

## Revised Inpatient and Outpatient charges of TVHA Health facilities w.e.f. 1st October 2020

S.No	Particulars		Revised Rate
<b>A</b>	<b>Out Patients</b>		
	A.1	OPD Registration/Doctor Consultation Fee	30
	A.2	Non OPD Hours/Doctor Consultation (After OPD hours 5pm to 9 AM)	70
	A.3	Foreigner with Insur	300
	A.4	Vaccination Regis (a)	20
	A.5	Doctor Home Visit	150
	A.6	Nurse Home Visit	80
	A.7	Patient escort service per day NEW	250
	A.8	Immunization Certificate NEW	25
	A.9	Personal health record Booklet NEW	20
	A.10	Medical/ fitness/Death Certificate NEW	30
	A.11	Dead body refridgerator rental charge (per 3 days)	1000
<b>B</b>	<b>Inpatient Charges</b>		
	B.1	Bed charge for General Ward	40
	B.2	Extra Bed for caretaker	30
	B.3	Food (3 meals + 1 tea)	90
	B.4	Special/ Private Room	250
	B.5	Recovery - Special Ward/Semiprivate ward	150
	B.6	Inpatient Service Charges	50
	B.7	Doctor visit for Emergency Services - NEW	100
	B.8	Doctor IP round - NEW	30
	B.9	Defibrillator NEW	200
	B.10	CPR charge NEW	100
	B.11	Patient Monitor usage per day NEW	100
<b>C</b>	<b>Surgery Etc.</b>		
	C.1	L.P.	120
	C.2	Suturing Minor	50
	C.3	Suturing Medium	80
	C.4	Suturing Major	120
	C.5	Suturing Removal	50
	C.6	Suture correction NEW (depending on size of suture)	Rate same as suturing
	C.7	IUD Insertion	60
	C.8	IUD Removal	30
	C.9	Chest Drainage D.Tap/ Fluid Aspiration	150
	C.10	Chest Tube	MRP
	C.11	Nasogastric/Ryles Tube Insertion	100
	C.12	Haemorrhoid Injection	100
	C.13	Sigmodoscope	160
	C.14	Infra Red Light/Session	50
	C.15	Incision and drainage minor NEW	50
	C.16	Incision and drainage major NEW	100
<b>D</b>	<b>Delivery &amp; Other Service</b>		
	D.1	Normal Delivery	1500
	D.2	Complicated Delivery	2000
	D.3	Home Delivery Assist	1100
	D.4	Incubator/Baby warmer per day	50
	D.5	Endoscopy-Gastroscopy	450
	D.6	Ultrasound with film/Screening	520

	D.7	Oxygen Cylinder Large	600
	D.8	Oxygen Cylinder Small	350
	D.9	Oxygen Per Hour	50
	D.10	Pulse Oximeter	10
	D.11	Spirometry- Lung Function Test	180
	D.12	Nebulizer usage single use	30
	D.13	Doppler charge NEW	50
<b>E</b>	<b>Dressing Material/Nursing Care</b>		
	E.1	Small Dressing	30
	E.2	Medium Dressing / C& D with gauze	50
	E.3	Big Dressing/ C&D with rollar gauze	80
	E.4	Delivery Dressing/ C-section	70
	E.5	Catheterization fitting service Charge	100
	E.6	Condom catheter change NEW	30
	E.7	Catheter:Foley's/Ryles tube removable NEW	30
	E.8	Major Burn Case dressing NEW	200
	E.9	P.O.P Procedure NEW	100
	E.10	P.O.P Removal NEW	60
	E.11	O2 concentrator per hour NEW	50
	E.12	O2 concentrator per day NEW	300
	E.13	Protoscopy NEW	50
	E.14	Intra-Articular/Tricort injection charges NEW	50
	E.15	P.V charges NEW	20
	E.16	Splint support with Materials NEW	50
	E.17	Ascitic tapping NEW	100
	E.18	Suppository charge NEW	20
	E.19	Procedure for Enema NEW	20
	E.20	Corn removal NEW	50
	E.21	CYST/removal NEW	150
	E.22	Lipoma/Excision NEW	200
	E.23	Gastric lavage NEW	100
	E.24	Half nail remove NEW	30
	E.25	Nail remove NEW	50
	E.26	Perinal care NEW	50
	E.27	Spirit cautery NEW	30
	E.28	Sponge/Tipid sponge bath NEW	30
	E.29	Autoclaving Cotton ball for Outsiders NEW	150
	E.30	IV Cannulation Services	20
	E.31	IV Blood Transfusion	80
	E.32	Injection Service	10
<b>F</b>	<b>Laboratory &amp; X-Ray</b>		
	F.1	Sputum AFB Smear Ordinary	15
	F.2	Concentration	40
	F.3	Blood Grouping	40
	F.4	Abs Eos Count	30
	F.5	Clotting Time	30
	F.6	Bleeding Time	30
	F.7	Peripheral Smear	40
	F.8	Cross Matching	50
	F.9	Differential Leucocyte Count	30
	F.10	TLC- Total Leucocyte Count	60
	F.11	Packed Cell Volume, PCV; Hemocrit	60
	F.12	MCV - Mean Corpuscular Volume	60
	F.13	ESR	30

