# **GOVERNMENT OF KARNATAKA**

# Department of Personnel and Administrative Reforms

# KARNATAKA GOVERNMENT SERVANTS' (MEDICAL ATTENDANCE) RULES, 1963

(As provided by DPAR in their U.O. Note No. DPAR 250 SENIF 2006, dated:29.03.2006)

## Notification No. GAD 7 OMR 63, dated 25th March 1963

In exercise of the powers conferred by the proviso to Article 309 of the Constitution and in supersession of the Karnataka Government Servants' (Medical Attendance) Rules 1957, the Governor of Karnataka hereby makes the following rules, namely:-

# Preliminary

**1. Title:-** These Rules may be called the Karnataka Government Servants' (Medical Attendance) Rules. 1963.

<sup>1</sup>[2. Application:- (1) These Rules shall apply to the Government Servants including the members of their family

Explanation:- For the purpose of this rules, "family" means,

(i) the wife or husband of the Government Servant,

(ii) the father and mother (including step-mother) if they ordinarily reside with the Government Servant and their total monthly income does not exceed four thousand rupees; and

(iii) children including adopted children and step children, of a Government Servant who are wholly dependent on such Government servant.]  $^1$ 

<sup>1</sup> Substituted in Notification No. DPAR 2 SMR 2005 dated 2<sup>nd</sup> September 2005

**3. Definitions**:- In these Rules, unless the context otherwise requires:

(a) "authorised medical attendant" means:

<sup>2</sup>[(i) a medical officer who is a Gazetted Government servant working in a Government hospital or Government Medical Institution]<sup>2</sup>;

<sup>2</sup> Substituted in Notification No.GAD 3 SMR 71 dated 15th July 1971

<sup>1</sup>[(ii) in the case of the following Government servants, the Government servant himself viz.-the Director of <sup>3</sup>[Health and Family Welfare Services]<sup>3</sup> the Joint Directors, the Deputy Directors and the Assistant Directors of Directorate of <sup>3</sup>[Health and Family Welfare Services]<sup>3</sup>, the Superintendents of major hospitals, <sup>2</sup>[the District Surgeons, the Chemical Examiner]<sup>2</sup>, the District Health and Family Welfare Officers and Medical Officers stationed in places where there are no other Medical Officers]<sup>1</sup>;

<sup>1</sup> Substituted in Notification No.GAD 4 SMR 74 dated 29<sup>th</sup> November 1974
 <sup>2</sup>Substituted in Notification No.GAD 2 SMR 76 dated 18<sup>th</sup> June 1976
 <sup>3</sup>Substituted in Notification No.DPAR 1 SMR 78 dated 21st September 1983

<sup>4</sup>[(iii) in the case of Government servants working in or outside Taluk Headquarters, Medical Officers, Gazetted or Non-Gazetted in charge of Local Fund Dispensaries and Primary Health Units of Centres of the place where the Government Servant is working;

(iv) in the case of Government servants working in or outside Taluk Headquarters where no Government Medical Officers are appointed, Medical Officers of the Local Fund Dispensaries in the place run by Taluk Boards or Village Panchayats]<sup>4</sup>.

<sup>4</sup> Substituted in Notification No.GAD 10 OMR 64 dated 5<sup>th</sup> September 1964

<sup>5</sup>[Note 1 to 4]<sup>5</sup> <sup>5</sup>Omitted in Notification No.GAD 3 SMR 69, dated 9<sup>th</sup> February 1971

(v) in the case of Government servants suffering from Tuberculosis and receiving treatment at the Karnataka Health Institute, Ghataprabha, the Chief Medical Officer of the said Institute.

 ${}^{6}$ [(vi) in the case of Government servants working in the State Government offices located outside the State, Medical Officers, Gazetted or Non-Gazetted in charge of the Government hospitals of the places where such offices are located]<sup>6</sup>.

<sup>6</sup>Inserted in Notification No. GAD 2 SMR 73 dated 6<sup>th</sup> June 1974

<sup>7</sup>[(vii) in the case of Government servants availing themselves of medical attendance and/or treatment under the <sup>8</sup>[Ayurvedic, Unani or Homoeopathic] <sup>8</sup> system of medicine the medical officer in charge of such "Government hospital or Dispensary] <sup>7</sup>."

<sup>7</sup> Inserted in Notification No. DPAR 4 SMR 77 dated 14<sup>th</sup> July 1977

<sup>8</sup> Substituted in Notification No. DPAR 1 SMR 78 dated 21<sup>st</sup> September 83

<sup>9</sup>[(viii) in case of the authorised hospitals or medical institutions specified in Schedule-I registered medical attendant incharge of the respective wing and in case of Diagnostic centres the person in charge of particular wing of the Diagnostic centre]9.

<sup>9</sup>[(aa) authorised Hospitals and medical institutions means the Hospitals and medical institutions specified in Schedule-I]<sup>9</sup>.

<sup>9</sup> Inserted in Notification No. DPAR 1 SMR 2000 dated 22<sup>nd</sup> January 2001

(b) "Controlling Officer" for the purposes of claims for reimbursement of expenditure incurred in connection with Medical Attendance means:-

1[(i) in respect of government servants working in the Secretariat, such officer as may be designated by the Chief Secretary and different officers may be designated for different classes of government servants] 1;

<sup>1</sup> Substituted in Notification No. DPAR 5 SMR 84 dated 11<sup>th</sup> June 1985

(ii) the Heads of Departments for the respective departments; and

(iii) the officers who are empowered to countersign T.A.Bills.

(c) "Form" means a form appended to these Rules.

<sup>2</sup>[(cc) 'Government hospital' or Government medical institution includes a Local Fund Hospital or Dispensary, Primary Health Centre and a Medical Institution or hospital maintained by or <sup>3</sup>[under the control of the Central Government, a Corporation, a Municipality, a Taluk Board or a Panchayat]<sup>2</sup> and the National Institute of Mental Health and Neuro Sciences, Bangalore]<sup>3</sup>, <sup>4</sup>[Kidwai Memorial Institute of Oncology, Bangalore]<sup>4</sup>, <sup>6</sup>[Sanjay Gandhi Accidents and Rehabilitation Complex, Bangalore, Sri Jayadeva Institute of Cardiolgy, Bangalore, <sup>7</sup>[Indira Gandhi Institute of Child Health, South Hospital Complex, DRC Post, Bangalore]<sup>7</sup>, <sup>5</sup>[the Karnataka Cancer Therapy and Research Institute, Hubli and the Kuduremukh Hospital, Kuduremukh, Chikmagalur]<sup>5</sup>, and other authorised Hospitals and medical Institutions specified in Schedule-I] <sup>6</sup>

- <sup>2</sup> Inserted in Notification No.GAD 3 SMR 71 dated 15th July 1971
- <sup>3</sup> Substituted in Notification No.GAD 1 SMR 75 dated 17<sup>th</sup> March 1975
- <sup>4</sup> Inserted in Notification No DPAR 5 SMR 80 dated 24<sup>th</sup> September 1981
- <sup>5</sup> Substituted in Notification No.DPAR 3 SMR 83 dated 8th May 1984
- <sup>6</sup> Inserted in Notification No.DPAR 1 SMR 2000 dated 22nd January 2001
- <sup>7</sup> Inserted in Notification No.DPAR 6 SMR 2004 dated 14th July 2004

<sup>8</sup>[ Explanation-I:- For purposes of sub-rule (3) of rule 6 'Government Hospital' means a hospital or a dispensary run by the Central Government or a State Government or a Corporation or other local authority within whose jurisdiction the office is located]<sup>8</sup>.

<sup>8</sup> Inserted in Notification No. GAD 2 SMR 73 dated 6<sup>th</sup> June 1974 (Renumbered in Notification No. DPAR 3 SMR 98 dated 8<sup>th</sup> March 2000)

<sup>1</sup>[Explanation-II:- In respect of Government servants working in the Karnataka Bhavan, at New Delhi, the Medical Attendance received from the doctors or in the clinics and hospitals specified below or in the private hospitals, diagnostic centres etc., recognised under the Central Government Health Scheme, shall be deemed to be medical attendance received in a Government Hospital for the purpose of sub-rule (3) of rule 6, namely:-

- (1) Dr.P.N.Kochar, Physician & Authorised Medical Attendant, New Delhi.
- (2) Part time Lady Medical Officer (at Karnataka Bhavan).
- (3) South Delhi Pathological Clinic.
- (4) General Williams Masonic Poly Clinic.
- (5) Rama Krishna Mission Free Tuberculosis Clinic.
- (6) Dr.Susheel Choudary, Eye Specialist, Cannaught Circus.
- (7) M.M.Eyetech (P) Limited.
- (8) Dr.Gandhi, Delhi Dental and Orthodentic Clinic.
- (9) Dr.Prathima Venkateshwaran, Dental & Orthodentic Clinic.
- (10) Sandhu Vasavani Charitable Hospital, Anand Niketan, New Delhi.
- (11) Mata Channammadevi Charitable Hospital, Janakapuri, Delhi.
- (12) Dr.Vijay Sharma, Dr(Mrs.)Arti Sharma, J-4, Jor Bagh Road, New Delhi.
- (13) Sunil Memorial Nursing Home, S.M.Hospital (Approved by Government of Delhi) Rz-13-1/6, Main Road, Palam Colony, New Delhi-110 045.
- (14) Dr.Anitha Pal, Dr.Yogendra Pal, Pal Medicare Centre, M-52, Lajpath Nagar-II, New Delhi-2.
- (15) Dr.Ashok Kaushik, 110-A, Kamalanagar, Old Delhi-7.
- (16) Dr.Grewal, A/2, 179, Jeevan Nagar, Ashram, New Delhi-2
- (17) Dr.Kapoor's Clinic & Diagnostic Pathology lab, A1, Ring Road, South Dr.Ashok Kaushik, 110-A, Kamalanagar, Old Delhi-7]<sup>1</sup>.
   <sup>1</sup> Inserted in Notification No. DPAR 3 SMR 98 dated 8<sup>th</sup> March 2000

## <sup>2</sup> [(18) Holy Family Hospital, New Delhi] <sup>2</sup>.

<sup>2</sup> Inserted in Notification No. DPAR 8 SMR 2001 dated 4<sup>th</sup> September 2002

(d) "Medical attendance" means:-

(i) in respect of a Government servant Specified in Sub-clause (a), attendance in hospital or at the residence of the Government servant, including such pathological bacteriological, radiological or other methods of examination for the purpose of diagnosis as are available in any Government hospital within the State and are considered necessary by the authorised medical attendant and such consultation with a Specialist in Government employ within the State or other Medical officer similarly in Government employ within the State as the authorised medical attendant certifies to be necessary to such extent and in such manner as the Specialist or Medical Officer may in consultation with the authorised medical attendant, determine;

(ii) in respect of any other Government Servant, attendance at a Government hospital, or in the case of illness which compels the patient to be confined to his residence, at the residence of the Government servant including such methods of examination for purpose of diagnosis, as are available in the nearest Government Hospital and such consultation with a Specialist or other Medical Officer stationed in the district, as the authorised medical attendant certifies to be necessary to such extent and in such manner as the specialist or Medical Officer may in consultation with the authorised medical attendant determine;

(e) "Patient" means a Government servant to whom these rules apply and who has fallen ill;

1[(f) pay means the pay of a Government Servant as defined in rule 8(32) of the K.C.S.RS]<sup>1</sup>.

<sup>1</sup> Substituted in Notification No.DPAR 1 SMR 82 dated 17<sup>th</sup> July 1982

 $^{2}$ [(ff) "Schedule" means the Schedule appended to these rules, the State Government may by notification add, remove or modify the items in the Schedule]<sup>2</sup>.

<sup>2</sup> Inserted in Notification No.DPAR 1 SMR 2000 dated 22<sup>nd</sup> January 2001

(g) "Station" means the town or place within the State in which the Government servant falls ill;

(h) "Treatment" means the use of all medical X-ray and surgical facilities available at the Government Hospital in which a Government servant is treated and includes:-

(i) the employment of such pathological, bacteriological, radiological or other methods as are considered necessary by the authorised medical attendant;

(ii) the supply of such medicines, vaccines, sera or other therapeutic substance as are ordinarily available in the hospital;

(iii) the supply of such medicines, vaccines, sera or other therapeutic substances as the authorised medical attendant may certify in writing to be essential for the recovery, or for the prevention of serious deterioration in the condition of the Government servant and which are not ordinarily available with the authorised Medical attendant;

<sup>3</sup>[(iiia) the supply of such quantity of blood as the authorised medical attendant may certify in writing to be essential for the recovery, or for the prevention of serious deterioration in the condition of the Government servant]<sup>3</sup>;

<sup>3</sup> Inserted in Notification No.GAD 18 OMR 63 dated 3<sup>rd</sup> March 1965

Note:- Prescription of expensive drugs, tonics, laxatives or other elegant and proprietary preparations for the use of Government servants and members of their families when drugs of equal therapeutic value are available in the hospitals and dispensaries is prohibited.

(iv) treatment of confinement cases of a Government servant;

(v) such class of accommodation in hospital or sanatoria as specified in column (3) of the Table below, to the Government servant whose  ${}^{4}$ [pay]<sup>4</sup> does not exceed the limit specified in columns (1) and (2) thereof.

<sup>4</sup> Substituted in Notification No.DPAR 1 SMR 82 dated 17<sup>th</sup> July 1982

	Basic Pay as per the 1999 scales	Class of accommodation in hospitals or
	of pay	Sanatoria (Rates applicable on per day basis)
	1	2
	1. All Government/Spec	ial Hospitals including Sanatoria.
(1)	Not exceeding Rs.2925 General Wards or Rs.30 wards or R	
		wards in the case of Vanivilas Hospital,
		Bangalore, Minto Hospital, Bangalore,
		Cheluvamba Hospital, Mysore, Vijayanagar
		Institute of Medical Science, Bellary.
(2)	Exceeding Rs.2925 but no	Rs.30 wards or any wards upto and inclusive
	exceeding Rs.4450	of Rs.50 wards.
(3)	Exceeding Rs.4450 but no	Above Rs.50 wards or any wards upto and
	exceeding Rs.7600 inclusive of Rs.75 wards.	
(4)	Exceeding Rs.7600 but no	Rs.100 wards or any wards just below
	exceeding Rs.9060	Rs.150.
(5)	Exceeding Rs.9060 Rs.150 wards or any wards above Rs.150.] <sup>1</sup>	

# <sup>1</sup>[TABLE

<sup>1</sup> Substituted in Notification No.DPAR 1 SMR 2000 dated 22<sup>nd</sup> January 2001

(vi) Such nursing as is ordinarily provided to inpatients by the hospital;

Provided that where special nursing becomes necessary, it should be considered on merits and a refund admitted to the extent justified in each case with the special sanction of the Government in the Finance Department.

 ${}^{2}$ [(vii) the specialist consultation specified in clause (d) and diet charges at twenty percent of ward charges are admissible under item (v) in the case of members of the nursing staff of the hospitals and in the case of  ${}^{3}$ (Government Servants whose monthly pay does not exceed Rs.8200/- in accordance with the K.C.S.(Revised Pay) Rules, 1999]<sup>2</sup>)<sup>3</sup>.

<sup>2</sup> Substituted in Notification No.DPAR 1 SMR 82 dated 17<sup>th</sup> July 1982
 <sup>3</sup> Revised as per KCS (Revised Pay) Rules, 1999

<sup>4</sup>[(viii) Operation for sterilisation and medical termination of pregnancy made in a hospital established or maintained by Government or a place for the time being approved by the Government under section 4 of the Medical Termination of Pregnancy Act, 1971 (Central Act 34 of 1971)]<sup>4</sup>.

<sup>4</sup> Inserted in Notification No. GAD 1 SMR 76 dated 7th August 1976.

# <sup>1</sup>[3A; 3B:-]<sup>1</sup>

<sup>1</sup> Omitted in Notification No.GAD 6 SMR 70 dated 11th October 1971.

**4.** Determination of the Appropriate Medical Attendant:- (1) The authorised medical attendant of a Government servant shall be determined with reference to the place at which he falls ill, whether at his permanent residence or the place of casual stay or the place where he may be spending his leave.

<sup>2</sup>[(2) For purposes of these rules in medical institutions where there are Gazetted Medical Officers, Honorary Specialists or Medical Officers, Part-time Specialists or Medical Officers and Medical Officers belonging to Class III Service, shall not be treated as authorised medical attendants for any category of Government servants]<sup>2</sup>.

<sup>2</sup>Substituted in Notification No.GAD 3 SMR 69 dated 9th February 1971

(3) For purposes of these rules the pay and status of a Government servant under suspension shall be the pay he was drawing and the status he was holding immediately before the date of suspension.

(4) In the case of re-employed: pensioners, the pay they are drawing after reemployment including the pension shall be taken as the basis for purposes of medical attendance and treatment.

 ${}^{3}$  (5) in the case of Local Fund Medical Institutions and Medical Institutions run by the City of Bangalore Municipal Corporation in Bangalore City or by the Municipalities in other places, the Medical Officers of such Medical Institutions shall, irrespective of their rank be the authorised medical attendants for all categories of Government servants who are treated in such institutions]<sup>3</sup>.

<sup>3</sup>Inserted in Notification No.GAD 3 SMR 69, dated 9th February 1971

**5.** Special Nursing:- Special nurses shall be engaged only with the approval of the Medical Superintendent of the Hospital concerned when their services are absolutely essential and for the minimum period necessary. For claiming charges in respect of special nursing the Government servant shall produce a Certificate in form 'A'.

# **PART II**

## <sup>1</sup>[6. Treatment outside the state:-

(1) Any Government servant who is at a place outside the State but within the territory of India, either on duty or on deputation may receive medical attendance under these rules in any Government Hospital of the place where he falls ill or if there is no such Government Hospital in an/y other institution recognised by Government from time to time and shall be entitled to recover the costs incurred therefore calculated in accordance with these rules on the production of a certificate from the Medical Officer in charge of such hospital or institution.

(2) Any Government servant who is at a place outside the State but within the territory of India either on leave or during the course of a journey may, if he suddenly falls ill and has to receive urgent medical attendance, get the same in accordance with these rules at the place he falls ill at a Government Hospital or other institution recognised by Government from time to time.

Provided that such Government servant gets himself discharged as soon as he is certified fit to travel and undertake to continue the treatment within the State; and

Provided further that such Medical attendance shall not include consultation of experts outside the State at Government cost for any particular disease] 1.

<sup>1</sup> Substituted in Notification No. GAD 5 OMR 63 dated 24<sup>th</sup> September 1963

 ${}^{2}$ [(3) A Government servant working in the State Government Offices located outside the State may receive medical attendance under these rules in Government hospitals in the places where such offices are located and they shall be entitled to recover the costs incurred therefore on the production of a certificate from the Authorised Medical Attendant]<sup>2</sup>.

<sup>2</sup> Inserted in Notification GAD 2 SMR 73 dated 6th June 1974

**7. Free Medical Treatment:-** A Government servant shall be entitled free of charge:-

to treatment :-

(i) (a) in such Government Hospital at or near the place where he falls ill, as can, in the opinion of the authorised medical attendant, provide the necessary and suitable treatment, or

<sup>3</sup>[(b) x x x x x x x ]<sup>3</sup> <sup>3</sup> Omitted in Notification No.GAD 3 SMR 71 dated 15th July 1971.

(ii) to anti-rabic treatment at the nearest Government hospital providing such treatment.

**8.** Admission to and treatment in wards:- (1) The patients who under these rules, are eligible for treatment in a particular class of paying or special ward, may get themselves treated in any higher class of ward, by paying the difference in the rates for the two classes of wards.

(2) If at the time of admission there is no vacant bed in a ward of the class to which a patient is entitled or if such a class of ward does not exist, he may be admitted to a ward of the next higher class existing in the hospital, if vacant till such time as a ward

of the class to which he is entitled falls vacant, and he should be transferred to such ward at once. For the period that he has had to stay in the next higher class ward, charges at the higher rate will be recovered provided that he will be entitled to a refund of the difference on production of the necessary certificate from the authorised Medical Attendant that the patient was admitted to the higher class of ward due to the non-availability of the class of ward he is entitled.

(3) In cases falling under sub-rule (2) when the ward of the next higher class happens to be ward of the highest class available in the Hospital as for example, the ten rupee ward in the Bowring and Lady Curzon Hospital, Bangalore, two Government servants admitted to that ward may if possible, be accommodated in the room allotted normally for one patient in that ward.

Provided that notwithstanding anything contained in these rules the Government Servant and his family shall be eligible for treatment in the wards of the authorized hospitals and medical institutions specified in Schedule-I as per the rates specified in of the Table below:-

	Range of pay	Category of Ward/class of accommodations to	Maximum ward
		which entitled	charges/room rent to which entitled
	1	2	3
i)	Upto Rs.4350 per month	General Ward	Rs.100/- per day
ii)	Rs.4351 to Rs.11840 per month	Semi Private Ward	Rs.200/- per day
iii)	Rs.11841 and above	Private Ward	Rs.500/- per day] <sup>1</sup>

#### TABLE

<sup>1</sup> Inserted in Notification No.DPAR 1 SMR 2000 dated 22<sup>nd</sup> January 2001.

