	3206	5009	161
1336	T464	IgH/MAF: t(14;16)	1601	3206	5009	161
1337	T465	MAF-B/IgH: t(14;20)	1601	3206	5009	161
1338	T466	1p deletion, 1q Amplification	1601	3206	5009	161
1339	T467	Hyperdiploidy panel in MM	2516	5037	7871	253
1340	T468	MM Panel 1	3206	6412	10019	322
1341	T469	MM Panel 2	2801	5607	8763	281
1342	T470	XX/XY (Chimerism Studies) in Sex mismatch Bone Marrow Transplantation	1118	2231	3487	110
1343	T471	Miscellaneous Profile I(1 marker)	1601	3206	5009	161
1344	T472	Miscellaneous profile II(2 markers)	2516	5037	7871	253
1345	T475	FISH on FFPE - Block /Slide (2 markers)	2189	4379	6844	220
1346	T476	IgH Characterization IgH/CCND1:t(11;14),IgH/BCL2:t(14;18),BCL6(3q27),MYC(8q24) (4markers)	2438	4876	7626	248
1347	T477	Multiple Myeloma High Risk Markers (4 Markers)	2438	4876	7626	248
1348	T478	Ph-like ALL Panel (4	2438	4876	7626	248

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1349	T479	t(1;22) and Trisomy 21 in Acute Megakaryoblastic Leukemia (AML -M7) (2 Markers)	2189	4379	6844	220
1350	T480	RARA Variant - PLZF / RARA : t(11;17) (1 marker)	1398	2787	4360	147
1351	T481	Sample Processing for Cancer Cytogenetics Study	460	920	1435	46
1352	T482	Acute Myeloid Leukemia (AML) Panel	5317	10644	18630	533
1353	T483	B-cell Acute Lymphoblastic Leukemia (B-ALL) Panel	5317	10644	18630	533
1354	T484	T-cell Acute Lymphoblastic Leukemia (T-ALL) Panel	5317	10644	18630	533
1355	T485	Chronic Lymphocytic Leukemia (CLL) Panel	5317	10644	18630	533
1356	T486	Multiple Myeloma (MM)	6007	12024	21031	607
1357	T487	Slide / Images for Second Opinion- Cancer	423	846	1324	42
1358	T501	t(8;21) on archival BM biopsy/granulocytic sarcoma	2801	5607	8763	281
1359	T502	PDGFRA on archival BM biopsy	2801	5607	8763	281
1360	T503	BCR-ABL on archival BM biopsy	2801	5607	8763	281
1361	T504	MLL translocation on archival BM biopsy	2801	5607	8763	281
1362	T505	t(11;14) on archival	2801	5607	8763	281
1363	T506	t(14;18)	2801	5607	8763	281
1364	T507	t(3;14)	2801	5607	8763	281
1365	T508	t(8;14)	2801	5607	8763	281
1366	T509	FISH on Bone marrow Smear(1 marker)	1601	3206	5009	161
1367	T510	FISH on bone marrow smear(2 markers)	2516	5037	7871	253
1368	T601	Amikacin	552	2760	4324	55
1369	T602	Vancomycin	552	2760	4324	55
1370	T603	Meropenem	552	2760	4324	55
1371	T604	Posaconazole	552	2760	4324	55
1372	T605	Voriconazole	552	2760	4324	55
1373	T606	Sunitinib	1380	2760	4324	138
1374	T607	Imatinib	1380	2760	4324	138
1375	T608	5 - Fluorouracil	1380	2760	4324	138
1376	T609	Mycophenolate mofetil	1380	2760	4324	138
1377	T610	L- Asparaginase	92	460	727	9
1378	T611	Colistin	552	2760	4324	55
1379	U101	RT-PCR Multiplex, BCR-ABL (P190, P210)	2433	4867	7604	244