F.14	Gram Stain	30
F.15	Hamoglobin	30
F.16	Malaria Parasite Smear	40
F.17	Platelet/Peripheral Smear	30
F.18	Pregnancy Test /(blood)	100
F.19	RBC Count	30
F.20	Retic Count	30
F.21	Occult Blood(Stool)	30
F.22	Stool Examination	60
F.23	Urine Microscopy	50
F.24	Urine Sugar	30
F.25	Ketone	30
F.26	Occult Blood (Urine)	30
F.27	Specific Gravity	30
F.28	Urobilinogen	25
F.29	Protien/Bile Salt/Pigment	45
F.30	Blood Sugar Strip test (Glucometer)	50
F.31	Blood Sugar Fasting	60
F.32	Blood Sugar Post Prandial	60
F.33	B.S.Random	60
F.34	Blood Urea	60
F.35	Blood Creatinine	60
F.36	Ser. Potasium/Sodium	120
F.37	S.Bilirubin-Total/Direct	60
F.38	S.Protien/Albumin	60
F.39	CGTP/SGPT/SGOT	160
F.40	Serum Alkaline Phosphatase ALP	50
F.41	HBA 1C	300
F.42	Hep-C	220
F.43	Hep-B (Australian Antigen)	100
F.44	VDRL (Venereal disease research laboratory), Serum	60
F.45	RA FACTOR Test	150
F.46	Widal/Salmonella Typhoid test	75
F.47	HIV testing	150
F.48	CBC (Complete Blood Count)	200
F.49	Liver Function Test (LFT) NEW	250
F.50	T3 NEW	160
F.51	T4 NEW	160
F.52	TSH NEW	160
F.53	Electrolytes NEW	150
F.54	Troponin test - NEW	<b>Kit MRP + Rs. 20 service charge</b>
F.55	H. Pylori Antigen (Stool) - NEW	<b>Kit MRP + Rs. 20 service charge</b>
F.56	Serum Amylase- NEW	200
F.57	Prostate specific Antigen - NEW	250
F.58	Kidney Function Test (KFT) - New	150
F.59	Serum LDH(New)	80
F.60	Glucose tolerance test- GTT(New)	150
F.61	Lipid profile (New)	270
F.62	Dengue test(New)	300
F.63	FOBT (Fecal Occult Blood) Card Rapid Test (New)	<b>Kit MRP + Rs. 20 service charge</b>
F.64	Hep A NEW	350