**9. Production of certificate at the time of Admission:-** (1) Government servants belonging to Class III or Class IV of the State Civil Services, shall <sup>2</sup>[produce before the Medical Officer a certificate in Form AA signed by the Head of the Office]<sup>2</sup> furnishing all particulars about appointment, pay, etc., which are necessary for allocating a ward suitable to their status as well as for purposes of medical charges. In such cases it shall not be necessary to collect <sup>3</sup>[the Hospital fees including ward charges]<sup>3</sup>. When no such certificate is produced, the Government servant should pay the ward charges in the first instance and claim re-imbursement later.

<sup>2</sup> Substituted in Notification No.GAD 3 SMR 71 dated 15th July 1971

<sup>3</sup> Substituted in Notification No. GAD 23 OMR 64 dated 18th August 1965

(2) When such Government servant is not able to produce the certificate mentioned in sub-rule (1) due to some emergent or unforeseen circumstances, he/she or a member, of his/her family may be admitted to the ward he/she is entitled to on his/her giving a written statement signed by him/her giving the necessary particulars regarding

his/her pay, post and office or department. He/she should be required to produce the necessary certificate from the Head of Office within three days of admission failing which the ward charges shall be collected from him/her subject to reimbursement later.

(3) In the case of Government servants Class I and Class II seeking admission to the ward of treatment they shall produce before the Medical Officer a declaration signed by themselves furnishing the required particulars.

(4) The provisions of sub-rules (1) to (3) above shall apply to treatment in general hospitals as well as in special hospitals including Sanatoria.

**10. Charges for Medical Attendance**:- (1) A Government servant shall be entitled free of charges to medical attendance by the authorized medical attendant. Medical Officers shall not be allowed to charge any fees.

for Government Servants for whom they are appointed medical attendant.

(2) If a Government servant stationed or travelling on duty, or on leave in any place in the territory of India outside the State receives any medical attendance for himself or for the members of his family, any reasonable amount paid by him on account of such treatment shall on production of a certificate in writing of the medical attendant be reimbursed to him after obtaining sanction of Government in the Finance Department.

(3) No Government servant will be entitled to any free services by Dentists or Opticians except for eye diseases requiring medical treatment and prescription of glasses and for removal of teeth and supply of dentures.

<sup>1</sup>[Save as provided in clause (i) and (1) of sub-rule (2) of rule 14, the Government will not bear the cost of spectacles and new dentures] <sup>1</sup>

<sup>1</sup> Substituted in GAD 4 SMR 71 dated 21st May 1971. 2[xxxxx xxxxx] 2

<sup>2</sup> Omitted in Notification No. DPAR 7 SMR 76 dated 16th July 1977

(4) When a Government servant on transfer to a station leaves his family at another or previous station owing to inability to secure residential accommodation at the place to which he is transferred or because his children are in school, members of his family will be eligible for free medical attendance in the station from where the Government servant is transferred so long as his family has to remain there.

(5) No fee shall be charged or be paid by Government servants for the examination of the eyes for prescription of glasses.

(6) No fee shall be charged for sterilisation of instruments used in connection with operations performed on Government servants and their families.

**11. Travelling Allowance:-** (1) When the place at which the patient falls ill is not the headquarters of the authorised medical attendant:-

(a) the patient shall be entitled to travelling allowance for the journey to and from such headquarters; or

(b) if the patient is too ill to travel, the authorised medical attendant shall be entitled to travelling allowance for the journey to and from the place 1 [where the patient is; or] 1

<sup>1</sup> Substituted in Notification No. GAD 14 OMR 63 dated 29th February 1964

 ${}^{2}[(c)]$  if the patient is unable to travel by himself and the authorised medical attendant certifies to this effect, the person accompanying such patient shall be entitled for the journey to and from such headquarters;

(i) if such person is a Government servant, to draw travelling allowance as for a journey on tour; and

(ii) if such person is not a Government servant, to draw single railway fare of the class to which the patient is entitled or the actual expenses whichever is less or the bus fare, as the case may be]<sup>2</sup>.

<sup>2</sup>Inserted in Notification No. GAD 14 OMR 63 dated 29th February 1964.

(2) Applications for travelling allowance under sub rule (1) shall be accompanied by a certificate in writing by the authorised medical attendant stating that medical attendance was necessary, and if the application is under clause (b) of that sub rule, that the patient was too ill to travel.

<sup>3</sup>[11-A. Conveyance Allowance.- Where a journey is undertaken within the same City, Town or other area within the jurisdiction of a municipal body and the distance travelled is more than eight kilometers each way, a Government servant and members of his family shall be entitled to conveyance allowance as indicated below, if it is certified by the authorised medical attendant that it was necessary for the Government servant or a member of his family to travel by a conveyance for purposes of treatment.

(i) if the patient is a Government servant actual conveyance charges limited to mileage allowance without daily allowance as for a journey on tour, and

(ii) if the patient is a member of the family of Government servant, actual conveyance charges limited to half the mileage allowance without daily allowance as for a journey on tour]  $^{3}$ .

Inserted in Notification No. GAD 4 SMR 66 dated 6th April 1967.

**12.** Special medical treatment in certain cases:- (1) If the authorised medical attendant is of the opinion that the case of the patient is of such serious or special nature as to require medical attendance by some persons other than himself or that the patient requires anti-rabic treatment he may with the approval of the Director of <sup>1</sup>[Health and Family Welfare Services]<sup>1</sup><sup>2</sup>[or the Director of Indian Systems of Medicine and

Homoeopathy, as the case may be]  $^2$  which shall be obtained before and unless the delay involved entails danger to the health of the patient:-

<sup>1</sup> Substituted in Notification No. DPAR 1 SMR 78 dated 21st September 1983
 <sup>2</sup> Inserted in Notification No. DPAR 1 SMR 78 dated 21st September 1983

(a) send the patient to the nearest Specialist or the other Medical Officer as provided in clause (d) of rule 3 by whom, in his opinion, medical attendance is required for the patient or in the case of anti-rabic treatment, to the nearest place where such treatment is available : or

(b) if the patient is too ill to travel, summon such Specialist or other Medical Officer to attend upon the patient.

(2) A patient sent under clause (a) of sub-rule (1) shall on production of a certificate in writing by the authorised medical attendant in this behalf, be entitled to travelling allowance for these journeys and from the Headquarters of the Specialist or other Medical Officer or the Place where he is sent for anti-rabic treatment.

 ${}^{3}$ [(2A) If the patient who takes special medical treatment under sub-rule (1) is unable to travel by himself and the authorised medical attendant considers that it is unsafe for the patient to travel unattended, the person accompanying such patient shall, on production of a certificate in writing from the authorised medical attendant in this behalf, be entitled for the journey to and from the headquarters of the Specialist or other Medical Officer to draw travelling allowance or the railway fare or the bus fare, as the case may be as specified in clause (c) of sub-rule (1) of rule 11]<sup>3</sup>

<sup>5</sup> Inserted in Notification No.GAD 14 OMR 63 dated 29th February 1964.

(3) A Specialist or other Medical Officer summoned under sub-rule (1) shall, on production of a certificate in writing by the authorised medical attendant, in this behalf be entitled to travelling allowance for the journey to and from the place where the patient is and also daily allowance according to rules.

**13.** Application of K.C.S.R:- The travelling Allowance admissible under rules 11 and 12 shall be subject to the provisions of Part VIII of the Karnataka Civil Services Rules, 1958.

**14. Reimbursement of Medical Expenses**:- (1) Where a Government servant is entitled under rule, 7 free of charge to treatment in any hospital any amount paid by him on account of such treatment shall on production of a certificate in writing by the authorised medical attendant in this behalf be reimbursed to him by the Government.

(2) (a) The refund of the cost of preparations which are not medicines but are primarily foods, tonics toilet preparations or disinfectants is not admissible under these rules.

1[(b) List of items for which refund is not admissible under these Rules shall be those published by the Director General of Health Service, Government of India, from time to time] 1.

Substituted in Notification No.GAD 14 OMR 63 dated 29th February 1964.

Provided that the cost of any therapeutic substance included in such list, which is prescribed by the authorised medical attendant as absolutely essential for the recovery of the patient shall be reimbursed by Government, if the State Government after consultation with the Director of <sup>2</sup>[Health and Family welfare Services]<sup>2</sup> is satisfied that such therapeutic substance was absolutely essential for the recovery of the patient and makes an order to that effect.

<sup>2</sup> Substituted in Notification No. DPAR 1 SMR 78 dated 21<sup>st</sup> September 1983.

(c) Sales-tax paid by Government servants while purchasing special medicines from the market is refundable under the rules. Packing and postage charges paid by Government servants for purchasing special medicines from out stations are not refundable.

(d) If an ambulance is used to convey a patient to a place of treatment or to convey a patient from one hospital to another hospital for purposes of certain/medical examinations, etc., the charges incurred by the Government servant on that account are refundable.

(e) Charges for sterilisation of instruments used in connection with operation performed on Government servants and their families are not payble by them, as it is the duty of the Hospital authorities to keep all the surgical instruments sterilised and in order.

 ${}^{3}$ [(f) In cases where, for lack of facilities at a Government hospital or in the laboratory attached to it, skiagrams of ECG's are taken at a private laboratory or hospital, the charges incurred thereon shall be refundable at the rates prevalent in Government hospitals]<sup>3</sup>.

<sup>3</sup> Substituted in Notification No.GAD 1 SMR 74 dated 28th October 1974.

(g) Charges recovered for operations performed on Government servants, who get admitted to a ward higher than that what they are entitled to are reimbursable to them.

<sup>4</sup>[(h) the cost of Ayurvedic, Unani and Homoeopathy medicines is also refundable. The lists of items for which refund is admissible under these rules in respect of Ayurvedic, Unani and Homoeopathic medicines shall be those published by the Director of Indian Systems of Medicine and Homoeopathy.

Provided that the cost of any therapeutic substance not included in such list but is prescribed by the authorised medical attendant as absolutely essential for the recovery of the patient shall also be reimbursed by Government, if the State Government after consultation with the Director of Indian System of Medicine and Homoeopathy is satisfied that such therapeutic substance was absolutely essential for the recovery of the patient and makes an order to that effect]<sup>4</sup>.

<sup>4</sup>Substituted in Notification No. DPAR 1 SMR 78 dated 21<sup>st</sup> September 1983.

(i) (A) Refund in respect of a full set of dentures where necessary shall be allowed upto a maximum of one hundred rupees once during, the entire service of a Government servant;

(B) Refund in respect of replacement of teeth in cases other than those falling under sub-clause (A) shall be allowed as and when necessary.

Provided that no refund under clauses A and (B) shall be allowed where the dentures of or teeth are made of any material like Gold, Silver etc.

[(C) Refund in respect of scaling and filling of the teeth or for any treatment taken for diseases connected with teeth shall be allowed.

<sup>1</sup> Inserted in Notification No. DPAR 1 SMR 81 dated 29th October 1981

(j) In the case of <sup>2</sup>[Government servants whose monthly pay does not exceed Rs.8200/- in accordance with the Karnataka Civil Services (Revised Pay) Rules, 1999]<sup>2</sup>expenses incurred for procuring artificial appliances including travelling expenses and hospitalisation charges, if any, are reimbursable provided that the officer-in-charge of the medical institution where the Government servant has undergone the treatment certifies that such appliances were absolutely essential for the treatment of the Government servant.

<sup>2</sup> Revised as per KCS (Revised Pay) Rules, 1999

 ${}^{3}[(k)$  the cost of blood purchased for being administered to the patient on the advise of the authorised medical attendant shall be refundable on production of a certificate by the authorised medical attendant]  ${}^{3}$ 

<sup>3</sup>Inserted in Notification No.GAD 18 OMR 63 dated 3rd March 1965

 ${}^{4}$ [(1) Refund in respect of the cost of spectacles, where necessary, shall be allowed thrice during the entire service of the Government servant, subject to the condition that the amount claimed in each case does not exceed a maximum of three hundred rupees]<sup>4</sup>.

<sup>4</sup>Substituted in Notification No.GAD 2 SMR 75 dated 13th February 1976.

*Explanations.* - For the purpose of this clause 'artificial appliances' means"

(i) Prosthetic appliances of all kinds for the upper and lower limbs;

(ii) spinal braces or spinal supports including spinal belts;

(iii) cervical collars of all kinds, such as, of plastic, leather or stainless steel with leather coverings;

(iv) leather and metallic splints devised for correction of deformities and providing support for upper limbs;

(v) bracerage of all kinds including callipers, knee cage, knock knee and bow legs splints made of metal and leather; and

(vi) orthopaedic shoes, boots and splints used for correction of deformities of feet and legs.

1[(m) Refund in respect of the cost of Polio boots shall be allowed only at intervals of not less than three years and may be claimed only three times in respect of an individual. Refund in respect of machinery appurtenances like crutches, limb supports etc., shall be allowed only if they are purchased from a Medical College/Hospital

(Rehabilitation Department), of from the Artificial body (Parts) Centre at Pune or from any other Centre/Organisation recognised and approved by Central or State Government for such purposes. Both in the cases of Polio boots and machinery appurtenances the refund is subject to their being certified by concerned specialists as essential and is admissible only to those officers whose monthly pay does not exceed Rs.8200/- if it is in accordance with the Karnataka Civil Services (Revised Pay) Rules 1999]<sup>1</sup>.

<sup>1</sup>Inserted in Notification No. DPAR 1 SMR 79, dated 16th July 1980.

\*[(Artificial Limb Centres at Bangalore and Mangalore in respect of artificial limbs are recognised)] \*.

\*G.O.No.DPAR 4 SMR 85 dated 8<sup>th</sup> January 1986.

2[(n) Refund in respect of purchase of hearing aid shall be allowed to the extent of rupees three hundred once during the entire service of a Government Servants subject to the following conditions:

(i) The benefit of reimbursement of charges towards purchase of hearing aid will be admissible to the Government servant only and not to the members of his family:

(ii) The reimbursement of charges will be admissible on the basis of the certificate issued by the Head of the ENT Department in a Government Hospital. The certificate should specify that the Government servant is required to use hearing aid for his right/left ear;

(iii) The Government servant should make use of the hearing in the course of the discharge of his normal official duties]<sup>2</sup>.

<sup>2</sup> Inserted in Notification DPAR 4 SMR 80 dated 3rd March 1981.

 ${}^{3}$ [(o) Refund in respect of purchase of pacemaker shall be allowed subject to the condition that the officer incharge of Medical Institution where the Government servant has undergone treatment certifies that implantation of pacemaker was absolutely essential for treatment of the Government Servant]<sup>3</sup>.

<sup>3</sup> Inserted in Notification No. DPAR 6 SMR 82 dated 20th September 1983.

<sup>4</sup>[(3) Notwithstanding anything contained in these rules, the reimbursement of the Medical expenses in respect of the treatment taken in the authorised hospitals and medical institutions specified in the Schedule-I shall be subject to the ceiling limits specified in column 3 of Schedule-II and Schedule-III in respect of treatment he availed specified in column 2 thereof respectively]<sup>4</sup>.

<sup>4</sup> Inserted in Notification No. DPAR 1 SMR 2000 dated 22<sup>nd</sup> January 2001.

**15. Claims for Reimbursement of Medical Charges:**- (1) All claims for refund of expenses incurred on account of the purchase of the special medicine should be accompanied by an "essentiality certificate" from the authorised medical attendant; the certificate shall be in form 'B'.

(2) Claims on behalf of deceased Government servants in connection with medical charges preferred by legal heirs are reimbursible in the same manner and under the same conditions relating to a Government servant. Article 81 of the Karnataka Financial Code, being applicable to such claims, as it does to salary, leave allowances. etc., due to a deceased Government servant.

(3) Claims for the reimbursement of the expenditure incurred in connection with the medical charges shall be preferred in Form 'C' and shall be submitted to the controlling officer <sup>1</sup>[three months, in accordance with the provisions contained in Article 146-A of Karnataka Financial Code, 1958] <sup>1</sup>. The expenditure relating to medical charges being debitable under sub-Head 'Allowance -honoraria, etc.,- cost of medical treatment.'

<sup>1</sup> Substituted in Notification No.GAD 2 SMR 70 dated 14th April 1970.

<sup>2</sup>[Provided that the claims for the reimbursement of medical expenditure of the officers of the Secretariat of and above the rank of Deputy Secretary may be sent direct to the Accounts Section for payment]<sup>2</sup>.

<sup>2</sup>Inserted in Notification No. DPAR 5 SMR 84 dated 11<sup>th</sup> June 1985.

(4) Claims by Government servants who are on duty, deputation, leave or travelling in any place outside the State, but within the territory of India referred to in Rule 6, shall be supported by proper receipts and vouchers countersigned by the authorised medical attendant to the effect that the treatment was necessary and the charges are reasonable having regard to the circumstances of the case, and sanction of Government obtained in the Finance Department.

 ${}^{3}$ [(5) Claims by Government servants for refund in respect of spectacles shall be accompanied by a certificate from the authorised Medical Attendant and a declaration in form D]  ${}^{3}$ .

<sup>3</sup> Inserted in Notification No. GAD 4 SMR 71 dated 21st May 1971.

(6) Claims by Government servants for reimbursement in respect of dentures or teeth shall be accompanied by an Essentiality Certificate from the Authorised Medical Attendant and in respect of a full set of dentures, a declaration in Form `E'.

**16.** Scrutiny of claims by Controlling Officers:- (1) The Controlling Officer, shall scrutinise the claims carefully before signing or countersigning them and shall satisfy himself that the claims are genuine, are covered by the rules and orders and are supported by the necessary bills and receipts duly certified by the authorised Medical Attendants or other competent medical authority, the verification in respect of cost of medicines being made with reference to the lists of non-reimbursible items issued by the Director of <sup>1</sup>[Health and Family Welfare Services]<sup>1</sup> in Karnataka, Bangalore <sup>2</sup>[or with reference to lists of reimbursible items in respect of Ayurvedic, Unani or Homoeopathic Systems of Medicines issued by the Director of Indian Systems of Medicine and

Homoeopathy]<sup>2</sup> from time to time which are and should be maintained up-to-date in all offices. Cases which are referred to the Secretariat Departments or emanate in the Secretariat itself should also be verified by the respective departments in the same manner, only cases where genuine doubts arise being referred to General Administration Department of the Karnataka Government Secretariat. Claims not Conforming to these conditions shall be disallowed.

<sup>1</sup> Substituted in Notification No. DPAR 1 SMR 78 dated 21<sup>st</sup> September 83
 <sup>2</sup> Inserted in Notification No. DPAR 1 SMR 78 dated 21<sup>st</sup> September 83

(2) After the claims are duly signed or countersigned the amounts due to Gazetted officers on account of reimbursement of medical expenses incurred, should be drawn by them on salary bills and those due to non-Gazetted employees on Establishment pay bills and paid over to them.

**17. Treatment at residence of Government Servants:-** (1) If the authorised medical attendant is of the opinion that owing to the absence or remoteness of a suitable hospital or to the severity of the illness, a Government servant cannot be given treatment as provided in clause (i) of Rule 7, the Government servant may receive treatment at his residence.

(2) A Government servant receiving treatment at his residence under sub-rule (1) shall be entitled to receive towards the cost of such treatment incurred by him a sum equivalent to the cost of such treatment, as he have been entitled, free of charge, to receive under these rules, if he had not been treated at his residence.

(3) Claims for sums admissible under sub-rule (2) shall be accompanied by a certificate in writing by the authorised medical attendant stating (a) his reasons for the opinion referred to in sub-rule (1) and (b) the cost of similar treatment referred in sub-rule (2).

(4) Treatment referred to in sub-rules (1) to (3) means treatment as defined in clause (h) of rule 3, and is distinct from "Medical Attendance" defined in sub-clause (d) of the said rule and does not include the visiting fee of a private Medical Practitioner.

(5) Computation of the cost of the treatment shall be on the scale prevailing at a Government hospital for treatment similar to that the Government servant receives at home.

(6) The Government servant shall consult the authorised medical attendant before receiving treatment at his residence and the reimbursement of the charges is subject to the authorised medical Attendant agreeing before hand about the need for treatment at the residence.

(7) The authorised Medical Attendant when he issues the certificate under subrule (3) shall certify that he was consulted before the treatment began and agreed to such treatment being given, giving reasons for not arranging for treatment at a Government hospital and shall also state the cost of similar treatment at a Government hospital. **18. Determination of Medical Charges:-** (1) Charges for service rendered in connection with, but not included in medical attendance on, or treatment of patient entitled free of charges to medical attendance or treatment under these rules, shall be determined by the authorised medical attendant and paid by the patient.

(2) If any question arises as to whether any service is included in medical attendance or treatment, it shall be referred to the Government and the decision of the Government shall be final.