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1380	U102	RT-PCR Nested, BCR-ABL for Follow-Up	2433	4867	7604	244
1381	U103	RQ-PCR BCR-ABL (P210)	4200	8400	13124	419
1382	U104	RT-PCR Multiplex, Acute Leukaemia Panel	2797	5598	8745	281
1383	U105	RQ-PCR PML-RARA	4200	8400	13124	419
1384	U106	RT-PCR Nested, IGH Chain Gene Rearrangement	1766	3533	5520	175
1385	U107	RT-PCR Nested, TCR Gene Rearrangement	1766	3533	5520	175
1386	U108	Acute Lymphoblastic Leukemia Transcript Identification	1159	2318	3620	115
1387	U109	Acute Myeloid Leukemia Gene Mutation Detection (FLT3-ITD & Allelic Ratio, FLT3-TKD, NPM1,	3712	7429	11606	373
1388	U110	Acute Myeloid Leukemia FLT3 (ITD & Allelic Ratio + TKD) NPM1 gene mutation	2921	5842	9126	290
1389	U111	Acute Myeloid Leukemia FLT3 (ITD & TKD) gene mutation & Allelic Ratio	2070	4135	6463	207
1390	U112	Acute Myeloid Leukemia NPM1 gene mutation	1766	3533	5520	175
1391	U113	Acute Myeloid Leukemia CEBPA gene mutation	1946	3892	6086	193
1392	U114	High Sensitivity JAK2 Mutation Detection (V617F)	1766	3533	5520	175
1393	U115	JAK2 Exon 12 Mutation Detection	1766	3533	5520	175
1394	U116	Combined High Sensitivity JAK2 V617F and Exon12 Mutation Detection	2617	5239	8183	262
1395	U117	Hairy Cell Leukemia Mutation (BRAF V600E)	1339	2677	4181	133
1396	U118	Lymphoplasmacytic Leukemia / Waldenstroms Macroglobulinemia Mutation (MYD88 L265P) Detecti	1339	2677	4181	133
1397	U119	Chronic Lymphocytic Leukemia IGVH Mutation Detection	2433	4867	7604	244
1398	U120	Chronic Lymphoproliferative disorder IGVH Mutation Detection	2433	4867	7604	244

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1399	U121	ABL Kinase Domain Mutation for Chronic Myeloid leukemia (TKI Resistance, Imatinib Resistan	3105	6210	9706	313
1400	U122	Acute Myeloid Leukemia Comprehensive Mutation Profile (FLT3, NPM1, CEBPA, TET2, TP53, IDH1	23115	46235	72243	2314
1401	U123	Chronic Lymphocytic Leukemia Comprehensive Mutation Profile (IGVH Gene Mutation & Usage, T	12774	25548	39923	1279
1402	U124	Acute Leukemia ASXL1 mutation detection	2070	4135	6463	207
1403	U125	Acute Leukemia DNMT3A mutation detection	2070	4135	6463	207
1404	U126	Acute Leukemia TET2 mutation detection	8823	17646	27572	883
1405	U127	Acute Leukemia IDH1 and IDH2 mutation detection	2070	4135	6463	207
1406	U128	Acute Leukemia TP53 mutation detection	8823	17646	27572	883
1407	U129	Acute Leukemia K RAS and N RAS mutation detection	2070	4135	6463	207
1408	U130	Acute Leukemia c-KIT mutation detection	2070	4135	6463	207
1409	U131	Acute Leukemia RUNX1 mutation detection	2070	4135	6463	207
1410	U132	Chronic Lymphoproliferative disorder NOTCH1 mutation	2070	4135	6463	207
1411	U133	Chronic Lymphoproliferative disorder NOTCH2 mutation	2070	4135	6463	207
1412	U134	Chronic Lymphoproliferative disorder TP53 mutation	8823	17646	27572	883
1413	U135	Chronic Lymphoproliferative disorder SF3B1 mutation	2070	4135	6463	207
1414	U136	ABL Kinase Domain Mutation for Ph Positive Acute Lymphoblastic leukemia (TKI Resistance, I	3105	6210	9706	313
1415	U137	Custom Sequencing Assay	4232	8464	13225	423
1416	U138	Acute Lymphoblastic Leukemia Mutation	4232	8464	13225	423
1417	U139	Comprehensive Molecular Testing	7406	14812	23143	741
1418	U140	Next generation sequencing assy for Hematolymphoid malignancies	4140	8280	12940	414