G	F.65	Gene-Xpert NEW	1200	
	F.66	Uric Acid NEW	60	
	F.67	Chikungunya NEW	250	
	F.68	Bone Mineral Density (BMD) NEW	300	
		<b>X-Ray &amp; ECG</b>		
	G.1	ECG	120	
	G.2	X-Ray Chest/Skull	150	
	G.3	Abdomen	150	
	G.4	BA Swallow (Per Film)	150	
H	G.5	Dental X-Ray	100	
	G.6	X-Ray without Film NEW	100	
	G.7	X-ray APL/lateral (New)	150	
	G.8	X-ray lumbar spin AP/lateral X-ray (New)	150	
		<b>Dental &amp; Denture</b>		
	H.1	1 Tooth	150	
	H.2	Every Additional Teeth	150	
	H.3	Upper & Lower	15000	
	H.4	Relining Denture	300	
	H.5	Dycal calcium hydroxide liner NEW	70	
	H.6	Pivot Splint/Splinting for trauma	250	
	H.7	Tooth Extraction	100	
	H.8	Tooth Extraction firm/grossly decayed	300	
	H.9	Temporary Filling	150	
	H.10	Permanent Filling	300	
	H.11	Silver R-GIC-Small	180	
H.12	Silver R-GIC-Medium	220		
H.13	Silver R-GIC-Big	300		
H.14	Silver Amalgam Small	180		
H.15	Silver Amalgam Medium	220		
H.16	Silver Amalgam Big	300		
H.17	Composit Small	250		
H.18	Composit Medium	350		
H.19	Composit Big	550		
H.20	Artificial Crown Capping (AAC)	As per ceramic Lab Charges + 500 (includes impression casting, upper and lower impression,		
H.21	Artificial Crown Capping (ACC)			
H.22	Artificial Crown Capping( PMC)			
H.23	Artificial Crown Capping( PCC)			
H.24	Extraction Surgical/ Impaction	1000		
H.25	Filling (GIC Small)	200		
H.26	Filling (GIC Big)	400		
H.27	RCT-Anterior Incisors/ Canine (Front)P-Teeth (3 visits)	900		
H.28	RCT-Posterior (Back) Primolar -Teeth (4 visits)	1200		
H.29	RCT-Posterior (Back) Molar (5 visits)	1400		
H.30	Post & Lore Build Up (A Team)	450		
H.31	Crown Removal	120		
H.32	Scalling & Polishing (Grade-1& 2)- Minor	300		
H.33	Scalling & Polishing (Grade-3)	450		
H.34	Scalling & Polishing (Grade -4& 5)- Major	600		
H.35	Suturing	150		
H.36	Operculectomy	250		
H.37	Dental Consultation	30		
H.38	Suture Removal NEW	50		
H.39	Indirect Pulp Caping NEW	100		
H.40	Local Anesthesia NEW	25		

H.41	Dental Abcess Drainage NEW	50
H.42	Night guard Single (New)	700
H.43	Night guard Double (New)	1200
H.44	Temporary Crown (Cold cure) NEW	300
H.45	Temporary Crown (Heat cure) NEW	500
H.46	Fluoride full mouth	350
H.47	Fluoride quadrant	150
H.48	Pit and fissure sealant	250
H.49	Bleech for non-vital teeth	500
H.50	Dental Miscellaneous service	50
<b>I</b>	<b>Eye Section</b>	
I.1	Consultation	30
I.2	Refraction	50
I.3	IOL EC Surgery & Care	1000
I.4	Service Charges and glasses	150
I.5	IOP (Inter Ocular Pressure)/ Schiottz tonometry new	10
I.6	Eye irrigation/Foreign body removal new	20
I.7	Auto Refractometer new	30
I.8	Slit lamp examination charge NEW	10
I.9	Lacrmal syringing NEW	20
I.10	Indirect ophthalmoscope NEW	30
<b>J.</b>	<b>Physiotherapy</b>	
J.1	Physio Consultation/ Physical assessment	30
J.2	Traction (Cervical and Lumbar) per session	60
J.3	Moist heat/ Cryotherapy	30
J.4	Manual therapy per session	100
J.5	Electrotherapy per session	60
J.6	Laser Therapy	100
J.7	Exercise Therapy	50
J.8	Massage Therapy	60
J.9	Neurological rehabilitation (30- 60 minutes including consultation)	150
J.10	Post Surgery Rehabilitation (30- 60 minutes including consultation)	150
J.11	Kinesiotaping - Small	70
J.12	Kinesiotaping - Large	200
J.13	Body Composition measurement	100
J.14	Postural Drainage / Chest Physio	70
J.15	Home visit physiotherapy (without equipment)	250
J.16	Home visit with equipment	300