**19. Countersignature of T.A. Bills:-** The controlling officer of a patient may require that any certificate required by these rules to be given by the authorised medical attendant claiming travelling allowance shall be counter signed :

(a) in the case of a certificate given by a Civil Surgeon, by the Director of <sup>1</sup>[Health and Family Welfare Services]<sup>1</sup>, and

<sup>1</sup> Substituted in Notification No. DPAR 1 SMR 78 dated 21st September 1983

 $^{2}$ [(aa) in the case of a certificate made by a medical officer of the Ayurvedic, Unani or Homoeopathic system of Medicine, by the Director of Indian Systems of Medicine and Homoeopathy]  $^{2}$ ."

<sup>2</sup> Inserted in Notification No. DPAR 1 SMR 78 dated 21st September 1983

(b) in the case of a certificate given by any other Medical Officer, by the Civil Surgeon of the District.

#### **Part III Facilities for T.B. Patients**

**20. Examination of Suspected Cases:**- Government servants suspected to be suffering fromTuberculosis should be sent for examination and opinion to the nearest Government T.B. Clinic or Sanatorium or nearest District Headquarters Hospital where proper facilities including X-Ray, are available for thorough examination. No charge shall be levied for X-Ray, skiagrams, examinations and laboratory investigations in this behalf.

**21. Report of Medical Attendant before expiry of leave and action thereon :-** (1) If, after such examination, the Government servant is found to be suffering from tuberculosis and the case is an active one, the Government servant should be granted such leave as is recommended in his case by the authorised medical attendant, until he has exhausted all the leave due to him under the leave rules applicable to him. Before the expiry of the period of leave, the Government servant shall appear before the authorised Medical Attendant for report whether he is fit to resume duty. If the authorised medical attendant reports that the Government servant is not fit to resume duty and that further treatment is necessary, the Government servant shall be granted extra-ordinary leave, as is admissible in the Karnataka Civil Service Rules for the period recommended by him, subject to a maximum of two years. If the authorised medical attendant reports that there is no likelihood of his returning to duty, the Government servant shall be retired on grounds of invalidity.

(2) At places where there are no authorised medical attendants, the Civil Surgeon can with the sanction of the Director of <sup>1</sup>[Health and Family Welfare Services]<sup>1</sup> arrange to examine Government servants suffering from Tuberculosis with the help of two Medical Officers of the Institution where the patient is receiving treatment.

<sup>1</sup> Substituted in Notification No. DPAR 1 SMR 78 dated 21st September 1983

22. Examination by Medical Board before expiry of extraordinary leave:- (1) Before the expiry of the maximum limit of extraordinary leave admissible under the rules, the Government servant concerned should be examined by a Medical Board that may be constituted by the Director of <sup>2</sup>[Health and Family Welfare Services]<sup>2</sup> from time to time to see whether he is fit to resume duty or should be invalidated. If the Government servant is found to have considerably improved, but is found to be in need of some more time say 1 to 3 months, to consolidate the progress and to become fit to resume duty further leave as admissible under the K.C.S. Rules may be granted subject to the limit of 3 months, provided it is certified that he is likely to resume duty by the end of that period.

<sup>2</sup> Substituted in Notification No. DPAR 1 SMR 78 dated 21st September 1983

(2) All Heads of Departments or Offices, as the case may be shall, while sending the Government servant suffering from Tuberculosis before a Medical Board invariably inform the Medical Board of the period of extraordinary leave already taken by the Government servant concerned in pursuance of these concessions, and the balance of leave admissible, so as to enable the Medical Board to Certify whether the Government servant is likely to be fit to resume duty before the expiry of the full leave.

**23.** Place of treatment and expense of treatment and diet :- (1) While on leave, the Government servant shall be required to undergo treatment in a Government Medical Institution. The authorised medical attendants shall have discretion to decide whether a patient should be asked to stay in a hospital or a Sanatorium or whether he should take treatment while staying outside such an institution under such conditions as may be considered necessary.

(2) Reasonable facilities should also be provided, as far as possible, for admission of the Government servants to Government Hospitals, provided they are deemed fit for treatment by the Medical Officer in charge of the T.B. Clinic or Sanatoria. The expenses for the treatment of the Government servant and for diet-normal, extra or special, shall be met wholly by Government in the case of <sup>3</sup>[Government servants whose monthly pay does not exceed Rs.8200/- in accordance with the Karnataka Civil Services (Revised Pay) Rules, 1999]<sup>3</sup>. In the case of Government servants whose pay exceeds the aforesaid amount charges for diet shall be borne by the Government Servants themselves.

<sup>3</sup> Revised as per KCS (Revised Pay) Rules, 1999

(3) Treatment of Government servants suffering from Tuberculosis at the Karnataka Health Institute, Ghataprabha, shall be deemed to be treatment in a Government Medical Hospital and the Government servant in such a case shall be entitled be get refund of the ward charges and reimbursement of medical expenses admissible under these rules.

**24.** Facilities for out-patients:- (1) Government servants undergoing treatment as out-patients in Government Hospitals shall also be entitled to concessions admissible under rule 21.

(2) vouchers for the special medicines purchased by them for their treatment should be produced and countersigned by the Authorised Medical Attendant.

**25.** Continuance in service about whom the case is declared as "arrested":- If after careful examination by the Medical Board, the case is declared as "arrested" and the Government servant is considered fit to resume his duties, he shall be allowed to continue in his appointment under the following conditions :-

(a) that he remains under suitable medical supervision and treatment of the medical attendant who should maintain a special register of the cases so that the patient is followed up regularly in his own interest as well as that of public health;

(b) that the Government servant suspected of Tuberculosis or suffering from "arrested" Tuberculosis shall undergo periodical re-examination by the proper Government Medical Officer and if necessary, by a competent authority in Tuberculosis approved by Government. The re-examination should be done by the Government Medical Officer free of charge.

**26. Facilities in Office to a person declared fit for duty:-** In the event of a Government servant suffering from Tuberculosis being declared fit for duty, the Department concerned shall wherever possible, give him light duty for another year or so, and also allow him some period for rest daily or occasionally as advised by the authorised medical attendant.

**27.** Concessions to temporary Government servants:- Temporary Government servants who are regularly recruited and have put in more than a year's continuous service shall be eligible for the concessions other than monetary concessions sanctioned in these rules.

*Explanation:*- For the purpose of this rule, one year's service should be completed before the commencement of leave for the treatment of Tuberculosis.

# <sup>1</sup>[28. Stoppage of concessions on superannuation]<sup>1</sup> <sup>1</sup> Omitted in Notification No. GAD 2 SMR 72 dated 3rd March 1972

**29.** General:- The Head of the Department under whom the Government servant in need of concessions is serving should be the authority to sanction these concessions.

**30. General:-** The rules in this Part are supplementary to the provisions contained in the Karnataka Civil Services Rules, 1958 and shall have effect notwithstanding any particular provision there in contrary to these rules.

<sup>1</sup>[31. Relaxation of Provisions:- Where the Government is satisfied that the operation of any of these rules causes undue hardship in any particular case, it may by order dispense with or relax the requirements of that rule to such extent and subject to such conditions as it may consider necessary for dealing with any case in a just and equitable manner] 1.

<sup>1</sup> Inserted in Notification No. GAD 23 OMR 64 dated 18th August 1965.

By Order and in the name of the Governor of Karnataka,

K. NARAYANASWAMY, Chief Secretary to Government,

# <sup>1</sup>[SCHEDULE-I

(see proviso to rule 8)

- (1) Chinmaya Mission Hospital, 1<sup>st</sup> stage, Indiranagar, Bangalore-38.
- (2) M.S.Ramaiah Medical Teaching Hospital, Gokula Extension, Bangalore-51.
- (3) Church of South India Hospital, 2, Hazrath Kamal Bosh Road, Bangalore-51.
- (4) K.I.M.S.Hospital & Research Centre, V.V.Puram, K.R.Road, Bangalore-4.
- (5) Yellamma Dasappa Hospital, 27, Andree Road, Shanti Nagar, Bangalore-27.
- (6) P.D.Hinduja Sindhu Hospital, Sampangiramanagar, Bangalore-26.
- (7) Republic Hospital, Long Forde Garden, Bangalore-25.
- (8) Bangalore Baptist Hospital, Bellary Road, Bangalore.
- <sup>2</sup>{(9) Sevakshetra Hospital, 27<sup>th</sup> Cross, Sevakshetra Hospital Road, B.S.K. II Stage, Bangalore-560 070}<sup>2</sup>.

<sup>2</sup> Corrected in Notification No.DPAR 6 SMR 2001 dated 5<sup>th</sup> September 2001.

- (10) Mallige Medical Centre, 31/32, Crescent Road, Bangalore.
- (11) St.John's Medical College Hospital, John nagar, Koramangala, Bangalore-34.
- (12) Manipal Hospital, 98, Rustam Bagh, Airport Road, Bangalore.
- (13) Wockhardt Hospital and Heart Institute, 14, Cunningham Road, Bangalore-52.
- (14) Bangalore Hospital, Susruta Medical Aid and Research Home Ltd., 202, R.V.Road, Bangalore-1.
- (15) St.Philomina's Hospital, No.1, Neelasandra Road, Bangalore-47.
- (16) St.Marthas Hospital, Nrupathunga Road, Bangalore-560 001.
- (17) Mallya Hospital, Nrupathunga Road, Bangalore-560 001.
- (18) Karnataka Nephrology and Transplant Institute Lakeside Medical Centre & Hospital, 33/4, Meaneen Avenue, Bangalore-560 042]<sup>1</sup>.

<sup>1</sup> Inserted in Notification No.DPAR 1 SMR 2000 dated 22nd January 2001.

<sup>3</sup>[(19) Narayana Hrudayalaya, No.258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore-562 158]<sup>3</sup>.

<sup>3</sup> Inserted in Notification No.DPAR 9 SMR 2001 dated 22<sup>nd</sup> December 2001.

- <sup>4</sup>[(20) KLES Hospital and Medical Research Centre, Nehrunagar, Belgaum-590 010.
  - (21) R.L.Jalappa Hospital and Research Centre, Tamaka, Kolar-563 101.
  - (22) Dr.B.R.Ambedkar Medical College Hospital, Bangalore.
  - (23) Adichunchanagiri Institute of Medical Science Hospital, Balagangadhara Nagar, Mandya District, Mandya.

- (24) Kasturba Medical College Hospital, Manipal.
- (25) Bapuji Hospital, Davanagere.
- (26) K.S.Hegde Medical College Hospital, Mangalore.
- (27) Father Muller Medical College Hospital, Mangalore]<sup>4</sup>.

<sup>4</sup> Inserted in Notification No.DPAR 1 SMR 2003 dated 14<sup>th</sup> May 2003.

<sup>5</sup>[(28) Rajiv Gandhi Super Speciality Hospital, "OPEC ASSISTED", Raichur] 5.

<sup>5</sup> Inserted in Notification No.DPAR 3 SMR 2003 dated 14<sup>th</sup> July 2003.

- <sup>6</sup>[(29) Vikram Hospital, Mysore.
  - (30) Sagar Apollo Hospital, Bangalore.
  - (31) B.G.S.Apollo Hospital, Kuvempunagar, Mysore] 6.

<sup>6</sup> Inserted in Notification No.DPAR 6 SMR 2003 dated 3rd September 2003.

<sup>7</sup>[(32) Narayana Nethralaya, Bangalore]<sup>7</sup>.

<sup>7</sup> Inserted in Notification No.DPAR 11 SMR 2003 dated 29th September 2003.

<sup>8</sup>[(33) Shekar Nethralaya, J.P.Nagar, 3rd Phase, Bangalore-560 078]<sup>8</sup>.

<sup>8</sup> Inserted in Notification No.DPAR 12 SMR 2003 dated 9th October 2003.

- <sup>9</sup>[(34) J.S.S.Medical College Hospital, Ramanuja Road, Mysore.
- (35) Sri Siddhartha Medical College Hospital, Tumkur.
- (36) P.V.S.Medical, Surgical and Cardiac Hospital, Chitradurga]<sup>9</sup>.

<sup>9</sup> Inserted in Notification No.DPAR 10 SMR 2003 dated 25th October 2003.

<sup>10</sup>[(37) Trinity Hospital and Heart Foundation, Basavanagudi, Bangalore-560 004]<sup>10</sup>.

<sup>10</sup> Inserted in Notification No.DPAR 14 SMR 2003 dated 16th January 2004·

<sup>11</sup>[(38) Bhagwan Mahaveer Jain Hospital, Millers Road, Bangalore.

- (39) Hi-tech Kidney Stones Hospitals, Bangalore.
- (40) Hosmat Hospital, Magrath Road, Bangalore.
- (41) Bangalore Childrens' Hospital, Bangalore.
- (42) Rajasekar Hospital, J.P.Nagar, Bangalore.
- (43) K.R.Hospital, 979,25th Main Road, BSK 1st Stage, 50 ft.Road, Bangalore-560 050.
- (44) Bhagawan Mahaveer Jain Heart Centre, Millers Road, Bangalore.
- (45) Vydehi Hospital, 82, EPIP Area, WhiteField, Banglaore-66.
- (46) Bangalore Kidney Stone Hospital, Hudson Circle, Bangalore]<sup>11</sup>.

<sup>11</sup> Inserted in Notification No.DPAR 13 SMR 2003 dated 9th February 2004.

- <sup>13</sup>[(47) Kerudi Hospital and Research Centre, Bagalkot.
- (48) A.J. Hospital and Research Centre, Mangalore.

- (49) Omega Hospital (P) Ltd., Mangalore.
- (50) City Hospital Research and Diagnostic Centre, Kadri, Mangalore] 13.

<sup>13</sup> Inserted in Notification No.DPAR 3 SMR 2004 dated 18th May 2004.

- 14 [(51) Gopala Gowda Shanthaveri Memorial Hospital, Nazarbad, Mysore-10.
- (52) Basappa Memorial Hospital, 22/B, Vinoba Road, J.L.Puram, Mysore-12.
- (53) Chetana Nursing Home, Mallandur Road, Chikmagalur-577 101.
- (54) Poornima Hospital and Maternity Centre, Mulbagal, Kolar District.
- (55) R.K.Nursing Home, Chintamani, Kolar District] <sup>14</sup>.
   <sup>14</sup> Inserted in Notification No.DPAR 2 SMR 2004 dated 24th July 2004.
- <sup>15</sup> [(56) Mallikarjuna Nursing Home, Shimoga.
- <sup>24</sup>{(57) Malnad Hospital and Institute of Oncology, Shimoga}<sup>24</sup>.
   <sup>24</sup> Corrected vide Corrigendum No.DPAR 17 SMR 2005 dated 26th November 2005.
- (58) Nanjappa Hospital, Shimoga.
- (59) Basaveshwara Hospital, Shimoga.
- (60) Melagi Hospital, Thirthahalli, Shimoga District.
- (61) Manjunatha Health Care Hospital, Kolar.
- (62) New Kolar Nursing Home, Kolar.
- (63) New Kamadhenu Nursing Home, Kolar.
- (64) Srinivasa Nursing Home, M.B.Road, Kolar.
- (65) Babu Nursing Home, Pandavapura, Mandya.
- (66) New Pragathi Nursing Home, Mandya.
- (67) Archana Nursing Home, Mandya.
- (68) Annapurna Nursing Home, Gangavathi, Koppal District.
- (69) Patil Nursing Home, Gangavathi, Koppal District.
- (70) Al Ameen Medical College Hospital, Bijapur.
- (71) B.L.D.E. Medical College Hospital, Bijapur.
- (72) C.S.I. Redferna Hospital, Hassan.
- (73) Mangala Nursing Home, Hassan.
- (74) Bharathi Nursing Home, Hassan.
- (75) Keshava Nethralaya, Hassan.
- (76) Kasturba Hospital, Tumkur.
- (77) Sri Devi Hospital, Tumkur.
- 18{(78) Adarsha Nursing Home, Tumkur}<sup>18</sup>.

18 Corrected vide Corrigendum No.DPAR 1 SMR 2004 dated 4th March 2005.

- (79) Ashraya Hospital, Chikmagalur.
- (80) Holy Cross Hospital, Chikmagalur.
- (81) Balaji Nursing Home, Kadur, Chikmagalur District.
- (82) Padma Nayanalaya, M.M.Joshi Eye Centre, Hubli.
- (83) Shakuntala Memorial Hospital, Dharwad.

 $^{20}$ {(84) Bharath Hospital and Institute of Oncology, Hebbal, Mysore} $^{20}$ .

20 Corrected vide Corrigendum No.DPAR 1 SMR 2004 dated 21st May 2005.

- (85) City Central Hospital, Davanagere.
- (86) Ravi Nursing Home, Davanagere.
- (87) Shifa Hospital, Queen s Road, Bangalore.
- (88) Curie Centre of Oncology, Koramangala, Bangalore.
- (89) Bangalore West Lions Hospital, J.C. Road, Bangalore.
- (90) Shri Krishna Sevashrama Hospital, Jayanagar, Bangalore.
- <sup>28</sup>{(91) Bhagavan Mahaveer Jain Nethralaya, Seshadripuram, Bangalore.}<sup>28</sup>

<sup>28</sup>Corrected vide Corrigendum No.DPAR 17 SMR 2005 dated 10th January 2006.

<sup>22</sup>{(92) Nethradhama Super Speciality Eye Hospital, Jayanagar, Bangalore-82.}<sup>22</sup>

<sup>22</sup>Corrected vide Corrigendum No.DPAR 10 SMR 2005 dated 17th September 2005.

- (93) NU Trust BKF Chand Nefro Urology Centre, Padmanabha Nagar, Bangalore.
- (94) Bangalore Institute of Oncology, 44-45/2, 2nd Cross, Rajaram Mohan Roy Extension, Bangalore-560 027.
- (95) City Hospital and Research Centre, Udupi.
- (96) Vijaya Shree Accident and Orthocare, Udupi.
- (97) Hitech Medicare Hospital and Research Centre, Udupi.
- (98) Vinaya Hospital, Kundapur, Udupi District.
- (99) City Nursing Home, Karkala, Udupi District]<sup>15</sup>.

<sup>15</sup> Inserted in Notification No.DPAR 1 SMR 2004 dated 27th November 2004.

- <sup>16</sup>[(100) Janatha Hospital and Research Centre, Hassan]<sup>16</sup>.
- <sup>16</sup> Inserted in Notification No.DPAR 1 SMR 2004 dated 9th December 2004.
- <sup>17</sup>[(101) Nandini Nursing Home, No.1586, K.R.Road, Mandya.
- (102) Latha Nursing Home, P.J.Extension, Davanagere]<sup>17</sup>.
- <sup>17</sup> Inserted in Notification No.DPAR 10 SMR 2004 dated 19th February 2005.
- <sup>19</sup>[(103) Devi Eye Hospital, Koramangala, Bangalore.
- (104) D.G.Hospital, Padmanabhanagar, Bangalore-560 073.
- (105) Cauvery Nursing Home, Mandya.
- (106) SSM Super Speciality Hospital, Hassan.
- (107) Gandhi Hospital, Udupi.
- (108) Bidari Ashwini Hospital, Bijapur.
- (109) Bagalkot Medical College, Bagalkot.
- (110) Kamakshi Hospital, Mysore.
- (111) C.S.I. Holdworth Memorial Hospital, Mysore.
- (112) Jayashree Nursing Home, Hassan.
- (113) Dr.N.R.Acharya Memorial Hospital, Koteshwar, Udupi.

- (114) Sri Navarathna Surgical and Maternity Nursing Home, Kolar.
- (115) Vijaya Hospital, Tumkur.
- (116) S.Nijalingappa Medical College and Hanagal Sri Kumareshwara Hospital and Research Centre, Navanagar, Bagalkot.
- (117) Sanjeevini Sahakari Hospital and Research Centre, Hassan.
- (118) B.Sidrammanna Hospital, Tumkur]<sup>19</sup>.

<sup>19</sup> Inserted in Notification No.DPAR 4 SMR 2005 dated 8th April 2005.

- <sup>21</sup>[(119) Athena Hospital, Mangalore.
- (120) Aruna Hospital, Dr.Radhakrishna Road, Tumkur.
- (121) Vinayaka Hospital, Ashoknagar, Tumkur.
- (122) Bapuji Nursing Home, Someshwarapuram, Tumkur.
- (123) Kadli Ningamma Memorial Hospital, M.C.C.B. Block, Davanagere.
- (124) Gayathri Hospital, Vijayanagar, Bangalore-40.
- <sup>22</sup>{(125) Acura Speciality Hospital, Koramangala, Bangalore-95}<sup>22</sup>.

<sup>22</sup>Corrected vide Corrigendum No.DPAR 10 SMR 2005 dated 17th September 2005.