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1419	U141	Sample collection and archival for molecular testing	92	184	290	9
1420	U706	Erythrocyte Sedimentation Rate (ESR)	18	97	147	0
1421	U708	Prothrombin Time (PT)	78	391	612	9
1422	U709	Coagulation Profile (PT & PTTK)	133	667	1040	14
1423	U710	Partial Thromboplastin Time with Kaolin (PTTK)	55	276	428	5
1424	U712	Coagulation Profile with FDP (D-Dimer), Fibrinogen	253	1260	1969	23
1425	U713	Peripheral Blood Smear for Morphology and Malarial Parasites	55	267	419	5
1426	U714	FDP (D-Dimer)	60	294	465	5
1427	U715	Fibrinogen	60	294	465	5
1428	U718	Cerebrospinal Fluid (CSF) Analysis	60	308	478	5
1429	U722	Haemogram (Hb, TLC, DLC, Platelets)	55	276	428	5
1430	U724	Reticulocyte Count	14	74	115	0
1431	U725	Ascitic Fluid Analysis	60	308	478	5
1432	U726	Pleural Fluid Analysis	60	308	478	5
1433	U727	Pericardial Fluid Analysis	60	308	478	5
1434	U752	Bone Marrow Aspirate (Morphology +	106	529	828	9
1435	U753	Surface Marker Complete Panel	5598	11192	17489	561
1436	U754	Surface Marker Individual	731	1458	2282	74
1437	U755	V Beta Repertoire Analysis by Flow Cytometry for T-Cell Clonality	5598	11192	17489	561
1438	U801	Chimerism Analysis	488	975	1523	51
1439	U802	STR Panel studies	1702	3409	5322	170
1440	U803	Lineage specific Chimerism - B Cell, T Cell and NK Cells	2760	5520	8625	276
1441	W004	Outside Reporting of PET / PET-CT	0	1831	2861	0
1442	W010	Radiopharmaceutical Charges (FDG) PET-CT	3220	3220	3220	3220
1443	W011	Radiopharmaceutical Charges (FDG) Brain PET-CT	2300	2300	2300	2300
1444	W012	Radiopharmaceutical Charges (Fluoride) PET-CT	2300	2300	2300	2300
1445	W013	Radiopharmaceutical Charges (FDG) Cardiac Viability	6440	6440	6440	6440

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1446	W014	Radiopharmaceutical Charges for ECD Brain SPECT	1472	1472	1472	1472
1447	W015	Radiopharmaceutical Charges for GHA Brain SPECT	736	736	736	736
1448	W016	Radiopharmaceutical Charges for MAA Lung Scan	1840	1840	1840	1840
1449	W017	Radiopharmaceutical Charges Myocardial Perfusion Scan	3450	3450	3450	3450
1450	W018	Radiopharmaceutical Charges EC/MAG3 Renogram	828	828	828	828
1451	W019	Radiopharmaceutical Charges for DTPA Renal Study	414	414	414	414
1452	W020	Radiopharmaceutical Charges for DMSA Renal Scan	414	414	414	414
1453	W021	Radiopharmaceutical Charges for Aerosol Lung Study	920	920	920	920
1454	W022	Radiopharmaceutical Charges for Tumor Imaging with MIBI	2300	2300	2300	2300
1455	W023	Radiopharmaceutical Charges for Labeled RBC	736	736	736	736
1456	W024	Radiopharmaceutical Charges for Sentinel Node Study	2300	2300	2300	2300
1457	W025	Radiopharmaceutical Charges for Hepatobiliary Scintigraphy	736	736	736	736
1458	W027	Radiopharmaceutical Charges for Radio Iodine Scan	4600	4600	4600	4600
1459	W028	Radiopharmaceutical Charges for Pertechnatate Thyroid Scan	368	368	368	368
1460	W029	Radiopharmaceutical Charges for Bone Scan	920	920	920	920
1461	W030	Radiopharmaceutical Charges for Hynic-TOC Scan (Unshared)	12880	12880	12880	12880
1462	W031	Radiopharmaceutical Charges for Hynic-TOC Scan (Shared)	6440	6440	6440	6440