- (126) Vinayaka Hospital, Hanumanthanagar, Bangalore.
- (127) Karthik Nethralaya, N.R.Colony, Ashoknagar, Bangalore-50.
- (128) Manohar Saigowda Memorial Hospital and Laproscopic Training Centre, Mulbagal, Kolar District.
- (129) Manasa Hospital, Gowribidanur, Kolar District.
- (130) Prashanth Medical Services, Nehrunagar, Mandya.
- (131) Suraksha Nursing Home, Mandya.
- (132) Annapoorna Hospital, K.M.Road, Chickmagalur.
- (133) Jayapriya Hospital, Bylappanavaranagar, Hubli.
- (134) Patil Nursing Home, Gulbarga.
- (135) Hemavathi Hospital, Hassan]<sup>21</sup>

<sup>21</sup> Inserted in Notification No.DPAR 10 SMR 2005 dated 30th July 2005.

<sup>23</sup>[(136) Chitra Hospital and Prasad Memorial Medical Centre, Irwin Road, Mysore.

- (137) Daddenavar Hospital and Research Centre, Bagalkot.
- (138) Khaja Bandenawaz Teaching and General Hospital, Gulbarga.
- (139) Sampige Nursing Home, Hassan.
- (140) Lakshmi Nursing Home, Hassan.
- (141) Suguna Nursing Home, Kolar.
- (142) Bharathi Hospital, K.R.Extension, Tumkur.
- (143) Chaitanya Hospital, S.S.Puram, Tumkur.
- 29{(144) North Side Hospital and Diagnostic Centre, Sahakaranagar, Bangalore-92.}29

<sup>29</sup>Corrected vide Corrigendum No.DPAR 17 SMR 2005 dated 13th February 2006.

- (145) Punya Hospital, Channapatna, Bangalore Rural District.
- (146) Chinmaya Hospital, Kundapur, Udupi District.]<sup>23</sup>

# <sup>23</sup> Inserted in Notification No. DPAR 12 SMR 2005 dated 28th September 2005.

- <sup>27</sup>[(147) Malnad Nursing Home, K.R.Puram, Hassan.
- (148) Ashwini Nursing Home, P.J.Extension, Davangere-577 002.
- (149) St. Theresa's Hospital, Rajajinagar, Bangalore-10.
- (150) Mediscope Hospital Pvt. Ltd., Pillana Garden, Bangalore-45.
- (151) Sri Venkateshwara Nursing Home, Srinivasapur- 563 135.
- (152) Ashraya Hospital, MCC `A' Block, Davangere-577 004.
- (153) City Medical Centre, MMC `B' Block, Davangere.] 27

<sup>27</sup> Inserted in Notification No. DPAR 15 SMR 2005 dated 27th December 2005.

- <sup>28</sup>[(154) Shilpasri Nursing Home, Nehru Nagar, Mandya.
- (155) Pragathi Hospital, 1st Cross, S.S.Puram, Tumkur-572 102.
- (156) Bapuji Child Health Institute & Research Centre, Davanagere-577 004.
- (157) Smt. Savithramma & Sri Shanasappa Hospital & Research Centre, Municiple Circle, Hassan road, Arsikere-573 103, Hassan District.
- (158) E.T.C.M. Hospital, Kolar.
- (159) Pristine Hospital, No. 877, Modi Hospital Road, West of Chord Road, II Stage Extn., Bangalore.
- (160) Rajeev Hospital, Government Hospital Road, Hassan-573 201.
- (161) Chandrakala Hospital & Institute of Medical Research, Kalidasa Road, Jayalakshmipuram, Mysore-12.
- (162) Dr. N.K. Thammaiah Hospital, Belgumba Road, Kuvempunagar, Tumkur-572 103.
- (163) Akshaya Nursing Home, 3rd Cross, Gowripet, Kolar-563 101.
- (164) Sukshema Hospital, Shamanur Road, Davanagere.
- (165) Doddamane Hospital, Tumkur.] 28

<sup>28</sup> Inserted in Notification No. DPAR 1 SMR 2006 dated 25th April 2006.

- <sup>29</sup>[(166) Jayashree Nursing Home, No.4, 4th Cross, 4th Block, Kumara Park West, Bangalore- 560 020.
  - (167) Belgaum Cancer Hospital, Ashok Nagar, Belgaum-590 016.
  - (168) M.V. Diabetes Clinic, No.33, II Main Road, Vyalikaval, Bangalore-3.
  - (169) Dr. Ramesh Hospital, No.6/63, 59th Cross, 4th Block, Rajajinagar, Bangalore-10.
  - (170) Prabha Eye Clinic & Research Centre, No.504, 40th Cross, 8th Block, Jayanagar, Bangalore-70.
  - (171) Benaka Health Centre, Main Road, Ujire-574 240, Dakshina Kannada District.]<sup>29</sup>

<sup>29</sup> Inserted in Notification No. DPAR 5 SMR 2006 dated 3rd June 2006.

<sup>30</sup>[(172) Dr.K.Narasimhaiah Hospital, 4th Cross, Gandhinagar, Tumkur-01.

- (173) Pragathi Speciality Hospital, Main Road, Bolwar, Puttur-574 201, Dakshina Kannada District.
- (174) Vittala International Institute of Ophthalmology, 2nd Cross, 2nd Main, Hosakerehalli, Banashankari 3rd Stage, Bangalore-560 085. ]<sup>30</sup>
- <sup>30</sup> Inserted in Notification No. DPAR 6 SMR 2006 dated 27th July 2006.
- 31(175) Mangala Nursing Home & Mangala Kidney Foundation, Vajra Hills, Kadri Road, Mangalore-575 003.
  - (176) Nalwad Multispeciality Hospital & Research Centre, Vikas Nagar, Hosur, Hubli-21.
  - (177) Shushrusha Nursing Home, Gangavathi, Koppal District.
  - (178) Basaveshwar Teaching and General Hospital, Sedam Road, Gulbarga.
  - (179) Dr.Lodaya Hospital, Ashwini Nagar, Haveri-581 110.
  - (180) Sri Satya Sai Hospital, N.H.206, Kadur-577548, Chikmagalur District.
  - (181) Retina Institute of Karnataka, #122, 5th Main Road, Chamarajpet, Bangalore-560 018.
  - (182) Adarsha Hospital, Udupi-576 101.
  - (183) Sudharshana Nethralaya, No.452, Sampige Road, Malleswaram, Bangalore-560 003. ]<sup>31</sup>
  - <sup>31</sup> Inserted in Notification No. DPAR 7 SMR 2006 dated 11th October 2006.

### <sup>1</sup> [Diagnostic Centres

- (1) Medinova Diagnostic Service Ltd., 55, Infantry Road, Bangalore-27.
- (2) Anand Diagnostic Centre, No.11, Blue Cross Chambers, Infantry Road, Bangalore-1.
- (3) Elbit Diagnostic Centre, No.6/1, Infantry Road, Bangalore-1]<sup>1</sup>.
  - <sup>1</sup> Inserted in Notification No.DPAR 1 SMR 2000 dated 22nd January 2001.
- <sup>9</sup> [(4) Kiran Diagnostic and Consultation Centre, Turuvanoor Road, Chitradurga]
  <sup>9</sup> Inserted in Notification No.DPAR 10 SMR 2003 dated 25th October 2003.
- 11 [(5) Thatagath Heart Centre, Bangalore.
- 12 {(6) Kanva Diagnostic Services Pvt. Ltd., Rajajinagar, Bangalore-10.} 12

<sup>12</sup> Corrected vide Corrigendum No.DPAR 13 SMR 2003 dated 19th February 2004.

- (7) Padmashree Medicare Pvt. Ltd., Vijayanagar, Bangalore.
- (8) R.V.Diagnostic Laboratory, Malleswaram, Bangalore]<sup>11</sup>.

11 Inserted in Notification No.DPAR 13 SMR 2003 dated 9th February 2004.

- 15 [(9) Srinivasa Diagnostic Centre, Kolar.
- (10) Mandya Diagnostic Centre, Mandya.
- (11) Gururaja Diagnostic Lab, Gangavathi, Koppal District.
- (12) Ambli Diagnostic Laboratory, Tumkur.
- <sup>18</sup> {(13) Hubli Scan Centre, Hubli} <sup>18</sup> ] <sup>15</sup>.

<sup>15</sup> Inserted in Notification No.DPAR 1 SMR 2004 dated 27th November 2004.

<sup>18</sup> Corrected vide Corrigendum No.DPAR 1 SMR 2004 dated 4th March 2005.

<sup>19</sup> [(14) Baba House, HKMR Private Limited, Gulbarga] <sup>19</sup>.

<sup>19</sup> Inserted in Notification No.DPAR 4 SMR 2005 dated 8th April 2005.

<sup>21</sup> [(15) Das Diagnostic Laboratory and Scanning Centre, Hassan] <sup>21</sup>.

<sup>21</sup> Inserted in Notification No.DPAR 10 SMR 2005 dated 30th July 2005.

- <sup>27</sup>[(16) Bhagavan Pathology Laboratory, Srirampet, Mysore-570 001.
  - (17) Dr.Karigoudar Laboratory, Bijapur-586 101.
  - (18) Santosh Diagnostic & Scan Centre, St.John's Church Road, Bangalore-560 005.]<sup>27</sup>
  - <sup>27</sup> Inserted in Notification No.DPAR 15 SMR 2005 dated 27th December 2005.
- <sup>29</sup>[(19) N M R Scan Centre, Club Road, Hubli-580 020.
  - (20) Ragavs Diagnostic & Research Centre Pvt. Ltd., No.14, Sadguru Complex,

27th Cross, 4th Block West, Jayanagar, Bangalore-11.]<sup>29</sup>

<sup>29</sup> Inserted in Notification No. DPAR 5 SMR 2006 dated 3rd June 2006.

<sup>31</sup>[(21) Dr. Jeevannavar's Laboratory Blood Bank, Gokul Road Cross, Hosur, Hubli-580 021.]<sup>31</sup>

<sup>31</sup> Inserted in Notification No. DPAR 7 SMR 2006 dated 11th October 2006.

# SCHEDULE-II

## (See rule 14)

### RATES APPLICABLE IN RESPECT OF THE HOSPITALS AND MEDICAL INSTITUTIONS SPECIFIED IN SCHEDULE-I.

SL.NO.	NAME OF THE TREATMENT PROCEDURE/ INVESTIGATION	RATES IN RUPEES
(1)	(2)	(3)
1	OUT PATIENT	
1.1.1	FIRST VISIT	20.00
1.1.2	REVISITED OR EACH SUBSEQUENT VISITS	15.00
1.2	PRIVATE IF ANY	-
1.2.1	FIRST VISIT	40.00
1.2.2	REVISITED OR EACH SUBSEQUENT VISITS	30.00
1.3	BY MEDICAL OFFICERS/RESIDENT DOCTORS	-
1.3.1	FIRST VISIT	20.00
1.3.2	REVISIT OR EACH SUBSEQUENT VISIT	15.00
1.4	BY SPECIALISTS	-
1.4.1	FIRST VISIT	40.00
1.4.2	REVISIT OR EACH SUBSEQUENT VISITS	30.00
1.5	OUT PATIENT PROCEDURES	-
1.5.1	INJECTIONS - SC	10.00
	IM	10.00
	IV	10.00
	(CHEMOTHERAPY) IV	50.00
1.5.2	DRESSINGS SMALL	20.00
	MEDIUM	40.00
	LARGE	80.00
1.5.3	SUTURING WITHOUT LOCAL	160.00
	ANAESTHESIA/WITH LOCAL ANAESTHESIA	250.00
1.5.4	REMOVAL OF	
1.5.4.1	FOREIGN BODY	250.00
1.5.4.2	CYST	450.00
1.5.4.3	BENIGN TUMOR	450.00
1.5.5	ASPIRATION	
1.5.5.1	PLURAL EFFUSION	
1.5.5.1.1	DIAGNOSTIC	125.00
1.5.5.1.2	THERAUPTIC	400.00
1.5.5.2	ABDOMINAL	
1.5.5.2.1	DIAGNOSTIC	270.00
1.5.5.2.2	THERAUPTIC	550.00
1.5.5.3	PERICARDIAL	300.00

1.5.5.4	BONE MORROW	200.00
1.5.5.5	JOINTS	200.00
1.6	BIOPSY	
1.6.1	SKIN EXCEPT HENSENS	125.00
1.6.2	LYMPHNODE	400.00
1.6.3	LIVER	400.00
1.7	STRAPPING	50.00
1.8	REMOVAL OF STICHES	30.00
1.9	VENESECTION	120.00
1.10	PHIMOSIS UNDER LA	600.00
1.11	LUMBER PUNCTURE	300.00
1.12	STERNAL PUNCTURE	200.00
1.13	INJECTION FOR	
1.13.1	HAEMORRHOIDS	400.00
1.13.2	VARICOSE VEINS	550.00
1.14	CATHETERISATION	50.00
1.15	DILATATION OF URETHRA	330.00
1.16	INCISION & DRAINAGE	240.00
1.17	INTERCOSTAL DRAINAGE	400.00
1.18	LUNG FUNCTION TEST	200.00
1.19	E.C.G	70.00
1.20	E.E.G	300.00
1.21	INCUBATION(PER DAY)	250.00
1.22	STRESS TEST	550.00
1.23	PERITONEAL DIALYSIS	900.00
2	SKIN	
2.1	SKIN BIOPSY	125.00
2.2	EXCISION	
2.2.1	MOLES	250.00
2.2.2	WARTS	250.00
2.2.3	SELA CYSTS	250.00
2.2.4	MOLLUS CUM CONTRABIOSUM	250.00
2.2.5	VENERAL WARTS	250.00
2.2.6	CORNS	250.00
2.2.7	I/D INJECTION KELOID OF ACNE	125.00
2.2.8	CHEMICAL CAUTERY (PER SITTINGS)	50.00
3	E.N.T.	
3.1	PURE TONE AUDIOGRAM	100.00
3.2	IMPEDENCE & OTHER TESTS	100.00
3.3	SISI, TONE DECAY & DIFFERENCE TIMES	90.00
3.4	MULTIPLE HEARING ASSESSMENT TEST FOR ADULTS	90.00
3.5	HEARING AID SELECTION	100.00

3.6	HEARING AID ANALYSIS	100.00
3.7	SPEECH DISCRIMINATION SCORE	50.00
3.8	SPEECH ASSESSMENT	80.00
3.9	SPEECH THERAPY PER SESSION OF 30-40 MINUTES	70.00
3.10	COLD COLORIE TEST FOR VESTIBULAR FUNCTION	100.00
3.11	REMOVAL OF FOREIGN BODY	
3.11.1	FROM NOSE	150.00
3.11.2	FROM EAR	150.00
3.12	REPAIR OF EAR LOBE	450.00
3.13	SYRINGING	100.00
3.14	POLYP REMOVAL UNDER LA	600.00
3.15	PERITONSILLAR ABSCESS DRAINAGE UNDER LA	640.00
4	EYE	
4.1	CAUTERISATION OF ULCER/SUBCONJUNCTIVAL INJECTION	
4.1.1	ONE EYE	80.00
4.1.2	BOTH EYE	125.00
4.2	RETROBULAR INJECTION	
4.2.1	ONE EYE	100.00
4.2.2	BOTH EYES	170.00
4.3	SYRINGING OF LACRIMAL SAC	
4.3.1	FOR ONE	75.00
4.3.2	FOR BOTH	125.00
4.4	PARACENTESIS	200.00
4.5	FOREIGN BODY REMOVAL	125.00
4.6	REFRACTION/FUNDOSCOPY	50.00
4.7	OTTHOPTIC CHECK UP	50.00
4.8	ORTHOPTIC EXERCISES	75.00
4.9	PLEPOPTIC EXERCISES	50.00
4.10	PERIMETRY/FIELD TEST	150.00
4.11	CHALAZION OPERATION	
4.11.1	ONE EYE	350.00
4.11.2	BOTH EYES	400.00
4.11.3	DRESSING	50.00
5	ORTHOPAEDIC AND PLASTER WORK	
5.1	FINGERS(POST,SLAB)	120.00
5.2	FINGERS FULL PLASTER	120.00
5.3	COLLES FRACTURE	
5.3.1	BELOW ELBOW	550.00
5.3.2	FULL PLASTER	900.00
5.4	COLLES FRACTURE ANT. OR POST. SLAB	300.00
5.5	ABOVE ELBOW FULL PLASTER	500.00
5.6	"POST - SLAB	320.00

5.7	BELOW KNEE FULL PLASTER	500.00
5.8	"POST- SLAB	320.00
5.9	TUBE PLASTER(OR PLASTER CYLINDER)	500.00
5.10	ABOVE KNEE FULL PLASTER	550.00
5.11	"FULL- SLAB	520.00
5.12	MINERVA JACKET	850.00
5.13	PLASTER JACKET	850.00
5.14	SHOULDER SPIKA	850.00
5.15	SINGLE HIP SPIKA	850.00
5.16	DOUBLE HIP SPIKA	1000.00
5.17	STRAPPING	
5.17.1	FINGER	80.00
5.17.2	TOES	80.00
5.17.3	WRIST	150.00
5.17.4	ELBOW	150.00
5.17.5	KNEE	150.00
5.17.6	ANKLE	150.00
5.17.7	CHEST	175.00
5.17.8	SHOULDER	220.00
5.17.9	NASAL BONE FRACTURE	240.00
5.17.10	FIGURE OF 8 BANDAGE	240.00
5.17.11	COLAR AND CUFF SLING	90.00
5.17.12	BALL BANDAGE	225.00
6	PHYSIOTHERAPY	
6.1	ELECTRO THERAPY	
6.1.1	ULTRA-SONIC THERAPY	35.00
6.1.2	S.W.DIATHERMY	35.00
6.1.3	ELECTRICAL STUMULATION (THERAPEUTIC)	35.00
6.1.4	MUSCLE TESTING AND DIAGNOSTIC	35.00
6.1.5	INFRA RED	35.00
6.1.6	U.V THERAUPTIC DOSE	35.00
6.1.7	ELECTRIC VIBRATOR	35.00
6.1.8	VIBRATOR BELT MESSAGE	35.00
6.2	ELECTRIC /MECHANICAL TRACTION	
6.2.1	INTRA LUMBAR TRACTION	35.00
6.2.2	INTERMITTENT CERVICAL TRACTION	35.00
6.2.3	COMBINED LUMBER AND CERVICAL	25.00
6.3	HYDRO THERAPY	
6.3.1	WAX BATH	35.00
6.3.2	НОТ РАСК	35.00
6.3.3	WHIRL POOL BATH	35.00
6.4	MISCELLANEOUS	

6.4.1	OBESITY EXERCISES	35.00
6.4.2	BREATHING EXERCISES & POSTURAL DRAINAGE	35.00
6.4.3	CEREBRAL PALSY - MESSAGE	35.00
6.4.4	POST - POLIO EXERCISE	35.00
7	DENTAL	
7.1	EXTRACTION OF TOOTH INCLUDING LA	50.00
7.2	COMPLICATED EXT. PER TOOTH INCLUDING LA	150.00
7.3	FLAP OPERATION PER TOOTH	200.00
7.4	GINGIVECTOMY PER TOOTH	120.00
7.5.1	CYST UNDER LA(SMALL)	150.00
7.5.2	CYST UNDER LA (LARGE)	250.00
7.6	APISCECTOMY INCLUDING LA	320.00
7.7	IMPECTED MOLAR INCLUD.LA	320.00
7.8	FRACTURE WIRING INCLUDING LA	400.00
7.9	INTRA ORAL X-RAY	40.00
8	OTHERS	
8.1	UPPER G.I ENDOSCOPY	630.00
8.2	UPPER WITH BIOPSY	700.00
8.3	ESOPHAGEAL SCIEROTHERAPY FOR VARICES	
8.3.1	FIRST SITTING	1000.00
8.3.2	SUBSEQUENT SITTING	800.00
8.4	SIGMOIDOSCOPY(REGID)	450.00
8.4.1	SIGMOIDOSCOPY(FLEXIBLE)	600.00
8.5	OESOPHAGOSCOPY	540.00
8.6	COLONOSCOPY	900.00
8.7	FIBROPTIC BRONCHOSCOPY	700.00
9	X-RAY	
9.1	FLUROSCOPY CHEST	80.00
9.2	DENTAL	40.00
9.3	OCCLUSAL	70.00
9.4	ABDOMEN AP OR ERECT(ONE FILM)	90.00
9.5	ABDOMEN LATERAL VIEW(ONE FILM)	90.00
9.6	ABDOMEN FOR PREGNANCY	90.00
9.7	CHEST PA VIEW(ONE FILM)	90.00
9.8	CHEST OBLIQUE OR LATERAL(ONE FILM)	90.00
9.9	MASTOIDS	9.00
9.10	EXTRIMITIES, BONES & JOINTS(ONE FILM)	90.00
9.11	PELVIS(ONE FILM)	90.00
9.12	PARANASAL SINUSES(ONE FILM)	90.00
9.13	T.M JOINTS(ONE FILM)	90.00
9.14	ABDOMEN & PELVIS FOR K.U.B	160.00
9.15	SKULL A.P & LATERAL	160.00

9.16	SPINE A.P & LATERAL	160.00
9.17	BARIUM SWALLOW	350.00
9.18	SINOGRAPHY/SIALOGRAPHY	400.00
9.19	CYSTOGRAPHY/UNRETHROGRAHY	600.00
9.20	HYSTO-SALPAINGOGRAPHY	500.00
9.21	ARTHROGRAPHY	450.00
9.22	RETROGRADE PYELOGRAPHY	500.00
9.23	ORAL OR I.V.CHOLECYSTOGRAPHY	500.00
9.24	BARIUM ENEMA	700.00
9.25	BARIUM MEAL UPPER OR LOWER	700.00
9.26	BRONCHOGRAPHY	700.00
9.27	I.V.UROGRAPHY	700.00
9.28	MYELOGRAPHY	800.00
9.29	PNEUMO ENCEPHALOGRAPHY	600.00
9.30	BARIUM MEAL COMPLETE	800.00
9.31	CEREBRAL/FEMORAL ANGIOGRAPHY	950.00
10	ULTRASOUND INVESTIGATIONS	
10.1	OBSTETRIC	
10.1.1	FIRST SCAN	150.00
10.1.2	FOLLOW UP(2ND VISIT)	150.00
10.2	UPPER ABDOMEN	
10.2.1	FIRST SCAN	225.00
10.2.2	FOLLOW UP(2ND VISIT)	225.00
10.3	OTHERS	-
10.3.1	QUICK LOOK CHECK-UP FOR IUCD & INFANTS	200.00
10.3.2	TOTAL ABDOMINAL SURVEY OR MULTIPLE STUDY	375.00
10.3.3	SPECIAL PROCEDURES & ASPIRATION ETC.,	450.00
10.3.4	IMAGE INTENSIFIERS	450.00
10.3.5	STRESS TEST(TREDMILL)	550.00
11	CLINICAL PATHOLOGY	
11.1	URINE ROUTINE	20.00
11.2	QUANTITATIVE ALALBUMIN / SUGAR	20.00
11.3	URINE BILE PIGMENT AND SALT	20.00
11.4	URINE UROBILINOGEN	20.00
11.5	URINE KETONES	20.00
11.6	URINE OCCULT BLOOD	20.00
11.7	URINE TOTAL PROTEINS	45.00
11.8	URINE SODIUM	45.00
11.9	URINE CHLORIDE	45.00
11.10	BENCE JONES PROTEIN	30.00
11.11	STOOL ROUTINE	20.00
11.12	STOOL OCCULT BLOOD	20.00

11.13	POST COITAL SMEAR EXAMINATION	35.00
11.14	SMEAR ANALYSIS	35.00
11.15	BODY FLUIDS-C.S.F/PLURAL /ASCITIC ETC.	
11.15.1	CHEMISTRY,SUGAR,PROTEIN ETC.	100.00
11.15.2	MALIGNANT CELLS	80.00
12	HAEMATOLOGY	
12.1	HAEMOGLOBIN(Hb)	15.00
12.2	TOTAL LEUCOCYTIC COUNT (TLC)	15.00
12.3	DIFFERENTIAL LEUCOCYTIC COUNT (DLC)	15.00
12.4	E.S.R	15.00
12.5	TOTAL RED CELL COUNT	20.00
12.6	PLATELET COUNT	20.00
12.7	RETICULOCYTE COUNT	25.00
12.8	ABSOLUTE EOSINOPHIL COUNT	20.00
12.9	PACKED CELL VOLUME(PCV)	20.00
12.10	HAEMOGLOBIN, TOTAL & DIFFERENTIAL LEUCOCYTIC COUNT (II b, TLC,DEC)	40.00
12.11	PERIPHERAL SMEAR EXAMINATION	25.00
12.12	SMEAR FOR MALARIA PARASITE	20.00
12.13	BLEEDING & CLOTTING TIME	25.00
12.14	CLOT RETRACTION TIME	20.00
12.15	R.B.C FRAGILITY TEST	40.00
12.16	L.E. CELL	55.00
12.17	FOETAL HAEMOGLOBIN (IIb)	75.00
12.18	PROTHROMBIN TIME (P.T)	75.00
12.19	IIb,TLC,DLC,ESH	50.00
12.20	HAEMOGRAM	50.00
12.21	BONE MARROW SMEAR EXAMINATION	120.00
12.22	PARTIAL THROMBOFIASTIN	80.00
12.23	GLUCOSE PHOSPHATE DEHYDROGENASE (G.E.Pn)	125.00
13	BLOOD BANK	
13.1	BLOOD GROUP & RHO TYPE	30.00
13.2	CROSS MATCH	25.00
13.3	PACKED CELL PREPARATION	150.00
13.4	COMB'S TEST	
13.4.1	DIRECT	60.00
13.4.2	INDIRECT	60.00
13.5	AUSTRALIA ANTIGEN	80.00
13.6	RHO-ANTIBODY TITER	70.00
13.7	BLOOD BANK BAG AND SOLUTION	60.00
14	<b>BIO-CHEMISTRY</b>	
14.1	GLUCOSE	25.00
14.2	BLOOD UREA NITROGEN	35.00

V.D.R.L.	50.00
VAGINAL SMEAR EXAMINATION	40.00
SPUTUM SMEAR A.F.B. STAIN	30.00
	30.00
BACTERIOLOGY & SEROLOGY	
	100.00
	100.00
	200.00
	130.00
	150.00
	150.00
	75.00
	75.00
	230.00
	240.00
	240.00
	240.00
	425.00
	150.00
	60.00
	50.00
	100.00
	75.00
	80.00
	100.00
	125.00
	80.00
	90.00
	90.00
	45.00
	45.00
TOTAL PROTEIN ALB/GLO.RATIO	50.00
SERUM PHOSPHORUS	40.00
SERUM CALCIUM	40.00
GLUCOSE(FASTING AND PP)	50.00
TOTAL IRON BINDING CAPACITY	100.00
SERUM CHOLESTEROL	45.00
SERUM IRON	100.00
SERUM BILIRUBIN TOTAL & DIRECT	60.00
SERUM URIC ACID	40.00
SERUM CREATININE	35.00
	SERUM URIC ACID SERUM BILIRUBIN TOTAL & DIRECT SERUM IRON SERUM CHOLESTEROL TOTAL IRON BINDING CAPACITY GLUCOSE(FASTING AND PP) SERUM CALCIUM SERUM PHOSPHORUS TOTAL PROTEIN ALB/GLO.RATIO S.G.P.T S.G.O.T SERUM AMYLASE SERUM AMYLASE SERUM ELECTROLYTE TRIGLYCERIDE GLUCOSE TOLERANCE TEST(G.T.T) C.P.K L.D.H L.D.H L.D.H L.D.H L.D.H L.D.H L.D.H SERUM EHOSPHATASE ACID PHOSPHATASE ACID PHOSPHATASE CK MB T3 T4 TSH HDL CHOLESTOROL L.H. FSH PHOLACTIN HISTOPATHOLOGY PAP SMEAR SMEAR FOR MALIGNANT CELLS HOSTOPATH FROZEN SECTION & PARAFFIN SECTION BLOOD GAS ANALYSIS WAGI NAL CYTOLOGY FOR HORMONAL EVALUATION SPUTUM SMEAR A.F.B. STAIN

16.6	R.A.TEST	70.00
16.7	CULTURE & SENSITIVITY (OTHER SPECIMENS)	75.00
16.8	URINE PREGNANCY TEST	90.00
16.9	C.R.P.	70.00
16.10	ASO TITER	80.00
16.11	QUANTITATIVE H.C.G.	100.00
16.12	BLOOD CULTURE & SENSITIVITY	100.00
16.13	VIBRO CHOLERA CULTURE	75.00
17	CAT SCAN	
17.1	HEAD	1000-1200
17.2	HEAD SCAN INVOLVING SPECIAL INVESTIGATION	1350-1700
17.3	CHEST	1500-1900
17.4	LOWER ABDOMEN	1500-1900
17.5	SPINE (FOR 3 LEVELS)	1500-1900
18	ICU/CCU CHARGES	
	SPECIAL CARE CASES	
18.1	CORONARY CARE WITH CARDIAC MONITORING INCLUDING ECG & DIET	750.00
18.2	RESPIRATOR & COMPRESSED AIR	650.00
18.3	RESPIRATOR WITH PIPED OXYGEN	650.00
18.4	INTERNAL PACE-MAKER	
18.5	POST OPERATIVE CARE(ICU) WITH DIET	675.00
18.6	CHILD CARE IN CHILDREN	225.00
18.7	PAEDIATRIC CARE FOR NEW BORN (7 TO 12 DAYS)	275.00
18.8	GENERAL NURSERY CARE	90.00
18.9	INCUBATOR CHARGES(PER DAY)	220.00
18.10	INTENSIVE CARE IN NURSERY(PER DAY)	650.00
18.11	PHOTOTHERAPY	90.00
18.12	RESUSCITATION	150.00
18.13	RESUSCITATION WITH INCUBATOR ATTENDED BY SPECIALIST	350.00
18.14	EXCHANGE TRANSFUSION	500.00
18.15	O.T. CHARGES FOR EXCHANGE TRANSFUSION	250.00
18.16	PNEUPACK VENTILLATOR IN NURSERY(PER DAY)	300.00
19	OXYGEN CHARGES	
19.1	OPERATION THEATRE (INCLUDING SUPPLY OF NITROUS OXIDE)	225.00
19.2	CASUALITY ICC	50.00
19.3	GENERAL WARD	60.00
19.4	SEMI-PRIVATE WARDS	60.00
20	BURN DRESSING	
20.1	15% TO 30% IST DRESSING	200.00

20.2	SUBSEQUENT DRESSING	100.00
20.3	30% TO 50% 1ST DRESSING	250.00
20.4	SUBSEQUENT DRESSING	150.00
20.5	EXTENSIVE BURN ABOVE 50%	500.00
20.6	SUBSEQUENT DRESSING	200.00
21	0BSTETRIC CASES	
21.1	NORMAL DELIVERY OR WITH EPISIOTOMY AND P.REPAIR	4000.00
21.2	LOW FORCEPS	4500.00
21.3	LOW MIDCAVITY FORCEPS	4500.00
21.4	CAESAREAN SECTION	7000.00
21.5	CAESAREAN HYSTERECTOMY	9000.00
21.6	RUPTURE UTERUS CLOSURE AND REPAIR WITH TUBAL LIGATION	9000.00
21.7	PERFORATION OF UTERUS ATER D/K LAPAROTOMY AND CLOSURE	7500.00
21.8	LAPAROTOMY FOR ECTOPIC RUPTUR	7500.00
21.9	LAPAROTOMY FOR ECTOPIC RUPTUR	6000.00
21.10	LAPAROTOMY -FAILED LAPAROTOMY TO DXPLORE	3000.00
21.11	SALPHINGECTOMY	5500.00
21.12	SALPHINGO-COPHRECTOMY	6500.00
21.13	OVAREAN CYSTFACTOMY	6500.00
21.14	OPHERCTOMY	5500.00
21.15	BROAD LIGMENT HAEMOTOMA-DRAINAGE	4500.00
21.16	EXPLORATION OF PERINEAL HAEMATOMA	4250.00
	AND RESUTURING OF EPISIOTORE	
21.17	EXPLORATION OF ABDOMINAL HAEMATOMA	5500.00
	(AFTER LAPAROTOMY+ THCS)	
21.18	INTERNAL PODALIC VERSION AND EXTRACTION	4500.00
21.19	MANUAL REMOVAL OF PLACENTA	1500.00
21.20	3RD STAGE COMPLICATION MRP FOR.OUTSIDE DELIVERY ETC.	2500.00
21.21	EXAMINATION UNDER ANAESTHESIA	1200.00
21.22	BURST-ABDOMEN REPAIR	5500.00
21.23	GAPING PERINEAL WOUND SECONDARY SUTURING	1200.00
21.24	GAPING ABDOMINAL WOUND-SECONDARY SUTURING	1500.00
21.25	COMPLETE PERINEAL TEARREPAIR	1500,00
21.26	EXPLORATION OF PPH-TEAR REPAIR	2000.00
21.27	DESTRUCTIVE OPERATION	4500.00
21.28	-SUCTION EVACUATION VESICULAR MOLE, MISSED ABORTION D/E	2500.00
21.29	COPLOTOMY DRAINAGE P/V NEEDLING EUA	2000.00
21.30	REPAIR OF POST-COITAL TEAR PERINEAL INJURY	1700.00
21.31	EXCISION OF URETHRAL CARUNCLE	1500.00

21.32	LAPAR0SCOPY	2500.00
21.33	SHIRODHKAR, MC. DONALDS STITCH	1600.00
21.34	ABORTION	2000.00
22	GENERAL SURGERY	
22.1	DRAINAGE OF ABSECESS	700.00
22.2	DRESSING UNDER G.A	1000.00
22.3	ASPIRATION OF COLD ABSECESS OF LYMPHONODE	1200.00
22.4	ASPIRATION OF EMPYEMA	1000.00
22.5	ASPIRATION OF LIVER ABSCESS	1200.00
22.6	OPEN DRAINAGE OF LIVER ABSCESS	4500.00
22.7	DRAINAGE OF PELVIC ABSCESS	4500.00
22.8	DRAINAGE OF LSCHOIRECTAL ABSCESS	2500.00
22.9	DRAINAGE OF SUBDIAPHYAGMATIC ABSCESS	5000.00
22.10	OPEN DRAINAGE OF PERIGNEPHERIC ABSCESS	5000.00
22.11	DRAINAGE OF PERIGASTRIC ABSCESS	4500.00
22.12	DRAINAGE OF PEROTID ABSCESS	2250.00
22.13	DRAINAGE OF PERITONSILLAR ABSCESS	2250.00
22.14	DRAINAGE OF RETROPHARYNGEAL	2500.00
22.15	OPEN DRAINAGE OF PSOAS ABSCESS	3000.00
22.16	OPEN DRAINAGE OF PERIVERTEBRAL ABSCESS	4100.00
	INJURY OF SUOERFICIAL SOFT TISSUES	
22.17	SUTURING OF SMALL WOUND	120.00
22.18	SECONDARY SUTURE OF WOUNDS	500.00
22.19	DELAYED PRIMARY SUTURE	700.00
22.20	DEBBRIDEMENT OF WOUNDS	500.00
	REMOVAL OF FOREIGN BODIES	
22.21	REMOVAL OF F.B.SUPERFICIAL	500.00
22.22	REMOVAL OF F.B.DEEP	1200.00
	BIOPSIES	
22.23	CERVICAL LYMPH NODE	800.00
22.24	AUXILLARY LYMPH NODE	1000.00
22.25	LINGUINAL LYMPH NODE	1000.00
22.26	EXCISION/BIOPSY OF LARGE LYMPH NODES	1000.00
22.27	EXCISION BIOPSY OF ULCERS	1500.00
22.28	EXCISION BIOPSY OF SUPERFICIAL LUMPS	1500.00
22.29	INCISION BIOPSY OF GROWTHS/ULCERS	800.00
22.30	TRUCUT NEEDLE BIOPSY	800.00
22.31	PERCUTANEOUS LIVER BIOPSY	900.00
22.32	PERCUTANEOUS KIDNEY BIOPSY	900.00
22.33	SPLEEN ASPIRATION	900.00
22.34	MARROW ASPIRATION (NEEDLE)	900.00
22.35	MARROW BIOPSY(OPEN)	900.00

22.36	MUSCLE BIOPSY	900.00
22.37	SCALENE NODE BIOPSY	700.00
	EXCISION OF CYST/SMALL TUMOURS	
22.38	EXCISION OF SEBACEOUS CYSTS	700.00
22.39	EXCISION OF SUPERFICIAL LIPOMA	1250.00
22.40	EXCISION OF SUPERFICIAL NEUROFIBROMA	1300.00
22.41	EXCISION OF DERMOID CYSTS	1200.00
22.42	EXCISION OF GANGLION	1200.00
22.43	HAEMORHOIDS	3500.00
22.44	KELOIDS	2200.00
22.45	SUPERFICIAL VARISCOSITY	2000.00
23	HEAD & NECK	
23.1	EAR LOBE REPAIR ONE SIDE	250.00
23.2	EXCISION OF PINNA FOR GROWTHS	
	(SQUAMOES/BASAL)INJURIES	
23.2.1	SKIN ONLY	1500.00
23.2.2	SKIN AND CARTILAGE	2200.00
23.2.3	PARTIAL AMPUTATION	2400.00
23.2.4	TOTAL AMPUTATION	3000.00
23.2.5	TOTAL AMPUTATION & EXCISION OF EXTERNAL AUDITORY MATUS	5000.00
23.3	EXCISION OF CYSTIC HYGROMA	
23.3.1	MINOR	2200.00
23.3.2	MAJOR	3500.00
23.3.3	EXTENSIVE	5400.00
23.4	EXCISION OF BRANCHIAL CYST	5000.00
23.5	EXCISION OF BRANCHIAL SINUS	4500.00
23.6	EXCISION OF PHARYNGEAL DIVERTICULUM	5000.00
23.7	EXCISION OF CAROTID BODY-TUMOURS	10300.00
23.8	OPERATIONS FOR CERVICAL RIB	7600.00
23.9	SCALENE NODE BIOPSY	1000.00
23.10	BLOCK DISSECTION OF CERVICAL LYMPH NODES	10000.00
23.11	PHARYNCECTOMY & RECONSTRUCTION	15500.00
23.12	OPERATION FOR CARCINOMA LTP	
23.12.1	WEDGE-EXCISION	4200.00
23.12.2	VERMILLTONECTOMY	4000.00
23.12.3	WEDGE EXCISION & VERMILLTONECTOMY	4500.00
23.12.4	HSTLANDERS OPERATION	4500.00
23.12.5	ABBE OPERATION	4500.00
23.12.6	CHECK ADVANCEMENT	5000.00
23.12.7	SUBCUTANEOUS PEDICLE FLAP	4500.00
23.13	EXCISION OF THEMAXILLA	9450.00

23.14	EXCISION OF THE MANDIBLE	
23.14.1	SEGMENTAL	7500.00
23.14.2	HEMIMANDIBULECTOMY	11200.00
23.15	GLOSSECTOMY	
23.15.1	PARTIAL	3000.00
23.15.2	HEMIGLOSSECTOMY	6000.00
23.15.3	TOTAL GLOSSECTOMY	11200.00
23.15.4	THE COMMONDO OPERATION	11200.00
23.16	PAROTIDECTOMY	
23.17.1	SUPERFICIAL	8000.00
23.17.2	CONSERVATIVE	8000.00
23.17.3	RADICAL TOTAL	11200.00
23.18	REPAIR OF PAROTID DUCT	7650.00
23.19	REMOVAL OF SUBMANDIBULAR SALIVARY GLAND	4500.00
23.20	EXCISION/ENUCLEATION OF DENTAL CYSTS	3300.00
23.21	THYROIDECTOMY	
23.21.1	HEMITHYROIDECTOMY	6000.00
23.21.2	PARTIAL THYROID ECTOMY	6000.00
23.21.3	SUBTOTAL THYROIDECTOMY(TOXIC GOITRE)	8600.00
23.21.4	TOTAL THYROIDECTOMY (CANCER)	9500.00
23.21.5	RESECTION ENUCLEATION OF ADENOMA	5500.00
23.21.6	ISTHMECTOMY	5500.00
23.21.7	TOTAL THYROIDECTOMY AND BLOCK DISSECTION	13500.00
23.22	EXCISION OF LINGUAL THYROID	10500.00
23.23	EXCISION TO THYROGLOSSAL CYST/FISTULA	5000.00
23.24	EXCISION OF PARATHYROID ADENOMA/CARCINOMA	11000.00
23.25	LARYNGECTOMY	15000.00
23.26	LARYNGO PHARYNGECTOMY	18500.00
24	BREAST	
24.1	DRAINAGE OF ABSCESS	2500.00
24.2	EXCISION OF LUMPS	3000.00
24.3	LOCAL MASTECTOMY(SIMPLE)	4500.00
24.4	RADICAL MASTECTOMY (FORMAL OF MODIFIED]	10500.00
24.5	EXCISION OF MAMMARY FISTULA	4950.00
24.6	SEGMENT RESECTION OF BREAST	6500.00
24.7	-	
25	CHEST	
25.1	DIRECT LARYNGOSCOPY	2500.00
25.2	BRANCHOSCOPY	1000.00
25.3	SCALENE NODE BIOPSY	1000.00
25.4	MEDIASTIONOSCOPY	1200.00
25.5	ASPIRATION OF PLEURAL CAVITY	800.00