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1463	W034	Radiopharmaceutical charges for Sm153 EDTMP	11684	11684	11684	11684
1464	W036	Radiopharmaceutical charges for I131 MIBG Scan	11270	11270	11270	11270
1465	W037	Radiopharmaceutical charges for I131 MIBG scan	6440	6440	6440	6440
1466	W038	Radiopharmaceutical charges for 18 F-FLT Scan	4140	4140	4140	4140
1467	W039	Radiopharmaceutical charges for 18 F-FMIZO	4140	4140	4140	4140
1468	W040	Radiopharmaceutical charges for 90Y Sirspheres	460000	460000	460000	460000
1469	W042	RP Charge for Gallium 68 Peptide	10580	10580	10580	10580
1470	W043	RP Charge Gallium 68	6440	6440	6440	6440
1471	W044	Radiopharmaceutical charge for Large Dose Scan	4600	4600	4600	4600
1472	W045	Radiopharmaceutical charge for Low Dose Therapy	9200	9200	9200	9200
1473	W046	Radiopharmaceutical charge for 188 Rhenium Lipiodol for TARE	82800	82800	82800	82800
1474	W047	Radiopharmaceutical charge for 188 Re-HEDP Therapy	9200	9200	9200	9200
1475	W048	Radiopharmaceutical charges for the Theraspehre	531300	531300	531300	531300
1476	W050	PET CT Scan Whole Body (Non Contrast)	3965	13225	20663	396
1477	W051	PET Scan Brain (FDG)	474	1587	2479	46
1478	W052	PET CT Scan Whole Body (IV Contrast)	4283	14283	22319	428
1479	W053	PET-CT (Fluoride)	3965	13225	20663	395
1480	W054	FDG Cardiac Viability	474	1587	2479	46
1481	W055	Coronary Angiography	1826	6081	9504	184
1482	W056	Ga 68- DOTA PET/CT Scan	3965	13225	20663	396
1483	W057	Ga 68- PSMA PET/CT Scan	3965	13225	20663	396
1484	W058	Radiopharmaceutical Charge - F18 PSMA	13800	13800	13800	13800
1485	W059	Radiopharmaceutical Charge - F18 DOPA	11500	11500	11500	11500
1486	W060	Radiopharmaceutical Charge - 225 Actinium PSMA 617 (330 qci)	460000	460000	460000	460000
1487	W061	Radiopharmaceutical Charge - Actinium PSMA cocktail Therapy	207000	207000	207000	207000

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1488	W062	Radiopharmaceutical Charge - Actinium PSMA cocktail Therapy (Imported)	303600	303600	303600	303600
1489	W063	Radiopharmaceutical Charge - 225 Ac-	460000	460000	460000	460000
1490	W064	PET-CT for F18 PSMA Whole Body Scan	3965	13225	20663	395
1491	W065	PET-CT for F18 DOPA Whole Body Scan	3965	13225	20663	395
1492	W066	Ga 69- PSMA PET/CT Scan	3965	13225	20663	395
1493	W101	CT Brain Plain	695	2318	3620	69
1494	W102	CT PNS	1242	4140	6468	124
1495	W103	CT Nasopharynx	1242	4140	6468	124
1496	W104	CT Sella	1242	4140	6468	124
1497	W105	CT Temporal Bone	1242	4140	6468	124
1498	W106	CT Orbits	1242	4140	6468	124
1499	W107	HRCT	1242	4140	6468	124
1500	W120	CT Neck	1168	3892	6086	115
1501	W130	CT Head and Neck	1863	6210	9701	189
1502	W140	CT Neck and Thorax	1826	6081	9504	184
1503	W150	CT Thorax	1380	4600	7190	138
1504	W170	CT Abdomen	1380	4600	7190	138
1505	W180	CT Thorax and Abdomen	2070	6900	10782	207
1506	W190	CT Pelvic Region	1352	4508	7043	133
1507	W200	CT Abdomen and Pelvis	2070	6900	10782	207
1508	W210	CT Thorax and Abdomen and Pelvis	2921	9734	15208	290
1509	W220	CT Spine	1380	4600	7190	138
1510	W230	CT Upper Limb	1380	4600	7190	138
1511	W240	CT Lower Limb	1380	4600	7190	138
1512	W241	Digital Scanogram	225	750	1173	23
1513	W250	CT Angiogram (Additional Charge)	2263	7544	11785	225
1514	W260	CT 3D Reconstruction	2263	7544	11785	225
1515	W281	CT Guided Biopsy FNAC	2484	8280	12940	248
1516	W282	CT Guided Truecut Biopsy	2484	8280	12940	248
1517	W291	CT - J - Needle Bone Biopsy	2921	9734	15208	290
1518	W501	99M-TC-MDP Bone Scan Planar	547	1831	2861	55
1519	W512	99M-TC-ECD Brain SPECT	731	2433	3804	74
1520	W513	99M-TC-Salivary Scan	547	1831	2861	55
1521	W514	99M-TC-Thyroid Scan	547	1831	2861	55
1522	W530	99M-TC-Oesophageal Transit Time	221	731	1141	23
1523	W531	99M-TC-SC / Phytate Liver Scan	363	1219	1900	37