25.6	ASPIRATION OF PERICARDIAL CAVITY	800.00
25.7	PLEURAL BIOPSY	1500.00
25.8	THORACSCOPY	3500.00
25.9	TRACHEOSTOMY	1500.00
25.10	THORACOTOMY(PENETRATING WOUNDS)	8000.00
25.11	INTFRCOSTAL DRAINAGE OF EMPYEMA	3000.00
25.12	RIB RESECTION FOR EMPYEMA	6600.00
25.13	DECORTICATION (PLEURECTOMY)	12300.00
25.14	THORACOPLASTY	15000.00
25.15	PNEUMONECTOMY	14000.00
25.16	LOBECTOMY	14000.00
25.17	SEGMENTAL RESECTION	14000.00
25.18	HYDATID CYST	14000.00
25.19	ТНҮМЕСТОМҮ	14000.00
26	ABDOMEN	
26.1	GASTROSCOPY	750.00
26.2	GASTRIC DUODENAL BIOPSY [ENDOSCOPIC]	850.00
26.3	PYLERONYOTMY	4000.00
26.4	GASTROSTOMY	5200.00
26.5	SIMPLE CLOSURE OF PERFORATED PEPTIC LCER	5500.00
26.6	VAGETOMY PYLEROPLASTY/GASTRO JEJUNOSTOMY	9600.00
26.7	DUODENOJEJUNOSTOMY	8500.00
26.8	PARTIAL / SUBTOTAL GSTRECTOMY FOR CARCINOMA	11000.00
26.9	PARTIAL / SUBTOTAL GSERECTOMY FOR ULCER	10800.00
26.10.1	OPERATION FOR BLEEDING PEPTIC ULCER	9400.00
26.10	GASTROJEJUNOSTOMY AND VAGOTOMY	9400.00
26.11	OPERATION FOR GASTROJEJUNAL ULCER	9400.00
26.12	TOTAL GASTRECTOMY FOR CANCER	14000.00
26.13	HIGHLY SELECTIVE VAGOTOMY	9400.00
26.14	SELECTIVE VAGOTOMY AND DRAINAGE	9400.00
26.15	CONGENITAL DIAPHRAGMATIC HERNIA	9000.00
26.16	HIATUS HERNIA REPAIR	
26.16.1	ABDOMINAL	9000.00
26.16.2	TRANSTHORACIC	10500.00
26.17	EXPLORATORY LAPAROTOMY	6000.00
26.18	EPIGASTRIC HERNIA	5600.00
26.19	UMBILICAL HERNIA	5600.00
26.20	VENTRAL AND SCAR HERNIA	6500.00
26.21	INGUINAL HERNIA	
26.21.1	HERNIORRAPHY	6400.00
26.21.2	HERNIOPLASTY	7000.00

26.22	FEMORAL HERNIA	6500.00
26.23	RARE HERNIAS (SPIGALION, OBTURATOR, LUNBAR, SCIATIC)	7500.00
26.24	SPLENECTOMY	
26.24.1	FOR TRAUMA	9000.00
26.24.2.	FOR HYPERSPLENISM	9000.00
26.25	SPLENORENAL ANASTOMOSIS	18000.00
26.26	PORTOCAVAL ANASTOMOSIS	18000.00
26.27	DIRECT OPERATION ON OESOPHAGUS FOR PORTAL HYPERTENSION	12500.00
26.28	MESENTERICOCAVAL ANASTOMOSIS	15000.00
26.29	WARREN SHUNT	15000.00
26.30	PANCERATO DUODENECTOMY	15000.00
26.31	BY PASS PROCEDURES FOR INOPERABLE CARCINOMA OF PANCREAS	12000.00
26.32	CYSTOJEJUNOSTOMY / OR CYSTOGASTROSTOMY	10000.00
26.33	CHOLECYSTECTOMY	7500.00
26.34	CHOLECYSTECTOMY AND ELORATION OF CBD	8100.00
26.35	REPAIR OF CBD	8100.00
26.36	OPERATION FOR HYDATID CYST OF LIVER	10000.00
26.37	CHOLECYSTOSTOMY	7200.00
26.38	HEPATIC RESECTIONS (LOBECTOMY HEPATECTOMY)	10500.00
26.39	OPERATION ON ADRENAL GLANDS	
26.39.1	BILATERAL	15000.00
26.39.2	UNILATERAL FOR TUMOUR	13000.00
26.40	APPENDICECTOMY	
26.40.1	ACUTE	5600.00
26.40.2	CHRONIC / INTERNAL	5600.00
26.40.3	APPENDICULAR ABSCESS - DRAINAGE	5600.00
26.41	SUBPHERENIC ABSCESS - DRAINAGE	5600.00
26.42	MESENTRIC CYST - EXCISION	6000.00
26.43	PERITONIOSCOPY / LAPAROSCOPY	2500.00
26.44	JEJUNOSTOMY	6200.00
26.45	J J FOSTOMY	8955.00
26.46	CONGENITAL, ATRESIA AND STENOSIS OF SMALL INTESTINE	9400.00
26.47	MUCONIUM ITEUS	8200.00
26.48	MAI-ROTATION AND VOLVULUS OF THE MIDGUT	8200.00
26.49	RESECTION AND ANASTOMOSIS OF SMALL INTESTINE	8600.00
26.50	EXCISION OF MECKLE'S DEVERTICULUM	8600.00
26.51	INTUSUUSCEPTION	8670.00
26.52	DUODENAL DEVERTICULUM	9600.00
26.53	OPERATION FOR INTESTINAL OBSTRUCTION	8800.00
26.54	OPERATION FOR INTESTINAL PERFORATION	8800.00
26.55	BENIGN TUMOURS OF SMALL INTESTINE	8800.00

26.56	EXCISION OF SMALL INTESTINE FISTULA	8800.00
26.57	OPERATIONS FOR HAEMORRHAGE OF THE SMALL INTESTINES	10000.00
26.58	OPERATIONS OF THE DUPLICATION OF THE INTESTINES	10000.00
26.59	OPERATIONS FOR RECURRENT INTESTINAL OBSTRUCTION (NOBLE PLICATION AND OTHER OPERATIONS FOR THE ADHESIONS)	11600.00
26.60.	TIEOSIGMOIDOSTOMY	9000.00
26.61	TIEO TRANSVERSE COLOSTOMY	9000.00
26.62	SIGMOIDOSCOPY	720.00
26.63	CAECOSTOMY	3800.00
26.64	COLOSTOMY	
26.64.1	LOOP COLOSTOMY TRANSVERSE SIGMOT	7000.00
26.64.2	TERMINAL COLOSTOMY	8800.00
26.65	CLOSURE OF COLOSTOMY	6500.00
26.66	RIGHT HEMI -COLECTOMY	8800.00
26.67	LEFT HEMI- COLECTOMY	8800.00
26.68	TOTAL COLECTOMY	8800.00
26.69	OPERATIONS FOR VOLVULUS OF LARGE BOWEL	10000.00
26.70	OPERATIONS FOR SIGMOID DIVERTICULITIS	9000.00
26.71	INJECTION OF HAEMORRHOIDS	700.00
26.72	FISSURE IN ANC	
26.72.1	DILATATION	2500.00.
26.72.2	FISSURECTOMY	4000.00
26.73	RECTAL POLVYP- EXCISION	2250.00
26.74	OPERATION OF HAEMORRHOIDS	
26.74.1	LORDS PROCEDURE	3000.00
26.74.2	LIGATURE AND EXCISION	3600.00
26.74.3	PARKSO OPERATIOOR	3600.00
26.75	FISTULA IN ANC	
26.75.1	HIGH FISTULECTOMY	6800.00
26.75.2	LOW FISTULECTOMY	4500.00
26.76	IMPERFORMAT ANUS	
26.76.1	COLOSTOMY	6500.00
26.76.2	CUT BACK	6300.00
26.76.3	PULL THROUGH OPERATION	8600.00
26.77	FROLAPSE RECTUM	
26.77.1	THEIRCH WIRING	3500.00
26.77.2	REOTOFEXY	8000.00
26.77.3	GRAHAMS OPERATION	8000.00
26.78	OPERATIONS FOR HIRSCHSPRUNGS DISEASE	9000.00
26.79	EXCISION OF PILONIDAL SINUS	5000.00
26.80	ABDOMINO-PIRINEAL EXCISION OF RECTUM	10000.00

26.81	ANTERIOR RESECTION OF RECTUM	8500.00
26.82	PULL THROUGH ABDOMINAL RESECTION	9000.00
26.83	OPERATIONS FOR NEUROBLASTOMA	9400.00
26.84	COCCYGEAL TERATOMA EXCISION	9000.00
27	GENITOURINARY	
27.1	NEPHRECTOMY	8000.00
27.2	PARTIAL NEPHRECTOMY	8000.00
27.3	NEPHROSTOMY	4500.00
27.4	NEPHROLITHOMY	9000.00
27.5	PYELOLITHOTOMY	9000.00
27.6	OPERATIONS FOR HYDRONEPHROSIS	9000.00
27.7	OPEN DRAINAGE OF PERINEPHRIC ABSCESS	5000.00
27.8	CONVERNOSTOMY	7000.00
27.9	OPERATIONS FOR CYST OF THE KIDNEY	6400.00
27.10	URETEROLITHOTOMY	6000.00
27.11	NEPHROURETERECTOMY	6000.00
27.12	OPERATIONS FOR URETER FOR	
27.12.1	DOUBLE URETERS	8500.00
27.12.2	ECTOPIA OF SINGLE URETER	7500.00
27.13	OPERATIONS FOR VERSICOURETARIC REFLUX	8000.00
27.14	URETEROSTOMY	
27.14.1	CUTANEOUS	7500.00
27.14.2	URETERO COLIC ANASTOMOSIS	8000.00
27.15	FORMATION OF AN IIEAL CONDUIT	8500.00
27.16	CYSTOSCOPY	1300.00
27.17	URETERIC CATHETERISATION	1500.00
27.18	DORMIA EXTRACTION OF CALCULUS	4500.00
27.19	BIOPSY OF BLADDER (CYSTOSCOPIC)	2000.00
27.20	CYSTOLITHOTOMY	5600.00
27.21	DIATHERMY DESTRUCTION OF BLADDER NEOPLASM	6000.00
27.22	LITHOLAPEXY	5200.00
27.23	OPERATIONS FOR INJURIES OF THE BLADDER	7500.00
27.24	SUPRAPUBIC DRAINAGE (CYSTOTSTOMY)	4500.00
27.25	PARTIAL CYSTECTOMY	8500.00
27.26	TOTAL CYSTECTOMY	12000.00
27.27	DIVERTICULAECTOMY	7500.00
27.28	OPEN RESECTION OF THE BLADDER NECK	7000.00
27.29	Y-V PLASTY OF THE BLADDER NECK	8500.00
27.30	REPAIR URINARY VAGINAL FISTULA	10500.00
27.31	CYSTOPLASTY	9000.OO
27.32	OPERATIONS FOR EXTROPHY OF THE BLADDER	10800.00
27.33	REPAIR OF URETEROCELE	6500.00

27.34	SUPRAPUBIC PROSTATECTOMY	9000.00
27.35	RETROPUBIC PROSTATECTOMY	9000.00
27.36	TRANSURETHRAL RESECTION OF PROSTATE	9000.00
27.37	UYRETHROSCOPY	1150.00
27.38	OPERATIONS FOR INJURY TO URETHRA	7500.00
27.39	URETHRAL DILATATION	500.00
27.40	INTERNAL URETHPOTOMY	4100.00
27.41	URETHRAL RECONSTRUCTION	9000.00
27.42	OPERATION FOR CONGENITAL VALVES OF URETHRA	4500.00
27.43	OPERATIONS FOR INCONTINENCE OF URINE	
27.43.1	MALE	6000.00
27.43.2	FEMALE	6000.00
27.44	REDUCTION OF PARAPHIMOSIS	900.00
27.45	CIRCUMCISION	1000.00
27.46	МЕАТОТОМУ	2500.00
27.47	MEATOPLASTY	2000.00
27.48	OPERATIONS FOR HYPOSPIDIAS	
27.48.1	CHORDEE CORRECTION	5000.00
27.48.2	SECOND STAGE OR ONE STAGE REPAIR	9000.00
27.49	OPERATIONS FOR EPISPIDIAS	8500.00
27.50	PARTIAL AMPUTATION OF THE PENIS	3900.00
27.51	TOTAL AMPUTATION OF THE PENIS	7500.00
27.52	ORCHIDECTOMY	4500.00
27.53	EFIDIDYNECTOMY	4900.00
27.54	ORCHIDOPEXY	5500.00
27.55	ADRENECLECTOMY UNILATERAL / BILATED FOR TUMOUR / FOR CORCINOMA	12000.00
27.56	OPERATIONS FOR HYDROCELE	
27.56.1	UNILATERAL	2600.00
27.56.2	BILATERAL	3800.00
27.57	VASECTOMY	SHOULD BE FREE FOR FW
27.58	OPERATION FOR TORSION OF TESTUS	4500.00
27.59	VASOVASOSTOMY	5500.00
27.60	OPERATIONS FOR VARICOCELE	4500.00
27.61	BLOCK DISSECTION OF INGUINAL NODES	
27.61.1	ONE SIDE	7000.00
27.61.2	BOTH SIDE	10000.00
27.62	EXCISION OF FILARIAL SCROTUM	6400.00
	OESOPHAGUS	
28	<b>UESUF HAGUS</b>	

28.2	ATRESIA OF OESOPHAGUS AND TRACHEO	6000.00
28.3	OPERATIONS FOR REPLACEMENT OF OESOPHAGUS BY COLON	15000.00
28.4	TRANSTHORACTIC REPAIR OF HAITUS HERNIA	10000.00
28.5	ABDOMINAL REPAIR OF HIATUS HERNIA	9000.00
28.6	OESOPHAGECTOMY FOR CARCINOMA EASOFAGES	16000.00
28.7	OESOPHAGEAL INTUBATION (MAUSSEAU BARBIN TUBE)	6000.00
28.8	ACHALASIA CARDIA	
28.8.1	TRANSTHORACIC	7000.00
28.8.2	ABDOMINAL	6300.00
29	PLASTIC SURGERY	
29.1	PRIMARY SUTURE OF WOUNDS	750.00
29.2	EXCISION OF SMALL SCARS, MOLES, SMALL CYSTS	1500.00
29.3	INJUCTION OF KEYLODS	
29.3.1.	GANLION	1100.00
29.3.2	HAEMANGIOMA	3000.00
29.4	EXCISION OF MULTIPLE MOLES	3000.00
29.5	EXCISION OF MULTIPLE WARTS	3000.00
29.6	FREE GRAFTS	
29.6.1	WOLFER GRAFTS	4000.00
29.6.2	THIRECH-SMALL AREA 5%	4000.00
	LARGE AREA 10%	4500.00
	VERY LARGE AREA 20%	6000.00
29.7	SKIN FLAPS	
29.7.1	ROTATION FLAPS	4000.00
29.7.2	ADVANCEMENT FLAPS	4800.00
29.7.3	DIRECT-CROSS LEG FLAPS-CROSS ARM FLAP	6400.00
	CROSS FINGER	2500.00
	ABDOMINAL	2500.00
	THOROCIC	2500.00
	ARM ETC	2500.00
29.8	SUBCUTANEOUS PEDICLE FLAPS	
29.8.1	RAISING	4000.00
29.8.2	DELAY	4000.00
29.8.3	TRANSFER	4000.00
29.9	CARTILLATE GRAFTING	4000.00
29.10	REDUCTION OF FACIAL FRACTURES OF NOSE	2500.00
29.11	REDUCTION OF FACIAL FRACTURES OF MAXILLA	6000.00
29.12	REDUCTION OF FRACTURES OF MANDIBLE AND MAXILLA	
29.12.1	EYE LET SPLINTING	4000.00
29.12.2	CAST METAL SPLINTS	4000.00
29.12.3	GUMMING SPLINTS	4000.00

29.13	INTERNAL WIRE FIXATION OF MANDIBNE & MAXILLA	7000.00
29.14	CLEFT LIP	6500.00
29.15	CLEFT PALATE REPAIR SEVERE DEGREE	7500.00
29.16	PRIMARY BONE GRAFTING OF CLEFT LIP PALATE	6000.00
29.17	SECONDARY SURGERY FOR CLEFT LIP DEFORMITY	6000.00
29.18	SECONDARY SURGERY FOR CLEFT PALATE	6000.00
29.19	RECONSTRUCTION OF EYELID DEFECTS	
29.19.1	MINOR	4000.00
2.19.2	MAJOR	6000.00
29.20	PLASTIC SURGERY OF DIFFERENT REGIONS OF THE EAR	
29.20.1	MINOR	3600.00
29.20.2	MAJOR	6000.00
29.21	PLASTIC SURGERY OF THE NOSE	
29.21.1	MINOR	4000.00
29.21.2	MAJOR	6000.00
29.22	PLASTIC SURGERY FOR FACIAL PARALYSIS (SUPPORT WITH REANIMATION)	8000.00
29.22	MAMOPLASTY	8300.00
29.23	PENARMOUS BREAST	
29.23.1	UNDERDEVELOPED BREAST	7200.00
29.23.2	AFTER MASTECTOMY (RECONSTRUCTION)	8000.00
29.23	SYNDACTYLEY REPAIR	6000.00
29.24	DERMOBRASTON FACE	4500.00
30	CARDIAC SURGERY	
30.1	PATENT DUCTUS ARTERIOUSUS	35000.00
30.2	MITRAL VALVOTOMY (OPEN)	25000.00 (COST OF VALVE)
31	ORTHOPAEDIC SURGERY PROCEDURE	
31.1	APPLICATION OF P.O.P CASTS FOR UPPER AND LOWER LIMBS	500.00
31.2	APPLICATION OF FUNCTIONAL CAST BRACE	700.00
31.3.	APPLICATION OF SKIN TRACTION	500.00
31.4.	APPLICATION OF SKELETAL TRACTIONS	2000.00
31.5	BANDAGE AND STRAPPINGS FOR FRACTURES	600.00
31.6	ASPIRATION AND INTRA ARTICULAR INJECTIONS	400.00
31.7	APPLICATION OF P.O.P SPICES AND JACKETS	1500.00
31.8	CLOSE REDUCTION OF FRACTURERS OF LIMB AND P.O.P	1500.00
31.9	REDUCTION OF COMPOUND FRACTURES	1800.00
31.10	OPEN REDUCTION AND INTERNAL FIXATION OF FINGERS AND TOES	3000.00
31.11	OPEN REDUCTION OF LONG BONES OF UPPER AND LOWER	

31.11.1	NAILING AND EXTERNAL FIXATION	6500.00
31.11.2	A.O. PROCEDURES	7500.00
31.12	TENTION BAND WIRINGS	4500.00
31.13	BONE GRAFTING	6000.00
31.14	EXCISION OF BONE TUMOURS	
31.14.1	SUPERFICIAL	7000.00
31.14.2	DEEP	8000.00
31.15	EXCISION GANGLIONS	2000.00
31.16	EXCISION OR OTHER OPERATIONS FOR STEROID FRACTURES	5200.00
31.17	STRUESTRECTOMY & SANOERIZATIONS	
31.17.1	SUPERFICIAL	5000.00
31.17.2	DEEP	6000.00
31.17.3	ARTEROTOMY	5000.00
31.18	S.P. FAILING FOR FRACTURE NECK FEMUR	9000.00
31.19	MULTIPLE PINNING FRACTURE NECK FEMUR	8500.00
31.20	NAIL PLATE FIXATIONS FOR FRACTURE FEMURE	9000.00
31.21	A.O. COMERESSION PROCEDURES FOR FRACTURE NECK FEMUR	8000.00
31.22	OPEN REDUCTION OF FRACTURE NECK FEMUR MUSCLE PEDICLE GRAFT AND INTERNAL FIXATIONS	12000.00
31.23	CLOSE REDUCTION OF DISLOCATIONS	1500.00
31.24	OPEX REDUCTION OF DISLOCATIONS	
31.24.1	SUPERFICIAL	4000.00
31.24.2	DEEP	7000.00
31.25	OPEN REDUCTION OF FRACTURE DISLOCATION & INTERNAL FIXATION	8000.00
31.26	NEUROSYSIS/NERVE SUTURE	5000.00
31.27	NERVE REPAIR WITH GRAFTING	8300.00
31.28	TENDON WITH TRANSPLANT OR GRAFTING	8300.00
31.29	TENDON LENGTHING/SUTERES	6000.00
31.30	TENDON TRANSFER	7000.00
31.31	LAMYNECTOMY, EXCISION DISC & TUMOUR	10000.00
31.32	SPINAL OSTECTOMY & INTERNAL FIXATIONS	15000.00
31.33	ANTEROLATERAL CLEARANCE FOR TUBERCULOSIS	12000.00
31.34	ANTEROLATER DECOMPRESSION AND SPINAL FUSION	15000.00
31.35	COSTO TRANSVERSECTOMY	9000.00
31.36	CORRECTIVE OSTROTOMY & INTERNAL FIXATION	
31.36.1	MINOR	6500.00
31.36.2	MAJOR	10000.00
31.37	ARTERODISIS OF	
31.37.1	MINOR JOINTS	4000.00