Schedule of charges						
.	eCode	SeviceName	General	Private	Foreign	NC
1524	W532	99M-TC-Gastric Emptying Time	221	731	1141	23
1525	W540	99M-TC-MAA Lung Perfusion Scan	547	1831	2861	55
1526	W550	99M-TC-MIBI Myocardial Perfusion Scan	731	2433	3804	74
1527	W551	Regional PET/CT	2010	6698	10465	202
1528	W552	PET-CT Guided Biopsy	5295	17646	27572	529
1529	W553	PET-CT Based RT Planning	4931	16431	25673	492
1530	W554	Fluoride PET/CECT	3652	12167	19012	363
1531	W555	Meckel Scan	363	1219	1900	37
1532	W556	GI Bleed Scan	676	2254	3519	69
1533	W560	99M-TC-EC Renogram	221	731	1141	23
1534	W561	99M-TC-DTPA Renogram with GFR	290	975	1523	28
1535	W562	99M-TC-DMSA Renal Cortical Scan	290	975	1523	28
1536	W563	99M-TC-DTPA GFR	184	612	957	18
1537	W570	99M-TC-MIBI Tumor	915	3045	4761	92
1538	W572	99M-TC-DTPA Aerosol Scan	547	1831	2861	55
1539	W573	99M-TC-DTPA Clearance	547	1831	2861	55
1540	W574	99M-TC-RBC Gated Pool (Muga)	437	1458	2282	46
1541	W575	99M-TC-Sentinel Node Imaging	221	731	1141	23
1542	W576	99M-TC-Merbrofenin Scan	363	1219	1900	37
1543	W578	Whole Body Scan (Low Energy)	1095	3652	5704	110
1544	W579	Whole Body Scan (Higher Energy)	1458	4867	7604	147
1545	W600	Radio Iodine Therapy for Thyrotoxicosis	368	1831	2861	37
1546	W651	DaT Scan (Dopamine Transport SPECT)	10000	13500	21060	10000
1547	W652	Other 99m Tc-based tests : DRCG, GER scan,Meckets scan,Liver-Spleen scan, FNH-hepatic	1500	2500	3900	1500
1548	W653	RAIU (Radioiodine thyroid uptake)	1000	2000	3120	1000
1549	W654	Perchlorate discharge test	1500	3000	4680	1500
1550	W655	Iodine therapy (thyroid cancer) 100 mCi	15500	18000	28080	15500
1551	W656	Iodine therapy (thyroid cancer) 150 mCi	20000	23000	35880	20000
1552	W657	Iodine therapy (thyroid cancer) 200 mCi	25000	30000	46800	25000
1553	W661	BONE SCAN	1	0	0	0

Schedule of charges

.	eCode	SeviceName	General	Private	Foreign	NC
1554	W699	Radiopharmaceutical Charge - 177Lu-DOTATETE	40158	40158	40158	40158
1555	W704	Radiopharmaceutical Charge - 177Lu-PSMA (200	46368	46368	46368	46368
1556	Z003	DRUGS	0	0	0	0
1557	Z005	Issue of LIC Certificates	791	791	791	791