	1	
31.37.2	MAJOR JOINTS	10000.00
31.38	SOFT TISSUE OPERATIONS FOR C.T.E.V.	7500.00
31.39	SOFT TISSUE OPERATIONS FOR POLIO	7500.00
31.40	PARTIAL HIP REPLACEMENT	10000.00
31.41	TOTAL JOINT REPLACEMENT	See annexure II
31.42	OPERATION FOR BRACHIAL PLEXUS & CERVICAL RIB	12500.00
31.43	AMPUTATIONS	
31.43.1	BELOW KNEE	5000.00
31.43.2	BELOW ELBOW	5000.00
31.43.3	ABOVE KNEE	7000.00
31.43.4	ABOVE ELBOW	7000.00
31.43.5	FOREQUARTER	11000.00
31.43.6	HIND QUARTER AND HEMIPELVECTOMY	15000.00
31.44	DISARTICULATIONS	
31.44.1	MAJOR	8500.00
31.44.2	MINOR	6200.00
31.45	ARTHROGRAPHY& OSTEOMEDULLOGRAPHY	3000.00
31.46	ARTHROSCOPY	
31.46.1	DIAGNOSTIC	4000.00
31.46.2	OPERATIVE	8000.00
31.47	SOFT TISSUE OPERATION ON KNEE	8000.00
31.50	MYOCUTANEOUS AND FASCIOCUTANEOUS FLAT PROCEDURES FOR LIMBS	10500.00
31.52	REMOVAL OF NAILS, WIRES & SCREW	2800.00
31.53	REMOVAL OF PLATES	3600.00
32	NEURO-SURGERY	
32.1	CRANIOTOMY AND EVACUATION OF HAEMATOMA	
31.1.1	SUBDURAL	12500.00
31.1.2	EXTRADURAL	12500.00
32.2	CRANIOPLASTY	14000.00
32.3	EVACUATION OF BRAIN ABSCESS	14000.00
32.4	EXCISION OF LOBE (FRONTAL, TEX ROAL, LEREBELIUM (ETC)	15400.00
32.5	EXCISION OF BRAIN TUMOURS	
32.5.1	SUPRATENTORJAL	22000.00
32.5.2	SUBTENFORIAL	22000.00
32.6	SURGERY OF CORD TUMOURS	20000.00
32.7	MEXINGOMYELOCELE	16000.00
32.8	VENTRICULOATRIAL SHUNT/VENTRICULOPERITONEAL	10000.00
32.9	EXCISION OF CERVICAL INTER-VERTEBRAL DISCS	13000.00
33	VASCULAR SURGERY	
33.1	ARTERIAL EMBOLECTOMY	10000.00

33.2	PATCH GRAFT ANGIOPLASTY	12500.00
33.3	FEMOROPOPLITEAL BY PASS PROCEDURE	15000.00
33.4	THROMBENDARTERECTOMY	13500.00
33.5	SURGERY FOR ARTERIAL ANEURSYSM	
33.5.1	DISTAL ABDOMINAL AEORTA	18000.00
33.5.2	UPPER ABDOMINAL AEORTA	18000.00
33.5.3	SPLENIC ARTERY	17000.00
33.5.4	RENAL ARTERY	17000.00
33.5.5	CAROTID	17000.00
33.5.6	VERTEBRAL	17000.00
33.5.7	MAIN ARTERIES OF THE LIMBS	13800.00
33.6	INTRATHORACIC ANEURYSM	
33.6.1	ANEURYSM NOT REQUIRING BYPASS TECHNIQUES	15000.00
33.6.2	REQUIRING BYPASS TECHNIQUES	20000.00
33.7	DISSECTING ANEURYSMS	17000.0
33.8	OPERATIONS FOR ACQUIRED ARTERIOVENOUS FISTULA	18000.00
33.9	CONGENTIAL ARTERIOVENUS FISTULA	13000.00
33.10	OPERATIONS FOR STENOSIS OF RENTAL ARTERIER	15000.00
33.11	INJECTION OF VARICOSE VEINS	600.00
33.12	TRENDELENBURG OPERATION	6700.00
33.13	STRIPPING OF SHORT OR LONG SEPHENOUS VEINS	6700.00
33.14	LIGATION OF ANKLE PERFORATORS	5500.00
33.15	EXCISION AND SKIN GRAFT OF VENOUS ULCER	6500.00
33.16	VENOUS THROMOECTOMY	6500.00
33.17	SYMPATECTOMY	
33.17.1	LUMBAR	8500.00
33.17.2	CERVICAL	8500.00
33.18	LYMPHATICS EXCISION OF SULCERTATIONS TISSUES DYMPHOEDEMA	7000.00
34	PAEDIATRIC SURGERY	
34.1	TRACHOSTOMY	4000.00
34.2	EXCISION OF BRANCHIAL CYST	4900.00
34.3	EXCISION OF BRANCHIAL SINUS	4900.00
34.4	EXCISION OF THYROGLOSSAL DUCT/CYST	4900.00
34.5	DIAPHRAGMATIC HERNIA REPAIR (THORACIC OR ABDOMINAL APPROACH)	9000.00
34.6	TRACHEO OESOPHAGEAL FISTULA (CORRECTION SURGERY)	10000.00
34.7	COLON REPLACEMENT OF OESOPHAGUS	12000.00
34.8	OMPHALO MESENTERIC CYST EXCISION	7200.00
34.9	OMPHALO MESENTERIC DUCT-EXCISION	7200.00
34.10	MECKELS DIVERTICULECTOMY	6500.00
34.11	OMPHALOCELE 1ST STAGE (HERNIA REPAIR)	6500.00

34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONCENTAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBLICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8500.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY TRANSVERSE         5500.00           34.29         ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS DISEASE)         7500.00           34.30         ICUT BACK OPERATION         4800.00         34.31           MPERFORATE ANUS LOW ANOMALY <td< th=""><th>35.1</th><th>ABDOMINAL HYSTERECTOMY</th><th>8000.00</th></td<>	35.1	ABDOMINAL HYSTERECTOMY	8000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY TRANSVERSE         5500.00           34.30         IMPERFORATE ANUS LOW ANOMALY            34.301         INPERFORATE ANUS LOW ANOMALY            34.311         TRANSVERSE COBOSTOMY         6300.00 <th></th> <th></th> <th></th>			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.29         ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS DISEASE)         7500.00           34.30.1         CUT BACK OPERATION         4800.00           34.31         INPERFORATE ANUS LOW ANOMALY			11500.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8500.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY LEFT IIIAC         5500.00           34.29         ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS)         7500.00           34.30.1         IMPERFORATE ANUS LOW ANOMALY			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         \$5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY TRANSVERSE         5500.00           34.30         IMPERFORATE ANUS LOW ANOMALY            34.30.1         IMPERFORATE ANUS LOW ANOMALY			
34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY\$500.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION8000.0034.24MECONUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8000.0034.26RECTAL BIOPSY (MEGACOLON)1250.0034.27COLOSTOMY TRANSVERSE5500.0034.28COLOSTOMY TRANSVERSE5500.0034.30IMPERFORATE ANUS LOW ANOMALY34.30.1CUT BACK OPERATION4800.0034.31INPERFORATE ANUS LOW ANOMALY34.30.2PERINEAL ANOPLASTY6000.0034.31INPERFORATE ANUS HIGH ANOTAMY			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY TRANSVERSE         5500.00           34.30         IMPERFORATE ANUS LOW ANOMALY            34.30         INPERFORATE ANUS LOW ANOMALY            34.30         INPERFORATE ANUS LOW ANOMALY        <		FOR WILMS TUMOURS	11000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY LEFT IIIAC         5500.00           34.28         COLOSTOMY LEFT IIIAC         5500.00           34.30.1         CUT BACK OPERATION         4800.00           34.30.1         CUT BACK OPERATION         4800.00           34.31         INPERFORATE ANUS LOW ANOMALY			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8500.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY TRANSVERSE         5500.00           34.29         ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS DISEASE)         7500.00           34.30.1         CUT BACK OPERATION         4800.00           34.31.1         TRANSVERSE COBOSTOMY         6			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY LEFT IIIAC         5500.00           34.29         ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS DISEASE)         7500.00           34.30.1         IVPERFORATE ANUS LOW ANOMALY			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8500.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY TRANSVERSE         5500.00           34.30         IMPERFORATE ANUS LOW ANOMALY            34.30.1         CUT BACK OPERATION         4800.00           34.31         INPERFORATE ANUS LOW ANOMALY			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8500.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY TRANSVERSE         5500.00           34.30.1         CUT BACK OPERATION         4800.00           34.30.2         PERINEAL PULL THROUGH (HIRSCHAPRUGIS)         7500.00           34.31         INPERFORATE ANUS LOW ANOMALY			9000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         9300.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY LEFT IIIAC         5500.00           34.30         IMPERFORATE ANUS LOW ANOMALY            34.30.1         CUT BACK OPERATION         4800.00           34.31         INPERFORATE ANUS HIGH ANOTAMY <td></td> <td></td> <td></td>			
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         8000.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8000.00           34.26         RECTAL BIOPSY (MEGACOLON)         1250.00           34.27         COLOSTOMY TRANSVERSE         5500.00           34.28         COLOSTOMY LEFT IIIAC         5500.00           34.30         IMPERFORATE ANUS LOW ANOMALY            34.30.1         CUT BACK OPERATION         4800.00           34.31         INPERFORATE ANUS HIGH ANOTAMY <td></td> <td></td> <td></td>			
34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5500.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION8000.0034.24MECONIUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8000.0034.26RECTAL BIOPSY (MEGACOLON)1250.0034.27COLOSTOMY TRANSVERSE5500.0034.28COLOSTOMY TRANSVERSE5500.0034.30IMPERFORATE ANUS LOW ANOMALY34.30.1CUT BACK OPERATION4800.0034.31INPERFORATE ANUS LOW ANOMALY34.31.1TRANSVERSE COBOSTOMY6300.0034.31.2SACROARDOMENO PURESA FLAS THROUGH7500.0034.32INTUSUSSUSCEPTION OPERATION7000.00			
34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5500.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION8000.0034.24MECONIUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8000.0034.26RECTAL BIOPSY (MEGACOLON)1250.0034.27COLOSTOMY TRANSVERSE5500.0034.28COLOSTOMY LEFT IIIAC5500.0034.29ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS) DISEASE)7500.0034.30.1CUT BACK OPERATION4800.0034.31.1TRANSVERSE COBOSTOMY6300.0034.31.1TRANSVERSE COBOSTOMY6300.0034.31.2SACROARDOMENO PURESA FLAS THROUGH7500.0034.31.3OLOSURE OF COLOSTOMY4500.00			7000.00
34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5550.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION8000.0034.24MECONIUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8500.0034.26RECTAL BIOPSY (MEGACOLON)1250.0034.27COLOSTOMY TRANSVERSE5500.0034.28COLOSTOMY LEFT IIIAC5500.0034.30.1IMPERFORATE ANUS LOW ANOMALY34.30.1CUT BACK OPERATION4800.0034.31INPERFORATE ANUS HIGH ANOTAMY34.31.1TRANSVERSE COBOSTOMY6300.0034.31.2SACROARDOMENO PURESA FLAS THROUGH7500.00			
34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5550.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION8000.0034.24MECONIUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8500.0034.26RECTAL BIOPSY (MEGACOLON)1250.0034.27COLOSTOMY TRANSVERSE5500.0034.28COLOSTOMY TRANSVERSE5500.0034.29ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS DISEASE)7500.0034.30.1CUT BACK OPERATION4800.0034.31.1TRANSVERSE COBOSTOMY6300.00			
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34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5500.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION8000.0034.24MECONIUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8500.0034.26RECTAL BIOPSY (MEGACOLON)1250.0034.27COLOSTOMY TRANSVERSE5500.0034.28COLOSTOMY LEFT IIIAC5500.0034.29ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS DISEASE)7500.00			4800.00
34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5500.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION9300.0034.24MECONIUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8500.0034.26RECTAL BIOPSY (MEGACOLON)1250.0034.28COLOSTOMY LEFT IIIAC5500.0034.29ABDOMINAL PERINEAL PULL THROUGH (HIRSCHAPRUGIS DISEASE)7500.00			
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34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5500.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.0034.23PANCREATIC RING OPERATION9300.0034.24MECONIUM LLEUS OPERATION8000.0034.25MALROTATION OF INTESTINES OPERATION8500.0034.26RECTAL BIOPSY (MEGACOLON)1250.00	34.28	COLOSTOMY LEFT IIIAC	5500.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         9300.00           34.24         MECONIUM LLEUS OPERATION         8000.00           34.25         MALROTATION OF INTESTINES OPERATION         8500.00	34.27	COLOSTOMY TRANSVERSE	5500.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         9300.00           34.24         MECONIUM LLEUS OPERATION         8000.00	34.26	RECTAL BIOPSY (MEGACOLON)	1250.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00           34.22         DUODENAL-ATRESIA OPERATION         8000.00           34.23         PANCREATIC RING OPERATION         9300.00	34.25	MALROTATION OF INTESTINES OPERATION	8500.00
34.13GASTROCHISIS REPAIR7000.0034.14INGUINAL HERNIOTOMY5500.0034.15CONGENITAL HYDROCELE4000.0034.16HYDROCELE OF CORD4000.0034.17UMBILICAL HERNIA REPAIR4500.0034.18ORCHIPEXY6000.0034.19TORSION TESTIS OPERATION6000.0034.20GASTROSTOMY5000.0034.21CONGENITAL PYLORIC STENOSTS-OPERATION6000.0034.22DUODENAL-ATRESIA OPERATION8000.00	34.24	MECONIUM LLEUS OPERATION	8000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00           34.21         CONGENITAL PYLORIC STENOSTS-OPERATION         6000.00	34.23	PANCREATIC RING OPERATION	9300.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00           34.20         GASTROSTOMY         5000.00	34.22	DUODENAL-ATRESIA OPERATION	8000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00           34.19         TORSION TESTIS OPERATION         6000.00	34.21	CONGENITAL PYLORIC STENOSTS-OPERATION	6000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00           34.18         ORCHIPEXY         6000.00	34.20	GASTROSTOMY	5000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00           34.17         UMBILICAL HERNIA REPAIR         4500.00	34.19	TORSION TESTIS OPERATION	6000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00           34.16         HYDROCELE OF CORD         4000.00	34.18	ORCHIPEXY	6000.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00           34.15         CONGENITAL HYDROCELE         4000.00	34.17	UMBILICAL HERNIA REPAIR	4500.00
34.13         GASTROCHISIS REPAIR         7000.00           34.14         INGUINAL HERNIOTOMY         5500.00	34.16	HYDROCELE OF CORD	4000.00
34.13GASTROCHISIS REPAIR7000.00	34.15	CONGENITAL HYDROCELE	4000.00
	34.14	INGUINAL HERNIOTOMY	5500.00
34.12OMPHALOCETE 2ND STAGE (HERNIA REPAIR)7000.00	34.13	GASTROCHISIS REPAIR	7000.00
	34.12	OMPHALOCETE 2ND STAGE (HERNIA REPAIR)	7000.00

35.2	VAGINAL HYSTERECTOMY	8000.00
35.3	MYOMECTOMY	7000.00
35.4	VAIGINOPLASTY	7800.00
35.5	LAPAROTOMY (ECTOPIC PREGNANCY)	7000.00
35.6	VULVECTOMY (SIMPLE//RADICAL)	8000.00
35.7	VVE/RVF	9500.00
35.8	OTHER MAJOR OPERATIONS	8000.00
35.9	MACHESTER OPERATIONS	6700.00
35.10	PERINEORRAPHY	5000.00
35.11	COLPORRAPHY	5200.00
35.12	OVARLECTOMY	7000.00
35.13	MODIFIED GILLIAM	7000.00
35.14	SHIRODKAR'S OPERATION	2500.00
35.15	DIAGNOSTIC CURETTAGE	1500.00
35.16	FRACTIONAL CURETTAGE	1500.00
35.17	D & E AND CERVICAL BIOPSY	1600.00
35.18	POLYPECTOMY	2000.00
35.19	OTHER-MINOR OPERATION	2000.00
35.20	EXCISION VAGINAL CYST/DURTHOLIN CYST	2500.00
35.21	EXCISION VAGINAL SEPTUM	2500.00
35.22	LAPAROSCOPY	2700.00

<sup>25</sup> Inserted in Notification No.DPAR 1 SMR 2000 dated 22nd January 2001.

#### SCHEDULE-III

#### RATES APPLICABLE IN RESPECT OF THE HOSPITALS AND MEDICAL INSTITUTIONS SPECIFIED IN SCHEDULE-I.

ITEM CODE	NAME OF THE INVESTIGATION/TREATMENT PROCEDURE	RATES I	N RUPEES
	(2)		
(1)			
		(	(3)
2.1	CAT SCAN		
		Without contrast	With contrast
2.1.1.	a) HEAD	1000	1200
2.1.1	b) HEAD SCAN INVOLV. SPL. INVESTIGATIONS	1350	1200
2.1.1	CHEST	1500	1900
2.1.2	LOWER ABDOMEN	1500	1900
2.1.3		1500	1900
	SPINE (FOR 3 LEVEL)		1900
2.1.5	C.T. 3D RECONSTRUCTION ONLY		
2.1.6	C.T. GUIDED BIOPSY	1100	
2.1.7	C.T. GUIDED PERCUTANFOURS CATH DRAINAGE	1350	1000
2.1.8	C.T. MYLOGRAM (CERVICAL SPINE)	1600	1900
2.1.9	C.T. MYELOGRAM (LUMBER SPINE OR D/S)	1300	2000
2.1.10	C.T. SCAN BRAIN	1000	1200
2.1.11	C.T.SCAN CHEST	1500	1900
2.1.12	C.T. SCAN UPPER ABDOMEN	1500	1900
2.1.13	C.T.SCAN LOWER ABDOMEN	15000	1900
2.1.14	C.T.SCAN WHOLE ABDOMEN	2500	3500
2.1.15	C.T.SCAN SPINE PER REGION	1250	
2.1.16	C.T.SCAN NECK (THROID Soft Tissue)	1250	1850
2.1.17	C.T.SCAN ORBITS EYE	1250	
2.1.18	C.T.SCAN ORBITS WITH CONTRAST		1500
2.1.19	C.T.SCAN LIMBS	1500	
2.1.20	C.T.SCAN WHOLE BODY	2000	3000
2.1.21	C.T.SCAN THORAX	1500	2000
2.1.22	C.T.SCAN OF PARA NASAL SINUS	1250	1500
2.2.3	MRI HEAD	4500	6000
2.2.4	MRI ORBITS	4500	6000
2.2.5	MRI NASOPHARYNX AND PNS	4500	6000
2.2.6	MRI NECK	4500	
2.2.7	MRI SHOULDER SINGLE JOINT	4500	

r			
2.2.8	MRI SHOULDER BOTH JOINTS		7500
2.2.9	MRI WRIST SINGLE JOINT	4500	
2.2.10	MRI WRIST BOTH JOINTS		7500
2.2.11	MRI KNEE SINGLE JOINTS	4500	
2.2.12	MRI KNEE BOTH JOINTS		7500
2.2.13	MRI ANKLE SINGLE	4500	
2.2.14	MRI ANKLE BOTH		7500
2.2.15	MRI HIP	4500	
2.2.16	MRI PELVIS	4500	
2.2.17	MRI EXTREMITIES	4500	
2.2.18	MRI TEMPOROMANDIBULAR SINGLE JOINT	4500	
2.2.19	MRI TEMPOROMANDIBULAR DOUBLE JOINTS	7500	
2.2.20	MRI ABDOMEN	4500	6000
2.2.21	MRI BREAST	4500	7500
2.2.22	MRI SPINE SCREENING	3000	
2.2.23	MRI CHEST	4500	
2.2.24	MRI CERVICAL SPINE	4500	
2.2.25	MRI LUMBAR SPINE	4500	
2.2.26	MRI THORAX	4500	
2.2.27	MRI SCREENING	4500	
2.3.2	E.C.G	70	
2.3.3.	2D ECHO WITH COLOUR DOPPLER	500	
2.3.4	TRANS OESOPHAEDRAL ECHO (TEE)	1000	
2.3.5	TREADMILL TEST (TMT)	550	
2.3.6	HOLTER ANALYSIS	800	
2.3.7	CATHERISATION (CORONARY AGIOGRAPHY)	12000	
2.3.8	FLUOROSCOPIC SCREENING	100	
2.3.9	HOLTER REPORT (WITH PRD.SPECIFICATION)	800	
2.3.10	TEST OF PACEMAKER	300	
2.3.11	OXYGEN SATURATION	90	
2.3.12	PKG CHARGES FOR CARDIOVASCULAR INVESTIGATION	1800	
2.3.13	CORONARY ANGIOGRAPHY	12000	
2.3.14	CARDIAC CATH ANGIOGRAPHY (W/O CORONARY ANGIO)	6500	
2.3.15	AORTOGRAM	4500	
2.3.16	PULMONARY FUNCTION TEST	-	
2.3.16.1	TEST OF PACEMAKER	170	
2.3.16.2	OXYGEN SATURATION	170	
2.3.16.3	PACKAGE CHARGES FOR		
2.3.16.4	CARDIOVASCULAR INVESTIGATION	170	
2.3.17	FIBROPTIC BRONCHOSCOPY	600	
2.3.18	FIBROPTIC BRONCHOSCOPY WITH	600	

	WASHING/BIOPSY		
2.4.1	UROFLOW STUDY (MICTUROMATRY)	250	
2.4.2	URODYNAMIC STUDY (CYSTOMETRY)	550	
2.5	CYSTOSCOPY WITH RETROGRADE CATHETER		
2.5.1	UNILATERAL	2000	
2.5.2	BILATERAL	2500	
2.5.3	CYSTOSCOPY DIAGNOSTIC	1050	
2.5.4	CYSTOSCOPY WITH BLADDER BIOPSY	1250	
2.6	DIAGNOSTIC LAPROSCOPY	3500	
2.7.1.	T-3	140	
2.7.2	T-4	140	
2.7.3	TSH	140	
2.7.4	CORTISOL	215	
2.7.5	PROLACTIN	215	
2.7.6	FSH	215	
2.7.7	LH	215	
2.7.8	VOIDING-CYSTO-URETHROGRAM	550	
2.7.9	RENAL TRANSPLANT EVALUTION	800	
2.7.10	WHOLE BODY BONE SCAN	750	
2.7.11	SPECT BONE SCAN		
2.7.12	BONE MARROW SCAN	1200	
2.7.13	SCAN (SPECT)		
2.7.14	STRESS THALLIUM	4000	
2.7.15	MUGA (RESTING)	700	
2.7.16	NUGA (STRESS)	800	
2.7.17	UPPER ABDOMEN		
2.7.18	LOWER ABDOMEN		
3.4	A.V.FISTULA	1800	
3.5	CORONARY BYPASS SURGERY	99000	
3.6	CORONARY BYPASS SURGERYPOST ANGIOPLASTY	99000	
3.7	CORONARY BALLON ANGIOPLASTY	70000	
3.8	BALLON ANGIOPLASTUS WITH VALVOTOMY	45000	
3.9	OPEN HEART PROCEDURES	85000	
3.10	PATENT DUCTUS ARTERIOSUS	50000	
3.11	TOTAL CORRECT OF TETRALOGY OF FALLOT	85000	
3.12	RSUV CORRECTION	67925	
3.13	TAPVC CORRECTION	67925	
3.14	OPEN ASD VSD	67925	
3.15	OPEN PULMONARY VALVOTOMY	67925	
3.16	OPEN AORTIC VALVOTOMY	67925	
3.17	COARRACTATION OF AEORTA	65000	
3.18	BLALOCK TAUSSING OPERATION	55000	

3.19	MITRAL VALVOTOMY	25000 + COST OF VALVE	
3.20	OPEN MITRAL VALVOTOMY	67925	
3.21	MITRAL VALVE REPLACEMENT	72000	
3.22	AORTIC VALVE REPLACEMENT	85000	
3.23	DOUBLE VALVE REPLACEMENT	85000	
3.24	CLOSED VALVOTOMY	50000	
3.25	COARCTATION AOERTA REP. OF BLK TAUSSING SHUNT	50000	
3.26	B.T.SHUNT	25000	
3.27	PERICARDIOSTOMY	132000	
3.28	PERICARDIECTOMY	132000	
3.29	PERICARDIO CENTOSIS	1000	
3.30	PERMANENT PACEMAKER IMPLANTATION	7500	
		(Plus cost of pace maker)	
3.31	TEMPORARY PACEMAKER IMPLANTATION	3105	
		(plus cost of pace maker)	
3.32	TESTS OF PACEMAKER	650	
3.33	EMBOLECTOMY	9000	
3.34	ANEURYSM RESECTION & GRAFTING	25000	
3.35	THORACO CENTESIS	975	
3.36	THORACHOSTOMY	6100	
3.37	EXPLORATORY THOROCOTOMY	18000	
3.38	AEORTA-FEMORAL BYPASS	25000	
3.39	NODE BIOPSY	900	
3.40	PLEURAL BIOPSY	1350	
3.41	OPEN LUNG BIOPSY	6600	
3.42	REMOVAL OF F.BTRACHEA OF OESOPHAGES	2000	
3.43	<b>RIB RESECTION &amp; DRAINAGE</b>	5000	
3.44	THORACO PLASTY	11500	
3.45	PULMONARY FUNCTION TEST BMR	300	
3.46	PNEUMO NECTOMY	10000	
3.47	LOBECTOMY	20000	
3.48	SEGMENTAL RESECTION	20000	
3.49	MEDIASTINAL TUMUOR	20000	
3.50	ТНҮМЕСТОМҮ	20000	
3.51	PARTIAL PERICARDECTOMY	9000	
3.52	REMOVAL TUMUORS OF CHEST WALL	9000	
3.53	OESOPHAGO GATECTOMY FOR MID 1/3 LESION	13000	
3.54	HIATUS HENIA REPAIR	11500	
3.55	HELLER'S OPERATION	11500	

3.56	COLONINTER POSITION OR REPL. OF OESOPHAGUS	11500
3.57	OESOPHAGO GASTRECTOMY-LWR CORRINGERS PROCD.	11500
4.1	VASCULAR PROCEDURE-MAJOR	17000
4.2	VASCULAR PROCEDURE-MINOR	7600
4.3	ARTERIAL EMBOLECTOMY	9000
4.4	PTCH GRAFT ANGIOPLASTY	13500
4.5	FEMORO-POPLITEAL BYPASS PROCEDURE	15000
4.6	THROMBO-ENDARTERECTOMY	13000
4.7	SURGERY FOR ARTERIAL ANEURYSM	
4.7.1	DISTAL ABDOMINAL AEORTA	20000
4.7.2	UPPER ABDOMINAL AEORTA	20000
4.7.3	SPLEEN ARTERY	12500
4.7.4	RENAL ARTERY	12500
4.7.5	CAROTID	12500
4.7.6	VERTEBRAL	12500
4.7.7	MAIN ARTERIES OF THE LIMB	12500
4.8	INTRA-THORACIC ANEURYSM	14000
4.9	ANEURYSM NOT REQUIRING BYPASS TECRY.	14000
4.10	REQUIRING BYPASS TECHNIQUES	18000
4.11	DISSECTING ANEURYSM	24500
4.12	OPERATIONS FOR AQR. ARTERIOVENOUS FISTULA	15000
4.13	CONGENITAL ARTERIO VENOUS FISTULA	10000
4.14	OPERATIONS FOR STENOSTS OF RENAL ARTERIES	17000
4.15	INJECTION OF VARICOSE VEINS	900
4.16	TRENDELENBURG OPERATIONS	6350
4.17	STRIPPING OF SHORT/LONG SEPHANEOUS VEINS	7000
4.18	EXCISION & SKIN GRAFT OF VENOUS ULCER	7700
4.19	VENOUS THROMBECTOMY	8500
4.20	SYMPATHETECTOMY	
4.20.1	LUMBAR	7000
4.20.2	CERVICAL	8000
5.2.1	EMERGENCY DIALYSIS	1500
5.2.2	FEMORAL PUNCTURE	750
5.2.3	SUBCLAVIAN PUNCTURE	850
5.2.4	PERITONEAL DIALYSIS	1200
5.2.5	KIDNEY BIOPSY	1500
5.2.6	FISTULA/SHUNT	3000
5.2.7	DIALYSIS REMORAL CATHER.BILATERAL	1600
5.2.8	HAEMO DIALYSIS	725

5.2.8.1	INTRA-THORACIC ANEURYSM	
5.2.9	DOUBLE LUMEN SUB CLAVIAN CATHETER	2000
5.2.10	CONTINOUS ARTERIO VENUS DIALYSIS (CAVD)	8000
5.2.11	SUBCLAVIAN ACCESS	750
5.2.12	FEMORAL ACCESS	750
5.2.13	PLASMA EXCHANGE	500
5.3.1	DONOR NEPHRECTOMY	10000
5.3.2	TRANSPLANTATION	67500
5.3.3	PERFUSION	
5.3.4	URETERIC REIMPLANT	
5.3.5	LYMPHOCOEL	6500
5.3.6	TRANSPLANT NEPHRECTOMY	10000
5.3.7	BILATERAL NEPHROUNRECTOMY (NATIVE)	10000
5.3.8	EXCISION AND SKIN GRAFT OF VASCULAR PROSTHETIC GRAFT	8000
5.3.9	C.A.P.D.	
7.1	PCNL	
7.1.1	UNILATERAL	10000
7.1.2	BILATERAL	15000
7.2	МЕАТОТОМУ	1800
7.3	MEATOPLASTY	3100
7.4.1	PALOMO'S UNILATERAL	3100
7.4.2	PALOMO'S BILATERAL	6000
7.5	ENDOSCOPIC TEFLON INJECT	2500
7.6	TESTICULAR BIOPSY	1800
7.7	GIL-VERNER'S EXTENDED PYELOLITHOTOMY	10000
7.8	PARTIAL NEPHRECTOMY OR NEPHROLITHOTOMY	9000
7.9	NEPHRECTOMY COMPL. TUMOUR OR ADHESIONS	12000
7.10	SIMPLE NEPHRECTOMY	10000
7.11	ANDERSON HYNES PYELOPLASTY	10000
7.12	UNILATERAL IMPLANTATION BILATERAL	10000
7.13	TOTAL CYSTECTOMY	15000
7.14	VASICO VAGINAL FISTULA	9500
7.15	URETHROPLASTIC ONE STAGE PROCEDURE	10000
7.16	RADICAL CYSTECTOMY	12000
7.17	EPISPADIAS/EXTROPLY REPAIR	12000
7.18	CAECO CYSTOPLASTY	12000
7.19	PYELOLITHOTOMY	8000
7.20	NEPHRECTOMY SIMPLE	10000
7.21	NEPHROSTOMY	4500
7.21	URETERIC REIMPLANT	

7.22	URETHRAL TRANSPLANTATION	10000
7.23	PARTIAL CYSTECTOMY	10700
7.24	TRANSURETHRAL RESECTION OF PROSTATE (TURP)	8000
7.25.1	TURP & TUR BLADDER TUMOUR	10000
7.25.2	TURP CYSTOLITHO TRIPSY	10000
7.26	OPEN PROSTECTOMY	8600
7.27	CLOSURE OF URETHAL FISTULA	5600
7.28.1	ORCHIDOPEXY UNILATERAL	5200
7.28.2	ORCHIDOPEXY BILATERAL	6200
7.29	CYSTOLITHOTOMY SUPRAPUBIC	5100
7.30	ENDOSCOPIC REMOVAL OF STONE IN BLADDER	5100
7.31	RESECTION BLADDER NECK ENDOSCOPIC	5175
7.32	URETEROSCOPIC REMOVAL	9620
7.33	CYSTOSCOPIC BASKETING OF URETHRA	7600
7.34	URETHROPLASTY 1ST STAGE	6500
7.35	OPTICAL URETHOROTOMY	7000
7.36	EXPLORATORY SCROTOTOMY	6900
7.37	PERINEAL URETHROSTOMY	7900
7.38	DILATATION OF STRICTURE URETHRA UNDER G.A.	1680
7.39	DILITATION OF STRUCTURE URETHRA W/O ANESTH	1000
8.3	CHOLECYSTECTOMY LAPAROSCOPIC SURGERY	10800
8.4	APPENDDICECTOMY LAPAROSCOPIC SURGERY	9000
8.5	HERNIA REPAIR LAPAROSCOPIC SURGERY	9000
8.6	DIAGNOSTIC LAPROSCOPY SURGERY	3600
9.6.1	LIVER TRANSPLANTATION RECEIPIENT	
9.6.2	LIVER TRANSPLANTATION DONOR	
10.5	IOL IMPLEMENTATION	5000 PLUS COST OF LENS)
12.6.1	TOTAL HIP REPLACEMENT	35000
12.6.2	TOTAL ANKLE JOINT REPLACEMENT	120000
12.6.3	TOTAL KNEE JOINT REPLACEMENT	58000
12.6.4	TOTAL SHOULDER JOINT REPLACEMENT	100000
12.6.5.	TOTAL ELBOW JOINT REPLACEMENT	75000
12.6.6.	TOTAL WRIST JOINT REPLACEMENT	75000
13.3	CAARNIOTOMY AND EVACUATION OF HAEMATOMA	
13.3.1	SUBDURAL	12500
13.3.2	EXTRADURAL	12500
13.4	CRANIOPLASTY	15000
13.5	EVACUATION OF BRAIN ABSCESS	15000
13.6	EXCISION – LOBE	14750

	(FRONTAL, TEMP. CEREBELLUM ETC.)	
13.7	EXCISION OF BRAIN TUMUORS	
13.7.1	SUPRATENTORIAL	20650
13.7.2	SUBTENTORIAL	22600
13.8	SURGERY OF CORD TUMOURS	18250
13.8	ORCHIDOPEXY UNILATERAL	
13.9	MENINGOMYELOCELE	15000
13.10	VENTRICULOATRIAL SHUNT/VENTRICULO PERITONEAL	14000
13.11	EXCISION OF CERVICAL INTERVERTEBRAL DISCS	13500
13.12	TWIST DRILL CRANIOSTOMY	6700
13.13	SUBDURAL TAPPING	8800
13.14	VENTRICULAR TAPPING	6000
13.15	ABSCESS TAPPING	8000
13.16	PLACEMENT OF ICP MONITOR	2500
13.17	UROKINASE THERAPY FOR ICH	4750
13.18	SKULL TRACTION APPLICATION	4000
13.19	LUMBER PRESSURE MONITORING	2000
13.20	VASCULAR MLFORMATIONS	20670
13.21	PERITONREAL SHUNT	14000
13.22	ATRIAL SHUNT	14000
13.23	MENINGO ENCEPHALOCOEL	10350
13.24	MENINGOMYELOCOEL	12000
13.25	C.S.F. PHINORRHAEA	16000
13.26	CRANIOPLASTY	20000
13.27	POSTERIOR CERVICAL DISSECTOMY	18000
13.28	ANTERIOR CERVICAL DISSECTOMY	14000
13.29	BRANCHIAL PLEXUS EXPLORATION MICROSUTURING	14000
13.30	MEDIAN NERVE DECOMPRESSION	9775
13.31	PERIPHERAL NEURECTOMY (TIRGEMINAL)	9775
13.32	CRANIECTOMY	19000
13.33	TRIGEMINAL PHIOTOMT	16000
13.34	CRANIAL NERVE ANASTOMOSIS	14195
13.35	MENINGOCOELE EXCISION	11300
13.36	PERIPHERAL NERVE SURGERY-MAJOR	11000
13.36	MINOR	5000
13.37	VENTRICULO-ATRIAL SHUNT(EXCLUD.COST OF VALUE )	12000
13.38	NERVE BIOPSY OR BRAIN BIOPSY	2500/7000
13.39	AMTERIOR CERVICAL SPINE SURGERY WITH FUSION	16000
13.40	ANTERO LATERAL DECOMPRESSION	16000

13.41	BRAIN MAPPING	2000
13.42	CERVICAL OR DORSAL LAMINECTOMY	16000
13.43	COMBD TRANS-ORAL SURGERY & CV JUNCT.FUSION	30000
13.44	C.V. JUNCTION FUSION	18000
13.45	DEPRESSED FRACTURE	14000
13.46	DISSECTOMY	13350
13.47	ENDARTERECTOMY	14750
13.48	ENDOSCOPIC SURGERY	25000
13.49	R.F.LESION FOR TRIGEMINAL NEURALGIA	2000
13.50	SHUNT PROCEDURES (VA/VP/TP/SHUNT)	15800
13.51	SKULL BASE SURGERY	34250
13.52	SPASTICITY SURGERY	20000
13.53	SPINAL FUSION PROCIDURE	19000
13.54	SPINAL INTRA MEDULLARY TUMOURS	25500
13.55	SPINAL TUMOURS OTHERS	18300
13.56	SPINAL BIFIDA SURGERY MAJOR	18100
13.57	SPINA BIFIDA SURGERY MINOR	14000
13.58	STEREOTAXIC OROCEDURES	25000
13.59	TRANS SPHENOIDAL SURGERY	25000
13.60	TRANS ORAL SURGERY	25000
13.61	TRANS CRANIAL DOPPLER	2000
14.6	RADIATION SOURCE CHARGES PER FRACTION	135
14.7	CONSUL.FEE PER FRACTION PHYS.CHRG.& OTH.CHRGS.	150"

By order and in the name of the Governor of Karnataka,

### K.L. JAYARAM

Under Secretary to Government-2 Department of Personnel and Administrative Reforms (Service Rules).

<sup>26</sup> Inserted in Notification No.DPAR 1 SMR 2000 dated 22nd January 2001.

## FORM 'A' (Vide Rule 5) Certificates

Signature of the Medical Officer in charge of the case of the Hospital.

Countersigned Medical ..... Hospital

Superintendent,

## 1[FORM 'AA'

(Vide Rule 9(1))

Form of certificate to be produced by a Government servant under rule 9 (1) of the Karnataka Government Servants ' (Medical Attendance) Rules 1963.

### CERTIFICATE

This is to certify that Shri/Smt ...... who is working as a ..... in the office of ...... is a Government servant to whom the Karnataka Government Servants (Medical Attendance) Rules, 1963, apply and therefore he/she and members of his/her family are entitled to free medical attendance and treatment. His/Her total emoluments are Rs.....P.M., the details of which are as follows :

Pay	Rs. P.M
Dearness Allowances	Rs. P.M.
House Rent Allowance	Rs. P.M.
Any other allowance	Rs. P.M

Signature and Designation of the Head of Office or any other Gazetted Officer belonging to that Office.

Declaration of Government servant regarding a dependent receiving medical attendance and treatment.

I hereby declare that Shri/Smt..... is a member of my family as defined under the Karnataka Government Servants' (Medical Attendance) Rules and is **wholly Dependant** upon me. He/She is my..... (here mention the relationship).

Signed before me:

Signature and Designation of the Government servant.

Head of Office or any other Gazetted Officer belonging to the Office with designation.]<sup>1</sup>

Inserted in Notification No.GAD 3 SMR 71 dated 15th July 1971

### FORM 'B'

## [Vide Rule 15 (1)]

## **Essentiality Certificate**

Names of Medicines

Price

Signature and Designation of Authorised Medical Attendant

Signature of the Medical Officer in-charge of case at the Hospital.

Date.....

<sup>1</sup> In the case of Confinement the words 'during pregnancy' or 'child birth' may, as the case may be, substituted for the word ''disease''.

### FORM 'C'

## [Vide Rule 15(3)] Application Form for Claiming Refund of Medical Expenses

1. Name and designation of the Government servant (in block letters )..

2. Office in which employed ..

3. Salary ....

4. Place of duty ....

5. Full residential address ..

6. Name of the Patient and his/her relationship to the Government servants/ ... *Note :-* In the case of children, state age also.

7. Place at which the patient fell ill

8. Nature of illness and its duration

9. Details for the amounts/claimed

10. Total amount claimed

### 11. List of enclosures

<sup>1</sup>[12. Countersignature by the controlling officer] <sup>1</sup>

<sup>1</sup>Inserted in Notification No.DPAR 5 SMR 84 dated 11<sup>th</sup> June 1985

### Declaration to be signed by the Government Servant

1[(1) I hereby declare that the statement in this Application are true to the best of my knowledge and belief and that the person for whom medical expenses were incurred is a member of my family as detailed under the Karnataka Government Servants' (Medical Attendance) Rules, 1963 and is wholly dependent upon me] 1.

<sup>1</sup>[(2) I also declare that:

my wife/husband is not an employee of any State/Central Government or of an undertaking or body wholly or partly financed by Government.

### OR

my wife/husband is employed in ..... and this claim for reimbursement has not been and will not be preferred by my wife/ husband]<sup>1</sup>.

<sup>1</sup> Numbered in Notification No.DPAR 5 SMR 77 dated 29th July 1977.

<sup>1</sup> Inserted in Notification No.DPAR 5 SMR 77 dated 29th July 1977.

Signature of the Govt. Servant

\_\_\_\_\_

Note:- Separate form should be used for each patient.

# <sup>1</sup>[FORM 'D'

### [See rule 15(5)]

\*Here write the relationship.\*\* The name of the member of the family.

Signature of Government servant]<sup>1</sup>.

<sup>1</sup> Substituted in Notification No. GAD 2 SMR 75 dated 13th February 1976.

# FORM 'E'

## [See Rule 15(6)]

### Declaration to be signed by the Government Servant

\* Here write the relationship.

**\*\*** The name of the member of the family.

Signature of the Government Servant.

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